



Health
Insurance

The Health Insurance Specialist



YOUNG STAR EXTRA PROTECT-ADD ON COVER



Added
Protection

Loaded with Assurance

Young Star Extra Protect-Add on Cover

Unique Identification No.: SHAHLIA23171V012223

It is always said - a little extra makes all the difference. We do believe in the same and hence we are happy to present "Young Star Extra Protect-Add on Cover" which enhances the limits of existing covers in addition to offering new features to the **Base Policy**.

+ Eligibility

1. Add on Cover can be purchased along with the **Base Policy** only either at inception or during Renewal of the **Base Policy**.
2. Add on Cover is available for Insured having minimum Sum Insured of Rs.10,00,000/- under the **Base Policy**

Note: During renewal, if Insured reduces the **Base Policy** Sum Insured to below Rs.10,00,000/-, the Add on Cover will not be available

+ Base Policy – Young Star Insurance Policy

+ Age/Family Size Applicability – As per Base Policy

+ Add on Cover Term – As per Base Policy

+ Premium **15% on the applicable Base Policy premium**

+ Coverage

- ▶ **Enhanced Room Rent:** Room, boarding, nursing expenses all inclusive as provided by the hospital / nursing home as per the limits given below:

Sum Insured (Rs.)	10,00,000/- to 20,00,000/- (as per Base Policy)	Above 20,00,000/- (as per Base Policy)
Room Rent Eligibility	Any Room (Except for suite room and above the category of suite room)	Any Room

- ▶ **Claim Guard (Coverage for Non-medical Items (Consumables)):** If there is an admissible claim under the **Base Policy**, then the expenses towards the following items will become payable.

Sl.No.	ITEM
1	BABY FOOD
2	BABY UTILITIES CHARGES
3	BEAUTY SERVICES
4	BELTS / BRACES
5	BUDS
6	COLD PACK / HOT PACK
7	CARRY BAGS
8	EMAIL / INTERNET CHARGES
9	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)
10	LEGGINGS
11	LAUNDRY CHARGES
12	MINERAL WATER
13	SANITARY PAD
14	TELEPHONE CHARGES
15	GUEST SERVICES
16	CREPE BANDAGE
17	DIAPER OF ANY TYPE
18	EYELET COLLAR
19	SLINGS
20	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES
21	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED
22	TELEVISION CHARGES
23	SURCHARGES
24	ATTENDANT CHARGES
25	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)

Sl.No.	ITEM
26	BIRTH CERTIFICATE
27	CERTIFICATE CHARGES
28	COURIER CHARGES
29	CONVEYANCE CHARGES
30	MEDICAL CERTIFICATE
31	MEDICAL RECORDS
32	PHOTOCOPIES CHARGES
33	MORTUARY CHARGES
34	WALKING AIDS CHARGES
35	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)
36	SPACER
37	SPIROMETRE
38	NEBULIZER KIT
39	STEAM INHALER
40	ARMSLING
41	THERMOMETER
42	CERVICAL COLLAR
43	SPLINT
44	DIABETIC FOOT WEAR
45	KNEE BRACES (LONG / SHORT / HINGED)
46	KNEE IMMOBILIZER / SHOULDER IMMOBILIZER
47	LUMBO SACRAL BELT
48	NIMBUS BED OR WATER OR AIR BED CHARGES
49	AMBULANCE COLLAR
50	AMBULANCE EQUIPMENT
51	ABDOMINAL BINDER
52	PRIVATE NURSES CHARGES - SPECIAL NURSING CHARGES
53	SUGAR FREE TABLETS
54	CREAMS POWDERS LOTIONS (TOILETRIES ARE NOT PAYABLE, ONLY PRESCRIBED MEDICAL PHARMACEUTICALS PAYABLE)
55	ECG ELECTRODES
56	GLOVES
57	NEBULISATION KIT
58	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
59	KIDNEY TRAY
60	MASK
61	OUNCE GLASS
62	OXYGEN MASK
63	PELVIC TRACTION BELT
64	PAN CAN
65	TROLLY COVER
66	UROMETER, URINE JUG
67	AMBULANCE
68	VASOFIX SAFETY

The amount payable under this clause shall be part of the Sum Insured under the **Base Policy** and not in addition to the same.

- **Enhanced Limit for Modern Treatments:** The following procedures covered under the **Base Policy** with sub-limits are covered **up to sum insured** of the **Base Policy**.

1.	Uterine Artery Embolization and HIFU
2.	Balloon Sinuplasty
3.	Deep brain stimulation
4.	Oral Chemotherapy
5.	Immunotherapy - Monoclonal antibody to be given as injection
6.	Intra Vitreal injections
7.	Robotic surgeries
8.	Stereotactic radio surgeries
9.	Bronchical Thermoplasty
10.	Vaporisation of the prostate (Green laser treatment or holmium laser treatment)
11.	IONM - (Intra Operative Neuro Monitoring)
12.	Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions
The amount payable under this clause shall be part of the Sum Insured under the Base Policy and not in addition to the same.	

- **Ayush Treatment:** Medical expenses for In-patient Hospitalization incurred on treatment under Ayurveda, Unani, Siddha and Homeopathy systems of medicines in a AYUSH Hospital is payable **up to sum insured** (including Cumulative bonus if available) under the **Base Policy**

Note

- Yoga and Naturopathy systems of treatments are excluded from the scope of coverage under AYUSH treatment.
- The amount payable under this clause shall be part of the Sum Insured under the **Base Policy** and not in addition to the same.

- **Home Care Treatment:** Payable up to 10% of sum insured of the **Base Policy**, subject to maximum of Rs.5,00,000/- in a policy year, for treatment availed by the insured person at home, only for the specified conditions mentioned below, which in normal course would require care and treatment at a hospital but is actually taken at home provided that:

- a) the medical practitioner advises the insured person to undergo treatment at home
- b) there is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment
- c) daily monitoring chart including records of treatment administered duly signed by the treating doctor are maintained
- d) Insured can avail "Home Care Treatment" service on cashless / reimbursement basis, if availed from our network service providers given in our website "www.starhealth.in"

List of treatments / conditions covered under Home Care Treatment:

1. Fever and infectious diseases which can be managed as In-patient
2. Uncomplicated urinary tract infections but needing parenteral antibiotics
3. Asthma and COPD-Mild Exacerbations needing Home Nebulization
4. Acute Gastritis/Gastroenteritis
5. I.V. Chemotherapy [Where advised by the doctor]
6. Palliative Cancer Care requiring medical assistance
7. Acute Vertigo
8. Diabetic Foot and Cellulitis
9. IVDP [Cervical and Lumbar Disc diseases]
10. Major surgeries/Arthroplasties needing IV Antibiotics Post Discharge
11. Care for Brain and Spinal Injury Cases Post Discharge
12. Post CVA Care at Home after discharge

The amount payable under this clause shall be part of the Sum Insured under the **Base Policy** and not in addition to the same.

▶ **Bonus Guard**

- i. Cumulative bonus available under **Base Policy** will not be reduced at the time of renewals unless the bonus is utilized.
- ii. On full utilization of sum insured and nil utilization of cumulative bonus accrued, such cumulative bonus so granted under the **Base Policy** will not be reduced
- iii. On full utilization of sum insured and partial utilization of cumulative bonus accrued, the cumulative bonus granted under the **Base Policy** on renewal will be the balance cumulative bonus available
- iv. On full utilization of Sum Insured and full utilization of cumulative bonus accrued, the cumulative bonus granted under the **Base Policy** on renewal will be “nil”

✦ **General Conditions**

1. The Add on Cover can be purchased along with the **Base Policy** only (with Rs.10,00,000/- and above Sum Insured) either at Inception or during Renewal of the **Base Policy**.
2. The Add on Cover shall be available only if the same is specifically mentioned in the **Base Policy** Schedule.
3. Any claim under this Add on Cover will be subject to an admissible claim under the **Base Policy**.
4. Wherever the benefits mentioned in the Add on Cover are already available in the **Base Policy**, the Add on Cover benefits shall supersede the existing benefits.
5. The limits under the Add on Cover shall not be in addition to the limits under the **Base Policy**.
6. Wherever the benefits mentioned in the Add on Cover are not available in the **Base Policy**, the Add on Cover benefits will get added to the existing benefits of the **Base Policy**.
7. During renewal, if insured reduces the **Base Policy** Sum Insured to below Rs.10,00,000/-, the Add on Cover will not be available.
8. In case if insured migrates from the existing **Base Policy** to any other product offered by the Company, providing of the Add on Cover is subject to the availability of Add on Cover in the migrated product.
9. If this Add on Cover is opted, Insured cannot opt-out of the same at the time of renewal provided the Sum Insured is Rs.10,00,000/- and above.

✦ **Disclosure of Information:** The policy shall be 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.

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

✦ **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

- i. a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or
- ii. 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
- iii. where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period

✦ **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/>

✦ **Withdrawal of policy**

- i. 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.
- ii. 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.

✦ **Terms, Conditions, Exclusions, Waiting Periods and Cancellation:** All other terms, conditions, exclusions, waiting periods and cancellation will apply as per the **Base 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.

✦ **Taxes are subject to changes in Tax Laws**

✦ **The Company:** Star Health and Allied Insurance Co. Ltd., commenced its operations 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.

✦ **Star Advantages**

- No Third Party Administrator, direct in-house claims settlement.
- Faster and hassle-free claim settlement
- Cashless facility wherever possible in network hospitals.

✦ **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.

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”

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