

Star Cancer Care Gold (Pilot Product)

Unique Identification No.: SHAHLIP18046V011718

Period offered : From 24/10/2017 To 23/10/2022

For the first time in Indian Insurance History an insurance plan (on pilot basis) for Cancer affected lives covering risk of recurrence/ Spreading of Cancer (metastasis) / Second cancer (Second Malignancy) unrelated to first cancer

❖ What is meant by a Pilot Product ?

A pilot product is one which is launched on a test basis for period of 5 years. However period of insurance shall be one year and renewable thereon. Based on the performance, the product may be converted to a regular product or may be modified or withdrawn. Don't worry if the product is withdrawn, the insured person shall be offered a suitable alternate product .

❖ Who can avail this insurance ?

Persons between the age of 5 months and 65 years, who have already been diagnosed with Cancer (Stage 1 or Stage 2) can avail this insurance.

❖ What is the Policy Term ? :

The policy term is 1 year

❖ Is there any Pre-acceptance Medical Check Up?

There is no requirement of pre acceptance Medical Check Up.

It is enough to submit previous medical records including details of latest treatment along with the proposal form

❖ Sum Insured Options: Rs.3,00,000/- and Rs.5,00,000/-

You are advised to select an appropriate Sum Insured as once opted you may not be allowed to change.

❖ Coverage:

Section	Sum Insured (Rs.)	Sum Insured (Rs.)
Section 1– Lumpsum benefit -when there is a recurrence / metastasis and / or a second cancer	1,50,000/-	2,50,000/-
*Section 2 Indemnity Cover – Surgical and Interventional Therapy	1,00,000/-	1,50,000/-
*Section 3 Indemnity Cover - Non Surgical and Non Interventional Therapy	50,000/-	1,00,000/-
Total	3,00,000/-	5,00,000/-
*Applicable only for accidents & diseases other than Cancer and its related ailments		

❖ Expenses covered under Section 2 and Section 3:

- Room Rent (Single Standard A/c), Boarding, Nursing expenses
- Surgeon, Anesthetist, Medical practitioner, Consultants, Specialist Fees
- Anesthesia, Blood, Oxygen, Operation Theatre charges, Medicines and drugs etc.
- Emergency Ambulance charges for transporting the Insured person to the hospital up to a sum of Rs.1500/- per hospitalization and Rs.2000/- per policy period.
- Pre hospitalization:** Relevant medical expenses incurred up to 30 days prior to the date of admission
- Post hospitalization:** Relevant Medical expenses incurred up to 60 days after discharge from the hospital are payable.

g) All day care treatments

Expenses relating to hospitalization will be considered in proportion to the eligible room category

- ❖ **Co-payment:** 10% co-pay shall be applicable on each and every claim under Section 2 and 3 if you are aged above 60 years during first inception of this policy. Such co-payment shall be applicable for renewal also.

If your age is upto 60 years during first inception of this policy then co-payment condition shall not be applicable

❖ Waiting Periods:

Section 1:

- 30 months waiting period :

Treatment must have commenced only after waiting period for an admissible claim under this section

Section 2 and Section 3:

- 30 days waiting period (Not applicable for accidents)

- 24 months waiting period for specified illness/diseases/treatments

- 48 months waiting period for pre existing diseases.

❖ What are the important exclusions? (Applicable for Section 2 and Section 3)

- Treatment for Cancer and Cancer related ailments.
- Circumcision, Preputioplasty, Frenuloplasty, Preputial Dilatation and Removal of SMEGMA
- Inoculation or Vaccination (except for post-bite treatment and for medical treatment for therapeutic reasons)
- Congenital External Condition / Defects / Anomalies
- Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable)
- Convalescence, general debility, run-down condition or rest cure, Nutritional deficiency states.
- Psychiatric, mental and behavioral disorders.
- Intentional self injury
- Use of intoxicating substances, substance abuse, drugs / alcohol, smoking and tobacco chewing
- Venereal Disease and Sexually Transmitted Diseases,
- All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympo Tropic Virus type III (HTLV- III) or Lymphadenopathy Associated Virus (LAV) or HIV/AIDS.
- Treatment arising from or traceable to pregnancy, childbirth, family planning, miscarriage, abortion and complications of any of these (other than ectopic pregnancy).
- Treatment for Sub-Fertility, Assisted Conception and or other related complications of the same.
- Expenses incurred on weight control services including surgical procedures such as Bariatric Surgery and /or medical treatment of obesity.
- Treatment of Sleep apnea, treatment for genetic and endocrine disorders.
- Expenses incurred on High Intensity Focused Ultra Sound, Uterine Fibroid Embolisation, Balloon Sinoplasty, Enhanced External Counter Pulsation Therapy and related therapies, Chelation therapy, Deep Brain Stimulation, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy, VAX-D, Low level laser therapy, Photodynamic therapy and such other therapies similar to those mentioned herein under exclusion no.16.

- Expenses incurred on Lasik Laser or other procedures Refractive Error Correction and its complications, all treatment for disorders of eye requiring intra-vitreous injections
- Charges incurred on diagnostics that are not consistent with the treatment for which the insured is admitted in the hospital / nursing home. Admission primarily for diagnostic purpose with no positive existence of sickness / disease / ailment / injury and no further treatment is indicated.
- Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician of the hospital where the insured underwent treatment.
- Naturopathy, Unconventional, Untested, Unproven, Experimental therapies.
- Stem cell Therapy, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy.
- Immuno therapy and Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted.
- Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
- All types of Cosmetic, Aesthetic treatment of any description, all treatment for erectile dysfunctions, Change of Sex.
- Plastic surgery (other than as necessitated due to an accident or as a part of any illness),
- Cost of spectacles and contact lens, hearing aids, walkers and crutches, wheel chairs, Nutritional Supplements, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis [CAPD], infusion pump and such other similar aids, Cochlear implants and procedure related hospitalization expenses
- Hospital registration charges, admission charges, record charges, telephone charges and such other charges
- Other excluded expenses as detailed in the website "www.starhealth.in"

Exclusions applicable for all sections

- 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)
- Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials

❖ Renewal :

The policy will be renewed till closure date of this pilot product.

Beyond closure date , if the product is found to be viable, it will be converted and continued as a regular product.

If the product is found to be unviable, it will be withdrawn from closure date of pilot product. However don't worry, the Insured Person shall be offered a suitable alternate product by giving a three months' advance notice prior to renewal due date . In such instance if customer opts for the alternate product due credit shall be given for period of cover under pilot product .

Special feature on renewal where there is an admissible claim under Section 1:

Where a claim is paid / payable under Section 1 the coverage under Section 1 will cease. However the policy will continue until the date of expiry with coverage under Section 2 and Section 3. Thereafter the policy will be renewed with Section 2 and Section 3 only.

Your premium in such scenario shall be lesser than before. You may refer to premium table shown below:

Premium (before Claim under Section 1) Rs. (Excluding Tax)		
Age Band (years)	Sum Insured Rs.3,00,000/-	Sum Insured Rs.5,00,000/-
5mnths-29	17,400	27,300
30-39	17,800	27,900
40-49	18,900	29,200
50-59	21,000	32,000
60-65	23,200	35,100
66-69*		

*Applicable for renewals only

Premium for Section 2 and Section 3 (Post claim under Section 1) Rs. (Excluding Tax)		
Age Band (years)	Sum Insured Rs.1,50,000/-	Sum Insured Rs.2,50,000/-
5mnths-29	12,250	18,700
30-39	12,650	19,300
40-49	13,750	20,600
50-59	15,850	23,400
60-65	18,050	26,500
66-69*		

*Applicable for renewals only

Renewal premium is subject to change with prior approval from Regulator

❖ Other conditions about renewal:

The policy will be renewed except on grounds of misrepresentation / Non-disclosure of material fact as declared in the proposal form and at the time of claim, fraud committed / moral hazard or non-cooperation of the insured.

❖ Grace Period :

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 benefits with reference waiting periods will be available.

Any Disease / illness contracted or injury sustained during the grace period will be deemed as Pre-existing and will be subject to waiting period from the date of payment of renewal premium.

Please note that the actual period of cover will start only from the date of payment of premium.

❖ 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

❖ Enhancement of Sum insured:

Sum insured once opted cannot be enhanced even in the subsequent renewal.

❖ Is this Portable?

Yes, this policy is portable. If the insured is desirous of porting this policy, application in the appropriate form should be made to the Company at least 45

days before but not earlier than 60 days from the date when the renewal is due. For details contact "support@starhealth.in" or call 1800-425-2255 / 1800-102-4477

❖ **Cancellation:**

The Company may cancel this policy on grounds of misrepresentation, fraud, moral hazard, non-disclosure of material fact as declared in the proposal form and/or claim form at the time of claim and non co-operation of the insured by sending the Insured 30 days notice by registered letter at the Insured person's last known address. No refund of premium will be made except where the cancellation is on the grounds of non-cooperation of the insured, in which case the refund of premium will be on pro-rata basis. The insured may at any time cancel this policy and in such event the Company shall allow refund after retaining premium at Company's short Period rate only (table given below) provided no claim has occurred up to the date of cancellation

PERIOD ON RISK	RATE OF PREMIUM TO BE RETAINED
Up to one month	25% of the annual premium
Exceeding one month up to 3 months	40% of the annual premium
Exceeding 3 months up to 6 months	60% of the annual premium
Exceeding 6 months up to 9 months	80% of the annual premium
Exceeding 9 months	Full annual premium

❖ **Free Look Period:** A free look period of 15 days from the date of receipt of the policy by the insured is available to the insured to review the terms and conditions of the policy. In case the insured is not satisfied with the terms and conditions, the insured may seek cancellation of the policy and in such an event the Company may allow refund of premium paid after adjusting stamp duty charges and proportionate risk premium for the period concerned provided no claim has been made until such cancellation.

Free look Period is not applicable at the time of renewal of the policy

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

- ✓ Upon the death of the Insured Person.
- ✓ Upon exhaustion of the sum insured under the 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.

❖ **Claims Procedure**

For Section 1:

- a) Certificate from the Treating Doctor confirming the recurrence/metastasis / second malignancy of Cancer
- b) Clinical, radiological, histological, pathological, histopathological and laboratory reports in support.

For Section 2 and Section 3:

- Call the 24 hour help-line for assistance-1800 425 2255/ 1800 102 4477. Inform the ID/Policy number for easy reference
- In case of planned hospitalization, inform 24 hours prior to admission in the hospital
- In case of emergency hospitalization, information to be given within 24 hours of hospitalization
- Cashless facility can be availed in all network hospitals wherever possible
- In non-network hospitals payment, must be made up-front and then reimbursement will be effected on submission of documents if claim is found admissible

❖ **Star Advantages**

- No Third Party Administrator, direct in-house claims settlement.

- Faster and hassle – free claim settlement.
- Cashless hospitalization in more than 8000 networked hospitals.

❖ **Prohibition of rebates:**

(Section 41 of the Insurance Act) 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 relation 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 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 provision of this section shall be liable for a penalty which may extend to ten lakh rupees.

❖ **The Company**

Star Health and Allied Insurance Co. Ltd., commenced its operations in 2006 with the business interests in Health Insurance, Travel and Personal Accident. As an exclusive Health Insurance Company and the first of its kind in India, the Company is committed to setting international benchmarks in service and personal caring.



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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



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Insurance is the subject matter of solicitation

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