

Regd. & Corporate Office: 1, New Tank Street, ValluvarKottam High Road,
Nungambakkam, Chennai - 600 034. Phone: 044 - 2828 8800
CIN: U66010TN2005PLC056649 Email: support@starhealth.in Website: www. starhealth.in IRDAI. Reg.No: 129

Policy wordings

Unique id: IRDAI/HLT/SHAI/P-H(G)/V.I/67/2016-17 Jet Privilege - Group Health Insurance

incorporated herein. The declaration and other documents if any shall be the basis of this Contract and is deemed to be

contained herein the Company agrees as under. In consideration of the premium paid, subject to the terms, conditions, exclusions and definitions

hereto. insured Person/s, upon the advice of a duly Qualified Physician/Medical Specialist / Medical from any illness or sustain bodily injury through accident and if such disease or injury shall require the agreed but not exceeding the Limit of Coverage in aggregate in any one period stated in the schedule reasonably and necessarily incurred, up-to the limits mentioned and /or compensate patient, the Company will indemnify the Insured Person/s the amount of such expenses as are in the schedule for medical/surgical treatment at any Nursing Home / Hospital in India as an in-Practitioner or of duly Qualified Surgeon to incur Hospitalization expenses during the period stated That if during the period stated in the Schedule the Insured Person shall contract any disease or suffer to an extent as

Coverage

- Room, Boarding, Nursing Expenses, ICU Charges as provided by the Hospital / Nursing Home up to 1% of the sum insured
- <u>B</u> Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees
- \odot Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, medicines and drugs, radiotherapy, cost of pacemaker, stent and similar expenses diagnostic materials and X-ray, diagnostic imaging modalities, dialysis, chemotherapy
- Q hospital for treatment, provided however there is an admissible claim under the policy. insured person by private ambulance service when this is needed for medical reasons to go to Emergency ambulance charges up to Rs.2,000/- per hospitalization for transportation of the
- Ш to the date of hospitalization, for the disease/illness, injury sustained following an admissible claim Relevant Pre-Hospitalization medical expenses incurred for a period not exceeding 30 days prior under the policy
- G.T Post-Hospitalization expenses incurred up to 60 days after discharge from the hospital
- Air Ambulance charges up to 10% of the Basic Sum Insured during the entire policy period,
- immediate and rapid ambulance transportation to the hospital/medical centre that ground It is for life threatening emergency health condition/s of the insured person which requires transportation cannot provide.
- Ņ situated at the time of Emergency Necessary medical treatment not being available at the location where the Insured Person is
- ယ It is prescribed by a Medical Practitioner and is Medically Necessary;
- 4 7 The insured person is in India and the treatment is in India only
- Authorities of the Government/s Such Air ambulance should have been duly licensed to operate as such by Competent

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STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED

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Delivery Expenses : Expenses for a Delivery including Delivery by Caesarean Section, pre and expenses what so ever incurred by the insured person in connection with or in respect of: Family **Note**: The company shall not be liable to make any payments under this policy in respect of any postnatal expenses, are payable up-to Rs.25,000/- per Delivery,

planning treatment and all types of treatment for infertility / Sub-fertility and its complications

- = New Born Cover: Expenses incurred in a hospital / nursing home as an in-patient for treatment insured provided the mother is covered under the policy. of the New-born for any disease, illness or accidental injuries are payable up-to the floater sum
- ے years with the Company and payable on renewal while the policy is in force become eligible for this benefits after continuous coverage under this policy after every block of 3 Insured subject to a maximum of Rs.5,000/- per policy period is payable. The insured persons Cost of Health Check Up: Expenses incurred towards Cost of Medical Check-up upto 1% of Sum

Note (Applicable for 1A to 1I):

discharged on the same day. the list of Day Care treatments taken in the Hospital / Nursing Home and the Insured is 24 hours. However this time limit will not apply for the treatments / procedures mentioned Expenses on Hospitalization are payable provided the hospitalization is for minimum period of

Expenses incurred on treatment of Cataract is limited to Rs.20,000/- per eye per person.

the policy schedule or actuals whichever is less. Expenses relating to hospitalization will be considered in proportion to the room rent stated in

Co-payment: 10% of Co-pay is applicable on all claims for persons aged 55 years or above

Personal Accident Insurance: If at any time during the Period of Insurance, the Insured Person Health Sum Insured as compensation within 12 Calendar months from the date of Accident, then the Company will pay 100% of the by external, violent and visible means and if such accident causes death of the Insured Person (Main Member) shall sustain any bodily injury resulting solely and directly from an Accident caused

Special Conditions for Personal Accident Insurance

- The sum insured for this Section is equal to the sum insured opted for Health Section
- cover will continue for the remaining insured persons. Where there is an admissible claim for Accidental Death during the policy period, the health
- ယ Any claim under health portion will not affect the Sum Insured under this section.
- 4 This benefit is available only for the main member of the family who must be a Jet Privilege

Exclusions applicable for Personal Accident Insurance

- outside the Period of Insurance. Any claim relating to events occurring before the commencement of the cover or otherwise
- 2 intoxicating liquor or drugs suicide or attempted suicide or (b) whilst the insured person is under the influence of Any claim for Death or Disablement of the Insured Person from (a) intentional self-injury /
- ယ directly or indirectly attributable to HIV (Human Immunodeficiency Virus) and / or any HIV sexually transmitted conditions, Any claim arising out of mental disorder, suicide or attempted suicide self inflicted injuries, or anxiety, stress, depression, venereal disease or any loss



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- Insured Person engaging in Air Travel unless he/she flies as a fare-paying passenger on an related illness including AIDS (Acquired Immunodeficiency Syndrome), insanity and / or any mutant derivative or variations thereof howsoever caused.
- 4. means being in or on or boarding an aircraft for the purpose of flying therein or alighting there aircraft properly licensed to carry passengers. For the purpose of this exclusion Air Travel
- S detainments of all kings princes and people of whatever nation, condition or quality amounting to an uprising, military or usurped power, seizure capture arrest restraints 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
- တ damage to property by or under the order of any government or local authority. Participation in riots, confiscation or nationalization or requisition of or destruction of or
- 7 Any claim resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:
- lonizing radiation or contamination by radioactivity from any nuclear fuel or from any combustion (including any self sustaining process of nuclear fission) of nuclear fuel. nuclear waste from the combustion of nuclear fuel or from any nuclear waste from
- b. Nuclear weapons material
- assembly or nuclear component thereof. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear
- d. Nuclear, chemical and biological terrorism
- ∞ in competitions of professional or semi-professional sports persons Any claim arising out of sporting activities in so far as they involve the training or participation
- . Participation in Hazardous Sport / Hazardous Activities
- 5 Persons who are physically challenged, unless specifically agreed and endorsed in the policy.
- 11. 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.
- directly or indirectly. Any claim arising out of an accident related to pregnancy or childbirth, infirmity, whether
- 乚 or children are below 18 years of age. member, 25% of the sum insured is paid as educational grant provided the dependent child and / Educational Grant: Following an admissible claim under the policy towards Death of the main

The maximum grant is payable 25% of the sum insured irrespective of the number of dependent

Note

dependent children. The maximum grant is payable 25% of the sum insured irrespective of the number of



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DEFINITIONS

and violent means. Accident/Accidental means sudden, unforeseen and involuntary event caused by external, visible

illness for the purpose of this policy. Occurrence of the same illness after a lapse of 45 days as stated above will be considered as fresh date of last consultation with the Any one Illness means continuous period of illness and it includes relapse within 45 days from the Hospital/Nursing Home where treatment has been

are directly made to the network provider by the insurer to the extent pre-authorization approved the cost of treatment undergone by the insured in accordance with the policy terms and conditions Cashless Service means a facility extended by the insurer to the insured where the payments, of

Company means Star Health and Allied Insurance Company Limited

the policy is conditional upon. Condition Precedent shall mean a policy term or condition upon which the Insurer's liability under

Co-payment is a cost-sharing requirement under a health insurance policy that provides that the insured will bear a specified percentage of the admissible claim amount. A co-payment does not reduce the sum insured.

reference to form, structure or position. Congenital Anomaly means a condition which is present since birth, and which is abnormal with

- a) Internal Congenital Anomaly: Congenital anomaly which is not in the visible and accessible parts
- b) External Congenital Anomaly: Congenital anomaly which is in the visible and accessible parts of

and must comply with all minimum criteria as under wherever applicable, and is under the supervision of a registered and qualified medical practitioner or a medical set up within a hospital and which has been registered with the local authorities, Day Care Centre means any institution established for day care treatment of illness and/or injuries

- has qualified nursing staff under its employment;
- has qualified medical practitioner(s) in charge;
- has fully equipped operation theatre of its own where surgical procedures are carried out;
- authorized personnel. maintains daily records of patients and will make these accessible to the Insurance company's

Day Care treatment means medical treatment and/or surgical procedure which is

of more than 24 hours because of technological advancement and Which would have otherwise required a hospitalization Undertaken under general or local anesthesia in a hospital/day care centre in less than 24 hrs

Treatment normally taken on an out-patient basis is not included in the scope of this definition



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examinations, fillings (where appropriate), crowns, extractions and surgery Dental treatment means a treatment related to teeth or structures supporting teeth including

primary insured or proposer and does not have his / her independent sources of income Dependent Child means a child (natural or legally adopted), who is financially dependent on the

applicable, acceptable to the Company. histological, histo-pathological and laboratory evidence and also surgical evidence wherever Diagnosis means diagnosis by a registered medical practitioner, supported by clinical, radiological,

forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any Disclosure to information norm: The Policy shall be void and all premiums paid hereon shall be

Family includes Insured Person, spouse, dependent children up to 25 years of age

Group Administrator / Proposer means M/s Jet Privilege Private Limited

installation with high-tension supply, nuclear installations, handling hazardous chemicals persons working in underground mines, explosives, magazines, workers whilst involved in electrical rafting or canoeing involving rapid waters, yachting or boating outside coastal waters, jockeys, horseback, Polo, Circus personnel, army/navy/air force personnel and policemen whilst on duty Races or Rallies, caving or pot holing, hunting or equestrian activities, diving or under-water activity Parachuting, Ballooning, Scuba Diving, Bungee Jumping, Mountain Climbing, Such Sport/Activity including but not limited to Winter sports, Ice hockey, Skiing, Skydiving, any sport or activity, which is potentially dangerous to the Insured Person (whether trained, or not) Hazardous Sport / Hazardous Activities means engaging whether professionally or otherwise in Riding or Driving in

minimum criteria as under: enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the treatment of illness and/or injuries and which has been registered as a hospital with the local Hospital/Nursing Home means any institution established for in-patient care and day

- Has qualified nursing staff under its employment round the clock;
- least 15 in-patient beds in all other places; Has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at
- Has qualified medical practitioner(s) in charge round the clock.
- Has a fully equipped operation theatre of its own where surgical procedures are carried out;
- authorized personnel. Maintains daily records of patients and makes these accessible to the insurance company's

of less than 24 consecutive hours. Care' hours except for specified procedures/ treatments, where such admission could be for a period Hospitalization means admission in a Hospital for a minimum period of 24 consecutive 'In-patient

to any ICU patient including monitoring devices, critical care nursing and intensivist charges expenses which shall include the expenses for ICU bed, general medical support services provided ICU (Intensive Care Unit) Charges means the amount charged by a Hospital towards ICU



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physiological function and requires medical treatment. <u>Illness</u> means a sickness or a disease or pathological condition leading to the impairment of normal Policy wordings

the disease/ illness/ injury which leads to full recovery treatment which aims to return the person to his or her state of health immediately before suffering

(a) Acute condition - Acute condition is a disease, illness or injury that is likely to respond quickly to

- more of the following characteristics: (b) Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or
- 1. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or
- it needs ongoing or long-term control or relief of symptoms
- 3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
- it continues indefinitely
- it recurs or is likely to recur

Injury means accidental physical bodily harm excluding illness or disease solely and directly caused external, violent, visible and evident means which is verified and certified by a Medical

who are covered under this policy, for whom the insurance Insured Person means the name/s of persons shown in the schedule / Certificates of the Policy, is proposed, appropriate premium is

period of 24 hours for the sole purpose of receiving treatment. In-Patient means an Insured Person who is admitted to Hospital and stays there for a minimum

intensive than in the ordinary and other wards facilities and where the level of care and supervision is considerably more sophisticated and continuous monitoring and treatment of patients who are in a critical condition, or require life support constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the Intensive care unit means an identified section, ward or wing of a hospital which is under the

jurisdiction; and is acting within the scope and jurisdiction of license State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is there by entitled to practice medicine within its Medical Practitioner is a person who holds a valid registration from the Medical Council of any

part of a stay in hospital which Medically Necessary treatment is defined as any treatment, tests, medication, or stay in hospital or

- is required for the medical management of the illness or injury suffered by the insured
- care in scope, duration, or intensity; must not exceed the level of care necessary to provide safe, adequate and appropriate medical
- must have been prescribed by a medical practitioner;
- the medical community in India must conform to the professional standards widely accepted in international medical practice or by

an insurer or jointly by an Insurer and TPA to provide medical services to an insured by a cashless Network Hospital means hospitals or health care providers enlisted by an insurer, TPA or jointly by



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facility.

network. Non Network Hospital means any hospital, day care center or other provider that is not part of the

the recognized modes of communication. Notification of claim means the process of intimating a claim to the insurer or TPA through any of

fear. "Chemical" agent shall mean any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property. "Biological" agent shall mean any pathogenic (disease producing) micro-organism(s) and/or biologically government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in and/or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or which cause illness and/or death in humans, animals or plants. produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous Chemical agent Nuclear, chemical, biological terrorism shall mean the use of any nuclear weapon or device or mean any pathogenic (disease producing) micro-organism(s)

number of days preceding the hospitalization of the Insured Person, provided that Pre-hospitalization Medical Expenses: means medical expenses incurred during pre-defined

- hospitalization was required and Such medical expenses are incurred for the same condition for which the insured person's
- company. The inpatient hospitalization claim for such hospitalization is admissible by the insurance

number of days immediately after the Insured Person is discharged from the hospital provided that: Post Hospitalization Medical Expenses: means medical expenses incurred during pre-defined

- a. Such medical expenses are incurred for the same condition for which the insured person's hospitalization was required and
- b.The inpatient hospitalization claim for such hospitalization is admissible by the insurance

Nursing Council of any state in India Qualified Nurse is a person who holds a valid registration from the Nursing Council of India or the

standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury Reasonable and Customary Charges means the charges for services or supplies, which are the

shall include associated medical expenses Room Rent means the amount charged by a hospital towards Room and Boarding expenses and

from suffering and prolongation of life, performed in a hospital or day care centre by a medical of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief Surgery/Surgical Operation means manual and / or operative procedure (s) required for treatment practitioner.



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Unproven/Experimental Treatment means treatment, including drug Experimental therapy, which not based on established medical practice in India, treatment experimental or unproven

EXCLUSIONS

∾.

what so ever incurred by the insured person in connection with or in respect of: The Company shall not be liable to make any payments under this policy in respect of any expenses

- _ treatment and for medical treatment other than for prevention of diseases) Circumcision, Preputio plasty, Frenuloplasty, Inoculation or Vaccination (except for post-bite
- \sim Congenital External diseases/condition defects or anomalies
- ယ hospitalization. (Dental implants are not payable) Dental treatment or surgery unless necessitated due to accidental injuries and requiring
- 4. Psychiatric, mental and behavioral disorders, Venereal disease and Sexually transmitted diseases, intentional self injury and use of intoxicating drugs / alcohol, smoking and tobacco Convalescence, general debility, run-down condition or rest cure, Nutritional deficiency states,
- Ġ of foreign enemy, warlike operations (whether war be declared or not) Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act
- <u>ე</u> Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
- 7. for treatment, other than for opportunistic infections and for treatment of HIV/AIDS, provided at are positive for HIV (Human Immuno Deficiency Virus) would be entitled for expenses incurred All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Trophic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus the time of first commencement of insurance under this policy, their CD4 count is not less than of a similar kind commonly referred to as AIDS. It is however made clear that such of those who (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition
- ∞ types of treatment for infertility and its complications thereof. complications of any of these (other than ectopic pregnancy), family planning treatment and Treatment arising from or traceable to pregnancy, childbirth, miscarriage, abortion 으
- ဖ obesity, medical treatment for weight control, treatment for genetic and endocrine disorders, Expenses incurred on weight control services including surgical procedures for treatment of treatment for sleep apnea
- <u>;</u> other therapies similar to those mentioned herein under exclusion no14 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 Expenses incurred on High Intensity Focused Ultra Sound, Uterine fibroid embolisation, Balloon



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- <u>=</u> Expenses incurred on Lasik Laser or Refractive Error Correction and its comparent for disorders of eye requiring intra-vitreal injections and related procedures. complications
- 12 Charges incurred at Hospital or Nursing Home primarily for diagnostic, Radiology or laboratory presence of any ailment, sickness or injury, for which confinement is required at hospital/nursing Tests not consistent with or incidental to the diagnosis and treatment of the positive existence or
- ವ by the attending Physician. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified
- 4 Naturopathy Treatment, unconventional, untested, unproven, experimental therapies
- 5 Stem cell Therapy, Chondrocyte Implantation, Immunotherapy without proper indication
- <u></u>6 Hospital registration charges, admission charges, record charges, telephone charges and such other charges
- 17. Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
- <u></u> Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than dysfunctions. as necessitated due to an accident or as a part of any illness), all treatment for erectile
- 19. pump and such other similar aids and crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion Cost of spectacles and contact lens, hearing aids, Cochlear implants and procedures, walkers
- 20. Other expenses as detailed in the website "www.starhealth.in"

4. CONDITIONS

- The premium payable under this policy shall be payable in advance. No receipt of unless made in writing and signed by an authorized official of the Company. waiver of any terms, provisions, conditions, and endorsements of this policy shall be valid condition precedent to any liability of the Company to make any payment under this policy. No as they relate to anything to be done or complied with by the Insured Person/s, shall be a terms, provision, conditions and endorsements of this policy by the Insured Person/s, in so far official of the company. The due payment of premium and the observance of fulfillment of the premium shall be valid except on the official form of the company signed by a duly authorized
- $\dot{\sim}$ Upon the happening of any event, which may give rise to a claim under this policy, notice with full particulars shall be sent to the Company within 24 hours from the date of occurrence of the
- ယ Claim must be filed within 15 days from the date of discharge from the Hospital.



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depending upon the merits of the case. the Company will examine and relax the time limit mentioned in these conditions Note: Conditions 2 & 3 are precedent to admission of liability under the policy. However

The Insured Person shall obtain and furnish the Company with all original bills, receipts and other documents upon which a claim is based and shall also give the Company such additional information and assistance as the Company may require in dealing with the claim

4.

Documents to be submitted in support of claim are -

For Reimbursement claims: Documents to be submitted in support of Health claim are

- Duly completed claim form, and
- Pre Admission investigations and treatment papers
- Discharge Summary from the hospital in original
- Cash receipts from hospital, chemists
- Cash receipts and reports for tests done
- Receipts from doctors, surgeons, anaesthetist
- Certificate from the attending doctor regarding the diagnosis

For Cashless Treatment:

- a Call the 24 hour help-line for assistance - 1800 425 2255
- Inform the ID number for easy reference
- On admission in the hospital, produce the ID Card issued by the Company at the Hospital Helpdesk
- ൧ Information and resubmit to the Hospital Help Desk. Obtain the Pre-authorisation Form from the Hospital Help Desk, complete the Patient
- Φ hospital will fill up expected cost of treatment. The Treating Doctor will complete the hospitalisation/ treatment information and
- <u>.</u> This form is submitted to the Company
- Ģ the information furnished is inadequate The Company will process the request and call for additional documents/ clarifications if
- \supset and conditions as well as the exclusions therein and either approve or reject the request based on the merits. Once all the details are furnished, the Company will process the request as per the terms
- In case of emergency hospitalization information to be hospitalization given within 24 hours
- \sim Cashless facility can be availed only in networked Hospitals
- be effected on submission of documents In non-network hospitals payment must be made up-front and then reimbursement will

Documents to be submitted in support of Personal Accident claim are

- Completed Claim form
- Ö Death certificate, Panchanama
- ဂ္ FIR, wherever applicable
- <u>a</u> Postmortem report
- Φ duly probated In the absence of assignment, Legal Heir ship Certificate/Succession Certificate / Will
- Original Policy, if issued for Individual Coroner's Report/Police Inquest Report

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



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hospital bills and submit the claim for a possible reimbursement. treatment or denial of coverage. The Insured Person can go ahead with the treatment, settle the Please note that denial of a Pre-authorization request is in no way to be construed as denial of

based on some other prescribed interest rate. bank rate as notified by Reserve Bank of India, unless the extent regulation requires payment approved by the Company. For the purpose of this clause, 'bank rate' shall mean the existing 2% above the bank rate prevalent at the beginning of the financial year in which the claim is terms and conditions, beyond the time period as prescribed under IRDA (Protection of Policyholders Regulation), 2002, the Company shall be liable to pay interest at a rate which is In case of delay in payment of any claim that has been admitted as payable under the Policy

- Ş Any medical practitioner authorized by the company shall be allowed to examine the Insured as the same may reasonably be required on behalf of the Company at the Company's cost. Person/s in case of any alleged injury or diseases requiring hospitalization when and as often
- <u>ე</u> misrepresentation /non disclosure at the time of proposal / at the time of claim, whether by the if such claim is in any manner fraudulent or supported by any fraudulent means or device, The Company shall not be liable to make any payment under the policy in respect of any claim Insured Person/s or by any other person acting on his behalf.
- .7 Automatic Restoration Sum Insured (Applicable for 1A to 1G): There shall be automatic the sum insured during the policy period subject to the following terms restoration of the Sum Insured by 100% of the sum insured immediately upon exhaustion of

It is made clear that such automatic restoration of sum insured:

- Is available only once during the policy period and
- Can be utilized only for illness / disease unrelated to the illness / diseases for which claim/s was / were made. The unutilized restored sum insured cannot be carried torward.
- ∞ and conditions. The Company, however, shall not be bound to give notice that the policy is due The policy may be renewed subject to mutual consent and mutually agreed terms
- 9 Cancellation: The Company may cancel this policy on grounds of misrepresentation, fraud given below) provided no claim has occurred up to the date of cancellation the date of cancellation, after retaining premium at Company's short period rate only (table Company shall allow refund only for those insured beneficiary who have not made claim as on then the insurance cover in respect of such insured beneficiary and his / her family will cease notice by registered letter to its last known address. Where the misrepresentation, fraud, moral time of claim, or non-co-operation by the insured entity, by sending the insured entity 30 days immediately. The insured entity may at any time cancel this policy and in such hazard, non disclosure either at inception or at the time of claim is by the insured beneficiary, Moral Hazard, non disclosure of material fact as declared at the inception of the policy / at the event the

PERIOD ON RISK	RATE OF PREMIUM TO BE RETAINED
Up to one-month	1/3rd of annual premium
Up to three Months	1/2 of annual premium
Up to six months	3/4th of annual premium
Exceeding six months	Full annual premium



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- Automatic Termination: The insurance under this policy with respect to each relevant insured person policy shall terminate immediately on the earlier of the following events: 1. Upon the death of the Insured Person
- Upon exhaustion of the sum insured

Role of Group Administrator / Proposer

Person. Such role includes The Group administrator shall play a facilitative role between the Insurer and the Insured

- Furnish to the Company detailed list of Insured Person/s for preparation of ID cards
- Distribute ID cards received from the Company
- To facilitate Insured Person / s in availing cashless facility
- To make payment of premium on or before the stipulated time
- 12 Arbitration : If any dispute or difference shall arise as to the quantum to be paid under this in accordance with the provisions of the Arbitration and Conciliation Act, 1996. third arbitrator to be appointed by such two arbitrators. Arbitration shall be conducted under and of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to the dispute/difference, or if they cannot agree upon a single arbitrator within 30 days of any policy (liability being otherwise admitted) such difference shall independently of all other

respect of this policy. as hereinbefore provided, if the Company has disputed or not accepted liability under or in It is clearly agreed and understood that no difference or dispute shall be referable to arbitration,

loss or damage shall be first obtained. action or suit upon this policy that the award by such arbitrator/ arbitrators of the amount of the It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of

Insured for any claim hereunder and such claim shall not, within three years from the date of such disclaimer have been made the subject matter of a suit in a Court of Law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be It is also further expressly agreed and declared that if the Company shall disclaim liability to the recoverable hereunder.

All claims under this policy shall be payable in Indian currency. All medical /surgical treatments under this policy shall have to be taken in India.

14. Important Note:

- Where the policy is on floater basis the sum insured floats among each member of the family
- 9 meaning wherever it appears shall have the meaning as stated in the Act / Indian Laws The Policy Schedule and any Endorsement are to be read together and any word or such
- C The terms conditions and exceptions that appear in the Policy or in any Endorsement are part
- 으 the contract, must be complied with and applies to each relevant insured person. Failure to comply may result in the claim being denied.
- 9 visit our website www.starhealth.in Counter Financing of Terrorism (AML / CFT) policy of the Company. For further details, please Settlement of claims under the Policy is subject to the provisions of Anti- Money Laundering /
- Φ of the company for necessary compliance by all stake holders The attention of the policy holder is drawn to our website www.starhealth.in for anti fraud policy



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CIN: U66010TN2005PLC056649 Email: support@starhealth.in Website: www. starhealth.in IRDAI. Reg.No: 129

Policy wordings

5 Policy disputes

contained herein is understood and agreed to by both the Insured and the Company to be subject to Indian Law. Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions

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425-2255 / 1800-102-4477 Email: support@starhealth.in hand, post, or facsimile/email to Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai-600034. Toll free no: 1800-Any notice, direction or instruction given under this policy shall be in writing and delivered by

in the case of hand delivery, facsimile or e-mail. Notice and instructions will be deemed served 7 days after posting or immediately upon receipt

17. **Customer Service**

contact the offices of the Company at the address specified, during normal business hours If at any time the Insured Person requires any clarification or assistance, the insured may

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the specified address, during normal business hours In case the Insured Person is aggrieved in any way, the insured may contact the Company at

Grievance Department,

hours. or Send e-mail to grievances@starhealth.in. Senior Citizens may call 044-28288897 High Road, Nungambakkam, Chennai - 600034. or Call 044-28288821 during normal business Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam

In the event of the following grievances:

- a.any partial or total repudiation of claims by the Company
- b.any dispute in regard to premium paid or payable in terms of the policy;
- d.delay in settlement of claims; c. any dispute on the legal construction of the policies in so far as such disputes relate to claims:
- e.non-issuance of any insurance document to customer after receipt of the premium

within whose jurisdiction the branch or office of Star Health and Allied Insurance Company the insured person may approach the Insurance Ombudsman at the address given below, Limited are located



Policy wordings

List of Insurance Ombudsmen

CONTACT DETAILS	JURISDICTION
AHMEDABAD Office of the Insurance Ombudsman, 6th floor, Jeevan Prakash Building, Tilak Marg, Relief Road, Ahmedabad 380001, Tel 079-25501201/02/05/06. Email:-bimalokpal.ahmedabad@gbic.co.in	State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.
BENGALURU Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No.57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru-560 078. Tel.:-080-26652048/26652049 Email:- bimalokpal.bengaluru@gbic.co.in	Karnataka.
BHOPAL Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp.Airtel Office, Near New Market, Bhopal – 462 033. Tel.:- 0755-2769201/202 Fax:- 0755-2769203 Email:- bimalokpal.bhopal@gbic.co.in	States of Madhya Pradesh and Chattisgarh.
BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.:- 0674-2596461 / 2596455 Fax:- 0674-2596429 Email:-bimalokpal.bhubaneswar@gbic.co.in	State of Orissa.
CHANDIGARH Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.:- 0172-2706196/ 2706468 Fax:- 0172-2708274 Email:- bimalokpal.chandigarh@gbic.co.in	States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.
CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.:- 044-24333668 / 24335284 Fax:- 044-24333664 Email:- bimalokpal.chennai@gbic.co.in	State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).



Policy wordings

States of West Bengal, Bihar, Sikkim and Union Territories of Andaman and Nicobar Islands.	KOLKATA Office of the Insurance Ombudsman, Hindustan Building Annexe, 4th floor, 4, CR Avenue, Kolkata - 700 072. Tel.:- 033-22124339 / 22124340 Fax:- 033-22124341 Email:- bimalokpal.kolkata@gbic.co.in
State of Rajasthan.	JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi-II Bldg., Ground Floor, Bhawani Singh Marg, Jaipur - 302005. Tel.:- 0141-2740363 Email:- bimalokpal.jaipur@gbic.co.in
States of Andhra Pradesh, Telangana and Union Territory of Yanam - a part of the Union Territory of Pondicherry.	HYDERABAD Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court" Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.:- 040-65504123/23312122 Fax:- 040-23376599 Email:- bimalokpal.hyderabad@gbic.co.in
States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	GUWAHATI Office of the Insurance Ombudsman, 'Jeevan Nivesh', 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.:- 0361- 2132204 / 2132205 Fax:- 0361-2732937 Email:-bimalokpal.guwahati@gbic.co.in
Kerala, Lakshadweep, Mahe-a part of Pondicherry	ERNAKULAM Office of the Insurance Ombudsman, 2nd floor, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, Emakulum - 682 015. Tel.:- 0484- 2358759/2359338 Fax:- 0484-2359336 Email:- bimalokpal.ernakulum@gbic.co.in
State of Delhi	DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.:- 011-23239633/23237532 Fax:- 011-23230858 Email:- bimalokpal.delhi@gbic.co.in



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Policy wordings

LUCKNOW

6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road Fax:- 0522-2231310. Email:- bimalokpal.lucknow@gbic.co.in Hazratganj, Lucknow-226 001. Tel.:- 0522-2231330 / 2231331 Office of the Insurance Ombudsman,

Ambedkarnagar, Sulanpur, Maharajganj, Sidharathnagar. Gorkhpur, Deoria, Mau, Chandauli, Ballia Santkabimagar, Azamgarh, Kaushinagar, Kaushambi, Balrampur, Basti, Sravasti, Gonda, Faizabad, Amethi, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Mahoba, Hamirpur, Banda, Chitrakoot, District of Uttar Pradesh: Lalitpur, Jhansi, Lakhimpur, Bahraich, Barabanki, Raebareli, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Pratapgarh, Jaunpur, Varansi, Gazipur,

MUMBAI

Fax:- 022-26106052 Email:- bimalokpal.mumbai@gbic.co.in 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.:- 022-26106552/26106960 Office of the Insurance Ombudsman,

excluding Navi Mumbai & Thane

States of Goa, Mumbai Metropolitan Region

NOIDA

Email:- bimalokpal.noida@gbic.co.in Tel: 0120-2514250 / 2514252 / 2514253 Naya Bans, Sector-15, Distt: Gautam Budh Nagar, U.P-201301 Bhagwan Sahai Palace, 4th Floor, Main Road, Office of the Insurance Ombudsman,

States of Uttaranchal and the following Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Mathura, Meerut, Moradabad Bulandshehar, Etah, Kanooj, Mainpuri, Bagpat, Bareilly, Bijnor, Budaun, Districts of Uttar Pradesh:. Agra, Aligarh, Saharanpur. Amroha, Hathras, Kanshiramnagar, Hapur, Shamli, Rampur, Kashganj, Sambhal, Nagar, Ghaziabad, Hardoi, Shahjahanpur, Farrukhabad, Firozabad, Gautam Budh

PATNA

1st Floor, Kalpana Arcade Building, Bazar Samiti Road Bahadurpur, Patna - 800 006.Tel:0612-2680952 Email:- bimalokpal.patna@gbic.co.in Office of the Insurance Ombudsman

States of Bihar and Jharkhand

PUNE

Jeevan Darshan Building, 3rd Floor, CTS Nos. 195 to 198, NC Kelkar Road, Narayan Peth, Pune - 411 030 Office of the Insurance Ombudsman,

Tel: 020 -41312555 Email:- bimalokpal.pune@gbic.co.in

Region. and Thane excluding Mumbai Metropolitan States of Maharashtra, Area of Navi Mumbai

Jet Privilege - Group Health Insurance
Unique id : IRDAI/HLT/SHAI/P-H(G)/V.I/67/2016-17

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_
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33 Uvulo Palato Pharyngo Plasty
32 Incision & Drainage of Retro Pharyngeal Abscess
31 Turbinoplasty
30 Excision of Angioma Septum
29 Tracheostomy
28 Thyroplasty Type II
27 Conchoplasty
26 Excision and destruction of lingual tonsils
25 Reduction of fracture of Nasal Bone
24 Keratosis removal under GA
23 Tympanoplasty (Type II)
22 Incision and drainage - Haematoma Auricle
21 Pseudocyst of the Pinna – Excision
20 Thyroplasty Type I
19 Vestibular Nerve section
18 Septoplasty
17 Incision and drainage of perichondritis
16 Fenestration of the inner ear
15 Endoscopic Stapedectomy
14 Removal of Tympanic Drain under LA
13 Turbinectomy
12 Endolymphatic Sac Surgery for Meniere's Disease
11 Tympanoplasty (Type IV)
10 Revision of the fenestration of the inner ear.
9 Stapedectomy under LA
8 Tympanoplasty (Type III)
7 Myringotomy with Grommet Insertion
6 Ossiculoplasty
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3 Revision stapedectomy
2 Myringoplasty(Type I Tympanoplasty)
1 Stapedotomy
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FSRT-Fractionated SRT	77 FSF
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