

# STAR FAMILY DELITE INSURANCE POLICY

Unique Identification No.:  
IRDA/NL-HLT/SHAI/P-H/V.I/139/13-14

We understand your need for an optimal health protection at optimal cost. Your search ends here- "Star Family Delite Insurance Policy" - a policy which offers protection at affordable cost for the entire family under a single amount.

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## ★ Eligibility:

- Entry age between 18 years and 65 years. Dependent children can be covered from 5 months to 25 yrs. There is no exit age.
- Life Long Renewals.

## ★ Pre-acceptance Medical screening:

All persons who are above 50 yrs of age are to undergo pre-acceptance medical screening at the Company nominated centers at the Company's cost. The age for screening and the cost are subject to change.

## ★ Policy Benefits

- a) Expenses on hospitalization comprising of room rent, boarding and nursing expenses @ 1% of the Sum Insured per day
- b) ICU expenses @ 1.5% of the sum insured opted
- c) Surgeon's, Anesthetist's, Consultants and Specialist's fees
- d) Anesthesia, Blood, Oxygen, Operation theatre charges, cost of Pace makers, Drugs and Medicines
- e) Emergency ambulance charges @ Rs. 750/- per event to a maximum of Rs. 1500/- per policy period for transporting the insured patient to the hospital.

## ★ Coverage for pre existing disease :

Covered after 48 months of continuous renewal without break

## ★ Pre-Hospitalization

Reasonable medical expenses up-to 30 days prior to the date of hospitalization is payable

## ★ Post-Hospitalization:

7% of hospital expenses excluding room rent subject to a maximum of Rs. 5000/- is paid as medical expenses up-to a period of 60 days after discharge from hospital.

## ★ Exclusions

1. 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)
2. Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons/materials
3. a) Circumcision unless necessary for treatment of a disease not excluded under this policy or necessitated due to an accident,  
b) vaccination (except for post -bite treatment and for medical treatment other than for prevention of diseases.)  
c) inoculation or change of life 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).
4. Cost of spectacles and contact lens, hearing aids including cochlear implants, walkers, crutches wheel chairs and such other aids.
5. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization.
6. Convalescence, general debility, Run-down condition or rest cure, nutritional deficiency states, psychiatric, Psychosomatic disorders, Congenital external disease or defects or anomalies sterility, venereal disease, intentional self injury and use of intoxicating drugs/alcohol smoking and tobacco chewing
7. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLVIII) 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. It is however made clear that such of those who are positive for HIV (Human Immuno Deficiency Virus) would be entitled for expenses incurred for treatment Other than for opportunistic infections and for treatment of HIV /AIDS, provided at the time of first commencement of Insurance under this policy their CD4 count is not less than 350.
8. Charges incurred at Hospital or Nursing Home primarily for Diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and

treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at hospital /nursing home.

9. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
10. Treatment arising from or traceable to pregnancy, miscarriage, abortion or complications of any of these (other than ectopic pregnancy).
11. Naturopathy Treatment.
12. Hospital registration charges, admission charges, record charges, telephone charges and such other charges.
13. Expenses incurred on Lasik Laser or Refractive Error Correction, treatment of Eye disorders requiring intra-vitreous injections.
14. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control/loss programs)
15. Expenses incurred on Non Allopathic treatment.
16. Expenses incurred on Enhanced External Counter Pulsation therapy and related therapies and Rotational Field Quantum Magnetic Resonance Therapy
17. Other expenses as detailed elsewhere in the policy.

## ★ Waiting Period:

Accidents are covered from the policy inception date. However a 30 day waiting period is applicable for diseases /illness in the first year of commencement of the policy.

24 months waiting period applicable for specified diseases/conditions / treatments.

48 months waiting period applicable for Pre-existing Diseases / conditions

## ★ List of Specified diseases / Conditions / Treatments that have 24 months waiting period :-

- a) The expenses for treatment of Cataract, Degenerative Disc of Vertebral Diseases and Prolapse of Intervertebral Disc (other than caused by accident), Varicose Veins and Varicose Ulcers, Benign Prostatic Hypertrophy, Deviated Nasal Septum, Sinusitis Tonsillitis, Nasal Polyps, Chronic Suppurative Otitis Media and Related Disorders, Hernia, Hydrocele, Fistula / Fissure in ano and Hemorrhoids Congenital Internal Disease/defect .
- b) All treatments (conservative, interventional, open, Laparoscopic ) for Hepatobiliary Gall Bladder and Pancreatic stones and Genitourinary calculi.
- c) All treatments (conservative, interventional, open, laparoscopic) for Uterine prolapse, Dysfunctional Uterine Bleeding, Fibroids, Pelvic Inflammatory Diseases, all diseases of fallopian tubes and ovaries,
- d) Arthroscopic repair /removal [other than caused by an accident]

If these are Pre-Existing at the time of proposal they will be covered after 48 months

This waiting period shall not however apply in the case of the Insured person/s having been covered under any Individual health insurance scheme with any of the Indian Insurer for a continuous period of preceding 24 months without any break. The Claim for such illnesses/diseases/disabilities contracted /suffered if admitted will be processed as per the Sum Insured of immediately preceding 24 months policy only and where there is a change in the Sum Insured in the second continuous policy year the lower of the Sum Insured will apply.

## ★ Renewal and Grace period

A grace period of 30 days from the date of expiry is available for renewal. If renewal is made within this grace period continuity of benefits in terms of waiting period will be allowed. However the actual period of cover will start only from the date of payment of premium. Renewal premium, policy terms and conditions are subject to change with prior approval of the Regulator

## ★ Free Look Period

A free look period of 15 days from the date of receipt of the policy 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 shall allow refund of premium paid after adjusting the cost of pre-acceptance medical screening, stamp duty charges and proportionate risk premium for the period concerned provided no claim has been made until such cancellation.

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

## ★ Policy Premium:

Refer Premium Table

## ★ 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.

## ★ Cancellation

The Company may cancel the policy on ground of misrepresentation, fraud, moral hazard, non-disclosure of material fact as declared in the proposal form / at the time of claim, non-co-operation by the insured person, by sending the insured 30 days notice by registered letter at the insured person's last known address. 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 below) provided no claim has occurred upto the date of cancellation:

SHORT PERIOD RATE	
PERIOD ON RISK	RATE OF PREMIUM TO BE RETAINED BY THE INSURER
Up to one-month	1/3rd of annual premium
Up to three Months	½ of annual premium
Up to six months	3/4th of annual premium
Exceeding six months	Full annual premium

★ **Portability:** This policy is portable. 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

★ **Claims Procedure**

- Call the 24 hour help-line for assistance - 1800 425 2255 / 1800 102 4477
- 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 after hospitalization.
- Cashless facility wherever possible in network hospital
- In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents.

★ **Star Advantages**

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

★ **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.

★ **Prohibition of rebates**

(Section 41 of the Insurance Act) 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 relation 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 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 provision of this section shall be liable for a penalty which may extend to ten lakh rupees.

**Schedule of Benefits**

The expenses payable in respect of the following diseases /conditions is up-to the amount mentioned there - against:

Sr No	Diseases / conditions	Limit of Company's liability in one policy period	
		Sum Insured Rs.200000/-	Sum Insured Rs. 300000/-
1	All Cardiac diseases /ailments a. For Coronary Artery By-Pass Grafting(CABG) b. PTCA (All inclusive irrespective of the number of stents used) (The limits mentioned are inclusive of cost of Angiogram)	110000/- 70000/-	125000/- 80000/-
2	Minor surgeries warranting Hospitalization	12000/-	15000/-
3	Admissions for medical diseases related to Cardio-Vascular System / Central Nervous System	35000/-	45000/-
4	Major surgeries other than what is specifically provided for.	35000/-	45000/-
5	Oncology (all modes of therapy )	70000/-	100000/-
6	Accidental grievous injuries	70000/-	100000/-
7.	Joint Replacement	70000/-	100000/-
8	Renal Transplant Surgery Dialysis Per sitting cost limited to Rs1000/-	70000/- 15000/-	100000/- 20000/-
9	Cataract	15000/-	20000/-
10	Treatment for infectious diseases	Up-to 3000/- per day subject to a maximum of 9000/- per hospitalization	Up-to 4500/- per day subject to a maximum of 12000/- per hospitalization

Premium Rating in Rs. Excluding Tax						
Sum Insured Rs.2,00,000/-						
Age (years)	Family Size					
	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C
5mths-35	2800	3100	3650	3000	3700	4500
36 -45	3250	3750	4500	3600	4200	5000
46 -50	5100	5600	6300	5550	6100	6900
51-55	5600	6200	7000	6200	7000	7900
56-60	6400	7000	7800	7200	8100	9100
61-65	9000	9800	11000	10100	11400	12800
* 66-70	11300	12300	13800	12700	14300	16000
* 71-75	14700	16000	18000	16600	18600	20800
* Above 75 yrs	19200	20800	23400	21600	24200	27100
Sum Insured Rs.3,00,000/-						
5mths-35	3710	3825	4400	3985	4300	4800
36-45	3940	4300	5200	4360	4830	5600
46 -50	5900	6400	7100	6300	6900	7700
51-55	6930	7160	7900	7605	7900	9100
56-60	8500	9000	10095	10030	10625	11090
61-65	11900	12600	14200	14100	14900	15600
66-70	14900	15800	17800	17700	18700	19500
71-75	19400	20600	23200	23100	24400	25400
Above 75 yrs	25300	26800	30200	30100	31800	33100

\* For Renewals only

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](http://www.starhealth.in)

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STAR HEALTH AND ALLIED INSURANCE CO LTD  
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**Affordable health cover for the entire family**



Insurance is a subject matter of solicitation