

# HDFC STANDARD LIFE INSURANCE COMPANY LIMITED

## Additional Policy Provisions

### Terminal Illness benefit

This booklet is numbered \_\_\_\_\_

#### 1. Benefits

If the Scheme Member is diagnosed as having a terminal illness (as defined below) and notifies the Insurer within the Policy Year, an amount as specified in the schedule shall be payable by the Insurer to the Policy Holder for the benefit of that Scheme Member.

The Insurer will pay the terminal illness benefit only if all of the following are satisfied:

- all due premiums have been paid
- the terminal illness has not occurred within 3 months of the date of the Scheme Member first being covered for terminal illness benefit (assuming an unbroken period of cover). If the cover period is broken then the 3 month period applies from the date terminal illness cover recommences in respect of the Scheme Member.
- the terminal illness benefit commenced prior to, and has not terminated prior to, the date of diagnosis of the terminal illness
- the terminal illness benefit commenced prior to, and has not terminated prior to, the date the Policy Holder notifies us of the terminal illness
- the Policy Holder files a claim with the Insurer in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the Insurer within 3 months from the date of diagnosis of the terminal illness
- the Policy Holder produces to the Insurer satisfactory proof from two practising medical consultants that the Scheme Member is suffering from a Terminal Illness as defined below. The medical specialisms must be appropriate to the cause of the claim and be accepted by our Chief Medical Officer.

## **2. Terminal Illnesses**

The Scheme Member must be suffering from a condition, which in the opinion of two practising medical consultants specialising in the relevant field of medicine, is highly likely to lead to death within six months. The Scheme Member must no longer be receiving treatment other than that for symptomatic relief.

## **3. Medical Evidence**

The Insurer may request the Scheme Member to undertake a medical examination or test, which in its opinion, is reasonable to determine the Terminal Illness. The Insurer will not accept a claim if the Scheme Member does not undertake any medical examination or test which the Insurer considers reasonable or necessary. The Insurer will not pay for any fees or expenses in connection with the production of medical evidence except for the fees and expenses for any medical examination or test which the Insurer has asked a medical practitioner to provide.

## **4. Termination of the rider benefit**

The Terminal Illness benefit on the life of a Scheme Member shall immediately terminate upon the happening of any of the following events and no benefits will be payable thereafter:

- (a) non-payment of the Premium by the Policy Holder before the start of the Policy Year, OR
- (b) the Scheme Member reaching the Terminal Date as defined in L1 of the Standard Policy Provisions.

## **5. Eligibility**

**Upon admittance of a terminal illness claim the Scheme Member ceases to be an Eligible Person, he will not be eligible to participate in the scheme at any future date and no benefits will be payable thereafter.**

## **6. Lapsing**

- (1) No amount of the benefit under this rider shall be payable on a terminal illness where the Insurer is notified on or after the Lapsing Date.
- (2) However, the same may be reinstated as provided under L12.

## 7. Exclusions

**(a) No benefit shall be payable, in respect of any claim arising within two years of a Scheme Member first being covered for terminal illness benefit (assuming an unbroken period of cover), which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at entry.**

**If the cover period is broken then no benefit shall be payable, in respect of any claim arising within two years from the date terminal illness cover recommences for a Scheme Member, which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at commencement.**

**(b) No Terminal Illness benefit is payable if the illness is caused directly or indirectly by any of the following:**

- **Intentionally self-inflicted injury or attempted suicide, irrespective of mental condition.**
- **Alcohol or solvent abuse, or the taking of drugs except under the direction of a registered medical practitioner.**
- **War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.**
- **Taking part in any flying activity, other than as a passenger in a commercially licensed aircraft.**
- **Taking part in any act of a criminal nature.**
- **Infection with Human Immunodeficiency Virus (HIV) or conditions due to any Acquired Immune Deficiency Syndrome (AIDS).**

## ADDITIONS TO THE RULES OF----- GROUP TERM INSURANCE SCHEME

### TERMINAL ILLNESS BENEFIT

#### 1. BENEFITS

If the Scheme Member is diagnosed as having a terminal illness (as defined below) and notifies the Insurer within the Policy Year, an amount as specified in the schedule shall be payable by the Insurer to the Policy Holder for the benefit of that Scheme Member.

#### 2. TERMINAL ILLNESSES

The Scheme Member must be suffering from a condition, which in the opinion of two practising medical consultants specialising in the relevant field of medicine, is highly likely to lead to death within six months. The Scheme Member must no longer be receiving treatment other than that for symptomatic relief.

#### 3. TERMINATION OF THE RIDER BENEFIT

The Terminal Illness benefit on the life of a Scheme Member shall immediately terminate upon the happening of any of the following events and no benefits will be payable thereafter:

- (a) non-payment of the Premium by the Policy Holder before the start of the Policy Year, OR
- (b) the Scheme Member reaching the Terminal Date as defined in XV of the Rules.

#### 4. ELIGIBILITY

**Upon admittance of a terminal illness the Scheme Member ceases to be an Eligible Person, he will not be eligible to participate in the scheme at any future date and no benefits will be payable thereafter.**

## 5. CLAIMS

The Policy holder shall inform the Insurer and shall file a claim with the Insurer on behalf of the Scheme Member in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the Insurer, within 3 months from the date of the diagnosis of the terminal illness.

The Insurer shall pay the claim amount in the name of the Scheme Member to the Policy Holder who shall give a valid discharge/ receipt for the same on behalf of the said Scheme Member to the Insurer.

## 6. EXCLUSIONS

**(a) No benefit shall be payable, in respect of any claim arising within two years of a Scheme Member first being covered for terminal illness benefit (assuming an unbroken period of cover), which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at entry.**

**If the cover period is broken then no benefit shall be payable, in respect of any claim arising within two years from the date terminal illness cover recommences for a Scheme Member, which results directly or indirectly from a condition for which the Scheme Member had previously received treatment or of which he was aware at commencement.**

**(b) No Terminal Illness benefit is payable if the illness is caused directly or indirectly by any of the following:**

- **Intentionally self-inflicted injury or attempted suicide, irrespective of mental condition.**
- **Alcohol or solvent abuse, or the taking of drugs except under the direction of a registered medical practitioner.**
- **War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.**
- **Taking part in any flying activity, other than as a passenger in a commercially licensed aircraft.**
- **Taking part in any act of a criminal nature.**
- **Infection with Human Immunodeficiency Virus (HIV) or conditions due to any Acquired Immune Deficiency Syndrome (AIDS).**