

PRODUCT BOOKLET



STAR

Personal & Caring

Health
Insurance

The Health Insurance Specialist



Star Health & Allied Insurance Co Ltd.

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Star Family Health Optima Insurance Plan	
Age at Entry - Adult	18 years to 65 years
Age at Entry - Dependent Children	16 Days to 25 years - Renewal till Age 25 years only
Policy Type	Family Floater
Pricing	Zone Based
Sum Insured Options	3Lac/4Lac/5Lac/10Lac/15Lac/20Lac and 25Lac
Family Size	2A/2A+1C/2A+2C/2A+3C/1A+1C/1A+2C/1A+3C
Family includes	Proposer/Spouse/Three Dependent Kids
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	120 days To continue policy without loss of continuity benefits(Waiting Period PED Coverage)
Zones	Classification of Zone determines Premium
Zone - 1	Delhi(including NCR), Mumbai (including Thane), Ahmedabad, Baroda and Surat
Zone - 1A	Chennai, Bangalore, Pune, Nashik, Ernakulum, Trivandrum and Rest of Gujarat
Zone - 2	Coimbatore, Indore and Rest of Kerala
Zone - 3	Rest of India (Other than covered under Zone-1, Zone - 1A & Zone - 2)
Hospitalisation	in-patient hospitalisation - Minimum period of 24 hours
Room Rent, Boarding and Nursing Expenses for 3, 4 Lac SI –(any zone)	Rs. 5000 per day
5,10,15,20& 25 Lac SI - Policy Purchased from any zone	Single Standard A/C Room - Single Occupancy A/C room with attached washroom, Couch for attendant, TV and Telephone
Treatment at Preferred Network Hospitals	Lump sum benefit on choosing PNH - 3 Lac SI - Rs. 3000; 4 Lac SI - Rs. 4000; 5Lac and above SI - Rs. 5000/policy year
Per day benefit on Treatment in Shared Accommodation	3 Lac - 15 Lac - Rs. 800 20Lac & 25 Lac - Rs. 1000 - Benefit not extended for state in ICU/High dependency unit
ICU Charges	Actual
Medical Professional Fees including specialist's fee	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees - Actual
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials, X-ray, Diagnostic Imaging, Dialysis, Chemotherapy, Radiotherapy, Pacemaker, Stent etc. - Actual
Road Ambulance Charges	Rs. 750 per hospitalisation - Rs. 1500 per policy year
Air Ambulance - for 5 Lac and above SI	10% of SI
Emergency Domestic Medical Evacuation	1Lac to 4Lac - Rs.5000 / 5 Lac to 15Lac - Rs.7500 / 20Lac & 25Lac - Rs. 10000
Pre - Hospitalisation Expenses	60 days Prior to Hospitalisation - Actual - Relevant to the Hospitalisation
Post - Hospitalisation Expenses	90 days from Discharge - Actual - Consultant fees, Diagnostic Charges, Medicines and drugs - relevant to Hospitalisation
Day Care	All Day Care Procedures covered - 24 hours of hospitalisation not required
Sub-limit for Day Care Procedure for Cataract - SI/Per Episode / Per Policy Period	1&2 Lac SI - 12000/12000 3Lac SI - 25000 / 35000 4Lac SI - 30000 /45000 5 Lac SI - 40000/60000 10Lac & above SI - 50000/75000
New-Born Baby cover - Mother covered at least 1 year in policy	Cover starts from 16th day of Child Birth till the end of current policy year - 10% of SI - Max 50000 - Child birth Intimation Endorsement required
Organ Donor Expenses on Organ Transplantation	10% of SI - Max.Rs. 1Lac; Not available for Donor screening and Post-Donation Complications - Provided Claim for transplantation Payable
AYUSH Treatment Coverage Limits	1Lac-4Lac - Rs. 10000; 5 Lac-15Lac - Rs. 15000; 20Lac&25Lac - Rs. 20000
Assisted Reproduction (Infertility) Treatment - After 3 years Waiting Period for 5 Lac & above SI	Inpatient / Day Care - 5 Lac Rs. 100000 ; 10 Lac and above Rs. 200000 ; For every continuous block of three years
Domiciliary Hospitalisation Benefit	1. Patient could not be moved to hospital 2. Non-availability of Rooms in hospital 3. Treatment provided at home for more than 3 days - Considered as Hospitalisation
Recharge Sum Insured Benefit	For 3Lac SI-Rs. 75000; For 4 Lac SI-Zone Rs. 100000; For 5 Lac & above SI-Rs. 150000
Automatic Restoration Benefit	Three times in a Policy Year - 100% of SI restored Cannot be used for illness/disease for which claims made already in the Current Policy Year + Hospitalisations out of Accidents; Provided on Complete exhaustion of Basic SI and Accumulated NCB
No Claim Bonus- Max Accumulation	25% of SI for first year and later 10% of SI - every claim free year - Max Accumulation 100% of SI
25% Additional Two Wheeler Road Traffic Accident Sum Insured	Insured riding two wheeler / riding as pillion rider in two wheeler wearing helmet - meeting with Road Traffic Accident - 25% SI-Max 5 Lac
Free Annual Health Check-up - on every Claim free year	3 Lac SI - Rs. 750; 4Lac SI-Rs. 1000; 5Lac - Rs. 1500; 10 Lac SI - Rs. 2000; 15Lac SI Rs. 2500; 20 Lac SI Rs. 3000; 25 Lac SI - Rs. 3500
Compassionate Air Travel Benefit - for 10 Lac and above SI	Insured hospitalised for life threatening emergency in a city away from his residence - one immediate family member's air travel cost reimbursed up to Rs. 5000
Free Second Medical Opinion	Medical records forwarded to e_medicalopinion@starhealth.in or sent by post - Medical opinion will be sent to the insured based on the medical records submitted; Opinion for medical reasons and not for medico-legal purposes.
Repatriation of Mortal Remains	Cost of Embalming, Coffin Charges and Transportation cost of Mortal Remains up to Rs. 5000 - During an admissible Claim
Co-pay-for Clients-Age at Entry above60 Years	20% Co-pay applied on Every Claim
Co-pay for Hospitalisation on Package Treatment Cost	No Co-pay applicable
30 days waiting Period	Any Hospitalisation - Except Hospitalisation arising out of Accidents
24 months waiting Period	Like - Cataract, Prolapse of intervertebral Disc(Non-Accidental), Varicose-Veins & Ulcers, Hernia, Fistula/Fissure, Congenital internal Disease, - For full list refer Product Boucher
48 months waiting Period	Pre-Existing Diseases(PED) declared in Proposal, Accepted and Endorsed in Policy
Permanent Exclusions	Like - Congenital External Defects, Dental Treatments(Non-Accidental), Venereal Diseases, Psychiatric treatments, Intentional Self-Injury, Pregnancy and Child Birth related treatment (Except ART Coverage), Weight control, Cosmetic Treatments, Plastic Surgery - for full list refer Product Boucher
Declined Risks (Not Eligible for persons with)	Heart diseases, Cancer, Kidney Diseases, Major CNS ailments(CVA, Parkinson's Disease, Alzheimer's Disease), Cirrhosis of Liver, Chronic Obstructive Pulmonary Disease (COPD), Auto immune/Connective tissue disorders requiring long term steroids and immunosuppressant's
Documentary Requirements	Filled in Proposal form, Recent P.P. Size Colour Photo (1- for 3 years to 50 years; 2-for More than 50 years old), Age Proof for More than 45 years Old, Bank Details of Proposer when Premium is more than Rs. 25000
Acceptance Limits	NO PRE ACCEPTANCE MEDICAL SCREENING FOR SI 4 Lakh AND ABOVE, However with PED -Medical Opinion through lab portal by the Corporate Office Doctor - Accepted at Operating Office and person Above Age 50 years opt for below 4 lakh Sum Insured Medical screening required.
Pre-Acceptance Medical Screening - Age above 50 Years - Sum Insured up to 5 Lac	Height/Weight/BMI, Blood Pressure, Random Blood Sugar, Serum Creatinine, ECG, Urine-Routine Analysis
Pre-Acceptance Medical Screening - Age above 50 Years - Sum Insured more than 5 Lac	All the above Tests Plus X-Ray(Chest) and TMT
Tax Benefits - Sec-80D	Rs. 25000 - for Age up to 59 years; Rs. 30000 - for Age 60 years and above clients

Strictly for internal training purpose only. Refer to Boucher for more information

Star Medi – Classic Insurance Policy

Age at Entry - Adult	18 years to 65 years
Age at Entry - Dependent Children	5 months to 25 years - Renewal till Age 25 years only
Policy Type	Individual
Pricing	Zone Based
Zone - 1	Delhi(including NCR), Mumbai (including Thane), Pune and State of Gujarat
Zone - 2	Rest of India (Other than covered under Zone-1)
Sum Insured Options	1.5Lac, 2Lac, 3Lac, 4Lac, 5Lac, 10Lac & 15Lac
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	30 days
Hospitalisation	in-patient hospitalisation - Minimum period of 24 hours
Room Rent, Boarding and Nursing Expenses	2% of Sum Insured - Max Rs. 5000 per day
ICU Charges	Actual
Professional Fees	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees - Actual
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials, X-ray, Diagnostic Imaging, Dialysis, Chemotherapy, Radiotherapy, Pacemaker, Stent etc. - Actual
Road Ambulance Charges	Rs. 750 per hospitalisation - Rs. 1500 per policy year
Pre - Hospitalisation Expenses	30 days Prior to Admission - Actual - Relevant to the Hospitalisation
Post - Hospitalisation Expenses	60 days from Discharge - (7% of nursing, surgeon/consultant fees, diagnostic expenses, drugs cost) - Max Rs. 5000 - (On Package rate Claims - Room Rent Considered @ Rs. 5000)
Day Care	101 - Day Care Procedures covered - 24 hours of hospitalisation not required
Coverage for Non-Allopathic Treatment	up to Rs. 25000/- per year on AYUSH hospitalisation
Sub-limit for Day Care Procedure for Cataract - SI/Per Episode / Per Policy Period	1.5&2 Lac / 12000/12000 3,4&5Lac / 20000 / 30000 10&15Lac / 30000 /40000
Automatic Restoration Benefit	200% of SI - Cannot be used for illness/disease for which claims made already in the Current Policy Year + Hospitalisations out of Accidents
Annual No Claim Bonus- Max Accumulation	5% of SI for every claim free year - Max Accumulation 25% of SI
Free Health Check-up - For 2Lac & above SI	1% of average Sum Insured - Max Rs. 5000/- for every block of four continuous claim free years
Discount on Premium	5% Discount given - if 2 years premium payment is opted
Coverage for HIV Positive Population	HIV
Optional Benefit - Hospital Cash - On Valid Hospitalisation Claim - Rs. 350 +GST	Cash Benefit of Rs. 1000/- for each and every completed day of hospitalisation subject to a maximum of 7 days per hospitalisation and 14 days per policy year. Date of Admission and Date of Discharge not considered
Engaging Attendant after Discharge - Rs. 580/ +GST	Rs. 400 per day for Maximum of 5 days per hospitalisation and 14 days per policy year for Persons aged above 60 years. First day not considered
Co-pay-for Clients-Age at Entry above60 Years	10% Co-pay applied on Every Claim
Co-pay for Hospitalisation on Package Cost	20% Co-pay applied on Claims on Package Charges basis
30 days waiting Period	Any Disease contracted by the insured - Not applicable to Hospitalisation arising out of Accident
24 months waiting Period	Like - Cataract, Prolapse of intervertebral Disc(Non-Accidental), Varicose-Veins&Ulcers, Hernia, Fistula/Fissure, Congenital internal Disease, - For full list refer Product Boucher
48 months waiting Period	Pre-Existing Diseases(PED) declared in Proposal, Accepted and Endorse in Policy
Permanent Exclusions	Like - Congenital External Defects, Dental Treatments(Non-Accidental), Venereal Diseases, Psychiatric treatments, Intentional Self-Injury, Pregnancy and Child Birth related, Weight control, Cosmetic Treatments, Plastic Surgery - for full list refer Product Boucher
Declined Risks (Not Eligible to Buy)	Heart diseases, Cancer, Kidney Diseases, Major CNS ailments (CVA, Parkinson's Disease, Alzheimer's Disease), Cirrhosis of Liver, Chronic Obstructive Pulmonary Disease (COPD), Auto immune/Connective tissue disorders requiring long term steroids and immunosuppressant.
Acceptance Limits	up to Age 50 years - Without PED - Accepted at Operating Office Up to Age 50 years - With PED -Medical Opinion through lab portal by the Corporate Office Doctor - Accepted at Operating Office. Above Age 50 years - With/Without PED - Medical Opinion through lab portal by the Corporate Office Doctor Accepted at Operating Office.
Pre-Acceptance Medical Screening - Age above 50 Years - Sum Insured up to 7.5 Lac	Height/Weight/BMI, Blood Pressure, Random Blood Sugar, Serum Creatinine, ECG, USG(Whole Abdomen), Urine-Routine Analysis
Pre-Acceptance Medical Screening - Age above 50 Years - Sum Insured more than 7.5 Lac	All the above Tests Plus X-Ray(Chest) and TMT
Tax Benefits - Sec-80D	Rs. 25000 - for Age up to 59 years; Rs. 30000 - for Age 60 years and above clients

Star Comprehensive Health Insurance Plan	
Age at Entry - Adult	18 years to 65 years
Age at Entry - Dependent Children	3 months to 25 years - Renewal till Age 25 years only
Policy Type	Individual & Family Floater
Sum Insured Options	5Lac/7.5Lac/10Lac/15Lac/20Lac & 25Lac
Family Size	1A/2A/2A+1C/2A+2C/2A+3C/1A+1C/1A+2C/1A+3C
Family includes	Proposer/Spouse/Three Dependent Kids
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	30 days - To continue policy without loss of continuity benefits(Waiting Period PED Coverage)
Hospitalisation	in-patient hospitalisation - Minimum period of 24 hours
Room Rent, Boarding and Nursing Expenses	Single Standard A/C room - Anywhere in India
ICU Charges	Actual
Medical Professional Fees including specialist's fee	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees - Actual
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials, X-ray, Diagnostic Imaging, Dialysis, Chemotherapy, Radiotherapy, Pacemaker, Stent etc. - Actual
Road Ambulance Charges - per policy period	Rs. 2000 - 5Lac SI; Rs. 3000 - 7.5Lac SI; Rs. 3500 -10Lac SI; Rs. 4000 - 15Lac SI; Rs. 4500 - 20Lac SI; Rs. 5000 - 25Lac SI;
Air Ambulance – Per Policy Period	10% of SI – Not Available for 5Lac SI
Pre - Hospitalisation Expenses	60 days Prior to Hospitalisation - Actual - Relevant to the Hospitalisation
Post - Hospitalisation Expenses	90 days from Discharge - Actual - Consultant fees, Diagnostic Charges, Medicines and drugs - relevant to Hospitalisation
Day Care	405 Day Care Procedures covered - 24 hours of hospitalisation not required
Sub-limit for Day Care Procedure for Cataract - SI/Per Episode / Per Policy Period	No Sub-limits for Cataract Day Care Procedure - Actual Cost of Day Care - Cataract - Covered
Coverage of Delivery Charges - Normal Delivery - Will not reduce SI - Will not impact NCB	5Lac SI - 10000; 10Lac SI - 20000; 15Lac&above SI - 25000 - Waiting Period of 3 years - Policy taken as floater
New-Born Baby cover - (for remaining period of Policy year)	5Lac SI - 50000; 10Lac&above SI - 100000 - When Delivery Charges Claim is payable - Congenital Disorders also covered
Vaccination - New Born Baby	Rs. 1000 - until new born is 1 year old - new born added in Policy on renewal
Out-Patient Dental and Ophthalmic Treatment	5Lac & 7.5Lac SI - 5000; 10Lac&above SI - 10000 - For each block of 3 Continuous Year - Claim made or not
Out-Patient Consultation (other than Dental & Ophthalmic) Limit per consultation Rs. 300	Rs. 1200 - 5Lac SI; Rs. 1500 - 7.5Lac SI; Rs. 2100 -10Lac SI; Rs. 2400 - 15Lac SI; Rs. 3000 - 20Lac SI; Rs. 3300 - 25Lac SI;
Hospital Cash	Rs. 500 - 5Lac SI; Rs. 750 - 7.5Lac & 10Lac SI; Rs. 1000 -15Lac & 20Lac SI ; Rs. 1500 - 25Lac SI;
Free Health Check-up	Rs. 5000 - 5Lac SI; Rs. 7500 - 7.5Lac & 10Lac SI; Rs. 12000 -15Lac, 20Lac&25Lac SI;
Bariatric Surgery Coverage - Part of SI	High Blood Pressure etc.; Unable to lose weight through traditional methods like diet and exercise; Minimum Age at the time of surgery above 18 years; 3 years waiting period; Prescribed by two surgeons; Cashless treatment with prior approval
Cover	Accident Cover Sum Insured Equal to Health Sum Insured - Cover for one insured Adult opted by Proposer
Free Second Medical Opinion	Medical records forwarded to e_medicalopinion@starhealth.in or sent by post - Medical opinion will be sent to the insured based on the medical records submitted; Opinion for medical reasons and not for medico-legal purposes.
Domiciliary Hospitalisation Benefit	1. Patient could not be moved to hospital 2. Non-availability of Rooms in hospital 3. Treatment provided at home for more than 3 days - Considered as Hospitalisation
Automatic Restoration Benefit	100% of SI – Can't be used for illness/disease for which claims made already in the Current Policy Year + Hospitalisations out of Accidents; Provided on Complete exhaustion of Basic SI and Accumulated NCB
Annual No Claim Bonus- Max Accumulation	5Lac SI-50% of SI for first year and later 50% of SI - every claim free year - Max Accumulation 100% of SI Above 5Lac SI-100% of SI for first year and later 100% of SI - every claim free year - Max Accumulation 100%
Co-pay-for Clients-Age at Entry above60 Years	10% Co-pay applied on Every Claim
Co-pay for Hospitalisation on Package Treatment Cost	No Co-pay applicable
30 days waiting Period	Any Hospitalisation - Except Hospitalisation arising out of Accidents
24 months waiting Period	Like - Cataract, Prolapse of intervertebral Disc(Non-Accidental), Varicose-Veins&Ulcers, Hernia, Fistula/Fissure, Congenital internal Disease, - For full list refer Product Boucher
48 months waiting Period	Pre-Existing Diseases(PED) declared in Proposal, Accepted and Endorsed in Policy
Permanent Exclusions	Like - Congenital External Defects, Dental Treatments(Non-Accidental), Venereal Diseases, Psychiatric treatments, Intentional Self-Injury, Pregnancy and Child Birth related treatment, Weight control, Cosmetic Treatments, Plastic Surgery - for full list refer Product Boucher
Declined Risks (Not Eligible for persons with)	Heart diseases, Cancer, Kidney Diseases, Major CNS ailments(CVA, Parkinson's Disease, Alzheimer's Disease), Cirrhosis of Liver, Chronic Obstructive Pulmonary Disease (COPD), Auto immune/Connective tissue disorders requiring long term steroids and immunosuppressant's
Documentary Requirements	Filled in Proposal form, Recent P.P. Size Colour Photo (1- for 3 years to 50 years; 2-for More than 50 years old), Age Proof for More than 45 years Old, Bank Details of Proposer when Premium is more than Rs. 25000
Acceptance Limits	Up to Age 50 years - Without PED - Accepted at Operating Office. Up to Age 50 years - With PED -Medical Opinion through lab portal by the Corporate Office Doctor - Accepted at Operating Office. Above Age 50 years - With/Without PED - Medical Opinion through lab portal by the Corporate Office Doctor - Accepted at Operating Office.
Pre-Acceptance Medical Screening	CMU Doctors evaluate proposals - Approve/Reject/incorporate PED; on approval from CMU operating office converts policy
Tax Benefits - Sec-80D	Rs. 25000 - for Age up to 59 years; Rs. 30000 - for Age 60 years and above clients

Star Senior Citizen Red Carpet Health Insurance Plan

Age at Entry - Adult	60 years to 75 years
Policy Type	Individual Policy – Specially designed for Senior Citizens
Sum Insured Options	1Lac / 2Lac / 3Lac / 4Lac / 5Lac / 7.5Lac & 10Lac
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	30 days - To continue policy without loss of continuity benefits(Waiting Period PED Coverage)
Hospitalisation	in-patient hospitalisation - Minimum period of 24 hours
Room Rent, Boarding and Nursing Expenses	1 % of SI – MAX Rs.6000 per day – whichever is lower
ICU Charges	2 % of SI
Medical Professional Fees including specialist's fee	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees – MAX 25 % of SI (Per Hospitalisation)
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials, X-ray, Diagnostic Imaging, Dialysis, Chemotherapy, Radiotherapy, Pacemaker, Stent etc. – Max 50% of SI (Per Hospitalisation)
Road Ambulance Charges	Rs.600 per hospitalisation & Rs.1200 per policy year
Pre - Hospitalisation Expenses	Not Available
Post - Hospitalisation Expenses	7% of nursing, surgeon/consultant fees, diagnostic expenses, drugs cost only – Max Rs. 5000 per occurrence
Day Care Procedure covered (Sub-limits)	Lithotripsy-Rs. 20000/Tonsillectomy-Rs.7500/Cutting and Drainage of Abscess-Rs.1500/Liver Aspiration-Rs.2000; Pleural Effusion Aspiration-Rs.2000/Colonoscopy-Rs.2000/Scelerotherapy-Rs.5000; Chemotherapy(Part of Cancer sublimit); Radiotherapy(Part of Cancer Sublimit); Dialysis(Part of Renal complication Sublimit); Dental Surgery; Cataract-(SI Based Sub-limit)
Sub-limit for Day Care Procedure for Cataract - SI/ Per Policy Period	1&2Lac-Rs.15000; 3Lac-Rs.18000; 4Lac-Rs.20000; 5Lac-Rs.21500; 7.5Lac- Rs.23000; 10Lac-Rs.25000
Specified Surgeries - CVA, CVD, Cancer, Renal Complications, Breakage of Bones - Sub-limit	1Lac-Rs.75K / 2Lac-Rs.1.5Lac / 3Lac-Rs.2Lac / 4Lac-Rs.2.25Lac / 5Lac-Rs.2.75Lac / 7.5Lac-Rs.3Lac / 10Lac-Rs.3.5Lac
Other Major Surgeries - Sub-limit	1Lac SI -Rs.60K / 2Lac-Rs.1.2Lac / 3Lac-Rs.1.5Lac / 4Lac-Rs.2Lac / 5Lac-Rs.2.25Lac / 7.5Lac-Rs.2.5Lac; 10Lac-Rs.2.75Lac
Out-patient Consultation at network hospitals-Rs. 200 per consultation – Pay-out will not reduce SI	Max. in a year - 1&2Lac-Not available; 3Lac-Rs.600; 4Lac-Rs.800; 5Lac-Rs.1000; 7.5Lac-Rs.1200; 10Lac-Rs.1400
10% Discount on Premium (Fresh and Renewal) by Providing Medical Report	Medical Report taken within 45days prior to Date of Proposal - Stress Thallium Report, BP, Sugar (Blood and Urine). Blood Urea & Creatinine - Cost to be borne by the client.
Recharge, Restoration, No claim Bonus, Health Check-up	Not available
Co-pay-for claims on Pre-Existing Disease	50% Co-pay applied on all PED Claims
Co-pay for Claims on other than PED Claims	30% Co-pay applied on all Non-PED Claims
30 days waiting Period	of Accident
12 months waiting Period	Pre-Existing Diseases(PED) declared in Proposal, Accepted and Endorse in Policy
24 months waiting Period	Veins Ulcers, Hernia, Fistula/Fissure, Congenital internal Disease, - For full list refer Product Boucher
Permanent Exclusions	Diseases, Psychiatric treatments, Intentional Self-Injury, Pregnancy and Child Birth related, Weight control, Cosmetic Treatments, Plastic Surgery - for full list refer Product Boucher
Declined Risks (Not Eligible to buy)	Heart diseases, Cancer, Kidney Diseases, Major CNS ailments(CVA, Parkinson's Disease, Alzheimer's Disease), Cirrhosis of Liver, Chronic Obstructive Pulmonary Disease (COPD), Auto immune/Connective tissue disorders requiring long term steroids and immunosuppressant
Documentary Requirements	Questionnaire
Acceptance Limits	Any Age - Without PED - Accepted at Operating Office Any Age - With PED -Medical Opinion through lab portal by the Corporate Office
Pre-Acceptance Medical Screening	No Pre-Insurance Medical Screening Required - Providing specific medical
Tax Benefits - Sec-80D	Rs. 30000 - for Age 60 years and above clients

Star Cardiac Care Health Insurance Plan - Revised and Launched on 11th July 2016

Age at Entry - Adult	10 years to 65 years
Who can Buy	<ol style="list-style-type: none"> Undergone Percutaneous Trans luminal Coronary Angioplasty - PTCA or Coronary Artery Bypass Graft (CABG) - Within 7 years. Atrial Septal Defect - ASD or Ventricular Septal Defect - VSD – Corrected. Peripheral Arterial Disease (PAD) – Treated RF Ablation or RF Ablation done to correct Cardiac Condition. Angiogram done - But intervention not found necessary.
Sum Insured	3 Lac & 4 Lac
Sum Insured Enhancement	SI can be enhanced on renewal - Subject to company's discretion - Only when no Claim lodged or Paid - Waiting period will be applied on the enhanced Sum Insured
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	30 days
Section - 1	Regular Hospitalisations - Other than Cardiac related
Room Rent, Boarding and Nursing Expenses	Rs. 5000 per day
Professional Fees	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees - Actual
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic materials, X-ray, Diagnostic Imaging, Dialysis, Chemotherapy, Radiotherapy etc. - Actual
Ambulance Charges	Rs. 750 per hospitalisation - Rs. 1500 per policy year
Pre - Hospitalisation	30 days prior to the date of hospitalisation - Actual
Post - Hospitalisation	60 days - (7% of nursing expenses, Surgeon/consultant Fees, Diagnostic Charges, Cost of medicines and drugs with Max Rs. 5000)
Section - 2 - Gold	<ol style="list-style-type: none"> Cardiac related Complications - resulting in Surgery or intervention Cardiac Medical Management
Section - 2 - Silver	<ol style="list-style-type: none"> Cardiac related Complications - resulting in Surgery or intervention only Cardiac Medical Management not covered
Both Gold and Silver	
<ol style="list-style-type: none"> Room Rent, Boarding and Nursing Expenses Professional Fees Other Medical Expenses Ambulance Charges Pre-Hospitalisation Post – Hospitalisation 	Same as Section 1
Section – 3	Out Patient Consultation - Max. Rs. 500 per consultation Max - Rs. 1500 per policy year - Pay-out forms part of Sum Insured
Section – 4	Personal Accident - Death Cover - Accident Cover Sum Insured Equivalent to Health Sum Insured
Day - Care Treatment	405 - Day Care Procedures
Sublimit for Cataract	Max Rs. 20,000 per hospitalisation - Max Rs. 30,000 for policy period
Treatment on Package Charges basis	80% of Package Charges paid - for Section 1 hospitalisations only
30 days - Waiting Period	Any Disease Contracted by the insured
90 days - Waiting Period	PEDs related to Cardiac ailments
24 months waiting Period	Like - Cataract, ENT, Thyroid, Prolapse of intervertebral Disc (Non-Accidental), Varicose- veins Ulcers, Prostate Disease, Hernia, Fistula/Fissure, Congenital Internal Disease, - For full list refer product brochure.
48 months waiting Period	PEDs - Other than Cardiac related PED - Declared in Proposal and Endorsed in Policy
Permanent Exclusions	Like - Congenital External defects, Dental Treatments(Non-Accidental), Psychiatric treatment, Venereal diseases, Intentional Self Injury, Pregnancy and child birth related, Weight Control, Cosmetic treatments, Plastic Surgery - For full list refer product brochure.
Pre-Acceptance Medical Screening	Not Required - But all the past medical records of the proposed insured to be submitted
Co Payment	10% on every Hospitalisation - Under Section 1 only - For Age above 60 years at ENTRY
Tax Benefits - Sec-80D	Rs. 30000 - for Age 60 years and above clients

Star Diabetes Safe Health Insurance Plan

Age at Entry - Adult	18 years to 65 years
Policy Type	Individual Floater (2A – Both husband & wife Diabetic)
Who can Buy	Special Plan for Diabetic both Type 1 and type 2 1. Individual Plan - (For individuals who are Diabetic) 2. Floater Plan - 2A only - Husband and Wife (Either one of them or both of them being Diabetic)
Sum Insured	3 / 4 / 5 / 10 Lac
Sum Insured Enhancement	SI can be enhanced on renewal - Subject to company's discretion - Only when no Claim lodged or Paid - Waiting period will be applied on the enhanced Sum Insured
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	30 days
Section - 2	Regular Hospitalisations - Other than Diabetes related
Room Rent, Boarding and Nursing Expenses - per day	3 Lac – 4500 / 4 Lac – 6000 / 5 Lac – 7500 / 10 Lac - 8500 (1.5% SI - Max 8500)
Professional Fees	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees - Actual
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic materials, X-ray, Diagnostic Imaging etc. - Actual
Ambulance Charges	Rs. 2000 per policy year
Pre - Hospitalisation	30 days prior to the date of hospitalisation - Actual
Post - Hospitalisation	60 days - (7% of nursing expenses, Surgeon/consultant Fees, Diagnostic Charges, Cost of medicines and drugs with Max Rs. 5000)
Donor Expenses on Kidney Transplantation	Donor Expenses (Screening and Post Donation Complications - Not paid) paid - if Sum Insured Available
Dialysis Expenses (including AV Fistula/Graft Creation)	up to Rs. 1000 per sitting for 24 consecutive months - on occurrence of Chronic Kidney Disease
Cost of Artificial Limbs - on Amputation	up to 10% of SI - Paid if the Amputation Surgery hospitalisation claim admitted
Cardio Vascular System, Renal System, Disease of Eye, Foot ulcer Coverage	For Plan A - Immediate; Plan B - After a waiting period of 15 months
Sublimit for Cardio Vascular Disease	No Sublimit for Plan-A; For Plan B - 2Lac-for 3Lac SI; 2.5Lac-for 4 Lac SI; 3 Lac for - 5 Lac SI; 4 Lac for - 10 Lac SI
Section 1 Applicability	For Plan A - Immediate; Plan B - After a waiting period of 30 days
Transplant and related Surgery	Plan A - Immediate; Plan B - After a waiting period of 24 months
Section 3	Benefits paid for the expenses at Network Hospital - Pay out forms part of Sum Insured
Section - 3 - Testing Expenses - For Individual and Floater (Plan A and Plan B)	Fasting, Post Prandial and HbA1C tests once in six months Rs. 750 per event - Rs. 1500 per policy year
Section - 3 - Plan A - Individual	3Lac - 1000; 4Lac - 2500; 5 Lac - 3500; 10 Lac - 5500
Section - 3 - Plan A - Floater	3Lac - 2000; 4Lac - 3500; 5 Lac - 5500; 10 Lac - 7500
Section - 3 - Plan B - Individual	3Lac - 500; 4Lac - 2000; 5 Lac - 3000; 10 Lac - 5000
Section - 3 - Plan B - Floater	3Lac - 1500; 4Lac - 3000; 5 Lac - 5000; 10 Lac - 7000
Section - 4	Personal Accident - Death Cover - Accident Cover Sum Insured Equivalent to Health Sum Insured for one Specified Individual
Day Care Treatment	405 Day Care Procedures Covered
Automatic Restoration - For Individual Policy	100% of Basic SI - on Exhaustion of Basic SI – Can't be used for treatments for which claims already made - Not available on floater
30 days - Waiting Period	Any Disease Contracted by the insured; Diabetes related hospitalisation (other than Cardio Vascular System, Renal System, Disease of Eye, Foot Ulcer related hospitalisation) under Plan-B
15 months - Waiting Period	Cardio Vascular System, Renal System, Disease of Eye, Foot Ulcer related hospitalisation for Plan-B
24 Months - Waiting Period	Like - Cataract, ENT, Thyroid, Prolapse of intervertebral Disc (Non-Accidental), Varicose-Veins&Ulcers, Prostate Disease, Hernia, Fistula/Fissure, Congenital Internal Disease, - For full list refer product brochure
48 Months - Waiting Period	PEDs - Other than Diabetes related - Declared in Proposal and Endorsed in Policy
Permanent Exclusions	Like - Congenital External defects, Dental Treatments(Non-Accidental), Psychiatric treatment, Venereal diseases, Intentional Self Injury, Pregnancy and child birth related, Weight Control, Cosmetic treatments, Plastic Surgery - For full list refer product brochure.
Pre Acceptance Medical Screening	Not Required - for Plan B; Required - for Plan A
Tax Benefits - Sec-80D	Rs. 30000 - for Age 60 years and above clients

Star Care Health Insurance Plan

Age at Entry - Adult	18 years to 65 years
Age at Entry – Dependent Children	2 years to 25 years – Renewal till Age 25 only
Policy Type	Individual & Family Floater
Availability	Client from Tier 1 & Tier 2 Cities
Tier 1 Cities	Cities where population is 5 Lac to 10 Lac
Tier 2 Cities	Cities where population is below 5Lac
Sum Insured	1 Lac only
Family Includes	Self, spouse & Dependent kids
Family Size	1A / 1A+1C / 1A+2C / 2A / 2A+1C / 2A+2C
Policy Period	1 Year
Renewal Guarantee	Life Long
Renewal Grace Period	30 days
Hospitalisation	in-patient hospitalisation - Minimum period of 24 hours
Expenses	Max. Rs.750 per day – Private or shared stay
ICU Charges	Maximum Rs. 2000/- per day - Maximum Rs. 10000 per hospitalisation
Professional fees	Surgeon, Anaesthetist, Medical Practitioner, Consultant, Specialist Fees - Actual
Other Medical Expenses	Anaesthesia, Blood, Oxygen, OT Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials, X-ray, Diagnostic Imaging, Dialysis, Chemotherapy, Radiotherapy, Pacemaker, Stent etc. - Actual
Road Ambulance Charges	Rs. 500 per hospitalisation - Rs. 1000 per policy year
Where to get treated	Planned Hospitalisations at Network hospitals in Tier1 and Tier 2 Cities, Emergency Hospitalisation can be at Non-network hospitals also in Tier1 and Tier2 cities
Pre - Hospitalisation	30 days Prior to Admission - Actual - Relevant to the Hospitalisation
Post - Hospitalisation	60 days from Discharge - (7% of nursing, surgeon/consultant fees, diagnostic expenses, drugs cost) - Max Rs. 3000
Hospital cash – Will not reduce SI	Rs. 1000 per day - Maximum for 14 days - for treatment in Government hospital as in-patient
Day Care & Sublimit	405 - Day Care Procedures - 24 hours of hospitalisation not required - Cataract sub-limit Rs. 8500 per policy period
Sub-limit for Specific Procedures	Major Surgeries - Rs. 40000 Other Surgeries - Rs. 20000 Cataract - Rs. 8500 Medical Management - Major Diseases - Rs. 15000 Accidental Grievous injury - Surgery or Medical Management - Rs. 40000
30 days waiting Period	Except Accidental
24 months waiting Period	Like - Cataract, Prolapse of intervertebral Disc(Non-Accidental), Varicose Veins&Ulcers, Hernia, Fistula/Fissure, Congenital internal Disease, - For full list refer Product Boucher
48 Months - Waiting Period	Pre-Existing Diseases(PED) declared in Proposal, Accepted and Endorse in Policy
Permanent Exclusions	Like - Congenital External defects, Dental Treatments(Non-Accidental), Psychiatric treatment, Venereal diseases, Intentional Self Injury, Pregnancy and child birth related, Weight Control, Cosmetic treatments, Plastic Surgery - For full list refer product brochure.
Declined Risks (Not Eligible to buy)	Heart diseases, Cancer, Kidney Diseases, Major CNS ailments(CVA, Parkinson's Disease, Alzheimer's Disease), Cirrhosis of Liver, Chronic Obstructive Pulmonary Disease (COPD), Auto immune/Connective tissue disorders requiring long term steroids and immunosuppressant
Acceptance Limits	Without PED Policy converted at operating office With PED od Adverse Medical History – Referred to CMU through lab portal – on approval by CMU – Policy converted at operating office.
Pre Acceptance Medical Screening	Not Required
Tax Benefits - Sec-80D	Rs.25000 for age up to 59 years & Rs. 30000 - for Age 60 years and above clients

Star Accident Care Plan- (Individual/Family)

Age at Entry - Adult	18 years to 70 years
Age at Entry – Dependent Children	5 months to 25 years – Renewal till Age 25 only
Policy Type	Individual & Family Floater
Sum Insured	Based on the Monthly Income derived from gain full employment / Business - Person (Last 3yrs IT- Returns, Along with audited Profit and Loss Statement) from Rs.1 Lakh to 5 Crores
Family Includes	Self, spouse & Dependent kids
Policy Period	1 Year / 2 year / 3 year
Renewal Guarantee	Life Long for Adult
Family cover (non- earning & dependent spouse & Children)	SI Limit for spouse - 50% SI of Prime Earning member-proposer (Max15Lac) SI Limit for children - 25% SI of Prime Earning member-Proposer(Max5Lac)
Family Discount	10% Discount on premium if more than one individual from the same family is covered
Documents Required	Duly filled Proposal form, photo and Age proof (optional). Income proof is required for above 50 Lakhs above sum insured.
Risk Group Classification	Coverage Classification
Risk Group – 1 : Persons engaged primarily in Administrative functions	Table A -225times of monthly income as additional SI. What is covered <ul style="list-style-type: none"> Accidental Death only
Risk Group – 2 : Persons engaged in manual work	Table B – 180 times of monthly incomes as additional SI. What is covered <ul style="list-style-type: none"> Accidental death + accidental Permanent Disablement (PTD-100% SI & PPD - % of SI) 150% when totally and irreversibly disabled. (Term & condition apply)
Risk Group – 3: Working in explosives industry, mine and / or magazine workers high tension supply, horse racing including jockeys, athletes and occupations of similar hazard.	Table C – 100 times of the monthly income (or) Up to Rs.15 Lakhs What is covered <ul style="list-style-type: none"> Accidental Death + Accidental Permanent Disablement (PTD-150% S.I. & PPD - % of S.I.)150% when totally and irreversibly disabled (Term & condition apply)
Note :	Overall Sum Insured under all the Tables together should not exceed 225 times of monthly Income. Additional and optional Benefits are Payable only on admissible Claim under the PA Section.
Additional Benefits	Benefit Description
Educational Grant	On Death / Permanent Total Disability of earning Parent / Insured, The Child student Less than 18 yrs, is eligible for a lump sum - For One Child Rs.10 K & Max - Two Children Rs.20K
Ambulance/Mortal Remains Transportation	Ambulance for Hospitalisation Or transportation expenses of Mortal Remains up to Rs.5K
Travel Expenses of one relative	On death of the insured – Travel Exps. 1% of total S.I subject to Max. Rs.50K.
Vehicle and / or Residence Modification(on PTD Claim)	10% of Table B and Table C sum insured subject to a max. of Rs.50K on PTD
Purchase of Blood	5% of Total sum insured under Table A, subject to a maximum of Rs.10K
Transportation of Imported Medicines	5% of Total sum insured - maximum of Rs.20K for medical/surgical treatment
Cumulative Bonus	For every claim free year, the S.I under Death & P.T.D alone will be increased by 5% Sub. Max 50%

Optional Benefits	Benefit Description			Premium					
Coverage for winter sports & Rallies	This extension can be granted for the period the insured person proposes to participate in such sports. (i.e. – Can be availed, Any time during the Policy Period)			100% of the final premium per person					
Medical Expenses Extension	25% of the valid claim or 10% of SI or actual whichever is less, subject to maximum Rs.5 Lakhs			10% of the final premium per year per person					
Hospital Cash	Rs.1000 per day subject to maximum of 15 days per occurrence and 60 days per policy period			Rs.40/- per year per person					
Home Convalescence	Rs.500/- for each completed day - maximum of 15 days per occurrence and 60 days per policy period for engaging one attendant at residence after discharge from hospital on the recommendation of attending doctor			Rs.15/- per year per person					
Premium Per lakh (with 18% service tax)	One Year Premium			Two Year Premium			Three Year Premium		
	RG 1	RG 2	RG 3	RG 1	RG 2	RG 3	RG 1	RG 2	RG 3
Table – A (A D)	49	68	91	95	132	176	137	192	255
Table – B (AD + PTD +PPD)	80	148	200	154	286	385	223	414	557
Table – C {AD+ PTD + PPD + TTD (W. C.)}	143	200	228	275	385	440	398	557	637

Note: A.D- Accidental Death; PTD- Permanent Total Disability; PPD-Permanent Partial Disability; TTD- Temporary Total Disability; W.C. – Weekly Compensation

Star Criticare Plus Insurance Policy	
Age at Entry - Adult	18 years to 65 years
Age at Entry - Dependent Children	Up to 25 year
Policy Type	Individual & Family member can be added with individual Sum Insure for each member in a single policy
Sum Insured Options	2 Lakh / 3 Lakh / 4 Lakh / 5 Lakh / 10 Lakh For persons over 60 years at entry, the sum insured would be restricted to Rs.200000/-
Discount for adding more member	5% discount for covering 2 persons and 10% discount for covering more than 2 persons
Family includes	Proposer/Spouse/Three Dependent Kids
Policy Period	1 Year
Renewal	Lifelong Renewal, However the policy cannot be renewed if a claim has been made under Section II. In such cases, renewals can be offered under Medi-Classic insurance or its equivalent with specific exclusion Of the Major Disease for Which the claim has been admitted and paid.
Renewal Grace Period	30 days - To continue policy without loss of continuity benefits(Waiting Period PED Coverage)
Policy Cover	This policy offers cover to the Insured Person under two sections Section – I & Section - II
Section - I	<ul style="list-style-type: none"> ➤ in-patient hospitalisation - Minimum period of 24 hours ➤ Room rent 2% of the sum insured subject to a maximum of Rs4000 per day ➤ Boarding and Nursing expenses ➤ Surgeon's fees Consultant's fees Anaesthetist fees, ➤ Cost of medicines and drugs ➤ Cost of blood, oxygen, diagnostic expenses, cost of pace maker and similar expenses. ➤ Road ambulance: Rs.750/- per hospitalization and overall limit of Rs.1500/- per policy period
Section II (Major Diseases cover)	Provides for payment of lump-sum amount equal to the sum insured opted if the insured person contracts any one of the Major diseases for the first time
Special features	<ul style="list-style-type: none"> ➤ Both regular hospitalization benefits and Major Disease's benefits are available under one policy. Moreover Section I that is hospitalization benefits would continue until expiry of the policy even when a claim under Section II has been paid. ➤ Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathic shall be restricted to 25% of the sum insured subject to a maximum of Rs25000 in the entire policy period.
Major Diseases Cover	<ul style="list-style-type: none"> ➤ First Diagnosis of Cancer, Chronic Kidney Disease, Hepatoma, Brain Tumour, ➤ Undergoing first time - Major Organ Transplant, ➤ Occurrence for the first time of the following medical events: Cerebro-Vascular Stroke causing Hemiplegia, Acute Myocardial Infarction resulting in Left Ventricular Ejection Fraction of $\leq 25\%$ ➤ Established irreversible Coma, ➤ Established irreversible Paraplegia, ➤ Established irreversible Quadriplegia
Pre - Hospitalisation Expenses	Up-to 30 days prior to the date of admission
Post - Hospitalisation Expenses	Post-Hospitalization calculated at 7% of the hospitalization expenses (excluding room rent) subject to a maximum of Rs5000 is payable
Cashless Facility	If the treatment is taken in any network hospital (applicable for Section I benefits only)
Co-pay-for Clients-Age at Entry above60 Years	30% for each and every claim
Sub limit for Clients-Age at Entry above60 Years	Cerebro Vascular Accident / Cardio Vascular Disease/Cancer and Breakage of bones, Renal Complications-150000, All other major surgeries - 120000
Exclusions for Section I	<ul style="list-style-type: none"> ➤ All expenses incurred in connection with treatment of any Pre-Existing disease/illness/condition. ➤ Treatment of disease/sickness/illness contracted by the Insured Person during the first 30days from the commencement date of the policy. ➤ Expense incurred in the first two Years of continuous operation of Insurance cover on treatment for Cataract, Hysterectomy for Menorrhagia or Fibromyoma, Treatment for Knee or Joint Surgery (other than caused by an accident), Prolapse of intervertebral disc (other than caused by accident), Varicose veins and Varicose ulcers. ➤ Expense incurred during the first year of operation of the Insurance on treatment of Benign Prostate Hypertrophy, Hernia, Hydrocele, Fistula in anus, Piles, Sinusitis and related disorders, gallstones and renal stones ➤ Naturopathy treatment ➤ Expenses which are purely diagnostic in nature with no positive existence of any disease
Exclusions for Section II	<ul style="list-style-type: none"> ➤ Expenses incurred for treatment of congenital diseases/ defects/anomalies. ➤ Manifestation of any of the covered Major Diseases within first 90days from the date of commencement of the policy. This will not apply when the policy is renewed without any break (any break up-to 15days from the date of expiry will be condoned for the purpose of continuity of benefits relating to 30 days waiting period , first year, first two years and Pre-Existing Diseases exclusion and 90 days waiting period for Section II) ➤ For a detailed list of exclusions please refer policy conditions.
Tax Benefits - Sec-80D	Rs. 25000 - for Age up to 59 years; Rs. 30000 - for Age 60 years and above clients

Star Super Surplus Insurance Plan

Features/Plan	Silver - Individual	Silver - Floater	Gold - Individual	Gold - Floater
Age at Entry for Adult	18-65 year	18-65 year	18-65 year	18-65 year
Age at Entry for Kids	3months - 25 years	3months - 25 years	3months - 25 years	3months - 25 years
Renewals	Life Long	Life Long	Life Long	Life Long
Dependant Kids Covered till	25 years	25 years	25 years	25 years
Policy Term	1 year	1 year	1 year	1 year
Family Definition (Individual Policy - Individual SI Based)	1A/2A/2A+1C/2A+2C/2A+3C/1A+1C/1A+2C/ 1A+3C	2A/2A+1C/2A+2C/1A+1C/1A+2C	1A/2A/2A+1C/2A+2C/2A+3C/1A+1C/1A+2C/1A+3C	2A/2A+1C/2A+2C/1A+1C/1A+2C
Sum Insured options	7 Lac / 10 Lac	10 Lac	5 Lac/7 Lac/10 Lac/15 Lac/20 Lac/25 Lac	5 Lac/10 Lac/15 Lac/20 Lac/25 Lac
Deductible / Defined Limit	Deductible - 3 Lac	Deductible - 3Lac / 5 Lac	Defined Limit - 3 Lac for 5/7/10L SI; 5 Lac for 5/10/15L SI; 10 Lac for all SI	Defined Limit - 5 Lac for 5/10/15 SI; 10 Lac for all SI
Application of Deductible/Defined Limit	Deductible applied on every hospitalisation	Deductible applied on every hospitalisation of individual family member covered in the policy	Aggregate of hospitalisation expenses during the policy year considered to arrive at Defined Limit	Aggregate of hospitalisation expenses of family members during the policy year considered to arrive at Defined Limit
Benefit Limits - During policy period	Excess of any claim over Deductible - Total pay-out up to sum insured	Excess of any claim over Deductible - Total pay-out up to sum insured	Every Claim after Aggregate of hospitalisation expenses reaching Defined limit - Total pay-out up to sum insured	Every Claim of family members under the policy after Aggregate of hospitalisation expenses of family members reaching Defined limit - Total pay-out up to sum insured
Hospitalisation Expenses				
Room Rent	Rs. 4000/- per day	Rs. 4000/- per day	Single Standard A/C Room	Single Standard A/C Room
Road Ambulance	Not available	Not available	Rs. 1500 per policy year	Rs. 1500 per policy year
Air Ambulance	Not available	Not available	10% of SI for 7 L & Above SI	10% of SI for 7 L & Above SI
Professional Fees - Surgeon, Anaesthetist, Consultant, Specialist etc.	Actual	Actual	Actual	Actual
Other Medical Expenses – Blood, Oxygen, OT charges, Diagnostic expenses, Medicines etc.	Actual	Actual	Actual	Actual
Medical Second Opinion - medical records sent to e_medicalopinion@starhealth.in or by post/courier	Not available	Not available	available	available
Pre-hospitalisation Expenses (not considered for Deductible/Defined Limit)	up to 30 days Prior to hospitalisation	up to 30 days Prior to hospitalisation	up to 30 days Prior to hospitalisation	up to 30 days Prior to hospitalisation
Post-hospitalisation Expenses - (not considered for Deductible/Defined Limit)	up to 60 days from Discharge	up to 60 days from Discharge	up to 60 days from Discharge	up to 60 days from Discharge
Day Care Procedures covered	405	405	405	405
30 days	Any disease contracted by insured	Any disease contracted by insured	Any disease contracted by insured	Any disease contracted by insured
24 months	Two Years Exclusion: Cataract, glaucoma, retinal detachment/Macular degeneration, Prophase of intervertebral disc, varicose veins/ulcers, benign prostatic hypertrophy, deviated nasal septum, sinusitis, tonsillitis, nasal polyps, chronic supportive Otitis media and related disorders, stapedectomy, hernia, hydrocele, fistula/fissure, haemorrhoids, congenital internal disease/defect Guinto Urinary Tract Calculi, treatment related to all diseases of uterus, fallopian Tubes, Ovaries, Pelvic inflammation, cervix, dysfunctional uterine bleeding, benign breast diseases, treatment related to bone, joint, tendon, ligament, fascia, Degenerative disc, muscle skeletal diseases & vertebral diseases, including replacement of bones, joint, any transplant & related surgery, subcutaneous benign lumps, sebaceous cyst Lymphoma, Neurofibroma, fibro adenoma, ganglion and similar pathology			
Coverage of PEDs - Declared and Accepted	After 36 months	After 36 months	After 36 months	After 36 months
Co Pay	Not applicable	Not applicable	10% - for Age at entry more than 60	10% - for Age at entry more than 60
Pre-Medical Examination	Not required	Not required	Not required	Not required
Age Proof	For Age >45 years	For Age >45 years	For Age >45 years	For Age >45 years
Migration	to Floater - Super Surplus	to Individual - Super Surplus	to Floater - Super Surplus	to Individual - Super Surplus
Policy Acceptance - Without PED	Branch Level	Branch Level	Branch Level	Branch Level
Policy Acceptance - With PED/Adverse Medical History	Refer to CMU / On Approval conversion at Branch	Refer to CMU / On Approval conversion at Branch	Refer to CMU / On Approval conversion at Branch	Refer to CMU / On Approval conversion at Branch
Declined Risk	Heart diseases, Cancer, Kidney Diseases, Major CNS ailments-CVA, Parkinson's Disease, Alzheimer's Disease, Cirrhosis of Liver, Chronic Obstructive Pulmonary Disease(COPD), Auto Immune, Connective tissue disorders requiring long term steroids and immunosuppressant			

Strictly for internal training purpose only. Refer to Boucher for more information