Standard Policy Provisions

AEGON Religare CI Rider UIN - UIN 138B001V02

Product Description

"AEGON Religare CI Rider" is a non-linked non-participating rider. This is an add-on benefit which is in addition to the benefits under the Base Plan and this Rider is only granted along with the Base Plan.

A1. Definitions

AEGON Religare CI Rider, CI Rider or **this Rider** means the AEGON Religare Critical Illness Rider more fully described in this document. **CI Rider Premium** or **Rider Premium** means the premium payable by you for this Rider.

CI Rider Term or **Rider Term** is the period for which this Rider benefit is granted as per the Company's rules.

Waiting Period refers to the first 90 days from Date of Commencement of the CI Rider or Effective Date of Reinstatement of Policy whichever is later.

A2. Rider Benefit

We will pay the CI Rider Sum Assured in the event the Life Assured:

- is diagnosed to be suffering from any of the specified Critical Illness Conditions or has undergone a surgical procedure, as the case may be, as specified in Clause A2.1
- Survives the Critical Illness Condition for a period of at least 30 days from the date of diagnosis (the "stipulated survival period"); and
- Sends us a written notice of the claim within 60 days of such diagnosis while the Rider coverage is in force and provided that you furnish evidence, satisfactory to Us, in our sole discretion, of:
- The diagnosis that the Life Assured is suffering a Critical Illness Condition or has undergone a surgical procedure, as the case may be, as specified in Clause A2.1; and
- Any other information which we may consider as material to the processing of the claim.

A.2.1 Critical Illness Conditions

A "Critical Illness Condition" shall mean any one of the illnesses as defined hereunder:

CANCER

- I. 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.
- II. 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 T2NoMo......
 - iv. Papillary micro carcinoma of the thyroid less than 1 cm in diameter
 - v. Chronic lymphocyctic leukaemia less than RAI stage 3
 - vi. Microcarcinoma of the bladder
 - vii. All tumours in the presence of HIV infection.

CORONARY ARTERY BYPASS SURGERY

- I. 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.
- II. The following are excluded:
 - i. Angioplasty and/or any other intra-arterial procedures
 - ii. any key-hole or laser surgery

HEART ATTACK (Myocardial Infarction)

- I. 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.
- II. The following are excluded:
 - i. Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T

- ii. Other acute Coronary Syndromes
- iii. Any type of angina pectoris.

KIDNEY FAILURE (End-stage Renal failure)

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.

MAJOR ORGAN TRANSPLANT

- I. 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.
- II. The following are excluded:
 - i. Other stem-cell transplants
 - ii. Where only islets of langerhans are transplanted

STROKE

- I. 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.
- II. 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

PARALYSIS

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.

HEART VALVE SURGERY

The actual undergoing of open-heart valve surgery is to replace or repair one or moreheart valves, as a consequence of defects in, abnormalities of, or disease-affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty are excluded.

SURGERY FOR A DISEASE OF THE AORTA

The actual undergoing of surgery for a chronic disease of the aorta needing excision and surgical replacement of the diseased aorta with a graft. For the purpose of this definition aorta shall mean the thoracic and abdominal aorta but not its branches. Realization of the aortic surgry has to be confirmed by a specialist.

A3. Rider Premium

The CI Rider Premium is payable as per the frequency of Policy Premium payment mode under the Policy. Any tax on Rider Premium will be levied and collected in addition to the Rider Premium.

A3.1 Rider Premium Guarantee

The CI Rider Premium is guaranteed to remain constant for a period of 5 Policy years commencing from the Date of Commencement of the Rider coverage and the same shall be reviewed on an annual basis thereafter.

A4. Advance Premium

Advance installment premium will be accepted only for premium due date with in the same financial year. The premium so collected in advance shall only be adjusted on the due date of the premium.

A5. Discontinuance of Rider

If you wish to discontinue the CI Rider, you can intimate the Company by sending an application in the specified form and this Rider shall stand terminated with effect from the immediately following premium Due Date.

A6. Addition of Rider

This rider can be attached to a base plan on Policy commencement or at any time during the Policy Term (subject to acceptance of request by the Company and communication of the acceptance in writing to You). If this rider is attached at any time other than that on Policy Anniversary, the Rider Premium will be calculated based on age and outstanding term as of last Policy Anniversary. For the current year, pro-rated rider premium will calculated from the date of attachment to next policy anniversary. In case a rider is attached on policy anniversary, the level premium will be calculated based on age and outstanding term as of that date.

A7. Discontinuance of Premium

If any Policy Premium due remains unpaid even after the Grace Period of 30 days from the due date of the unpaid Policy Premium, the Policy will lapse together with this Rider with effect from the due date of the first unpaid Policy Premium. The lapsed Policy can be reinstated in accordance with provisions in the Policy. A lapsed rider can be reinstated subject to underwriting and other conditions as applicable to the reinstatement of the base Policy to which it is attached.

A8. Exclusions

We will not pay the CI Rider Sum Assured if a Critical Illness Condition results either directly or indirectly from any one of the following causes

- Any diagnosis of a Critical Illness Condition contracted or diagnosed during the Waiting Period.
- Any critical illness or event that has previously occurred in the life insured (i.e. the benefit is payable only if the disease is a first incidence, regardless of whether the earlier incidence occurred before the individual was covered or whether the insured was covered by the Company or another insurer).
- Taking or absorbing 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.
- Intentional self-inflicted injury, attempted suicide, while sane or insane.
- Any disease causing the death of the Life Assured within the stipulated survival period, measured from the date of incidence of the illness.

A9. Maturity and Surrender

A9.1 No benefit is payable on the Date of Maturity of the CI Rider. A9.2 No benefit is payable on the discontinuance of the CI Rider by way of surrender.

A10. Change in CI Rider Sum Assured

No change in Sum Assured is allowed

A11. Free Look Option

- If you are not satisfied with any of the terms and conditions of the rider, you may return the policy document to the Company for cancellation within:
- 15 days from the date you received it, if your Policy is not purchased through Distance marketing*

in case purchased through distance marketing*, 30 days from the date you received the PolicyOn cancellation of the rider during the freelook period, we will return the premium paid subject to the deduction of:

a) Stamp duty paid and

b) Expenses borne by the Company on medical examination, if any

The policy will terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.

*Distance marketing: Distance marketing includes every activity of solicitation (including lead generation) and sale of insurance products through the following modes: (i) Voice mode, which includes telephone-calling (ii) Short Messaging service (SMS) (iii) Electronic mode which includes e-mail, internet and interactive television (DTH) (iv) Physical mode which includes direct postal mail and newspaper & magazine inserts and (v) Solicitation through any means of communication other than in person.

A12. Termination

The CI Rider will terminate on the earliest of:

- i. Any diagnosis of a Critical Illness Condition contracted or diagnosed during the Waiting Period; the rider will be terminated without any value or refund of premium paid.
- ii. The date on which we receive a claim intimation from you under Clause A2.
- iii. The next premium Due Date following the receipt of a request by us of discontinuance of the CI Rider under Clause A5
- iv. The date on which the Policy is terminated.
- v. The Date of Maturity of the CI Rider stated in the Policy Schedule.
- vi. On discontinuance of premium as under Clause A7.