



Star Women Care Insurance Policy

UIN: SHAHLIP23132V022223



Strictly for Internal Training Purpose only

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BENEFITS



Hospitalization



Air Ambulance



Modern Treatments



Pre & Post-hospitalization



Preventive Health Checkup



Newborn Baby Cover



Daycare Coverage



No-Claim Bonus



Organ Donor



Cataract



Automatic Restoration



AYUSH



Road Ambulance



Bariatric Surgery



Rehabilitation & Pain Mgmt



BENEFITS



Assisted Reproduction Treatment



Delivery Expenses



Outpatient Consultation



Ante-Natal Care



Cover for non medical items



Cancer (optional cover)



In Utero Fetal Surgery/Repair



Vaccination for New born



Star Wellness Program



Voluntary Sterilization



Metabolic Screening



Shared Accommodation



Miscarriage Due to Accident



Pediatrician Consultation



Star Mother Cover



COVERAGE

Who Can Avail?

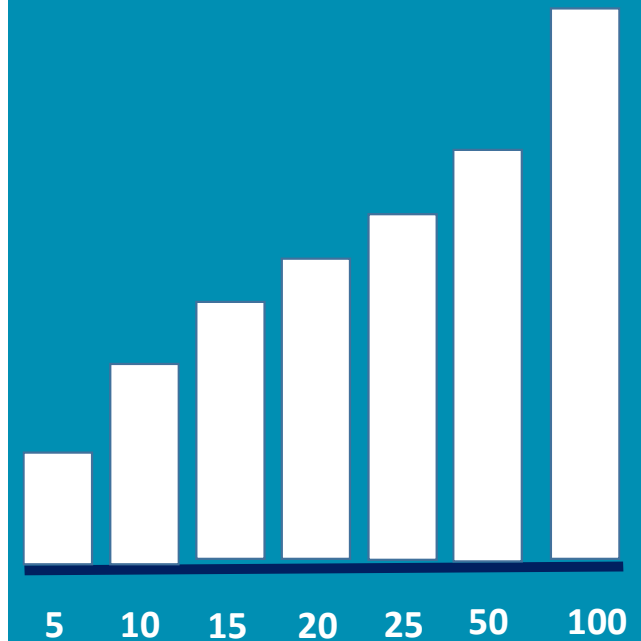
- **Adults:** 18 years to 75 years
- **Dependent children:**
91 days to 25 years
- **Policy Type:**
Individual (Available only for Females)
Floater (At-least one female (adult) should be there in the family along with the spouse and dependent children)
- Daughter can continue as a dependent child if Unmarried and/or Un-employed beyond 25 years and max up to 30 years, and beyond 30 years she will be treated as an Adult

Note: Family means Self, Spouse and 3 Dependent Children

ABOUT THE POLICY

- **Policy Term**
1 year/2 years/3 years
- **Continuity**
Lifetime renewal
- **Pre Medical Screening**
Not required
- **Instalment Facility**
Quarterly, Half-yearly

SUM INURED OPTIONS (in LAKHS)





BENEFITS

- Pregnant women can buy by submitting the scan reports taken at star health specified scan centres during their 12th and 20th week of their pregnancy period
- The cost of scan will be borne by the insured
- For females, the continuity benefits accrued under this policy before marriage will also be considered for claims under maternity section



MID TERM INCLUSION

- Newly Married / Wedded spouse and/or legally adopted child: Intimation about the marriage/adoption should be given within 45 days from the date of marriage or date of adoption
- New born baby: Intimation about the new born baby should be given within 90 days from the date of birth

Special Conditions:

- Waiting periods will be applicable from the date of inclusion of newly married/wedded spouse, new born baby, legally adopted child
- Mid Term Inclusion will be 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
- Consultant
- Anesthetist
- Specialist



Medical Services

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



Medicines

- Drugs
- Medicines
- Implants and such other similar items



ROOM CATEGORY



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

Star Mother Cover

- Where the insured person is a child age less than 12 years company will provide expenses up to **Single Private A/c room** for stay of the mother in the hospital provided
- Insured child is under treatment in ICU
- There is an admissible claim for hospitalization
- Available only for the period the insured person is under treatment in ICU
- If the room is not available in the same hospital, the company will reimburse Rs 2500/- per day subject to maximum of 7 days per hospitalization towards stay of the mother in the Hotel room if the hotel room is within 2 kms from the hospital

Note: Expenses on hospitalization considered in proportion to eligible room rent/room category stated in policy schedule or actuals whichever is less

PRE & POST HOSPITALIZATION

60 Days



90 Days

DAYCARE



All daycare procedures are covered





ROAD AMBULANCE

Actuals

- For transportation of the insured person to go to hospital when this is needed for medical reasons
or
- From one hospital to another hospital for better medical treatment
or
- From the hospital where treatment is taken to their place of residence



AIR AMBULANCE

- Up to 10% of the sum insured per year is payable
- Applicable for sum insured of Rs 10 Lakhs & above only
- It is for life threatening emergency health condition/s of the insured person which requires immediate and rapid ambulance transportation to the hospital/medical centre that ground transportation cannot provide

COVERAGE FOR NON MEDICAL ITEMS

If there is an admissible claim then items as per list 1 (refer policy wording) will be become payable





ORGAN DONOR

- In patient hospitalization expenses incurred for organ transplantation from the Donor to the recipient insured person are payable
- In addition, the expenses incurred by the Donor, (if any) for the complications that necessitate a Redo Surgery/ICU admission will be covered
- The coverage limit under this benefit is over and above the limit of coverage and upto the sum insured.
- This additional sum insured can be utilized by the donor and not by the insured.

AYUSH

- In patient Hospitalizations Expenses incurred for treatment of diseases/illness/accidental injuries by system of medicines other than allopathic up to the Sum Insured per year
- Yoga and Naturopathy systems of treatments are excluded

BARIATRIC SURGERY



- Expenses incurred on hospitalization for bariatric surgical procedure and its complications are payable

Sum Insured (Rs)	Limit Per Policy Period (Rs)
5 Lakhs to 15 Lakhs	2.50 Lakhs
Above 15 Lakhs	5 Lakhs

- Waiting Period: 2 years
- Minimum age of the insured at the time of surgery should be above 18 years.
- The above limits are inclusive of pre & post hospitalization



MODERN TREATMENT



Sum Insured (Rs) Lakhs	5	10	15	20	25	50	100
	Limit per person, per policy period for each treatment / Procedure						
Uterine artery Embolization and HIFU	Upto 50% of sum insured	Upto 40% of sum insured	Upto 30% of sum insured				
Balloon Sinuplasty							
Deep Brain Stimulation							
Oral Chemotherapy* (Sublimits including pre & Post hospitalization)							
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							

Sublimits all inclusive with or without hospitalization where ever hospitalization includes pre and post hospitalizations



CUMULATIVE BONUS

- In respect of claim free year 20% of the expiring Sum Insured from the second year onwards.
- The maximum allowable bonus shall not exceed 100% of the sum insured.

SHARED ACCOMODATION

- Rs 2000/- per day
- Maximum of 7 days (per hospitalization) will be payable for each continuous and completed period of 24 hours of stay in shared accommodation

Note: Not applicable for ICU or High Dependency units



AUTOMATIC RESTORATION

- Available immediately upon partial/full utilization of the limit of coverage.
- Maximum up to 100% of sum insured
- Can be utilized for all claims for subsequent hospitalization during the policy period.
- The maximum liability of the company in a single claim under a policy year shall not exceed the limit of coverage.
- The unutilized restored sum insured cannot be carried forward

AUTOMATIC RESTORATION



UTILIZATION OF SUM INSURED

The sequence of utilization of the Sum Insured in this Policy will be as follows

- Basic Sum Insured
- Cumulative Bonus (if applicable)
- Automatic Restoration of Sum Insured triggers on utilization of the Limit of Coverage in whole or in part.

Illustration for Utilization of Sum Insured

Illustration 1

An Insured Person with Star Women Care Insurance Policy, Tenure 1 year, Third year in progress, Basic Sum Insured Rs.5 lakhs

Number of Claims	Claim amount (Rs.)	Available Benefit Limit			Admissible claim amount (Rs.)	Utilization of Sum Insured
		Basic Sum Insured (Rs.)	Bonus (Rs.)	Automatic Restoration of Sum Insured (Rs.)		
1st Claim	5 Lakhs	5 Lakhs	2 Lakhs	-	5 Lakhs	Basic Sum Insured (Full)
2nd Claim	7 Lakhs	-	2 Lakhs	5 Lakhs	7 Lakhs	Bonus (Full) + Automatic Restoration (Full)



AUTOMATIC RESTORATION



Illustration 2

An Insured Person with Star Women Care Insurance Policy, Tenure 1 year, Second year in progress, Basic Sum Insured Rs. 5 Lakhs

Number of Claims	Claim amount (Rs.)	Available Benefit Limit			Admissible claim amount (Rs.)	Utilization of Sum Insured
		Basic Sum Insured (Rs.)	Bonus (Rs.)	Automatic Restoration of Sum Insured (Rs.)		
1st Claim	3 Lakhs	5 Lakhs	1 Lakh	-	3 Lakhs	Basic SI (partial)
2nd Claim	6 Lakhs	2 Lakhs	1 Lakh	3 Lakh	6 Lakhs	Basic (balance) + Bonus (full)+ Automatic Restoration (partial)
3rd Claim	2 Lakhs	-	-	2 Lakh	2 Lakhs	Automatic Restoration (Balance)



REHABILITATION AND PAIN MANAGEMENT



- Covered up to the sub-limit (or) maximum up to 10% of the sum insured whichever is less, per policy year
- 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
- Payment under this benefit forms part of the sum insured and will impact the bonus

Subject - Pain Management Cover	Sub-limits (Per Policy Period) (Rs)		
	5 Lakhs	10/15/20 Lakhs	25 Lakhs and above
Name of the covered pain management treatment			
Lumbar and cervical medial branch block with RF ablation for lumbar and cervical facet joint arthritis	50,000	65,000	75,000
Caudal epidural injection for Discogenic pain	30,000	40,000	50,000
Lumbar and cervical selective nerve root block for Lumbar and Cervical radicular pain	40,000	50,000	60,000
Caudal Neuroplasty for Failed back spine surgery	50,000	85,000	1,00,000
Stellate ganglion ablation for upper limb CRPS	50,000	65,000	75,000
Occipital nerve Pulsed RF lesioning for Migraines, Cluster headache and cervicogenic headaches	50,000	65,000	75,000
Lumbar sympathetic chain RF ablation for lower limb CRPS, diabetic periphery painful neuropathy and Ischaemic limb pain	50,000	65,000	75,000



PAIN MANAGEMENT



Subject - Pain Management Cover	Sub-limits (Per Policy Period) (Rs)		
	Name of the covered pain management treatment	5 Lakhs	10/15/20 Lakhs
Gasserian ganglion ablation for Trigeminal neuralgia	50,000	65,000	75,000
Intercostal nerve ablation for post thoracotomy pain and Thoracic malignancy pain	40,000	65,000	75,000
Coeliac plexus ablation for upper gastrointestinal malignancies pain	40,000	65,000	75,000
Superior hypogastric plexus ablation for lower Gastro intestinal malignancies pain	40,000	65,000	75,000
Ganglion impar ablation for perineal cancer pain and coccydynia	50,000	65,000	75,000
Cooled RF ablation of genicular nerve for grade 1 and 2 osteoarthritis knee and hip	50,000	1,00,000	1,25,000
Suprascapular nerve RF ablation for rotator cuff partial tear and peri arthritis shoulder pain	40,000	65,000	75,000



ASSISTED REPRODUCTION TREATMENT

- Waiting Period: 36 months from the date of first inception of the policy
- Company will pay one assisted reproduction treatment cycle for each policy year
- In-patient treatment is not mandatory for the purpose of claim

Sum Insured (Rs) Lakhs	Limit of Liability of the Company for each policy year (Rs) Lakhs
5	0.50
10	1
15	1.50
20 & 25	2
50	2.50
100	3



ANTE-NATAL CARE (PREGNANCY CARE)

- Payment is done after confirmation of pregnancy, incurred as an out-patient

Sum Insured (Rs) Lakhs	Sub Limit (Rs) (per policy year)
5/10/15	2500
20/25/50/100	5000

Waiting Period

- For sum insured 5 and 10 Lakhs : 2 Years from inception of the policy
- For sum insured Rs 15 Lakhs & above: 1 Year from inception of the policy



IN UTERO FETAL SURGERY/ REPAIR



Types of Utero-Surgeries covered

- Open Fetal Surgery
- Fetendo Fetal Surgery
- Fetal Image-Guided Surgery (FIGS-IT)
- EXIT Procedure

Waiting Period

- For sum insured 5 and 10 Lakhs : 2 Years from inception of this policy
- For sum insured Rs 15 Lakhs & above: 1 Year from inception of this policy

List of procedures covered Utero Surgeries

- 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)
- Fetal anemia
- Lower urinary tract obstruction (LUTO)
- Mediastinal teratoma
- Neck mass
- Sacrococcygeal teratoma (SCT)
- Spina bifida (myelomeningocele)
- Twin reversed arterial perfusion (TRAP) sequence
- Twin-twin transfusion syndrome (TTTS)

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



VOLUNTARY STERILIZATION EXPENSES

- Company will pay the expenses incurred for Voluntary Sterilization (Tubectomy / Vasectomy) provided the insured person is married person and his/her age is 22 years and above
- Waiting period
2 years from the date of first inception of this policy

Note: Expenses incurred for reversal of sterilization are not payable

MISCARRIAGE DUE TO ACCIDENT



- Company will pay lump sum towards miscarriage arising out of accident

Sum Insured (Rs) Lakhs	Sub Limit (per policy year)
5 to 15	Rs 25,000
20 & 25	Rs 35,000
50 & 100	Rs 40,000

Available only once in lifetime

Waiting Period

- For sum insured 5 and 10 Lakhs : 2 Years from inception of this policy
- For sum insured Rs 15 Lakhs & above: 1 Year from inception of this policy

Note: Payment under this benefit forms part of the sum insured and will impact bonus



DELIVERY EXPENSES

- Expenses for a Delivery including Delivery by Caesarean section (including pre-natal and post natal expenses)
- Maximum of 2 deliveries in the life time
- Pre-hospitalization and Post Hospitalization expenses are not applicable

Sum Insured (Rs) Lakhs	Limit per delivery(Rs)
5	25,000
10/15/20	50,000
25 and 50	75,000
100	1 Lakh

Waiting Period

- For sum insured 5 and 10 Lakhs : 2 Years from inception of this policy
- For sum insured Rs 15 Lakhs & above: 1 Year from inception of this policy

HOSPITALIZATION EXPENSES FOR TREATMENT OF NEW BORN BABY



- a) Birth of New born baby during the policy year
 - Maximum of 25% of the sum insured (including medical and surgical treatment expenses, neonatal and Postnatal surgery/repair)
 - In-patient hospitalization expenses (Including Congenital Internal and External defects/anomalies) are covered from day 1
- b) In the subsequent year (on payment of applicable premium for New born)
 - Covered up to 100% of the sum insured
 - In-patient hospitalization expenses (Including Congenital Internal and External defects/anomalies)



HOSPITALIZATION EXPENSES FOR TREATMENT OF NEW BORN BABY

c) Vaccination Expenses

- Payable up to 12 months from the birth of the new born

Sum Insured (Rs) Lakhs	Limit (Rs)
5 & 10	2,500
15 & above	3,500

d) Metabolic Screening

Test for New Born is payable once for each new born subject to a limit of Rs 3,500

e) Pediatrician Consultation

- Covered up to 4 consultations per year
- Payable up to 12 year of age
- Limit per consultation is up to Rs 500



OUTPATIENT

- Available only for female insured person
- Unlimited gynecologist consultation through Star Tele Health App is available

Sum Insured (Rs) Lakhs	Limit per policy year (Rs)
5 to 15	2500
20 & 25	3500
50 & 100	5000



PREVENTIVE HEALTH CHECK UP

Gender	Benefit Description	Limit up to per policy year	Tests
Female	Adolescent Puberty Age 13 to 19 years	1,000	USG Abdomen
Female	Adult Reproductive Age 20-39 years	3,000	Thyroid profile, PAP, Vitamin D, USG Abdomen
Female	Middle Aged Menopausal age 40 years – 59 years	5,000	Dexa Scan, Sonomamogram, PAP, USG Abdomen
Female	Senior Citizens Age 60 years and above	4,000	Dexa Scan, PAP, USG Abdomen
Male	Any age	1,000	Any tests

Note : Inclusive of cost of Vaccination



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



STAR WELLNESS PROGRAM



Wellness Points Earned	Discount in Premium
200 to 350	2%
351 to 600	5%
601 to 750	7%
751 to 1000	10%

Family Size	Weightage
Self, Spouse	1:1
Self, Spouse and Dependent Children (up to 18 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 each 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
Additional Wellness Services		
	Tele health services	
	Medical Concierge Services	
	Digital Health Vault	
	Wellness Content	
	Post-Operative Care	
	Discounts from Network Providers	

OPTIONAL COVER

Lump sum on diagnosis of Cancer

Available on payment of additional premium

- If the insured person shall contract cancer as a first incidence, lumpsum is payable
- Waiting Period: 180 days from the commencement of the policy.
- Available only for the insured persons named in the schedule.
- For sum insured of 5/10/15/20 and 25 Lakhs
- Individual sum insured basis only
- Available only once in lifetime
- Once a claim has been paid under this optional cover, the optional cover cannot be renewed further.
- On payment of claim under the optional cover, the optional cover will cease and the policy will continue for the balance period without this optional cover.
- Subsequently on renewal, the policy will be renewed without the optional cover
- Should be opted only at the time of first inception and cannot be opted at the time of renewal.
- Available only for female insured persons who is aged between 91 days to 65 years.
- Enhancement of sum insured is subject to underwriting

Illustration Scenario – 1

A 42 year old Individual Suresh and his wife Lakshmi along with their two dependent children (aged below 18 years) buy a Star Women Care Insurance Policy (Floater Sum Insured) with Sum Insured Rs 25 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

No	Name of the wellness activity taken up during the policy year	Wellness Points Earned by Ramesh	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)
<p>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 10% discount on renewal premium</p>			

Description Cover	Forming Part of Sum Insured / Not Forming Part of Sum Insured	Claim under this benefit will
Room rent	Forming Part of Sum Insured	Impact Cumulative Bonus
Star Mother Cover	Forming Part of Sum Insured	Impact Cumulative Bonus
All day care procedures	Forming Part of Sum Insured	Impact Cumulative Bonus
Non-medical coverage	Forming Part of Sum Insured	Impact Cumulative Bonus
Road ambulance expenses	Forming Part of Sum Insured	Impact Cumulative Bonus
Air Ambulance	Forming Part of Sum Insured	Impact Cumulative Bonus
Pre-hospitalization Expenses	Forming Part of Sum Insured	Impact Cumulative Bonus
Post Hospitalization Expenses	Forming Part of Sum Insured	Impact Cumulative Bonus
Organ Donor Expenses	Forming Part of Sum Insured	Impact Cumulative Bonus
Complications necessitating Redo surgery or ICU admission for the Organ donor	Not Forming Part of Sum Insured	Impact Cumulative Bonus
AYUSH Treatment	Forming Part of Sum Insured	Impact Cumulative Bonus
Bariatric Surgery	Forming Part of Sum Insured	Impact Cumulative Bonus
Coverage for Modern Treatment	Forming Part of Sum Insured	Impact Cumulative Bonus
Automatic Restoration of Sum Insured:	Not Forming Part of Sum Insured	Not impact Cumulative Bonus
Shared accommodation	Forming Part of Sum Insured	Impact Cumulative Bonus
Rehabilitation and Pain Management	Forming Part of Sum Insured	Impact Cumulative Bonus
Assisted Reproduction Treatment	Forming Part of Sum Insured	Impact Cumulative Bonus
Ante-Natal Care (Pregnancy Care)	Not Forming Part of Sum Insured	Not impact Cumulative Bonus
In Utero Fetal Surgery/Repair	Forming Part of Sum Insured	Impact Cumulative Bonus
Voluntary Sterilization Expenses	Forming Part of Sum Insured	Impact Cumulative Bonus
Miscarriage due to Accident	Forming Part of Sum Insured	Impact Cumulative Bonus
Delivery Expenses	Not Forming Part of Sum Insured	Impact Cumulative Bonus

Hospitalization expenses for treatment of New Born Baby		
Description Cover	Forming Part of Sum Insured / Not Forming Part of Sum Insured	Claim under this benefit will
Birth of New born baby during the policy year	Forming Part of Sum Insured	Impact Cumulative Bonus
In the subsequent year (on payment of applicable premium for New born)	Forming Part of Sum Insured	Impact Cumulative Bonus
Vaccination Expenses	Forming Part of Sum Insured	Not impact Cumulative Bonus
Metabolic Screening	Forming Part of Sum Insured	Not impact Cumulative Bonus
Pediatrician Consultation	Forming Part of Sum Insured	Not impact Cumulative Bonus
Medical Consultations as an Outpatient	Not Forming Part of Sum Insured	Not impact Cumulative Bonus
Preventive Health Check Up	Not Forming Part of Sum Insured	Not impact Cumulative Bonus
Star Wellness Program	Not Forming Part of Sum Insured	Not impact Cumulative Bonus
Optional Cover (Lump sum on diagnosis of Cancer)	Not Forming Part of Sum Insured	Impact Cumulative Bonus



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



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

LONG TERM DISCOUNT

- 10 % discount on 2 nd year premium in case of 2 year policy term
- 11.25% on 2 nd and 3rd year premium in case of 3 year policy term

PREMIUM PAYMENT IN INSTALMENT OPTIONS



- Insured has option for payment of premium on instalment basis ie Quarterly and 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



WAITING PERIOD



Initial Waiting Period (Code Excl 03)	For 30 days (Other than Accidents)
Specified Diseases (Code Excl 02)	24 months
Pre-existing Diseases (Code Excl 01)	24 months

Bariatric Surgery	2 years
Assisted Reproduction Treatment	3 years
Voluntary Sterilization	2 years
Ante natal care	Rs 5 lakhs and Rs 10 lakhs sum insured : 2 years Rs 15 lakhs and above sum insured: 1 year
In Utero Fetal surgery / Repair	Rs 5 lakhs and Rs 10 lakhs sum insured : 2 years Rs 15 lakhs and above sum insured: 1 year
Delivery expenses	Rs 5 lakhs and Rs 10 lakhs sum insured : 2 years Rs 15 lakhs and above sum insured: 1 year
Miscarriage due to Accident	Rs 5 lakhs and Rs 10 lakhs sum insured : 2 years Rs 15 lakhs and above sum insured: 1 year



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 and 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 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 (Except to the extent covered Delivery Expenses)

Note: For complete list, please refer to the policy



CLAIM PROCEDURE



S. 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 90 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



PRODUCT USP



- Industry first - Women centric benefits - Individual and family floater

- Entry age up to 75 years without pre medical screening

- Comprehensive maternity benefit

- Exclusive new born baby cover

- Day 1 OPD, Health check up

- Adequate protection, NCB, Automatic restoration





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

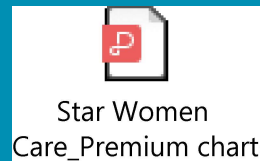
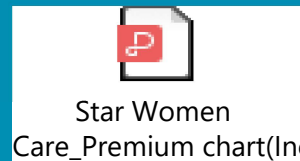
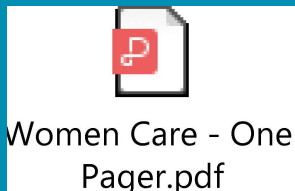
The company will process the request and call for additional documents/clarifications if the information furnished is inadequate

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 or contact the nearest branch



ONE PAGER, FAQ, AML, PREMIUM CHART



Strictly for Internal Training Purpose only

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