
NRI's CRITICAL CARE INSURANCE POLICY WORDINGS

Policy Coverage

Critical Care offers you a choice of coverage on both the sum insured and the tenure of the policy. You can choose the sum insured of Rs 6,00,000 or Rs. 12,00,000 over a period of 3 or 5 years. The premium would be calculated accordingly.

The policy provides lumpsum benefit on diagnosis of any of 9 Critical Illnesses, Accidental Death and Permanent Total Disablement (PTD).

➤ Critical Illnesses Cover

The Critical Care Insurance shall cover, subsequent to 90 days from the policy start date, the following major medical illnesses and procedures:

1. Cancer
2. Coronary Artery Bypass Graft Surgery
3. Myocardial Infarction (Heart Attack)
4. End Stage Renal Failure
5. Major Organ Transplant
6. Stroke
7. Paralysis
8. Heart Valve Replacement Surgery
9. Multiple Sclerosis

The details of illnesses covered as below :

➤ **Cancer**

A disease manifested by the presence of a malignant tumor characterized by the uncontrolled growth and spread of malignant cells, and the invasion of tissue. The term cancer also includes leukemia and malignant disease of the lymphatic system such as Hodgkin's Disease.

But excluding:

- All tumors that are histological described as pre-malignant, non-invasive or carcinoma in situ, prostate tumors classified upto T1 (under the TNM classification).
- Tumors treated by endoscopic procedures alone
- Kaposi's Sarcoma or any other malignant tumor in the presence of any Human Immunodeficiency virus.
- Any skin cancer other than invasive malignant melanoma (starting with Clark Level III)
- T1N0M0 (under the TNM classification System) papillary carcinoma of the thyroid less than 1 cm in diameter
- Tumors that pose no threat to life and for which no treatment is required
- Tumors that are a recurrence of metastasis of a tumor that first occurred prior to 180 days following the policy start date

➤ **Kidney Failure (End Stage Renal Failure)**

End stage renal disease presented 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

➤ **Multiple Sclerosis**

Unequivocal diagnosis of multiple sclerosis by a consultant neurologist holding such an appointment at a Government Hospital. The Insured must exhibit neurological abnormalities that have existed for a continuous period of atleast 6 months or must have had atleast two clinically documented episodes.

The above must be evidenced by the typical symptoms of demyelination and impairment of motor and sensory functions as well as by typical MRI findings

➤ **Major Organ Transplant**

The receipt of a transplant of

- Human bone marrow using haematopoietic stem cells preceded by a total bone marrow ablation, or
- One of the following whole human organs: heart, lung, liver, pancreas or kidney, as a result of irreversible end stage failure of the respective organ
- A specialist Doctor confirms the requirement of same
- Other stem cell transplants and transplants of part of an organ are excluded

➤ **Heart Valve Replacement**

The undergoing of medically necessary open heart surgery to replace a heart valve as a consequence of a heart valve defect. Surgeries using Balloon or catheter techniques are excluded

➤ **Coronary Artery Bypass Graft**

The actual undergoing for the first time of an open chest coronary artery bypass surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts provided it is recommended by cardiologist and supported with coronary angiographic evidence but excluding balloon angioplasty and/or any other intra-arterial procedures or laser relief.

➤ **Stroke**

The first occurrence of any cerebrovascular incident producing neurological sequel lasting more than 24 hours and including infarction of brain tissue, haemorrhage and embolisation from an extra cranial source.

The following must evidence the diagnosis for the same:

- Finding on Magnetic Resonance Imaging, Computerised Tomography or any other reliable imaging techniques, demonstrate a lesion consistent with the acute haemorrhage, embolism or thrombosis.
- Neurological deficit for atleast 3 months Transient Ischaemic Attacks and/or Brain damage due to an accident, infection, vasculitis or an inflammatory disease are excluded.

➤ **Paralysis**

Complete and permanent loss of function of two or more limbs as a result of Injury or Illness of the brain or spinal cord. Permanent loss of function of two or more limbs shall be deemed to have occurred if:

- The condition has persisted for at least 6 months from the date it was first suffered in spite of the Insured properly implementing all medical advice related to its cure, and
- A Doctor of central or a state government hospital confirms complete, irreversible and permanent loss

Paralysis resulting directly or indirectly or as a consequence of any self- inflicted injury is excluded.

➤ **Myocardial Infarction (Heart Attack)**

The first occurrence of an acute myocardial infarction leading to the death of a portion of heart muscle (Myocardium) as a result of inadequate blood supply to the relevant area. The diagnosis for the same must be evidenced by all of the following:

- An episode of typical chest pain.
- The occurrence of a typical new acute infarction changes (ST-T elevation) on the electrocardiograph and progressing to development of pathological Q waves
- Elevation of Cardiac Troponin (T or I) to atleast 3 times the upper limit of normal reference range or an elevation in CPK-MB to atleast 200% of the upper limit of the normal reference range

But excluding non-STEMI with elevation of troponin I or T. Other acute coronary syndromes including but not limited to angina or chest pain are excluded from this definition.

On diagnosis of any of the above illnesses, the insured is entitled to the lumpsum benefit of the entire Sum Insured opted for.

➤ **Accidental Death Cover**

In case of death of the insured due to an accident within the policy period, the nominee (mentioned in the policy) is compensated with the Sum Insured. (opted at the time of policy issue).

➤ **Permanent Total Disablement (PTD) Cover**

Critical Care insures against the permanent or total loss of limbs, sight etc. due to an accident. The compensation (Sum insured opted for) is given as a lumpsum benefit. It is to be noted that the compensation is payable only if the disablement results in inability to remain gainfully employed.

For Permanent Total Disablement Benefits as below :

Loss of use/Actual loss by physical separation of	Percentage of Capital Sum Insured*
Sight of both eyes	100%
Both hands	100%
Both feet	100%
One hand and one foot	100%
*As stated in Part I of the Schedule.	

Note: If any such injury as mentioned above shall result in the inability to remain gainfully employed, then the Capital Sum Insured payable will be 100%.

➤ **Exclusions applicable to Critical Illness:**

90 Days Exclusion:

Any illnesses and procedures within 90 days from start date of policy will not be covered. This clause does not apply for subsequent renewal (without a break) of this policy with us.

Permanent Exclusion

The Company shall not be liable under this policy for:

- Any Pre-Existing illness
- Absence of submission of Doctor's medical certificate confirming the diagnosis of Illness or Injury or undergoing of medical/surgical procedure
- Any congenital Illness or condition
- Any medical procedure or treatment, which is not medically necessary or not performed by a Doctor
- Any physical, medical or mental condition, illness, injury or treatment or service which is specifically excluded under the Policy
- Treatment relating to birth defects and external congenital Illnesses
- Birth control procedures and hormone replacement therapy
- Any treatment/ surgery for change of sex or any cosmetic surgery or treatment
- Treatment by family member and self-medication or any treatment that is not scientifically recognized

Exclusions applicable to Personal Accident:

The Company shall not be liable under this policy for:

- Compensation/claim under more than one of the categories specified in the Policy Coverage in respect of the same period of disablement of the Insured Person
- Claims arising out of sickness/illness

- Death, injury or disablement of Insured Person
 - a) From intentional self-injury, suicide or attempted suicide
 - b) Whilst under the influence of intoxicating liquor or drugs
 - c) Directly or indirectly caused by venereal disease or AIDS
 - d) Directly or indirectly caused by contributed to or aggravated or prolonged by childbirth or pregnancy or in consequence thereof.
 - e) Engagement in dangerous activities
 - f) Mounting into, dismounting from or traveling in any aircraft other than as a fare paying passenger on a scheduled flight
 - g) Mental disorder or psychosomatic dysfunction
- Permanent Total Disablement prior to commencement of the policy

- **Key Benefits**
 - **Comprehensive Cover** - Lump-sum benefit on diagnosis of any of 9 Critical Illnesses, Personal Accident and Permanent Total Disablement (PTD) Cover.
 - **Choice of coverage** - Choose between Rs. 6,00,000 or Rs. 12,00,000 sum insured and 3 or 5 years of policy duration.
 - Avail tax benefit under section 80D of Income Tax Act.

How does Tax Benefit work?

For e.g. A premium of Rs. 15,000 is fully deductible under Section 80D of the Income Tax Act. You would save Rs. 5099 on your tax payable.

Key Points to note

- Premium paid for medical insurance qualifies for rebate under Section 80D of the Income Tax Act.
- Section 80D benefit remains over and above Rs.1 Lakh benefit of 80C (ELSS, Principal component of home loan, Life Insurance etc

- Tax benefit goes to the person making payment, Persons covered can be his/her dependant (spouse, children)
- The qualifying amounts under Section 80D is maximum upto Rs 15,000/-.

A higher amount of upto Rs 20,000/- is permitted if the person, for whose health insurance the premium was paid, was aged 65 years or more at any time during the financial year in which the premium was paid.

- No health check-up required.
- No 30 day survival period, benefit paid immediately on diagnosis.
- Ideal Cover for new Immigrants in the US, parents & relatives in India.

➤ **Eligibility**

- The insured can be either you or your spouse
- The insured needs to be between 20 - 45 years of age
- Age is calculated as on the date the policy is issued (i.e.age completed as on his last birthday)

➤ **Need for Critical Care**

- India is home to over 60 million coronary heart patients.
- India's economic loss due to heart related disease could be \$236 billion till 2015.
- At any given time there will be 3 million cancer patients in India.

Source: World Health Organization (WHO)