

HDFC STANDARD LIFE INSURANCE COMPANY LIMITED

Additional Policy Provisions

Critical Illness benefit

This booklet is numbered _____

1. Benefits

If the Scheme Member becomes critically ill by suffering one of the illnesses defined below, an amount as specified in the schedule shall be payable by the Insurer to the Policy Holder for the Benefit of that Scheme Member.

The maximum amount payable in respect of this benefit is Rs 50,00,000.

The Insurer will pay the critical illness benefit only if all of the following are satisfied:

- all due premiums have been paid
- the critical illness benefit commenced prior to, and has not terminated prior to, the date of diagnosis of the critical illness
- the Scheme Member has not already received any benefit in respect of critical illness
- the Scheme Member has survived at least 30 days following notification to the Insurer of the critical illness
- the critical illness has not occurred within 3 months of the date of the Scheme Member first being covered for critical illness benefit (assuming an unbroken period of cover). If the cover period is broken then the 3 month period applies from the date critical illness cover recommences in respect of the Scheme Member
- the Policy Holder files a claim with the Insurer in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the Insurer within 3 months of the illness, disability, operation or other circumstance giving rise to the claim
- the Policy Holder produces to the Insurer satisfactory proof from a practising consultant physician that the Scheme Member has suffered a critical illness as defined below. The consultant physician's specialism must be appropriate to the cause of the claim and be accepted by our Chief Medical Officer.

2. Critical Illnesses

The Critical Illnesses which are covered are:

(a) Cancer

A malignant tumor characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. **The term cancer includes leukemia but the following cancers are excluded:**

All tumors which are histologically described as pre-malignant, non-invasive or carcinoma in situ;

All forms of lymphoma in the presence of HIV;

Kaposi's Sarcoma in the presence of any HIV;

Any skin cancer other than invasive malignant melanoma; and

Early prostate cancer which is histologically described as T1 (including T1a and T1b) or another equivalent or lesser classification.

(b) Coronary Artery Bypass Graft Surgery (CABGS)

The undergoing of open heart surgery on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

Angiographic evidence to support the necessity of the surgery will be required.

Balloon angioplasty, laser or any catheter-based procedures are not covered.

(c) Heart Attack

The death of a portion of heart muscle as a result of an inadequate blood supply as evidenced by an episode of typical chest pain, new electrocardiographic changes and by elevation of the cardiac enzymes.

(d) Kidney Failure

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

(e) Major Organ Transplant

The actual undergoing as a recipient of a transplant of a heart, liver, lung, pancreas or bone marrow as a result of chronic irreversible failure. Evidence of end stage disease must be provided and the requirement for transplantation must be confirmed.

(f) Stroke

A cerebrovascular incident resulting in permanent neurological damage. **Transient ischaemic attacks are specifically excluded.**

3. Medical Evidence

The Insurer may request the Scheme Member to undertake a medical examination or test, which in its opinion, is reasonable to determine the critical illness. The Insurer will not accept a claim if the Scheme Member does not undertake any medical examination or test which the Insurer considers reasonable or necessary. The Insurer will not pay for any fees or expenses in connection with the production of medical evidence except for the fees and expenses for any medical examination or test which the Insurer has asked a medical practitioner to provide.

4. Termination of the rider benefit

The critical illness benefit on the life of a Scheme Member shall immediately terminate upon the happening of any of the following events and no benefits will be payable thereafter:

- (a) non-payment of the Premium by the Policy Holder before the start of the Policy Year, OR
- (b) the Scheme Member reaching the Terminal Date, OR
- (c) on the admittance of a critical illness claim in respect of the Scheme Member.

5. Lapsing

- (1) No amount of benefit under this rider shall be payable on diagnosis of a critical illness on or after the Lapsing Date.
- (2) However, the same may be reinstated as provided under L12.

6. Exclusions

- (a) **No benefit shall be payable, in respect of any claim arising within two years of a Scheme Member first being covered for critical illness benefit (assuming an unbroken period of cover), which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at entry.**

If the cover period is broken then no benefit shall be payable, in respect of any claim arising within two years from the date critical illness cover recommences for a Scheme Member, which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at re-commencement.

- (b) **No Critical Illness Benefit is payable if the illness is caused directly or indirectly by any of the following:**

- **Intentionally self-inflicted injury or attempted suicide, irrespective of mental condition.**
- **Alcohol or solvent abuse, or the taking of drugs except under the direction of a registered medical practitioner.**
- **War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.**
- **Taking part in any flying activity, other than as a passenger in a commercially licensed aircraft.**
- **Taking part in any act of a criminal nature.**
- **Pregnancy or childbirth or complications arising therefrom.**

ADDITIONS TO THE RULES OF----- GROUP TERM INSURANCE SCHEME

CRITICAL ILLNESS BENEFIT

1. BENEFITS

If the Scheme Member becomes critically ill by suffering one of the illnesses defined below, an amount as specified in the schedule shall be payable by the Insurer to the Policy Holder for the Benefit of that Scheme Member.

The maximum amount payable in respect of this benefit is Rs 50,00,000.

The Scheme Member must be alive for at least 30 days from the date of notification of the critical illness.

The Policy Holder must produce to the Insurer satisfactory proof from a practising consultant physician that the Scheme Member has suffered a critical illness as defined below. The consultant physician's specialism must be appropriate to the cause of the claim and be accepted by our Chief Medical Officer.

2. CRITICAL ILLNESSES

The Critical Illnesses which are covered are:

(a) Cancer

A malignant tumor characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. **The term cancer includes leukemia but the following cancers are excluded:**

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Early prostate cancer which is histologically described as T1 (including T1a and T1b) or another equivalent or lesser classification.

(b) Coronary Artery Bypass Graft Surgery (CABGS)

The undergoing of open heart surgery on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

Angiographic evidence to support the necessity of the surgery will be required.

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(f) Stroke

A cerebrovascular incident resulting in permanent neurological damage. **Transient ischaemic attacks are specifically excluded.**

3. TERMINATION OF THE RIDER BENEFIT

The critical illness benefit on the life of a Scheme Member shall immediately terminate upon the happening of any of the following events and no benefits will be payable thereafter:

- (a) non-payment of the Premium by the Policy Holder before the start of the Policy Year, OR
- (b) the Scheme Member reaching the Terminal Date, OR
- (c) on admittance of a critical illness claim in respect of the Scheme Member.

4. CLAIMS

The Policy holder shall inform the Insurer and shall file a claim with the Insurer on behalf of the Scheme Member in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the insurer, within 3 months from the date of the diagnosis.

The Insurer shall pay the claim amount in the name of the Scheme Member to the Policy Holder who shall give a valid discharge/ receipt for the same on behalf of the said Scheme Member to the Insurer.

5. EXCLUSIONS

- (a) No benefit shall be payable, in respect of any claim arising within two years of a Scheme Member first being covered for critical illness benefit (assuming an unbroken period of cover), which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at entry.**

If the cover period is broken then no benefit shall be payable, in respect of any claim arising within two years from the date critical illness cover recommences for a Scheme Member, which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at re-commencement.

(b) No Critical Illness Benefit is payable if the illness is caused directly or indirectly by any of the following:

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- **Alcohol or solvent abuse, or the taking of drugs except under the direction of a registered medical practitioner.**
- **War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.**
- **Taking part in any flying activity, other than as a passenger in a commercially licensed aircraft.**
- **Taking part in any act of a criminal nature.**
- **Pregnancy or childbirth or complications arising therefrom.**

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