



Star Comprehensive Insurance Policy

SHAHLP26044V092526



Key features



Automatic Restoration
of Sum Insured for both
related and unrelated
illnesses

Cumulative Bonus
accumulation up to
100% of Sum Insured



Coverage for
Delivery and Newborn
Expenses



Coverage for Outpatient
consultation including
Dental and Ophthalmic
treatments





Entry Age

- For Adults: 18 years to 65 years
- For Dependent Children: 91 days to 25 years (Floater Policy)



Sum Insured (SI)

₹5 L, ₹7.5 L, ₹10 L, ₹15 L, ₹20 L, ₹25 L, ₹50 L, ₹75 L, ₹1 Cr



Policy Tenure

1 / 2 / 3 years



Instalment Facility

Monthly, Quarterly and Half-yearly options are available



Discounts

Long-term Discount:

- 2-year policy term – 10% discount on the 2nd year premium
- 3-year policy term – 10% discount on the 2nd year premium and 12.5% discount on the 3rd year premium

Wellness Discount:

- Up to 10% on renewal premium

Online Discount:

- 5% discount when you buy this Insurance online at www.starhealth.in

Favourable Claim Experience Discount:

- Insured Person may be eligible for a discount of 5% during renewals on Policy premium based on the past claim history at the Policy level. This discount is applicable only if no claim is made under the Policy or the total claim amount is up to Rs. 25,000/- in the preceding three years.

- This discount is only applicable for Insured Persons aged up to 59 years. In case of floater policies, age of the eldest member will be taken into consideration for the calculation of this discount.

For detailed understanding of this benefit, kindly refer the Prospectus document of Star Comprehensive Insurance Policy available in our website download section.



Co-Payment

This policy is subject to Co-payment of 10% of each and every claim amount for fresh as well as renewal policies for Insured Persons whose age at the time of entry is 61 years and above. This co-payment will not apply for those Insured Persons who have entered the policy before attaining 61 years of age and renew the policy continuously without any break.



Coverages



In-patient Treatment

Covered up to Sum Insured for expenses such as Room Rent (**Single Private A/C Room**), Boarding and Nursing Expenses, ICU charges, Fees for Surgeon, Anesthetist, Medical Practitioner, Consultants and Specialists, Anesthesia, Blood, Oxygen, Operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, diagnostic imaging modalities, Dialysis, Chemotherapy, Radiotherapy, cost of Pacemaker, stent and such other similar expenses.



Day Care Treatment

All day care procedures are covered up to Sum Insured.



AYUSH Treatment

Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Siddha and Homeopathy systems of medicines in an AYUSH Hospital are payable up to the Sum Insured.

Note: Claims under Yoga and Naturopathy system of treatment will be payable subject to prior approval from the company.



Coverage for Modern Treatments

Coverage available for the below listed Modern Treatments up to the limits as specified in the Policy Wordings;

- Uterine Artery Embolization and HIFU
- Balloon Sinoplasty
- 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



Pre Hospitalization Expenses

Coverage for Medical expenses incurred up to 60 days immediately before the Insured Person is hospitalized.



Post Hospitalization Expenses

Coverage for medical expenses incurred up to 90 days immediately after the Insured Person is discharged from the hospital.



Road Ambulance

Subject to an admissible hospitalization claim, Road Ambulance expenses incurred for the following are payable up to Sum Insured;

- 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 provided the requirement of an ambulance to the residence is certified by the medical practitioner.



Air Ambulance

Subject to an admissible hospitalization claim, the Insured Person(s) is/are eligible for reimbursement of expenses incurred towards the cost of air ambulance service up to ₹2,50,000/- per hospitalization not exceeding ₹5,00,000/- per Policy Year.



Organ Donor Expenses

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.

The coverage limit under this section is over and above the Limit of Coverage and up to the basic Sum Insured. This additional Sum Insured can be utilized by the Donor and not by the Insured Person.



Home Care Treatment

Payable up to 10% of the Sum Insured subject to maximum of ₹5 lac in a Policy Year, for treatment availed by the Insured Person at home, only for the specified conditions.



Domiciliary Hospitalization

Coverage available 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.

However, this benefit shall not cover Asthma, Bronchitis, Chronic Nephritis and Nephritic Syndrome, Diarrhoea and all types of Dysenteries including Gastro-enteritis, Diabetes Mellitus and Insipidus, Epilepsy, Hypertension, Influenza, Cough and Cold, all Psychiatric or Psychosomatic Disorders, Pyrexia of unknown origin for less than 10 days, Tonsillitis and Upper Respiratory Tract infection including Laryngitis and Pharyngitis, Arthritis, Gout and Rheumatism.



Cumulative Bonus

Where the Sum Insured under the Policy is ₹5 Lac, the Insured Person will be eligible for Cumulative bonus calculated at 50% of the basic Sum Insured for each claim free year subject to a maximum of 100% of the basic Sum Insured.

Where the Sum Insured under the Policy is ₹7.5 Lac or above, the Insured Person will be eligible for Cumulative bonus calculated at 100% of the basic Sum Insured for each claim free year subject to a maximum of 100% of the basic Sum Insured.



Automatic Restoration of SI

The basic Sum Insured shall be automatically restored once in a Policy Year by 100% upon exhaustion of basic Sum Insured and accrued Cumulative Bonus, if any. Such Restored basic Sum Insured can be utilized for all claims during the policy period.

This Benefit is not available for Modern Treatment.



Delivery and New Born Cover

Coverage is available for the below;

- Expenses incurred as in-patient for Delivery including Delivery by Caesarean section (including prenatal and post-natal expenses) are payable for a maximum of 2 deliveries during the lifetime under this policy.
- Treatment of the New Born.

Applicable Limits for Delivery Expenses and treatment of New Born

Delivery and New Born			
Sum Insured (₹)	Limit for Delivery		Limit of Company's liability for New Born Cover (₹)
	Normal Delivery (₹)	Delivery by Caesarean Section (₹)	
5,00,000/-	15,000/-	20,000/-	1,00,000/-
7,50,000/-	25,000/-	40,000/-	1,00,000/-
10,00,000/- to 25,00,000/-	30,000/-	50,000/-	1,00,000/-
50,00,000/- to 1,00,00,000/-	50,000/-	1,00,000/-	2,00,000/-

- Vaccination expenses for the new born baby are payable up to the limits mentioned in the table below until the new born baby completes one year of age and is added in the policy on renewal.

Limits for Vaccination	
Sum Insured (₹)	Limit per Policy Period (₹)
5,00,000/- to 25,00,000/-	5,000
Above 25,00,000/-	10,000

Note:

A waiting period of 24 months will apply afresh following a claim under delivery.

Pre-hospitalization and Post Hospitalization expenses and Hospital Cash Benefit are not applicable for this Section.

This cover is available only when;

- Both Self and Spouse are covered under this policy either on floater basis or on individual basis and both Self and Spouse should have been covered for a continuous period of 24 months under Star Comprehensive Insurance Policy.
- The policy covering the self and spouse are in force when the benefit under this Section becomes payable.



Bariatric Surgery

The expenses incurred on hospitalization for bariatric surgical procedure and its complications thereof are payable up to the specified limits during the policy period.

Bariatric Surgery	
Sum Insured (₹)	Limit per Policy Period (₹)
5,00,000/- to 15,00,000/-	2,50,000/-
Above 15,00,000/-	5,00,000/-

The limit of cover for Bariatric Surgery forms part of base Sum Insured and is subject to a waiting period of 36 months.



Out-patient Medical Consultation

Expenses on Medical Consultations as an Outpatient for other than Dental and Ophthalmic treatments are payable with a limit of ₹300/- per consultation. This benefit is payable only on cashless basis.

Out-patient Medical Consultation	
Sum Insured (₹)	Limit for Outpatient consultation per Policy Period for other than Dental and Ophthalmic Treatments (up to ₹)
5,00,000/-	1,200/-
7,50,000/-	1,500/-
10,00,000/-	2,100/-
15,00,000/-	2,400/-
20,00,000/-	3,000/-
25,00,000/-	3,300/-
50,00,000/-, 75,00,000/- and 1,00,00,000/-	5,000/-
Limit of per consultation is ₹300/-	



Out-patient Dental and Ophthalmic Treatment

Expenses incurred as Outpatient on acute treatment to a natural tooth or teeth or Eye are payable up to the specified limits, once every block of 3 years of continuous coverage. This benefit is payable only on cashless basis.

Out-patient Dental and Ophthalmic Treatment

Sum Insured (₹)	Limit for Outpatient Dental and Ophthalmic Treatments for each block of 3 continuous years (up to ₹)
5,00,000/- and 7,50,000/-	5,000/-
10,00,000/- to 25,00,000/-	10,000/-
Above 25,00,000/-	15,000/-



Preventive Health Check-up

We will arrange for a Preventive Health Check-up at Our Network Providers for the applicable package as specified below as per opted Sum Insured.

Preventive Health Check-up

Sum Insured (₹)	Package applicable
5,00,000/- to 10,00,000/-	Package A
Above 10,00,000/-	Package B



E-Domestic Second Medical Opinion

The Insured Person is given the facility of obtaining an “E-Domestic Second Medical Opinion” from the Company’s network of Medical Practitioners.



Unlimited Tele-Consultation

The Insured Person can avail unlimited number of Tele-consultations on Star Health mobile application or digital platforms.



AI driven Face Scan

The Insured Person can avail, AI-driven face scan facility by using Star Health mobile app to know the vital parameters such as heart rate, oxygen saturation, respiration rate up to two times per month per Insured Person in a Policy Year.



Hospital Cash Benefit

The Company will pay a Cash Benefit as applicable for each completed day of hospitalization subject to a maximum of 7 days per hospitalization and 120 days during the policy period, provided there is a valid claim for hospitalization under this policy. This benefit is subject to 1 day Deductible.



Hospital Cash	
Sum Insured (₹)	Hospital Cash Benefit – Limit of Company's liability per day (₹)
5,00,000/-	500/-
7,50,000/- and 10,00,000/-	750/-
15,00,000/- and 20,00,000/-	1,000/-
25,00,000/-	1,500/-
50,00,000/-, 75,00,000/- and 1,00,00,000/-	2,500/-



Accidental Death and Permanent Total Disablement

Coverage available for

- Accidental Death
- Permanent Total Disability following an accident
- Dependent children and persons above 70 years can be covered under accidental death and permanent total disablement up to the Sum Insured of ₹10,00,000/-

* The sum insured for this cover is separately indicated in policy schedule. Cover is available for one Insured Person as opted by the Proposer.



Star Wellness Program

This program is intended to promote, incentivize and to reward the Insured Persons' healthy lifestyle through various wellness activities. The wellness activities as detailed in the website is designed to help the Insured Person to earn wellness reward points which will be tracked and monitored by the Company. The wellness points earned by the Insured Person(s) under the wellness program, can be utilized to get discount in premium. The following table shows the discount on premiums available under the Wellness Program.

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

For more information, Please visit our website: www.starhealth.in.





Optional Cover

Buy Back of Pre-Existing Disease Waiting Period

Upon purchase of this optional cover, the PED Waiting Period reduces from 36 months to 12 months.



Zone Description

(Premiums are payable as per applicable Zone)

Zone A: Delhi, New Delhi, Faridabad, Gurugram, Shahdara, Gautam Buddha Nagar, Ghaziabad, Mewat, Alwar, Baghpat, Bharatpur, Bhiwani, Bulandshahar, Fatehabad, Hisar, Jhajjar, Jind, Kaithal, Karnal, Kurukshetra, Mahendragarh, Meerut, Muzaffar Nagar, Palwal, Panchsheel Nagar (Hapur), Panipat, Rewari, Rohtak, Saharanpur, Sirsa, Sonipat, Charkhi Dadri, Gujarat, Daman and Diu, Dadra and Nagar Haveli, Mumbai (including suburban), Thane, Palghar and Raigad

Zone B: Telangana, Ernakulam, Kollam, Wayanad, Thiruvananthapuram, Mathura, Aligarh, Pune, Nashik and Ahmed Nagar

Zone C: Chennai, Bengaluru, Chengalpattu, Kanchipuram, Tiruvallur, Indore and Gwalior

Zone D: Rest of Uttar Pradesh, Rest of Tamil Nadu, Rest of Kerala, Rest of Maharashtra, Rest of Haryana, Rest of Madhya Pradesh, Rest of Karnataka, Rest of Rajasthan, Andhra Pradesh, Punjab, Kolkata, North 24 Parganas and Paschim Bardhaman

Zone E: Rest of India



Waiting Periods

- **Initial Waiting Period:** 30 days
- **Specified Disease/ Procedure Waiting Period:** 24 months
- **Pre-Existing Disease Waiting Period:** 36 months
- **Delivery Expenses and New Born:** 24 months
- **Bariatric Surgery:** 36 months



Key Exclusions*

Expenses related to any admission primarily for diagnostics and evaluation purposes only, Rest Cure, rehabilitation and respite care, Change of Gender treatments, Cosmetic or plastic Surgery, Breach of law, Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof, Unproven Treatments, Intentional self-injury, Any hospitalizations which are not medically necessary / does not warrant hospitalization.

*Refer to the policy document for complete list of Exclusions under this Product.

The information provided in this brochure is only indicative. This is only a summary of selective SI and features of this Product. For more details on the risk factors, terms and conditions, please read the policy wordings before concluding sale Or visit our website www.starhealth.in



Prohibition of Rebates (Section 41 of Insurance Act 1938)

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakhs rupees.



**97% Claims
Approved in < 3 hrs**



**14000+
Network Hospitals**



**1 Crore+
Claims Settled**



**Telemedicine
Services**

Disclaimer

This is only a summary of the product features and is for reference purposes only. The details of benefits available shall be as described in the prospectus, and will be subject to the policy wording, terms, conditions and exclusions. Please call our customer service if you require any further information (044 - 6900 6900).

Star Health and Allied Insurance Co. Ltd.

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Email: support@starhealth.in | **Website:** www.starhealth.in
CIN: L66010TN2005PLC056649 | **IRDAI Regn. No.:** 129

For more details on risk factors, terms and conditions, please read the prospectus carefully before concluding a sale.

IRDAI or its officials do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.