

Rider Document

This Rider Document should be read in conjunction with the Policy Document of the base Policy to which this Rider is attached. The Rider (which can be opted only at the Policy Commencement Date) covers the life/lives of the person/s named as the life/lives assured with respect to the Rider in the Schedule.

1. Rider Description

This is a non-linked, non-participating accelerated critical illness (ACI) rider (referred to hereafter as the Rider) attached with the base Policy. The Rider cover amount is equal to the Sum/s Assured with respect to the life/lives assured under the base Policy, and as mentioned specifically in the Schedule.

2. Rider Premium

The Rider Premium is as mentioned in the Schedule with respect to the Rider and will be deducted from the Regular Premium under the Policy. No separate payment of Rider Premium is required.

3. Critical Illnesses covered under the Rider

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:

- a) Confirmatory new and recent electrocardiogram (ECG) changes indicating myocardial infarction;
- b) Diagnostic elevation of cardiac enzymes CK-MB, Troponin I, Troponin T or other biochemical markers above standard laboratory levels of normal; and
- c) 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.

ii) Coronary Artery Disease Requiring Surgery

The undergoing of open chest surgery to correct narrowing or blockage of the 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. 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, intra-carnial or subarachnoid haemorrhage or embolisation from an extracranial source on a CT, MRI or similar scan. The diagnosis must be certified by a recognised consultant neurologist holding an appointment in this capacity with a major hospital.

The following are excluded:

- (i) Transient ischaemic attacks;
- (ii) Cerebral symptoms associated with reversible neurological deficit;
- (iii) Symptoms due to migraine or headache;
- (iv) Vascular disease affecting the eye, optic nerve or vestibular functions;
- (v) Brain tissue damage caused by head injury.

iv) Cancer

The presence of one or more malignant tumours characterised 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 a recognized consultant oncologist. Also included are Hodgkin's disease, lymphoma & Leukaemia other than chronic lymphocytic leukaemia.

The following are excluded: -

1. Tumours that are histologically described as micro-carcinoma, pre-malignant or showing the malignant changes of carcinoma in situ including cervical dysplasia rated as CIN1, CIN2 or CIN 3 or Ductal carcinoma in situ of the breast;
2. 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;
3. Kaposi's sarcoma or any other tumours associated with HIV infection or AIDS; and
4. Papillary carcinoma of the bladder and Prostate tumours histologically described as TNM Classification T1 (including T1a & T1b) or of another equivalent or lesser classification.

v) Kidney Failure

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

vi) Major Organ Transplant

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

(i) Heart; (ii) Lung; (iii) Liver; (iv) Kidney; (v) Pancreas (excluding the transplantation of the islets of Langerhans only); Or (vi) Bone marrow.

vii) Multiple Sclerosis

The unequivocal diagnosis of Multiple Sclerosis by a recognised consultant neurologist holding an appointment in this capacity in a major hospital. The diagnosis must include all of the following, which have been present for a period of at least six (6) consecutive months:

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

viii) 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.

ix) 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.

x) 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.

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

xii) Reconstructive breast surgery (only for Female Life)

If the Life Assured under the Rider is diagnosed as suffering from breast cancer [as defined in Subsection iv) above on "Cancer"], and the same is intimated to the company within 30 days of diagnosis, an additional benefit amount of 30% (thirty percentage) of the sum assured under the Rider will be payable to her for Reconstructive breast surgery. This payment will be made on the diagnosis of the breast cancer and it being confirmed by an oncologist supported by surgical, clinical, radiological, histological and laboratory evidence acceptable to the company.

4. Waiting Period

The Company will not be liable to make any payment under Section 5a) below for any Critical Illness (as defined in Section 3 above), which existed at or is diagnosed within six (6) months of the Date of Commencement of Risk or the date of latest Revival of the Policy/Rider.

5. Rider Benefits

a) Accelerated Critical Illness Benefit

Subject to Section 4 above and Section 7, Section 9, Section 10 & Section 12 below,

- (i) the Sum Assured under the Rider with respect to the life assured shall be payable on the diagnosis of any one of the Critical Illnesses [mentioned in Section 3 above] on the life of that life assured.
- (ii) As mentioned in Section 3xii) above, an additional Critical Illness benefit amount of 30% (thirty percentage) of the Sum Assured with respect to that life assured will be payable, if the life assured is diagnosed as suffering from breast cancer.
- (iii) Upon payment of the Rider benefit with respect to the life assured, the Death Benefit under the base Policy with respect to that life assured shall no longer be payable. The Rider and the Death Benefit under the base Policy with respect to that life assured will terminate immediately after the Rider benefit is paid.

b) Maturity Benefit

No maturity benefit is payable under the Rider.

c) Surrender Benefit

Any time after five (5) Policy years, if the Policy is surrendered or the Rider is surrendered/excluded/ terminated before the Rider maturity date (mentioned in the Schedule) and if the Rider Premium Paying Term is less than the

Rider Benefit Term, the Policyholder is eligible for surrender value, if any. On surrender/exclusion/termination before five (5) Policy Years, no surrender value is payable.

The surrender value will be based on the appropriate surrender factor given in the **Annexure K** corresponding to the remaining duration of the Rider Benefit Term (mentioned in the Schedule) and the annualised Rider Premium.

6. Option to exclude the Rider

- i. The Policyholder can exclude the Rider any time from the first (1st) Policy Anniversary by giving a written notice to the Company at least thirty (30) days before the Policy Anniversary.
- ii. In case of such exclusion, the Rider Benefit per Section 5a) above will immediately cease, and no further Rider Premium will be deducted/collected.
- iii. In a Joint Life Policy, if the Rider on life of the Life Assured is excluded, then, the Rider on the life of the Second Life Assured, if any, shall automatically be excluded.
- iv. Once excluded, the Rider cannot be included again.

7. Non-forfeiture benefits

- i. If the Rider Premium has not been received before the end of the Grace Period, the Rider cover lapses and no Rider Benefit will be payable except the surrender value, if any, per Section 5c) above.
- ii. If the life assured is diagnosed of any of the Critical Illness during the Grace Period, the Rider would be treated as in-force and the Company shall be liable to make the benefit payment per Section 5a) above, after deduction of the Rider Premium/s due.

8. Revival

The Rider can be revived within the revival period as allowed under the base Policy and subject to the revival terms and conditions of the base Policy.

9. Claim Information and Documentation

The payment of Rider Benefit under Section 5a) above will be subject to the following conditions:

- i. All notices, applications or notification of claim must be received and approved at the office of the Company, authorized to deal with the claim.
- ii. The Rider benefit shall be payable only 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, as mentioned in Section 3 above.
- iii. The Company should be informed of the Critical Illness within thirty (30) days of diagnosis of the Critical Illness.

10. Exclusions

a) Suicide Exclusion:

If the Critical Illness on the life of the life assured occurs due to an attempt to commit suicide, whether sane or insane, within one (1) year from the Date of Commencement of Risk or from the date of latest Revival of the Policy/Rider, the Rider contract shall be void and the Company's liability towards this Rider shall be limited to the extent of the Rider Premiums paid.

b) General Exclusion:

No Rider Benefit per Section 5a) above shall be payable, if Critical Illness on the life of the life assured is directly or indirectly caused by, related to or arises from:

- i) the life assured committing any breach of law;
- ii) existed at the Date of Commencement of Risk or date of latest Revival of risk;
- iii) diagnosed within six (6) month of the Date of Commencement of Risk or date of latest Revival of risk;
- iv) AIDS, any AIDS related illness or HIV infection;
- v) self-inflicted injuries whilst sane or insane;
- vi) war, invasion, civil war, rebellion or riot;
- vii) a consequence of the life assured being under the influence of alcohol or drugs other than in accordance with the directions of a registered medical practitioner;
- viii) the life assured taking part in any naval, military or air force operation;
- ix) the life assured participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- x) 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;
- xi) failure to seek or follow medical advice.

11. Age Proof

- i. The Rider Premium payable under the Policy is calculated on the basis of the Age at entry of the life assured as declared in the Proposal Form. If the Age of the life assured has not been admitted by the Company, the Policyholder shall furnish such proof of age of the life assured as is acceptable to the Company and have the Age admitted.
- ii. In the event the Age at entry so admitted (the "correct Age") is found to be different from the Age declared in the Proposal Form, without prejudice to the Company's other rights and remedies including those under the Insurance Act 1938, the following actions shall be taken:
 - a) If the correct Age of the life assured is such as would have made the life assured uninsurable under this Rider, the Rider shall stand terminated with immediate effect by the Company and surrender value, if any, shall be payable
 - b) If the correct Age of the life assured is higher than the Age declared in the Proposal Form, the Rider Premium payable under the Policy shall be altered corresponding to the correct Age of the life assured and the sum total of the difference between the corrected Rider Premium and the original Rider Premium from the Policy Commencement Date up to the date of such alteration shall be collected from the Policyholder. The Rider Premium payable under the Policy shall be altered corresponding to the correct Age of the life assured from the next due date of Rider Premium. If the Policyholder disagrees to pay the same, the Policy will be terminated with immediate effect by the Company and surrender value, if any, shall be payable.
 - c) If the correct Age of the life assured is lower than the Age declared in the Proposal Form, the Rider Premium payable under the Policy shall be altered corresponding to the correct Age of the life assured from the next due date of Rider Premium. However, the Company shall not make a refund of the excess premium collected earlier.

12. Termination Rider Benefit

The Rider with respect to the life assured shall automatically terminate on the earlier occurrence of either of the following.

- i. On payment of Critical Illness benefit or Death Benefit of that life assured, whichever happen first
- ii. On exclusion of the Rider with respect to that life assured
- iii. On maturity of the Rider with respect to that life assured or of the base Policy
- iv. On termination/surrender of the Rider with respect to that life assured or the base Policy

Dated at _____ this ___ Day of _____ 201_

For and behalf of Bajaj Allianz Life Insurance Company Limited

Authorised Signatory