

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

❖ 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 : +91-044-2828869

❖ Claims Procedure

- ★ Call the 24 hour help-line for assistance : 1800-425-2255 / 1800-102-4477. Inform the ID/Policy number for easy reference
- ★ 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 in all network hospitals wherever possible
- ★ In non-network hospitals payment, must be made up-front and then reimbursement will be effected on submission of documents.

❖ 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.

❖ 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 : 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 lakh rupees.



❖ 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 period is not applicable at the time of renewal of the policy

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

"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"

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FAMILY HEALTH OPTIMA Insurance plan

Unique Identification No. : IRDAI/HLT/SHAI/P-H/V.III/129/2017-18



STAR HEALTH AND ALLIED INSURANCE CO LTD
REGD & CORPORATE OFFICE: 1, New Tank Street,
Valluvar Kottam High Road, Nungambakkam, Chennai 600 034.



FAMILY HEALTH OPTIMA Insurance plan

FAMILY HEALTH OPTIMA Insurance plan

UIN No. : IRDAI/HLT/SHAI/P-H/V.III/129/2017-18

A Super saver Plan covering the entire family under single sum insured. Loaded with extra benefits.

A Super Saver Policy

- ★ Single Sum Insured
- ★ Extra Benefits
- ★ Coverage for entire family
- ★ Considerable saving in premium as the family is covered under one policy.

ELIGIBILITY

- ★ Any person aged between 18 years and 65 years, residing in India, can take this insurance
- ★ Beyond 65 years, It can be renewed for life time.
- ★ Child above 16 days of age can be covered as part of the family. If, at the commencement of the policy, the new born child as defined in the policy clause is less than 16 days of age, the proposer can opt to cover such child also in the same policy by paying the applicable premium in full. However, the cover for such child will commence only from the 16th day after its birth and continue till the expiry date of the policy.
- ★ **Family** : Proposer, spouse, dependent children from 16 days up to 25 years (Children who are economically dependent on their parents)

POLICY BENEFITS

❖ In-Patient Hospitalisation Benefits :

A) Room, Boarding, Nursing Expenses as given below :-

Sum Insured Rs.	Limit Rs.
1,00,000	Up to 2,000/- per day
2,00,000	
3,00,000	
4,00,000	Up to 5,000/- per day
5,00,000	
10,00,000	
15,00,000	
20,00,000	
25,00,000	Single Standard A/C Room

- B) Surgeon, Anesthetist, Medical Practitioner, Consultants & Specialist Fees.
C) Anesthesia, Blood, Oxygen, Operation Theatre charges, cost of Pacemaker etc.
E) Cost of Medicine and drugs
F) **Ambulance Charges** : Emergency ambulance charges up to a sum of Rs.750/- per hospitalisation and overall limit of Rs.1500/- per policy period.
G) **Air Ambulance Cover** : Up to 10% of the Basic sum insured per policy period. Available for Sum Insured of Rs. 5 Lakhs and above only.
- ❖ **Pre & Post Hospitalization**
Pre-hospitalization medical expenses incurred up to 60 days are payable.
Post-hospitalization medical expenses incurred up to 90 days are payable.
 - ❖ **Pre-existing Diseases** : Covered after 48 months

❖ Waiting Periods

- ★ 30 days waiting period.
- ★ 24 months waiting period for specified illness/diseases/treatments
- ★ 36 months waiting period for Assisted Reproduction Treatment.

❖ Day Care Procedures : All day care procedures covered.

❖ Pre-Acceptance Medical Screening :

All persons above 50 years of age and those who declare adverse medical history in the proposal form are required to undergo pre-acceptance medical screening at the Company designated Centers The cost of such screening will be borne by the Company. The age for screening and the cost sharing are subject to change.

SPECIAL FEATURES

❖ Domiciliary Hospitalization

Coverage for medical treatment for a period exceeding three days, for an illness/disease/injury, which in the normal course, would require care and treatment at a Hospital but is actually taken whilst confined at home under any of the following circumstances:

- ★ The condition of the patient is such that he/she is not in a condition to be removed to a Hospital, or
- ★ The patient takes treatment at home on account of non-availability of room in a hospital.

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

❖ Donor Expenses For Organ Transplantation payable where the insured is the recipient. Maximum payable under this head is 10% of the sum insured or Rupees one lakh whichever is less, subject to availability of the sum insured and provided the claim for transplantation is payable. Donor screening expenses are not payable.

❖ Cost Of Health Check Up

Expenses incurred towards cost of health check-up up to the limits mentioned in the table given below for every claim free year provided the health checkup is done at network hospitals and the policy is in force. Payment under this benefit does not form part of the sum insured and will not impact the Bonus. If a claim is made by any of the insured persons, the health check up benefits will not be available under the policy.

Note : Payment of expenses towards cost of health check up will not prejudice the company's right to deal with a claim in case of non disclosure of material fact and / or Pre-Existing Diseases in terms of the policy

Sum Insured Rs.	Limit Per Policy Period (Rs.)
1,00,000/-	Not Available
2,00,000/-	
3,00,000/-	Up to 750/-
4,00,000/-	Up to 1,000/-
5,00,000/-	Up to 1,500/-
10,00,000/-	Up to 2,000/-
15,00,000/-	Up to 2,500/-
20,00,000/-	Up to 3,000/-
25,00,000/-	Up to 3,500/-

Plan Type	Zone 1					Zone 1A									
	Age in yrs.	300000	400000	500000	1000000	1500000	2000000	2500000	3000000	4000000	5000000	10000000	15000000	20000000	25000000
2A+1C	61-65	28,520	32,135	34,400	41,945	49,720	55,700	61,295	68,690	77,880	88,120	100,000	114,000	130,000	148,000
	66-70	32,680	36,795	39,300	47,880	56,725	63,545	69,930	78,280	89,000	101,000	114,000	129,000	146,000	165,000
2A+2C	61-65	31,730	35,725	38,175	46,520	55,120	61,750	67,950	75,400	85,200	96,000	108,000	121,000	136,000	153,000
	66-70	36,370	40,925	43,645	53,145	62,935	70,500	77,580	86,400	96,800	108,000	121,000	136,000	153,000	172,000
2A+3C	61-65	17,595	19,805	20,770	26,290	31,025	34,840	38,415	42,175	46,335	50,900	55,900	61,350	67,200	73,500
	66-70	23,550	26,475	27,530	34,790	41,055	46,070	50,770	55,300	60,000	65,000	70,300	75,900	81,800	88,000

PREMIUM CHART EXCLUDING SERVICE TAX

Please take the age of the Eldest person

Zone 2		Zone 3		Rest of India				
A -Adult, C-Child		Sum Insured in Rs.		Sum Insured in Rs.				
Plan Type	Age in yrs.	300000	400000	500000	1000000	1500000	2000000	2500000
1A+1C	16days-35	6,025	6,845	7,885	10,350	12,210	13,765	15,240
	36-45	6,610	7,505	8,590	11,250	13,270	14,960	16,550
1A+2C	61-65	8,415	9,525	10,750	14,020	16,535	18,615	20,570
	66-70	11,160	12,595	14,040	18,225	21,505	24,175	26,690

2A (Self + Spouse)	16days-35	10,635	12,010	13,415	17,425	20,555	23,120	25,525
	36-45	11,755	13,265	14,755	19,140	22,580	25,385	28,015
2A+1C	61-65	9,320	10,540	11,840	15,410	18,180	20,455	22,595
	66-70	12,820	14,460	16,030	20,775	24,510	27,550	30,395

2A+1C	61-65	23,555	26,575	29,435	37,285	44,215	49,535	54,520
	66-70	26,975	30,400	33,600	42,525	50,395	56,460	62,135
2A+2C	61-65	19,435	21,870	23,960	30,930	36,490	40,965	45,155
	66-70	23,705	26,740	29,610	37,505	44,475	49,830	54,845
2A+3C	61-65	52,750	59,270	65,070	82,070	97,065	1,08,730	1,19,630
	66-70	59,390	66,710	70,760	86,000	1,01,705	1,13,920	1,25,340