

A health plan that is also a life cover!

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Plan at a glance:



Inbuilt life cover
 Cover for death and terminal illness



Zero survival period
 File for claim immediately on diagnosis



Payouts at different stages of illness¹
 Lump sum payouts at mild, moderate and severe stages



Return of Premium (net of claims paid)²
 Balance of your premiums back on maturity

Non-linked, Non-Participating health insurance plan

Every 13th new Cancer patient in the world is Indian, most of them women. In 2016 alone, India will see an estimated 1.45 million new cancer cases.^

Trends also indicate increased incidences of Heart diseases in the younger age groups in India.*

While incidences of Cancer and Heart related diseases are increasing at an alarming rate, it is encouraging that survival rates have improved significantly due to advances in medicine. Yet, the cost of treatment can be very expensive, impacting not only hard-earned savings but also all future life goals.

Are you financially protected against Cancer and Heart diseases?

PNB MetLife Mera Heart and Cancer Care is a tailor-made plan to provide you with comprehensive cover against all stages of cancer and heart diseases.



Key Benefits

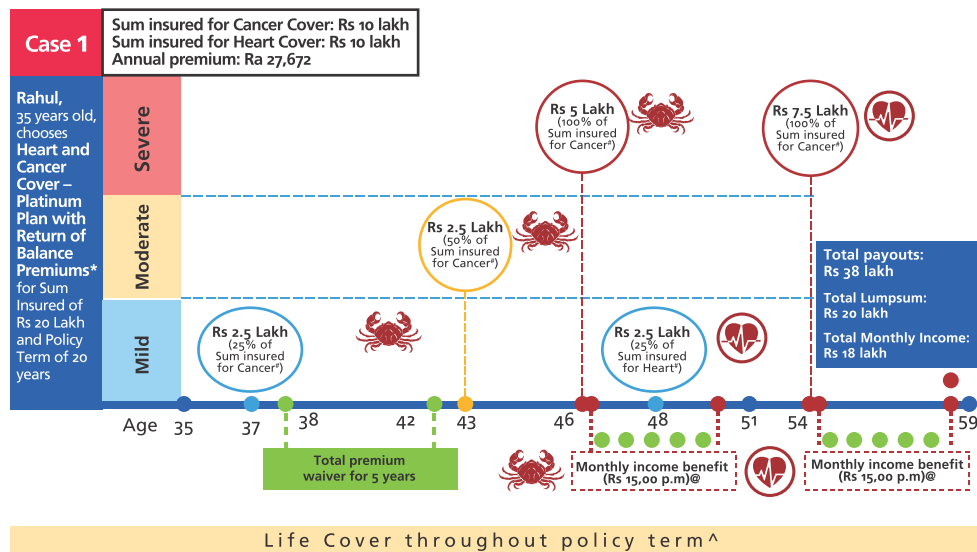
- **Customize your coverage**
 - Decide to cover yourself against Cancer, Heart or both diseases
 - Get lump sum payouts at Mild, Moderate and Severe stages of illness
 - Get waiver of future premiums for next 5 policy years on first diagnosis of Mild or Moderate conditions covered under the policy
 - Opt for additional monthly income in case of severe stage claim (Platinum Plan)
 - Choose to get the balance of your premiums back on maturity, less claims, with Return of balance premium option
 - Plan your coverage period - 10, 15 or 20 years
 - Inbuilt Life Cover and Terminal Illness cover, from day 1.
- **Special benefits for Women** - Female specific cancers covered, at special rates for women
- **Tax benefits:** Avail tax benefits on premiums paid and benefits received, as per prevailing tax laws

Health Insurance cover available for		Heart	Cancer	Heart and Cancer
Plans available		Gold Plan		Platinum Plan
Key Benefits		Gold Plan		Platinum Plan
Heart cover/ Cancer Cover/ Heart and cancer Cover	Mild stage	25% of Sum insured	25% of Sum insured	
	Moderate stage	50% of sum insured	50% of sum insured	
	Severe stage	100% of Sum insured	100% of Sum insured	
Policy term available		10 years, 15 years, 20 years		
Premium waiver benefit		✓		✓
optional return of balance premiums (if healthy)		✓		✓
Additional Monthly Income Benefit to take care of medical expenses upon severe stage claim		✗		✓
Death / Terminal illness benefit		✓		✓

*Sample Registration System. Available from: http://www.censusindia.gov.in/2011-Common/Sample_Registration_System.html.

^Generic information available in public domain through Google.com

How does the plan work?

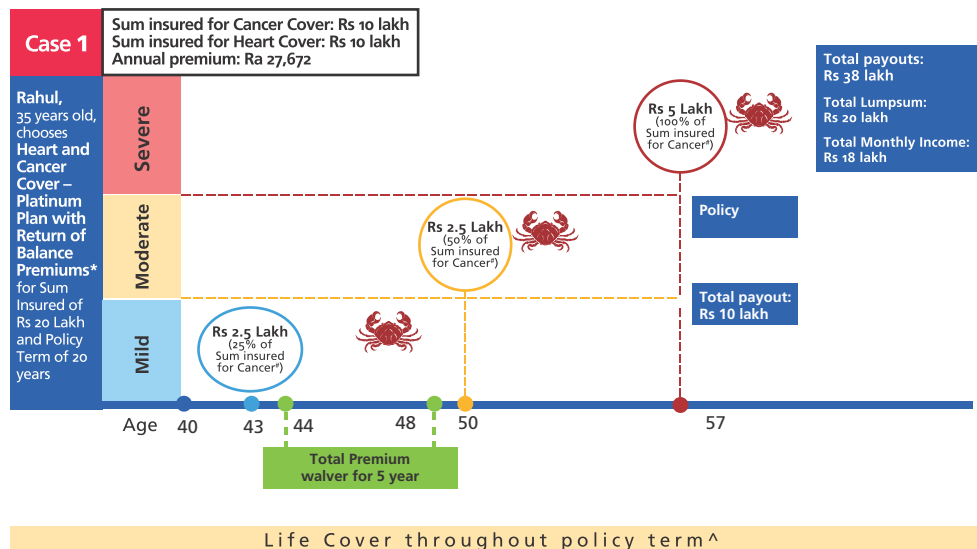


#Post the first pay out, all subsequent pay outs for Cancer or Heart disease will be net of any claims paid in the earlier stages for that disease, depending on cover option chosen. Pay out on death or terminal illness will be net of all claims paid. Policy will terminate on payouts of applicable severe claim(s), or on death/terminal illness, whichever is earlier.

*In case Rahul survives till maturity and the policy is in-force, he gets back all premiums paid (excluding the extra premiums and Service Taxes) during the Policy Term less any critical illness claims paid.

^In case of unfortunate demise of Rahul within the Policy Term, his nominee receives a Death Benefit amount of Rs. 20 Lakhs less any critical illness claims paid till date of death. In case Rahul is diagnosed with a Terminal Illness, he received Rs. 20 Lakhs less any critical illness claims paid.

@In case of Rahul's demise during the Income Period, his nominee will receive the remaining instalments of income as scheduled.



#Post the first pay out, all subsequent pay outs for Cancer or Heart disease will be net of any claims paid in the earlier stages for that disease, depending on cover option chosen. Pay out on death or terminal illness will be net of all claims paid. Policy will terminate on payouts of applicable severe claim(s), or on death/terminal illness, whichever is earlier.

*In case Rahul survives till maturity and the policy is in-force, he gets back all premiums paid (excluding the extra premiums and Service Taxes) during the Policy Term less any critical illness claims paid.

Conditions Covered	Gold Plan	Platinum Plan
Mild stage	<ul style="list-style-type: none"> • Angioplasty (stenting for Coronary Arteries) • Angioplasty and Stenting for Carotid Arteries • Endarterectomy • Renal Angioplasty • Percutaneous Procedures for Repair or Replacement of Heart Valves • Pericardectomy • Minimally Invasive Surgery for Aortic Aneurysm • Infective Endocarditis 	<ul style="list-style-type: none"> • Specified early stage Cancer or • Carcinoma-in-situ
Moderate stage	<ul style="list-style-type: none"> • Initial implantation of Permanent Pacemaker of Heart or Insertion of Implantable Cardioverter defibrillator (ICD) • Surgery to place Ventricular Assist Devices or Total Artificial Hearts 	<ul style="list-style-type: none"> • Mastectomy for Carcinoma-in-situ of the breast • Orchiectomy for Carcinoma-in-situ of the testis • Cystectomy for Carcinoma-in-situ of the Urinary Bladder/T1NoMo Urinary Bladder Cancer • Total abdominal Hysterectomy and Bilateral Salpingo-Oophorectomy for Carcinoma-in-situ of the Cervix/Carcinoma-in-situ of the Uterus/Carcinoma-in-situ of the Ovary
Severe stage	<ul style="list-style-type: none"> • Myocardial infarction (First Heart Attack-of Specified Severity) • Cardiomyopathy • Major surgery of the Aorta • Open Chest CABG • Open Heart Replacement or Repair of Heart Valves • Heart Transplant 	<ul style="list-style-type: none"> • Major Cancer

Please note:

- Claims will be payable in increasing order of severity within that cover option.
- If the life insured claims for different stages of the same Cancer at the same time, the policy will pay the highest claim which is admitted under the policy. If there is more than one Cancer diagnosed in an event, the Company will pay benefit under any one condition, which will relate to the stage of Cancer which has the highest applicable benefit amount.
- Please refer the section on definitions for detailed description of all these conditions.

Benefits in details

		Gold Plan	Platinum Plan
Heart Cover/ Cancer Cover/ Heart and Cancer Cover##	Mild stage	25% of Sum insured	
	Moderate stage	50% of Sum insured	
	Severe stage	100% of Sum insured	
Premium waiver Benefit	On a valid Mild or Moderate claim under an in-force policy, future premiums for the next 5 years will be waived off. This benefit will only be available on the first instance of a valid Mild or Moderate claim. In case the outstanding policy term is less than 5 years, premiums for the outstanding term will be waived off.		
Maturity Benefit	If you choose the Return of Balance Premium option, you will receive the sum of all premiums, less critical illness claims already paid, at the end of chosen policy term. No maturity benefit will be paid under without return of balance premium option.		
Death/Terminal Illness Benefit**	Death benefit is payable on earlier occurrence of either Death or diagnosis of Terminal Illness. Death benefit will be Sum insured on death less any critical illness claims paid.		
Monthly Income Benefit^^	An additional monthly income benefit of 1.5% of sum insured is paid, on Severe stage claim for a fixed period of five years, from the date of claim. The monthly income benefit is in addition to all the benefits described under the plan		

##Notes for Benefits under Heart Cover/ Cancer Cover/ Heart and Cancer Cover:

- The benefits payable at each stage will be less any claims paid in the earlier stages.
- The benefits payable at each stage shall be paid either on the first diagnosis of any of the covered illnesses or first performance of any of the covered surgeries net of any claims paid in the earlier stages, if any.
- Any payment made in the mild stage is subject to a maximum of Rs 6,00,000, while payments in the moderate stage are subject to a maximum of Rs 12,00,000. Payments in the severe stage shall always be 100% of sum insured for Heart cover/Cancer cover (as applicable), less payments made in prior stages.
- When Heart and Cancer cover is opted, benefits would be payable as per the above schedule for Heart cover and Cancer cover separately.
- Only one claim is permissible under each of these stages for Heart cover/Cancer cover. If Heart and Cancer cover is chosen, then one claim each would be admissible for Heart cover and Cancer cover under each of the stages. In no case, the total claim payouts will exceed 100% of the chosen Sum Insured.
- The policy terminates with the payment of severe stage claim. In case of Heart and

Cancer cover, the policy terminates with the severe payouts under both the covers.

**Notes for Death Benefit:

- Sum insured on death will be highest of the following:
 - 10 times annualized premium, where Annualized Premium shall be the premium payable in a year, excluding the underwriting extra premiums and loadings for modal premiums, if any or
 - 105% of all premiums paid as on date of death, (all the premiums' shall be calculated as Annualized Premium X number of years for which premiums have been paid) or
 - Sum Insured, which is the total cover opted by life insured. In case of Heart and Cancer Cover, the sum insured is the sum total of sum insured's under both cancer cover and heart cover.
- The policy terminates with the payment of terminal illness or death claim amount.
- There is no waiting period in case of death.
- Please refer section 'Terms and conditions' for the details of terminal illness

^^Notes for Monthly Income Benefit:

- In case Heart and Cancer cover is chosen, the income benefit triggers twice, on occurrence of the Severe stage claim of both critical illnesses.
- In the event of the life insured's death while receiving the Income benefit, the remaining payouts will be paid to his/her nominee as scheduled.

In case the waiver of premium benefit has been triggered, the premiums waived during this benefit period shall also be considered along with premiums paid by the policyholder for calculation of the 'return of balance premium benefit', and for calculation of 'death benefit'.

Plan at a glance

		Minimum	Maximum
Sum insured (Rs)	Cancer Cover	5,00,000	40,00,000
	Heart Cover	5,00,000	40,00,000
	Heart and Cancer Cover	10,00,000	80,00,000
Entry age (years)&		18	65
Maturity age (years)&		28	75
Policy Term (years)		10 / 15 / 20	
Premium Payment Term		Equal to policy term	
Premium Payment Modes		Yearly / Half Yearly / Monthly ⁸	

&All references to age are as on age last birthday

*Monthly mode is available for SI/direct debit options (including ECS, ACH)

In case of Heart and Cancer cover being taken, the sum insured chosen is split equally between sum insured for Cancer cover and sum insured for Heart cover.

Other benefits

Surrender Benefit

Surrender benefit is payable only if with return of balance premium option is chosen.

After paying regular premiums for at least three full years from the date of commencement of the policy, Surrender Value, which is higher of Guaranteed Surrender Value (GSV) and Special Surrender Value (SSV), shall be payable, less any critical illness claims paid, if any.

The GSV and SSV rates are expressed as a percentage of total premiums paid under the Policy.

The policy shall be considered terminated on the date on which the surrender benefits are settled under the policy.

Special benefits for Women

Cancers for female-specific organs like breast cancer, cervical cancer etc. are covered under the Cancer cover offered under this plan. The policy also offers special rates for a female life insured

Flexible premium payment modes & modal factors

You may elect to pay premiums by Yearly, Half Yearly, or Monthly mode subject to the minimum annualised premium under each mode.

Factors on premium will be applicable as per the table below:

Premium Paying Mode	Modal Factors
Half Yearly	0.5131
Monthly	0.0886

No changes to the premium payment mode will be permitted during the Premium Payment Term.

High Sum Insured Discount

You will be eligible for a high sum insured discount as mentioned below:

Sum Insured Intervals (Inclusive)	Modal Factors
500000 - 1000000	Nil
1000001 - 1500000	Rs 0.5
1500001 - 2500000	Rs 1
Above 2500000	Rs 1.5

Premium Discount

No premium discount is offered when only Heart cover or Cancer cover is chosen. However, if both Heart and Cancer cover are taken, discount is offered on individual Heart cover and Cancer cover premiums as mentioned in the table below:

Age	Premium Discounts on Heart and Cancer Cover	Age	Premium Discounts on Heart and Cancer Cover
18	26.00%	42	12.00%
19	25.50%	43	11.00%
20	25.00%	44	10.00%
21	24.50%	45	9.50%
22	24.00%	46	9.00%
23	23.50%	47	8.80%
24	23.00%	48	8.50%
25	22.50%	49	8.30%
26	22.00%	50	8.00%
27	21.50%	51	7.50%
28	21.00%	52	7.00%
29	20.50%	53	6.80%
30	20.00%	54	6.50%
31	19.00%	55	6.30%
32	18.00%	56	6.00%
33	17.50%	57	5.80%
34	17.00%	58	5.40%
35	16.50%	59	5.10%
36	16.00%	60	4.80%
37	15.50%	61	4.20%
38	15.00%	62	3.80%
39	14.00%	63	3.10%
40	13.00%	64	2.50%
41	13.00%	65	2.00%

Grace period

If premiums are not paid on their due dates, a grace period of 30 days (15 days for monthly mode) from the due date of unpaid premium will be allowed for payment of premium without interest. During the grace period the policy shall continue to be in force for all the insured events.

Premium Discontinuance

Lapse

If due Instalment Premium is not paid in full within the Grace Period, then the Policy shall Lapse and the insurance cover will cease.

Revival

A lapsed policy may be revived, during the Policy Term, within a Revival Period of two years from the date of first unpaid premium by submitting proof of continued insurability as per Board approved underwriting policy and making the payment of all due premiums together with interest payment at such rate as may be prevailing at the time of the payment.

Revival request will attract the following:

- **Waiting period of 180 days will not reapply –**
 - Provided a continuous waiting period of 180 days has been served, and
 - If the policy is revived within 60 days of lapse
- **For all other cases, the waiting period will begin afresh.**

A surrendered policy cannot be revived.

Terms & Conditions

Waiting Period and Survival Period

There is an initial waiting period of 180 days from the date of commencement of the policy or from the date of revival of the policy for the diagnosis & for valid claim to be admissible under this plan.

There is no mandatory survival period between the date of diagnosis of a condition and the date of eligibility for a benefit payment under this plan.

There is no waiting period in case of death.

The Policy shall terminate and no benefit shall be payable under the Policy if the diagnosis or its signs or symptoms first occurred during the waiting period if only one cover(Heart cover/Cancer cover – as applicable) is opted.

In case Heart and Cancer cover is opted, only that particular cover will terminate for which signs and symptoms have occurred during the waiting period. Premiums will be reduced to the premiums payable under the cover that continues.

Free Look Period

You have a period of 15 days (30 days in case of Distance Marketing) from the date of receipt of the Policy to review the terms and conditions of this Policy. If you have any objections to the terms and conditions, You may cancel the Policy by giving written notice to Us stating the reasons for Your objection and if no claim has been made during the free look period, You will be entitled to:

- A refund of the premium paid less any expenses incurred by the insurer on medical examination of the life insured and the stamp duty charges, if any or;
- where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or;
- where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

Terminal Illness

Terminal Illness is defined as an advanced or rapidly progressing incurable disease where, in the opinion of two independent medical practitioners' specializing in treatment of such illness, life expectancy is no greater than twelve months from the date of notification of claim. The terminal illness must be diagnosed and confirmed by independent medical practitioners' specializing in treatment of such illness registered with the Indian Medical Association and the diagnosis of Terminal Illness should be approved by the Company. The Company reserves the right for independent assessment. Terminal Illness due to AIDS is excluded. The policy terminates with the payment of terminal illness benefit.

The definition of medical practitioner will be in line with Guidelines on Standardization in Health Insurance, and as defined below:

A Medical Practitioner is a person who holds a valid registration from the medical council of any state of India or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license. The Medical Practitioner shall not include: a) A close relative of the policyholder; or b) A person who resides with the policyholder; or c) A person covered under this Policy

Premium Guarantee

Premium rates are guaranteed for a period of 5 years from commencement of the Policy. However, the premium rates are reviewable at every five Policy Years at the Policy Anniversary, after prior approval from the IRDAI. Such review of premium rates will be performed by the Company annually and the premium rates after review would only be applicable for the contracts for which the review falls due in that year. Any revision in the tabular premium rates shall be notified to You at least 30 days prior to the date of such revision and if You do not agree to the revision, You may terminate the Policy and We will pay the Surrender Value (if any). Premium rates, if and when revised shall be guaranteed for a subsequent period of 5 Policy Years

Tax benefits

Tax benefits under this plan are available as per the provisions and conditions of the Income Tax Act, 1961 and are subject to any changes made in the tax laws in future. Please consult your tax advisor for advice on the availability of tax benefits for the premiums paid and proceeds received under the policy.

Suicide Exclusion

If the Life Insured's death is due to suicide (whether sane or insane at the time of suicide) within one year from the date of inception of the Policy, Our liability to make payment under the Policy will be limited only to refunding 80% of the total Premium received under the Policy, to the nominee or beneficiary of the policyholder, provided the Policy is in Inforce status. We shall not be liable to pay any interest on this amount.

If the Life Insured's death is due to suicide (whether sane or insane at the time of suicide) within one year from the date of the last revival of the Policy, Our liability to make payment under the Policy will be only limited to the higher of the Surrender Value or 80% of the total Premium received under the Policy till the date of death, to the nominee or beneficiary of the policyholder, provided the Policy is in Inforce status, We shall not be liable to pay any interest on this amount.

Nomination

Nomination should be in accordance with provisions of Section 39 of the Insurance Act 1938 as amended from time to time. Nomination of this Policy is not applicable if the Policy has been executed under Section 6 of the Married Women's Property Act 1874

Assignment

Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time.

Critical Illness definitions and exclusions

Heart Cover – Mild stage

1) Angioplasty (stenting for Coronary Arteries)

Coronary Angioplasty is defined as percutaneous coronary intervention by way of balloon angioplasty with or without stenting for treatment of the narrowing or blockage of minimum 50% of one or more major coronary arteries. The intervention must be determined to be medically necessary by a cardiologist and supported by a coronary angiogram (CAG).

Coronary arteries herein refer only to Left Main Stem, Left Anterior Descending, Circumflex and Right Coronary Artery.

Intra Arterial investigative procedures and Diagnostic Angiography are excluded.

2) Angioplasty and Stenting for Carotid Arteries

Angioplasty and Stenting for Carotid Arteries shall mean the treatment of stenosis of 50% or above, as proven by angiographic evidence of one or more of carotid arteries. All of the following criteria must be met:

- Actual undergoing of an endovascular intervention such as angioplasty and/or stenting or atherectomy to alleviate the symptoms; and
- The Diagnosis and medical necessity of the treatment must be confirmed by a Registered Medical Practitioner who is a specialist in the relevant field.

3) Endarterectomy

The actual undergoing of Endarterectomy of the carotid artery which has been necessitated as a result of at least 80% narrowing of the carotid artery as diagnosed by an arteriography or any other appropriate diagnostic test that is available. Endarterectomy of blood vessels other than the carotid artery are specifically excluded. Angioplasty and/or any other intra-arterial procedures are excluded.

4) Renal Angioplasty

The actual undergoing for the first time of Renal Artery Angioplasty or the insertion of a stent to correct the stenosis, of one or more renal arteries as shown by Angiographic or appropriate imaging evidence. The revascularization must be considered medically necessary by an appropriate specialist. Intra Arterial investigative procedures and Diagnostic Angiography are excluded.

5) Percutaneous Procedures for Repair or Replacement of Heart Valves

Percutaneous valve surgery refers to percutaneous valvuloplasty, percutaneous valvotomy and percutaneous valve replacement where the procedure is performed totally via intravascular catheter based techniques. 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

6) Pericardectomy

The undergoing of a Pericardectomy through a median sternotomy or a thoracotomy approach for the treatment of constrictive pericarditis or recurrent pericarditis. The surgical procedure must be certified to be absolutely necessary by a Specialist in cardiology.

7) Minimally Invasive Surgery for Aortic Aneurysm

The actual undergoing of surgery via minimally invasive or intra-arterial techniques to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta, as evidenced by a cardiac echocardiogram or any other appropriate diagnostic test that is available and confirmed by a consultant cardiologist. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches

8) Infective Endocarditis

Inflammation of the inner lining of the heart caused by infectious organisms, where all of the following criteria are met:

- Positive result of the blood culture proving presence of the infectious organism(s);
- Presence of at least moderate heart valve incompetence (meaning regurgitant fraction of 20% or above) or moderate heart valve stenosis (resulting in heart valve area of 30% or less of normal value) attributable to Infective Endocarditis; and

- The Diagnosis of Infective Endocarditis and the severity of valvular impairment are confirmed by a Registered Doctor who is a cardiologist.

Heart Cover – Moderate stage

1) Initial implantation of Permanent Pacemaker of Heart or Insertion of Implantable Cardioverter defibrillator (ICD)

Actual undergoing of insertion of a permanent cardiac pacemaker or cardiac defibrillator to correct serious cardiac arrhythmia which cannot be treated via other methods or the insertion of cardiac defibrillator to correct sudden loss of heart function with cessation of blood circulation around the body resulting in unconsciousness. Insertion of Cardiac Defibrillator means surgical implantation of either Implantable Cardioverter-Defibrillator (ICD), or Cardiac Resynchronization Therapy with Defibrillator (CRT-D)

The insertion of a permanent Cardiac Pacemaker or Cardioverter-Defibrillator (ICD) must be certified to be absolutely necessary by a specialist in the relevant field. Cardiac arrest secondary to alcohol or drug misuse will be excluded.

2) Surgery to place ventricular assist devices or total artificial hearts

This is an open chest procedure for implantation of Left Ventricular Assist Device/Ventricular Assist Device as bridges to cardiac transplantation or destination therapy for long term use for the Refractory Heart Failure with reduced ejection fraction as defined below: NYHA Class IV symptoms who failed to respond to optimal medical management for ≥ 45 of the past 60 days, or have been intra-aortic balloon pump dependent for 7 days, or IV inotrope dependent for 14 days. Ventricular dysfunction or Heart failure directly related to alcohol or drug abuse is excluded.

Heart Cover – Severe stage

1) Myocardial infarction (First Heart Attack – Of Specified Severity)

The first occurrence of heart attack or 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 Myocardial Infarction will be evidenced by all of the following criteria:

- a history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain)
- new characteristic electrocardiogram changes
- elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure;
- Other acute Coronary Syndromes
- Any type of angina pectoris

2) Cardiomyopathy

An impaired function of the heart muscle, unequivocally diagnosed as Cardiomyopathy by a Registered Medical Practitioner who is a cardiologist, and which results in permanent physical impairment to the degree of New York Heart Association classification Class IV or its equivalent, for at least six (6) months based on the following classification criteria:

Class IV - Inability to carry out any activity without discomfort. Symptoms of congestive cardiac failure are present even at rest. With any increase in physical activity, discomfort will be experienced. The Diagnosis of Cardiomyopathy has to be supported by echographic findings of compromised ventricular performance.

Irrespective of the above, Cardiomyopathy directly related to alcohol or drug abuse is excluded.

3) Major surgery of the Aorta

The actual undergoing of surgery for a disease or injury of the aorta needing excision and surgical replacement of the diseased part of the aorta with a graft. The term "aorta" means the thoracic and abdominal aorta but not its branches

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

4) Open Chest CABG

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded:

- Angioplasty and/or any other intra-arterial procedures

Note: minimally invasive keyhole surgery also includes actual undergoing of Robotic cardiac surgery for the correction of one or more coronary arteries, which is/are narrowed or blocked, by coronary artery bypass graft (CABG).

5) Open Heart Replacement or Repair Of Heart Valves

The actual undergoing of open-heart valve surgery is to replace or repair one or more heart 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.

6) Heart Transplant

The actual undergoing of a transplant of the Heart, that resulted from irreversible end-stage failure of the organ. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

Stem cell Transplants are excluded.

Cancer Cover – Mild stage

Specified early stage Cancer

Specified Early Stage Cancer shall mean first ever diagnosis with the presence of one of the following malignant conditions:

- Tumour of the thyroid histologically classified as T1N0M0 according to the TNM classification;
- Prostate tumour should be histologically described as TNM Classification T1a or T1b or T1c are of another equivalent or lesser classification.
- Chronic lymphocytic leukemia classified as RAI Stage I or MODERATE;
- Basal cell and Squamous skin cancer that has spread to distant organs beyond the skin,
- Hodgkin's lymphoma Stage I by the Cotswold's classification staging system.
- All tumours of the urinary bladder histologically classified as T1N0M0 (TNM Classification)

The Diagnosis must be based on histopathological features and confirmed by a Pathologist.

Pre-malignant lesions and conditions, unless listed above, are excluded.

Carcinoma-in-situ

Carcinoma-in-situ shall mean first ever diagnosis of a histologically proven, localized pre-invasion lesion where cancer cells have not yet penetrated the basement membrane or invaded (in the sense of infiltrating and / or actively destroying) the surrounding tissues or stroma in any one of the following covered organ groups, and subject to any classification stated:

- Breast, where the tumour is classified as Tis according to the TNM Staging method;
- Corpus, uteri, vagina, vulva or fallopian tubes where the tumour is classified as TIS according to the TNM Staging method or FIGO* Stage 0;
- Cervix uteri, classified as cervical intraepithelial neoplasia grade SEVERE (CIN SEVERE) or as Tis according the TNM Staging method or FIGO* Stage 0;
- Ovary –include borderline ovarian tumours with intact capsule, no tumour on the ovarian surface, classified as T1aN0M0, T1bN0M0 (TMN Staging) or FIGO 1A, FIGO 1B;
- Colon and rectum;
- Penis;
- Testis;
- Lung;
- Liver;
- Stomach and esophagus;
- Urinary tract, for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included
- Nasopharynx

For purposes of this Policy, Carcinoma-in-situ must be confirmed by a biopsy & confirmed by a Registered Medical Practitioner.

* FIGO refers to the staging method of the Federation Internationale de Gynecologie et d'Obstetrique

Pre-malignant lesions and carcinoma in situ of any organ, unless listed above, are excluded.

Cancer Cover – Moderate stage

Any of the following Cancer related Surgeries necessitated due to an eligible CiS cancer claim are covered:

- **Mastectomy for Carcinoma-in-situ of the breast**

The actual undergoing of a mastectomy due to CIS of the Breast (confirmed by histological evidence). The mastectomy must be certified to be absolutely necessary by a specialist in the relevant field. Partial mastectomy and lumpectomy do not fulfill the above definition.

- **Orchidectomy for Carcinoma-in-situ of the testis**

The actual undergoing of Orchidectomy where the histological findings thereafter indicate the presence of CIS of Testis. The Orchidectomy must be certified to have been absolutely necessary by a specialist in the relevant field.

- **Cystectomy for Carcinoma-in-situ of the Urinary Bladder/T1NoMo Urinary Bladder Cancer**

The actual undergoing of a total radical cystectomy due to CIS of Urinary Bladder / Papillary Carcinoma of the Bladder (confirmed by histological evidence). The cystectomy must be certified to be absolutely necessary by a specialist in the relevant field. Segmental cystectomy does not fulfil the above definition.

- **Total Abdominal Hysterectomy and Bilateral Salpingo-Oophorectomy for Carcinoma-in-situ of the Cervix/Carcinoma-in-situ of the Uterus/Carcinoma-in-situ of the Ovary**

The actual undergoing of a total abdominal hysterectomy and bilateral salpingo with or without Oophorectomy due to CIS of the cervix/uterus/ovary/fallopian tube/vagina/vulva (confirmed by histological evidence). The cystectomy must be certified to be absolutely necessary by a specialist in the relevant field.

*A CiS cancer claim must be payable for payment of this benefit

Cancer Cover – Severe stage

Major Cancer

A malignant tumour characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy and confirmed by a pathologist. The term cancer includes leukemia, lymphoma and sarcoma.

The following as excluded:

- All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3
- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond
- Malignant melanoma that has not caused invasion beyond the epidermis
- 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 T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below
- Chronic lymphocytic leukemia less than RAI stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification
- All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs
- All tumors in the presence of HIV infection

Exclusions

Apart from the disease specific exclusions given along with definitions of diseases above, no benefit will be payable if the critical illness due to sickness is caused or aggravated directly or indirectly by any of the following:

- Any critical illness or it's signs or symptoms having occurred within the "Waiting Period" of 180 days of policy commencement date or revival date, whichever is later
- All the pre-existing diseases or health conditions at proposal stage, i.e., any condition, ailment or injury or related condition(s) for which you had signs or symptoms, and / or were diagnosed, and / or received medical advice / treatment within 48 months prior to the policy issued by the insurer or the date of revival
- Any external congenital disorder, for a period of 48 months after the policy has been issued by us.
- Life insured being under the influence of drugs, alcohol, narcotics or psychotropic substance, not prescribed by a Registered Medical Practitioner
- War, invasion, hostilities (whether war is declared or not), civil war, rebellion, terrorist activity, revolution or taking part in a riot or civil commotion, strikes or industrial action.
- Participation by the life insured in a criminal or unlawful act with criminal intent.

- Treatment for injury or illness caused by avocations / activities such as hunting, mountaineering, steeple-chasing, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, professional sports which lead to deliberate exposure to exceptional danger.
- Any underwater or subterranean operation or activity. Racing of any kind other than on foot
- Existence of any sexually Transmitted Disease (STD) and its related complications or Acquired Immune Deficiency Syndrome (AIDS) or the presence of any Human Immunodeficiency Virus (HIV).
- Unreasonable failure to seek or follow medical advice, the Life insured has delayed medical treatment in order to circumvent the waiting period or other conditions and restriction applying to this policy.
- Nuclear reaction, Biological, radioactive or chemical contamination due to nuclear accident.
- Ayurvedic, Homeopathy, Unani, naturopathy, reflexology, acupuncture, bone-setting, herbalist treatment, hypnotism, rolfing, massage therapy, aroma therapy or any other treatments other than Allopathy / western medicines.
- Pregnancy or childbirth or complications arising there from
- Any treatment of a donor for the replacement of an organ

