

Policy Document

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1. Benefits Payable:

Maturity / Death Benefit

(1) The Sum Assured as specified in the policy certificate shall be payable together with guaranteed additions and vested bonuses, if any, on the death of the Life Assured before the maturity date of Policy.

In the event of the Life Assured having opted for Critical Illness Benefit and the said benefit has become payable, the benefits paid thereunder shall be deemed to be the payment of the Death Benefit referred to above, upto the extent of the Sum Assured under the Critical Illness Benefits. No rights, interests and claims shall enure to the Life Assured or any one claiming through him in respect of this Policy to the extent of Critical Illness Sum Assured.

However, where the Sum Assured as shown in the Policy Certificate and the Sum Assured under the Critical Illness Benefit is equivalent the Policy shall terminate and no rights, interests and claims shall enure to the Life Assured or any one claiming through him in respect of the Policy.

(2) On the Life Assured surviving the periods mentioned in Column (1) of the Table below, computed with reference to the Date of Commencement of Policy mentioned in Policy Certificate, the corresponding amount mentioned in Column (2) of the Table shall be payable:-

Table	
(1) On the Life Assured surviving a period of	(2) Amount payable expressed as percentage of the Sum Assured
4 years	10%
8 years	15%
12 years	20%
16 years	25%
20 years i.e. Maturity Date of policy	50%

The guaranteed additions and vested bonuses, if any, shall be paid along with the amount mentioned in Column (2) on the Life Assured surviving the maturity date of Policy.

Supplementary Benefits:

As specified in the Annexure and are applicable if opted for.

2. Payment of premiums

(i) Premiums are payable on the due dates and at the rate mentioned in the Policy Certificate or at such altered rate as is payable in terms of Condition 1(ii) of the General Conditions of this Policy Document. However, a grace period of not more than 30 days, where the mode of payment of premium is other than monthly and not more than 15 days in the case of monthly mode is allowed. The benefits payable on death / critical Illness under this Policy will be paid after deduction of the premium falling due during the then current policy year.

(ii) Premiums are payable on the due dates mentioned in the Policy Certificate or within the grace period allowed without any obligation on the Company to notify the Life Assured/policyholder of the due dates. If the premiums are not paid on the due dates or even during the grace period, the Policy lapses and no benefits shall be payable thereunder except to the extent indicated in condition 3 below.

(iii) Premiums are payable through any of the following modes :-

- 1) Cash *
- 2) Cheques
- 3) Demand Drafts
- 4) Pay Orders
- 5) Bankers Cheque
- 6) Internet (Infinity / Bill Junction / Bill Desk)
- 7) Electronic Clearing System
- 8) Credit Cards (Only standing instruction) #

* Subject to the Company Rules then inforce
Not allowed for Monthly modes.

3. Paid-up Value

If premiums have been paid for at least three consecutive years and any subsequent premium has not been paid within the grace period, the Sum Assured under this Policy shall stand reduced to a paid-up sum as shown in the table below, to which will be added the guaranteed additions and vested bonuses, if any, provided that such paid-up sum together with the guaranteed additions and vested bonuses is not less than five hundred Rupees.

No. of years premiums paid	Paid up assurance per thousand S.A.	No. of years premiums paid	Paid up assurance per thousand S.A.	No. of years premiums paid	Paid up assurance per thousand S.A.
3	390	10	545	17	345
4	560*	11	645	18	400
5	335	12	735*	19	450
6	480	13	425		
7	615	14	500		
8	740*	15	570		
9	440	16	635*		

* This paid-up value Table is applicable where the Survival Benefit has not fallen due at the end of the year specified. However if Survival Benefit has fallen due at the end of the specified year the paid - up value shall be Rs.180, Rs.330, Rs.350 and Rs. 290 per thousand Sum Assured at the end of the 4th, 8th, 12th and 16th year respectively.

The paid-up Policy shall not be allocated any further guaranteed additions nor participate in any future allocation of profits by way of bonuses. The Policy will be entitled only to the paid-up Sum together with the guaranteed additions and vested bonuses, if any, on the maturity date of Policy or on the previous death of the Life Assured. A paid up Policy is not entitled to any of Supplementary Benefits mentioned in the Annexure.

4. Guaranteed Surrender Value

If premiums are paid for at least three consecutive years, the policy acquires a Surrender Value which is equal to thirty five percent of the premiums paid, excluding the premiums paid during the first year of the policy; all extra premiums paid and the premiums paid for the supplementary benefits. Any survival benefits already paid will also be reduced from this value. The cash value of the guaranteed additions and vested bonuses, if any, will also be allowed. The Policy which has acquired a Surrender Value can be surrendered for payment in cash and the surrender shall extinguish all the rights, benefits and interests under the Policy.

5. General Provisions

Where the policy has been issued on the life of a minor, the policy will automatically vest on him on his attaining majority. The Policy will continue to vest on the proposer, if the policy is proposed by HUF on the life of a minor.

Policy Document**GENERAL CONDITIONS****1 Age**

- i. The premium payable under the policy has been calculated on the basis of the age of the Life Assured as declared in the Proposal. In case the age of the Life Assured has not been admitted by the Company, the Proposer/ Life Assured 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 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, one of the following actions shall be taken:
 - a) If the correct age is such as would have made the Life Assured uninsurable under the plan of assurance specified in the Policy Certificate, the plan of assurance shall stand altered to such plan of assurance as is generally granted by the Company for the correct age of the Life Assured, subject to the terms and conditions as are applicable to that plan of assurance. If it is not possible to grant any other plan of assurance, the policy shall stand cancelled from the date of issue of the policy and the premium paid shall be refunded subject to the deduction of the expenses incurred by the Company on the policy.
 - b) If the correct age is higher than the age declared in the Proposal, the premium payable under the policy shall be altered corresponding to the correct age of the Life Assured ("the corrected premium") from the date of commencement of the policy and the Proposer/Life Assured shall pay to the Company the accumulated difference between the corrected premium and the original premium from the commencement of the policy up to the date of such payment with interest at such rate and in such manner as is charged by the Company for late payment of premium. If the Life Assured fails to pay the difference of premium with interest thereon as mentioned above, the same shall be treated as a debt due to the Company and shall be recovered with further interest thereon as mentioned above from the moneys payable under the policy.
 - c) If the correct age of the Life Assured is lower than the age declared in the Proposal, the premium payable under the policy shall be altered corresponding to the correct age of the Life Assured ("the corrected premium"); from the date of commencement of the policy and the Company may, at its discretion, refund without interest, the accumulated difference between the original premium paid and the corrected premium.

2. Bonus

Guaranteed additions and bonuses (if applicable, under with profit policies) will be payable in terms of the prospectus and Company's internal guidelines and policies and Insurance Regulatory and Development Authority (IRDA) rules and regulations.

3. Revival of the policy

A policy, which has lapsed for non-payment of premium within the days of grace may be revived subject to the following conditions: -

- a) The application for revival is made within 5 years from the date of the first unpaid premium and before the Maturity Date of policy;
- b) The applicant being the Proposer/Life Assured furnishes, at his own expense, satisfactory evidence of health of the Life Assured;
- c) The arrears of premiums together with interest at such rate as the company may charge for late payment of premia are paid;
- d) The revival of the policy may be on terms different from those applicable to the policy before it lapsed; and
- e) The revival will take effect only on it being specifically communicated by the Company to the Life Assured or the applicant.

4. Assignment and nomination

- i. An assignment of this policy may be made by an endorsement upon the policy itself or by a separate instrument signed in either case by the assignor specifically stating the fact of assignment and duly attested. The first assignment may be only made by the Life Assured or the Proposer. Such assignment shall be effective, as against the Company, from and upon the service of a written notice upon the Company and the Company recording the assignment in its books. Assignment will not be permitted where the policy is under the Married Women's Property Act, 1874.

- ii. The Life Assured, where he is the holder of the policy, may, at any time before the Maturity Date of policy, make a nomination for the purpose of payment of the moneys secured by the policy in the event of his death. Where the nominee is a minor, he may also appoint a person to receive the money during the minority of the nominee. Nomination may be made by an endorsement on the policy and by communicating the same in writing to the Company. Any change of nomination, which may be effected before the Maturity Date of policy shall also be communicated to the Company.

The Company does not express itself upon the validity or accept any responsibility on the assignment or nomination in recording the assignment or registering the nomination or change in nomination.

5. Suicide

If the Life assured commits suicide whether sane or insane, within one year from the date of commencement of this policy, the policy shall be void and the premiums paid hereunder will be refunded after deducting the expenses incurred by the Company for the issue of the policy.

6. Special Provisions

Any special provisions subject to which this Policy has been entered into and endorsed in the Policy or in any separate instrument shall be deemed to be part of this Policy and shall have effect accordingly.

7. Special Condition for Occupation to be taken up by a minor

In case of a policy being on the life of a minor or a student upon his attaining majority and engaging in a particular occupation, he must give information to the ICICI Prudential Life Insurance Co. Ltd. of his chosen employment and if the occupation is such that it is considered necessary to charge an appropriate occupational extra premium, such premium would be intimated to the life assured by the Company and the life assured would be required to pay such extra premium.

8. Incontestability

In case it is found that any untrue or incorrect statement is contained in the proposal/ personal statement, declaration and connected documents or any material information has been withheld then, but subject to the provision of Sec.45 of the Insurance Act, 1938, the policy shall be void and no benefit shall be payable thereunder.

9. Notices

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, facsimile or e-mail to

In case of the Policy holder/ Life Assured/ Nominee :

As per the details specified by the Policyholder / Life Assured / Nominee in the proposal form/ change of address intimation submitted by him.

In case of the Company:

Address : Customer Service Desk
ICICI Prudential Life Insurance Company Limited
ICICI PruLife Towers,
1089, Appasaheb Marathe Marg, Prabhadevi,
Mumbai- 400 025.

Facsimile : 022 24376727

E-mail : lifeline@iciciprulife.com

Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail.

10. Legislative Changes

The terms and conditions including the premium and the benefits payable under this Policy are subject to variation in accordance with the relevant legislation.

11. Payment of Claim

Before payment of any claim under the Policy, the Company shall require the delivery of the original of this Policy document and the following documents establishing the right of the claimant or claimants to receive payment.

Documentation for claim

The following documents shall be required to be submitted to the Company at the time of claim.

1. Original Insurance Policy
2. Claimant's statement
3. Death certificate issued by the local and medical authority in case of death claim
4. Medical evidence in case of health and disability rider claims.
5. Any other documents or information as may be required by the Company for processing of the claim depending on the cause of the claim.

12. Electronic Transactions

The Customer shall adhere to and comply with all such terms and conditions as the Company may prescribe from time to time, and that all transactions effected by or through facilities for conducting remote transactions (including the Internet, World Wide Web, electronic data interchange, call centres, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the Policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time.

13. Customer Service

- (a) If at any time you need any clarification or assistance, please contact our advisor or call our Customer Service Representative at the telephone numbers given below during office hours (9.30 a.m. to 5.30 p.m.) Alternatively you may communicate with us on the following numbers:

Ahmedabad	647 9199	Bangalore	532 5455	Baroda	9898277877
Chandigarh	717087	Chennai	2436 7007	Kochi	384524
Coimbatore	2382 780	Delhi	23683695	Hyderabad	23128999
Indore	2408 778	Jaipur	2249911	Lucknow	1600-11-6050
Ludhiana	914624404	Kolkata	22539000	Madurai	9843130379
Mangalore	9845276640	Mumbai	28307766	Meerut	91-2368 3695
Nagpur	9823393334	Nashik	9823393334	Pune	610 3434
Trichy	9843130379	Jalandar	98214624404		

Alternatively you may communicate with us:

By mail at:

Customer Service Desk
 ICICI Prudential Life Insurance Company Limited
 ICICI PruLife Towers,
 1089, Appasaheb Marathe Marg, Prabhadevi,
 Mumbai- 400 025

Facsimile : 022 24376727

E-mail : lifeline@iciciprulife.com

- (b) The Company has a grievance redressal mechanism for resolution of any dispute and any grievance or complaint in respect of this policy may be addressed to:-

Grievance Redressal Committee,
 Customer Service Desk,
 ICICI Prudential Life Insurance Company Limited
 ICICI PruLife Towers,
 1089, Appasaheb Marathe Marg, Prabhadevi,
 Mumbai- 400 025

- (c) The Central Government has established an office of the Insurance Ombudsman for redressal of grievances with respect to life insurance policies. For details log on to our website www.iciciprulife.com or contact our Customer Service Desk.

"The policy shall be subject to and be governed by this policy document and the terms and conditions of the schedule enclosed herewith including every endorsement by the Company and shall together form a single contract" (Ver AO2: 3)

ANNEXURE

Supplementary Benefits applicable if opted for

(A) Accident and Disability Benefit

I. Accident Benefit:

Subject to the conditions set out below, if whilst the policy is in force for the full Sum Assured, the Life Assured is involved in an accident, at any time before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier, resulting in his death the Company agrees to pay the person/s to whom the benefits are payable under the Policy an additional amount equal to the Accident and Disability Benefit Sum Assured (hereinafter referred to as "accidental cover") under this supplementary benefit.

In the event of such death occurring while the Life Assured is using, as a fare paying passenger, authorised public mass surface transport namely bus or train, operating under terms of such authorisation, the additional amount payable under this benefit shall be enhanced to twice the amount of accidental cover under this supplementary benefit.

The conditions subject to which this benefit is payable, are:

- (a) the death due to accident must be caused by violent, external and visible means;
- (b) the death due to accident is not caused -
 - i) by attempted suicide or self inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor; or
 - ii) by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft (being a multi-engined aircraft) operating on a regular scheduled route; or
 - iii) by the Life Assured committing any breach of law; or
 - iv) due to war, whether declared or not or civil commotion; or
 - v) by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.
- (c) the accident shall result in bodily injury or injuries to the Life Assured independently of any other means;
- (d) such injury or injuries shall, within 180 days of it's occurrence, directly and independently of any other means cause the death of the Life Assured; and
- (e) the death of the Life Assured shall occur before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier;

However, if the period of 180 days from the occurrence of the accident is current on the policy anniversary on which the Life Assured attains age 65 nearer birthday, the accidental cover shall be payable on death during that period.

II. Disability Benefit :

Subject to the conditions set out below, if whilst the policy is in force for the full Sum Assured, the Life Assured is involved in an accident, at any time before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier, resulting in his total and permanent disablement, which will disable him to work or follow any occupation or profession, then with effect from and including the date of such disability (hereinafter called "Disability Date") the Company agrees to provide the following benefit :-

1. Commencing from the first anniversary of the Disability Date and on each anniversary thereafter pay in ten annual installments, each equal to one-tenth of the amount of accidental cover under this Supplementary Benefit. In event of the policy resulting in a death claim before the receipt by the Life Assured of the last such installment, then the installments remaining unpaid shall become payable along with the claim.
2. The premiums falling due on or after the disability date in respect of the Sum Assured under the basic plan equal to the accidental cover and not exceeding Rs 10,00,000/-, shall be waived. The balance amount of premium, if any, shall be continued to be payable.
3. The conditions subject to which the benefits are payable, are :
 - (a) the disability must be caused by violent, external and visible means;
 - (b) the disability is not caused,
 - i) by attempted suicide or self inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor; or

- ii) by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft operating (being a multi engine aircraft) on a regular scheduled route; or
 - iii) by the Life Assured committing any breach of law; or
 - iv) due to war, whether declared or not or civil commotion ;or
 - v) by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.
- (c) If there are any other benefits payable under this supplementary benefit, then all such benefits shall cease to be available on and after the Disability Date.
- (d) The Disability must result within 180 days from the date of occurrence of the accident.
- (e) Written notice of any claim for the benefit shall be served on the Company within 120 days of the Disability Date and the admission of any claim for Disability Benefit will be subject to such proof (at the expense of the Life Assured), as the Company may reasonably require, that the Life Assured has become totally and permanently disabled. Such proof shall be furnished to the Company along with the submission of the notice of the disability.
- (f) The Company reserves the right to call for such medical examinations as they may require and for this purpose, may advice the Life Assured to submit himself to one or more medical examinations conducted by medical practitioner/s appointed by the Company, the cost of which shall be borne by the company.
- (g) The payment of the Disability Benefit and the continuation thereof shall be subject to such proof, as the Company may require, that the Life Assured has been totally and permanently disabled and has continued to be totally and permanently disabled. If such proof is not furnished or if the Life Assured shall refuse or fail to submit for medical examination/s when required to do so, or if at any time the Company is satisfied that a claim for benefit under this clause has been wrongly admitted, the Life Assured shall be deemed to have ceased to be totally and permanently disabled immediately from the date on which the Company has requested for the supply of such proof or submission to medical examination/s or, as the case may be, from the date on which the Life Assured is communicated of wrongful admission of the claim, and thereafter the policy shall continue under such terms and conditions as the Company may decide.

For the purpose of this benefit, a person shall only be regarded as "Totally and Permanently Disabled" if that person, due to accident or injury has suffered a loss such as :

- the loss by physical separation of two limbs or the complete and irremediable loss of sight in both eyes or the loss by physical separation of one limb accompanied by the complete and irremediable loss of sight in one eye (where limb means an entire hand or foot), or
 - has been continuously disabled for a period of six consecutive months and has been determined by the Company, after consideration of the reports and other information supplied by the Company's own medical practitioner, appointed to examine that person, to be incapacitated to such an extent as to render that person unlikely ever to resume work or to attend any gainful employment or occupation.
- (h) The maximum aggregate limit of assurance under all policies on the same life to which benefits under the supplementary benefits 1. **Accident and Disability Benefit** and 2. **Accident Benefit Rider** will apply, shall not exceed Rs.10,00,000. If the total assurance under one or more policies of the Life Assured exceeds the said sum of Rs.10,00,000, this benefit shall be available in respect of first Rs.10,00,000 assured in the order in which policies have been issued.

(B) Accident Benefit Rider:

Subject to the conditions set out below, if whilst the policy is in force for the full Sum Assured, the Life Assured is involved in an accident, at any time before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier, resulting in his death the Company agrees to pay the person/s to whom the benefits are payable under the Policy an additional amount equal to the Accident Benefit Rider Sum Assured (hereinafter referred to as "accidental death cover") under this supplementary benefit .

The conditions subject to which this benefit is payable, are:

- (a) the death due to accident must be caused by violent, external and visible means;
- (b) the death due to accident is not caused -

- i. by attempted suicide or self inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor; or
 - ii. by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft (being a multi-engined aircraft) operating on a regular scheduled route; or
 - iii. by the Life Assured committing any breach of law; or
 - iv. due to war, whether declared or not or civil commotion; or
 - v. by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.
- (c) the accident shall result in bodily injury or injuries to the Life Assured independently of any other means;
- (d) such injury or injuries shall, within 180 days of it's occurrence, directly and independently of any other means cause the death of the Life Assured; and
- (e) the death of the Life Assured shall occur before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier;

However, if the period of 180 days from the occurrence of the accident is current on the policy anniversary on which the Life Assured attains age 65 nearer birthday, the accidental death cover shall be payable on death during that period.

The maximum aggregate limit of assurance under all policies on the same life to which benefits under the supplementary benefits 1. **Accident and Disability Benefit** and 2. **Accident Benefit Rider** will apply, shall not exceed Rs.10,00,000. If the total assurance under one or more policies of the Life Assured exceeds the said sum of Rs.10,00,000, this benefit shall be available in respect of first Rs.10,00,000 assured in the order in which policies have been issued.

(C) Critical Illness Benefit :-

Provided the policy is in force for the full Sum Assured, the Life Assured is diagnosed to be suffering from a Critical Illness (as defined below) after six months from the Date of issue of Policy but before the policy anniversary on which he attains the age 65 years nearer birthday, or before the expiry of the period for which the premiums are payable, whichever is earlier, the Sum Assured under this Policy shall fail to be paid together with guaranteed additions and bonuses vested till then, subject to conditions set out below :-

- (1) The benefit shall not be payable in respect of any illness other than those defined as Critical Illness, nor shall it apply or be payable in respect of any of those said illnesses the symptoms of which have occurred or which has been diagnosed or for which the insured person received treatment, during the first 6 months from the date of issue of policy.
- (2) The Critical Illness shall not have been caused by the existence of Acquired Immune Deficiency Syndrome or the presence of any Human Immuno-deficiency Virus Infection in the person of the Life Assured, self inflicted injury, drug abuse, failure to follow medical advice, war, whether declared or not and civil commotion, pregnancy, breach of law, aviation other than as a fare paying passenger in a commercial licenced aircraft (being a multi-engined aircraft), hazardous sports and pastimes;
- (3) Written Notice of any claim for the benefit must be given to the Company within 60 days of such diagnosis.
- (4) The admission of any claim for this benefit will be subject to satisfactory proof that the Life Assured is diagnosed to be suffering from any Critical Illness, as the Company may reasonably require.
- (5) On the payment of the Sum Assured under the Critical Illness Benefit together with guaranteed additions and the vested bonuses if any, but subject to any claim the Company may have in respect of the moneys payable under the policy, the contract as evidenced by the Policy, shall be deemed to have been discharged to the extent of the Sum Assured under this benefit. No rights, interests or claims shall enure to the Life Assured or anyone claiming through him in respect of the Sum Assured under Critical Illness benefit so discharged; However, where the Sum Assured as shown in the Policy Certificate and the Sum Assured under the Critical Illness Benefit is equivalent the Policy shall terminate and no rights, interests and claims shall enure to the Life Assured or any one claiming him in respect of the Policy.
- (6) The benefit shall automatically cease to be available when the policy is surrendered for cash or converted into a paid-up policy for a reduced Sum Assured;
- (7) The maximum aggregate of Critical Illness Benefit granted by the Company under this and all the other policies of the Life Assured shall not exceed Rs 10,00,000/- (Rupees ten lakhs)

Note 1: A "Critical Illness " shall mean anyone of the following illnesses as defined separately hereunder occurring after 6 months from the date of issue of policy:-

- (a) **Cancer** :- A malignant tumour characterized by uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. The term Cancer includes Leukaemia but excludes the following:-
 - (i) All tumours which are histologically described as pre-malignant, non-invasive or carcinoma in situ;
 - (ii) All forms of lymphoma in presence of any Human Immuno-deficiency Virus;

- (iii) Kaposi's Sarcoma in the presence of any Human Immuno-deficiency virus;
 - (iv) Any Skin Cancer other than invasive malignant melanoma; and
 - (v) Early Prostate Cancer which is histologically described as T₁ (including T_{1a} and T_{1b}) or another equivalent or lesser classification.
- (b) **Coronary Artery By-Pass Graft Surgery (CABGS)** – the undergoing of open heart surgery on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts;
- Angiographic evidence to support the necessity of the surgery will be required. Balloon angioplasty, laser or any catheter-based procedures are not covered.
- (c) **Heart attack** – The death of a portion of heart muscle as a result of inadequate blood supply as evidenced by an episode of typical chest pain, new electrocardiographic changes and by elevation of the cardiac enzymes. Diagnosis must be confirmed by a consultant physician.
- (d) **Kidney failure** – End stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis or renal transplant is undertaken. Evidence of end stage kidney disease must be provided and the requirement for dialysis or transplantation must be confirmed by a consultant physician.
- (e) **Major Organ Transplant** – The actual undergoing as a recipient of a transplant of heart, liver, lung, pancreas 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.
- (f) **Stroke** : A cerebrovascular incident resulting in permanent neurological damage. Transient ischaemic attacks are specifically excluded.
- (g) **Paralysis** : Complete and permanent loss of the use of two or more limbs as a result of injury or disease of the brain or spinal cord. To establish permanence the paralysis must normally have persisted for at least 6 months.
- (h) **Aorta-surgery**: The actual undergoing of surgery (including key hole type) for a disease or injury of the aorta needing excision and surgical replacement of the diseased part of the aorta with a graft
- (i) **Heart valve replacement/surgery**: The undergoing of open heart surgery, on the advice of a consultant cardiologist, to replace or repair one or more heart valves

Note 2:

"Diagnosis" shall mean diagnosis made by a physician based on such specific evidence as referred to in the definition of the particular Critical Illness concerned or, in the absence of such specified reference, based upon radiological, clinical, histological or laboratory tests acceptable to the Company.

In event of any doubt regarding the appropriateness or correctness of the diagnosis, the Company shall have the right to call for an examination of the Life Assured on the evidence used in arriving at such diagnosis, by a Medical Specialist appointed by the Company and the opinion of such specialist as to such diagnosis shall be considered binding on both the Life Assured and the Company.

"Physician" shall mean any person registered with the Indian Medical Council to render medical or surgical services, but excluding a person who is the Life Assured himself or a blood relative of the Life Assured.

Premium Review:

The premium for this benefit is guaranteed for five years only from the date of commencement of Policy. The Company reserves the right to carry out a general review of the experience from time to time and change the premium as a result of such review. The Company will give notice in writing about the change and the Life Assured will have the option not to pay any increased premium. In such a case the benefit will be appropriately reduced from the effective date of the change in premium and the Company will advise the Life Assured accordingly.

(D) Major Surgical Assistance Benefit:-

Provided the policy is in force for the full Sum Assured, the Life Assured be confined to a hospital and undergoes any surgical procedure (as defined below) after six months from the Date of issue of the Policy but before the policy anniversary on which he attains the age of 65 years nearer birthday, then subject to the conditions set out below, an amount equal to a specified percentage of the amount of cover granted under this supplementary benefit, being 50 % of the amount of cover granted under this supplementary benefit in respect of Major Procedures, 30% of the amount of cover granted under this supplementary benefit in respect of Intermediate Procedures and 20% of the amount of cover granted under this supplementary benefit in respect of Minor Procedures (as defined below) exclusive of the guaranteed additions and vested bonuses, if any, shall be payable.

The benefit under this Supplementary Benefit will be payable on the Life Assured undergoing surgical procedures on more than one occasion. However the total amount payable under all the Surgical Procedures shall not exceed 50% of the cover granted under this supplementary benefit. The conditions subject to which the benefit is allowed are: -

- (1) the benefit shall not be paid in respect of any surgical procedures other than those defined herein as Surgical Procedures;
- (2) the benefit refers only to medically necessary (as defined below) surgical procedures performed at a hospital as in-patient;
- (3) written notice of any claim for the benefit must be given with necessary proof of the surgical procedures undergone by the Life Assured to the Company within 30 days from the date of discharge from the hospital. However, failure to do so shall not invalidate any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible, provided that such reasonable time does not exceed 60 days from the date of discharge from the hospital;
- (4) The maximum aggregate cover of Major Surgical Assistance Benefit granted by the Company under this and all the other policies of the Life Assured shall not exceed Rs 10,00,000/- (Rupees ten lakhs)

The Company shall not be liable to pay any sum under or in terms of the Supplementary Benefit, in the event of:

- Treatment which is not taken from recognised hospitals or doctors
- Pre existing injuries or illnesses. No benefit will be payable in respect of a claim which, in the opinion of our Chief Medical officer, results directly or indirectly from a condition for which the insured person has previously received treatment, or which had previously been diagnosed, or which he was aware of, at the commencement of the policy or within the first 6 months from the date of issue of policy.
- HIV/AIDS,
- congenital or hereditary diseases or physical defects,
- attempted suicide,
- self inflicted injury, drug abuse,
- injuries from natural disasters,
- war and civil commotion,
- criminal acts,
- taking part in flying activity other than as a passenger in a commercially licensed aircraft, (being a multi- engine aircraft) and
- by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yatch racing or any race, trial or timed motor sport.

Note 1: "Surgical Procedures" mean the following:-

CATEGORY: MAJOR PROCEDURES

1. Coronary artery bypass graft surgery
2. Heart valvotomy via open surgery [balloon valvuloplasty procedures are excluded]
3. Heart valve replacement using mechanical prosthesis via open heart surgery
4. Heart transplantation
5. Pericardiectomy for chronic constrictive pericarditis.
6. Major surgery of the aorta
7. Major surgery of the pulmonary artery
8. Lung transplant or combined heart-lung transplant
9. Open lobectomy of lung
10. Pneumonectomy or Pleuropneumonectomy
11. Pleural decortication / pleurectomy
12. Thoracoplasty
13. Surgery to remove benign cerebral tumours and space occupying lesions via craniotomy.
14. Repair of cerebral, spinal arterio-venous malformations, cerebral aneurysms and excision of cerebral tumours.
15. Partial / total pharyngectomy
16. Excision of pineal gland or pituitary gland
17. Kidney Transplant as a recipient

CATEGORY : INTERMEDIATE PROCEDURES

1. Coronary angioplasty with stent implantation
2. Excision of benign mediastinal lesions via thoracotomy
3. Other intra-cranial operations requiring craniotomy.
4. Total laryngectomy
5. Surgery for treatment of peptic ulcer (vagotomy, pyloroplasty, partial gastrectomy)
6. Resection and anastomosis of any part of alimentary canal.
7. Partial hepatectomy
8. Partial pancreatectomy
9. Total replacement of hip or knee

10. Total replacement of shoulder or elbow joint.
11. Bone marrow transplantation as a recipient
12. Complete or partial thyroidectomy.
13. Parathyroidectomy
14. Partial / total adrenalectomy
15. Partial / total excision of thymus gland.

CATEGORY: MINOR PROCEDURES

1. Balloon valvuloplasty
2. Initial implantation of permanent heart pacemaker
3. Cholecystectomy
4. Nephrectomy
5. Open/endoscopic prostatectomy*
6. Hysterectomy for malignant disease**
7. Amputation of an arm or a hand or a leg or a foot due to trauma or accident.
8. Splenectomy for haematological conditions
9. Corneal transplant or surgery for retinal detachment or glaucoma.
10. Major reconstructive oro-maxillafacial surgery for trauma or burns [not for cosmetic purpose]
11. Surgery for major burns [third degree burns of over 10% body surface area]

* Surgical procedure - Male lives

** Female lives

Note 2: "medically necessary" shall mean any medical and/or surgical service which is needed and consistent with established standards of good medical practice.

Note 3: "hospital" shall mean an establishment for indoor care and treatment of sickness and injuries which has been registered as a hospital with the local authorities and which:-

- (a) has one or more qualified "physicians" present at all times and is under the supervision of a registered and qualified medical practitioner;
- (b) is a place where daily medical records of patients are maintained and are accessible to the Company's authorised officer;
- (c) is a place which provides diagnostic and medical equipment and facilities needed in operations; and
- (d) is a place where in-patient facilities are available.

Note 4: "Physician" shall mean any person registered with the Indian Medical Council to render medical or surgical services, but excluding a person who is the Life Assured himself or a blood relative of the Life Assured.

Note 5: "hospital confinement" shall mean continuous confinement of at least 24 hours in a hospital.

Premium Review:

The premium for this benefit is guaranteed for five years only from the date of commencement of Policy. The Company reserves the right to carry out a general review of the experience from time to time and change the premium as a result of such review. The Company will give notice in writing about the change and the Life Assured will have the option not to pay any increased premium. In such a case the benefit will be appropriately reduced from the effective date of the change in premium and the Company will advise the Life Assured accordingly.

"The policy shall be subject to and be governed by this policy document and the terms and conditions of the schedule enclosed herewith including every endorsement by the Company and shall together form a single contract" (Ver A02: 3)

