



STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED

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PROSPECTUS - CORONA KAVACH POLICY, STAR HEALTH AND ALLIED INSURANCE CO. LTD.

Unique Identification No.: SHAHLIP21066V012021

The product covers expenses incurred for treatment of positive diagnosis of Covid including expenses for Co-morbid conditions.

- ★ **Eligibility**
 - Adults : 18 yrs to 65 yrs.
 - Dependent Children : 1 day to 25 yrs.
- ★ **Policy Type:** Individual/ Floater
- ★ **Sum Insured Options:** Rs.50,000/-; Rs.1,00,000/-; Rs.1,50,000/-; Rs.2,00,000/-; Rs.2,50,000/-; Rs.3,00,000/-; Rs.3,50,000/-; Rs.4,00,000/-; Rs.4,50,000/-; Rs.5,00,000/-
- ★ **Policy Terms:** 3½ months (105 Days); 6½ months (195 Days); 9½ months (285 Days) (No annual policy term)
- ★ **Pre acceptance medical screening:** No pre-acceptance medical screening.
- ★ **Waiting Period:** An initial waiting period of 15 days is applicable from the date of commencement of this policy.
- ★ **Family** means Self, Legally Wedded Spouse, Parent's and Parent's-in-law, Dependent Children (Upto 25 years of age). If the child is above 18 years of age if financially independent, he/she shall not be eligible under family coverage
- ★ **Coverage:** In the event of the Insured Person is diagnosed positive of COVID in a government authorized centre, the coverage will be as follows :-
 - **Base Cover**
 1. **Hospitalization Cover:** Hospitalization Expenses incurred on treatment of COVID-19 (including the treatment for Co-morbid conditions) comprising of Room, Boarding, Nursing Expenses, Consultant, Specialist Fees, Anesthesia, blood, oxygen, PPE Kit, gloves, mask and such similar other expenses.
 2. Road Ambulance subject to a maximum of Rs.2000/- per hospitalisation.
 3. Home Care Treatment Expenses: Up to 14 days subject to the following
 - 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 is maintained.
 - d) Insured shall be permitted to avail the services as prescribed by the medical practitioner. Cashless or reimbursement facility shall be offered under homocare expenses subject to claim settlement policy disclosed in the website.
 - e) In case the insured intends to avail the services of non-network provider claim shall be subject to reimbursement, a prior approval from the Insurer needs to be taken before availing such services.

Benefit covered under this

 - a. Diagnostic tests undergone at home or at diagnostics centre
 - b. Medicines prescribed in writing
 - c. Consultation charges of the medical practitioner
 - d. Nursing charges related to medical staff
 - e. Medical procedures limited to parenteral administration of medicines
 - f. Cost of Pulse oximeter, Oxygen cylinder and Nebulizer
 - 4. **AYUSH Treatment :** AYUSH treatment expenses incurred as an inpatient for treatment of COVID including the treatment for Co-morbid conditions upto the limit of sum insured in any AYUSH hospital
 - 5. **Pre Hospitalization :** Medical expenses incurred up to 15 days prior to the date of admission
 - 6. **Post Hospitalization :** Medical expenses incurred up to a period of 30 days after discharge from the hospital
- **Optional cover**

Hospital Daily Cash: The Company will pay cash benefit of 0.5% of sum insured for each completed day of continuous hospitalization subject to a maximum of 15 days per policy period.
- ★ **Exclusions:** The Company shall not be liable to make any payment under the policy, in respect of any expenses incurred in connection with or in respect of:
 1. **Investigation & Evaluation:** Expenses related to any admission primarily for diagnostics and evaluation purposes. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment
 2. **Rest Cure, rehabilitation and respite care:** Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:
 - i. 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.
 - ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.
 3. **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 Home care treatment.
 4. **Unproven Treatments:** 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. However, treatment authorized by the government for the treatment of COVID shall be covered.

5. Any claim in relation to COVID where it has been diagnosed prior to Policy Start Date.
 6. Any expenses incurred on Day Care treatment and OPD treatment
 7. Diagnosis /Treatment outside the geographical limits of India
 8. Testing done at a Diagnostic centre which is not authorized by the Government shall not be recognized under this Policy
 9. All covers under this Policy shall cease if the Insured Person travels to any country placed under travel restriction by the Government of India.
- ★ **Cancellation:** 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 7 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud.
 - ★ **Automatic Expiry:** The coverage for the Insured Person(s) shall automatically terminate. In the case of demise of the insured person. However, the cover shall continue for the remaining Insured Persons till the end of Policy Period. All relevant particulars in respect of such person (including his/her relationship with the insured person) must be submitted to the company along with the application. Provided no claim has been made, and termination takes place on account of death of the insured person, pro-rata refund of premium of the deceased insured person for the balance period of the policy will be effective.
 - ★ **Disclosure to Information Norms:** The Policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact by the policyholder.
 - ★ **Endorsements (Changes In Policy)**
 - i. This policy constitutes the complete contract of insurance. This Policy cannot be modified by anyone (including an insurance agent or broker) except the company. Any change made by the company shall be evidenced by a written endorsement signed and stamped.
 - ii. The policy holder may be changed during the Policy period only in case of his/her demise or him or her moving out of India. The new policy holder must be legal heir/ immediate family member. Such change would be subject to acceptance by the Company and payment of premium (if any).
 - ★ **Renewals :** Not applicable
 - ★ **Migration and Portability :** Not applicable
 - ★ **Free Look Period :** Not applicable
 - ★ **Claims Procedure**
 - Call the 24 hour help-line for assistance - 1800 425 2255/1800 102 4477
 - Inform the ID number for easy reference
 - On admission in the hospital, produce the ID Card issued by the Company at the Hospital help desk
 - Obtain the Pre-authorization From the Hospital help desk, complete the patient information and resubmit to the Hospital help desk
 - 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.
 - In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents
 - ★ **Tax Benefits:** Payments of premium by any mode other than cash for this insurance is eligible for relief under Section 80D of the Income Tax Act 1961.
 - ★ **Discount for Health Care Workers:** 5% discount on premium. The discount will be given only for the insured person who is a health care worker even under floater policy. (Health care worker means doctors, nurses, midwives, dental practitioners and other health professionals including laboratory assistants, pharmacists, physiotherapists, technicians and people working in hospitals.)
 - ★ **The Company:** Star Health and Allied Insurance Co. Ltd., its operations in 2006 as India's first Standalone Health Insurance provider. As an exclusive Health Insurer, the Company is commenced 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.
 - ★ **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.

Age Band in yrs / Sum Insured in Rs.	Premium Chart for Base Cover in Rs. (Excluding GST)								
	3½ Months			6½ Months			9½ Months		
	0-45	46-65	Above 65	0-45	46-65	Above 65	0-45	46-65	Above 65
50,000	350	420	546	420	504	655	473	567	737
1,00,000	525	630	819	630	756	983	709	851	1,106
1,50,000	683	819	1,065	819	983	1,278	921	1,106	1,437
2,00,000	819	983	1,278	983	1,179	1,533	1,106	1,327	1,725
2,50,000	942	1,130	1,469	1,130	1,356	1,763	1,271	1,526	1,984
3,00,000	1,055	1,266	1,646	1,266	1,519	1,975	1,424	1,709	2,222
3,50,000	1,160	1,392	1,810	1,392	1,671	2,172	1,566	1,880	2,444
4,00,000	1,253	1,504	1,955	1,504	1,805	2,346	1,692	2,030	2,639
4,50,000	1,341	1,609	2,092	1,609	1,931	2,510	1,810	2,172	2,824
5,00,000	1,408	1,690	2,196	1,690	2,027	2,636	1,901	2,281	2,965

Age Band in yrs / Sum Insured in Rs.	Premium Chart for Optional Cover in Rs. (Excluding GST)								
	3½ Months			6½ Months			9½ Months		
	0-45	46-65	Above 65	0-45	46-65	Above 65	0-45	46-65	Above 65
50,000	19	23	30	23	28	36	26	31	41
1,00,000	54	65	84	65	78	101	73	87	113
1,50,000	81	97	126	97	116	151	109	131	170
2,00,000	108	129	168	129	155	202	145	174	227
2,50,000	135	162	210	162	194	252	182	218	284
3,00,000	162	194	252	194	233	302	218	262	340
3,50,000	188	226	294	226	271	353	254	305	397
4,00,000	215	258	336	258	310	403	291	349	454
4,50,000	242	291	378	291	349	454	327	393	510
5,00,000	269	323	420	323	388	504	363	436	567

PREMIUM ILLUSTRATION

Sum Insured Opted - Rs.50000/-		Policy Period of 3½ months					Family Size 2A+2C			
Age of Self - 46 yrs		Age of Spouse - 43 yrs			Age of Child 1 - 10 yrs		Age of Child 2 - 5 yrs			
	Base Cover Premium in Rs. A	Floater Discount for Base Cover B	Base Cover Premium after discount C A-(AxB)=C	Optional Cover Premium D	Floater Discount E	Optional Cover Premium after discount F D-(DxE)=F	Gross Premium G C+F=G	GST H Gx18%=H	Policy Premium I I=G+H	
First Member / Self	420	0%	420	23	0%	23	443	80	523	
Premium for Second Member	350	20%	280	19	20%	15	295	53	348	
Premium for Third Member	350	30%	245	19	30%	13	258	46	305	
Premium for Fourth Member	350	40%	210	19	40%	11	221	40	261	
Total Premium in Rs (Including GST)									1,437	

Floater discount

Order of member	Discount %
First member	No discount
Second member	20%
Third member	30%
Fourth and beyond	40%

Note: For purpose of calculating floater discount, members will be considered in descending order of age.

Benefit Illustration in respect of policies offered on individual and family floater basis

Age of the Members insured (in yrs)	Coverage opted on individual basis covering each member of the family separately (at a single point of time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is available for the entire family)			
	Premium (Rs.)	Sum Insured (Rs.)	Premium (Rs.)	Discount, (if any)	Premium After Discount (Rs.)	Sum Insured (Rs.)	Premium or consolidated premium for all members of family (Rs.)	Floater Discount, (if any)	Premium After Discount (Rs.)	Sum Insured (Rs.)
Illustration 1										
64	1,690	5,00,000	1,690	Nil	1,690	5,00,000	3,380	338	3,042	5,00,000
58	1,690	5,00,000	1,690		1,690	5,00,000				
Total Premium for all members of the family is Rs.3,380/-, when each member is covered separately. Sum insured available for each individual is Rs.5,00,000/-			Total Premium for all members of the family is Rs.3,380/-, when they are covered under a single policy. Sum insured available for each family member is Rs.5,00,000/-				Total Premium when policy is opted on floater basis is Rs.3,042/- Sum insured of Rs.5,00,000/- is available for the entire family (2A)			
Illustration 2										
47	1,690	5,00,000	1,690	Nil	1,690	5,00,000	4,506	704	3,802	5,00,000
44	1,408	5,00,000	1,408		1,408	5,00,000				
19	1,408	5,00,000	1,408		1,408	5,00,000				
Total Premium for all members of the family is Rs.4,506/-, when each member is covered separately. Sum insured available for each individual is Rs.5,00,000/-			Total Premium for all members of the family is Rs.4,506/-, when they are covered under a single policy. Sum insured available for each family member is Rs.5,00,000/-				Total Premium when policy is opted on floater basis is Rs.3,802/- Sum insured of Rs.5,00,000/- is available for the entire family (2A+1C)			

Note: Premium rates specified in the above illustration are standard premium rates without considering any loading. Also, the premium rates are exclusive of taxes applicable.

A-Adult | C-Child