

# SAMPLE POLICY CONTRACT OF 20 YEARS DIRECT - GREAT TERM WITH DIRECT - GREAT CRITICAL CARE

## Cluses

### 1 Variation of this Contract of Insurance

- 1.1 This Policy may only be varied if the Company consents in writing. The Policyholder's and the Life Assured's statements made when applying for this Policy will be taken to be representations and not warranties, unless there is fraud. Any subsequent endorsement made by the Company will take effect from the date of the endorsement.
- 1.2 The Company may from time to time determine the manner in which this Policy is varied by way of an endorsement to the Policy document.

### 2 Residence, Occupation and Travel

This Policy is free from restrictions as regards to residence, occupation and travel.

### 3 Free Look

- 3.1 This Policy may be cancelled by written request to the Company within 14 days after the Policyholder receives the Policy document in which case premiums paid less medical fees incurred in assessing the risk under this Policy will be refunded.
- 3.2 If the Policy is sent by post it is deemed to have been delivered and received in the ordinary course of the post, 7 days after the date of posting.

### 4 Indisputability

The Company will not dispute the validity of this Policy during the lifetime of the Life Assured after two (2) years from the date of issue, or date of reinstatement of this Policy, whichever is later, unless there is fraud, non-payment of premiums, or claims which would have been denied if arising from exclusions.

For the avoidance of doubt, this clause only applies to life and critical illness policies and riders.

### 5 Premiums

- 5.1 The Policyholder has to pay all premiums on or before the due dates, without any need for the Company to inform the Policyholder that a premium is due.
- 5.2 This Policy will continue in force as long as the premiums are paid annually in advance. The Company will allow the premiums to be paid by half-yearly, quarterly or monthly instalments.
- 5.3 If there is a claim made on this Policy, the Company will deduct any future instalments needed to complete the full year's premium, from the claim proceeds.
- 5.4 In the event that the Company receives the Policyholder's written request for termination of this Policy, no refund of premiums shall be made by the Company to the Policyholder, except for a termination made under clause 3.

### 6 Confirmation of Age

- 6.1 The Policyholder must prove the date of birth of the Life Assured to the Company before the Company is required to pay any benefit under this Policy.
- 6.2 If the Life Assured's age is understated, the Company will pay the sum assured that the premium paid would have bought according to the rate at the actual age, and not the sum assured stated in the Schedule. If the Life Assured's age is overstated, the Company will refund any excess of premium paid.

## **7 Days of Grace**

- 7.1 The Policyholder has 30 days ("the grace period") from the due date of the premium to pay the renewal premium.
- 7.2 If the Life Assured dies during the grace period before the premium is paid, this Policy will be as valid and effective as though the premium has been paid. However, the Company will deduct all unpaid premiums needed to complete one full year's premium, from the claim proceeds.
- 7.3 This Policy will lapse and be null and void if there are still unpaid premiums at the end of the grace period and the Company will forfeit any premiums paid.

## **8 Suicide**

If the Life Assured dies by suicide, while sane or insane, within one year from the date of issue of this Policy or from the date of reinstatement, whichever is later, this Policy will be rendered void and the Company will refund all premiums paid to the Policyholder or to the legal personal representative of the estate of the Policyholder if the Policyholder and the Life Assured are the same person regardless of any assignment of this Policy.

## **9 Reinstatement**

If this Policy lapses under the Days of Grace clause, the Policyholder may reinstate it within 6 months from the date of lapsing, at the option of the Company, subject to the following conditions:

- (a) the Policyholder gives evidence of insurability satisfactory to the Company and if any medical reports or tests are required by the Company, the Policyholder will have to pay for these medical reports and tests;
- (b) the Policyholder has to inform the Company of any change in the health of the Life Assured or any circumstances that may affect the health of the Life Assured up to the date of reinstatement of this Policy; and
- (c) the Policyholder pays all unpaid premiums and any interest charged by the Company which have accumulated up to the date of reinstatement.

## **10 Notice of Assignment**

A written notice of assignment or charge on this Policy only binds the Company, if it is delivered to the Company at its head office or its branch offices. The Company is not responsible for the validity of the assignment or charge, by just acknowledging the notice.

## **11 Notices and Correspondence**

11.1 Any request, notice, instruction or correspondence required under this Policy whether to the Company or the Policyholder has to be in writing and will be delivered personally or sent by courier, or by post, or facsimile transmission or electronic mail addressed to the addressee or by any other means as approved or adopted or accepted by the Company. For the Policyholder, the mailing address is that stated in the proposal or any other address that the Policyholder has informed the Company in writing.

11.2 The Company's notice, request, instruction or communication is presumed to be received:

- (a) in the case of a letter, on the 7th day after posting if posted locally, and on the 14th day after posting, if posted overseas;
- (b) in the case of personal delivery or delivery by courier, on the day of delivery;
- (c) in the case of a facsimile transmission or electronic mail, on the business day immediately following the day of despatch; or
- (d) in the case of other means as approved, adopted or accepted by the Company, on the day that the Company decides is reasonable to receive the notice, request, instruction or correspondence.

**12 Governing Law**

This Policy will be governed by the laws of Singapore and the Courts of Singapore have exclusive jurisdiction for any disputes arising out of this Policy.

**13 Exclusion of the Contracts (Rights of Third Parties) Act Cap. 53B**

A person who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act Cap. 53B to enforce any of its terms.

----- End of page -----

SAMPLE

# GREAT EASTERN LIFE

## DIRECT - GREAT CRITICAL CARE

### 1. DEFINITIONS

“**Amount of Benefits**” refers to the amount of benefits shown in the Schedule of Supplementary Benefits to the Policy.

“**Critical Illness**” means any of the critical illnesses specified and defined in clause 4 below.

“**Expiry Date**” means the Expiry Date of this Rider shown in the Schedule of Supplementary Benefits to the Policy.

“**Medical Practitioner**” means a surgeon or physician qualified by degree in Western Medicine, who is legally and duly qualified to practise medicine and surgery and authorised in the geographical area of his practice.

“**Policy**” means the policy to which this Rider is attached.

“**Pre-existing Critical Illness**” means a Critical Illness for which prior to the date of commencement of this Rider or date of reinstatement (if applicable) of this Rider:

- (a) symptoms of the Critical Illness existed that would cause an ordinarily prudent person to seek diagnosis, care or treatment; or
- (b) medical advice or treatment was recommended by or received from a Medical Practitioner.

“**TPD Endorsement**” means Endorsement No. 716 (TPDDC1), attached to the Policy.

“**TI Endorsement**” means Endorsement No. 714 (TIDCIP1), attached to the Policy.

### 2. PREMIUM

2.1 The premium payable for this Rider is shown in the Schedule of Supplementary Benefits and it shall follow the same premium frequency as the payment of the Basic Life Premium shown in the Schedule. The Policyholder has to pay the premiums on or before the due dates, without any need for the Company to inform the Policyholder that a premium is due.

2.2 This Rider forms part of the Policy and is valid only if the Policy is valid. It will not participate in the profits of the Company and will not acquire a surrender value.

2.3 Amendment of Premium Rates

2.3.1 The Company may amend the rates of premium at any time provided that the amended rates apply to all riders of this class of insurance and the Policyholder has been notified of the amendments at least 45 days before the premium due date at which time the amended rates will apply.

2.3.2 The amended rates will apply according to the age next birthday of the Life Assured at the date of commencement of assurance under this Rider.

### 3. BENEFIT

While this Rider is in force and subject to the clauses in this Rider, the Company will provide the following benefits:

#### 3.1 Critical Illness

If the Life Assured is diagnosed with a Critical Illness, the Company will pay the Amount of Benefits in one lump sum, subject to sub-clause 3.2. The Company may deduct any debt owed under the Policy and/or any of its attaching riders and endorsements, including this Rider, from the Amount of Benefits payable.

#### 3.2 Benefit for Angioplasty & Other Invasive Treatment For Coronary Artery

3.2.1 If the Life Assured undergoes Angioplasty & Other Invasive Treatment For Coronary Artery (“Coronary Angioplasty”) as defined in clause 4(27) below, the Company will pay 10% of the Amount of Benefits (“the Angioplasty amount”) subject to the following conditions:

- (a) The Company will not pay any benefit under this sub-clause 3.2 for any future Coronary Angioplasty undergone by the Life Assured.
  - (b) After a claim is paid under this sub-clause 3.2, the Amount of Benefits will be reduced by the Angioplasty amount ("the reduced Amount of Benefits") and the Basic Sum Assured stated in the Schedule will likewise be reduced by the Angioplasty amount ("reduced Basic Sum Assured"). The Company will determine the new premium payable for the reduced Amount of Benefits and the reduced Basic Sum Assured.
  - (c) The Company will only pay the reduced Amount of Benefits for any other Critical Illness subsequently suffered by the Life Assured.
  - (d) The total Amount of Benefits for Coronary Angioplasty paid by the Company must not be more than S\$25,000 under this Rider, and all policies and riders on the Life Assured providing for benefits payable for Coronary Angioplasty.
- 3.2.2 Once the Company has paid benefits for Coronary Angioplasty under any other policies or riders on the same Life Assured up to the limit of S\$25,000 stated in sub-clause 3.2.1(d) above, the Company will not pay the benefit under this Rider for Coronary Angioplasty and the Company will not pay any benefit under sub-clause 3.2 for any future Coronary Angioplasty undergone by the Life Assured.

#### **4. DEFINITIONS OF CRITICAL ILLNESSES**

##### **4.1 Alzheimer's Disease / Severe Dementia**

Deterioration or loss of cognitive function as confirmed by clinical evaluation and imaging tests, arising from Alzheimer's disease or irreversible organic disorders, resulting in significant reduction in mental and social functioning requiring the continuous supervision of the Life Assured. This diagnosis must be supported by the clinical confirmation of an appropriate consultant and supported by the Company's appointed doctor.

The following are excluded:

- Non-organic diseases such as neurosis and psychiatric illnesses; and
- Alcohol related brain damage.

##### **4.2 Angioplasty & Other Invasive Treatment for Coronary Artery**

The actual undergoing of balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of minimum 60% stenosis, of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist.

Coronary arteries herein refer to left main stem, left anterior descending, circumflex and right coronary artery.

Payment under this condition is limited to 10% of the Sum Assured under this policy subject to a S\$25,000 maximum sum payable. This benefit is payable once only and shall be deducted from the amount of this Contract, thereby reducing the amount of the Sum Assured which may be payable herein.

Diagnostic angiography is excluded.

##### **4.3 Benign Brain Tumour**

Benign brain tumour means a non-malignant tumour located in the cranial vault and limited to the brain, meninges or cranial nerves where all of the following conditions are met:

- It has undergone surgical removal or, if inoperable, has caused a permanent neurological deficit; and
- Its presence must be confirmed by a neurologist or neurosurgeon and supported by findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques.

The following are excluded:

- Cysts;
- Abscess;
- Angioma;
- Granulomas;
- Vascular Malformations;
- Haematomas; and
- Tumours of the pituitary gland, spinal cord and skull base.

#### **4.4 Blindness (Irreversible Loss of Sight)**

Permanent and irreversible loss of sight in both eyes as a result of illness or accident to the extent that even when tested with the use of visual aids, vision is measured at 6/60 or worse in both eyes using a Snellen eye chart or equivalent test, or visual field of 20 degrees or less in both eyes. The blindness must be confirmed by an ophthalmologist.

The blindness must not be correctable by surgical procedures, implants or any other means.

#### **4.5 Coma**

A coma that persists for at least 96 hours. This diagnosis must be supported by evidence of all of the following:

- No response to external stimuli for at least 96 hours;
- Life support measures are necessary to sustain life; and
- Brain damage resulting in permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

For the above definition, medically induced coma and coma resulting directly from alcohol or drug abuse are excluded.

#### **4.6 Coronary Artery By-pass Surgery**

The actual undergoing of open-chest surgery or Minimally Invasive Direct Coronary Artery Bypass surgery to correct the narrowing or blockage of one or more coronary arteries with bypass grafts. This diagnosis must be supported by angiographic evidence of significant coronary artery obstruction and the procedure must be considered medically necessary by a consultant cardiologist.

Angioplasty and all other intra-arterial, catheter-based techniques, 'keyhole' or laser procedures are excluded.

#### **4.7 Deafness (Irreversible Loss of Hearing)**

Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by audiometric and sound-threshold tests provided and certified by an Ear, Nose, Throat (ENT) specialist.

Total means "the loss of at least 80 decibels in all frequencies of hearing".

Irreversible means "cannot be reasonably restored to at least 40 decibels by medical treatment, hearing aid and/or surgical procedures consistent with the current standard of the medical services available in Singapore after a period of 6 months from the date of intervention."

#### 4.8 End Stage Kidney Failure

Chronic irreversible failure of both kidneys requiring either permanent renal dialysis or kidney transplantation.

#### 4.9 End Stage Liver Failure

End stage liver failure as evidenced by all of the following:

- Permanent jaundice;
- Ascites; and
- Hepatic encephalopathy.

Liver disease secondary to alcohol or drug abuse is excluded.

#### 4.10 End Stage Lung Disease

End stage lung disease, causing chronic respiratory failure. This diagnosis must be supported by evidence of all of the following:

- FEV<sub>1</sub> test results which are consistently less than 1 litre;
- Permanent supplementary oxygen therapy for hypoxemia;
- Arterial blood gas analyses with partial oxygen pressures of 55mmHg or less (PaO<sub>2</sub> ≤ 55mmHg); and
- Dyspnea at rest.

The diagnosis must be confirmed by a respiratory physician.

#### 4.11 Fulminant Hepatitis

A submassive to massive necrosis of the liver by the Hepatitis virus, leading precipitously to liver failure. This diagnosis must be supported by all of the following:

- Rapid decreasing of liver size as confirmed by abdominal ultrasound;
- Necrosis involving entire lobules, leaving only a collapsed reticular framework;
- Rapid deterioration of liver function tests;
- Deepening jaundice; and
- Hepatic encephalopathy.

#### 4.12 Heart Attack of Specified Severity

Death of heart muscle due to ischaemia, that is evident by at least three of the following criteria proving the occurrence of a new heart attack:

- History of typical chest pain;
- New characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block;
- Elevation of the cardiac biomarkers, inclusive of CKMB above the generally accepted normal laboratory levels or Cardiac Troponin T or I at 0.5ng/ml and above;
- Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality. The imaging must be done by Cardiologist specified by the Company.

For the above definition, the following are excluded:

- Angina;
- Heart attack of indeterminate age; and
- A rise in cardiac biomarkers or Troponin T or I following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

Explanatory note: 0.5ng/ml = 0.5ug/L = 500pg/ml

#### **4.13 HIV Due to Blood Transfusion and Occupationally Acquired HIV**

- A. Infection with the Human Immunodeficiency Virus (HIV) through a blood transfusion, provided that all of the following conditions are met:
- The blood transfusion was medically necessary or given as part of a medical treatment;
  - The blood transfusion was received in Singapore after the Issue Date, Date of endorsement or Date of reinstatement of this Supplementary Contract, whichever is the later; and
  - The source of the infection is established to be from the Institution that provided the blood transfusion and the Institution is able to trace the origin of the HIV tainted blood.
- B. Infection with the Human Immunodeficiency Virus (HIV) which resulted from an accident occurring after the Issue Date, date of endorsement or date of reinstatement of this Supplementary Contract, whichever is the later whilst the Life Assured was carrying out the normal professional duties of his or her occupation in Singapore, provided that all of the following are proven to the Company's satisfaction:
- Proof that the accident involved a definite source of the HIV infected fluids;
  - Proof of sero-conversion from HIV negative to HIV positive occurring during the 180 days after the documented accident. This proof must include a negative HIV antibody test conducted within 5 days of the accident; and
  - HIV infection resulting from any other means including sexual activity and the use of intravenous drugs is excluded.

This benefit is only payable when the occupation of the Life Assured is a medical practitioner, housemen, medical student, state registered nurse, medical laboratory technician, dentist (surgeon and nurse) or paramedical worker, working in medical centre or clinic (in Singapore).

This benefit will not apply under either section A or B where a cure has become available prior to the infection. "Cure" means any treatment that renders the HIV inactive or non-infectious.

#### **4.14 Idiopathic Parkinson's Disease**

The unequivocal diagnosis of idiopathic Parkinson's Disease by a consultant neurologist. This diagnosis must be supported by all of the following conditions:

- The disease cannot be controlled with medication; and
- Inability of the Life Assured to perform (whether aided or unaided) at least 3 of the 6 "Activities of Daily Living" for a continuous period of at least 6 months.

For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.



#### 4.15 Irreversible Aplastic Anaemia

Chronic persistent and irreversible bone marrow failure, confirmed by biopsy, which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:

- Blood product transfusion;
- Bone marrow stimulating agents;
- Immunosuppressive agents; or
- Bone marrow or haematopoietic stem cell transplantation.

The diagnosis must be confirmed by a haematologist.

#### 4.16 Irreversible Loss of Speech

Total and irreversible loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist.

All psychiatric related causes are excluded.

#### 4.17 Major Burns

Third degree (full thickness of the skin) burns covering at least 20% of the surface of the Life Assured's body.

#### 4.18 Major Cancer

A malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells with invasion and destruction of normal tissue.

The term Major Cancer includes, but is not limited to, leukemia, lymphoma and sarcoma.

Major Cancer diagnosed on the basis of finding tumour cells and/or tumour-associated molecules in blood, saliva, faeces, urine or any other bodily fluid in the absence of further definitive and clinically verifiable evidence does not meet the above definition.

For the above definition, the following are excluded:

- All tumours which are histologically classified as any of the following:
  - Pre-malignant;
  - Non-invasive;
  - Carcinoma-in-situ (Tis) or Ta;
  - Having borderline malignancy;
  - Having any degree of malignant potential;
  - Having suspicious malignancy;
  - Neoplasm of uncertain or unknown behaviour; or
- All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia;
- Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification;
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;

- All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below;
- All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;
- All Gastro-Intestinal Stromal tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual, or below;
- Chronic Lymphocytic Leukaemia less than RAI Stage 3;
- All bone marrow malignancies which do not require recurrent blood transfusions, chemotherapy, targeted cancer therapies, bone marrow transplant, haematopoietic stem cell transplant or other major interventionist treatment; and
- All tumours in the presence of HIV infection.

#### **4.19 Major Head Trauma**

Accidental head injury resulting in permanent neurological deficit to be assessed no sooner than 6 weeks from the date of the accident. This diagnosis must be confirmed by a consultant neurologist and supported by relevant findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques. "Accident" means an event of violent, unexpected, external, involuntary and visible nature which is independent of any other cause and is the sole cause of the head Injury.

The following are excluded:

- Spinal cord injury; and
- Head injury due to any other causes.

#### **4.20 Major Organ / Bone Marrow Transplantation**

The receipt of a transplant of:

- Human bone marrow using haematopoietic stem cells preceded by total bone marrow ablation; or
- One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end stage failure of the relevant organ.

Other stem cell transplants are excluded.

#### **4.21 Motor Neurone Disease**

Motor neurone disease characterised by progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurones which include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis. This diagnosis must be confirmed by a neurologist as progressive and resulting in permanent neurological deficit.

#### **4.22 Multiple Sclerosis**

The definite diagnosis of Multiple Sclerosis, and must be supported by all of the following:

- Investigations which unequivocally confirm the diagnosis to be Multiple Sclerosis; and
- Multiple neurological deficits which occurred over a continuous period of at least 6 months.

Other causes of neurological damage such as SLE and HIV are excluded.

#### **4.23 Muscular Dystrophy**

The unequivocal diagnosis of muscular dystrophy must be made by a consultant neurologist. The condition must result in the inability of the Life Assured to perform (whether aided or unaided) at least 3 of the 6 "Activities of Daily Living" for a continuous period of at least 6 months.

For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

#### **4.24 Open Chest Heart Valve Surgery**

The actual undergoing of open-heart surgery to replace or repair heart valve abnormalities. The diagnosis of heart valve abnormality must be supported by cardiac catheterization or echocardiogram and the procedure must be considered medically necessary by a consultant cardiologist.

#### **4.25 Open Chest Surgery to Aorta**

The actual undergoing of major surgery to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta through surgical opening of the chest or abdomen. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

Surgery performed using only minimally invasive or intra-arterial techniques are excluded.

#### **4.26 Paralysis (Irreversible Loss of Use of Limbs)**

Total and irreversible loss of use of at least 2 entire limbs due to injury or disease persisting for a period of at least 6 weeks and with no foreseeable possibility of recovery. This condition must be confirmed by a consultant neurologist.

Self-inflicted injuries are excluded.

#### **4.27 Primary Pulmonary Hypertension**

Primary Pulmonary Hypertension with substantial right ventricular enlargement confirmed by investigations including cardiac catheterisation, resulting in permanent physical impairment of at least Class IV of the New York Heart Association (NYHA) Classification of Cardiac Impairment.

The NYHA Classification of Cardiac Impairment:

Class I: No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, dyspnea, or anginal pain.

Class II: Slight limitation of physical activity. Ordinary physical activity results in symptoms.

Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.

Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

#### **4.28 Severe Bacterial Meningitis**

Bacterial infection resulting in severe inflammation of the membranes of the brain or spinal cord resulting in significant, irreversible and permanent neurological deficit. The neurological deficit must persist for at least 6 weeks. This diagnosis must be confirmed by:

- The presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and
- A consultant neurologist.

Bacterial Meningitis in the presence of HIV infection is excluded.

#### **4.29 Severe Encephalitis**

Severe inflammation of brain substance (cerebral hemisphere, brainstem or cerebellum) and resulting in permanent neurological deficit which must be documented for at least 6 weeks. This diagnosis must be certified by a consultant neurologist, and supported by any confirmatory diagnostic tests.

Encephalitis caused by HIV infection is excluded.

#### **4.30 Stroke with Permanent Neurological Deficit**

A cerebrovascular incident including infarction of brain tissue, cerebral and subarachnoid haemorrhage, intracerebral embolism and cerebral thrombosis resulting in permanent neurological deficit. This diagnosis must be supported by all of the following conditions:

- Evidence of permanent clinical neurological deficit confirmed by a neurologist at least 6 weeks after the event; and
- Findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques consistent with the diagnosis of a new stroke.

The following are excluded:

- Transient Ischaemic Attacks;
- Brain damage due to an accident or injury, infection, vasculitis, and inflammatory disease;
- Vascular disease affecting the eye or optic nerve;
- Ischaemic disorders of the vestibular system; and
- Secondary haemorrhage within a pre-existing cerebral lesion.

The following two terms can be found in some of the above definitions, and their meanings are as follows:

##### **1. Permanent Neurological Deficit**

Permanent means expected to last throughout the lifetime of the Life Assured.

Permanent neurological deficit means symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the lifetime of the Life Assured. Symptoms that are covered include numbness, paralysis, localized weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, dementia, delirium and coma.

##### **2. Activities of Daily Living (ADLs)**

- (i) Washing - the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- (ii) Dressing - the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- (iii) Transferring - the ability to move from a bed to an upright chair or wheelchair and vice versa;
- (iv) Mobility - the ability to move indoors from room to room on level surfaces;
- (v) Toileting - the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- (vi) Feeding - the ability to feed oneself once food has been prepared and made available.

## 5. EXCEPTIONS

The Company will not pay any benefits:

- (a) if there was a Pre-existing Critical Illness which is the same Critical Illness which is the subject of a claim under this Rider;
- (b) for Heart Attack of Specified Severity, Major Cancer, Coronary Artery By-pass Surgery, or Angioplasty & Other Invasive Treatment for Coronary Artery, if the diagnosis of any such medical conditions or the diagnosis of any medical conditions resulting in such medical procedures being performed on the Life Assured was made within 90 days from the date of commencement of this Rider. If this Rider was reinstated, the Company will also not provide the benefits if the diagnosis of any such medical conditions or the diagnosis of any medical conditions resulting in such medical procedures being performed on the Life Assured was made within 90 days of the date of reinstatement of this Rider.
- (c) for any medical condition suffered by the Life Assured or any medical procedure undergone by the Life Assured if it:
  - (i) resulted directly or indirectly from self-inflicted injuries, while sane or insane.
  - (ii) resulted directly or indirectly from any physical or health impairment or disease which existed but was not disclosed to the Company as at each of the following:
    - (1) the date of commencement of this Rider;
    - (2) the date of issue of the Policy;
    - (3) the date of reinstatement of this Rider (if applicable); and
    - (4) the date of reinstatement of the Policy (if applicable).

## 6. CONDITIONS

- 6.1 Policyholder must notify the Company in writing and produce satisfactory proof of the Critical Illness on forms furnished by the Company within six months from the date of commencement of the Critical Illness.
- 6.2 The Critical Illness must be diagnosed by a registered Medical Practitioner and must be supported by clinical, radiological, histological and laboratory evidence acceptable to the Company.
- 6.3 All medical reports and any other evidence required by the Company for any claim must be furnished at the Policyholder's expense.
- 6.4 If required by the Company, the Life Assured must undergo medical examination by the Medical Practitioner appointed by the Company.
- 6.5 When a claim has been admitted, and the Amount of Benefits is equal to the Basic Sum Assured stated in the Schedule, all rights, options, values and benefits under the Policy, including benefits payable on death or survival of the Life Assured, under the TPD Endorsement (if any) and under the TI Endorsement (if any) will not be valid from the date of diagnosis of the Critical Illness. However, such termination will not affect any claim which arises before the date of diagnosis of the Critical Illness.
- 6.6 The Company will not be liable if there is a failure to comply with any of the above conditions.
- 6.7 The Company will not pay more than S\$3,000,000 of the total amount of sums assured under this Rider and all policies and riders issued by the Company on the same Life Assured which provide similar benefits payable for medical conditions similar to Critical Illness.

## 7. TERMINATION

7.1 This Rider will terminate on the earliest of the following dates:

- (a) when the Company receives the Policyholder's written request for termination of this Rider, in which event, no refund of premium shall be made by the Company to the Policyholder;
- (b) on the Expiry Date;
- (c) the Policy lapses, is surrendered, or is otherwise terminated; or
- (d) when one hundred percent (100%) of the Amount of Benefits has been paid due to claims admitted under clauses 3.1.

----- End of page -----

SAMPLE

## **GREAT EASTERN LIFE**

**ENDORSEMENT NO. 642 (PPF-1)**

### **POLICY OWNERS' PROTECTION SCHEME**

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact us or visit the Life Insurance Association (LIA) or SDIC websites ([www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

-----End of page-----

SAMPLE

# GREAT EASTERN LIFE

## ENDORSEMENT NO. 714 (TIDCIP1)

### TERMINAL ILLNESS BENEFIT

#### 1. DEFINITIONS

"**Basic Sum Assured**" refers to the Basic Sum Assured shown in the Schedule to the Policy.

"**Disability Benefit**" refers to the disability benefit as defined in the TPD Endorsement.

"**Expiry Date**" means the expiry date shown in the Schedule to the Policy.

"**Medical Practitioner**" means a surgeon or physician qualified by degree in Western Medicine, who is legally and duly qualified to practise medicine and surgery and authorised in the geographical area of his practice.

"**Terminal Illness**" refers to a conclusive diagnosis of an illness that is expected to result in the death of the Life Assured within 12 months of the diagnosis. Terminal illness in the presence of HIV infection is excluded.

"**TPD Endorsement**" refers to Endorsement No. 716 (TPDDC1) attached to the Policy.

#### 2. BENEFITS

2.1 If the Life Assured is diagnosed with a Terminal Illness, the Company will pay the Basic Sum Assured in one lump sum and the Policy will terminate.

2.2 All outstanding instalments of premiums up to the Policy Anniversary following the date on which the Life Assured is diagnosed with a Terminal Illness will be deducted from the benefit payable before the balance amount is paid.

#### 3. CONDITIONS

3.1 The Policyholder must notify the Company in writing and produce satisfactory proof of the Terminal Illness on forms furnished by the Company within six months from the date of commencement of the Terminal Illness.

3.2 The Terminal Illness must be diagnosed by a registered Medical Practitioner and must be supported by clinical, radiological, histological and laboratory evidence acceptable to the Company.

3.3 All medical reports and any other evidence required by the Company for any claim must be furnished at the Policyholder's expense.

3.4 If required by the Company, the Life Assured must undergo medical examination by the Medical Practitioner appointed by the Company. If the Life Assured refuses to undergo the medical examination by the Medical Practitioner, the Company reserves the right not to pay the Basic Sum Assured.

3.5 The Company will not be liable if there is a failure to comply with any of the above conditions.

#### 4. TERMINATION

4.1 The Policy will terminate on the earliest of the following dates:

- (a) the date when the Company receives the Policyholder's written request for termination of this Policy;
- (b) the date of death of the Life Assured;
- (c) the date that the Disability Benefit is paid under the TPD Endorsement;
- (d) the date on which the Life Assured is diagnosed with a Terminal Illness;
- (e) the date when the Policy lapses; or
- (f) the Expiry Date.

----- End of page -----



# GREAT EASTERN LIFE

## ENDORSEMENT NO. 716 (TPDDC1)

### TOTAL AND PERMANENT DISABILITY BENEFIT

#### 1. DEFINITIONS

“**Disability Benefit**” means the Basic Sum Assured shown in the Schedule to the Policy.

“**Date of Commencement**” refers to the Date of Commencement shown in the Schedule to the Policy.

“**Expiry Date**” means the expiry date shown in the Schedule to the Policy.

“**Medical Practitioner**” means a surgeon or physician qualified by degree in Western Medicine, who is legally and duly qualified to practise medicine and surgery and authorised in the geographical area of his practice.

“**Policy Anniversary**” refers to any anniversary of the Date of Commencement stated in the Schedule to the Policy.

“**TPD**” means such total and permanent disability as defined in clause 3 below.

#### 2. BENEFITS

While the Policy is in force, if the Life Assured suffers from TPD, the Company will pay the Disability Benefit in one lump sum and the Policy will terminate, subject to the following conditions:

- (a) The Life Assured's disability under clause 3 must occur before the Policy Anniversary on which his age next birthday is 65 years.
- (b) All outstanding instalments of premiums up to the Policy Anniversary following the date on which the Life Assured suffers from the TPD will be deducted from the Disability Benefit before the balance amount is paid.
- (c) The total amount of the sum assured for the payment of the Disability Benefit to be made by the Company is limited to S\$5,000,000 under this and all policies and riders issued by the Company on the same Life Assured, giving similar benefits.

#### 3. DEFINITION OF TOTAL AND PERMANENT DISABILITY

The disability is total and permanent only if:

- (a) The Life Assured, due to accident or sickness, is disabled to such an extent as to be rendered totally unable to engage in any occupation, business or activity for income, remuneration or profit; and the disability must continue uninterrupted for at least 6 consecutive months from the time when the disability started (“**Deferment Period**”); and the disability must, in the view of a medical examiner appointed by the company, be deemed permanent with no possibility of improvement in the foreseeable future; or
- (b) The Life Assured, due to accident or sickness, suffers total and irrecoverable loss of use of:
  - (i) the entire sight in both eyes;
  - (ii) any two limbs at or above the wrist or ankle; or
  - (iii) the entire sight in one eye and any one limb at or above the wrist or ankle.

#### 4. EXCEPTIONS

Payment of the Disability Benefit will not be made for TPD resulting from:

- (a) self-inflicted injury, while sane or insane;
- (b) bodily injury sustained while in or on an aircraft other than:
  - (i) as a fare-paying passenger or a crew member on an aircraft licensed for passenger service and operated by a regular airline on a scheduled route; or
  - (ii) as a member of the armed forces travelling as a passenger in a military transport aircraft; or
- (c) any physical or health impairment or disease which existed but was not disclosed to the Company at the date of issue of the Policy or at the date of any reinstatement.

#### 5. CONDITIONS

- 5.1 The Policyholder must notify the Company in writing of any claim as soon as it is practicable. In any case, the Policyholder must produce satisfactory proof of the TPD on forms furnished by the Company within six months after the Deferral Period.
- 5.2 All medical reports and any other evidence required by the Company for any claim must be furnished at the Policyholder's expense.
- 5.3 The TPD suffered by the Life Assured must be certified by a registered Medical Practitioner and must be supported by clinical, radiological, histological and laboratory evidence acceptable to the Company
- 5.4 If required by the Company, the Life Assured must undergo medical examination by a Medical Practitioner appointed by the Company in connection with the alleged TPD. The Company reserves the right to obtain medical evidence at its own expense at any time to confirm the Policyholder's continuing TPD.
- 5.5 The Company will not be liable if there is a failure to comply with any of the above conditions.
- 5.6 All valid claims under this Endorsement will extinguish other rights and options, values and benefits under the Policy, including benefits payable on survival of the Life Assured.

#### 6. CANCELLATION

This Endorsement is cancelled on the Expiry Date or if the Policy lapses or is surrendered or is otherwise terminated.

----- End of page -----