

For details



1-800-11-9966

Tata AIG Life Insurance Company Ltd. (Regn. No. 110)

Registered & Corporate office: Peninsula Towers, 6th Floor, Peninsula Corporate Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai 400 013.

Visit us at: www.tata-aig-life.com

For more information, call the dedicated Tata AIG Life toll-free 24 hour helpline at 1-800-11-9966

Tata AIG
HealthFirst

Complete Cover. Complete recovery.

Get complete premium amount, irrespective of actual spend
India's First Comprehensive Daily Hospitalisation Benefit Policy



PAYS IN ADDITION TO OTHER POLICIES

Unique Reference No.: L&C/Advt/2009/Feb/114 PRBR00372

TATA
AIG
LIFE

A new look at life



HealthFirst is a comprehensive Health policy that gives you total coverage to help you recover worry-free when you are seriously ill. What's more, Tata AIG Health First pays you the entire amount that you are entitled to under this policy, irrespective of your actual bill and in addition to any claim that you may make under other medical policies.

* Health First is the improved version of Health First, India's first comprehensive daily hospitalization benefit policy.

1. Daily Hospital benefit

Health First gives you a daily hospitalization benefit of Rs. 1,000 per day (for 4 units), for up to 90 days if you are hospitalized. This benefit is available from first day of hospitalization (applicable on overnight stay)

So, if you are hospitalized for 90 days and you have taken a cover of 4 units, you will receive Rs. 90,000. (Maximum 90 days/per confinement/ per policy year)

This per-day benefit is paid irrespective of your actual bill and can be used for other requirements such as a nurse, transportation, special care and can also act as a substitute income for the family.

2. Critical Illness benefit

Health First gives you a lumpsum payment of Rs. 500,000 (for 4 units). In case you are diagnosed with a critical illness, or need surgery, this benefit provides you with a lumpsum amount post a survival period of at least 30 days following the first diagnosis of the Critical Illness. This makes sure that you not only have access to the most technologically advanced treatment, but can also pay for related medicine cost and other recuperation costs. You are covered for 12 Critical Illnesses - Cancer, Stroke, Heart Attack, Coronary Bypass Surgery, Chronic Renal Failure, Recipient of Major Organ Transplant of Heart, Lung, Liver, Kidney, Pancreas or Bone Marrow, Aorta Surgery, Benign Brain Tumor, Heart Valve Surgery, Paralysis, Parkinson's Disease and Total Blindness. For this benefit to be payable, the Insured needs to survive for a period of at least 30 days post operation/critical illness. There is a waiting period of 180 days following the Issue Date or Commencement Date or Reinstatement Date (as the case may be) of the policy, and claims can be paid only once for the same Critical Illness.

3. Surgical benefit

Health First gives you a lumpsum payment of Rs. 50,000 (for 4 units) in case you undergo a surgery covered under this

plan. The complete amount is paid even if your operation cost is lower and is paid in addition to your daily hospitalisation benefit.

4. Post-Hospitalisation benefit

After hospitalisation, a follow up treatment of Rs. 500 per day (for 4 units) for up to three days is also provided. This amount helps you pay for expenses on nursing help and for recuperation in a manner you deem fit. This benefit is payable only if the daily hospitalisation benefit is payable.

5. Death benefit

Health First also covers you for life for an amount of Rs. 4,000 (for 4 units*). This benefit is payable, if none of the above mentioned benefits have been claimed.

*Health First is available to you in the form of units.

6. Avail Tax Benefits**

Premiums paid under this policy are eligible for tax deductions u/s 80D for Health Insurance Benefits and u/s 80C for Life Insurance Benefits under Income Tax Act, 1961.

** Tax benefits are as per the Income Tax Act, 1961, and are subject to modifications made thereto from time to time.

7. Lifetime limit

You can make multiple claims up to a maximum of Rs. 10 lakhs (for 4 units) during the term of this policy. For example, if you claim for two Critical Illnesses of Rs. 5 lakhs each, your lifetime cover will be exhausted and your policy will terminate.

Now that you have read the fantastic benefits that Health First offers, take a look at the table below to see the amounts that you will get for each of the benefits, depending on the units purchased.

Benefit Table

Benefits/Cover	2units	3 units	4 units
Daily Hospital Benefit	Rs. 500 per day	Rs. 750 per day	Rs. 1,000 per day
Surgical Benefit	Rs. 25,000	Rs. 37,500	Rs. 50,000
Critical Illness Cover	Rs. 250,000	Rs. 375,000	Rs. 500,000
Post Hospitalisation Benefit	Rs. 250 per day	Rs. 375 per day	Rs. 500 per day
Death Benefit	Rs. 2,000	Rs. 3,000	Rs. 4,000
Lifetime Limit	Rs. 500,000	Rs. 750,000	Rs. 1,000,000

15-DAY MONEY BACK GUARANTEE (FREE LOOK PERIOD)

This plan is supported by a money back guarantee. In case you change your mind, simply return the policy document

within 15 days of receipt and your premium will be refunded subject to deduction of proportionate risk premium, medical examination and stamp duty charges.

REINSTATEMENT

In case your policy has lapsed, you may reinstate the same at the absolute discretion of Tata AIG Life within five years after the due date of the first unpaid premium. However the Company would require:

- A written application from you for reinstatement
- Current health certificate and other evidence of insurability
- Payment of all overdue premiums with interest
- Repayment or reinstatement of any indebtedness outstanding at the due date of the unpaid premium plus interest.

Annual Premium ^ Table*

Here is an example of how little Health First costs you:

Age	Premium ^ applicable for Males (Rs.)						Premium ^ applicable for Females (Rs.)					
	2 units		3 units		4 units		2 units		3 units		4 units	
	Life Insurance Benefit Premium	Health Insurance Benefit Premium	Life Insurance Benefit Premium	Health Insurance Benefit Premium	Life Insurance Benefit Premium	Health Insurance Benefit Premium	Life Insurance Benefit Premium	Health Insurance Benefit Premium	Life Insurance Benefit Premium	Health Insurance Benefit Premium	Life Insurance Benefit Premium	Health Insurance Benefit Premium
18	5	1,566	7	2,349	10	3,132	5	1,524	7	2,286	10	3,048
25	5	2,038	8	3,056	11	4,074	5	2,082	8	3,123	11	4,163
35	7	3,680	10	5,521	13	7,362	7	3,755	10	5,633	13	7,511
45	13	8,775	19	13,163	25	17,552	13	7,981	19	11,971	25	15,962

*For a healthy person. In case your age is not illustrated in this example, please contact our Advisor. The total premium payable for the Health First policy is the sum of premiums of the Health Insurance Benefits and the Term Insurance Benefit for the corresponding number of units. The premiums mentioned above are exclusive of service tax. ^ Service Tax is payable on life insurance premiums as per Section 65 (105) (zx) of Finance Act, 1994 as amended by Finance Act (No.2), 2004 at the applicable rates as per circular No. F. No. B2/8/2004 – TRU (Tax Research Unit) dated September 17, 2004 issued by Government of India, Ministry of Finance and subsequent directions issued by authorities from time to time. The service tax component payable by the policyholder at applicable rates will be stated in the premium notice and the premium receipt for the information of the policyholder. The company reserves the right to recover from the Policyholder any related insurance levies and duties as imposed by the government, by premium adjustment or other forms, as we deem appropriate. We have incorporated this clause in our brochure and application form.

GRACE PERIOD

Tata AIG Life allows a Grace Period of 31 days for all modes of payment from the due date for you to make the premium payment. The policy will remain in force during the period. The policy shall lapse and have no further value if premium is not paid within the Grace Period.

DEFINITIONS & EXCLUSIONS

"Critical Illnesses" mean illnesses the signs or symptoms of which first commence more than one hundred and eighty (180) days following the Issue Date or the Commencement Date or the Date of any Reinstatement



of this Policy, whichever is the latest, and shall include either the first diagnosis of any of the following illnesses or first performance of any of the covered surgeries stated below:

1. Cancer

The first occurrence of a histologically confirmed invasive malignant tumor exhibiting invasion of adjacent tissues.

The following are excluded:

- Tumors treated by endoscopic procedures alone;
- Chronic lymphocytic leukaemia of less than RAI stage 3;
- Tumors classified as carcinoma in situ, prostate tumors classified as T1 (TNM classification system);
- T1N0M0 (TNM Classification System) papillary carcinoma of the thyroid less than 1 cm in diameter;
- Malignant melanomas other than those greater than 1.5 mm in depth;
- Other skin cancers;
- Tumors that are a recurrence or metastasis of a tumour

that first occurred prior to one hundred and eighty (180) days following the later of the Issue Date, the Commencement Date or last Reinstatement date;

- Kaposi's Sarcoma, other tumors associated with HIV infection; and
- Tumors that pose no threat to life and for which no treatment is required.

2. Stroke

The first occurrence of an acute neurological event caused by a cerebral or intracranial haemorrhage, cerebral embolism or cerebral thrombosis where the following conditions are met:

- (i) There is an acute onset of objective and ongoing neurological signs that results in the permanent inability to perform independently at least two of the "Activities of Daily Living"; and
- (ii) Findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques, demonstrate a lesion consistent with the acute haemorrhage, embolism or thrombosis.

Brain damage due to an accident, infection, vasculitis or an inflammatory disease are excluded.

3. Heart Attack

The first occurrence of an acute myocardial infarction where the following conditions are met:

- (i) A history of typical chest pain;
- (ii) The occurrence of typical new acute infarction changes on the electrocardiograph progressing to the development of new pathological Q waves; and
- (iii) Elevation of Cardiac Troponin (T or I) to at least three times the upper limit of the normal reference range or an elevation in CK MB to at least 200% of the upper limit of the normal reference range.

4. Coronary Bypass Surgery

The actual undergoing for the first time of open chest coronary artery bypass grafting surgery to one or more coronary arteries due to disease of those arteries. Angioplasty, stent insertion, laser or other intra-arterial procedures are excluded.

5. Chronic Renal Failure

Chronic irreversible failure of both kidneys requiring either permanent renal dialysis or kidney transplantation.

6. Major Organ Transplant

The receipt, of a transplant of:

- (i) Human bone marrow using haematopoietic stem cells preceded by total bone marrow ablation; or
- (ii) One of the following whole human organs: heart, lung, liver, kidney or pancreas, as a result of irreversible end stage failure of the relevant organ.

Other stem cell transplants and transplants of part of an organ are excluded.

7. Aorta Surgery

The actual undergoing of Medically Necessary surgery for a disease of the aorta needing excision and surgical

replacement of the diseased aorta with a graft. For the purpose of this definition aorta shall mean the thoracic and abdominal aorta but not its branches.

8. Benign Brain Tumor

A benign intracranial tumour where the following conditions are met:

- (i) The tumour is life threatening;
- (ii) It has caused damage to the brain; and
- (iii) It has undergone surgical removal or, if inoperable, has caused a permanent neurological deficit.

The following are excluded: Cysts, Granulomas, Vascular Malformations, Haematomas, Tumors of the pituitary gland or spine, Tumors of the acoustic nerve.

9. Heart Valve Surgery

The undergoing of Medically Necessary open-heart surgery to replace or repair a heart valve as a consequence of a heart valve defect. Balloon or catheter techniques are excluded.



10. Paralysis

The total and permanent loss of the use of both arms, or both legs, or one arm and one leg, due to spinal cord injury or disease, except where such injury is self-inflicted.

11. Parkinson's Disease

The occurrence of Parkinson's Disease where there is an associated neurological deficit that results in the permanent inability to perform independently at least two of the "Activities of Daily Living".

12. Total Blindness

The total and permanent loss of sight in both eyes. Blindness that can be corrected by medical or surgical procedure is excluded.

Over time advances in medical science change the manner in which diseases are diagnosed and in some cases the seriousness of some diseases. The Company therefore reserves the right to change the definitions of Critical Illnesses and to add or delete illnesses in order to maintain their relevance and importance.

If the Insured, whether sane or insane, commits suicide within one year from the Issue Date, Commencement Date or Reinstatement Date, whichever is later, our liability shall be limited to the refund of premiums paid less any Indebtedness without interest. In the case of reinstatement, such refund of premium shall be calculated from the Commencement Date.

1. Except for the Death Benefit under item (5)# above, no benefit shall be payable under this Policy for any event caused directly or indirectly, wholly or partly, by any one of the following:

(a) where in our opinion the Insured was diagnosed of Acquired Immuno Deficiency Syndrome (AIDS) or infection by any Human Immunodeficiency Virus (HIV).

For the purpose of this Policy:

(i) The definition of AIDS shall be that used by the World Health Organization in 1987, or any subsequent revision by the World Health Organization of that definition.

(ii) Infection shall be deemed to have occurred where blood or other relevant test(s) indicate in the opinion of the Company either the presence of any Human Immunodeficiency Virus

or anti bodies to such a Virus.

(b) assault or murder; (c) riot and civil commotion, industrial action or terrorist activity; (d) war, declared or undeclared, or revolution; (e) service in the armed forces in time of declared or undeclared war or while under orders for warlike operations or restoration of public order; (f) self-destruction or any attempted self-destruction or self-inflicted injury while sane or insane; (g) participation in any fight or affray; (h) racing of any kind other than on foot; (i) participation in scuba diving; (j) accident occurring while or because the Insured is under the influence of alcohol or any non-prescribed drug; (k) food poisoning or bacterial infection (except pyogenic infection which shall occur with and through an accidental cut or wound); (l) entering, exiting, operating, servicing, or being transported by any aerial device or conveyance except when the Insured is on a commercial passenger airline on a regular scheduled

passenger trip over its established passenger route; (m) physical defects or abnormalities or mental infirmity existing at the time of insurance application or reinstatement of this Policy; (n) parachuting, hang-gliding, hunting, bungee jumping, rock or mountaineering or climbing requiring the use of ropes or guides; (o) ionising radiation or contamination by radioactivity from any nuclear fuel or nuclear waste; (p) radioactive, toxic, explosive or other dangerous properties of any nuclear equipment or any part of the equipment; (q) any underwater or subterranean operation or activity; (r) deliberate act(s) of the Policyholder, Nominee or Insured; (s) violation or attempted violation of the law or resistance to arrest; and (t) injury sustained as a result of a criminal act of the Insured.

2. IN ADDITION, this Policy shall not cover any hospitalisation, treatment, surgery, services or charges or follow-up treatment resulting from or related to, directly or indirectly, wholly or partly, by any one of the following:

(a) Any Covered Illness the signs or symptoms of which first occurred prior to or within ninety (90) days following the Issue Date or Commencement Date or last Reinstatement of this Policy, whichever is later; (b) Any injury or illness caused by self-destruction or any attempted self-destruction or self-inflicted injuries while sane or insane; (c) (i) Pregnancy, miscarriage or child birth including caesarean section, abortion, voluntary termination of pregnancy; (ii) psychosis, mental/nervous disorders, or investigation and treatment of psychological, emotional, mental or behavioural conditions, or sleep disturbance disorders, treatment of alcoholism, or drug abuse or any other complications arising therefrom or any drug accident; (iii) cosmetic or plastic surgery or any elective surgery or cosmetic procedure that improves physical appearance, surgical and non-surgical treatment of obesity (including morbid obesity) and weight control programs, or treatment of an optional nature; (iv) any form of dental care or surgery unless necessitated by Covered Injury (excluding denture and related expenses); (v) special nursing care, routine health checks or convalescence, Custodial Care, general debility, lethargy, rest cure; (vi) any investigation(s) or treatments not directly related to a Covered Illness or Covered Injury or the conditions or diagnosis necessitating hospital admission; (vii) any treatment or surgical procedures/surgery which is not Medically Necessary, or that is experimental, investigational or unproven or not yet accepted in accordance with standards of good medical practice, or which is not performed by a Registered Medical Practitioner

as defined; (viii) any congenital defect or abnormalities which has manifested or was diagnosed before the Insured attains 17 years of age; or (ix) corrective aids, contact lenses, hearing aids and treatment of refractive errors unless necessitated by Covered Injury; (x) sterilisation, artificial insemination, birth control measures, investigation/diagnosis and treatment of infertility, genetic testing or counselling, or venereal diseases; (d) Treatment or surgery for tonsils, adenoids, hernia or a disease of the female generative organs unless the Insured has been continuously covered under this Policy from the Issue Date or Commencement Date or last Reinstatement Date, whichever is later, for a period of 120 days immediately preceding hospitalisation for such treatment or surgery; (e) Treatment or surgery for cataract, benign prostatic hypertrophy, hysterectomy for menorrhagia or fibromyoma, hydrocele, fistula in anus, haemorrhoids (piles), sinusitis and related disorders or circumcision unless the Insured has been continuously covered under this Policy from the Issue Date or Commencement Date or last Reinstatement Date, whichever is later, for a period of 12 months immediately preceding hospitalisation for such treatment or surgery; (f) Immunisation, vaccination, inoculation or treatments related to communicable diseases requiring isolation or quarantine under the law; (g) Speech therapy, diabetic class, nutritional counseling, or group support treatment; treatments and supplies for smoking cessation programs and the treatment of nicotine addiction; (h) Ayurvedic, homeopathy, unani, naturopathy, reflexology, acupuncture, acupressure, bonesetting, herbalist treatment, hypnotism, rolfing, massage therapy, aroma therapy or any treatments other than allopathy/western medicines.

3. IN ADDITION, this Policy shall not cover any Critical Illness or covered surgery related to or caused directly or indirectly, wholly or partly, by any of the following occurrences:

(a) Any illness other than the occurrence of Critical Illness as defined herein; (b) Any Critical Illness the signs or symptoms of which first occurred prior to one hundred and eighty (180) days following the later of the Issue Date or Commencement Date or last Reinstatement of this Policy; (c) Any congenital defect or abnormalities that has manifested or was diagnosed before the Insured attains 17 years of age; (d) Self destruction or attempted self-destruction or self-inflicted injuries while sane or insane; and (e) Performance of any covered procedure or surgery which is not Medically Necessary, or which is not performed by a Registered Medical Practitioner.

WAYS IN WHICH HEALTH FIRST IS BETTER THAN OTHER POLICIES

1. Daily Hospital Benefit - Hospitalization Coverage starts from day one, as against a deductible of 2/3 days (provided there is an overnight stay in the hospital).

2. Comprehensive cover - Health First is the only policy that covers you for Hospitalization, Critical Illness, Surgery, Post-hospitalization and Death.

3. Pays you in addition to other covers - Health First is the only policy that pays the full amount of your entitled benefits in addition to any other medical policy or employee benefits that you may claim.

4. Allows you multiple claims.

5. Automatically covers you till age 65 - Health First is the only policy that is automatically renewable till age 65, provided your lifetime maximum cover is not exhausted.

6. Premiums are constant for next 5 years - Health First is the only policy where premium does not increase every year. Premiums increase only every five years on renewal.

6. Backed by world-class service from Tata AIG Life - Claims will be processed within 15 days of receipt of all necessary documents.

Convenient Payment Options

You have various convenient payment options to choose from: Cheque, Demand Draft, Credit Card and Electronic Clearing Service (ECS) for all payment modes.

Tata AIG Life - A new look at life

Tata AIG Life Insurance Company Limited (Tata AIG Life) is a joint venture company, formed by the Tata Group and American International Group, Inc. (AIG). Tata AIG Life combines the Tata Group's pre-eminent leadership position in India and AIG's global presence as the world's leading international insurance and financial services organization. The Tata Group holds 74 per cent stake in the insurance venture with AIG holding the balance 26 per cent. Tata AIG Life provides insurance solutions to individuals and corporates. Tata AIG Life Insurance Company was licensed to operate in India on February 12, 2001 and started operations on April 1, 2001.

This product is underwritten by Tata AIG Life Insurance Company Limited.

Please contact us or your Tata AIG Life Insurance Advisor for full details of the benefits provided under this product.

This brochure should be read along with the sales benefit illustration, which mentions about the exclusions on this policy.

Insurance is the subject matter of the solicitation.