

Star Health – Senior Citizen Red Carpet – One Pager

A. Salient Features

1. Special plan for senior citizen with no change in premium for life time
2. Pre-existing diseases (PED) are covered after 1 year of continuous policy
3. Co-pay of 30% in each and every claim in Non-PED and 50% of copay in PED (check grid below)
4. Sub-limits on cataract, heart related, cancer, kidney related treatment (check grid below)
5. No pre-policy medical test required

B. Policy Criteria

Criteria	Description
Type of cover	Individual and family floater
Entry age	Between 60-75 years of age
Sum assured	For Individual: Rs 1 / 2 / 3 / 4 / 5 / 7.5 / 10 / 15 / 20 / 25 lacs
	For Family Floater: Rs 10 / 15 / 20 / 25 Lacs
Policy tenure	1 year, 2 years, 3 years
Pre-policy medical test	No Medical test. If specified reports are submitted 10% discount on fresh premium and renewal

C. Policy benefits

Features	Description				
Room rent limit	1-5 lacs cover	7.5 – 10 lacs cover	15 lacs cover	20 lacs cover	25 lacs cover
	1% of cover	6,000 per day	7,000 per day	8,500 per day	10,000 per day
ICU charges	2% of sum assured – For 1 - 10 lacs cover				
	No limit – For 15 lacs and above cover				
Doctors' fees	up to 25% of sum assured for Surgeon, Anesthetist, Medical Practitioner, Consultants and Specialist's fees				
Pre-hospitalization	Up to 30 days Prior to hospitalization				
Post Hospitalization	7% of hospitalization expenses, subject to max amount of INR5,000 for 1-7.5 lacs cover, INR7000 for 10-15 Lacs cover, INR10,000 for 20-25 Lacs cover				
Pre-existing diseases	Covered after 1 year of continuous insurance				
Renewal	Lifelong renewal offered. A grace period of 30 days allowed for renewal				
Health Check up	Every claim free year done at our network hospitals based on below criteria				
	For Individual Basis: Not available for 1-4 Lakh, INR1000 for 5-7.5 Lakh, INR2000 for 10-15 Lakh, INR2500 for 20-25 Lakh				
	For Floater Basis: Not available for 1 / 2 / 3 / 4 / 7.5 Lakh, INR2000 per person and INR3500 per Policy for 10-15 Lakh cover INR2500 per person and INR4500 per Policy for 20-25 lacs cover				
Co-pay	Sum assured	PED / Non-PED Claims		Co-pay	
	1-10 lacs cover	Non-PED Claims		30% of each and every claim	
	1-10 lacs cover	PED Claims		50% of each and every claim	

	15-25 lacs cover	Both PED and Non-PED Claims	30% of each and every claim
Sublimits on SI for Cataract (Per person per policy period) (individual Basis)	Rs 15000 for 1/2 Lakh cover, Rs 18000 for 3 Lakh, Rs 20000 for 4 Lakh, Rs 21500 for 5 Lakh, Rs 23000 for 7.5 Lakh, Rs 25000 for 10 Lakh, Rs 30000 for 15 Lakh, Rs 35000 for 20 Lakh, Rs 40000 for 25 Lakh		
Sublimits on SI for Cataract (Per person per policy period) (Floater bases)	For 10 Lakh: Rs 25000 per person and Rs 45000 for policy period, For 15 Lakh: Rs 30000 per person and Rs 50000 for policy period, For 20 Lakh: Rs 35000 per person and Rs 60000 for policy period, For 25 Lakh: Rs 40000 per person and Rs 70000 for policy period		
Sublimits on SI for All major surgeries (Individual Basis)	Rs 60000 for 1 Lakh cover, Rs 120000 for Rs 2 Lakh, Rs 150000 for 3 Lakh, Rs 200000 for 4 Lakh, Rs 225000 for 5 Lakh, Rs 250000 for 7.5 Lakh, Rs 275000 for 10 Lakh, Rs 300000 for 15 Lakh, Rs 325000 for 20 Lakh, Rs 350000 for 25 Lakh		
Sublimits on SI for All major surgeries (Floater Basis)	For 10 Lakh: Rs 275000 per person and Rs 450000 for policy period, For 15 Lakh: Rs 300000 per person and Rs 500000 for policy period, For 20 Lakh: Rs 325000 per person and Rs 550000 for policy period, For 25 Lakh: Rs 350000 per person and Rs 600000 for policy period		
Sublimits on SI for Cerebrovascular Accident, Cardiovascular Diseases, Cancer)	Rs 75000 for 1 Lakh cover, Rs 150000 for Rs 2 Lakh, Rs 200000 for 3 Lakh, Rs 225000 for 4 Lakh, Rs 275000 for 5 Lakh, Rs 300000 for 7.5 Lakh, Rs 350000 for 10 Lakh, Rs 400000 for 15 Lakh, Rs 450000 for 20 Lakh, Rs 500000 for 25 Lakh		
Sublimits on SI for Cerebrovascular Accident, Cardiovascular Diseases, Cancer	For 10 Lakh: Rs 350000 per person and Rs 600000 for policy period, For 15 Lakh: Rs 400000 per person and Rs 700000 for policy period, For 20 Lakh: Rs 450000 per person and Rs 750000 for policy period, For 25 Lakh: Rs 500000 per person and Rs 850000 for policy period		
Outpatient Consultation	<p>For Individual Basis: Not available for 1-2 Lakh cover Rs 600 for 3 Lakh, Rs 800 for 4 Lakh, Rs 1000 for 5 Lakh, Rs 1200 for 7.5 Lakh, Rs 1400 for 10 Lakh, Rs 1800 for 15 Lakh, Rs 2200 for 20 Lakh, Rs 2600 for 25 Lakh (Max Rs 200 Per consultation)</p> <p>For Floater Basis: Not available for 1-7.5 Lakh cover, Rs 1400 per person and Rs 2400 per Policy for 10 Lakh, Rs 1800 per person and Rs 3000 per Policy for 15 Lakh, Rs 2200 per person and Rs 3800 per Policy for 20 Lakh, Rs 2600 per person and Rs 4400 per Policy for 25 Lakh (Max Rs 200 Per consultation)</p>		
Ambulance charges	<p>For 1-4 Lakh cover: Rs 600 per hospitalization, Rs 1200 per Policy period</p> <p>For 5-10 Lakh cover: Rs 1000 per hospitalization, Rs 2000 per Policy period</p> <p>For 15-25 Lakh cover: Rs 1500 per hospitalization, Rs 3000 per Policy period</p>		
Day care Procedures	All day care treatments are allowed		

D. Exclusions

Exclusion	Description
Pre-existing diseases	Covered after 1 year of continuous insurance
Initial waiting period	30 days only for disease related hospitalization. Accident related cover starts from Day 1
Specific illness waiting period	2 years for cataract, benign tumor, joint diseases or replacement (other than caused by accident), gall bladder, hernia, uterine prolapse, fistula, fissure, transplant surgeries, congenital internal disease