








Health Insurance Quotation

Insurance For Family	Persons 2 Persons	My Name	My Age 23
My Spouse Age 25	No of child(s) 0	Ages Husband:23year, Wife:25year,	

Insurer	Coverage	Room Limit	Plane Name	Premium
	Rs 500,000 per person	Rs 20,000	TPL Takaful Insurance - Gold	Rs. 21,706 Premium/year
	Rs 500,000 per person	Private	Aaram	Rs. 28,140 Premium/year
	Rs 750,000 per person	Rs 25,000	TPL Takaful Insurance - Platinum	Rs. 33,592 Premium/year
	Rs 1,000,000 per person	Rs 25,000	TPL Takaful Insurance - Platinum Plus	Rs. 41,990 Premium/year
	Rs. 500,000 per person	Rs. 17,000	Family Sehat - Gold	Rs. 55,250 Premium/year
	Rs. 1,000,000 per person	Rs. 35,000	Family Sehat - Platinum	Rs. 87,635 Premium/year
	Rs. 1,200,000 per person	Rs. 55,000	Family Sehat - Platinum Plus	Rs. 122,740 Premium/year

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Claim Payout Ratio

Medical Benefits

ICU / CCU
Covered

OPD
Not Covered

Daily Room & Board Limit
Rs 20,000

Ambulance Services Coverage:
Covered

Pre & Post hospitalization Expense Benefit
Covered

Additional Limits for Accidental Emergencies
Covered

[Policy Documents](#)
[Claim Process](#)

Medical Benefits

ICU / CCU
Covered (At actual)

Maternity
Pay additional Rs 30,300 and get covered for up to Rs 75,000

Daily Room & Board Limit
Private

Ambulance Services Coverage:
On Actuals

Additional Limits for Accidental Emergencies
Rs 50,000

Coverage of Specialized Investigations
Covered (Sub limit - Rs. 50,000)

Emergency Evacuation Sub Limit
Rs 50,000

[Policy Documents](#)
[Claim Process](#)

Claim Payout Ratio

Medical Benefits

ICU / CCU
Covered

OPD
Not Covered

Daily Room & Board Limit
Rs 25,000

Ambulance Services
Coverage:
Covered

Pre & Post hospitalization
Expense Benefit
Covered

Additional Limits for
Accidental Emergencies
Covered

Policy Documents

Claim Process

Medical Benefits

ICU / CCU
Covered

OPD
Not Covered

Daily Room & Board Limit
Rs 25,000

Ambulance Services
Coverage:
Covered

Pre & Post hospitalization
Expense Benefit
Covered

Additional Limits for
Accidental Emergencies
Covered

Policy Documents

Claim Process



Family Sehat - Gold

Rs. 55,250
Premium/year

Claim Payout Ratio

Medical Benefits

ICU / CCU
Included

Daily Room & Board Limit
Rs. 17,000

Maternity
Not Included

Additional Limits for Accidental Emergencies
Included

Policy Documents

Maternity
Not Included
Claim Process



Family Sehat - Platinum

Rs. 87,635
Premium/year

Medical Benefits

ICU / CCU
Included

Daily Room & Board Limit
Rs. 35,000

Maternity
Not Included

Additional Limits for Accidental Emergencies
Included

Policy Documents

Claim Process

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Family Sehat - Platinum Plus

Rs. 122,740
Premium/year

Claim Payout Ratio

Medical Benefits

ICU / CCU
Included

Daily Room & Board Limit
Rs. 55,000

Maternity
Not Included

Additional Limits for Accidental Emergencies
Included

Policy Documents

Maternity
Not Included
Claim Process

How to buy Policy



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Frequently Asked Questions

What is Pre Hospitalization Coverage?

Defination

Any expenses incurred by the policyholder within 30 days before the hospitalization. This is covered under retail health insurance plan.

Example

You had a liver surgery post-surgery you are required to have follow-up check-ups or lab test in that case this would be covered in your post hospitalization period and will be paid by the insurer.

What is Pre Existing Condition?

Defination

Any follow-up medical expenses sustained by the policyholder within the period of 30 Days after the hospitalization.

Example

If you have heart disease prior to your health coverage, which leads to related medical emergency, then that condition would not be covered by your retail insurance plan.

What is Cashless Hospitalization?

Defination

When you can utilize health insurance coverage at the hospital without paying cash at the time of admission and discharge

Example

You get admitted into the hospital and bill is 50,000 you can avail cashless treatment without paying a penny at the time free by showing your health card provided by the insurer

What is Waiting Period?

Defination

The period of time beginning with a policy's effective date during which a health plan may not pay benefits for certain conditions, and only cover accidental coverage.