



StarLife Supreme HomeCall Plan





Conditions for Starlife Supreme HomeCall Plan

The StarLife Supreme HomeCall Plan is a funeral policy which provides insured individuals and family members with a lump sum to enable them organize befitting burial and funeral ceremonies for their loved ones.

The policy pays out the benefit to the policyholder or beneficiary(ies) upon the death of insured family members or the policyholder respectively.

The policy features include:

- A benefit increase option through optional annual increase in premium and benefits which hedges your benefit against inflation
- Cashback if no claim is made over every three-year period from the issue date of the policy
- Waiver of Premium which ensures that all other insureds are covered in the event that the Principal Assured passes away
- Spousal Benefit Option
- Personal Accident Cover
- Hospitalisation Benefit
- End of Term Benefit
- Life Cover Transfer
- Policy does not lapse.

The following are the main conditions of the product.

SECTION 1

Type of Policy

1.1 This policy is a whole life assurance policy with an optional premium paying term of 10 to 30 years. This plan provides benefit in the event of the demise of the lives assured and optional covers within the terms and conditions of the policy.

1.2 It provides a surrender benefit.

1.3 This policy has a minimum term of 10 years and a maximum of 30 years.

1.4 The Sums Assured ranges from ₦2,000.00 to ₦50,000.00.

1.5 Ownership of the policy: The owner of the policy is the person who buys the life insurance policy and whose name appears on the cover page of the policy schedule. This person is referred to as the Policyholder and may or may not be insured under this life insurance policy.

SECTION 2

Eligibility

2.1 Any Principal Assured, his/her spouse, child, extended family shall be eligible for cover provided they are in good health and fall within the ages below:

Assured	Inception Age
Principal/Policy holder	Not more than 64 years
Spouse	Not more than 64 years
Children	Not more than 23 years
Parents/Parents-in-law	Not more than 74 years
Other Extended Family	Not more than 74 years

2.2 The Child cover ceases when the child attains age 23.

2.3 The minimum entry age for the Principal Assured or Policyholder is 18 years.

2.4 The age of the Policyholder or Principal Assured should not exceed 74 years at the end of any selected premium payment term.

2.5 A Policyholder has the option to choose to be an Assured or not.

2.6 Any Policyholder or Principal Assured eligible for coverage shall submit a completed application/ proposal form available on our digital platforms.

SECTION 3

Basic Benefits

Benefits under this policy shall be paid in Ghanaian currency.

3.1 Basic Cover Benefits Category

The policy has the following benefits category.

LIVES	OPTION 1	OPTION 2	OPTION 3	OPTION 4	OPTION 5	OPTION 6	OPTION 7	OPTION 8	OPTION 9	OPTION 10
Principal Assured	2,000	5,000	7,500	10,000	15,000	20,000	25,000	30,000	40,000	50,000
Spouse	2,000	5,000	7,500	10,000	15,000	20,000	25,000	30,000	40,000	50,000
Children	1,000	2,500	3,750	5,000	7,500	10,000	12,500	15,000	20,000	25,000
Parents	2,000	5,000	7,500	10,000	15,000	20,000	25,000	30,000	40,000	50,000
Parents in-law	2,000	5,000	7,500	10,000	15,000	20,000	25,000	30,000	40,000	50,000
Extended family member	2,000	5,000	7,500	10,000	15,000	20,000	25,000	30,000	40,000	50,000

3.2 Waiver of premium

In the event that a Principal Assured dies before age 65, the policy has an automatic Waiver of Premium option which enables the policy to be in force for the other family members without receiving any premium from them until the Principal Assured would have been 65 years. The other family members on the policy will only benefit from this if they have gone past their waiting periods accordingly. However, if the benefits increase option was exercised, this option would automatically cease upon the death of the Principal Assured.

3.3 Cashback

A cashback of 25% of the annual premium will be payable to the policyholder if no claim is made over every 3-year period from the issue date of the policy. This payment will only be made if all premiums were received.

The cashback computation does not take hospitalisation premiums paid into consideration.

3.4 Surrender Benefit

A surrender benefit of ten percent (10%) of total premiums (less administrative charges and cashback if any paid) will be paid in the event that the Principal Assured or Policyholder opts out after the policy has been in force for at least six (6) months. Premiums used in computation will be based on surviving lives of the policy..

3.5 End of Term Benefit (ETB)

There are two options under this:

When the Principal Assured or Policyholder survives the premium payment term of the policy without making any claim, there is a refund of premiums (less administrative charges and any cashback paid). If the Principal Assured or Policyholder wishes to take the policy again, all terms and conditions will apply as if the policy is being purchased anew.

Or

A Free cover is activated and the basic cover for all Assureds shall continue till death without premiums being paid. However, if the benefits increase option was exercised, this option shall automatically cease at the end of the payment term. All Assureds must have been on the policy for at least 60 months before they can qualify for the Free Cover.

An option must be selected by the Principal Assured or Policyholder at the inception of the policy.

SECTION 4

Optional Benefits (Riders)

4.1 Personal Accident Cover

The Personal Accident cover provides compensation in the event of injuries leading to total and permanent disability caused solely by violent, accidental, external and visible events. The compensation shall not exceed the sum assured of the Personal Accident cover and the disability must be medically certified by a Qualified Medical Practitioner.

Total and Permanent Disability, as defined above should wholly prevent the assured from engaging in any business, or occupation, or performing any work, physical or mental, for compensation or profit, provided, however, that the total disability has become a permanent one, and must have continued uninterrupted for a period of at least six (6) months or one hundred and eighty (180) days. Total and Permanent Disability shall be understood to have begun on the first day that such disability has occurred.

This cover is for only Principal Assureds and the cover ends when the Principal Assured attains the age of 60 years.

Option	Personal Accident Sum Assured €
1	5,000.00
2	10,000.00
3	15,000.00
4	20,000.00

Also refer to the Permanent Disability Scale below for personal accident benefits payable:

Injury	Percentage	Injury	Percentage
Loss /loss of use of both hands at or above the wrist	100	Loss of leg	70
Loss/loss of use of both feet at or above the ankles	100	at hip between knee and hip	50
Loss/loss of use of one hand at or above the wrist and of one foot at or above the ankle.	100	below knee	35
Loss/loss of use of all fingers and thumbs of both hands.	100	Loss/loss of use of one hand at or above the wrist and of one foot at or above the ankle.	100
Total and irremediable blindness in both eyes.	100	Total and irremediable deafness - Both ears	
Total and irremediable paralysis.			
Total and irremediable blindness in both eyes.	100		
Loss of arm			
At shoulder	60		
Between elbow and shoulder	50		
At elbow	47.5		
Between wrist and elbow	45		
Loss /loss of use of hand at wrist	42.5		
Loss of ankle	32.5		

4.2 Hospitalisation Benefit

This provides financial benefit to the Principal Assured for his or her medical care when he or she spends two (2) or more nights in a hospital and is treated as an in-patient. However, for accident- related hospitalisation, the two (2) nights in the hospital before cover will be waived.

- The hospitalisation benefit provides up to an amount specified in the policy schedule during the period that the Principal Assured was hospitalised.
- The benefit payment shall be payable up to the maximum benefit or sum assured chosen at the policy inception.
- The Accommodation benefit is for a maximum of 30 days in a year.
- There is a waiting period of 90 days before benefits are activated.
- For annual paying clients the waiting period of 90 days is waived but the two (2) nights in the hospital before cover will apply.
- Any benefit paid reduces the outstanding benefit for the year.
- Increase in benefits is not automatic. Clients who wish to move from one level of hospitalisation benefit to another must put in a request on the anniversary date of their policy.

	Option 1 ₹	Option 2 ₹	Option 3 ₹	Option 4 ₹
In - Patient Benefits for the Year	1400	2500	3600	5000
Daily Accomodation Benefit	30	50	70	100
Drugs (Annual Benefit)	250	500	750	1000
Tests(Pathology & X-ray Annual Benefit)	250	500	750	1000

This cover is for only Principal Assureds and the cover ends when the Principal Assured attains the age of 60 years.

4.2.1 Quarterly Benefits for monthly premium payments

		PRO-RATED BENEFITS				PRO-RATED BENEFITS				PRO-RATED BENEFITS			PRO-RATED BENEFITS		
Items	Option 1	QTR 3	QTR 2	QTR 1	Option 2	QTR 3	QTR 2	QTR 1	Option 3	QTR 2	QTR 1	Option 4	QTR 3	QTR 2	QTR 1
Premium Per Month	GHS 10.00				GHS 15.00				GHS 20.00			GHS 25.00			
In-patient benefit for the year	1400	1050	700	350	2500	1875	1250	625	3600	1800	9000	5000	3750	2500	1250
Daily Accommodation Benefit	30	30	30	30	50	50	50	50	70	70	70	100	100	100	100
Drugs (Annual Benefit)	250	187.5	125	6	500	375	250	125	750	375	187.5	1000	750	500	250
Tests (Pathology & X-ray Annual Benefit)	250	187.5	125	62.5	500	375	250	125	750	375	187.5	1000	750	500	250

The payable benefit within a quarter shall be up to the maximum benefit or sum assured shown in the table. Any benefit paid reduces the outstanding benefit for the quarter and year.

SECTION 5

Effective Date of Assurance

The effective date of assurance shall be the issue date as shown on the cover page following the receipt of the first premium and approval by the Company.

SECTION 6

Schedule of Assurance

The maximum death benefit amount payable in respect of members covered under the policy shall be in accordance with the following schedule:

- a. For Children 50% of the Sum Assured
- b. All other Assureds 100% of the Sum Assured.

SECTION 7

Insuring Clause

Upon receipt by the Company of due proof in writing that any Assured hereunder shall have died, or the Principal Assured has become totally and permanently disabled or hospitalised, the Company shall pay the applicable benefit in accordance with the conditions of this policy.

SECTION 8

Cooling Off Period

The Policyholder is entitled to a thirty-one (31) day cooling off period after signing the proposal form. Within this period, the policyholder is given the option to opt out of the contract if he or she is not satisfied with the policy conditions by returning the policy schedule or and the policy wordings to the Company. The Company shall then refund the first premium paid upon the said return, less any administrative fees.

SECTION 9

Waiting Period

9.1 The waiting period starts counting after the issue date and this is the period within which no benefits are payable except in the event of accidental death (refer to 9.3).

This policy shall be subject to a waiting period of ninety (90) days for the Principal Assureds, spouse and children. In the case of parents, parents-in-law and extended family members, the waiting period shall be three hundred and sixty-five (365) days.

9.2 If death occurs within the first ninety (90) or three hundred and sixty-five (365) days as applicable, non-payment shall be made, but the premiums paid in respect of the deceased shall be refunded.

9.3 In the event of accidental death occurring during the waiting period the sum assured shall be paid in full. Accidental death means death caused by external, violent and visible means other than suicide.

SECTION 10

Premiums

10.1 The Company shall advise the Principal Assured or the Policyholder of premiums due under this policy.

10.2 The initial premium for this policy, the planned periodic contribution and the payment interval selected are as shown on the cover page and schedule attached.

10.3 Premiums are payable in advance, on or before their respective due dates at the selected frequency while the policy is in-force.

10.4 This policy will not be in force when premium is not paid in a particular month except as hereinafter indicated under Section 12.

10.5 Payments under this policy shall be made in Ghanaian Currency.

10.6 If annual premiums are paid in advance, a 10% discount would be given on the calculated premium. This discount does not affect premiums for hospitalisation.

SECTION 11

Right to effect change

The Policyholder or the Principal Assured has the right to effect changes to his/her policy by completing the relevant forms of such change available on the Company's website or at any registered office of the Company.

The following changes are allowed and with their required documentations needed:

a. Beneficiary (ies)

Document and information required;

- i. Valid ID of Policyholder
- ii. Original policy document (Not mandatory).

b. Trustee

Document and information required;

- i. Valid ID of Policyholder
- ii. Original policy document (Not mandatory).

c. Source of payment

Document and information required;

- i. Valid ID of Policyholder
- ii. Completed mandate form for banks or institution
- iii. New account number/staff ID.

d. Address

Document and information required;

- i. Valid ID of Policyholder
- ii. New address
- iii. Proof of address like electricity bill, tenancy agreement, GPS location etc (not mandated).

e. Telephone

Document and information required;

- i. Valid ID of Policyholder
- ii. New Phone number.

f. Signature

Document and information required;

- i. Valid ID of Policyholder
- ii. A sworn Affidavit.

g. Name

Document and information required;

Valid ID of policyholder and clear photostat copy of any of the following:

- i. A sworn Affidavit
- ii. Gazette
- iii. A newspaper clip
- iv. A marriage certificate

h. Other Assureds

Document and information required;

- i. Valid ID card
- ii. Original policy document (Not mandated)

A valid National ID shall be the preferred ID.

SECTION 12

Grace Period

A grace period of thirty-one (31) days shall be allowed for the payment of every premium after its due date during which period the assurance hereunder shall continue to be in force. Should death occur within the grace period, the overdue premium will be deducted from the benefits payable.

SECTION 13

Lapse

This policy does not lapse if premium is not paid on or before its due date. However, if an insured event occurs and policy is in arrears except under the provision provided above in section 12, the benefits to be paid will be recalculated subject to the received premiums before the occurrence of the insured event.

SECTION 14

Life Cover Transfer

This feature allows the Principal Assured to transfer 50% of his or her Life Cover to one family member only once within the duration of the premium paying term of the policy.

The following conditions must be met before this transfer shall be done:

- a. The family member must be younger or the same age as the Principal Assured
- b. Family members who qualify to receive this transfer are his or her spouse, siblings or an extended family member
- c. The new Life Assured must go through a 365 days waiting period after the exchange to enjoy the benefit
- d. A refund of premiums is paid if the new Life Assured dies within the waiting period. The premiums refunded will be premiums of the new Life Assured effective from the day the Life Cover Transfer was made.

SECTION 15

Beneficiary(ies)

15.1 The Principal Assured or the Policyholder shall be the sole beneficiary of any other Assured covered under this policy.

The Principal Assured shall name beneficiaries to the policy in the event of his or her death.

15.2 If the event that the beneficiary(ies) is/are below 18 years, the Company will pay the death benefit to the named Trustee on his/her/their behalf.

15.3 Contingent beneficiaries may be named to receive the proceeds if the primary beneficiary dies before the Assured.

15.4 If no named beneficiary is living when the Assured dies, the proceeds will be paid to the estate of the deceased Policyholder.

SECTION 16

Mis-Statement of Age or Date of Birth

If the age or date of birth of the Principal Assured or any other Assured member has been mis-stated, the Company shall amend the death benefit amount to reflect what the premium would have purchased at the correct age at the inception or renewal date of the policy.

If the age or date of birth of the Principal Assured or any other Assureds has been mis-stated and falls above the maximum entry age, the premiums paid in respect of the affected Assured shall be refunded in the course of the policy or in the event of a claim.

SECTION 17

Benefits Increase Option

Option	Annual Premium Increase	Annual Benefit Increase
1	5%	3%
2	10%	6%
3	15%	9%

17.1 Where this option is exercised, the above table of annual premium increase with the corresponding annual sum assured increase shall apply.

17.2a. The choice of Increase Option 1 to 3 must be made by the Principal Assured or the Policyholder at the inception.

17.2b. The Policyholder may select the benefits increase option if not selected at inception or change the increment option selected within ten months after the policy has been issued.

17.2c The Policyholder may also delete the increment option on the anniversary date of the policy. The premium payable and the Sum Assured shall remain at the existing premium and corresponding Sum Assured until maturity or in the event of the death of the Policyholder.

SECTION 18

Claims Notification

On the death or total and permanent disability of any Assured covered under this policy, the Company should be notified as soon as possible within ninety (90) days.

SECTION 19

Payment of Claims

The Company will pay claims on receipts of such information it requires establishing a claim. Information required to establish a claim will be, but not by way of limitation:

- a. A valid photo national ID of the Claimant
- b. A valid Medical Certificate of Cause of Death/ Death certificate
- c. Evidence of relationship with the Principal Assured

- d. Evidence of coverage
- e. In addition to the above a Police report in the case of accidental death
- f. For a total and permanent disability claim under the Personal Accident cover the Disability must be medically certified by a Qualified Medical Practitioner.

The Company reserves the right to repudiate an invalid and or fraudulent claim.

Procedure to Claim Hospitalisation Benefits:

- a. The Principal Assured shall identify the nearest health facility designated by the Company
- b. The Principal Assured shall submit his or her policy number to the health facility
- c. The health facility will run a check to identify the Principal Assured and the allocated benefits he or she is to receive
- d. The health facility will then provide services accordingly.

In the event of an emergency where the Assured is hospitalised at a health facility that is not part of the Company's network, the Assured must put in a claim within 48 hours upon discharge from the health facility.

Documentation needed for the claim:

- a. Copy of attested Hospital Discharge summary
- b. Medical report
- c. Original endorsed receipts of medical bill payments
- d. Valid Photo identity card
- e. Any other relevant document as required by the Company.

SECTION 20

Settlement of Disputes

In the event of any dispute arising between the parties to the Policy or their successors in title concerning any matter relating to the Policy, the parties shall endeavour to resolve the matter themselves. In the event of the parties being unable to resolve the dispute themselves, the dispute shall be first referred to the Compliant Management & Advice Bureau (CMAB) of Ghana Insurers Association (GIA). A party who is dissatisfied with the decision of the Compliant Management & Advice Bureau (CMAB) may refer the dispute to the National Insurance Commission.

SECTION 21

Incontestability

Provided that no claims are presented to the Company within the first two policy years from its effective date, the Company will not contest the contract on the subsequent claim of the contract, except in case of fraud, misrepresentation and non-disclosure of a material fact. The Company will be entitled to contest the contract on the grounds that the contract was issued on the base of an incorrect declaration or statement made by the insured member either fraudulent or in the knowledge that it contained a material inaccuracy.

SECTION 22

Voidability of this Policy

Notwithstanding any of the provisions in this policy, wilful misrepresentation in answer to any of the questions by the assured in the application for the policy or reinstatement shall be deemed material misrepresentation and the company reserves the right to render this policy null and void and such right of invalidation shall survive the occurrence of death.

SECTION 23

Exclusions

The Company shall not be liable to pay any benefit in respect of any event arising directly or indirectly from or traceable to any of the following events:

23.1 Death caused by rioting, civil disturbances or by epidemic, firing squad or mutiny or insurrection or public execution or while committing an unlawful act.

23.2 No benefit shall be payable if the Life Assured commits suicide, while sane or insane, within two (2) years from the date of issue of this policy.

23.3 No benefit shall be payable if the Life Assured dies within two (2) years of taking the policy, and the death is in anyway due to or arising directly or indirectly, entirely or partially from HIV/AIDs.

23.4 Any Assured engaging in aviation other than as a fare paying passenger on a regular recognized air route or part of the cabin crew.

23.5 War (whether war be declared or not) mutiny, civil war, riot, civil commotion or insurrection, invasion, hostilities, act of foreign enemy, revolution, conspiracy or state of siege.

23.6 Active participation in hazardous sport or pursuit including but not limited to rock climbing, scuba diving, hang gliding, mountaineering, horse riding, hunting, motor-racing, power boat racing or fighting (except in self-defence).

23.7 Any illness or injury that originated before the Assured member was accepted for this insurance unless such illness or injury or any related preceding condition was fully disclosed on the application form and accepted by the Company without restrictions or such death occurred after the policy had been in force for a minimum period of twenty-four (24) months.

23.8 Any accident directly or indirectly caused by or contributed to or arising from ionizing radiations or contamination by radioactivity from any nuclear fuel or nuclear weapons material or from any nuclear waste from the combustion of any nuclear fuel. Solely for the purposes of this exclusion, combustion shall include any self-sustaining process or nuclear fission.



23.9 Should death arise from any of the above events in this section, the benefit shall be equal to the total premiums paid up to the time of death less any administrative charges.

SECTION 24

Definitions

24.1 Accidental Death

Death caused solely through accidental, violent, external, visible and tangible means.

24.2 Assured

A person whose life is insured under the life insurance policy.

24.3 Beneficiary

A person designated to receive the death benefit of the life insurance policy in the event of the death of the Policyholder or Principal Assured.

24.4 Cancellation

The termination of an insurance policy, before its expiration, by either the Insured or the Insurer.

24.5 The Company

This refers to StarLife Assurance Limited Company.

24.6 Death due to Health-related Causes

Death due to any cause other than Accidental Death.

24.7 Extended family members

Other members of the Policyholder's family apart from his or her spouse and children including step-parents, step children, uncles, aunts, nieces, nephews, siblings, grandparents etc.

24.8 Hazardous Pursuits

Defined as participation in risky or hazardous sports, pursuits or activities including, but not limited to car racing, ballooning, parachuting, hang-gliding, paragliding and drag racing.

24.9 Parent

The biological father or mother of the Policyholder.

24.10 Policy Term

The policy term is the total duration of your life insurance coverage.

24.11 Premium Paying Term

The premium paying term is the number of years for which the premiums have to be paid. The premium paying term can be equal to or less than the policy term.

24.12 Policyholder

The person who buys and owns the life insurance policy. The Policyholder may or may not be insured under this life insurance policy.

24.13 Principal Assured

This is the Policyholder who is also insured under the life insurance policy.



24.14 Sum Assured

The benefit payable should the event insured under the policy occur or happen.

24.15 Surrender

This is the termination of an insurance policy before its maturity date by the policyholder. This is after the policy has acquired some surrender value.

24.16 Surrender Value

The amount payable to the policyholder if he/she decides to exit the policy before the end of the policy term.

24.17 Whole Life Assurance Policy

Whole life assurance policy makes provision to cover the insured person throughout his or her life.

APPENDIX

SECTION 1

Premium Payment

Premiums can be paid via the following modes.

1. **Mobile Money**
 - MyStar App (MTN, VODAFONE, AIRTEL/TIGO).
 - *7373* (MTN, VODAFONE).
 - *887*240# (AIRTEL TIGO).
 - *170# MTN ONLY (Direct payment to this number 0245287497) or via the general merchant process.
2. **Controller and Accountant - General's Department (CAGD)**
3. **Ghana Police Service (GPS)**
4. **Ministry of Defence (MOD)**
5. **Corporate Institutions**
6. **Cash**
7. **Cheque**
8. **Bank Deductions**

SECTION 2

How to Contact Us

We are accessible through the following digital and physical channels:

1. **Digital Channels**
 - Mobile App.
 - MyStar App (Downloadable on any of the app stores).
 - Website: www.starlifeassurance.com
2. **Social Media**
 - **Facebook:** StarLife Assurance Company.
 - **Instagram:** [starlife_assurance](https://www.instagram.com/starlife_assurance).
 - **Twitter:** [starlifegh](https://twitter.com/starlifegh).
 - **WhatsApp:** 05480817856.
3. **E-mail:**
 - customerservice@starlifeassurance.com
 - info@starlife.com.gh

SECTION 3 - Complaint Management.

We earnestly seek feedback on our services and conduct. You can channel all your enquiries, questions, complaints, and other feedback to us through.

- **WhatsApp** 0548081786
- **Email** customerservice@starlife.com.gh
- **Telephone** 0302739600

Walk-in to any of our offices nationwide

**You can also contact the below if unsatisfied
with our service**

Complaint Management Bureau of GIA

complaints@ghanainsurers.org.gh

0800442000 / 0302510913