STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED

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PROSPECTUS - FAMILY ACCIDENT CARE INSURANCE POLICY

Unique Identification No.: SHAHLIP21042V012021

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

Who can take this insurance?
Any person aged between 16 days and 65 years can take this insurance. Life-long renewal.

Maximum renewal age for dependent children is 25 years and for adult no exit age.

Sum Insured Basis : Floater Basis.
Floater basis means, the Sum Insured and other related benefits (in any) float amongst the insured persons.

Minimum Sum Insured : Rs.1,00,000/-

Maximum Sum Insured: Rs.50,00,000/-.

Policy Term : 1 year & 2 years, where the policy is issued for more than 1 year, the Sum Insured is for each of the year, without any carry over benefit thereof.

What are the benefits available under the insurance?
If at any time during the Period of Insurance, the Insured Person shall sustain any bodily injury solely and directly from Accident caused by external, violent and visible means and if such accident causes

1. **Death** of the Insured Person within 12 Calendar months from the date of Accident, then the Company will pay as compensation, 100% of the Sum Insured stated in the Schedule

   or

2. **Permanent Total Disablement** of the Insured Person within 12 Calendar months from the Date of Accident, then the Company will pay as compensation, 100% of the Sum Insured stated in the Schedule, provided that the disability is confirmed and claimed within 60 days from the occurrence of disablement.

   Note :
   a. Where the insured person is a Dependent Child, the compensation for 1 or 2 above will be 25% of the sum insured stated in the Schedule. Thereafter the policy will continue until expiry for the balance sum insured for the other Insured Persons.
   b. Where a claim is admitted / admissible under 1 or 2 above, the policy cannot be renewed for such relevant person

What is meant by Permanent Total Disablement ?
Permanent Total Disablement means total and irrevocable loss of :-

1. Sight of both eyes or;
2. Physical separation of two entire hands or;
3. Physical separation of two entire foot or;
4. One entire hand and one entire foot or;
5. Sight of one eye and loss of one hand or;
6. Sight of one eye and loss of one entire foot or;
7. Use of two hands or;
8. Use of two feet or;
9. Use of one hand and one foot or;
10. Sight of one eye and use of one hand or;
11. Sight of one eye and use of one foot.

What are the exclusions under the policy?
The Company shall not be liable to make any payments in respect of:

1. Any Claim relating to events occurring outside the Period of Insurance.
2. Any claim arising out of Accident 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. Indulging in self endangerment unless in self defense or to save human life.
3. Any claim arising out of accident attributable to pre-existing conditions, if proven.
4. 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 on or boarding an aircraft for the purpose of flying therein or alighting there from.
5. 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.
6. 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.
7. 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
8. 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.
9. Participation in Hazardous Sport / Hazardous Activities
10. 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.

Renewal Clause: The 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. 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 in respect of this policy) 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.

Renewal premium is subject to change as per the extant Guidelines. Change of options/plans within same product is permissible only at the time of renewal.

Automatic Termination of Insurance: This policy shall automatically terminate upon the Insured Person's death or on payment of 100% Sum Insured whichever is earlier.

Free Look Period: The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.

The insured person shall be allowed free look period of thirty days from date of receipt of the policy document whether electronically or otherwise to review the terms and conditions of the policy, and to return the same if not acceptable.

i. If the insured has not incurred any claim during the Free Look Period, the insured shall be entitled to a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or

ii. where the risk has already commenced and the option of return of the policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or

iii. where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period

Redressal of Grievance: Incase of any grievance the insured person may contact the Company through

Website : www.starhealth.in

E-mail : gro@starhealth.in, grievances@starhealth.in

Ph. No. : 044-69006900 | Toll Free No. 1800 425 2255

Senior Citizens may call at 044-69007500

Courier/ Post :Star Health and Allied Insurance Company Limited., 4th Floor, Balaji Complex, No.15, Whites Lane, Whites Road, Royapettah, Chennai- 600014

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.

If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at 044-43664600.

For updated details of grievance officer, kindly refer the link
https://www.starhealth.in/grievance-redressal

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017, as amended from time to time.

Grievance may also be lodged at IRDAI Integrated Grievance Management System - https://bimabharosa.irdai.gov.in/

Disclosure to information norms: The policy shall become void and all premium paid hereon shall be forfeited to the Company, in the event of non disclosure of any material fact and/or mis-representation, fraud, moral hazard, mis description as declared in the proposal form and/or claim form at the time of claim.

Cancellation/termination : The Company may cancel this policy on grounds of misrepresentation, fraud, moral hazard, non disclosure of material fact as declared in proposal form and/or claim form at the time of claim or non-co-operation of the insured person, by giving 15 days' written notice. and no refund of premium will be made. 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

Short period scales:

Policy Term 1 Year	
Period on risk	**Rate of premium to be retained**
Up to one month	25% of the policy premium
Exceeding one month up to 3 months	40% of the policy premium
Exceeding 3 months up to 6 months	60% of the policy premium
Exceeding 6 months up to 9 months	80% of the policy premium
Exceeding 9 months	Full of the policy premium
Policy Term 2 Years	
Period on risk	**Rate of premium to be retained**
Up to one month	20% of the policy premium
Exceeding one month up to 3 months	30% of the policy premium
Exceeding 3 months up to 6 months	40% of the policy premium
Exceeding 6 months up to 9 months	50% of the policy premium
Exceeding 9 months up to 12 months	60% of the policy premium
Exceeding 12 months up to 15 months	70% of the policy premium
Exceeding 15 months up to 18 months	80% of the policy premium
Exceeding 18 months up to 21 months	90% of the policy premium
Exceeding 21 months	Full Policy Premium

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.

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 as per the extant Guidelines. In such an event the insured will be intimated thirty days in advance

How much does it cost to take this insurance?
Please refer the premium table below

Premium Excluding Taxes and Stamp Duty

For 1 Year policy: Rs.75/- per lakh

For 2 Years policy: Rs.145/- per lakh

How to buy this insurance?
Please contact our nearest Branch Office or visit our website www.starhealth.in

How to make a claim under the policy?
Call the 24 hour help-line for assistance – **1800 425 2255**

Inform the Policy Number for easy reference

- Duly completed claim form and

For Death Claims

- Death Certificate / proof of accident.
- Post-mortem Certificate, if conducted
- FIR (wherever required)
- Police Investigation report (wherever required)
- Viscera Sample 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 percentage.

Note:

- The Company reserves the right to call for additional documents wherever required.
- The Company shall pay interest as per Insurance Regulatory and Development Authority of India (Protection of Policyholders' Interests) Regulations, 2017, in case of delay in payment of an admitted claim under the Policy

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

Prohibition of Rebates: Section 41 of Insurance Act 1938 (Prohibition of rebates): 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.:

STAR Personal & Caring | Health Insurance

The Health Insurance Specialist