POLICY DOCUMENT

This Policy Document should be read in conjunction with the Policy Document of the base Policy.

1. Definitions:

The following terms shall have the meaning assigned to them as below. The singular includes the prural and references to the male include the female where the context so permits:

- i. "Critical Illness" means First Heart Attack, Coronary Artery Disease (requiring Surgery), Stroke, Cancer, Kidney Failure, Major Organ Transplant, Multiple Sclerosis, Aorta Graft Surgery, Primary Pulmonary Hypertension, Alzheimer's disease, and Paralysis; the definitions of which are mentioned in Section 4.
- ii. "Life Assured" means the person named in the Schedule whose life is insured to receive the Rider Benefit as per Section 3.
- iii. "Rider" means this Health Critical Illness Rider
- iv. "Rider Sum Assured" means the amount as specified in the Schedule, which shall be payable to the Policyholder as per Section 3 upon diagnosis of any of the Critical Illness on the life of Life Assured.

2. Rider Benefit

- i. Subject to Section 4, 5, 6, 8 and 9 and Sub-Section ii., a lump sum benefit equal to the Rider Sum Assured shall be payable on diagnosis of any of the Critical Illness on the life of Life Assured.
- ii. If the Life Assured dies within 60 days of diagnosis of any of the Critical Illness for which Rider Benefit under Sub-Section i. has become payable then the death benefit, if any, under the base Policy will be payable after the deduction of the Rider Sum Assured.
- iii. The Company will not be liable to make any benefit payment on death of the Life Assured or on maturity of this Rider.

3. Definitions of Critical Illnesses

i. First Heart Attack

The death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis should be based on all of the following and must be confirmed by a consultant cardiologist:

- Confirmatory new and recent electrocardiogram (ECG) changes indicating myocardial infraction;
- Diagnostic elevation of cardiac enzymes CK-MB, Troponin I, Troponin T or other biochemical markers above standard laboratory levels of normal; and
- Left ventricular ejection fraction of less than 50% measured 3 months or more after the event.

Diagnosis based on the elevation of Troponin T alone shall not be considered diagnostic of a heart attack.

Angina or chest pain are specifically excluded.

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ii. Coronary Artery Disease Requiring Surgery

The undergoing of open chest surgery to correct narrowing or blockage of left main coronary artery or three or more other coronary arteries with the use of bypass graft(s) in persons with limiting anginal symptoms and compromise of blood supply supported by appropriate cardiac investigations. The realisation of the surgery must be confirmed by a consultant cardiologist. Narrowing of the affected artery should be more than 75 % (seventy five percent).

Angioplasty and all other intra-arterial techniques and laser and "keyhole" procedures are excluded.

iii. Stroke

Any cerebrovascular accident or event resulting in permanent neurological deficit lasting for more than six consecutive months. There must be evidence of infarction of brain tissue, intracranial or subarachnoid haemorrhage or embolisation from an extracranial source on a CT, MRI or similar scan. The diagnosis must be certified by a recognized consultant neurologist holding an appointment in this capacity with a major hospital.

The following are excluded:

- Transient ischaemic attacks:
- Cerebral symptoms associated with reversible neurological deficit;
- Symptoms due to migraine or headache;
- Vascular disease affecting the, optic nerve or vestibular functions;
- Brain tissue damage caused by head injury.

iv. Cancer

The presence of one or more malignant tumours including characterized by the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue. The diagnosis must be confirmed by pathology tests and certified by recognized consultant oncologist. Also included Hodgkin's disease, lymphoma & Leukaemia other than chronic lymphocytic leukaemia.

The following are excluded: -

- Tumours that are histologically described as micro-carcinoma pre-malignant or showing the malignant changes of carcinoma in situ including cervical dysplacia CIN1, CIN2 or CIN 3 or Ductal carcinoma in situ of the breast.
- All skin cancers except Melanomas of 1.5 millimeters or more in thickness or Clark Level 3 or more depth of invasion, unless there is evidence of metastases;
- Kaposi's sarcoma or any other tumours associated with HIV infections or AIDS; and
- Papillary carcinoma of the bladder and Prostatic tumours histologically described as TNM Classification T1(includingT1a, T1b, T1c) or of another equivalent or lesser classification.

v. <u>Kidney Failure</u>

End stage renal disease characterized by of chronic irreversible failure of kidneys that requires permanent dialysis or renal transplantation.

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vi. Major Organ Transplantation

The medically necessary human-to-human organ transplant from a donor to the life insured of one or more of the following organs:

- Heart
- Lung
- Liver
- Kidney
- Pancreas (excluding the transplantation of the islets of Langerhans only)

Or

Bone marrow.

vii. Multiple Sclerosis

Unequivocal diagnosis by a recognized consultant neurologist holding an appointment in this capacity in a major hospital. The following combination, which has persisted for at least a continuous period of six (6) months: -

- Symptoms referable to tracts (white matter) involving the optic nerves, brain stem and spinal cord, producing well-defined neurological deficits;
- A multiplicity of discrete lesions; and
- A well-documented history of exacerbation and remissions of said symptoms/neurological deficits.
- Confirmed by modern investigational techniques.

viii. **Aorta Surgery**

The undergoing of surgery to correct any narrowing, dissection, obstruction or aneurysm of the thoracic or abdominal aorta, but not its branches.

The surgery must be considered medically necessary by a recognized consultant cardiologist and must be the most appropriate treatment.

All minimally invasive procedures such as keyhole, catheter, laser, angioplasty or other intra-arterial techniques are excluded.

Narrowing of Aorta of congenital and traumatic injury of the aorta is excluded.

Primary Pulmonary Hypertension

Means primary pulmonary hypertension associated with right ventricular enlargement established by cardiac catheterization, resulting in significant permanent physical impairment to the degree of at least class 3 of the NEW YORK Heart Association Classification of cardiac impairment and resulting in the Life Insured being unable to perform his/her usual occupation. The condition must be documented for at least three months.

x. <u>Alzheimer's Disease</u>

Means the unequivocal diagnosis of Alzheimer's disease made by a recognized consultant neurologist holding an appointment in this capacity at a major hospital and supported by clinical evidence and standardized testing. The diagnosis must confirm permanent failure of brain function resulting in significant cognitive impairment.

Significant cognitive impairment is defined as a deterioration or loss of intellectual capacity to the extent that it results in the requirement for continual supervision.

Alzheimer's disease resulting from the following is excluded:

- · Alcohol or drug abuse; and
- Non-organic diseases such as neurosis or psychiatric illness.

xi. Paralysis

Means the total and permanent loss of use of two or more limbs caused by illness and persisting for at least six consecutive months from the original date of diagnosis other than caused due to Guillian-Barre' Syndrome.

The diagnosis must be certified by a recognized consultant neurologist holding an appointment in this capacity at a major hospital.

4. Waiting Period

The Company will not be liable to make any payment under Section 3 for any Critical Illness, which existed at, or diagnosed within, six (6) months of the Policy Commencement Date or date of Revival.

5. Exclusions:

No payment under Section 3 will be payable if Critical Illness on the life of Life Assured is directly or indirectly caused by, related to, or arises from:

- i. Committing any breach of law;
- ii. Being under the influence of alcohol or drugs other than prescribed by and taken in accordance with the directions of a registered medical practitioner;
- iii. Self-inflicted injuries whilst sane or insane;
- iv. Participation in any naval, military or air force operation;
- v. Participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- vi. Participation in aviation, gliding or any form of aerial flight other than as a fare paying passenger of a recognized airline on regular routes and on a scheduled timetable;
- vii. Failure to seek or follow medical advice;
- viii. War, invasion, civil war, rebellion, riot.
 - ix. AIDS, any AIDS related illness or HIV infection;
 - x. Critical Illness, which existed at, or diagnosed within, six (6) months of the Policy Commencement Date or date of Revival.

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6. Grace Period, Lapse & Revival

- i. The grace period, lapse and revival of this Rider will be governed by the terms and conditions of the base Policy.
- ii. If the Life Assured is diagnosed of any of the Critical Illness during the grace period, the Rider would be treated as inforce and the Company shall be liable to make payment as per Section 3 after deducting all due but unpaid premiums.
- iii. The Company will not be liable to make any payment under Section 3 if Critical Illness on the life of Life Assured was diagnosed or occurred during the period the Policy was in lapse status.

7. Options

a. Renewal Of Policy

- i. The Policyholder has the option to renew the Rider within 30 days after the expiry of the previous Policy Term at the premium rates (if any) and terms and conditions prevailing at the time of renewal of the Policy provided the base Policy is renewed. The Company is not bound to give notice to the Policyholder that it is due for renewal, or to renew it.
- ii. If the proposed Rider Sum Assured for renewal is more than the Rider Sum Assured of previous Policy, the renewal of Rider would be subject to the Life Assured satisfying the underwriting requirements of the Company. The Company shall have the right to refuse such increase in Rider Sum Assured on renewal.
- iii. The Policyholder's right to renew this Rider will expire at the end of 30 days after the expiry of the previous Policy Term

b. Option to Reduce the Rider Sum Assured

The Policyholder has the option to reduce the Rider Sum Assured at any Policy Anniversary by giving written notice to the Company at least 30 days before the Policy Anniversary. Once reduced, the Rider Sum Assured will not be increased again.

c. Option to Remove the Rider

The Policyholder has the option to remove the Rider at any Policy Anniversary by giving written notice to the Company at least 30 days before the Policy Anniversary. Once removed, the Rider cannot be added or opted again.

8. Claims Information & Documentation

The payment under Section 3 will be subject to following conditions:

- i. Diagnosis of Critical Illness is intimated to the Company within 30 days of diagnosis
- ii. Diagnosis of Critical Illness is confirmed by a registered medical practitioner/Doctor appointed by the Company and must be supported by acceptable clinical, radiological, histological and laboratory evidence

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9. Termination of Rider

The Rider cover on the Life Assured shall automatically terminate on the earlier occurrence of either of the following events:

- If the Life Assured opts out of the Rider option once.
- On the Policy Anniversary in which the Life Assured reaches the Age of 65 years
- Termination of the base Policy.
- The Life Assured has already claimed the Rider Benefit as per Section 3

Dated at	this	Day of	200.

For and behalf of Bajaj Allianz Life Insurance Company Limited

Authorised Signatory

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