

Annexure : CI

Critical Illness Benefit (Rider UIN:107C009V01)

If the member suffers from a critical illness as per the Schedule below and the Policyholder proves the same to the satisfaction of the Company, the critical illness benefit will become payable. After payment this benefit will cease for the member concerned. This benefit represents an advance of the Basic Life Cover Benefits that would normally have been paid on death. Hence on the payment of the Critical Illness Benefit, such Basic Life Cover Benefits will reduce proportionately.

This benefit will be subject to the following:

- This benefit is payable in respect of the member alone. The person must be a member as defined and must be covered under this benefit on the day of diagnosis.
- The Basic Life Cover Benefit is in full force at the time of the diagnosis of the critical illness.
- This benefit is in full force at the time of the diagnosis of the critical illness.
- This benefit shall only be paid in respect of the first critical illness to affect the member.
- The Policyholder/member writes to the Company, within 30 days from the day the critical illness is diagnosed, giving the following details :
 - Date of diagnosis of the critical illness
 - Nature and extent of the illness and details thereof, including medical reports and investigations, and
 - The member's address.
- The member is willing to be examined by Medical Examiner(s) nominated by the Company.

C) Exclusions are :

No payment will be made by the Insurer for any claim directly or indirectly caused by based on arising out of or however attributable to any of the following:

1. Any Critical Illness for which are, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted before the start of the Policy Period or for which a claim has or could have been made under any earlier policy.
2. Any Critical Illness diagnosed within the first 90 days of the date of commencement of the Policy is excluded. This exclusion shall not apply to an Insured for whom coverage has been renewed by the Named Insured, without a break, for subsequent years. Not applicable for Employees already covered under the existing policy, subject to waiting period under the existing policy has completed and no increase in the Sum Assured.
3. Infection with Human Immunodeficiency Virus (HIV) or conditions due to any Acquired Immune Deficiency Syndrome (AIDS). For the purpose of this plan, the definition of AIDS will be the one that is used by the

World Health Organisation at the date of onset or that used by any other appropriate Government or international organisation. Infection by HIV will be deemed to have occurred where blood tests indicate the presence of the virus or any antibodies to it.

4. War, whether war be declared or not, invasion, hunting, mountaineering, motor racing of any kind, other dangerous hobbies or activities, act of foreign enemy, hostilities, civil war, insurrection, terrorism or terrorist acts or activities, rebellion, revolution, mutiny, military or usurped power, riot, strike, lockout, military or popular uprising, civil commotion, martial law or loot, sack or pillage in connection therewith, confiscation or destruction by any government or public authority or any act or condition incidental to any of the above.
5. Naval or military operations of the armed forces or air force and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
6. Intentional self-injury and/or the use or misuse of intoxicating drugs and/or alcohol.

SCHEDULE OF CRITICAL ILLNESS

1. Heart Attack (MI)

The first occurrence of Heart Attack or myocardial infarction which means the death of a portion of the heart muscle, as a result of an acute interruption of blood supply to the heart muscle.

The diagnosis shall be supported by three of the following five criteria being present and consistent with a Heart Attack:

- history of typical chest pain,
- new confirmatory electrocardiographic changes,
- diagnostic elevation of cardiac enzyme CK-MB,
- diagnostic elevation of troponin (T or I), and
- left ventricular ejection fraction less than 50% measured 3 months or more after the event.

Angina is specifically excluded.

2. Cancer

The diagnosis of a malignant tumour characterised by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue.

Cancer includes: Leukaemia, Malignant Lymphoma, Hodgkin's Disease, Malignant bone marrow disorders & Metastatic skin cancer.

The cancer must be confirmed by histological evidence of malignancy by a qualified oncologist or pathologist.

The following are excluded:

- All tumours which are histologically described as pre-malignant, non-invasive or "carcinoma in situ".

- Early prostate cancer TNM Classification T1a and T1b or equivalent classification.
- Melanomas of the skin of less than 1.5mm Breslow thickness, or less than Clark Level 3.
- Hyperkeratoses, basal cell and squamous skin cancers.
- All tumours in the presence of HIV infection.

3. Stroke

A loss of blood supply to the brain tissue, due to obstruction or haemorrhaging in a cerebral vessel, which results in permanent neurological deficit. This diagnosis must be supported by appropriate clinical investigations.

Infarction of brain tissue or intracranial bleeding as a result of external injury is specifically excluded. Transient ischaemic attacks are also excluded.

4. Coronary artery by-pass graft surgery (CABG)

The undergoing of open-heart surgery to correct the narrowing or blockage of the main left coronary artery or two or more coronary arteries with bypass grafts. Angiographic evidence of significant coronary artery obstruction must be provided and the procedure must be considered medically necessary by a consultant cardiologist.

Angioplasty and all other intra-vascular, or laser procedures are excluded.

5. Kidney failure

End stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which regular renal dialysis is undertaken. Evidence of end stage kidney disease must be provided and the requirement for dialysis must be confirmed by a consultant physician.

6. Major organ transplant

The undergoing of a transplant of the heart, lung, liver, kidney, pancreas or bone marrow as a recipient. The transplant must be medically necessary and based on objective confirmation of organ failure.

7. Paralysis

The total loss of function of two or more limbs due to injury or disease of the spinal cord or brain, where such functional loss is considered to be permanent by a neurologist.

8. Loss of limbs

The loss of two or more limbs due to injury or disease. This includes the loss of both hands or both feet or one hand and one foot.

9. Aorta surgery

The undergoing of surgery (including key-hole type surgery) for a disease or injury of the thoracic or abdominal aorta requiring excision and surgical replacement of the diseased part of the aorta with a graft. Surgery must be on the advice of an appropriate consultant and supported by investigations.

Excludes surgery to branches of the aorta.

10. Major burns

Third degree burns covering at least 20% of the body surface. The extent of the burns must be confirmed by an appropriate consultant.

11. Heart valve surgery

The undergoing of open or endoscopic heart valve surgery, performed to replace or repair one or more heart valves, as a consequence of defects that cannot be repaired by intra-vascular procedures alone. The surgery must be considered medically necessary by a consultant cardiologist and supported by investigations.

12. Blindness

Irreversible industrial blindness in both eyes as a result of illness or accident. Industrial blindness is defined as corrected vision of less than 20/200 and must be certified by an ophthalmologist's report.

The blindness must not be correctable by medical or surgical procedures.