

CRITICAL ILLNESS RIDER

Article 1 General Provisions

- 1.1 These Special Terms and Conditions apply to the Policy only if this Rider has been effected as specified in the Schedule.
- 1.2 This Rider will only be effective if a Permanent Total Disability Rider is effected simultaneously.
- 1.3 This Rider is further governed by the relevant Standard Terms & Conditions applicable to the Base Plan.

Article 2 Insured

- 2.1 A person or persons in the case of joint life whose life is the object of this Rider as shown in the Schedule.

Article 3 Critical Illness Benefit

- 3.1 Upon the happening of a Covered Event under Article 9 below, the Company will make payment as provided for under Article 3.2 if all the following conditions precedent to its liability are fulfilled:
 - a) The Company receives proof, satisfactory to the Company, that one of the Covered Events given in Article 9, including the conditions stated therein, first occurred in the period starting six months after the Rider commencement and ending upon termination of the Rider.
 - b) The Covered Event is notified to the Company by the Policyholder or the Insured within one month of its diagnosis.
 - c) The Company is provided with satisfactory proof of age before benefit is paid.
 - d) At the request of the Company, the Insured is examined by a medical practitioner appointed by the Company; the Policyholder shall furnish at his/her own expense all evidence that the Company may require; the Company may require the Insured to sign any necessary consent form to allow the Company to receive the results of any medical examinations and/or tests. Failure to provide the necessary consent, or the refusal of the Insured to undergo such an investigation, will result in the immediate cancellation of this Rider. In this event there will be no refund of any charges made in respect of this benefit.
- 3.2 In the event of an accepted claim under this Rider, the Company will be liable to pay no more than the value as at the date of the Covered Event of Accumulation Units accruing from the payment of any Top Up Premium (if any), and, provided Regular Premium has been paid, the greater of:
 - 3.2.1 the Sum Assured subject to a maximum of Rs.2,000,000 (the "Rider Sum Assured", as the same may be increased pursuant to the provisions of Article 4 below), and
 - 3.2.2 the Fund Value (excluding any Accumulation Units accruing from the payment of any Top Up Premium) as at the date of the Covered Event.
- 3.3 If the Insured dies before the payment of a benefit under this Rider, then the Company shall only make payment as provided for under the Base Plan.
- 3.4 The Policy and all Riders will terminate on the happening of a Covered Event under Article 9.
- 3.5 The right to the payment of benefit under this Rider will begin six months after the commencement of the Critical Illness Rider. The right to the benefit will only arise if one of the Covered Events given in Article 9 occurs during the period starting six months after the Rider commencement date and ending on the termination date of the Rider.
- 3.6 If the Covered Event occurs within the first six months of the Rider commencement, the Company will not pay any benefit under this Rider and the Rider will be terminated. In this event, the Company will increase value of Units fund in the Unit Account in respect of Regular Premium by the value of Units deducted in accordance with Article 5 below. The Sum Assured for the Policy will remain unchanged.
- 3.7 The Company is entitled to reduce the benefit under this Rider by any payment which is made by the Company in respect of the Base Plan after the Covered Event and before the claim notification. This does not apply to partial withdrawals from Units held in the Unit Account in respect of Top Up Premiums.

Article 4 Indexation

- 4.1 The Rider Sum Assured will be indexed at each Anniversary simultaneously and in accordance with any increase of the Sum Assured.

Article 5 Charge for Rider

- 5.1 The charge in respect of this Rider, as determined by the Company, is included in the Regular Premium.
- 5.2 The charge for covering the risk under the Rider is made through deduction from the Policy's Accumulation Unit Account in respect of Regular Premium by cancelling the appropriate number of Units at their Unit Price with the same frequency as applied for the deduction of charge for the Policy.

Article 6 Duration of the Rider

- 6.1 The Rider terminates at the earlier of the Anniversary at which Insured in the case of single life or older Insured in the case of joint life attains Age 60 or the end of the Policy Term.
- 6.2 The Rider terminates if cancelled by the Policyholder. The Rider will be terminated on the next following Anniversary subject to the condition that the written request is received by the Company 30 days prior to the Anniversary.
- 6.3 The Rider terminates if the Policy is terminated for any reason.
- 6.4 If this Rider terminates or is cancelled then the Permanent Total Disability Rider will terminate simultaneously.

Article 7 Residence

- 7.1 It is a condition precedent to the Company's liability that the Policyholder or the Insured must inform the Company in writing immediately if the Insured takes up permanent residence outside India, or of any period of temporary residence outside India for a continuous period exceeding three months. The Company may in its sole and absolute discretion revise or cancel the terms of this Rider if it considers the new country of residence to be more hazardous than that stated in the proposal or previously notified under this condition. If the Company is not notified of such change no benefit shall be payable in the event of Critical Illness. In this event there will be no refund of any charges made in respect of this Rider.

Article 8 Exclusions

- 8.1 No benefit will be payable if the Covered Event is directly or indirectly caused by or aggravated by or related to:
- i) Alcohol or drug abuse including drug taking other than prescribed by a registered and qualified medical practitioner, any crime or attempted crime committed by the Insured, wilful self inflicted injury, attempted suicide or unreasonable failure to seek or follow medical advice.
 - ii) Failure to seek and follow medical treatment and advice from a registered and qualified medical practitioner immediately following an accident.
 - iii) Engaging in racing of any kind other than athletics or swimming.
 - iv) Any form of war, invasion, hostilities (whether war be declared or not), civil war, rebellion, riots, social disorder, insurrection, military or usurped power, or wilful participation in acts of violence.
 - v) Radioactive contamination due to a nuclear accident.
 - vi) Any mental or functional disorder.
 - vii) Participation in sports or pastimes of a hazardous nature including (but not limited to) parachuting, potholing, mountaineering and hot air ballooning.
 - viii) Any condition existing prior to the Commencement Date except as stated in the Schedule.
 - ix) Human Immunodeficiency Virus (HIV) or variants including Acquired Immune Deficiency Syndrome (AIDS).

Article 9 Covered Events - Critical Illness Definitions

A Covered Event occurs when the Insured in the case of single life or one of the Insureds in the case of joint life is diagnosed as having one of the Critical Illnesses defined below, or at the moment when one of the surgical operations listed below has been performed. In addition to the criteria below having been fulfilled, the diagnosis, with supporting documentation, must have been recorded in the Insured's medical records held by the medical centre in which the diagnosis was made, or by the examining registered and qualified medical practitioner who holds an appointment as a specialist consultant.

- 9.1 Heart Attack
Heart Attack is the death of a portion of the heart muscle as a result of abrupt interruption of adequate blood supply to the area. The diagnosis must be evidenced by all of the following criteria:
- a) A history of typical chest pain
 - b) New electrocardiography changes in keeping with recent symptomatology and laboratory verification of acute myocardial infarction
 - c) An elevation in cardiac enzyme levels (CK level two times higher than the upper range of normal limit, accompanied by either the elevation of CK-MB, AST and LDH, or the elevation of troponin) The Covered Event occurs at the moment when all of the above stated criteria have been evidenced, and the diagnosis with supporting documentation duly recorded in the Assured's medical records held by the medical centre or by the examining medical practitioner.
- 9.1.1 "Medical Center" means any institution in India established for indoor care and treatment of sickness and injuries and which has been registered as a hospital or a nursing home with the local authorities is under the constant supervision of a registered and qualified medical practitioner, and must meet all the following criteria :-
- 9.1.1.1 It remains open at all times.
 - 9.1.1.2 It is a place with at least 15 in-patient beds.
 - 9.1.1.3 It has fully equipped and maintained surgical operation theatre of its own wherever Surgical operations are carried out.
 - 9.1.1.4 It is a place which has fully qualified nursing staff under its employment round the clock.
 - 9.1.1.5 It is a place with fully qualified doctor(s) in-charge round the clock.
 - 9.1.1.6 It is a place which maintains a daily medical record for each patient which is accessible to the Chief Medical Officer of the Company.
 - 9.1.1.7 It shall not include an establishment which is a rest home, convalescent home, home for the aged, rehabilitation facility, place for the drug-addicts or alcoholics, place for the treatment of mental disorders or such similar establishment.
- 9.1.2 "Examining medical practitioner/Consultant Physician " means a medical practitioner who holds a medical degree from a recognized institution and is registered by the Medical Council of the respective state of India, specialised in the area of expertise and who is the treating consultant physician of the applicant for the related disease or ailment which is being covered by Policy. It does not include a medical practitioner who:
- 9.1.2.1 is a close relative of the Insured or
 - 9.1.2.2 resides in the Insured person's home or
 - 9.1.2.3 is the Insured himself or
 - 9.1.2.4 is an agent of the Insured.
- 9.2 Stroke
Any cerebrovascular incident producing neurological sequelae lasting more than 24 hours plus evidence of permanent neurological deficit as determined 6 weeks after the event including:
- a) Infarction of brain tissue
 - b) Haemorrhage from an intracranial vessel
 - c) Embolisation from an extracranial source
- The diagnosis must be supported by new changes on a CT or MRI scan.
The Covered Event occurs at the moment when evidence of permanent neurological damage has been confirmed by a neurologist at the earliest 6 weeks after the first diagnosis of stroke, and no claims can be admitted earlier. Cerebral symptoms due to migraine, cerebral injury resulting from trauma or hypoxia, and vascular disease affecting the eye or optic nerve as well as ischaemic disorders of the vestibular system are excluded.
- 9.3 Cancer
Cancer is the presence of uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. Incontrovertible evidence of the invasion of tissue, or definite histology must be produced. The term "Cancer" also includes leukaemia (other than chronic lymphatic leukaemia), lymphomas and Hodgkin's Disease.
Excluded are:

- a) Tumours showing the malignant changes of carcinoma in situ (including cervical dysplasia CIN-1, CIN-2, and CIN-3) or which are histologically described as premalignant.
- b) Melanomas of less than 1.5 mm maximum thickness as determined by histological examination or less than Clark Level 3 depth of invasion
- c) All hyperkeratoses or basal cell carcinomas of the skin
- d) All squamous cell carcinomas of the skin unless there has been a spread to other organs
- e) Kaposi's Sarcoma and other tumours associated with HIV infection or AIDS
- f) Prostatic cancers which are histologically described as TNM classification T1 (including T1(a) or T1(b) or are of another equivalent or lesser classification).

9.4 End-Stage Kidney Failure

End stage renal failure due to chronic irreversible failure of both kidneys to function. This must be evidenced by the Insured undergoing regular renal dialysis for more than three months. The Covered Event occurs when the last day of these three months has elapsed.

9.5 Major Organ Transplant

The actual undergoing as a recipient of a transplant of heart (transplantation of the complete heart), lung, liver, kidney 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 by a consultant physician where "Consultant Physician" has the meaning as defined in Article 9.1.2.

9.6 Coronary Artery Bypass Surgery

Open heart surgery to correct narrowing or blockage of two or more coronary arteries by the use of saphenous vein grafts or internal mammary grafting, but excluding all non-surgical procedures such as angioplasty or laser techniques. Angiographic evidence of the underlying disease must be provided.

9.7 Blindness

Total, clinically certified, irreversible loss of sight in both eyes as a result of acute illness, but not as a result of accidental injury. The blindness must be certified by an ophthalmologist's report.

9.8 Deafness

Total, irreversible loss of hearing for a continuous period of twelve months for all sounds in both ears as a result of acute illness, but not as a result of accidental injury. Medical evidence in the form of audiometric and sound threshold tests must be provided.

9.9 Benign Brain Tumour

Life threatening, non-cancerous tumour in the brain as confirmed by a neurologist or neurosurgeon. This includes intracranial tumours causing damage to the brain. Tumours must be deemed to require neurosurgery, or if inoperable cause permanent neurological deficit. Cysts, granulomas, malformations in or of the arteries or veins of the brain, haematomas and tumours in the pituitary gland or spine are excluded. The Covered Event occurs when the neurosurgery has been performed, or at the moment the diagnosis of inoperability and permanent neurological deficit has been recorded in the Insured's medical records held by the medical centre or the examining medical practitioner as specified in Article 9.1.1 and Article 9.1.2

9.10 Terminal Illness

Any incurable disease process which in the opinion of the examining medical practitioner holding an appointment as a specialist consultant is very likely to lead to death within 12 months of the Company receiving notification of the Claim. This medical opinion must be confirmed by the Company's Chief Medical Officer. The Insured has to prove to be HIV negative if requested by the Company.

Article 10 Changes to the Special Terms and Conditions

- 10.1 The Company reserves the right to change these Special Terms and Conditions and the benefits conferred by the Rider if there is a change in the law, legislation or taxation affecting the Company or the main Policy, or if there is a change in circumstances which makes it impossible or impracticable for the Company to follow these Special Terms and Conditions.
- 10.2 None of these Special Terms and Conditions may be waived or modified except by endorsement issued by the Company and signed by an authorised official thereof, except where otherwise stated in the Standard Terms and Conditions.
- 10.3 The Company will notify the Policyholder about any changes to these Special Terms and Conditions and the benefits within four weeks from the date of the change. If the Policyholder does not agree with the change and does not so notify the Company within four weeks after the Company has sent notification thereof then he shall be deemed to have accepted the change.

PERMANENT TOTAL DISABILITY RIDER

Article 1 General Provisions

- 1.1 These Special Terms and Conditions apply to the Policy only if this Rider has been effected as specified in the Schedule.
- 1.2 This Rider will only be effective if a Critical Illness Rider is effected simultaneously.
- 1.3 This Policy is further governed by the relevant Standard Terms & Conditions applicable to the Base Plan.

Article 2 Insured

- 2.1 A person or persons in the case of joint life whose life is the object of this Rider as shown in the Schedule.

Article 3 Definition

- 3.1 Permanent Total Disability (PTD) shall mean the Insured's permanent and total incapacity due to accidental bodily injury or illness which, in the opinion of the Company, is such as to prevent the Insured totally at the time of the claim being made from engaging in or being employed for remuneration or profit in any occupation at any time in future.

Article 4 Benefits

- 4.1 Entitlement to this benefit will arise when the Company receives satisfactory proof that the Insured in the case of single life or any one of the Insured in the case of joint life has suffered PTD which commenced within the duration of the Rider and which has lasted for a continuous period of 12 months.
- 4.2 In the case of joint life the benefit will be paid in respect of one Insured only on first reported and admitted claim basis.
- 4.3 In the event of an accepted claim under this Rider, the Company will be liable to pay no more than the value as at the date of the PTD of Accumulation Units accruing from the payment of any Top Up Premium (if any), and, provided Regular Premium has been paid, the greater of:
 - 4.3.1 the Sum Assured subject to a maximum of Rs.2,000,000 (the "Rider Sum Assured", as the same may be increased pursuant to the provisions of Article 5 below), and
 - 4.3.2 the Policy Value (excluding any Accumulation Units accruing from the payment of any Top Up Premium) as at the date of the PTD.
- 4.4 The Policy and all riders will terminate on the occurrence of the PTD. If the Insured dies before the payment of a benefit under this Rider, then the Company shall only make payment as provided for under the Base Plan.
- 4.5 The right to the PTD benefit will begin six months after the commencement of the PTD Rider.
- 4.6 If the PTD occurs within the first six months of the Rider Commencement, the Company will not pay any PTD benefit and the Rider will be terminated. In this event, the Company will increase the value of Units fund in the Unit Account in respect of Regular Premium by the value of Units deducted in accordance with Article 6 below. The Sum Assured will remain unchanged.
- 4.7 The Company is entitled to reduce the benefit under this Rider by any payment which is made by the Company in respect of the Base Plan after the occurrence of an insured event under this Rider and before the claim notification. This does not apply to partial withdrawals from Units held in the Unit Account in respect of Top Up Premiums.

Article 5 Indexation

- 5.1 The Rider Sum Insured will be indexed at each Anniversary simultaneously and in accordance with any increase of the Sum Insured.

Article 6 Charge for Rider

- 6.1 The charge in respect of this Rider, as determined by the Company, is made through deduction from the Policy's Accumulation Unit Account in respect of Regular Premium by cancelling the appropriate number of Units at their Unit Price with the same frequency as applied to the deduction of charge for the Policy.

Article 7 Duration of the Rider

- 7.1 The Rider terminates at the end of the Policy Term of the Base Plan as defined in the Standard Terms and Conditions or at the policy anniversary at which the Insured in the case of single life or older Insured in the case of joint life attains Age 60 whichever is earlier.
- 7.2 The Rider terminates if cancelled by the Policyholder. The Rider will be terminated on the next following Anniversary subject to the condition that the written request is received by the Company 30 days prior to the Anniversary.
- 7.3 The Rider terminates if the Policy is terminated or cancelled for any reason.
- 7.4 If this Rider terminates then any Critical Illness Rider will terminate simultaneously.

Article 8 Change of Occupation

- 8.1 It is a condition precedent to the Company's liability that the Policyholder or the Insured must inform the Company in writing immediately if the Insured changes occupation or engages in any additional occupation. The Company reserves the right to terminate this Rider if it considers the new or additional occupation to be more hazardous than that stated in the proposal or previously notified under this condition. If the Company is not notified of such change no benefit shall be payable in the event of PTD. In this event there will be no refund of any charges made in respect of this benefit.

Article 9 Residence

- 9.1 It is a condition precedent to the liability of the Company that the Policyholder or the Insured must inform the Company in writing immediately if the Insured takes up permanent residence outside India, or of any period of temporary residence outside India for a continuous period exceeding three months. If so informed, the Company may in its sole and absolute discretion revise or cancel the terms of this Rider if it considers the new country of residence to be more hazardous than that stated in the Proposal or previously notified under this condition. If the Company is not notified of such change no benefit shall be payable in the event of PTD. In this event there will be no refund of any charges made in respect of this benefit.

Article 10 Claim Procedure

- 10.1 It is a condition precedent to the liability of the Company that written notice of a claim must be received by the Company within three months after a twelve-month period of PTD has elapsed. Before any claim is admitted, accidental bodily injury or illness resulting in PTD shall be proved to the satisfaction of the Company, which reserves the right to require the Insured to be examined by a registered and qualified medical practitioner appointed by the Company. The Policyholder shall furnish at his own expense all evidence that the Company may require. The Company may require the Insured to sign any necessary consent form to allow the Company to receive the results of any medical examinations and/or tests. Failure to provide the necessary consent will result in the immediate cancellation of this Rider. In this event there will be no refund of any charges made in respect of this benefit.
- 10.2 The Company reserves the right to require proof of age before benefit is paid.

Article 11 Exclusions

- 11.1 No benefit will be payable if the PTD is directly or indirectly caused by or aggravated by or related to:
- i) Alcohol or drug abuse including drug taking other than prescribed by a medical practitioner, any crime committed by the Insured, wilful self inflicted injury, attempted suicide or unreasonable failure to seek or follow medical advice.
 - ii) Failure to seek and follow medical treatment and advice from a registered and qualified medical practitioner immediately following an accident.
 - iii) Aviation other than as a passenger in a commercial licensed passenger aircraft.
 - iv) Engaging in racing of any kind other than athletics or swimming.
 - v) Any form of war, invasion, hostilities (whether war be declared or not), civil war, rebellion, riots, social disorder, nsurrection, military or usurped power, or wilful participation in acts of violence.
 - vi) Radioactive contamination due to a nuclear accident.
 - vii) Any mental or functional disorder.
 - viii) Participation in sports or pastimes of a hazardous nature including (but not limited to) parachuting, potholing, mountaineering and hot air ballooning.
 - ix) Any condition existing prior to the Commencement Date except as stated in the Schedule.
 - x) Human Immunodeficiency Virus (HIV) or variants (including Acquired Immune Deficiency Syndrome (AIDS)).
- 11.2 No benefit will be payable during the first 12 months of continuous PTD.

Article 12 Changes to the Special Terms and Conditions

- 12.1 The Company reserves the right to change these Special Terms and Conditions and the benefits conferred by the Rider if there is a change in the law, legislation or taxation affecting the Company or the main Policy, or if there is a change in circumstances which makes it impossible or impracticable for the Company to follow these Special Terms and Conditions.
- 12.2 None of these Special Terms and Conditions may be waived or modified except by endorsement issued by the Company and signed by an authorised official thereof, except where otherwise stated in the Standard Terms and Conditions.
- 12.3 The Company will notify the Policyholder about any changes to these Special Terms and Conditions and the benefits within four weeks from the date of the change. If the Policyholder does not agree with the change and does not so notify the Company within four weeks after the Company has sent notification thereof, he will be deemed to have accepted the change.