

# Bajaj Allianz Life Group Accelerated Critical Illness Rider



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Accelerated Critical Illness Rider**

**BAJAJ | Allianz**

**Bajaj Allianz Life Insurance Co. Ltd.**

*Jiyo Befikar®*

## Bajaj Allianz Life Group Accelerated Critical Illness Rider

Your members can face a financial crunch if an unfortunate event strikes, like a critical illness. Keeping this concern in mind we present a solution to provide your members the complete reassurance of a lasting financial security and peace of mind. Bajaj Allianz Life Group Accelerated Critical Illness Rider financially protects your members in case of occurrence of a critical illness. This ensures availability of money when needed the most.

### Rider Benefit

On diagnosis of any of the specified 11 critical illnesses of member or the first of the joint members, an amount equal to the Rider Sum Assured is payable.

If Rider Sum Assured is equal to Sum Assured under the base policy, then the risk-cover for the member and joint member, if any, under the base policy, including the rider, will terminate after the critical illness benefit is paid.

If Rider Sum Assured is less than the Sum Assured under the base policy, then, the rider cover will terminate but the risk cover for the member and joint members, if any, under the base policy will continue for the balance Sum Assured.

### Maturity Benefit

There is no maturity benefit under the rider.

## Important Details of the Bajaj Allianz Life Group Accelerated Critical Illness Rider

Parameter	Details
Minimum Size of the Group	As per base policy
Minimum Entry Age	18 years In case of joint life the younger life should have attained the minimum age.
Maximum Entry Age	69 years In case of joint life the older life should be within the maximum attained age.
Maximum Age at Maturity	70 years
Rider Sum Assured	As per base plan Minimum and Maximum Sum Assured under the rider can be between the minimum and maximum sum assured allowed under the base plan The rider sum assured can be up to 100% of sum assured under the base policy, as per your choice
Rider Premium Payment Term	As per base policy
Rider Term	As per base policy
Premium Payment Frequency	As per base policy

### Rider Premium

Rider Premium would be collected over and above the base policy premium and it would be based on age at entry of the member/joint member, rider sum assured, nature of the group and members occupation classification as applicable to the base policy.

Joint life premium rates (for lives aged x and y) where the critical illness benefit is payable only on first occurrence of critical illness will be 90% of the sum of the individual premium rates for lives aged x and y.

*The premium rates are guaranteed throughout the membership term of the member.*

## Inclusion / Exclusion of Rider

- Your member will have the option to include the rider under the policy at inception or annual renewal date.
- In case of exclusion, the Rider Benefit will immediately cease and no further rider premium will be collected. Once this rider is excluded, it can be added back again on any subsequent annual renewal date, subject to underwriting.

## Non-Payment of Premiums

If rider premiums are not paid before the expiry of the grace period, the rider benefit ceases immediately and no rider benefit will be paid. The rider can be revived based on the conditions as applicable to the base policy.

## Definitions

### i. Critical illnesses covered

#### 1. CANCER OF SPECIFIED SEVERITY

A malignant tumour characterised by the uncontrolled growth & spread of malignant cells with invasion & destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy & confirmed by a pathologist. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded:

(i) Tumours showing the malignant changes of carcinoma in situ & tumours which are histologically described as premalignant or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN-2 & CIN-3; (ii) Any skin cancer other than invasive malignant melanoma; (iii) All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0; (iv) Papillary micro - carcinoma of the thyroid less than 1 cm in diameter; (v) Chronic lymphocytic leukaemia less than RAI stage 3; (vi) Microcarcinoma of the bladder; (vii) All tumours in the presence of HIV infection.

#### 2. FIRST HEART ATTACK – OF SPECIFIED SEVERITY

The first occurrence of myocardial infarction which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for this will be evidenced by all of the following criteria:

(i) a history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain); (ii) new characteristic electrocardiogram changes; (iii) elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded: (a) Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T (b) Other acute Coronary Syndromes (c) Any type of angina pectoris.

#### 3. OPEN CHEST CABG

The actual undergoing of open chest surgery for the correction of one or more coronary arteries, which is/ are narrowed or blocked, by Coronary Artery Bypass Graft (CABG). The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a specialist medical practitioner.

Excluded are: (i) Angioplasty and/or any other intra-arterial procedures; (ii) any key-hole or laser surgery.

#### 4. KIDNEY FAILURE REQUIRING REGULAR DIALYSIS

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

#### 5. STROKE RESULTING IN PERMANENT SYMPTOMS

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in

CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced. The following are excluded: (i) Transient ischemic attacks (TIA); (ii) Traumatic injury of the brain; (iii) Vascular disease affecting only the eye or optic nerve or vestibular functions.

**6. MAJOR ORGAN/ BONE MARROW TRANSPLANT**

The actual undergoing of a transplant of: (i) One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or (ii) Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded: (i) Other stem-cell transplants; (ii) Where only islets of langerhans are transplanted.

**7. PERMANENT PARALYSIS OF LIMBS**

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

**8. MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS**

The definite occurrence of multiple sclerosis. The diagnosis must be supported by all of the following:

(i) investigations including typical MRI and CSF findings, which unequivocally confirm the diagnosis to be multiple sclerosis;

(ii) there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months, and

(iii) well documented clinical history of exacerbations and remissions of said symptoms or neurological deficits with at least two clinically documented episodes at least one month apart. Other causes of neurological damage such as SLE and HIV are excluded.

**9. AORTIC 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.

Congenital narrowing of the aorta and traumatic injury of the aorta are specifically excluded.

**10. PRIMARY PULMONARY HYPERTENSION**

Means primary pulmonary hypertension associated with right ventricular enlargement established by cardiac catheterisation, 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 consecutive months.

**11. ALZHEIMER'S DISEASE**

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: (i) Alcohol or drug abuse; and (ii) Non-organic diseases such as neurosis or psychiatric illness.

Note -

- The rider will be chosen at inception or any annual renewal date.
- The rider cover can be up to 100% of the Sum Assured chosen under base group plan.
- The Critical Illness benefit can be triggered after the waiting period of 90 days from the inception.

- The Company should be informed of the critical illness within 30 days of diagnosis of the Critical Illness.
- The Critical Illness benefit shall be paid on confirmation of the diagnosis by a registered Medical Practitioner appointed by the Company and is supported by acceptable clinical, radiological, histological and laboratory evidence.
- No subsequent death benefit is paid for the member or any of the joint life member, if joint life coverage is opted, after the payment of the rider benefit.
- Joint life is allowed only for spouses.

## Grace Period

As per base policy.

## Exclusions

The critical illness benefit shall not be paid on any of the lives covered in case of the following conditions:

- On diagnosis of critical illness due to attempted suicide within one year from the date of commencement of membership.
- Any critical illness which occurred within 90 days of the entry date or date of revival.
- The member committing or attempting to commit a criminal act whether alone or with others.
- AIDS, any AIDS related illness or HIV infection.
- The member's intentional self-inflicted injury, attempted suicide, while sane or insane.
- War, invasion, civil war, rebellion or riot.
- Alcohol or solvent abuse or taking of drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
- War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes.
- Taking part in any naval, military or air force operation during peace time.
- Engaging in or taking part in hazardous activities, including but not limited to, diving or riding or any kind of race; martial arts; hunting; mountaineering; parachuting; bungee-jumping; underwater activities involving the use of breathing apparatus or not.  
Hazardous Activities mean any sport or pursuit or hobby, which is potentially dangerous to the Insured member whether he is trained or not.
- Participation by the Rider Life Assured in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- Any Pre-existing medical condition. "Pre-existing medical condition" definition will be as per health regulation.

## Termination

The rider will terminate on the life of the member or both the joint life members in case joint life cover was opted, on the earlier occurrence of either of the following events:

- if premiums are discontinued under the base policy
- if the member through policy holder opts out of the rider option
- on maturity or termination of the base group policy
- on receipt of Critical Illness Benefit
- if membership ceases under base group policy
- on member, or in case of joint life the older life, attaining the age of 70 years

## Statutory Information

### Nomination: Section 39 of the Insurance Act, 1938

Nomination should be in accordance with provisions of Section 39 of the Insurance Act 1938 as amended from time to time.

### Prohibition of Rebate: Section 41 of the Insurance Act, 1938

“No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Any person making default in complying with the provisions of this section shall be punishable with a fine which may extend upto ten lakh rupees.”

### Fraud & Misrepresentation: Section 45 of the Insurance Act, 1938

Fraud, Misrepresentation and forfeiture would be dealt with in accordance with provisions of Section 45 of the Insurance Act 1938 as amended from time to time.

## About Bajaj Allianz Life Insurance

Bajaj Allianz is a joint venture between Bajaj Finserv Limited and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture Company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of Allianz SE, and in-depth market knowledge and goodwill of “Bajaj brand” in India. Competitive pricing and quick honest response have earned the Company the customer's trust and market leadership in a very short time.

## Disclaimer

This rider sales literature gives the salient features of the rider only. The policy document is the conclusive evidence of the contract, and provides in detail all the conditions, exclusions related to the “Bajaj Allianz Life Group Accelerated Critical Illness Rider”.

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**UIN : 116B026V03**

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***For More Information: Kindly consult our "Insurance Consultant" or call us today on the TOLL FREE numbers mentioned above. This Sales Literature should be read in conjunction with the Benefit Illustration and Policy Exclusions. Please ask for the same along with the quotation.***

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BJAZ-O-1981/23-Aug-17