

## PRODUCT SUMMARY DIRECT- TM BASIC TERM

**You** (the Proposer) have read and understood the Product Summary, including any coverage exclusions built into the product, and have acknowledged receipt of **all pages** of this Product Summary. In this Product Summary, “**we**”, “**us**”, “**our**” refer to Tokio Marine Life Insurance Singapore Ltd (TMLS).

	Name	Signature	Dated (dd/mm/yy)
Proposer :			
TMLS Authorised Officer :			

### Plan Description

DIRECT- TM Basic Term is a regular premium level term plan providing coverage against death, terminal illness and total and permanent disability. This is a non-participating plan and has no surrender value.

DIRECT- TM Basic Term consists of:

- (a) a basic plan, which covers death and Terminal Illness (TI); and
- (b) a compulsory DIRECT- Total and Permanent Disability (TPD) Rider.

This plan is available for coverage terms of:

- (a) 5 years;
- (b) 20 years; and
- (c) To age 65.

DIRECT- TM Basic Term is available for the following entry ages:

Available Entry Ages (age next birthday)			
Coverage Term	DIRECT- TM Basic Term	DIRECT- Total and Permanent Disability Rider	DIRECT- Critical Illness Accelerator Rider
5 Years	19 to 65	19 to 64	19 to 60
20 Years	19 to 65	19 to 64	19 to 45
To Age 65	19 to 60	19 to 60	19 to 60

**Note:** This is a direct purchase insurance product and is purchased without advice given.

### Plan Benefit

#### Death Benefit

If the life assured dies while the policy is in force, we will pay the basic sum assured, less any indebtedness.

#### Terminal Illness (TI) Benefit

If the life assured is diagnosed with TI, we will pay the death benefit up to the TI Limit. Any amount in excess of the TI Limit will be payable on subsequent insured event(s).

Payment of the TI benefit reduces the basic sum assured. If the basic sum assured is reduced to zero, the policy benefit is considered paid in full and the policy terminates thereafter.

#### TI Limit

The maximum TI benefit payable, inclusive of all other policies issued by us on the same life is SGD4,500,000.

### Definition of TI

TI means the conclusive diagnosis of an illness that is expected to result in the death of the life assured within 12 months. This diagnosis must be supported by a specialist and confirmed by our appointed medical practitioner. TI in the presence of Human Immunodeficiency Virus (HIV) infection is excluded.

### Guaranteed Renewal Privilege

This is only applicable if you have purchased a DIRECT- TM Basic Term (5 years).

At the expiry of each coverage term, the policy will be renewed without further medical evidence of the life assured for the same coverage period and basic sum assured.

Renewability is subject to the following conditions:

- (a) the policy is in force at the end of the coverage term;
- (b) we receive the required premium for the policy before the expiry of the policy; and
- (c) the life assured is age 80 next birthday or below at the point of renewal.

The premium rate at each renewal is not guaranteed and will be based on the prevailing premium rate at the attained age next birthday of the life assured. The premium will remain level and guaranteed throughout each renewed coverage period.

The same terms and conditions of acceptance of this policy will continue to be applicable at the point of each renewal, i.e. if the policy is issued or reinstated on non-standard terms, the policy will also be renewed for a further coverage period on non-standard terms.

## Payment of Premiums

Premiums for DIRECT- TM Basic Term are payable throughout the coverage term.

Premium rates are level and guaranteed throughout the coverage term, except when the policy is renewed for a further coverage period.

## Termination

This policy will automatically terminate on the earliest of any of the following:

- (a) if this policy is terminated in accordance with the terms and conditions of this policy;
- (b) death of the life assured;
- (c) full payment of the death benefit;
- (d) lapse of this policy;
- (e) reduction of the basic sum assured to zero;
- (f) upon the coverage expiry date of the policy;
- (g) your written request and our acceptance of the application to terminate the policy; or
- (h) any other cause of termination as permitted under or any change of laws or regulatory requirements, including court orders.

## Exclusions

Benefits of this plan are not payable under certain conditions. These conditions are stated in the “Exclusions” in the Policy Contract. The categories of exclusions that are common to all life insurers relate to:

- suicide within one year (for death benefit);
- self-inflicted injury (for TPD benefit);
- a waiting period (for critical illness benefit, if applicable); and
- pre-existing medical conditions (for critical illness benefit, if applicable).

In addition to the above common categories of exclusions, life insurers may impose other exclusions.

All the exclusions for this plan are listed as follows:

### For death benefit

We will not pay the death benefit if the life assured, whether sane or otherwise, dies by suicide within one (1) year from the later of:

- (a) the issue date of the policy. We will refund, without interest, the premiums paid from the issue date of the policy, less medical and any other expenses incurred in assessing the risk under the policy; or

- (b) the last reinstatement date of the policy. We will refund, without interest, the total amount paid to us from the last reinstatement date less all benefits previously paid from the last reinstatement date under the policy, and the policy terminates.

**For TI benefit**

We will not pay the TI benefit if the life assured is diagnosed with TI in the presence of HIV infection.

**For TPD benefit, if applicable**

The exclusions are stated in the section “Exclusions” in the Product Summary for DIRECT- Total and Permanent Disability Rider.

**For critical illness benefit, if applicable**

The exclusions are stated in the sections “Exclusions” and “Waiting Period” in the Product Summary for DIRECT-Critical Illness Accelerator Rider.

The definitions of the exclusions are stated in the Policy Contract. You are advised to read the Policy Contract for the full details of these exclusions.

## Free Look Period

The policy may be cancelled by written request to us within 14 days after you have received the policy document in which case, premiums paid less medical and any other expenses incurred in assessing the risk under the policy will be refunded.

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.

## Policy Owners’ Protection

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 LIA or SDIC web-sites ([www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

## Important Notes

This Product Summary does not form a part of any contract of insurance. It is intended only to be a simplified description of the product features applicable to this plan and is not exhaustive. The contents of this Product Summary may vary from the terms of cover eventually issued. Please refer to the Policy Contract for all terms and conditions, including exclusions whereby the benefits under your policy may not be paid out. You are advised to read the Policy Contract. For the avoidance of doubt, only the terms and conditions as set out in the Policy Contract will bind the parties.

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## PRODUCT SUMMARY DIRECT- TOTAL AND PERMANENT DISABILITY RIDER (DIRECT- TM BASIC TERM)

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	Name	Signature	Dated (dd/mm/yy)
Proposer :			
TMLS Authorised Officer :			

### Rider Description

DIRECT- Total and Permanent Disability Rider (“TPD Rider”) is a regular premium rider that provides financial protection in the event of total and permanent disability. This is a compulsory rider to the basic plan, DIRECT-TM Basic Term, and it has no surrender value.

Premium rates of this TPD Rider are guaranteed. Premium payment term of this rider must follow your basic plan.

**Note:** This is a direct purchase insurance product and is purchased without advice given.

### Rider Benefit

#### Total and Permanent Disability (TPD) Benefit

If the life assured becomes totally and permanently disabled while the TPD Rider is in force, on or before the policy anniversary on which the life assured is age 65 next birthday, we will pay the TPD Rider sum assured, less any indebtedness.

Payment of the TPD benefit reduces the basic sum assured. If the basic sum assured is reduced to zero, the policy benefit is considered paid in full and the policy terminates thereafter.

The maximum TPD benefit payable, inclusive of all other policies issued by us on the same life is SGD4,500,000.

#### Definition of TPD

TPD means any of the following:

- (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 such disability must:
  - (i) have continued uninterrupted for at least 6 consecutive months from the time when disability started; and
  - (ii) in the view of a medical practitioner appointed by us, be deemed permanent with no possibility of improvement in the foreseeable future.
- (b) The life assured, due to accident or sickness, suffers loss and irrecoverable loss of use of:
  - (i) the entire sight in both eyes;
  - (ii) any 2 limbs at or above the wrist or ankle; or
  - (iii) the entire sight in one (1) eye and any one (1) limb at or above the wrist or ankle.



### **Guaranteed Renewal Privilege**

This is only applicable if you have purchased a DIRECT- TM Basic Term (5 years).

At the expiry of each rider's coverage term, the TPD Rider will be renewed together with the basic plan without further medical evidence of the life assured for the same coverage term and TPD Rider sum assured.

For the avoidance of doubt, the TPD Rider expires on the policy anniversary on which the life assured is age 65 next birthday. Therefore, the coverage term of the TPD Rider upon the last renewal may be shorter than the original coverage term.

Renewability of the TPD Rider is subject to the following conditions:

- (a) the TPD Rider is in force at the end of the coverage term;
- (b) we receive the required premium for the TPD Rider before the expiry of the policy;
- (c) the life assured is age 64 next birthday or below at the point of renewal; and
- (d) no TPD claim has been admitted under the TPD Rider.

The premium rate at each renewal is not guaranteed and will be based on the prevailing premium rate at the attained age next birthday of the life assured. The premium will stay level and guaranteed throughout each renewed coverage period.

The same terms and conditions of acceptance of the TPD Rider, will continue to be applicable at the point of each renewal, i.e. if the TPD Rider is issued or reinstated on non-standard terms, the TPD Rider will also be renewed for a further coverage period on non-standard terms.

### **Payment of Premiums**

Premiums for the TPD Rider are payable throughout the rider's coverage term.

Premium rates are level and guaranteed, except when the TPD Rider is renewed for a further coverage period.

### **Termination**

The TPD Rider will automatically terminate on the earliest of any of the following:

- (a) if the TPD Rider is terminated in accordance with the terms and conditions of the TPD Rider;
- (b) the policy anniversary on which the life assured is age 65 next birthday;
- (c) upon the coverage expiry date of the TPD Rider;
- (d) termination, lapse, or expiry of the basic plan to which the TPD Rider is attached;
- (e) a claim for TPD has been paid under the TPD Rider;
- (f) full payment of the death benefit of the basic plan to which the TPD Rider is attached; or
- (g) any other cause of termination as permitted under or any change of laws or regulatory requirements, including court orders.

### **Exclusions**

We will not pay the TPD benefit if the disability or loss sustained by the life assured is caused directly or indirectly, wholly or partly by any of the following:

- (a) any pre-existing condition that was not communicated to us before the issue date of the TPD Rider or the last reinstatement date of the TPD Rider, whichever is later;
- (b) any pre-existing condition that was not communicated to us before the date of any increase in the TPD Rider sum assured;
- (c) any self-inflicted injury, whether the life assured is sane or otherwise;
- (d) any misuse or abuse of drugs and/or alcohol;
- (e) any air-borne activity other than travelling as a pilot, member of the flight crew or fare-paying passenger, on an aircraft licensed for passenger service and operated by a regular airline on a scheduled route; or
- (f) any war, invasion, act of foreign enemies, hostilities (whether war is declared or otherwise), civil war, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion.



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## Policy Owners' Protection

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## Important Notes

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## PRODUCT SUMMARY

### DIRECT- CRITICAL ILLNESS ACCELERATOR RIDER (DIRECT- TM BASIC TERM)

In this Product Summary, “we”, “us”, “our” refer to Tokio Marine Life Insurance Singapore Ltd (TMLS).

#### Rider Description

DIRECT- Critical Illness Accelerator Rider (“CI Rider”) is a regular premium rider that provides financial protection in the event of a diagnosis of critical illness. This rider has no surrender value and you can only attach this CI Rider to the basic plan, DIRECT- TM Basic Term, at inception.

Premium rates of the CI Rider are non-guaranteed. Premium payment term of this rider must follow your basic plan.

**Note: This is a direct purchase insurance product and is purchased without advice given.**

#### Rider Benefit

##### Critical Illness<sup>1</sup> (CI) Benefit

If the life assured is diagnosed with any of the 30 covered critical illnesses listed below, except for Angioplasty and Other Invasive Treatment for Coronary Artery<sup>2</sup>, while the CI Rider is in force, on or before the policy anniversary on which the life assured is age 65 next birthday, we will pay the CI Rider sum assured, less any indebtedness.

##### List of 30 Covered Critical Illnesses<sup>3</sup>

1.	Alzheimer’s Disease / Severe Dementia	16.	Irreversible Loss of Speech
2.	Irreversible Aplastic Anaemia	17.	Major Burns
3.	Severe Bacterial Meningitis	18.	Major Cancer
4.	Benign Brain Tumour	19.	Major Head Trauma
5.	Blindness (Irreversible Loss of Sight)	20.	Major Organ / Bone Marrow Transplantation
6.	Coma	21.	Motor Neurone Disease
7.	Coronary Artery By-Pass Surgery	22.	Multiple Sclerosis
8.	Deafness (Irreversible Loss of Hearing)	23.	Muscular Dystrophy
9.	End Stage Liver Failure	24.	Paralysis (Irreversible Loss of Use of Limbs)
10.	End Stage Lung Disease	25.	Idiopathic Parkinson’s Disease
11.	Fulminant Hepatitis	26.	Primary Pulmonary Hypertension
12.	Heart Attack of Specified Severity	27.	Stroke with Permanent Neurological Deficit
13.	Open Chest Heart Valve Surgery	28.	Open Chest Surgery to Aorta
14.	HIV due to Blood Transfusion and Occupationally Acquired HIV	29.	Severe Encephalitis
15.	End Stage Kidney Failure	30.	Angioplasty and Other Invasive Treatment for Coronary Artery

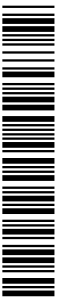
<sup>1</sup> Critical Illness was formerly known as “Dread Disease” / “DD” and Dread Disease refers to the list of diseases/illnesses as defined in the applicable contract(s) with us.

<sup>2</sup> If the life assured undergoes Angioplasty and Other Invasive Treatment for Coronary Artery while the CI Rider is in force, we will pay 10% of the CI Rider sum assured, subject to a maximum amount of SGD25,000 per policy, less any indebtedness. This benefit can only be claimed once under this policy.

<sup>3</sup> The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to [www.lia.org.sg](http://www.lia.org.sg) for the standard Definitions (Version 2019).

Payment of the CI benefit reduces the basic sum assured. If the basic sum assured is reduced to zero, the policy benefit is considered paid in full and the policy terminates thereafter.

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The maximum CI/DD benefit payable, inclusive of all other policies issued by us on the same life is SGD2,500,000.

### **Guaranteed Renewal Privilege**

This is only applicable if you have purchased a DIRECT- TM Basic Term (5 years).

At the expiry of each rider's coverage term, the CI Rider will be renewed together with the basic plan without further medical evidence of the life assured for the same coverage term and CI Rider sum assured.

Renewability of the CI Rider is subject to the following conditions:

- (a) the CI Rider is in force at the end of coverage term;
- (b) we receive the required premium for the CI Rider before the expiry of the policy;
- (c) the life assured is age 60 next birthday or below at the point of renewal; and
- (d) no CI claim (other than Angioplasty and Other Invasive Treatment for Coronary Artery), has been admitted under the CI Rider.

The premium rate at each renewal is not guaranteed and will be based on the prevailing premium rate at the attained age next birthday of the life assured. The premium will stay level throughout each renewed coverage period.

The same terms and conditions of acceptance of the CI Rider, will continue to be applicable at the point of each renewal, i.e. if the CI Rider is issued or reinstated on non-standard terms, the CI Rider will also be renewed for a further coverage period on non-standard terms.

## **Payment of Premiums**

Premiums for the CI Rider are payable throughout the rider's coverage term.

Please note that premium rates are not guaranteed. We reserve the right to change the premium by giving 30 days' written notice to you. These rates may be adjusted based on future experience.

## **Waiting Period**

We will not pay the CI benefit on any of the following, if:

- (a) the life assured is diagnosed with Major Cancer or Heart Attack of Specified Severity;
- (b) Angioplasty and Other Invasive Treatment for Coronary Artery or Coronary Artery By-Pass Surgery is recommended on the life assured,

within 90 days from the issue date of the CI Rider, the last reinstatement date of the CI Rider or the date of any increase in the CI Rider sum assured, whichever is later.

## **Termination**

The CI Rider will automatically terminate on the earliest of any of the following:

- (a) if the CI Rider is terminated in accordance with the terms and conditions of the CI Rider;
- (b) upon the coverage expiry date of the CI Rider;
- (c) termination, lapse or expiry of the basic plan to which the CI Rider is attached;
- (d) a claim for critical illness (other than Angioplasty and Other Invasive Treatment for Coronary Artery) has been paid under the CI Rider;
- (e) full payment of the death benefit of the basic plan to which the CI Rider is attached;
- (f) your written request and our acceptance of the application to terminate the CI Rider; or
- (g) any other cause of termination as permitted under or any change of laws or regulatory requirements, including court orders.

## **Exclusions**

We will not pay the CI benefit if the life assured is diagnosed with any critical illness that is caused directly or indirectly, wholly or partly by any of the following:

- (a) any pre-existing condition that was not communicated to us before the issue date of the CI Rider or the last reinstatement date of the CI Rider, whichever is later;

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- (b) any pre-existing condition that was not communicated to us before the date of any increase in the CI Rider sum assured;
- (c) any self-inflicted injury, whether the life assured is sane or otherwise; or
- (d) any misuse or abuse of drugs and/or alcohol.

### Policy Owners' Protection

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 LIA or SDIC web-sites ([www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

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## Declaration and Acknowledgement

You (the Proposer) have read and understood the Product Summary, including any coverage exclusions built into the product, and have acknowledged receipt of **all pages** of this Product Summary.

Proposer's Name:	TMLS Authorised Officer's Name:
Signature:	Signature:
Date:	Date:



## CRITICAL ILLNESS DEFINITIONS (DIRECT PURCHASE INSURANCE) (Supplement to Product Summary)

This supplement forms part of the Product Summary. You should read this together with the relevant Product Summary.

**(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 our appointed doctor.

The following are excluded:

- (a) non-organic diseases such as neurosis and psychiatric illnesses; and
- (b) alcohol related brain damage.

**(2) 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:

- (a) blood product transfusion;
- (b) bone marrow stimulating agents;
- (c) immunosuppressive agents; or
- (d) bone marrow or haematopoietic stem cell transplantation.

The diagnosis must be confirmed by a haematologist.

**(3) 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:

- (a) the presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and
- (b) a consultant neurologist.

Bacterial Meningitis in the presence of HIV infection is excluded.

**(4) 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:

- (a) it has undergone surgical removal or, if inoperable, has caused a permanent neurological deficit; and
- (d) 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:

- (a) cysts;
- (b) abscess;
- (c) angioma;
- (d) granulomas;
- (e) vascular malformations;
- (f) haematomas; and
- (g) tumours of the pituitary gland, spinal cord and skull base.

**(5) BLINDNESS (IRREVERISBLE 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



**(6) COMA**

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

- (a) no response to external stimuli for at least 96 hours;
- (b) life support measures are necessary to sustain life; and
- (c) 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.

**(7) 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.

**(8) 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."

**(9) END STAGE LIVER FAILURE**

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

- (a) permanent jaundice;
- (b) ascites; and
- (c) hepatic encephalopathy.

Liver disease secondary to alcohol or drug abuse is excluded.

**(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:

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

The diagnosis must be confirmed by a respiratory physician.

**(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:

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

**(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:

- (a) History of typical chest pain;
- (b) 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;
- (c) 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;

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- (d) 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:

- (a) Angina;  
(b) Heart attack of indeterminate age; and  
(c) 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

**(13) 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.

**(14) 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:
- (i) The blood transfusion was medically necessary or given as part of a medical treatment;
  - (ii) The blood transfusion was received in Singapore after the Issue Date, date of endorsement or date of reinstatement of this Policy or Rider, whichever is the later; and
  - (iii) 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 Policy or Rider, whichever is the later whilst the Insured was carrying out the normal professional duties of his or her occupation in Singapore, provided that all of the following are proven to our satisfaction:
- (i) Proof that the accident involved a definite source of the HIV infected fluids;
  - (ii) 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
  - (iii) 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 insured is a medical practitioner, houseman, 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.

**(15) END STAGE KIDNEY FAILURE**

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

**(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.

**(17) MAJOR BURNS**

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



**(18) MAJOR CANCER**

A malignant tumour positively diagnosed with histological confirmation and characterized 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:

(a) All tumours which are histologically classified as any of the following:

- i. Pre-malignant;
  - ii. Non-invasive;
  - iii. Carcinoma-in-situ (Tis) or Ta;
  - iv. Having borderline malignancy;
  - v. Having any degree of malignant potential;
  - vi. Having suspicious malignancy;
  - vii. Neoplasm of uncertain or unknown behavior; or
  - viii. All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia;
- (b) Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond;
- (c) Malignant melanoma that has not caused invasion beyond the epidermis;
- (d) All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification;
- (e) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- (f) All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below;
- (g) All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;
- (h) 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;
- (i) Chronic Lymphocytic Leukaemia less than RAI Stage 3;
- (j) 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
- (k) All tumours in the presence of HIV infection.

**(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:

- (a) Spinal cord injury; and
- (b) Head injury due to any other causes.

**(20) MAJOR ORGAN TRANSPLANTATION / BONE MARROW TRANSPLANTATION**

The receipt of a transplant of:

- (a) human bone marrow using haematopoietic stem cells preceded by total bone marrow ablation; or
- (b) 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.

**(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.

**(22) MULTIPLE SCLEROSIS**

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

- (a) investigations which unequivocally confirm the diagnosis to be Multiple Sclerosis; and
  - (b) 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.

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**(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.

**(24) 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.

**(25) 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:

- (a) the disease cannot be controlled with medication; and
- (b) 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.

**(26) 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.

**(27) 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:

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

The following are excluded:

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

**(28) 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.



**(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.

**(30) 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 CI coverage, subject to a S\$25,000 maximum sum payable. This benefit is payable once only and shall be deducted from the CI coverage, thereby reducing the amount of the CI coverage which may be payable herein.

Diagnostic angiography is excluded.

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)**

The six "Activities of Daily Living" are:

- |                    |   |
|--------------------|---|
| (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.   |