



# Star Health Assure Insurance Policy

UIN: SHAHLIP23131V022223

Wider Protection  
to You And Your Family





# BENEFITS



Hospitalization



Domiciliary Hospitalization



Assisted Reproduction Treatment



Pre & Post-hospitalization



Organ Donor Expenses



Hospitalization expenses for treatment of New Born Baby



Daycare treatments



Health Checkup Assure



Treatment for Chronic Severe Refractory Asthma



Coverage for Non-medical Items



Home Care treatment



Compassionate Travel



Emergency Road Ambulance



Delivery Expenses



Repatriation of Mortal Remains



Air Ambulance



In Utero Fetal Surgery/ Intervention



Treatment in Valuable Service Providers network



# BENEFITS



Shared accommodation



AYUSH Treatment



Second Medical Opinion

Coverage for Modern Treatment



Cumulative Bonus



Automatic Restoration of Sum Insured



Rehabilitation and Pain Management



Star Wellness Program



Optional cover to choose deductible



Long Term Discount



Floater Discount

# COVERAGE



Individual	Floater
Minimum 91 days Maximum 75 years	<b>Adult</b> Minimum - 18 years Maximum - Up to 75 years
	<b>Dependent Children</b> Minimum - 16 days Maximum - Upto 17 years

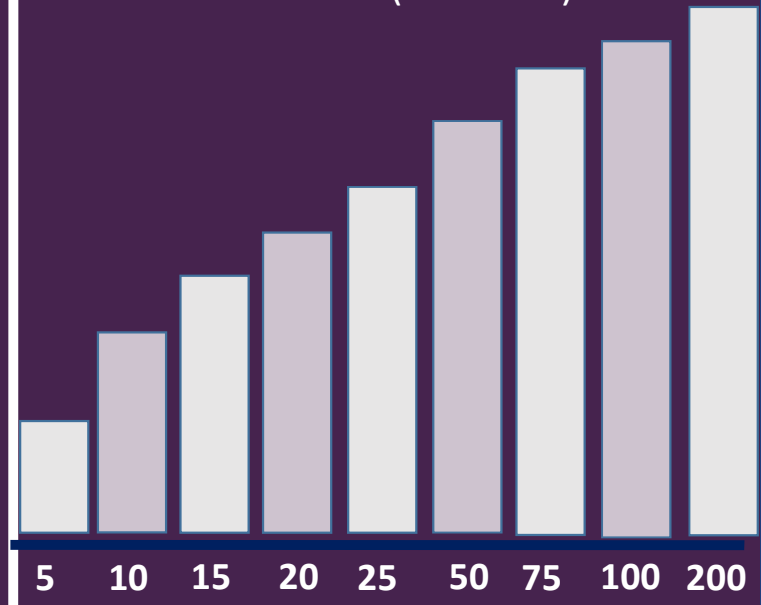
## Family size in Floater:

- Maximum family size is 2A+3C+4P
- Self, Spouse, Dependent children, Parents and Parents in law.  
or
- 6 Adults + 3 Children (6 Adults = Self + Spouse + Parents + Parents-in-law)
- If Dependent parents and parents in-laws alone wants to cover under this policy separately, the same is possible under 2A family scheme. However, combination of parent and parent in law is not permissible

# ABOUT THE POLICY

- Policy Term**  
1 year/2 years/3 years
- Continuity**  
Lifetime renewal
- Pre Medical Screening**  
For those who declare adverse medical history, company may subject them to undergo pre-policy medical check-up. 100% cost of such medical examination is borne by the company
- Instalment Facility**  
Half-yearly  
Installment facility is not available for long term (2 year and 3 year) policies.
- Note: In case of dependent children, at the time of renewal when they complete 18 years of age, such children will be considered as Adult and he/she can continue under floater sum insured till he/she gets married
- For children whose age is less than 12 years, Paediatrician letter, Vaccination report or Health Report should be submitted and the proposal will be routed to our CMU Team for medical opinion.

# SUM INURED OPTIONS (in LAKHS)



- Note: Rs 75 Lakhs, Rs 1 Cr and Rs 2 Cr Sum Insured will be available for persons aged up to 65 years only
- This is applicable only at the time of inception of this policy
- Enhancement of sum insured to Rs.75 Lakhs, Rs.1 Cr and Rs.2 Cr is also not permissible during renewal for such policies



## ZONE BASED PRICING

### Zone A

Delhi including Faridabad, Gurgaon, Ghaziabad and Noida, Mumbai including Thane, Ahmedabad, Surat and Vadodara

### Zone B

Pune including Nashik, Trivandrum, Ernakulam, Chennai, Bengaluru, Hyderabad, Secunderabad and Rest of Gujarat

### Zone C

Rest of India

## MID TERM INCLUSION

- Available on payment of proportionate premium for Newly Wedded spouse, New born baby and Legally adopted child
- Intimation should be given within 45 days from the date of marriage or date of birth

### Special Conditions:

- Waiting periods as stated in the policy will be applicable from the date of inclusion of such newly wedded spouse, new born baby, legally adopted child
- Subject to underwriter's approval



# HOSPITALIZATION

EXPENSES ON HOSPITALIZATION FOR A MINIMUM PERIOD OF 24 HOURS COVERED

**1**

**Cashless**

**Network Hospitals**

**2**

**Reimbursement**

**Non-Network Hospitals**



# HOSPITALIZATION

## CONNECTED TREATMENT EXPENSES



### Professional Fee

- Surgeon
- Consultants
- Anesthetist
- Specialist



### Medical Services

- Anesthesia
- Blood
- Oxygen
- OT charges
- ICU charges



### Medicines

- Drugs
- Medicines
- Implants and such other similar items

**Note:** Associated Medical expenses which vary based on the room occupied by the insured person will be considered in proportion to the room rent stated in the policy schedule or actuals whichever is less



## ROOM INCLUDING BOARDING AND NURSING EXPENSES

Sum Insured (Lakhs)	Per Day (Rs)
5	Upto 1% of Sum Insured
10/15/20/25	Any Room (Except suite or above category)
50 and above	Any Room

**Note:** Associated Medical expenses which vary based on the room occupied by the insured person will be considered in proportion to the room rent stated in the policy schedule or actuals whichever is less

## PRE & POST HOSPITALIZATION







## DAYCARE

All daycare treatments are covered



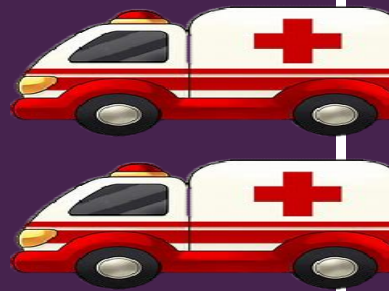
## COVERAGE FOR NON MEDICAL ITEMS (CONSUMABLES)

If there is an admissible claim under inpatient / day care the policy, then Items as per List I will become payable

## EMERGENCY ROAD AMBULANCE



- Subject to an admissible hospitalization claim
- For transportation of the insured person by private ambulance service to go to hospital when this is needed for medical reasons
  - or
- For transportation of the insured person by private ambulance service from one hospital to another hospital for better medical treatment
  - or
- For transportation of the insured person from the hospital where treatment is taken to their place of residence (if it is in same city) provided the requirement of an ambulance to the residence is certified by the medical practitioner.





## AIR AMBULANCE

- Insured Person(s) is/are eligible for reimbursement of expenses incurred towards the cost of air ambulance
- Covered up to 10% of sum insured per policy year
- It is for emergency care of the insured person which requires immediate and rapid ambulance transportation to the hospital / medical centre that ground transportation cannot be provided
- Necessary medical treatment not being available at the location where the Insured Person is situated at the time of Emergency
- It is prescribed by a Medical Practitioner and is Medically Necessary
- The insured person is in India and the treatment is in India only

## DOMICILIARY HOSPITALIZATION

- Coverage for medical treatment (Including AYUSH) for a period exceeding three days, for an illness/disease/injury, which in the normal course, would require care and treatment at a Hospital but, on the advice of the attending Medical Practitioner, is taken whilst confined at home under any of the following circumstances
- The condition of the patient is such that he/she is not in a condition to be removed to a Hospital,  
or
- The patient takes treatment at home on account of non-availability of room in a hospital



## ORGAN DONOR

- In patient hospitalization expenses incurred for organ transplantation from the Donor to the Recipient Insured Person are payable provided the claim for transplantation is payable.
- In addition, the expenses incurred by the Donor, (if any) for the complications that necessitate a Redo Surgery / ICU admission will be covered.
- Coverage limit under this benefit is over and above the Limit of Coverage and upto the Sum Insured.
- Additional sum insured can be utilized by the Donor and not by the Insured



## HEALTH CHECK UP ASSURE

Payable for each policy year (Irrespective of claim)

Sum Insured (Rs) Lakhs	Limit Up to (Rs)	
	Individual (Rs)	Floater (Rs)
5	1500	2500
10	2000	5000
15	4000	8000
20	5000	10000
25	5000	10000
50	5000	10000
75	8000	15000
100	8000	15000
200	8000	15000



## CUMULATIVE BONUS

25% of sum insured for each claim free year and maximum up to 100% of the sum insured



# HOME CARE TREATMENT



- Payable up to 10% of the sum insured subject to maximum of Rs 5 Lakhs in a policy year
- For treatment availed by the Insured Person at home, only for the specified conditions, which in normal course would require care and treatment at a hospital but is actually taken at home provided that:
  - The Medical practitioner advises the Insured person to undergo treatment at home
  - There is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment
  - Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained
- Insured can avail "Home Care Treatment" service on cashless / reimbursement basis, if availed from the list of our Network service providers given in our website "[www.starhealth.in](http://www.starhealth.in)"

## List of conditions covered under Home Care Treatment

- Fever and Infectious diseases which can be managed as Inpatient
- Uncomplicated Urinary tract infections but needing Parenteral Antibiotics
- Asthma and COPD -Mild Exacerbations needing Home Nebulization
- Acute Gastritis/Gastroenteritis
- I.V. Chemotherapy [Where advised by the doctor]
- Palliative Cancer care requiring medical assistance
- Acute Vertigo
- Diabetic foot and Cellulitis
- IVDP [Cervical and Lumbar disc diseases]
- Major Surgeries/Arthroplasties needing IV Antibiotics Post Discharge
- Care for Brain and Spinal Injury Cases Post Discharge
- Post CVA Care at Home after Discharge
- Chronic Severe Refractory Asthma (by Advanced Medicine)



# ASSISTED REPRODUCTION TREATMENT

- Waiting period : 2 years from the date of first inception of this policy
- Company will pay for one Assisted Reproduction Treatment cycle in a policy year.
- In- patient treatment is not mandatory

## Special Exclusions

- Pre and Post treatment expenses
- Sub-fertility services that are deemed to be unproven, experimental or investigational
- Reversal of voluntary sterilization
- Treatment undergone for second or subsequent pregnancies except where the child from the first delivery/ previous deliveries is/are not alive at the time of treatment
- Payment for services rendered to a surrogate
- Costs associated with cryopreservation and storage of sperm, eggs and embryos
- Selective termination of an embryo
- Services done at unrecognized centre

Sum Insured (Rs)	Limit of Liability in a policy year (Rs)
5	1 Lakh
10/15/20/25	2 Lakhs
50/75/100/200	4 Lakhs



# AUTOMATIC RESTORATION OF SUM INSURED



- Sum Insured will be restored unlimited number of times and maximum up to 100% each time, which can be utilized for a subsequent hospitalization.
- The restoration will trigger immediately upon partial/ full utilization of the sum insured, which can be utilized for a subsequent hospitalization.
- On partial utilization of the Sum Insured, it will be restored up to extent of utilization.
- On full utilization of the Sum Insured, it will be restored to 100%
- Used for all claims including for modern treatment, but for a subsequent hospitalization
- Maximum payable amount for a single claim under restoration benefit shall not more than the sum insured



# UNLIMITED RESTORATION - ILLUSTRATION



		Insured 1	Insured 2
	<b>Sum Insured (Rs)</b>	<b>10 Lakhs</b>	<b>10 Lakhs</b>
	No Claim Bonus (NCB)	0	5 Lakhs
	Total Available amount	10 Lakhs	15 Lakhs(Sum Insured 10 Lakhs + NCB 5 Lakhs)
1 <sup>st</sup> Claim	1st Claim	5 Lakhs	5 Lakhs
	Claim paid amount	5 Lakhs	5 Lakhs
	Will the restoration kick in? Yes, Why – Since there is partial utilization of Sum Insured.	5 Lakhs (Restored Sum Insured)	5 Lakhs (Restored Sum Insured)
Available amount for next claim		10 Lakhs (Restored Sum Insured 5 Lakhs + Balance Sum Insured 5 Lakhs)	15 Lakhs (Restored Sum Insured 5 Lakhs + Balance Sum Insured 5 Lakhs + NCB 5 Lakhs)
2 <sup>nd</sup> Claim	2nd Claim (For Same / different illness)	15 Lakhs	15 Lakhs
	Claim paid amount	10 Lakhs	15 Lakhs
	Will the restoration kick in? Yes, Why – Since there is full utilization of Sum Insured.	10 Lakhs (Restored Sum Insured)	10 Lakhs (Restored Sum Insured)
Available amount for next claim		10 Lakhs (Sum Insured is Restored up to 100%)	10 Lakhs (Sum Insured is Restored up to 100%)
3 <sup>rd</sup> Claim	3rd Claim(For Same / different illness)	11 Lakhs	11 Lakhs
	Claim paid amount	10 Lakhs	10 Lakhs
	Will the restoration kick in? Yes, Why – Since there is full utilization of Sum Insured	10 Lakhs (Restored Sum Insured)	10 Lakhs (Restored Sum Insured)

## DELIVERY EXPENSES

- Expenses for a Delivery including Delivery by Caesarean section (including pre-natal and postnatal expenses) up-to 10% of the Sum Insured
- Waiting period: 2 years from the date of first commencement of Star Health Assure Insurance policy and its continuous renewal
- There is no waiting period for subsequent deliveries
- Both self and spouse are covered under this policy for a continuous period of 2 years under Individual or floater sum insured.
- Pre-hospitalisation and Post Hospitalization expenses are not applicable

Sum Insured (Rs) Lakhs	Per Policy Year
5	50,000
10	1 Lakh
15	1.50 Lakhs
20	2 Lakhs
25	2.50 Lakhs
50	5 Lakhs
75	7.50 Lakhs
100	10 Lakhs
200	20 Lakhs

## IN UTERO FETAL SURGERY/INTERVENTION



- Waiting period: 2 years from the date of inception of this policy
- Types of in utero-surgeries covered**
- Open Fetal Surgery and FetendoFetal Surgery
  - Fetal Image-Guided Surgery (FIGS-IT)
  - EXIT procedure

TYPE OF INTERVENTION	DESCRIPTION	SURGERIES
OPEN SURGERY	Hysterotomy	CPAM – Lobectomy SCT – Resection MMC – Repair Cervical Teratoma – Resection EXIT Tracheal occlusion Neck tumors CDH (EXIT to ECMO)
FETENDO	Fetoscopic Surgery	Balloon Occlusion of Trachea (for CDH) Laser Ablation of Vessels (for TTTs) Cord Ligation/Division Cystoscopic Ablation Valves (Urinary Obstruction) Amniotic Bands Release
FIGS	Fetal Image Guided Surgery	Amnioreduction/Infusion Fetal Blood Sampling RFA Anomalous Twins Vesico/Pleuro Amniotic Shunts Balloon Dilation Aortic Stenosis
EXIT procedure	Planned Specialized Delivery	CHAOS Removal of the CDH Tracheal Occlusion Balloon Pulmonary Sequestration CCAM





## IN UTERO FETAL SURGERY/INTERVENTION

### List of procedures covered

- Amniotic band syndrome
- Bronchopulmonary sequestration of the lung
- Congenital cystic adenomatoid malformation (CCAM) of the lung
- Congenital diaphragmatic hernia (CDH)
- Congenital high airway obstruction syndrome (CHAOS)
- Fetalanemia
- Lower urinary tract obstruction (LUTO)
- Mediastinalteratoma
- Neck mass
- Sacrococcygealteratoma (SCT)
- Spina bifida (myelomeningocele)
- Twin reversed arterial perfusion (TRAP) sequence
- Twin-twin transfusion syndrome (TTTS)

## HOSPITALIZATION EXPENSES FOR TREATMENT OF NEW BORN BABY



- Expenses incurred in a hospital/ nursing home on treatment of the New born for any disease, illness (including any congenital disorders) or accidental injuries are covered from Day 1 of its birth till the expiry date of the policy

### Special conditions applicable for this section:

- Available only if delivery expenses claim is paid under this policy or if mother is covered under this policy for a continuous period of 1 year without break
- Intimation about the birth of the New Born should be given to the company and the coverage will be given to the New Born from the first day of its birth
- Initial waiting period, PED and specified disease waiting period and Exclusion no.20 (Code-Excl 20)\* as stated under this policy shall not apply for the New Born baby cover
- In the subsequent years, the New Born Baby will be covered up to the Sum Insured (without any underwriting and the entry age criteria), if the policy holder opts the coverage for New Born and pays the premium.
- Enhancement of sum insured is subject to underwriters approval

Exclusion no.20 (Code-Excl 20)\* : Congenital External Condition / Defects / Anomalies (except to the extent covered under coverage hospitalization expenses for treatment of New Born Baby



## HOSPITALIZATION EXPENSES FOR TREATMENT OF NEW BORN BABY

Sum Insured Lakhs (Rs)	Limit per policy year (Rs)
5/10/15/20/25	2 Lakhs
50/75/100/200	4 Lakhs



## TREATMENT FOR CHRONIC SEVERE REFRACTORY ASTHMA

- Payable up to 10% of sum insured not exceeding Rs.5 lakhs per policy period
- In-patient hospitalization / Day Care treatment / Home Care Treatment/ Out-patient treatment expenses incurred for treatment of Chronic Severe Refractory Asthma by Advanced Medicine
- Covered if recommended by the treating Medical practitioner (Pulmonologist)



## COMPASSIONATE TRAVEL

- In the event of the insured person being hospitalized for a life threatening emergency at a place away from his usual place of residence as recorded in the policy
- Company will reimburse the transportation expenses by air incurred upto Rs.10,000/- for one immediate family member (other than the travel companion)
- For travel towards the place where hospital is located, provided the claim for hospitalization is admissible under the policy

## REPATRIATION OF MORTAL REMAINS

- Following an admissible claim for hospitalization under the policy
- Company shall reimburse up to Rs.15,000/- in a policy year
- Payable towards the cost of repatriation of mortal remains of the insured person (including the cost of embalming and coffin charges) to the residence of the Insured as recorded in the policy

## TREATMENT IN VALUABLE SERVICE PROVIDERS NETWORK



- 1% of Sum Insured subject to a maximum of Rs.5,000/- per policy period is payable as lump sum

### Note:

- Payable only if there is an admissible claim for hospitalization under the policy.
- Covered if a hospital is a part of the Valuable service provider network list as on date of admission
- Payment under this benefit does not form part of the sum insured
- The Company shall not be responsible for the quality of the treatment in the Valuable Service Providers Network.

Note: FOR THE LIST OF VALUABLE SERVICE PROVIDERS NETWORK PLEASE VISIT OUR COMPANY WEBSITE [www.starhealth.in](http://www.starhealth.in)



## SHARED ACCOMMODATION

- If the insured person occupies, a shared accommodation during in-patient hospitalization, then amount of Rs.1,000/- per day will be payable for each continuous and completed period of 24 hours of stay in such shared accommodation.

### Note:

- Payable only if there is an admissible claim for hospitalization under the policy
- This will not be applicable where the sanction is on package rates
- Insured stay in Intensive Care Unit or High Dependency Units / wards will not be counted for this purpose

## AYUSH TREATMENT

- Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a AYUSH Hospital is payable up to the sum insured.

### Note:

- Yoga and Naturopathy systems of treatments are excluded

## SECOND MEDICAL OPINION



- Can obtain a Second Medical Opinion from a Doctor in the Company's network of Medical Practitioners.
- All the medical records provided by the Insured Person will be submitted to the Doctor chosen by him/her online and the medical opinion will be made available directly to the Insured by the Doctor.
- All medical records should be forwarded to the mail-id [e\\_medicalopinion@starhealth.in](mailto:e_medicalopinion@starhealth.in) or through Post/Courier.

### Special Conditions:-

- Specifically requested for by the Insured Person
- This opinion is given based only on the medical records submitted without examining the patient
- The second opinion should be only for medical reasons and not for medico-legal purposes



## MODERN TREATMENT

The following procedures will be covered (wherever medically indicated) either as in patient or as part of day care treatment in a hospital upto sum insured (including pre and post hospitalization expenses) during the policy period

Uterine artery Embolization and HIFU

Balloon Sinuplasty

Deep Brain Stimulation

Oral Chemotherapy

Immunotherapy- Monoclonal Antibody to be given as injection

Intra Vitreal injections

Robotic surgeries

Stereotactic radio surgeries

Bronchial Thermoplasty, Vaporisation of the prostate (Green laser treatment or holmium laser treatment)

IONM-(Intra Operative Neuro Monitoring)

Stem cell therapy

Hematopoietic stem cells for bone marrow transplant for haematological conditions

## REHABILITATION AND PAIN MANAGEMENT



- Covered up to the sub-limit (or) maximum up to 20% of the sum insured whichever is less, per policy year

### Rehabilitation

- If availed at authorized centres as an In-patient/Out-patient, and if there is an admissible claim for In-patient hospitalization for an injury, disease or illness specified below
  - Poly Trauma
  - Head injury
  - Diseases of the spine
  - Stroke
- Treatment can be taken only at the Authorized centres mentioned in the website – [www.starhealth.in](http://www.starhealth.in)



# REHABILITATION AND PAIN MANAGEMENT



Name of the covered pain management treatment	Sub-limits (Per Policy Period) (Rs)	
	Sum Insured (Lakhs)	
	5/10/15/20	25 & above
Lumbar and cervical medial branch block with RF ablation for lumbar and cervical facet joint arthritis	65,000	75,000
Caudal epidural injection for Discogenic pain	40,000	50,000
Lumbar and cervical selective nerve root block for Lumbar and Cervical radicular pain	50,000	60,000
Caudal Neuroplasty for Failed back spine surgery	85,000	1,00,000
Stellate ganglion ablation for upper limb CRPS	65,000	75,000
Occipital nerve Pulsed RF lesioning for Migraines, Cluster headache and cervicogenic headaches	65,000	75,000
Lumbar sympathetic chain RF ablation for lower limb CRPS, diabetic periphery painful neuropathy and Ischaemic limb pain	65,000	75,000

Name of the covered pain management treatment	Sub-limits (Per Policy Period) (Rs)	
	Sum Insured (Lakhs)	
	5/10/15/20	25 & above
Gasserian ganglion ablation for Trigeminal neuralgia	65,000	75,000
Intercostal nerve ablation for post thoracotomy pain and Thoracic malignancy pain	65,000	75,000
Coeliac plexus ablation for upper gastrointestinal malignancies pain	65,000	75,000
Superior hypogastric plexus ablation for lower Gastro intestinal malignancies pain	65,000	75,000
Ganglion impar ablation for perineal cancer pain and coccydynia	65,000	75,000
Cooled RF ablation of genicular nerve for grade 1 and 2 osteoarthritis knee and hip	1,00,000	1,25,000
Suprascapular nerve RF ablation for rotator cuff partial tear and peri arthritis shoulder pain	65,000	75,000



# STAR WELLNESS PROGRAM



- This program intends to promote, incentivize and to reward the Insured Persons' healthy life style through various wellness activities.
- The wellness reward points which will be tracked and monitored by the Company.
- Can be utilized to get discount in premium.
- Will be enabled and administered online through Star Wellness Platform through Star Health customer mobile app "Star Power" and through Star Health Customer Portal. (digital platform)
- Note: Applicable for the Insured person(s) aged 18 years and above only

Wellness Points Earned	Discount in Premium
200 to 350	4%
351 to 600	10%
601 to 750	14%
751 to 1000	20%

In case of floater policy, the weightage is given below

Family Size	Weightage
Self, Spouse	1:1
Self, Spouse and Dependent Children (up to 17 years)	1:1:0:0:0
Self, Spouse and Dependent Children (aged above 18 years)	2:2:1:1:1

**Note:** In case of two year policy, total number of wellness points earned in two year period will be divided by two.

No.	Activity	Maximum number of Wellness Points that can be earned under each activity in a policy year
1.	Manage and Track Health	
	a) Online Health Risk Assessment (HRA)	50
	a) Preventive Risk Assessment	200
2.	Affinity to Wellness	
	a) Participating in Walkathon, Marathon, Cyclothon and similar activities	100
	a) Membership in a health club (for 1 year or more)	100
3.	Stay Active – If the Insured member achieves the step count target on mobile app	200
4.	a) Weight Management Program (for the Insured who is Overweight / Obese)	100
	a) Sharing Insured Fitness Success Story through adoption of Star Wellness Program (for the Insured who is not Overweight / Obese)	50
5.	a) Chronic Condition Management Program (for the Insured who is suffering from Chronic Condition/s - Diabetes, Hypertension, Cardiovascular Disease or Asthma)	250
	a) On Completion of De-Stress & Mind Body Healing Program (for the Insured who is not suffering from Chronic Condition/s - Diabetes, Hypertension, Cardiovascular Disease or Asthma)	125
<b>Additional Wellness Services</b>		
	Star Tele health services	
	Medical Concierge Services	
	Digital Health Vault	
	Wellness Content	
	Post-Operative Care	
	Discounts from Network Providers	

### Illustration of Benefits

A 50 year old Individual Suresh and his wife Lakshmi along with their two dependent children (aged below 18 yrs) buy a Star Health Assure Insurance Policy with Sum Insured 20 Lakhs, let's understand how they can earn Wellness Points under the Floater Policy. Suresh has declared that he is suffering from Diabetes & Hypertension. Suresh has declared his Body Mass Index (BMI) as 30 & Lakshmi has declared her BMI as 25 Suresh and Lakshmi enrolled under the Star wellness program and completed the following wellness activities.

S.No	Name of the wellness activity taken up during the policy year	Wellness Points Earned by Suresh	Wellness Points Earned by Lakshmi
1	Completed Online Health Risk Assessment (HRA)	50	50
2	Submitted Health Check-Up Report	200	200
3	Participation in Marathon	100	0
4	Attended to Gym	100	100
5	Achieved 10,000 average number of steps per day during the policy year	200	200
6	Suresh accepted the Weight management program and reached 27 BMI Lakshmi accepted the Weight management program and reached 23 BMI	100	100
7	Suresh Managed Diabetes & Hypertension through Chronic Condition Management Program; Lakshmi has completed De-stress & Mind Body Healing Program	250	125
	Total Number of Wellness Points earned	1000	775
	No of wellness points based upon weightage - 1:1	500(1000X1/2)	388(775X1/2)
	Total Number of Wellness Points earned by Suresh and Lakshmi = 888 (500+388) Based on the no of Wellness Points earned, Suresh & Lakshmi are eligible to get 20% discount on renewal premium		





## CO-PAYMENT

- 10% of each and every claim amount for fresh as well as renewal policies for insured person whose age at the time of entry is 61 years and above.



## OPTIONAL COVER TO CHOOSE DEDUCTIBLE

- If the insured person chooses any of the following deductible, the Company will provide a discount on premium

Sum Insured	Aggregate Deductible Option	Discount Offered
Up to Rs 20 Lakhs	Rs 50,000	45%
	Rs 1,00,000	55%
Above Rs 20 Lakhs	Rs 50,000	35%
	Rs 1,00,000	50%

Note: This deductible is applicable for every policy year (on Aggregate basis)



## ILLUSTRATION OF DEDUCTIBLE



If an Insured with Rs 10 Lakhs Sum Insured opted for an aggregate deductible of Rs.50,000 in a year, lets understand how this deductible will be applied

First Policy Year	
Sum Insured	Rs 10 Lakhs (Opted Deductible is Rs. 50,000/- )
What does opting a deductible mean	Coverage will start once the Insured incurs single/ multiple claims that add up to the deductible amount in a policy year
1st Claim (Injury due to Accident)	Rs. 50,000/- (Not paid by us as it is within Deductible limit)
Balance Sum Insured	Rs. 10 Lakhs
2nd Claim (Dengue fever)	Rs. 65,000/- (Payable as the deductible limit of Rs. 50,000/- is already exhausted in the policy year)
Balance Sum Insured	Rs. 9,35,000/-
3rd Claim (bacterial gastroenteritis)	Rs. 55,000/- (Payable as the deductible limit of Rs. 50,000/- is already exhausted in the policy year)
Balance Sum Insured	Rs. 8,80,000/-

# WAITING PERIOD

Initial Waiting Period (Code Excl 03)	For 30 days (Other than Accidents)
Specified Diseases (Code Excl 02)	2 years
Pre-existing Diseases (Code Excl 01)	Applicable for 3 year policy term: 2.5 years Applicable for 1 year and 2 year policy term :3 years
Delivery Expenses Cover	2 years
In Utero Fetal Surgery / Intervention	2 years
Assisted Reproduction Treatment	2 years
New Born Baby Cover	1 year



**List of Benefits which are part of sum insured and in addition to sum insured**

S No	Coverage	Forming Part of Sum Insured / In addition to Sum Insured
1	Room Rent , Boarding, Nursing Expenses, Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees, Anesthesia, Blood, Oxygen, Operation theatre charges, ICU charges, Surgical appliances, Medicines and Drugs, Diagnostic materials and X-ray, Diagnostic imaging modalities, dialysis, chemotherapy, radiotherapy, cost of pacemaker, stent and similar expenses.	Forming Part of Sum Insured
2	All day care treatments	Forming Part of Sum Insured
3	Coverage for Non-medical items (Consumables)	Forming Part of Sum Insured
4	Emergency Road ambulance	Forming Part of Sum Insured
5	Air Ambulance	Forming Part of Sum Insured
6	Pre-hospitalization Expenses	Forming Part of Sum Insured
7	Post Hospitalization Expenses	Forming Part of Sum Insured
8	Domiciliary Hospitalisation	Forming Part of Sum Insured
9	Organ Donor Expenses	Forming Part of Sum Insured
10	Complications necessitating Redo surgery or ICU admission for the Organ donor	In addition to Sum Insured
11	Health Check Up Assure	In addition to Sum Insured
12	Home care treatment	Forming Part of Sum Insured
13	Delivery Expenses	Forming Part of Sum Insured
14	In Utero Fetal Surgery/Intervention	Forming Part of Sum Insured
15	Assisted Reproduction Treatment	Forming Part of Sum Insured
16	Hospitalisation expenses for Treatment of New Born Baby	Forming Part of Sum Insured
17	Compassionate Travel	In addition to Sum Insured
18	Repatriation of Mortal Remains	In addition to Sum Insured
19	Treatment in Valuable Service Providers Network	In addition to Sum Insured
20	Shared Accommodation	In addition to Sum Insured
21	AYUSH Treatment	Forming Part of Sum Insured
22	Coverage for Modern Treatment	Forming Part of Sum Insured
23	Automatic Restoration of Sum Insured	In addition to Sum Insured
24	Treatment for Chronic Severe Refractory Asthma	Forming Part of Sum Insured
25	Rehabilitation and Pain Management	Forming Part of Sum Insured



# TELE - CONSULTATION FACILITY



TALK TO STAR IS FREE-OF-COST FACILITY!

FOR OUR CUSTOMERS, AGENTS, SALES MANAGERS AND EMPLOYEES



- Provided by our company in the time of need, helping us realize our motto - PERSONAL & CARING
- Unique facility offered by our technology platform
- Provided with specialist doctors during the grim period of COVID-19 pandemic and to avoid visiting hospitals
- Consult with specialists in Ophthalmology, Cardiology, Paediatrics, Orthopedics, Gynaecology, Psychiatry, Diabetology, Dentistry, Neurology and Dermatology
- To avail this facility, call **7676905905** or mail to [telemedicine@starhealth.in](mailto:telemedicine@starhealth.in)



## LONG TERM DISCOUNT

- Two year policy: 10 % discount on 2<sup>nd</sup> year premium
- Three year policy: 10% discount is available on 2<sup>nd</sup> and 3<sup>rd</sup> year premium



## FLOATER DISCOUNT

- For Child : 40% discount is available from 1A premium when he/she becomes 18 years at the time of renewal in floater policy
- For Parent/Parent in law : 10% discount is available from 1A premium for each parent when they come under floater policy

# ILLUSTRATION FOR DISCOUNTS ON PREMIUM (IF DEDUCTIBLE IS OPTED)



## Illustration for Discounts on Premium (if Deductible is opted)

**Illustration 1**  
 Sum Insured : Rs.10,00,000/-  
 Policy Type : Family Floater  
 Family Size : 2 Adults+2 Children  
 Zone : A  
 Policy Term : 1 year

Relation	Age in years	Premium Excl. GST (Rs.)	45% Discount for Deductible Opted Rs.50,000/- (Rs.)	Total Premium Excl. GST (Rs.)
Self (Primary member)	45	27,767	12,495	15,272
Spouse	40			
Child 1	17			
Child 2	15			
<b>Final Premium</b>				<b>15,272</b>

## Illustration for Child Above 17 years and One Parent including Deductible is Opted

**Illustration 2 - (Child Above 17 years and one Parent to be covered)**  
 Sum Insured : Rs.10,00,000/-  
 Policy Type : Family Floater  
 Family Size : 2 Adults+2 Children+1 Parent  
 Zone : A  
 Policy Term : 1 year

Relation	Age in years	Premium Excl. GST (Rs.)	Floater Discount at 40% for Child 1 and 10% for Parent 1	Premium After Floater Discount Excl. GST (Rs.)	45% Discount for Deductible Opted Rs.50,000/- (Rs.)	Total Premium Excl. GST (Rs.)
Self (Primary member)	45	23,686	0	23,686	10,659	13,027
Spouse	40					
Child 2	17					
Child 1	19	9,762	3,905	5,857	2,636	3,221
Parent 1	70	38,157	3,816	34,341	15,453	18,888
<b>Final Premium</b>						<b>35,136</b>



## TAX BENEFITS

Insured is eligible for relief under Section 80D of the Income Tax Act when premium is paid by any mode other than cash



## PREMIUM PAYMENT IN INSTALMENT OPTIONS

- Insured has option for payment of premium on instalment basis ie Half Yearly
- Grace period of 7 days allowed
- During such grace period, coverage will not be available
- In case of instalment premium due not received within the grace period, the policy will get cancelled
- In the event of a claim, all subsequent premium instalments shall immediately become due and payable





## SPECIFIED DISEASES - FIRST 2 YEARS' EXCLUSIONS (CODE EXCL 02)

Cataract, Diseases of ENT, Diseases related to thyroid, Benign diseases of the breast

Subcutaneous benign lumps, Sebaceous cyst, Dermoid cyst, Mucous cyst lip/cheek

Ligament, Fascia, Bones and Joint Including Arthroscopy and Arthroplasty

Vertebral diseases, including replacement of bones and joints

All types of management for Kidney calculi and Genitourinary tract calculi

All types of Hernia

Desmoid Tumor, Umbilical Granuloma, Umbilical Sinus, Umbilical Fistula

All Diseases of Prostate, Stricture Urethra, all Obstructive Uropathies

Note: For complete list, please refer to the policy

# PERMANENT EXCLUSIONS

- Investigation & Evaluation - Code Excl 04
- Rest Cure, rehabilitation (Except to the extent covered under coverage Rehabilitation and Pain Management) & respite care - Code - Excl 05
- Obesity/Weight Control - Code Excl 06

- Treatments received in health hydros, nature cure clinics, spas - Code Excl 13
- Dietary supplements and substances that can be purchased without prescription - Code Excl 14

- Change-of-Gender treatments - Code Excl 07
- Cosmetic or plastic surgery - Code Excl 08
- Hazardous or Adventure sports - Code Excl 09

- Refractive Error - Code Excl 15
- Unproven Treatments - Code Excl 16
- Sterility and Infertility (Except to the extent covered under coverage Assisted Reproduction Treatment) - Code Excl 17

- Breach of law - Code Excl 10
- Excluded Providers - Code Excl 11
- Treatment for alcoholism, drug or substance abuse - Code Excl 12

- Maternity- Code -Excl 18
- Circumcision (unless necessary for treatment of a disease not excluded under this policy or necessitated due to an accident) - Code Excl 19

Note: For complete list, please refer to the policy wording

# CLAIM PROCEDURE

Sl. No.	Type of Claim	Prescribed Time Limit
1	Reimbursement of hospitalization, daycare and pre-hospitalization expenses	Claim must be filed within 15 days from the date of discharge from the hospital
2	Reimbursement of post-hospitalization expenses	Within 15 days after completion of 180 days from the date of discharge from hospital

## FOR REIMBURSEMENT CLAIMS

- Duly completed claim form, and
- Pre Admission investigations and treatment papers
- Discharge Summary from the hospital
- Cash receipts from hospital, chemists
- Cash receipts and reports for tests done
- Receipts from doctors, surgeons, anesthetist
- Certificate from the attending doctor regarding the diagnosis.
- KYC (Identity proof with Address) of the proposer, where claim liability is above Rs 1 Lakh as per AML Guidelines

**Note:** Call the 24 hour help-line for assistance - 1800 425 2255 / 1800 102 4477, Senior Citizens may call at 044 40020888

# CLAIM PROCEDURE



Call the 24-hour helpline for assistance -1800 425 2255/1800 104 2277  
Senior Citizens may call at 044 40020888

Inform the ID number for easy reference

On admission in the hospital, produce the ID card issued by the company at the hospital helpdesk

Obtain the pre-authorization form from the hospital helpdesk, complete the patient information and re-submit to the hospital helpdesk

In case of emergency hospitalization, information to be given within 24 hours after hospitalization

Once all the details are furnished, the company will process the request as per the terms and conditions, as well as the exclusions therein, and either approve or reject the request based on the merits

The company will process the request and call for additional documents/clarifications if the information furnished is inadequate

The treating doctor will complete the hospitalization/treatment information and the hospital will fill up expected cost of treatment. This form is submitted to the company

Cashless facility can be availed only in networked Hospitals. For details of Network Hospitals, the insured may visit [www.starhealth.in](http://www.starhealth.in) or contact the nearest branch



# PRODUCT USP



- Maximum Maximum family size , 6A + 3C (6 Adults = Self + Spouse + Parents + Parents-in-law)
- Higher Sum Insured up to Rs 2 Cr (Rs 75 Lakhs, Rs 1 Cr and Rs 2 Cr sum insured is applicable for persons aged below 65 years)
- Automatic Restoration: Sum Insured will be restored unlimited number of times and maximum up to 100% each time
- No categorization for room including boarding and Nursing expenses ( Upto 1% of sum insured or upto Rs 20,000 per day whichever is less)
- Rs 75/100/200 Lakhs Sum Insured no limits for room rent
- Optional cover to choose deductible
- Floater Discount
- Delivery expenses, treatment of New born baby cover



Star Health  
Assure\_One Year

**ONE YEAR PREMIUM**



Star Health  
Assure\_Two Year

**TWO YEAR PREMIUM**



Star Health  
Assure\_Three Year

**THREE YEAR PREMIUM**

Strictly for Internal Training Purpose only



Star Health  
Assure\_One pager Vers

**ONE PAGER**



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