

## Policy Document

This Unit-linked Critical Illness Rider is issued on the basis of the information given and declarations made by the Policyholder in the Proposal Form for the Unit-linked Critical Illness Rider, which is incorporated herein and forms the basis of this Policy.

### 1. Policy Description

The Unit-linked Critical Illness Rider, referred to as Rider in this document, is an additional Rider Benefit attached with this Policy. This document should be read along with the base Policy Document

### 2. Life Assured

Life Assured means the person named in the Schedule whose life is insured under this Rider and under the base Policy.

### 3. Rider Sum Assured

Rider Sum Assured is the amount chosen under the Rider and specified in the Policy Schedule, which is referred-to to determine the amount payable to the Policyholder as per Section 5 below, after the date of commencement of risk for the Rider.

### 4. Waiting Period

Waiting Period means a time period of six month from the date of commencement of risk under this rider, during which, if any of the Critical Illness is diagnosed, Critical Illness Benefit shall not be payable.

### 5. Benefits

#### a. Critical Illness Benefit

On diagnosis of any of the Critical Illness (per Section 9 below) on the life of Life Assured during the term of this rider and after the waiting period, if the base Policy is in-force for full Sum Assured (under the base Policy), a Critical Illness Benefit equal to the Rider Sum Assured will be payable, subject to Section 8 below. If the Life Assured dies within 60 (sixty) days of diagnosis of the Critical Illness for which the Critical Illness Benefit has become payable, the claim amount payable as Critical Illness Benefit will be deducted from the Death benefit payable under the base Policy.

After a Critical Illness claim, the Hospital Cash Benefit Rider (if any) taken by the Policyholder will cease immediately.

#### b. Maturity Benefit

No maturity benefit is payable under the UL Critical Illness Rider.

#### c. Surrender Benefit

No surrender benefit is payable under the UL Critical Illness Rider.

### 6. Option to exclude the rider:

- a. The Policyholder can terminate the rider on any Policy anniversary of the base Policy.
- b. In case of such termination, the Rider Benefit per Section 5 above will immediately cease and no further Rider Premium Charge will be deducted. Once this Rider is terminated, it cannot be added back again.

## **7. Non payment of Regular Premium, Forfeiture and Revival**

All benefit under this rider shall lapse if the risk cover under base policy has been lapsed due to non payment of premium.

A lapsed Rider can be revived subject to underwriting by the company at the expense of the Policyholder. The terms & conditions available on revival can be different from any existing terms & conditions. The Rider Benefit available to the Policyholder will be as communicated at the time of revival.

## **8. Payment of Claim**

If a claim arises due to Critical Illness of the Life Assured as specified under Section 9 below, the claim settlement requirements and processes shall be as below.

- a. All notices, applications or notification of claim must be received and approved at the office of the Company authorized to deal with the claim.
- b. No benefit shall be payable until the Life Assured has provided satisfactory proof to the Company of the occurrence of the relevant Critical Illness. This includes a diagnosis confirmed by a registered Medical Practitioner appointed by the Company and must be supported by acceptable clinical, radiological, histological and laboratory evidence. If the Life Assured has been diagnosed with any of the conditions mentioned under Critical Illness, the Company should be intimated of the same within 30 days from the date of diagnosis.

## **9. Critical Illnesses to be covered**

### **a. First Heart Attack**

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

- i. a history of typical chest pain, if any
- ii. new and recent electrocardiographic changes indicating myocardial infarction
- iii. elevation of cardiac enzymes
- iv. Diagnosis based on the elevation of Troponin T Test, alone shall not be considered diagnostic of a heart attack. Angina and chest pain are especially excluded.

### **b. Coronary Artery Disease Requiring Bypass Grafting Surgery**

The undergoing of heart surgery to correct narrowing of blockage of left main coronary artery or three or more coronary arteries with bypass grafts in persons with limiting anginal symptoms and compromise of blood supply supported by investigation but excluding non-surgical techniques such as balloon angioplasty, laser relief of an obstruction or other forms of Coronary artery clearing through catheters or similar devices. Narrowing of the affected artery should be more than 75 % (seventy five percent).

### **c. Stroke**

Any cerebro-vascular incident producing neurological sequel lasting more than twenty-four hours and including infarction of brain tissue by thrombosis, haemorrhage and embolisation from an extra-cranial source. There must be evidence of permanent neurological deficit for more than six months. The diagnosis must be based on changes seen in a CT scan or MRI & certified by a recognised consultant neurologist holding an appointment in this capacity with a major hospital .

Cerebral symptoms due to transient ischaemic attacks, any reversible ischaemic neurological deficit, 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.

**d. Cancer**

The presence of one or more malignant tumours including leukaemia (other than chronic lymphocytic leukaemia), lymphomas and Hodgkins disease characterised by the uncontrollable growth and spread of malignant cells and the invasion & destruction of normal tissue diagnosed by a medical practitioner who is a consultant oncologist. The following cancers are not covered by the policy: -

- i. 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 pre malignant and Ductal carcinoma in situ of the breast.
- ii. Melanomas of less than 1.5-mm maximum thickness as determined by histological examination or less than Clark Level 3 Depth of invasion;
- iii. All hyperkeratoses or basal cells carcinomas of the skin;
- iv. All squamous cell carcinomas of the skin unless there has been a spread to other organs;
- v. Kaposi's sarcoma and other tumours associated with HIV infections or AIDS;
- vi. Papillary carcinoma of the bladder and Prostatic cancers which are histologically described as TNM Classification T1(includingT1(a) T2 (b) or are of another equivalent or lesser classification ) and
- vii. Hodgkins disease stage 1.

**e. Kidney Failure**

End stage renal disease of chronic irreversible failure of kidneys of the insured person undergoing regular peritoneal dialysis or haemodialysis or having had a renal transplantation.

**f. Major Organ Transplantation**

The undergoing as a recipient of a transplant of a heart, heart and lung, liver, kidney, pancreas (excluding the transplantation of the islets of Langerhans only) or bone marrow.

**g. Multiple Sclerosis**

Unequivocal diagnosis by a recognised 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: -

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

**h. Aorta Graft Surgery**

The undergoing of surgery to correct any narrowing, dissection or aneurysm of the thoracic or abdominal aorta. Narrowing of Aorta of congenital is excluded. Surgery of the branches of the abdominal aorta as well as traumatic injury of the aorta are also excluded.

**i. Primary Pulmonary Arterial Hypertension**

Means primary pulmonary hypertension with substantial right ventricular enlargement established by investigations including cardiac catheterization , resulting in permanent irreversible 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 has to be documented for at least three months.

**j. Alzheimer's Disease**

Deterioration or loss of intellectual capacity or abnormal behaviour as evidenced by the clinical state and accepted standardised questionnaires or tests arising from Alzheimer's disease excluding neurosis, psychiatric illness, and any drug or alcohol related organic disorder, resulting in significant reduction in mental and social functioning requiring the continuous supervision of the life insured. The diagnosis must be clinically confirmed by recognised consultant neurologist holding an appointment in this capacity in a major hospital.

**k. Paralysis**

The complete and permanent loss of use of both arms or both legs or one arm and one leg, through paralysis of grade 0-2/6 motor power caused by illness, persisting for at least six months from the date of illness.

Unequivocal diagnosis by recognised consultant neurologist holding an appointment in this capacity in a major hospital must certify it.

**10. Exclusions**

The following are the exclusions under this Rider.

- a. Critical illness occurs as a result of the insured person committing any breach of law;
- b. Critical illness existed at the date of commencement or reinstatement of risk;
- c. Critical illness existed at the date of commencement or reinstatement of risk;
- d. Critical illness as a result of AIDS, any AIDS related illness or HIV infection;
- e. Critical illness as a result of self-inflicted injuries whilst sane or insane;
- f. Critical illness as a result of war, invasion, civil war, rebellion or riot;
- g. Critical illness as a consequence of the insured person being under the influence of alcohol or drugs other than in accordance with the directions of a registered medical practitioner;
- h. Critical illness occurs as a result of the insured person taking part in any naval, military or air force operation;
- i. Critical illness occurs as a result of the insured person participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- j. Critical illness occurs as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger of a recognised airline on regular routes and on a scheduled timetable;
- k. Critical illness as a result of failure to seek or follow medical advice.

**11. Rider Premium Charge**

- a. The Rider Premium Charge depends on the Rider Sum Assured, the Age of the Life Assured on the Policy Commencement Date and on each Policy Anniversary thereafter.
- b. The charges for the Rider Benefit are reviewable after five years from the Date of Commencement of the Policy.
- c. The rate of Rider Premium Charge is applied on the Rider Sum Assured.
- d. The deduction of Rider Premium Charge under this Policy will be through cancellation of Units and will be governed by the relevant section on the Charges under the base Policy Document.

## **12. Change in Rate of Charges**

The Company reserves the right to change the Rider Premium Charges with prior approval from the IRDA. The Company will give notice in writing about the change in charges and the Policyholder will have the option not to pay an increased charge. In such case the Rider cover shall be terminated.

## **13. Occupation:**

- a. The Life Assured must notify the Company in writing as soon as possible and in any case within 10 (ten) days upon a change of occupation.
- b. The new occupation shall be classified according to the underwriting rules of the Company at the time of change.
- c. If the new occupation is in the class of risk, which the Company declines for this Rider Benefits, then the Rider under this Policy shall cease as from the date of change of occupation with no surrender value shall be payable.
- d. If, in the Company's opinion, the new occupation is in a class of lower risk then the reduced Rider Premium Charges shall be applicable from the Policy Anniversary following the Policy Year when the change of occupation is intimated.
- e. If the new occupation is in a class which the Company accepts but is a higher risk, then the revised Rider Premium Charge for increased risk shall be applicable from the Policy Anniversary of the Policy Year in which the change of occupation occurs, irrespective of the time when the Company is informed of such change.
- f. Where there is failure in notifying the Company about change in occupation and Rider Premium Charges are deducted based on the former occupation class and the new occupation is in a class of higher risk, then, the company shall deduct the difference of the higher charges from the unit account by cancellation of the units and in case of claim, the Company shall pay the benefit according to the same proportion which the charges paid bears to the charges which would have been paid if the new occupation was intimated.

## **14. Age Proof**

- a. The Rider Premium Charge payable under the Policy is calculated on the basis of the Age of the Life Assured as declared in the Proposal. If the Age of the Life Assured has not been admitted by the Company, the Policyholder shall furnish such proof of the Age of the Life Assured as is acceptable to the Company and have the Age admitted.
- b. In the event the Age so admitted (the "correct Age") is found to be different from the Age declared in the Proposal, without prejudice to the Company's other rights and remedies including those under the Insurance Act 1938, the following actions shall be taken:
  - i) If the correct Age is such as would have made the Life Assured uninsurable under this Rider, this Rider shall stand cancelled with immediate effect by the Company without any surrender value or refund of Rider Premium Charges deducted for the Rider Benefit by the redemption of units.
  - ii) If the correct Age of the Life Assured is higher than the Age declared in the Proposal, the Rider Premium Charge payable under this Rider Policy shall be altered corresponding to the correct Age of the Life Assured (the "corrected Rider Premium Charge") and the accumulated difference between the corrected Rider Premium Charge and the original Rider Premium Charge from the Date of

Bajaj Allianz UL Critical Illness Benefit  
UIN: 116A015V01

Commencement of Risk of Benefit up to the date of such payment shall be recovered by the redemption of units.

- iii) If the correct by the redemption of units is lower than the Age declared in the Proposal, the Rider Premium Charge payable under this Rider shall be altered corresponding to the correct Age of the Life Assured (the "corrected Rider Premium Charge") from the next Monthly Due Date.

#### **15. Termination Rider Benefit**

The Rider shall automatically terminate on the earlier occurrence of either of the following.

- a. On Policy Anniversary at which the Life Assured attains Age 65 years.
- b. The Policyholder has already claimed the Rider Benefit.
- c. On exclusion of this Rider by the Policyholder
- d. On maturity or termination of the base Policy

#### **16. Section 45**

No Policy of life insurance effected after the coming into force of this Act shall, after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the Policy, was inaccurate or false, unless the insurer shows that such statement was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the Policyholder and that the Policyholder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose.

Dated at \_\_\_\_\_ this \_\_\_Day of \_\_\_\_\_200\_

For and behalf of Bajaj Allianz Life Insurance Company Limited

Authorised Signatory