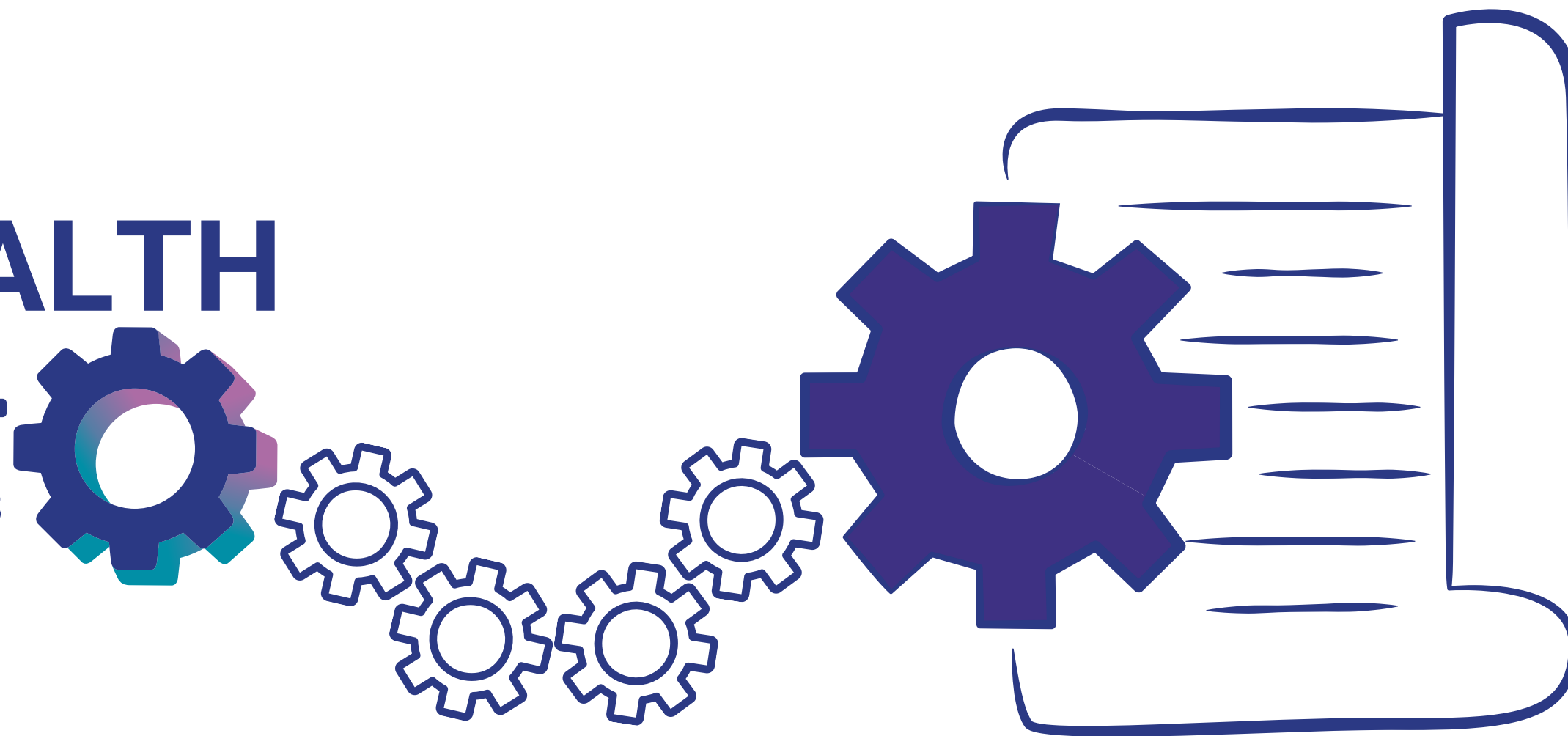


# SMART HEALTH PRO

UIN: SHAHLIP23172V012223





## VISION

To be the most  
admired Health  
Insurance Company in India



## MISSION

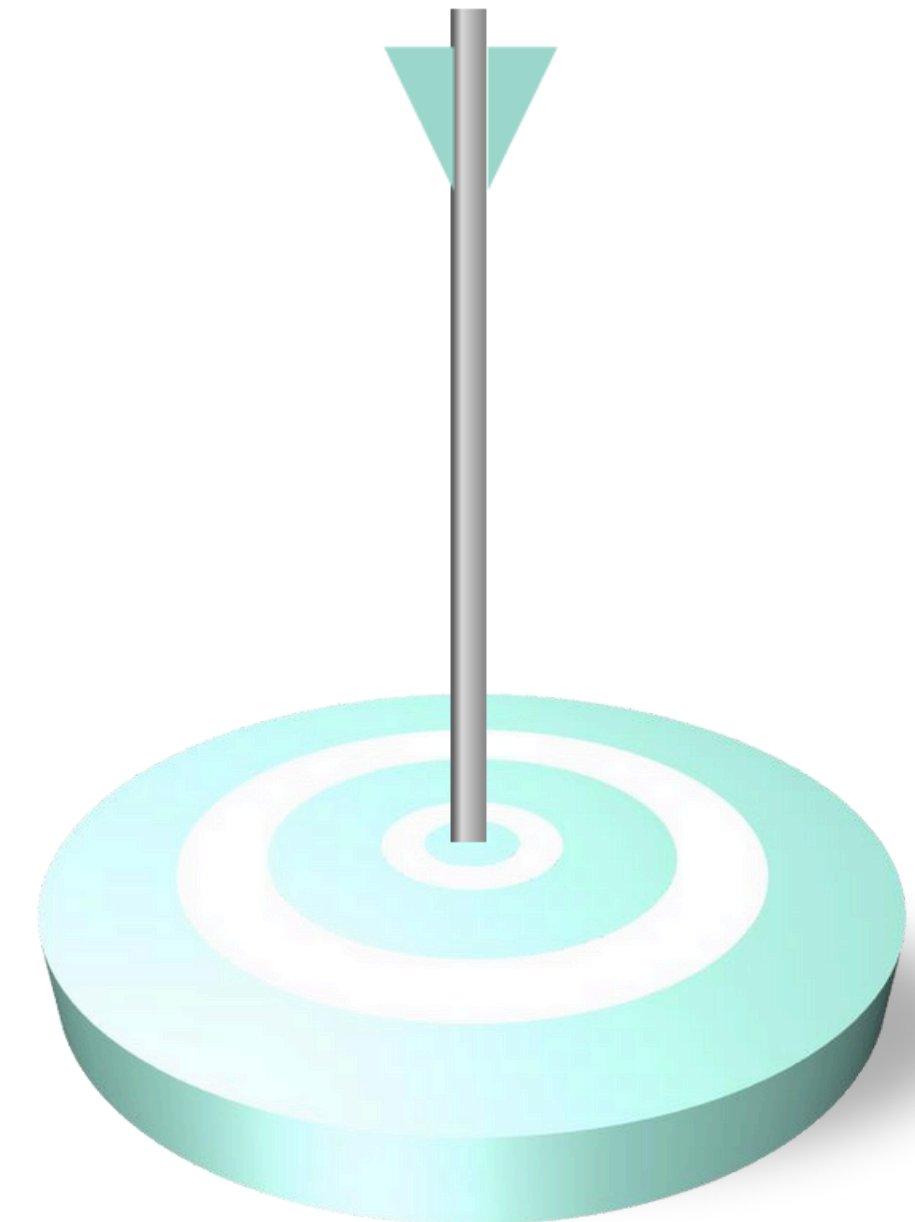
To Achieve:

- 20% Growth
- 20% ROE &
- 200% Solvency



## VALUE

- Customer Centricity
- Innovation
- Transparency



# ABOUT THE POLICY



**COMPREHENSIVE  
COVER AT A  
COMPETITIVE PRICE**

**MODULAR PRODUCT  
WITH 5 TRENDING  
OPTIONAL COVERS**

**PRODUCT FOR THE  
FITNESS CONSCIOUS  
GENERATION**

# ELIGIBILITY CRITERIA

<b>POLICY TYPE</b>	Individual & Floater
<b>ENTRY AGE - INDIVIDUAL SUM INSURED</b>	18 Years to 50 Years
<b>ENTRY AGE - FLOATER SUM INSURED</b>	Adults: 18 Years to 50 Years Dependent Children: 91 Days to 25 Years
<b>MAXIMUM FAMILY SIZE</b>	2A+3C*
<b>POLICY TERM</b>	1 / 2 / 3 Years
<b>PRE MEDICAL CHECK-UP</b>	Not Required
<b>RISK BASED LOADING</b>	Helps to reduce rejection of applications / proposals

\*Family means Self + Spouse / Live-in Partner / Same Sex Partner

## SUM INSURED OPTIONS



## MIDTERM INCLUSION

Is available on payment of proportionate premium for Newly Wedded spouse, New born baby and Legally adopted child subject to the following conditions. Intimation about the new born baby, Legally adopted child and Newly wedded spouse should be given within 45 days from the date of birth.

### Conditions:

- Midterm Inclusion of New born baby and Legally adopted child is available **only under Floater Policies**.
- Waiting periods as stated in the policy will be applicable from the date of inclusion of such newly wedded spouse, new born baby, legally adopted child.
- Such midterm inclusion will be subject to underwriter's approval.

## ROOM RENT



**Private Single AC Room**

## DAY CARE PROCEDURES

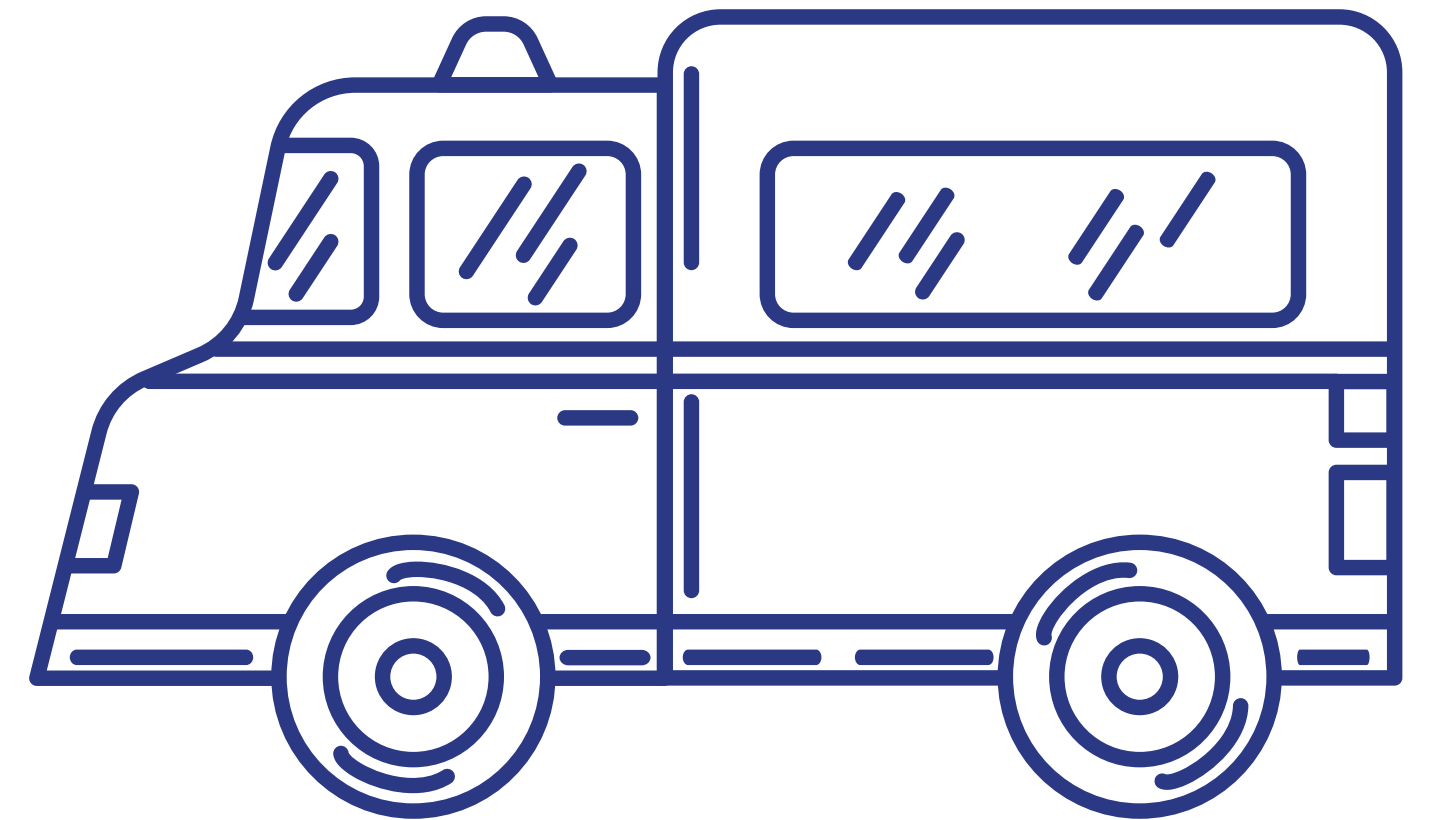


**All Day Care Procedures are covered**

## ROAD AMBULANCE

**Subject to an admissible hospitalization claim, road ambulance expenses incurred for the following are payable on actuals:-**

- **For transportation of the insured person by private ambulance service to go to hospital when this is needed for medical reasons (OR)**
- **For transportation of the insured person by private ambulance service from one hospital to another hospital for better medical treatment (OR)**
- **For transportation of the insured person from the hospital where treatment is taken to their place of residence (if it is in same city), provided the requirement of an ambulance to the residence is certified by the medical practitioner.**



## AIR AMBULANCE

**Air Ambulance expenses are payable subject to an admissible hospitalization claim, the Insured Person(s) is/are eligible for reimbursement of expenses incurred towards the cost of air ambulance service up to 10% of sum insured per policy year, provided that:**

- **It is for emergency care of the insured person which requires immediate and rapid ambulance transportation to the hospital/ medical centre that ground transportation cannot be provided.**
- **Necessary medical treatment not being available at the location where the Insured Person is situated at the time of Emergency**
- **It is prescribed by a Medical Practitioner and is Medically Necessary;**
- **The insured person is in India and the treatment is in India only**
- **Such Air ambulance should have been duly licensed to operate as such by Competent Authorities of the Government/s.**



## PRE & POST HOSPITALIZATION

### Pre-hospitalization Expenses:

Medical expenses incurred up to 60 days immediately before the insured person is hospitalized.



### Post Hospitalization Expenses:

Medical expenses incurred up to 180 days immediately after the insured person is discharged from the hospital.

## DOMICILIARY HOSPITALIZATION

Coverage for medical treatment (Including AYUSH) for a period exceeding three days, for an illness / disease / injury, which in the normal course, would require care and treatment at a Hospital but, on the advice of the attending Medical Practitioner, is taken whilst confined at home under any of the following circumstances

- The condition of the patient is such that he/she is not in a condition to be removed to a Hospital, OR
- The patient takes treatment at home on account of non-availability of room in a hospital.

## ANNUAL HEALTH CHECK-UP

Expenses incurred towards cost of health check-up up to the limits mentioned in the table given below for each policy year (irrespective of claim) which can be availed at any time during the policy year.

SUM INSURED (Rs.)	LIMIT UP TO (Rs.)	
	INDIVIDUAL S.I.	FLOATER S.I.
5,00,000	1500	2500
10,00,000	2000	5000
15,00,000	4000	8000
20,00,000	5000	10,000
25,00,000		
50,00,000		
75,00,000	8000	15,000
1,00,00,000		



## HOME CARE TREATMENT

**Payable up to 10% of the sum insured subject to maximum of Rs.5 lakhs in a policy year, for treatment availed by the Insured Person at home, only for the specified conditions mentioned below, which in normal course would require care and treatment at a hospital but is actually taken at home provided that:**

- **The Medical practitioner advises the Insured person to undergo treatment at home**
- **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**
- **Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained**
- **Insured can avail "Home Care Treatment" service on cashless/ reimbursement basis, if availed from the list of our Network service providers given in our website "[www.starhealth.in](http://www.starhealth.in)"**



## HOSPITALIZATION EXPENSES FOR TREATMENT OF NEW BORN

**Hospitalization Expenses incurred in a hospital/ nursing home on treatment of the New born for any disease, illness (including any congenital disorders) or accidental injuries are payable from Day 1 of its birth till the expiry date of the policy, up to 10% of the sum insured and maximum upto Rs. 2 lakhs. This sub-limit will not apply for treatment related to congenital internal disease / defects for the new born.**

**Conditions applicable for this section:**

- **This cover is available only if Mother is covered under this (Smart Health Pro) policy for a continuous period of 12 months without break**
- **Intimation about the birth of the New Born should be given to the company and the coverage will be given to the New Born from the first day of its birth.**





## AYUSH TREATMENT

**Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Siddha and Homeopathy systems of medicines in a AYUSH Hospital is payable up to the sum insured.**

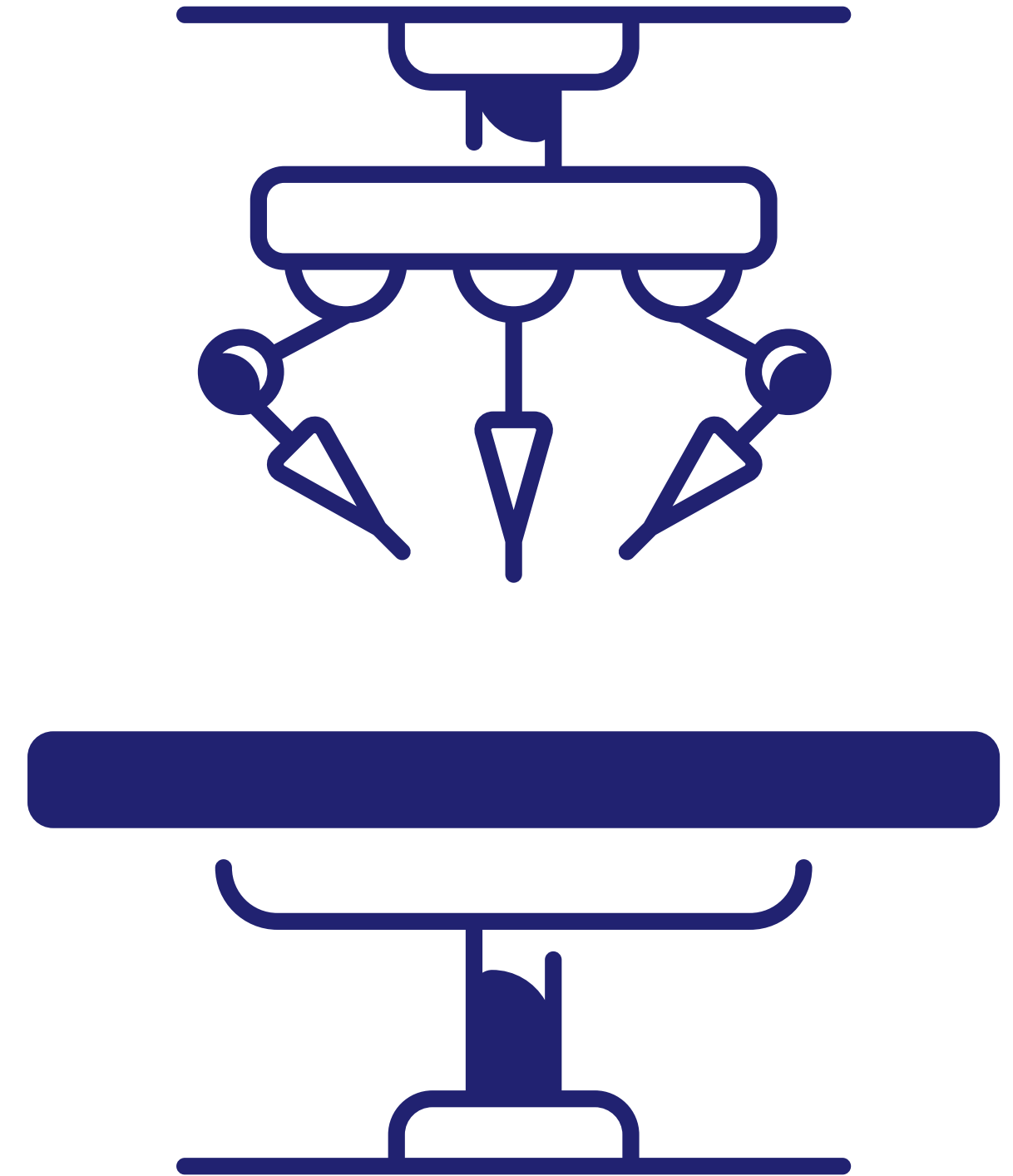
**Note: Yoga and Naturopathy systems of treatments are excluded from the scope of coverage under AYUSH treatment**



# MODERN TREATMENTS

The following procedures will be covered (wherever medically indicated) either as in patient or as part of day care treatment in a hospital upto sum insured (including Pre and Post hospitalization expenses) during the policy period;

- a) Uterine artery Embolization and HIFU
- b) Balloon Sinuplasty
- c) Deep Brain Stimulation
- d) Oral Chemotherapy
- e) Immunotherapy- Monoclonal Antibody to be given as injection
- f) Intra Vitreal injections
- g) Robotic surgeries
- h) Stereotactic radio surgeries
- i) Bronchical Thermoplasty
- j) Vaporisation of the prostate (Green laser treatment or holmium laser treatment)
- k) IONM-(Intra Operative Neuro Monitoring)
- l) Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions



## CUMULATIVE BONUS



**The insured person will be eligible for Cumulative Bonus calculated at 50% of sum insured for each claim free year and maximum up to 100% of the sum insured**

### **CONDITIONS:**

- **The Cumulative Bonus will be calculated on the expiring Sum Insured**
- **If the insured opts to reduce the Sum Insured at the subsequent renewal, the limit of indemnity by way of such Cumulative bonus shall not exceed such reduced sum insured**
- **Cumulative Bonus will not be reduced unless the same is utilized in the event of claim.**
- **During Renewal, Cumulative Bonus will be reduced only to the extent of utilized portion and the unutilized Cumulative Bonus will be carried forward to the next policy year.**

## AUTOMATIC RESTORATION OF SUM INSURED

There shall be automatic restoration of the Sum Insured once by 100% subject to the following :-

- The automatic restoration shall be immediately upon partial/full utilization of the limit of coverage.
- Such Restored Sum Insured can be utilized for all claims for subsequent Hospitalization during the policy period.
- The maximum liability of the Company in a Single claim under a policy year shall not exceed the limit of coverage.
- The unutilized restored sum insured cannot be carried forward to the next policy year.

Illustration		An Insured Person with Smart Health Pro, Tenure 1 year, Third year in progress, Basic Sum Insured Rs.5,00,000/-				
No. of Claims	Claim Amount (₹)	Available Benefit Limit in ₹			Admissible Claim Amount (₹)	Utilization of Sum Insured (₹)
		Basic S.I	Bonus	Automatic Restoration of S.I		
1 <sup>st</sup> Claim	5,00,000	5,00,000	5,00,000	-	5,00,000	Basic S.I (Full)
2 <sup>nd</sup> Claim	7,00,000	-	5,00,000	5,00,000	7,00,000	Bonus (Full) + Automatic Restore (Full)
Available Balance for Next Claim = ₹ 3,00,000						

## STAR WELLNESS PROGRAM

This program intends to promote, incentivize and to reward the Insured Persons' healthy life style through various wellness activities. The wellness activities as mentioned below are designed to help the Insured person to earn wellness reward points which will be tracked and monitored by the Company. The wellness points earned by the Insured Person(s) under the wellness program, can be utilized to get discount in premium during the renewal.

This Wellness Program is enabled and administered online through Star Health Mobile Applications



Wellness Points Earned	Discounts in Premium
200 to 350	4%
351 to 600	10 %
601 to 750	14 %
751 and Above	20 %

## CO-PAYMENT



Co-Payment is not applicable

## WAITING PERIODS

Initial Waiting Period	30 Days
Specific Disease Waiting Period	24 Months
PED Waiting Period	48 Months



**NOTE: Optional Covers will be provided on payment of additional premium**

## OPTIONAL COVER 1: CUMULATIVE BONUS BOOSTER

**The insured person will be eligible for additional Cumulative Bonus calculated at 50% of Sum Insured for each claim free year and maximum up to 600% of the Sum Insured.**

**Conditions applicable for Cumulative Bonus Booster:**

- 1. The Cumulative Bonus will be calculated on the expiring Sum Insured**
- 2. If the insured opts to reduce the Sum Insured at the subsequent renewal, the limit of indemnity by way of such Cumulative Bonus will be calculated as per the reduced Sum Insured.**
- 3. Cumulative Bonus will not be reduced unless the same is utilized in the event of claim**
- 4. During Renewal, Cumulative Bonus will be reduced only to the extent of utilized portion and the unutilized Cumulative Bonus will be carried forward to the next policy year.**

### **Note**

- 1. This optional cover can be opted by insured having Sum Insured of Rs. 10 lakhs and above.**
- 2. During renewal, if insured reduces the Sum Insured to below Rs. 10 lakhs, this optional cover will not be available.**

## **OPTIONAL COVER 2: MODIFICATION OF ROOM CATEGORY**

**Through this optional cover, Insured person can enhance/reduce the room category from Private Single A/c Room to Any Room / Shared Accommodation.**

### **Note**

- 1. Enhancement of room category to Any Room can be opted by insured having Sum Insured of Rs. 10 lakhs and above only.**
- 2. During renewal, if insured reduces the Sum Insured to below Rs. 10 lakhs, this enhancement of room category will not be available.**

## **OPTIONAL COVER 3: REDUCTION OF PED WAITING PERIOD**

- The Insured Person can reduce the Pre-Existing Disease/s waiting period from 48 months to 36 / 24 / 12 months.**
- This option is available only for the first purchase of this Smart Health Pro and also only upto Sum Insured chosen at that time.**
- This option is not available for renewal / ported / migrated policies. Offering reduction of Pre-Existing Diseases waiting period is subject to Underwriter's approval.**

## **OPTIONAL COVER 4: COVERAGE FOR NON-MEDICAL ITEMS (CONSUMABLES)**

**Items as per List I will become payable If there is an admissible claim under the policy for inpatient / day care treatment.**

## **OPTIONAL COVER 5: UNLIMITED AUTOMATIC RESTORATION OF SUM INSURED**

**The policy provides unlimited automatic restoration of sum insured subject to the following condition;**

- **Sum Insured will be restored unlimited number of times and maximum up to 100% each time, which can be utilized for a subsequent hospitalization.**
- **The restoration will trigger immediately upon partial/ full utilization of the sum insured, which can be utilized for a subsequent hospitalization.**
- **On partial utilization of the Sum Insured, it will be restored up to extent of utilization.**
- **On full utilization of the Sum Insured, it will be restored to 100%.**
- **The Restored Sum Insured can be used for all claims including for modern treatment, but for a subsequent hospitalization.**
- **The maximum payable amount for a single claim under restoration benefit shall not be more than the Sum Insured.**

# UNLIMITED AUTOMATIC RESTORATION OF S.I. - ILLUSTRATION

	Sum Insured	Insured 1	Insured 2
		₹ 10,00,000	₹ 10,00,000
	NCB	0	₹ 5,00,000
	Total available Amount	₹ 10,00,000	₹ 10,00,000 + ₹ 5,00,000
1st Claim	1st Claim	₹ 5,00,000	₹ 5,00,000
	Claim Paid	₹ 5,00,000	₹ 5,00,000
	Will the Restoration kick in? Yes, Since it was Partial utilization of S.I.	₹ 5,00,000 (Restored S.I)	₹ 5,00,000 (Restored S.I)
Available Amount for Next Claim		₹ 10,00,000	₹ 15,00,000
2nd Claim	2nd Claim (Same/Different illness)	₹ 15,00,000	₹ 15,00,000
	Claim Paid Amount	₹ 10,00,000	₹ 15,00,000
	Will the Restoration kick in? Yes, Since there is Full utilization of S.I.	₹ 10,00,000 (Restored S.I)	₹ 10,00,000 (Restored S.I)
Available Amount for Next Claim		₹ 10,00,000 (S.I Restored upto 100%)	₹10,00,000 (S.I Restored upto 100%)
3rd Claim	3rd Claim (Same / Different illness)	₹ 11,00,000	₹ 11,00,000
	Claim Paid	₹ 10,00,000	₹ 10,00,000
	Will the Restoration kick in? Yes, Since there is Full utilization of S.I.	₹ 10,00,000 (Restored S.I)	₹ 10,00,000 (Restored S.I)

# PREMIUM LOADING & DISCOUNT FOR CHOOSING OPTIONAL COVERS

NAME OF THE COVER	% OF LOADING / DISCOUNT	
CUMULATIVE BONUS BOOSTER	5% Loading	
MODIFICATION OF ROOM CATEGORY	Any Room	10% Loading
	Shared Accommodation	7.5% Discount
REDUCTION OF PED WAITING PERIOD	Reduction in Waiting Period	Loading (applicable one time)
	48 months to 36 months	15%
	48 months to 24 months	35%
	48 months to 12 months	50%
COVERAGE FOR NON MEDICAL ITEMS	7.5%	
UNLIMITED AUTOMATIC RESTORATION OF S.I.	5%	

## Conditions applicable for Optional Covers:

1. The above mentioned optional covers can be opted by the insured only at the time of inception
2. Once opted, the insured cannot opt out of the optional covers during renewal.

## DISCOUNTS OFFERED

**5%  
OFF**

**UPFRONT  
DISCOUNT**

**20%  
OFF**

**FLOATER  
DISCOUNT**



**CLICK HERE**

**For More Details**

**LONG TERM  
DISCOUNT**

**10%  
&  
12.5%**

**STAR  
WELLNESS  
DISCOUNT**

**20%  
OFF**

# INDIVIDUAL PLAN - PREMIUM ILLUSTRATION


INDIVIDUAL BASIS	
Sum Insured	₹ 10,00,000
Family Size	5 members
Policy Term	1 Year

AGE	PREMIUM
45 Years	₹ 10,631
49 Years	₹ 14,387
23 Years	₹ 6,284
21 Years	₹ 6,284
19 Years	₹ 6,284
Total Premium	₹ 43,870

SUM INSURED
₹ 10,00,000
₹ 10,00,000
₹ 10,00,000
₹ 10,00,000
₹ 10,00,000

Total Sum Insured : 5 \* 10,00,000

**TOTAL  
PREMIUM  
A**



# FLOATER PLAN - PREMIUM ILLUSTRATION

FLOATER BASIS		RELATION	AGE	PREMIUM EXCLUDING TAX (₹)	
SUM INSURED	₹ 10,00,000	SELF	49	14,387	a
FAMILY SIZE	2A + 3C	SPOUSE	45	10,631	b
POLICY TERM	1 Year	CHILD 1	23	3,236	c
POLICY TYPE	Floater	CHILD 2	21	2,841	d
		CHILD 3	19	2,751	e
				33,846	f = a+b+c+d+e
		LESS : FLOATER DISCOUNT (APPLIED IN SELF & SPOUSE PREMIUM)	20%	5,004	g = (a+b)*20%
		TOTAL PREMIUM		28,842	h = f-g

**DIFFERENCE IN PREMIUM IF FLOATER BASIS IS OPTED**  
**= TOTAL PREMIUM A - TOTAL PREMIUM B**  
**= ₹ 43,870 - ₹ 28,842**  
**= ₹ 15,028**



# ANTI-MONEY LAUNDERING (AML)

**Anti-Money Laundering (AML) measures are of paramount importance in the health Insurance business due to several key reasons which are as follows:**

- **First and foremost, health Insurance involves substantial financial transactions, making it susceptible to potential money laundering activities, where ill-gotten gains are disguised as legitimate Insurance premiums.**
- **By implementing robust AML protocols, health Insurance companies can prevent the infiltration of illicit funds into their operations, safeguarding the integrity of the industry and ensuring that Policyholders' premiums are derived from legitimate sources.**
- **Moreover, effective AML practices enable the identification and reporting of suspicious transactions, enhancing overall financial security, and mitigating the risks of fraud, terrorism financing, and other illicit activities that could harm the Insurance sector and its stakeholders.**

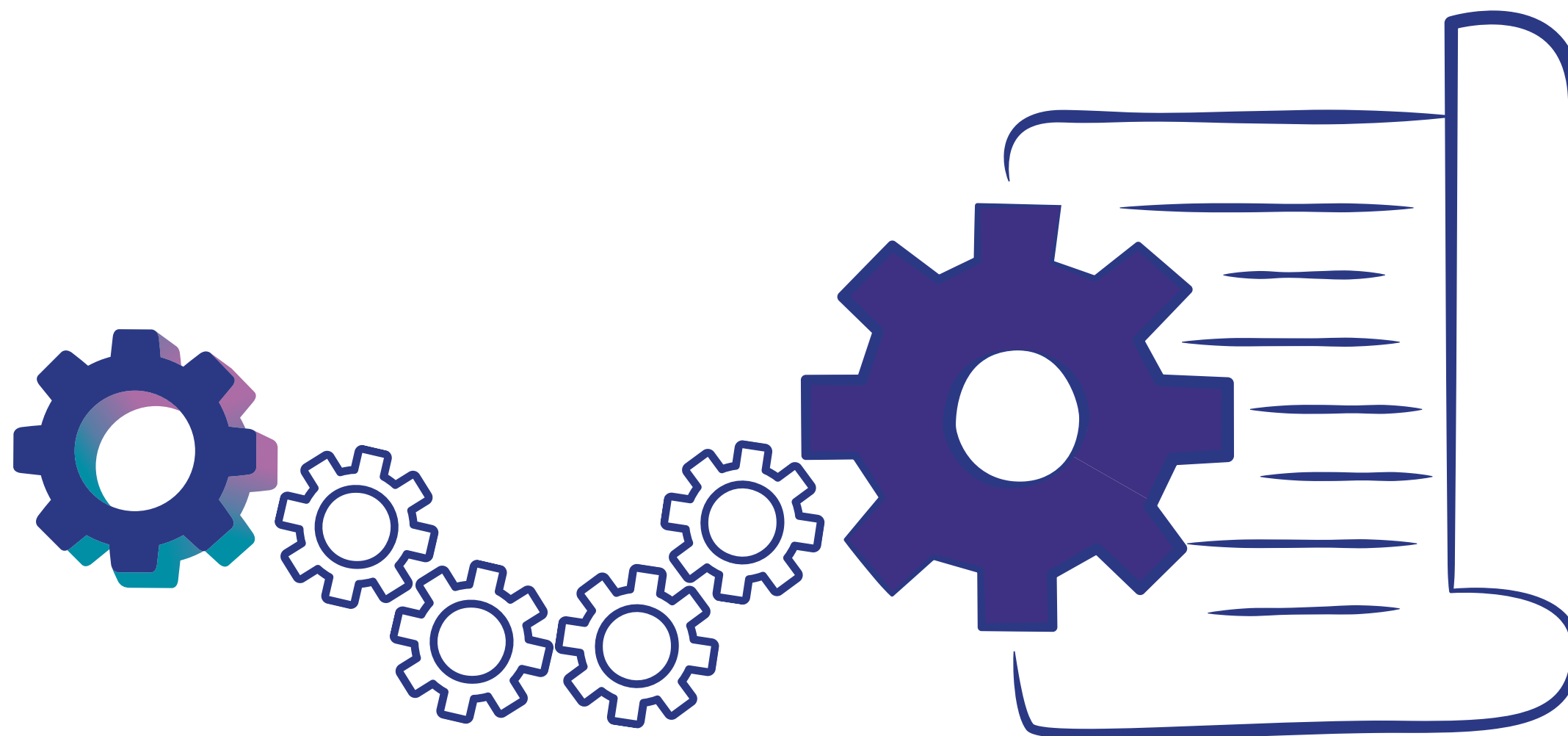
**Therefore it is the responsibility of every employee in the organization and every intermediary to know the latest AML Guidelines and adhere by the same.**

To know more about AML



# THANK YOU

UIN: SHAHLIP23172V012223



## DISCOUNTS OFFERED

**Upfront Discount:** We will provide upfront discount of 5% on the premium if the following additional questions related to lifestyle and habits are answered by the insured at the time of purchasing this policy.

**Note**

- This discount will be available only on the base policy premium not on Optional/Add-on covers.
- This discount will be available only once, that is at the time of first purchase of this policy
- The discount will be given only if all the Adult Members proposed for Insurance answered the questions.

**Floater Discount:** 20% floater discount is applicable on Individual premium for each adult and this Floater discount is not applicable on Child Premium

**Long term discount:** If the policy term opted is 2 years, 10% discount is available on 2nd year premium and if policy term opted is 3 years, 12.5% discount is available on 3rd year premium

Star Wellness Points Earned	Discounts in Premium
200 to 350	4%
351 to 600	10 %
601 to 750	14 %
751 and Above	20 %

