

STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED

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PROSPECTUS - ACCIDENT CARE (GROUP) INSURANCE

Unique Identification No.: IRDAI/HLT/SHAI/P-H/V.II/102/2015-16

Accident Care Group insurance is a benefit-oriented policy, which provides for payment of compensation following accidents sustained by the Insured Person during the policy period.

WHO CAN BE COVERED UNDER THIS INSURANCE?

Any person aged between 18 years and 70 years can take this insurance. Life-long renewal.

WHAT ARE THE BENEFITS AVAILABLE UNDER THE INSURANCE?

The policy provides for the following benefits depending on the Table of cover chosen:

Table A- Covers Accidental Death

Table B- Covers Accidental Death And Permanent Disablement

Table C-Covers Accidental Death, Permanent Disablement and Temporary Total Disablement: (Weekly Compensation)

Coverage can be chosen under more than one Table (Subject to the overall limits based on the income)

ACCIDENTAL DEATH

This provides payment of the policy sum insured in the unfortunate event of accidental death of the Insured Person. The Company will pay an amount as compensation 100% of the Capital Sum Insured.

PERMANENT TOTAL DISABLEMENT:

Very often the consequences of any Accident are not fatal but disablement, which is worse than fatal. This Benefit pays 150% of the policy sum insured when the Insured Person sustains such Permanent Total Disablement.

For details of Permanent Total Disability and the respective benefit limit are available in Table of Benefits B1.

PERMANENT PARTIAL DISABLEMENT:

Partial disablement benefits provide for specified percentage of the sum insured when the Insured Person sustains partial disablement following accidental injuries.

DISABLEMENT	PERCENTAGE OF THE SUM INSURED PAYABLE
Loss of all toes	20%
Loss of hearing of one ear	30%
Loss of hearing of both ears	75%
Loss of four fingers and thumbs of One hand	40%

The above is only illustrative list. Details of Permanent Partial Disability and the respective benefit limit are available in Table of Benefits B2

TEMPORARY TOTAL DISABLEMENT:

If at any time during the period of insurance the insured person/s shall sustain Grievous injury arising solely and directly from an accident and resulting in hospitalization, then the insured person will be paid a sum calculated at 1% of the sum insured under Table C per completed week but not exceeding Rs.15,000/- per completed week and part thereof up-to 100 weeks in all, under all Personal Accident policies taken with the Company, if such injury be the sole and direct cause of Temporary Total Disablement.

WHAT ARE OTHER FREE BENEFITS AVAILABLE UNDER THE POLICY?

AMBULANCE CHARGES / TRANSPORTATION EXPENSES OF MORTAL REMAINS

Following an admissible claim under the policy due to an Accident outside the place of the insured's residence the Company shall pay during the policy period as a lump sum

Either

a) Towards ambulance charges for emergency treatment to go to the hospital in case of injury

Or

in case of Death

b) Towards transportation of the mortal remains of the insured person (including the cost of embalming and coffin charges) to the residence of the insured.

The limit of Company's liability towards either Ambulance charges or Transportation of mortal remains is Rs.5,000/- only during the policy period ,per insured person. This lump sum amount is payable in addition to the sum insured.

TRAVEL EXPENSES FOR ONE RELATIVE (APPLICABLE FOR DEATH CLAIMS ONLY)

The Company will pay 1% of Total Sum insured up to Rs.50,000/-, subject to actual, for the transport expenses to one relative of the Insured Person following an admissible claim under the policy for Accidental Death.

This amount is payable in addition to the sum insured and applicable for each person covered under the policy

VEHICLE AND / OR RESIDENCE MODIFICATION: The Company will pay up to 10% of Table B and Table C sum insured subject to a maximum of Rs.50,000/- towards the expenses incurred to modify the Insured Person's residential accommodation or vehicle as long as the modification have been carried out in India and certified by a Doctor to be necessary and directly required as a result of the Accident for which there is an admissible claim.

This benefit is applicable only where there is an admissible claim for Permanent Total Disablement. This amount is payable in addition to the sum insured. This benefit is per insured person.

PURCHASE OF BLOOD: The Company will pay up to 5% of the sum insured under relevant table/tables opted subject to a maximum of Rs.10,000/-whichever is less towards the expenses incurred in purchasing blood through a Hospital or Government approved blood bank for the purpose of the Insured Person's medical or surgical treatment provided there is an admissible claim under this policy. This amount is payable in addition to the sum insured

TRANSPORTATION OF IMPORTED MEDICINES: The Company will pay up to 5% of Total sum insured subject to a maximum of Rs.20,000/- towards the expenses incurred on freight charges for importing medicines to India, provided that:

- a. There is an admissible claim under the policy.
- b. The medicines, formulations or alternatives of the imported medicines are not available in India, and
- c. The medicines are necessary for the medical/surgical treatment of the Insured person in a Hospital following the Accident.
- d. The medicines which are imported should be permissible under Government Regulation
- e. The medicines shall not include any drugs under clinical trial or medicines, formulations or molecules of unproven efficacy.

This amount is payable in addition to the sum insured

WHAT IS THE MINIMUM AND MAXIMUM SUM INSURED?

Minimum sum insured is Rs.10,000,

Maximum sum insured will vary depending upon the earnings of the insured person.

WHAT ARE THE ADDITIONAL OPTIONAL BENEFITS AVAILABLE ON PAYMENT OF ADDITIONAL PREMIUM?

MEDICAL EXPENSES EXTENSION: This benefit pays for any medical expenses necessarily and reasonably incurred, whether as an In Patient or as an out Patient, an amount up to 25% of the valid claim or 10% of the sum insured in respect of the relevant insured person or actuals whichever is less, subject to a overall limit of Rs.5,00,000/-, per person, per policy period following an admissible claim under the policy.

This amount is payable in addition to the sum insured and per policy period.

HOSPITAL CASH: The Company will pay Cash Benefit of Rs 1000/- for each completed day of Hospitalization provided such hospitalization happens within 30 days from the date of accident. The maximum period for which the benefit is payable is 15 days per occurrence and 60 days per person per policy period. For the purpose of cash benefit the days of admission and discharge will not be taken into account. This amount is payable in addition to the sum insured.

This benefit is optional and is effective only if there is an admissible claim under the policy.

HOME CONVALESCENCE: The company will pay Rs 500/- for each completed day subject to a maximum of 15 days per occurrence and 60 days per person per policy period towards the cost of engaging one attendant at residence immediately after discharge from the hospital provided the same is recommended by the attending physician. This benefit cannot be cumulated or carried forward to the next year.

This amount is payable in addition to the sum insured.

This benefit becomes payable only if Insured Person is hospitalized arising out of Accident and there is an admissible claim under the policy.

WHAT ARE THE EXCLUSIONS UNDER THE POLICY?

- 1. Any payment, in case of more than one claim under the Policy, during any one period of insurance by which the maximum liability of the Company in that period would exceed the capital sum insured payable under this Policy except in case of Permanent Total Disability claim, in which case the amount payable is 150% of the sum insured. This exclusion will not apply to payments made under Medical Expenses Extension, Hospital cash, Home Convalescence, Ambulance Charges /Transportation of mortal remains, Expenses for Vehicle and /or residence Modification, Travel expenses for one relative, Purchase of blood and Transportation of imported medicines
- 2. Any claim relating to events occurring before the commencement of the cover or otherwise outside the Period of Insurance.
- 3. Any injuries/conditions which are Pre-existing
- 4. Any claim for death or Disablement of the Insured Person from (a) intentional self-injury / suicide or attempted suicide or (b) whilst under the influence of intoxicating liquor or drugs or (c) self-endangerment unless in self-defense or to save life.
- 5. Any claim arising out of mental disorder, suicide or attempted suicide self inflicted injuries, or sexually transmitted conditions, anxiety, stress, depression, venereal disease or any loss directly or indirectly attributable to HIV (Human Immunodeficiency Virus) and / or any HIV related illness including AIDS (Acquired Immunodeficiency Syndrome), insanity and / or any mutant derivative or variations thereof howsoever caused.
- 6. Insured Person engaging in Air Travel unless he/she flies as a fare-paying passenger on an aircraft properly licensed to carry passengers. For the purpose of this exclusion Air Travel means being in or boarding an aircraft for the purpose of flying therein or alighting there from.
- 7. Accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, seizure capture arrest restraints detainments of all kings princes and people of whatever nation, condition or quality whatsoever.
- 8. Participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.
- 9. Any claim resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:
 - a) Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste from combustion (including any self sustaining process of nuclear fission) of nuclear fuel.
 - b) Nuclear weapons material
 - c) The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
 - d) Nuclear, chemical and biological terrorism
- 10. Any claim arising out of sporting activities in so far as they involve the training or participation in competitions of professional or semi-professional sports persons.
- 11. Participation in Hazardous Sport / Hazardous Activities
- 12. Persons who are physically and mentally challenged, unless specifically agreed and endorsed in the policy.
- 13. Any loss arising out of the Insured Person's actual or attempted commission of or willful participation in an illegal act or any violation or attempted violation of the law.

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 Competent Authority. In such an event the insured will be intimated three months in advance

WITHDRAWAL OF THE POLICY: 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.

RENEWAL CONDITION:

The insurance in respect of each relevant person covered under this policy will be renewed except on grounds of misrepresentation / fraud committed.

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 will be allowed. However the actual period of cover will start only from the date of payment of premium. In other words no protection is available between the policy expiry date and the date of payment of premium for renewal.

Every renewal premium (which shall be paid and accepted) shall be so paid and accepted upon the distinct understanding that no alteration has taken place in the facts contained in the proposal or declaration herein before mentioned and that nothing is known to the Insured that may result to enhance the risk of the Company under the insurer.

In respect Permanent Partial Disability claims the Company would exclude such disability on renewal in respect of such relevant person. Where a claim for Permanent Total Disability is admitted / admissible, the policy cannot be renewed for such relevant person.

Renewal premium is subject to change with prior approval from the Regulator. Change of options /plans within same product are permissible only at the time of renewal.

CANCELLATION/TERMINATION

The Company may cancel this policy on grounds of misrepresentation, moral hazard, fraud, non-disclosure of material fact at the inception of the risk / at the time of claim by sending 30 days notice by registered letter at the insured person / group policyholder or administrator's last known address in which case no refund will be allowed. 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	
For a period not exceeding 15 days	10% of the Annual Premium	
For a period not exceeding 1 month	15% of the Annual Premium	
For a period not exceeding 2 months	30% of the Annual Premium	
For a period not exceeding 3 months	40% of the Annual Premium	
For a period not exceeding 4 months	50% of the Annual Premium	
For a period not exceeding 5 months	60% of the Annual Premium	
For a period not exceeding 6 months	70% of the Annual Premium	
For a period not exceeding 7 months	75% of the Annual Premium	
For a period not exceeding 8 months	80% of the Annual Premium	
Exceeding 8 months	Full Annual Premium	

WHAT ARE THE POLICY TENURE OPTIONS AVAILABLE?

The policy is available for a period of 1 year

WHAT IS THE SPECIAL FEATURE OF THIS POLICY?

This policy is eligible for group discount at the following scales subject to the claims experience under the expiring policy being less than 80%.

NUMBER OF PERSONS	DISCOUNT
2-100	5%
101-1000	10%
1001-5000	12.5%
5001-10000	15%
> 10000	20%

Where the policy is taken for the first time the Group discount will be based on the Group size only.

The discount is not cumulative. The applicable scale of discount is to be reckoned in accordance with the group size at the inception of the policy. Increase/decrease in the Group size following additions / deletions during the policy period will not alter the Group discount.

Inclusions of persons into the Group can be made on payment of additional premium on pro-rata basis.

Refund for deletion of persons from the Group can be made on pro-rata basis subject to there being "No claim" in respect of such persons.

HOW MUCH DOES IT COST TO TAKE THIS INSURANCE?

Please refer the premium table below.

For the purpose of rating under the different Tables of coverage the persons proposed for insurance can be classified under the following groups depending on their occupation:

Risk Group I – Persons engaged primarily in administrative functions

Risk Group II - Persons engaged in manual work other than what is specifically provided for under Group III

Risk Group III – Persons working in explosives industry, mine and /or Magazine workers, high tension electric supply, horse racing including jockeys, athletes and occupations of similar hazard.

Table A - Covers Accidental Death Only

Table B - Covers Accidental Death And Permanent Disablement

Table C - Covers Accidental Death, Permanent Disablement And Temporary Total Disablement: (Weekly Compensation)

Premium Table (Tax Extra)

COVERAGE /	PREMIUM (IN RS.) PER MILLE SUM INSURED *			
RISK GROUP	GROUP I	GROUP II	GROUP III	
Table A	0.43	0.60	0.80	
Table B	0.70	1.30	1.75	
Table C	1.25	1.75	2.00	

^{*} per mille means per thousand sum insured.

RATE FOR OPTIONAL COVERS

- 1. Medical Expenses Extension: 10% of the final premium per person
- 2. Hospital Cash Rs.40/- per person
- 3. Home Convalescence Rs.15/- per person.

Note: The additional premiums for the above optional covers are chargeable on the Basic premium that is before applying Group discount.

HOW TO BUY THIS INSURANCE?

Please contact our nearest Branch Office

HOW TO MAKE A CLAIM UNDER THE POLICY?

Call the 24 hour help-line for assistance - 1800 425 2255 / 1800 102 4477

1. Inform the Policy Number for easy reference

Documents to be submitted in support of claim are (as applicable) Duly completed claim form and

FOR DEATH CLAIMS:-

- Death Certificate
- Post-mortem Certificate, if conducted
- FIR (wherever required)
- Police Investigation report / Panchanama (wherever required)
- Viscera Sample Report / Chemical analysis report (wherever required)
- Forensic Science Laboratory report (wherever required)
- Legal Heir Certificate
- Succession Certificate (wherever required)

FOR DISABILITY CLAIMS:

- Certificate from Government doctor not below the rank of Civil Surgeon, confirming the disability and its %.
 Note: The Company authorized doctor may examine the insured if required
- Certificate from the employer confirming leave of absence from duty

FOR AMBULANCE CHARGES / TRANSPORTATION EXPENSES OF MORTAL REMAINS

- · Death Certificate or
- Proof of Hospitalization
- Proof of utilized services of either Ambulance or Mortuary Van

FOR TRAVEL EXPENSES FOR ONE RELATIVE

Proof of expenses incurred (original)

FOR VEHICLE AND/OR RESIDENCE MODIFICATION

- Certificate from the doctor confirming the Disability and the requirement of modification
- Estimate from Workshop
- Cash receipt for having carried the modification
- Certificate from the doctor confirming the Disability and the requirement of modification
- Estimate from civil engineer
- Cash receipt for completion of the civil work modification

FOR PURCHASE OF BLOOD:

Original receipt for purchase of blood (wherever applicable)

FOR TRANSPORTATION OF IMPORTED MEDICINE:

- Prescription of the treating doctor with confirmation that the medicine is not available in India.
- Original receipt for the freight incurred for import of the medicine, along with a copy of invoice

FOR CLAIM UNDER OPTIONAL BENEFITS:

MEDICAL EXPENSES DUE TO ACCIDENT:

- Original Discharge Summary (wherever applicable)
- · Original Medical Reports
- Original Invoices/Bills,
- Original Payment Receipts

HOSPITAL CASH AND HOME CONVALESCENCE

- Discharge Summary (Where original is required for other purposes, a certified copy may be submitted)
- Recommendation by the treating doctor for appointing an attendant at home for continuation of treatment.
- Cash receipt for payment made to the attendant

Note:

The Company reserves the right to call for additional documents wherever required.

The benefits and exclusions mentioned herein is only an outline of the policy. For complete details please contact our offices.

TABLE OF BENEFITS B 1				
	BENEFITS	PERCENTAGE OF SUM INSURED		
1. Peri	manent Total Disablement	150%#		
1. Tota	ll and irrevocable loss *of			
(I)	Sight of both eyes	100%		
(ii)	Physical separation of two entire hands	100%		
(iii)	Physical separation of two entire foot	100%		
(iv)	One entire hand and one entire foot	100%		
(v)	Sight of one eye and loss of one hand	100%		
(vi)	Sight of one eye and loss of one entire foot	100%		
(vii)	Use of two hands	100%		
(viii)	Use of two foot	100%		
(ix)	Use of one hand and one foot	100%		
(x)	Sight of one eye and use of one hand	100%		
(xi)	Sight of one eye and use of one foot	100%		
(xii)	Sight of one eye	50%		
(xiii)	Physical separation of one entire hand	50%		
(xiv)	Physical separation of one entire foot	50%		
(xv)	Use of one hand without physical separation	50%		
(xvi)	Use of one foot without physical separation	50%		

^{*}Loss of foot / hand means total severance through or above the ankle/ wrist joints respectively. Loss of eye means entire and irrevocable loss of sight. Thumb and index finger means severance through or above the joint that meets the hand at the palm.

payable only when the insured person, following accidental injuries is unable to engage in each and every occupation or employment for compensation or profit for which he is reasonably qualified by education, training or experience for the rest of his life. If at the time of loss the insured person is unemployed, Permanent Total Disability shall mean the total and permanent inability to perform all of the usual and customary duties and activities of a person of like age and sex even with the use of special equipment routinely available to help and having taken any appropriate prescribed medication

	PERMANENT PARTIAL DISABLEMENT		TABLE OF BENEFITS B 2
	BENEFITS		PERCENTAGE OF SUM INSURE
1	Loss of toes all	All	20
	Loss of Great toe	both phalanges	5
	Loss of Great toe	one phalanx	2
	Other than Great, if more than		
	One toe lost, for each toe	For each toe	1
2	Loss of hearing both ears	Both ears	75
	Loss of hearing one ear	One ear	30
3	Loss of four fingers and thumbs of One hand		40
4	Loss of four fingers		35
	Loss of thumb both phalanges	Both phalanges	25
		One phalanx	10
5	Loss of index finger three phalanges	Three phalanges	10
	Two phalanges	Two phalanges	8
	One phalanx	One phalanx	ealth 4
6	Loss of middle finger	8 Three phalanges	nsurance
		Two phalanges	4
	/ The Health Ins	One phalanx	
7	Loss of ring finger	Three phalanges	5
		Two phalanges	4
		One phalanx	2
8	Loss of little finger	Three phalanges	4
		Two phalanges	3
		One phalanx	2
9	Loss of metacarpals	First or second	3
		Additional (third fourth or fifth)	2
10	Any other Permanent partial disablement		Percentage as assessed by the Medical Board or by the government doctor

Important Note: IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

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.