

STAR SPECIAL CARE

UID No.: SHAHLIP18079V011718

Star Special Care is health insurance designed to cover children aged between 3 years and 25 years who are diagnosed with Autism Spectrum Disorder..

What is the Policy Term? 1 year

Is there any pre-acceptance Medical Check up?

There is no requirement of pre-acceptance medical check up.

However along with the signed proposal, copy of prior treatment records from all concerned specialists should be submitted.

Sum Insured: Rs.3,00,000/-

Coverage:

A. Room, boarding, nursing expenses (all inclusive) as provided by the Hospital / Nursing Home up to Rs.5,000/- per day.

If the insured person occupy a Shared Accommodation, then Rs.500/- per day subject to a maximum of Rs.2000/- per hospitalization and Rs.10,000/- per policy period shall be paid.

Note: Insured's stay in Intensive Care Unit or High Dependency Units / wards will not be considered as stay in Shared Accommodation.

B. Surgeon, anesthetist, medical practitioner, consultants, specialist fees.

C. Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, medicines and drugs

Expenses relating to hospitalization will be considered in proportion to the eligible room rent if room of higher rent is opted

D. Emergency Ambulance charges for transporting the Insured person to the hospital up to a sum of Rs.750/- per hospitalization and Rs.1500/- per policy period.

E. Post Hospitalization expenses: A sum equivalent to 7% of the hospitalization expenses or actuals incurred up to 60 days after discharge from the hospital..

Where package rates are charged by the hospitals the Post-Hospitalization benefit will be calculated after taking the room, boarding and nursing charges at Rs 5,000/- per day.

F. All day care treatments

Sublimits for Ailments/Treatments

Ailment / Treatment	Limit per policy period Rs.
Adeno Tonsilectomy	Rs.25,000/-
Hospitalization for Treatment of Seizures	Rs.30,000/-
Hospitalization for Treatment of fractures requiring surgery	Up to 20% of the sum insured
Botox injection (Payable when administered during inpatient hospitalization only)	Rs.5000/- per sitting subject to a maximum of Rs.20,000/- per policy period.
Behavioral Therapy, Physiotherapy, Occupational Therapy and Speech Therapy These therapies can be taken as out patient also.	Up to Rs.1,500/-

Co-payment:

This policy is subject to co-payment of 20% of each and every claim amount for fresh as well as renewal policies.

Waiting Periods:

- 30 days waiting period
- 24 months waiting period for specified illness/diseases/treatment
- 48 months waiting period for Pre Existing Diseases as defined in the policy.
- Autism shall not be considered as pre existing disease

What are exclusions?

1. Circumcision, Preputio plasty, Frenuloplasty, Inoculation or Vaccination (except for post-bite treatment and for medical treatment other than for prevention of diseases),
2. Congenital External diseases/condition defects or anomalies
3. Cerebral palsy, Mental retardation, Chromosomal and Genetic abnormalities.
4. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable)
5. Convalescence, general debility, run-down condition or rest cure, Rehabilitation, Nutritional deficiency states, Venereal disease, Sexually transmitted diseases, use of intoxicating drugs / alcohol, substance abuse, smoking and tobacco chewing
6. Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not)
7. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons / materials
8. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS

9. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control, treatment for endocrine disorders.
10. Expenses incurred on Lasik Laser or Refractive Error Correction and its complications, all treatment for disorders of eye requiring intra-vitreous injections and related procedures.
11. Charges incurred on diagnostics that are not consistent with the treatment for which the insured is admitted in the hospital / nursing home. Admission primarily for diagnostic purpose with no positive existence of sickness / disease / ailment / injury and no further treatment is indicated.
12. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
13. Naturopathy Treatment, unconventional, untested, unproven, experimental therapies.
14. Psychological, Psychiatric, Stem cell Therapy, Bone marrow transplantation, Chondrocyte, Implantation, Immunotherapy without proper indication
15. Hospital registration charges, admission charges, record charges, telephone charges and such other charges
16. Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
17. Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than as necessitated due to an accident or as a part of any illness), all treatment for erectile dysfunctions.
18. Cost of spectacles and contact lens, hearing aids, walkers and crutches, wheel chairs, Muscle relaxing pump such as Baclofen Pump or any ITB Therapy, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion pump and such other similar aids, Cochlear implants and procedure related hospitalization expenses
19. Out Patient Medical Expenses. This exclusion does not apply to Behavioral Therapy, Physiotherapy, Occupational Therapy and Speech Therapy
20. Any hospitalizations which are not Medically Necessary
21. Other excluded expenses as detailed in the website www.starhealth.in.

Renewal:

The policy is renewable up to the insured person/s completing 25 years of age.

Beyond 25 years coverage shall be offered in suitable alternate product with continuity benefits for applicable waiting period

The policy can be renewed except on grounds of misrepresentation / Non-disclosure of material fact in the proposal form and at the time of claim, fraud committed / moral hazard or non cooperation of the insured.

Note:

1. The actual period of cover will start only from the date of payment of premium.
2. Renewal premium is subject to change with prior approval from Regulator

Premium Chart (Excluding Tax)

Age-band (in years)	Gross Premium Rs.
3-10	4,800
11-20	5,325
21-25	6,075

Grace period:

A grace period of 30 days from the date of expiry of the policy is available for renewal. If renewal is made within this 30 days period, the continuity of benefits with reference to waiting periods will be available.

Any Disease/illness contracted or injury sustained during the grace period will be deemed as Pre existing and will be subject to a waiting period of 48 months from the date of payment of renewal premium.

Modification of the terms of the policy: The Company reserves the right to modify the policy terms and conditions or modify the premium of the policy with the prior approval of the Regulator. In such an event the insured will be intimated three months in advance prior to their renewal due date.

Withdrawal: The Company reserves the right to withdraw the product with prior approval of the Competent Authority. In such an event the insured will be intimated three months in advance and the insured shall have the option to choose to be covered by an equivalent or similar policy offered by the Company.

Is this Portable? Yes, If the insured is desirous of porting this policy, application in the appropriate form should be made to the Company at least 45 days before but not earlier than 60 days from the date when the renewal is due. For details contact "portability@starhealth.in" or call Telephone No +91-044-28288869

Cancellation: The Company may cancel this policy on grounds of misrepresentation, fraud, moral hazard, non disclosure of material fact in the proposal form and/or claim form at the time of claim and non co-operation of the insured by sending the Insured 30 days notice by registered letter at the Insured person's last known address. No refund of premium will be made except where the cancellation is on the grounds of non co-operation of the insured, in which case the refund of premium will be on pro-rata basis. The insured may at any time cancel this policy and in such event the Company shall allow refund after retaining premium at Company's short Period rate only (table given below) provided no claim has occurred up to the date of cancellation

PERIOD ON RISK	RATE OF PREMIUM TO BE RETAINED
Up to one month	25% of the annual premium
Exceeding one month up to 3 months	40% of the annual premium
Exceeding 3 months up to 6 months	60% of the annual premium
Exceeding 6 months up to 9 months	80% of the annual premium
Exceeding 9 months	Full annual premium

Free-look Period: A free look period of 15 days from the date of receipt of the policy by the insured is available to the insured to review the terms and conditions of the policy. In case the insured is not satisfied with the terms and conditions, the insured may seek cancellation of the policy and in such an event the Company may allow refund of premium paid after adjusting the stamp duty charges and proportionate risk premium for the period concerned provided no claim has been made until such cancellation.

Free look period is not applicable at the time of renewal of the policy

Automatic Expiry: The insurance under this policy with respect to each relevant insured person policy shall cease immediately on the earlier of the following events:

- ✓ Upon the death of the Insured Person
- ✓ Upon exhaustion of the sum insured under the policy

Tax Benefits

Payment of premium by any mode other than cash for this insurance is eligible for relief under Section 80D of the Income Tax Act 1961.

Claims Procedure

- Call the 24 hour help-line for assistance – **1800 425 2255 / 1800 102 4477**
- Inform the Policy Number for easy reference
- Documents to be submitted in support of claim are (as applicable)
- In case of planned hospitalization, inform 24 hours prior to admission in the hospital
- In case of emergency hospitalization, information to be given within 24 hours of hospitalization
- Cashless facility can be availed only in networked Hospitals
- In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents
- Prescriptions and receipts for Pre and Post-Hospitalization

For Out Patient Treatment

(Applicable Behavioral Therapy, Physiotherapy, Occupational Therapy and Speech Therapy)

- Prescription recommending the therapy from the treating doctor.
- Receipt

Star Advantages

- No Third Party Administrator, direct in-house claims settlement.
- Faster and hassle – free claim settlement.
- Cashless hospitalization

Prohibition of Rebates: Section 41 of Insurance Act 1938 (Prohibition of rebates): 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.

The Company

Star Health and Allied Insurance Co. Ltd., commenced its operations in 2006 with the business interests in Health Insurance, Travel and Personal Accident. As an exclusive Health Insurance Company and the first of its kind in India, the Company is committed to setting international benchmarks in service and personal caring.

“IRDAI OR ITS OFFICIALS DO NOT INVOLVE IN ACTIVITIES LIKE SALE OF ANY KIND OF INSURANCE OR FINANCIAL PRODUCTS NOR INVEST PREMIUMS. IRDAI DOES NOT ANNOUNCE ANY BONUS. THOSE RECEIVING SUCH PHONE CALLS ARE REQUESTED TO LODGE A POLICE COMPLAINT ALONG WITH DETAILS OF PHONE CALL AND NUMBER”

The information provided in this brochure is only indicative. 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

Buy this insurance online at www.starhealth.in
Call Toll-free: 1800-425-2255 / 1800-102-4477, sms STAR to 56677
Fax Toll Free No: 1800-425-5522 ★ Email : support@starhealth.in
CIN : U66010TN2005PLC056649 ★ IRDAI Regn. No: 129



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BRO / SSC / V2 / 2017 - 18

Insurance is the subject matter of solicitation

Protecting smile of Special Child



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