



Personal & Caring

Health
Insurance

The Health Insurance Specialist



OUR PROTECTION
EXTENDS TO MEET
THE RISING
+ EXPENSE

Super Surplus
Insurance
Policy

Super Surplus Insurance Policy

Unique Identification No.: SHAHLIP22035V062122

Super Surplus Insurance Policy is a top-up plan with sum insured on individual.

◆ **Eligibility**

- Any person aged between 18 years and 65 years
- Family:** Self, Spouse and economically dependent children aged from 91 days to 25 years
- Dependent Children** can be covered with either of Parent

◆ **Policy term:** 1 Year / 2 Years.

Note: Where the policy is issued for more than 1 year, the Sum Insured including Deductibles / Defined limit is for each of the year, without any carry over benefit thereof. The said benefits / covers available for the 2nd year cannot be utilized in the 1st year itself. The terms conditions and exceptions that appear in the Policy or in any Endorsement are part of the contract, must be complied with and applies to each policy year

◆ **Long Term Discount:** If the entire premium applicable for two years is paid in advance, discount available is 5%

◆ **Instalment option:** Premium can be paid Quarterly and Half yearly. Premium can also be paid Annual and Biennial (Once in 2 years). For instalment mode of payment there will be loading as given below;

Quarterly - 3% | Half-year - 2%

Note: If premium is paid on instalment basis, long term discount of 5% is not available

◆ **Renewal:** Life Long Renewals.

◆ **Pre-acceptance Medical Screening (both Silver and Gold Plans):** No Pre-acceptance Medical Screening is required.

◆ **Day care Procedures:** All Day Care Procedures are covered.

◆ **Plans Offered:** Silver and Gold Plan

◆ **Policy Type:** Individual

◆ **Sum Insured Options**

SILVER PLAN

Sum Insured Rs.	Deductible Rs.
7,00,000/-	3,00,000/-
10,00,000/-	3,00,000/-

Under this plan an admissible claim gets paid only when it exceeds the deductible. Amount payable is only in excess of the deductible opted for each and every hospitalization.

Deductible means the amount upto which the company will not be liable for each and every hospitalization.

Note: Deductible opted cannot be changed at the time of renewal.

GOLD PLAN

Sum Insured Rs.	Defined Limit Rs.
5,00,000/-, 7,00,000/-, 10,00,000/-, 15,00,000/-, 20,00,000/-, 25,00,000/-, 50,00,000/-, 75,00,000/-, 100,00,000/-	3,00,000/-
5,00,000/-, 10,00,000/-, 15,00,000/-, 20,00,000/-, 25,00,000/-, 50,00,000/-, 75,00,000/-, 100,00,000/-	5,00,000/-, 10,00,000/-, 15,00,000/-, 20,00,000/-, 25,00,000/-

Under this plan an admissible claim gets paid only when the aggregate of expenses under hospitalization (single or more than one) exceeds the Defined limit opted. Amount payable is only in excess of the Defined limit*

Defined limit means the amount upto which the company will not be liable during the policy period.

Note: Defined Limit once opted cannot be changed either during the currency of the policy or at the time of renewal

◆ Coverage

Silver Plan	Gold Plan
Hospitalization cover: Room, Boarding, Nursing Expenses as provided by the Hospital / Nursing Home subject to a maximum of Rs.4,000/- per day.	Hospitalization cover: Room (Single Private A/C room), Boarding, nursing expenses as provided by the Hospital / Nursing Home.
Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees.	Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees.
Anesthesia, Blood, Oxygen, Operation Theatre charges, ICU Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, cost of Pacemaker and similar expenses.	Anesthesia, Blood, Oxygen, Operation Theatre charges, ICU Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, cost of Pacemaker and similar expenses.
Pre-hospitalization Expenses: Medical expenses incurred up to 30 days immediately before the insured person is hospitalized.	Pre-hospitalization Expenses: Medical expenses incurred up to 60 days immediately before the insured person is hospitalized.
Post Hospitalization Expenses: Medical expenses incurred up to 60 days immediately after the insured person is discharged from the hospital	Post Hospitalization Expenses: Medical expenses incurred up to 90 days immediately after the insured person is discharged from the hospital
Coverage for Modern Treatments: Expenses are subject to the limits (For details please refer website www.starhealth.in)	Coverage for Modern Treatments: Expenses are subject to the limits (For details please refer website www.starhealth.in)
AYUSH Treatment: Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a AYUSH Hospital is payable up to the sum insured. Note : Claims under Yoga and Naturopathy system of treatment will be payable subject to prior approval from the company	AYUSH Treatment: Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a AYUSH Hospital is payable up to the sum insured. Note : Claims under Yoga and Naturopathy system of treatment will be payable subject to prior approval from the company
	Emergency ambulance charges up-to a Rs.3000/- per policy period for transportation of the insured person to the hospital
	Air Ambulance expenses Up-to 10% of the sum insured per policy period. Applicable for sum insured option of Rs.7 lacs and above.
	Facility of obtaining E-Medical Opinion
Note (Applicable for both silver and Gold Plan): Hospitalisation expenses which vary based on the room rent occupied by the insured person will be considered in proportion to the room category stated in the policy or actuals whichever is less. Proportionate deductions are not applied in respect of the hospitals which do not follow differential billing or for those expenses in respect of which differential billing is not adopted based on the room category.	

◆ Special Features for Gold Plan

- Delivery Expenses** for a Delivery including Delivery by Caesarean section (including pre-natal, post-natal expenses and lawful medical termination of pregnancy) up-to Rs.50,000/- per policy period, subject to a maximum of 2 deliveries in the entire life time of the insured person are payable while the policy is in force.

Special Conditions

- This Benefit is subject to a waiting period of 12 months from the date of commencement of first Super Surplus Insurance Policy and continuous renewal thereof with the company.
 - Pre-hospitalization and Post Hospitalization expenses are not applicable for this benefit.
 - This cover is available only when both Self and Spouse are covered under this policy
 - The policy covering the self and spouse are in force when this benefit becomes payable.
 - Claims under this section will not reduce the Sum Insured
- Organ Donor Expenses** for organ transplantation where the insured person is the recipient are payable provided the claim for transplantation is payable and subject to the availability of the sum insured. Donor screening expenses and post-donation complications of the donor are not payable.
 - Recharge Benefit:** If the sum insured under the policy is exhausted/ exceeded during the policy period, additional indemnity up to the limits stated in the table given below would be provided once for the remaining policy period. Such additional indemnity can be utilized

even for the same hospitalization or for the treatment of diseases / illness / injury / for which claim was paid / payable under the policy. The unutilized Recharge amount cannot be carried forward. This benefit is not available for Modern Treatments.

Defined Limit Rs.	Recharge Limit Rs.
3,00,000/-	50,000/-
5,00,000/-	75,000/-
10,00,000/-	1,00,000/-
15,00,000/- and above	2,50,000/-

- **Wellness Services:** Wellness services can be availed through mobile App and customer portal. For details please refer website www.starhealth.in
- **Waiver of Deductible (Applicable only for Gold Plan):** The Proposer can opt at the beginning of 6th year before renewal of this policy or later during any successive renewal, for an Indemnity Health Insurance policy without defined limit offered by the Company (subject to underwriting) with continuity of benefits for the average sum insured of immediately preceding 5 years period subject to the following;
 - a) All Insured Persons are insured with the Company under this policy before the age of 50 years and have been continuously renewed without any break
 - b) No claim has been made during the immediately preceding 5 years
 - c) The proposer should exercise this option for all the insured persons.
 - d) This policy shall not be further renewed if the option is exercised

◆ **Exclusions (Applicable for Both Silver and Gold Plan):** The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the insured person in connection with or in respect of:

1. Pre-Existing Diseases - Code Excl 01

- A. **Applicable for Silver Plan:** Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 36 months of continuous coverage after the date of inception of the first policy with insurer.
Applicable for Gold Plan: Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 12 months of continuous coverage after the date of inception of the first policy with insurer.
- B. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- C. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDA, then waiting period for the same would be reduced to the extent of prior coverage.
- D. **Applicable for Silver Plan:** Coverage under the policy after the expiry of 36 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.
Applicable for Gold Plan: Coverage under the policy after the expiry of 12 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.

2. Specified disease / procedure waiting period - Code Excl 02

- A. **Applicable for Silver Plan:** Expenses related to the treatment of the following listed Conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.
Applicable for Gold Plan: Expenses related to the treatment of the following listed Conditions, surgeries/treatments shall be excluded until the expiry of 12 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.
- B. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- C. If any of the specified disease/procedure falls under the waiting period specified for pre-Existing diseases, then the longer of the two waiting periods shall apply.
- D. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.
- E. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.

- F. List of specific diseases/procedures
 1. Treatment of Cataract and diseases of the anterior and posterior chamber of the Eye, Diseases of ENT, Diseases related to Thyroid, Benign diseases of the breast.
 2. Subcutaneous Benign Lumps, Sebaceous cyst, Dermoid cyst, Mucous cyst lip / cheek, Carpal Tunnel Syndrome, Trigger Finger, Lipoma, Neurofibroma, Fibroadenoma, Ganglion and similar pathology
 3. All treatments (Conservative, Operative treatment) and all types of intervention for Diseases related to Tendon, Ligament, Fascia, Bones and Joint Including Arthroscopy and Arthroplasty / Joint Replacement [other than caused by accident].
 4. All types of treatment for Degenerative disc and Vertebral diseases including Replacement of bones and joints and Degenerative diseases of the Musculo-skeletal system, Prolapse of Intervertebral Disc (other than caused by accident),
 5. All treatments (conservative, interventional, laparoscopic and open) related to Hepato-pancreato-biliary diseases including Gall bladder and Pancreatic calculi. All types of management for Kidney and Genitourinary tract calculi.
 6. All types of Hernia,
 7. Desmoid Tumor, Umbilical Granuloma, Umbilical Sinus, Umbilical Fistula,
 8. All treatments (conservative, interventional, laparoscopic and open) related to all Diseases of Cervix, Uterus, Fallopian tubes, Ovaries, Uterine Bleeding, Pelvic Inflammatory Diseases
 9. All Diseases of Prostate, Stricture Urethra, all Obstructive Uropathies,
 10. Benign Tumours of Epididymis, Spermatocoele, Varicocoele, Hydrocele,
 11. Fistula, Fissure in Ano, Hemorrhoids, Pilonidal Sinus and Fistula, Rectal Prolapse, Stress Incontinence
 12. Varicose veins and Varicose ulcers
 13. All types of transplant and related surgeries.
 14. Congenital Internal disease / defect
3. **30-day waiting period - Code Excl 03**
 - A. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered.
 - B. This exclusion shall not, however, apply if the Insured Person has continuous coverage for more than twelve months.
 - C. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.
4. **Investigation & Evaluation - Code Excl 04**
 - A. Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded.
 - B. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.
5. **Rest Cure, rehabilitation and respite care - Code Excl 05:** Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:
 1. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.
 2. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.
6. **Obesity / Weight Control - Code Excl 06:** Expenses related to the surgical treatment of obesity that does not fulfill all the below conditions:
 - A. Surgery to be conducted is upon the advice of the Doctor
 - B. The surgery/Procedure conducted should be supported by clinical protocols
 - C. The member has to be 18 years of age or older and
 - D. Body Mass Index (BMI);
 1. greater than or equal to 40 or
 2. greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - a. Obesity-related cardiomyopathy
 - b. Coronary heart disease
 - c. Severe Sleep Apnea
 - d. Uncontrolled Type2 Diabetes
7. **Change-of-Gender treatments - Code Excl 07:** Expenses related to any treatment, including surgical management, to change characteristics of the body to

those of the opposite sex.

8. **Cosmetic or plastic Surgery - Code Excl 08:** Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.
9. **Hazardous or Adventure sports - Code Excl 09:** Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.
10. **Breach of law - Code Excl 10:** Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.
11. **Excluded Providers - Code Excl 11:** Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim.
12. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof - **Code Excl 12**
13. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons - **Code Excl 13**
14. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure - **Code Excl 14**
15. **Refractive Error - Code Excl 15:** Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.
16. **Unproven Treatments - Code Excl 16:** Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.
17. **Sterility and Infertility - Code Excl 17:** Expenses related to sterility and infertility. This includes:
 - a. Any type of contraception, sterilization
 - b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - c. Gestational Surrogacy
 - d. Reversal of sterilization
18. **Maternity - Code Excl 18: (Except to the extent of Delivery Expenses)**
 - a. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;
 - b. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period.
19. Circumcision(unless necessary for treatment of a disease not excluded under this policy or necessitated due to an accident), Preputioplasty, Frenuloplasty, Preputial Dilatation and Removal of SMEGMA - **Code Excl 19**
20. Congenital External Condition / Defects / Anomalies - **Code Excl 20**
21. Convalescence, general debility, run-down condition, Nutritional deficiency states - **Code Excl 21**
22. Intentional self injury - **Code Excl 22**
23. 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) - **Code Excl 24**
24. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materia - **Code Excl 25**
25. Expenses incurred on Enhanced External Counter Pulsation Therapy and related therapies, Chelation therapy, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy, VAX-D, Low level laser therapy, Photodynamic therapy and such other similar therapies - **Code Excl 26**
26. Unconventional, Untested, Experimental therapies - **Code Excl 27**
27. Autologous derived Stromal vascular Fraction, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy - **Code Excl 28**

28. Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted - **Code Excl 29**
29. All treatment for Priapism and erectile dysfunctions, Change of Sex - **Code Excl 30**
30. Inoculation or Vaccination (except for post-bite treatment and for medical treatment for therapeutic reasons - **Code Excl 31**
31. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable) - **Code Excl 32**
32. Medical and / or surgical treatment of Sleep apnea, treatment for endocrine disorders - **Code Excl 33**
33. Hospital registration charges, admission charges, record charges, telephone charges and such other charges - **Code Excl 34**
34. Cochlear implants and procedure related hospitalization expenses - **Code Excl 35**
35. Expenses incurred for treatment of diseases/illness/accidental injuries which does not warrant hospitalization - **Code Excl 36**
36. Other Excluded Expenses as detailed in our website www.starhealth.in - **Code Excl 37**
37. Existing disease/s, disclosed by the Insured and mentioned in the policy schedule under Permanent Exclusion (based on Insured's consent) - **Code Excl 38**
38. Any medical expenses incurred towards treatment of New Born Baby - **Code Excl 44**

◆ **Moratorium Period (Applicable for both Silver and Gold Plan):** After completion of sixty continuous months of coverage (including portability and migration) under the health insurance policy no look back to be applied. This period of sixty months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of sixty continuous months would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance claim shall be contestable except for proven fraud, nondisclosure, misrepresentation and exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract.

◆ **Renewal:** The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the Insured Person.

1. Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years.
2. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.
3. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy.
4. Coverage is not available during the grace period.
5. No loading shall apply on renewals based on individual claims experience

◆ **Migration:** The insured person will have the option to migrate the policy to other health insurance products/plans offered by the company by applying for migration of the Policy atleast 30 days before the policy renewal date as per IRDAI guidelines on Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, the insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on migration

◆ **Portability:** The insured person will have the option to port the policy to other insurers by applying to such insurer to port the entire policy along with all the members of the family, if any, at least 30 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability. For details contact "portability@starhealth.in" or call Telephone No +91-044-28288869

◆ **Possibility of Revision of Terms of the Policy Including the Premium Rates:** The Company, may revise or modify the terms of the policy including premium rates as per the extant Guidelines. The insured person shall be notified thirty days before the changes are effected.

◆ **Revision in sum insured:** Any Revision in sum insured is permissible only at the time of Renewal. The insured person can propose such revision and may be allowed subject to company's approval and payment of appropriate premium.

- ◆ **Free Look Period:** The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.

The insured person shall be allowed free look period of thirty days from date of receipt of the policy document whether electronically or otherwise to review the terms and conditions of the policy, and to return the same if not acceptable.

If the insured has not incurred any claim during the Free Look Period, the insured shall be entitled to

- a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person
- where the risk has already commenced and the option of return of the policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or
- where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period

- ❖ **Premium Payment in Instalments:** If the insured person has opted for Payment of Premium on an instalment basis i.e. Half Yearly or Quarterly, as mentioned in the policy Schedule/Certificate of Insurance, the following Conditions shall apply (notwithstanding any terms contrary elsewhere in the policy);

- For monthly instalment option: Grace Period of 15 days would be given to pay the instalment premium due for the policy.
- For Quarterly and Half yearly instalment option: Grace Period of 30 days would be given to pay the instalment premium due for the policy.
- The insured person will get the accrued continuity benefit in respect of the "Waiting Periods", "Specific Waiting Periods" in the event of payment of premium within the stipulated grace Period
- No interest will be charged if the instalment premium is not paid on due date
- In case of instalment premium due not received within the grace period, the policy will get cancelled
- In the event of a claim, all subsequent premium instalments shall immediately become due and payable
- The company has the right to recover and deduct all the pending installments from the claim amount due under the policy
- For premium paid in instalments during the policy period, coverage is available during the grace period also

- ◆ **Withdrawal of the policy**

- In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy.
- Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period as per IRDAI guidelines, provided the policy has been maintained without a break.

- ◆ **Automatic Expiry:** The insurance under this policy with respect to each relevant Insured Person shall expire immediately on the earlier of the following events:

- ✓ Upon the death of the Insured Person. This also means that, the cover for the surviving members of the family will continue, subject to other terms of the policy.
- ✓ Upon exhaustion of the sum insured under the policy

- ◆ **Disclosure to information norms:** The policy shall become void and all premium paid thereon shall be forfeited to the Company, in the event of mis-representation, mis description or non-disclosure of any material fact by the policy holder.

- ◆ **Cancellation**

- The Policyholder may cancel his policy any time during the term by giving 7 days written notice. In such an event, The Company shall
 - refund proportionate premium for unexpired policy period, if policy term is upto one year and there is no claim (s) made during the policy period.
 - refund premium for the unexpired policy period, in respect of policies with policy term more than 1 year and risk coverage for such policy years has not commenced.
- The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud

◆ Claims Procedure

- For assistance call 24 hours help-line 044-69006900 or Toll Free No. 1800 425 2255. Senior Citizens may call at 044-40020888
- 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, subject to admissibility of the claim
- KYC (Identity proof with Address) of the proposer, as per AML Guidelines
- NEFT documents viz., Customer name, Bank Account No., Name of the Bank, IFSC code
- CKYC No. of the proposer (if available)

❖ Claim Illustration

GOLD PLAN							
Scenario	Claim No.	Sum Insured under the policy (Rs.)	Defined Limit under the policy (Rs.)	Hospitalization Amount (Rs.)	Defined Limit applied for claim (Rs.)	Claim Payable (Rs.)	Balance Sum Insured available for next claim (Rs.)
1	1	10,00,000	3,00,000	3,00,000	3,00,000	0	10,00,000
	2			6,00,000	0	6,00,000	4,00,000
	3			6,00,000	0	4,00,000	0
2	1	10,00,000	3,00,000	6,00,000	3,00,000	3,00,000	7,00,000
	2			5,00,000	0	5,00,000	2,00,000
	3			3,00,000	0	2,00,000	0
SILVER PLAN							
Scenario	Claim No.	Sum Insured under the policy (Rs.)	Deductible Limit under the policy (Rs.)	Hospitalization Amount (Rs.)	Deductible Limit applied for claim (Rs.)	Claim Payable (Rs.)	Balance Sum Insured available for next claim (Rs.)
1	1	10,00,000	3,00,000	3,00,000	3,00,000	0	10,00,000
	2			6,00,000	3,00,000	3,00,000	7,00,000
	3			9,00,000	3,00,000	6,00,000	1,00,000

◆ TAXES ARE SUBJECT TO CHANGES IN TAX LAWS

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

◆ 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 operation in 2006 as India's first Standalone Health Insurance provider. As an exclusive Health Insurer, the company is providing sterling services in Health, Personal Accident & Overseas Travel Insurance and is committed to setting international benchmarks in service and personal caring.

- Redressal of Grievance:** In case of any grievance the insured person may contact the Company through

Website : www.starhealth.in

E-mail : gro@starhealth.in, grievances@starhealth.in

Ph. No. : 044-69006900 | Toll Free No. 1800 425 2255

Senior Citizens may call at 044-69007500

Courier/Post : Star Health and Allied Insurance Company Limited.,
4th Floor, Balaji Complex, No.15, Whites Lane,
Whites Road, Royapettah, Chennai- 600014

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.

If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at 044-43664600.

For updated details of grievance officer, kindly refer the link

<https://www.starhealth.in/grievance-redressal>

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017.

Grievance may also be lodged at IRDAI Integrated Grievance Management System - <https://bimabharosa.irdai.gov.in/>

- ◆ **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.

Super Surplus Insurance Policy

Unique Identification No.: SHAHLIP22035V062122

Buy this Insurance Online at www.starhealth.in and avail discount 5%
This discount is available for first purchase 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

IRDAI OR ITS OFFICIALS DO NOT INVOLVE IN ACTIVITIES LIKE SELLING INSURANCE POLICIES, ANNOUNCING BONUS OR INVESTMENT OF PREMIUMS. PUBLIC RECEIVING SUCH PHONE CALLS ARE REQUESTED TO LODGE A POLICE COMPLAINT

Star Health And Allied Insurance Co Ltd

Registered Office : No. 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai - 600 034. Phone : 044 - 2828 8800

Corporate Office : No. 148, Acropolis, Dr. Radha Krishnan Salai, Mylapore, Chennai - 600 004. Phone : 044 - 4788 6666

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CIN: L66010TN2005PLC056649 | IRDAI Regn. No: 129

Super Surplus Insurance Policy Unique Identification No.: SHAHLIP22035V062122 BRO / SSI / V.14 / 2024										
1 YEAR PREMIUM CHART (Excluding Tax)										
SILVER PLAN										
Deductible Rs.3,00,000/-										
Age in Yrs		Sum Insured (Rs.)								
		7,00,000					10,00,000			
91days-35		1,165					1,460			
36-45		1,460					1,820			
46-50		1,820					2,275			
51-55		2,025					2,530			
56-60		2,130					2,660			
61-65		2,240					2,800			
66-70		2,580					3,220			
71-75		2,965					3,705			
76-80		3,410					4,260			
Above 80		3,920					4,900			
GOLD PLAN										
Defined Rs.3,00,000/-										
Family size	Age-band	5,00,000	7,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000
1A	91days-35	1,530	1,835	2,140	2,675	3,210	3,690	4,335	4,770	5,005
	36-45	1,960	2,350	2,745	3,430	4,115	4,730	5,555	6,110	6,420
	46-50	2,545	3,055	3,565	4,455	5,345	6,150	7,225	7,945	8,345
	51-55	3,055	3,665	4,280	5,345	6,415	7,375	8,670	9,535	10,010
	56-60	3,515	4,215	4,920	6,150	7,375	8,485	9,965	10,965	11,510
	61-65	4,215	5,060	5,900	7,375	8,850	10,180	11,960	13,155	13,815
	66-70	4,850	5,820	6,785	8,485	10,180	11,705	13,755	15,130	15,885
	71-75	5,575	6,690	7,805	9,755	11,705	13,460	15,815	17,400	18,270
	76-80	6,410	7,695	8,975	11,220	13,460	15,480	18,190	20,005	21,010
Above 80	7,375	8,845	10,320	12,900	15,480	17,800	20,915	23,010	24,160	
Defined Rs.5,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-35	1,225	1,715	2,140	2,570	2,950	3,470	3,815	4,005	
	36-45	1,570	2,195	2,745	3,290	3,785	4,445	4,890	5,135	
	46-50	2,040	2,855	3,565	4,280	4,920	5,780	6,355	6,675	
	51-55	2,445	3,425	4,280	5,135	5,900	6,935	7,630	8,010	
	56-60	2,810	3,935	4,920	5,900	6,785	7,975	8,770	9,210	
	61-65	3,375	4,720	5,900	7,080	8,145	9,570	10,525	11,050	
	66-70	3,880	5,430	6,785	8,145	9,365	11,005	12,105	12,710	
	71-75	4,460	6,245	7,805	9,365	10,770	12,655	13,920	14,615	
	76-80	5,130	7,180	8,975	10,770	12,385	14,550	16,005	16,805	
Above 80	5,900	8,255	10,320	12,385	14,240	16,735	18,405	19,325		
Defined Rs.10,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-35	920	1,285	1,605	1,925	2,215	2,600	2,860	3,005	
	36-45	1,175	1,645	2,060	2,470	2,840	3,335	3,670	3,850	
	46-50	1,530	2,140	2,675	3,210	3,690	4,335	4,770	5,005	
	51-55	1,835	2,570	3,210	3,850	4,425	5,200	5,720	6,005	
	56-60	2,110	2,950	3,690	4,425	5,090	5,980	6,580	6,910	
	61-65	2,530	3,540	4,425	5,310	6,110	7,175	7,895	8,290	
	66-70	2,910	4,075	5,090	6,110	7,025	8,255	9,080	9,530	
	71-75	3,345	4,685	5,855	7,025	8,080	9,490	10,440	10,960	
	76-80	3,850	5,385	6,730	8,080	9,290	10,915	12,005	12,605	
Above 80	4,425	6,195	7,740	9,290	10,680	12,550	13,805	14,495		
Defined Rs.15,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-35	690	965	1,205	1,445	1,660	1,950	2,145	2,255	
	36-45	885	1,235	1,545	1,850	2,130	2,500	2,750	2,890	
	46-50	1,150	1,605	2,005	2,405	2,770	3,250	3,575	3,755	
	51-55	1,375	1,925	2,405	2,890	3,320	3,900	4,290	4,505	
	56-60	1,585	2,215	2,770	3,320	3,820	4,485	4,935	5,180	
	61-65	1,900	2,655	3,320	3,985	4,580	5,385	5,920	6,220	
	66-70	2,185	3,055	3,820	4,580	5,270	6,190	6,810	7,150	
	71-75	2,510	3,515	4,390	5,270	6,060	7,120	7,830	8,220	
	76-80	2,885	4,040	5,050	6,060	6,965	8,185	9,005	9,455	
Above 80	3,320	4,645	5,805	6,965	8,010	9,415	10,355	10,875		
Defined Rs.20,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-35	550	770	965	1,155	1,330	1,560	1,720	1,805	
	36-45	705	990	1,235	1,480	1,705	2,000	2,200	2,310	
	46-50	920	1,285	1,605	1,925	2,215	2,600	2,860	3,005	
	51-55	1,100	1,540	1,925	2,310	2,655	3,120	3,435	3,605	
	56-60	1,265	1,770	2,215	2,655	3,055	3,590	3,950	4,145	
	61-65	1,520	2,125	2,655	3,190	3,665	4,305	4,740	4,975	
	66-70	1,745	2,445	3,055	3,665	4,215	4,955	5,450	5,720	
	71-75	2,010	2,810	3,515	4,215	4,850	5,695	6,265	6,580	
	76-80	2,310	3,235	4,040	4,850	5,575	6,550	7,205	7,565	
Above 80	2,655	3,715	4,645	5,575	6,410	7,530	8,285	8,700		
Defined Rs.25,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-35	470	620	770	925	1,065	1,250	1,375	1,445	
	36-45	565	790	990	1,185	1,365	1,600	1,760	1,850	
	46-50	735	1,030	1,285	1,540	1,770	2,080	2,290	2,405	
	51-55	880	1,235	1,540	1,850	2,125	2,500	2,750	2,885	
	56-60	1,015	1,420	1,770	2,125	2,445	2,870	3,160	3,315	
	61-65	1,215	1,700	2,125	2,550	2,935	3,445	3,790	3,980	
	66-70	1,400	1,955	2,445	2,935	3,375	3,965	4,360	4,575	
	71-75	1,610	2,250	2,810	3,375	3,880	4,555	5,010	5,265	
	76-80	1,850	2,585	3,235	3,880	4,460	5,240	5,765	6,050	
Above 80	2,125	2,975	3,715	4,460	5,130	6,025	6,630	6,960		
2 YEAR PREMIUM CHART (Excluding Tax)										
SILVER PLAN										
Deductible Rs.3,00,000/-										
Age in Yrs			Sum Insured (Rs.)							
			7,00,000				10,00,000			
91days-34			2,214				2,774			
35			2,494				3,116			
36-44			2,774				3,458			
45			3,116				3,890			
46-49			3,458				4,323			
50			3,653				4,565			
51-54			3,848				4,807			
55			3,947				4,931			
56-59			4,047				5,054			
60			4,152				5,187			
61-64			4,256				5,320			
65			4,579				5,719			
66-69			4,902				6,118			
70			5,268				6,579			
71-74			5,634				7,040			
75			6,056				7,567			
76-79			6,479				8,094			
80			6,964				8,702			
Above 80			7,448				9,310			

GOLD PLAN										
Defined Rs.3,00,000/-										
Family size	Age-band	5,00,000	7,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000
1A	91days-34	2,905	3,485	4,065	5,080	6,095	7,010	8,235	9,055	9,510
	35	3,315	3,975	4,635	5,795	6,955	7,995	9,395	10,335	10,850
	36-44	3,720	4,465	5,210	6,510	7,815	8,985	10,555	11,610	12,190
	45	4,280	5,135	5,990	7,485	8,985	10,330	12,140	13,355	14,020
	46-49	4,835	5,805	6,770	8,465	10,155	11,680	13,720	15,095	15,850
	50	5,320	6,385	7,450	9,310	11,170	12,845	15,095	16,605	17,435
	51-54	5,805	6,965	8,125	10,155	12,185	14,015	16,465	18,110	19,020
	55	6,240	7,485	8,735	10,915	13,100	15,065	17,700	19,470	20,445
	56-59	6,675	8,010	9,345	11,680	14,015	16,115	18,935	20,830	21,870
	60	7,340	8,810	10,280	12,845	15,415	17,725	20,830	22,910	24,055
	61-64	8,010	9,610	11,210	14,015	16,815	19,340	22,720	24,995	26,245
	65	8,610	10,330	12,050	15,065	18,075	20,790	24,425	26,870	28,210
	66-69	9,210	11,050	12,895	16,115	19,340	22,240	26,130	28,745	30,180
	70	9,900	11,880	13,860	17,325	20,790	23,905	28,090	30,900	32,445
	71-74	10,590	12,710	14,825	18,535	22,240	25,575	30,050	33,055	34,705
	75	11,385	13,660	15,940	19,925	23,905	27,490	32,305	35,535	37,310
76-79	12,180	14,615	17,050	21,310	25,575	29,410	34,555	38,010	39,910	
80	13,095	15,710	18,330	22,910	27,490	31,615	37,150	40,860	42,905	
Above 80	14,005	16,805	19,610	24,510	29,410	33,820	39,740	43,715	45,900	
Defined Rs.5,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-34	2,325	3,250	4,065	4,875	5,605	6,590	7,245	7,610	
	35	2,650	3,710	4,635	5,565	6,400	7,515	8,270	8,680	
	36-44	2,980	4,170	5,210	6,250	7,190	8,445	9,290	9,755	
	45	3,425	4,795	5,990	7,190	8,265	9,710	10,685	11,215	
	46-49	3,870	5,420	6,770	8,125	9,345	10,980	12,075	12,680	
	50	4,255	5,960	7,450	8,935	10,280	12,075	13,285	13,945	
	51-54	4,645	6,500	8,125	9,750	11,210	13,175	14,490	15,215	
	55	4,990	6,990	8,735	10,480	12,050	14,160	15,575	16,355	
	56-59	5,340	7,475	9,345	11,210	12,895	15,150	16,665	17,495	
	60	5,875	8,225	10,280	12,335	14,180	16,665	18,330	19,245	
	61-64	6,410	8,970	11,210	13,455	15,470	18,180	19,995	20,995	
	65	6,890	9,640	12,050	14,460	16,630	19,540	21,495	22,570	
	66-69	7,370	10,315	12,895	15,470	17,790	20,905	22,995	24,145	
	70	7,920	11,090	13,860	16,630	19,125	22,470	24,720	25,955	
	71-74	8,475	11,860	14,825	17,790	20,460	24,040	26,445	27,765	
	75	9,110	12,750	15,940	19,125	21,995	25,845	28,425	29,850	
76-79	9,745	13,640	17,050	20,460	23,530	27,645	30,410	31,930		
80	10,475	14,665	18,330	21,995	25,295	29,720	32,690	34,325		
Above 80	11,205	15,685	19,610	23,530	27,055	31,790	34,970	36,720		
Defined Rs.10,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-34	1,745	2,440	3,050	3,660	4,205	4,940	5,435	5,705	
	35	1,990	2,785	3,480	4,175	4,800	5,640	6,200	6,510	
	36-44	2,235	3,125	3,910	4,690	5,390	6,335	6,970	7,315	
	45	2,570	3,595	4,495	5,390	6,200	7,285	8,015	8,415	
	46-49	2,905	4,065	5,080	6,095	7,010	8,235	9,055	9,510	
	50	3,195	4,470	5,585	6,705	7,710	9,055	9,965	10,460	
	51-54	3,485	4,875	6,095	7,315	8,410	9,880	10,870	11,410	
	55	3,745	5,240	6,550	7,860	9,040	10,620	11,685	12,265	
	56-59	4,005	5,605	7,010	8,410	9,670	11,360	12,500	13,125	
	60	4,405	6,170	7,710	9,250	10,635	12,500	13,750	14,435	
	61-64	4,805	6,730	8,410	10,090	11,605	13,635	15,000	15,745	
	65	5,165	7,230	9,040	10,845	12,475	14,655	16,120	16,930	
	66-69	5,525	7,735	9,670	11,605	13,345	15,680	17,245	18,110	
	70	5,940	8,315	10,395	12,475	14,345	16,855	18,540	19,465	
	71-74	6,355	8,895	11,120	13,345	15,345	18,030	19,835	20,825	
	75	6,830	9,565	11,955	14,345	16,495	19,385	21,320	22,385	
76-79	7,310	10,230	12,790	15,345	17,645	20,735	22,810	23,950		
80	7,855	11,000	13,745	16,495	18,970	22,290	24,520	25,745		
Above 80	8,405	11,765	14,705	17,645	20,295	23,845	26,230	27,540		
Defined Rs.15,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	
1A	91days-34	1,310	1,830	2,285	2,745	3,155	3,705	4,075	4,280	
	35	1,490	2,090	2,610	3,130	3,600	4,230	4,650	4,885	
	36-44	1,675	2,345	2,930	3,515	4,045	4,750	5,225	5,490	
	45	1,925	2,695	3,370	4,045	4,650	5,465	6,010	6,310	
	46-49	2,180	3,050	3,810	4,570	5,255	6,175	6,795	7,135	
	50	2,395	3,355	4,190	5,030	5,780	6,795	7,475	7,845	
	51-54	2,615	3,660	4,570	5,485	6,310	7,410	8,150	8,560	
	55	2,810	3,930	4,915	5,895	6,780	7,965	8,765	9,200	
	56-59	3,005	4,205	5,255	6,310	7,255	8,520	9,375	9,845	
	60	3,305	4,625	5,780	6,940	7,980	9,375	10,310	10,825	
	61-64	3,605	5,045	6,310	7,570	8,705	10,225	11,250	11,810	
	65	3,875	5,425	6,780	8,135	9,355	10,995	12,090	12,695	
	66-69	4,145	5,805	7,255	8,705	10,010	11,760	12,935	13,580	
	70	4,455	6,240	7,795	9,355	10,760	12,640	13,905	14,600	
	71-74	4,765	6,675	8,340	10,010	11,510	13,525	14,875	15,620	
	75	5,125	7,175	8,965	10,760	12,375	14,540	15,990	16,790	
76-79	5,480	7,675	9,590	11,510	13,235	15,550	17,105	17,960		
80	5,895	8,250	10,310	12,375	14,230	16,720	18,390	19,310		
Above 80	6,305	8,825	11,030	13,235	15,220	17,885	19,670	20,655		
Defined Rs.20,00,000/-										
Family size	Age-band	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00	