

RELIANCE

NIPPON LIFE
INSURANCE

A RELIANCE CAPITAL COMPANY

 **Sabse Pehle**
Life Insurance



**RNL
SUPER
SURAKSHA**

Khushi Apno Ki

Reliance Nippon Life Super Suraksha

A Non-Linked, Non-Participating, Individual, Pure Risk Premium/
Savings, Life Insurance Plan

Taaki apki koi khwaish adhuri na reh jaye

Reliance Nippon Life Super Suraksha

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You have many goals set for yourself and your family which you work hard to fulfil. However, life can sometimes come with unexpected challenges that may cause hindrances in your plan. You not only need financial protection to overcome these challenges but also make sure your loved ones have the monetary support to fulfil their life goals, even in your absence.

Reliance Nippon Life Super Suraksha has been designed to offer you protection from various kinds of unforeseen events – be it an accident, critical illness or untimely death as well as allow you the flexibility to enjoy the policy benefits on survival.

Key Features



Financial Protection for your family in case of an untimely demise



Choose from 5 plan variants, based on your protection need

- ✓ Option to get back 105% of Total Premiums Paid^{T&C4} on maturity* Or
- ✓ Option to get back 105% of Total Premiums Paid^{T&C4} at the age of 60 and enjoy continued life cover till the age of 75 / 80 years** Or
- ✓ Option to receive Monthly Income equal to 0.1% of Base Sum Assured, to cater the daily cash flow needs post attaining age of 60 years[^] Or
- ✓ Option to receive Additional Accidental Death Benefit[#] Or
- ✓ Option to enhance coverage through Critical Illness Benefit^{##}



Option to avail appropriate riders for additional layer of protection



Tax benefits may be applicable as per prevailing income tax laws

Plan Variants

Reliance Nippon Life Super Suraksha offers the following 5 plan variants:

1. Return of Premium

2. Early Return of Premium

3. Income Benefit

4. Life Plus

5. Life & Health

Plan variant needs to be selected at inception of the policy. The plan variant once chosen, cannot be altered at a later date.

Return of Premium Variant

A Term Plan with Return of Premium

This plan variant provides level cover throughout the term of the policy and at the end of policy term, 105% of the Total Premiums Paid ^{T&C4} would be returned as maturity benefit, provided the policy is in-force.

Eligibility Criteria:

Plan Variant	Return of Premium
Entry Age	Minimum: 18 years Maximum: 55 years
Premium Payment Term (PPT)	Limited Pay: 10 years / 15 years Regular Pay
Policy Term (PT)	For 10-Pay: 20,25,30,35,40,45,50 & 55 years For 15-Pay: 25,30,35,40,45,50 & 55 years For Regular Pay: 20,25,30,35,40,45,50 & 55 years Availability of Policy Term option is subject to Maximum Maturity Age
Max Maturity Age	75 years
Base Sum Assured	Minimum: 25 Lakhs Maximum: No Limit, subject to Board Approved Underwriting Policy

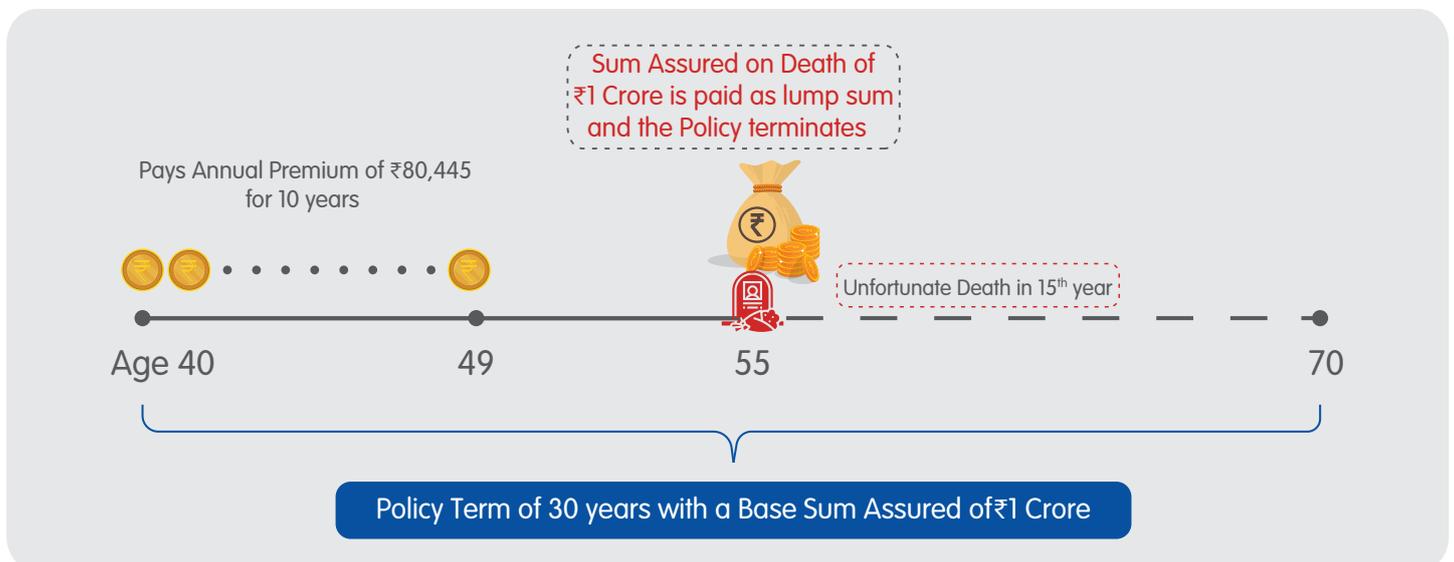
All the references to age are based on age last birthday.

Illustration:

Mr. Nitin, 40-years old, buys Reliance Nippon Life Super Suraksha – Return of Premium variant. He opts for policy term of 30 years and decides to pay premium annually for 10 years. He chooses Base Sum Assured of Rs 1 Crore by paying premium of Rs. 80,445

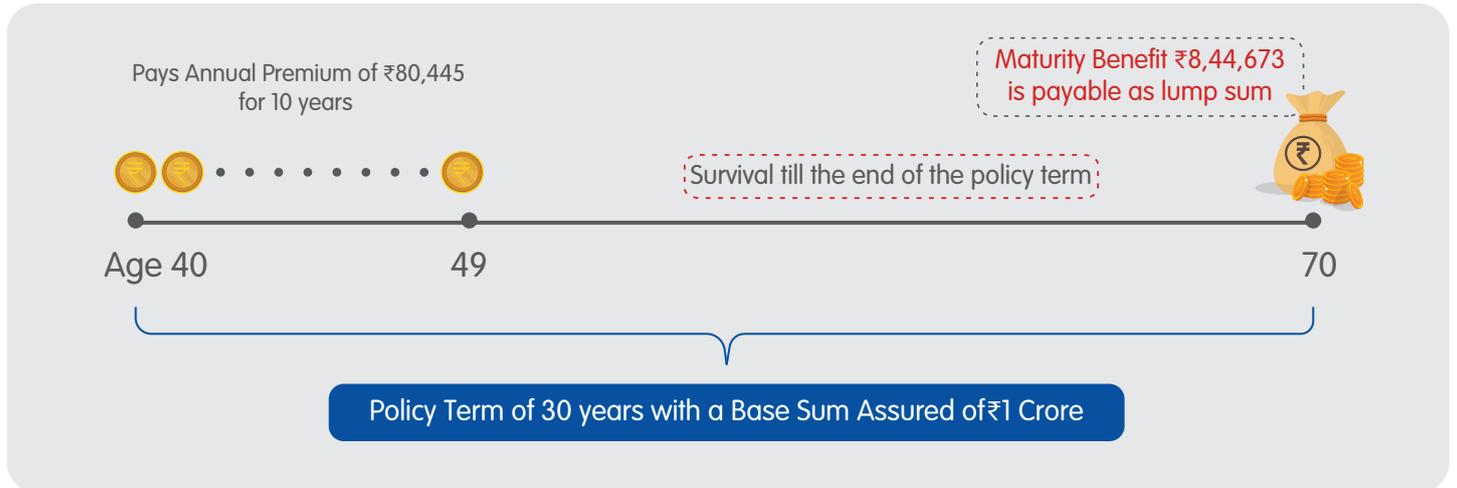
Scenario 1:

In case of an unfortunate demise of Mr. Nitin during the Policy term, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 1 Crore and the policy will terminate.



Scenario 2:

At the end of the Policy term, provided the policy is in force, he shall receive 105% of the Total Premium Paid i.e. Rs. 8,44,673 and the policy shall terminate.



Benefits in details:

Death Benefit:

On unfortunate demise of the Life Assured during the policy term, provided the policy is in force, Sum Assured on Death shall be payable as a lump sum and the policy shall terminate.

Sum Assured on Death is higher of:

1. 11 times of the Annualized Premium^{T&C6} at policy inception; or
2. 105% of Total Premiums Paid^{T&C4} as on the date of death of Life Assured; or
3. Absolute Amount Assured to be paid on Death of Life Assured

Where, Absolute Amount Assured to be paid on Death is equal to Base Sum Assured chosen at inception.

Survival Benefit:

There is no Survival Benefit payable under this plan variant.

Maturity Benefit:

At the end of the policy term, provided the policy is in force, Sum Assured on Maturity equal to 105% of the Total Premium Paid^{T&C4} shall be payable and the policy shall terminate.

Early Return of Premium Variant

A Term Plan with Early Return of Premium

This plan variant provides level cover from inception of the policy till the age of 60 years and thereafter the cover reduces to 50% till the end of the policy term.

In case of survival of the Life Assured till the next policy anniversary post attainment of age of 60 years, 105% of the Total Premiums Paid^{T&C4} would be payable and the policy shall continue till the end of the policy term with reduced cover.

Eligibility Criteria:

Plan Variant	Early Return of Premium
Entry Age	Minimum: 18 years Maximum: 45 years
Premium Payment Term (PPT)*	Limited Pay: 10 years / 15 years / Pay till 60
Policy Term (PT)	Maturity Age minus Age at Entry
Maturity Age	75 years / 80 years
Base Sum Assured	Minimum: 25 Lakhs Maximum: No Limit, subject to Board Approved Underwriting Policy

All the references to age are based on age last birthday.

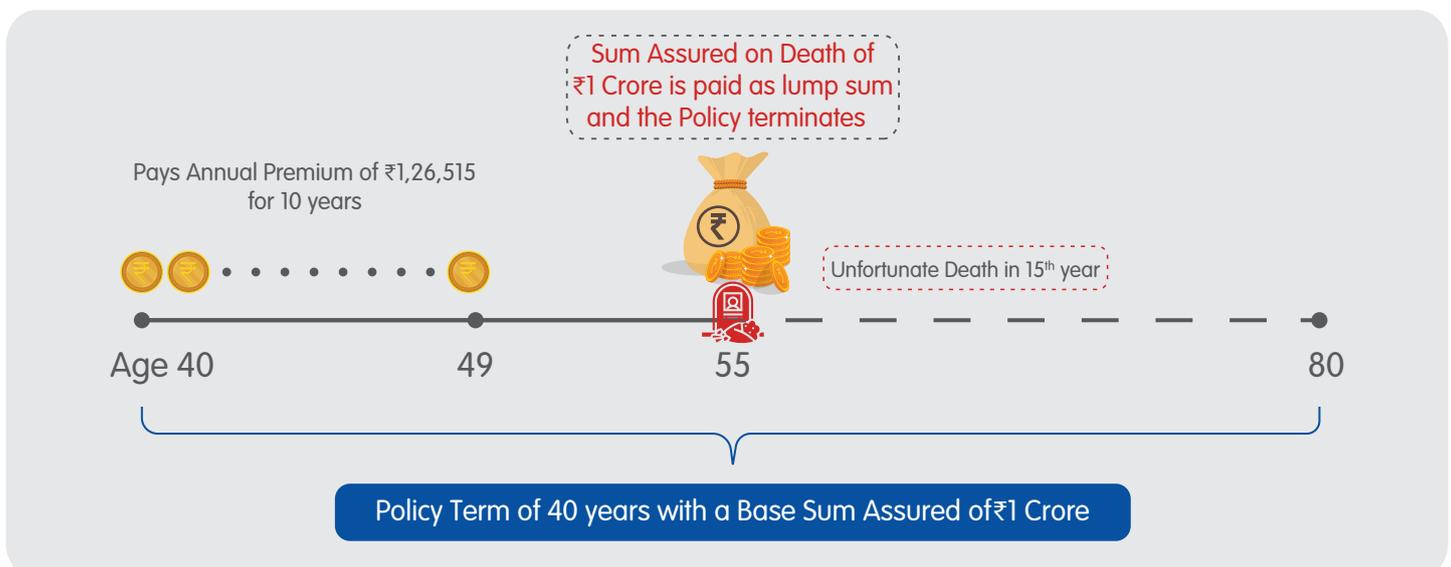
*Premium Paying Term shall not exceed beyond 60 years of Age

Illustration:

Mr. Sanjay, 40-years old, buys Reliance Nippon Life Super Suraksha - Early Return of Premium variant. He opts for a cover till the age of 80 years and decides to pay premiums annually for 10 years. He chooses Base Sum Assured of Rs 1 Crore by paying premium of Rs. 1,26,515.

Scenario 1:

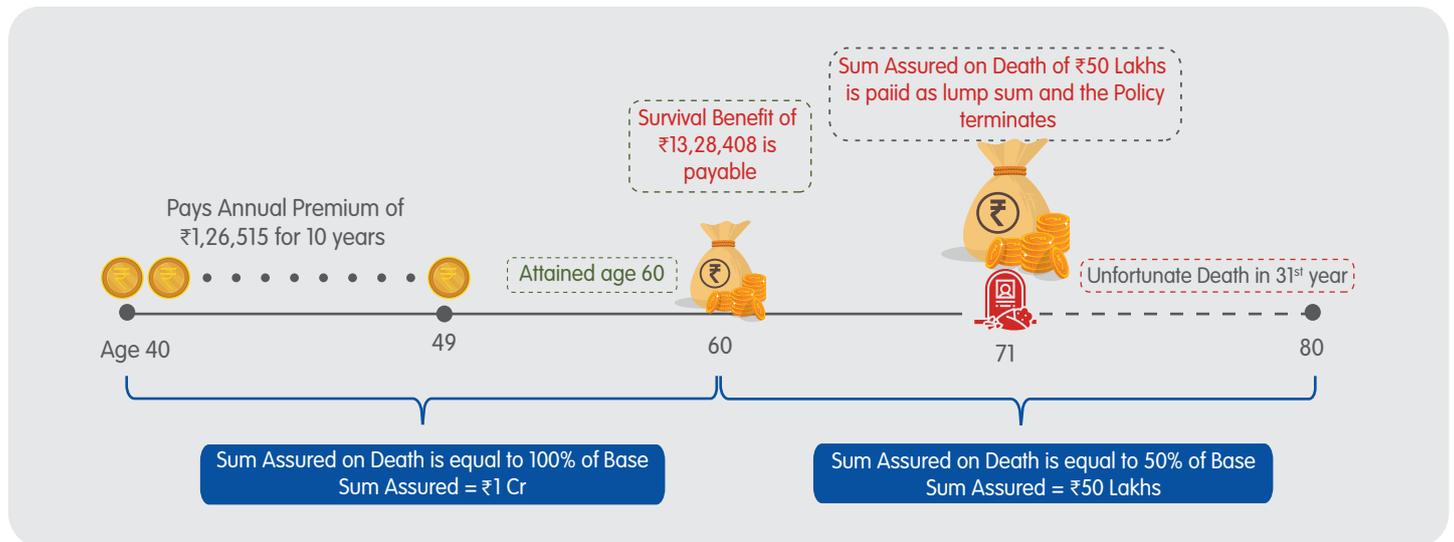
In case of an unfortunate demise of Mr. Sanjay before the policy anniversary immediately following the attainment of the age of 60 years, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 1 Crore and the policy will terminate.



Scenario 2:

On Survival till the policy anniversary immediately following the attainment of the age of 60, Mr. Sanjay would receive 105% of the Total Premium Paid i.e., Rs.13,28,408 and the policy continues with a reduced Base Sum Assured of Rs. 50 Lakhs i.e., 50% of Base Sum Assured at inception, till the end of the policy term or death, whichever is earlier.

Additionally, in case of an unfortunate demise of Mr. Sanjay after the policy anniversary immediately following the attainment of the age of 60 years but before the end of the policy term, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 50 Lakhs and the policy will terminate.



Benefits in details:

Death Benefit:

On unfortunate demise of the Life Assured during the policy term, provided the policy is in force, Sum Assured on Death shall be payable as a lump sum and the policy shall terminate.

Sum Assured on Death is higher of:

- 11 times of the Annualized Premium^{T&C6} at policy inception; or
- 105% of Total Premiums Paid^{T&C4} as on the date of death of Life Assured; or
- Absolute Amount Assured to be paid on Death of Life Assured

Where, Absolute Amount Assured to be paid on Death is equal to:

- From inception till end of the policy year in which Life Assured attains age of 60 years: 100% of Base Sum Assured
- From policy anniversary immediately following the attainment of the age of 60 years till the end of policy term: 50% of Base Sum Assured

Survival Benefit:

In case of survival of the Life Assured till the policy anniversary immediately following attainment of age of 60 years, provided the policy is in force, 105% of the Total Premium Paid^{T&C4} shall be payable.

Maturity Benefit:

There is no Maturity Benefit payable under this plan variant.

Income Benefit Variant

A Term Plan with Survival Income Benefit

This plan variant provides a regular monthly income equal to 0.1% of Base Sum Assured from the policy anniversary immediately following the attainment of age 60 years till the end of the policy term or death, whichever is earlier.

The plan provides level cover till the end of the policy year in which Life Assured attains age of 60 years and thereafter Survival Benefit already paid till the date of death would be deducted from the Base Sum Assured.

Eligibility Criteria:

Plan Variant	Income Benefit
Entry Age	Minimum: 18 years Maximum: 45 years
Premium Payment Term (PPT)*	Limited Pay: 10 years / 15 years / Pay till 60
Policy Term (PT)	Maturity Age minus Age at Entry
Maturity Age	75 years / 80 years
Base Sum Assured	Minimum: 25 Lakhs Maximum: No Limit, subject to Board Approved Underwriting Policy

All the references to age are based on age last birthday.

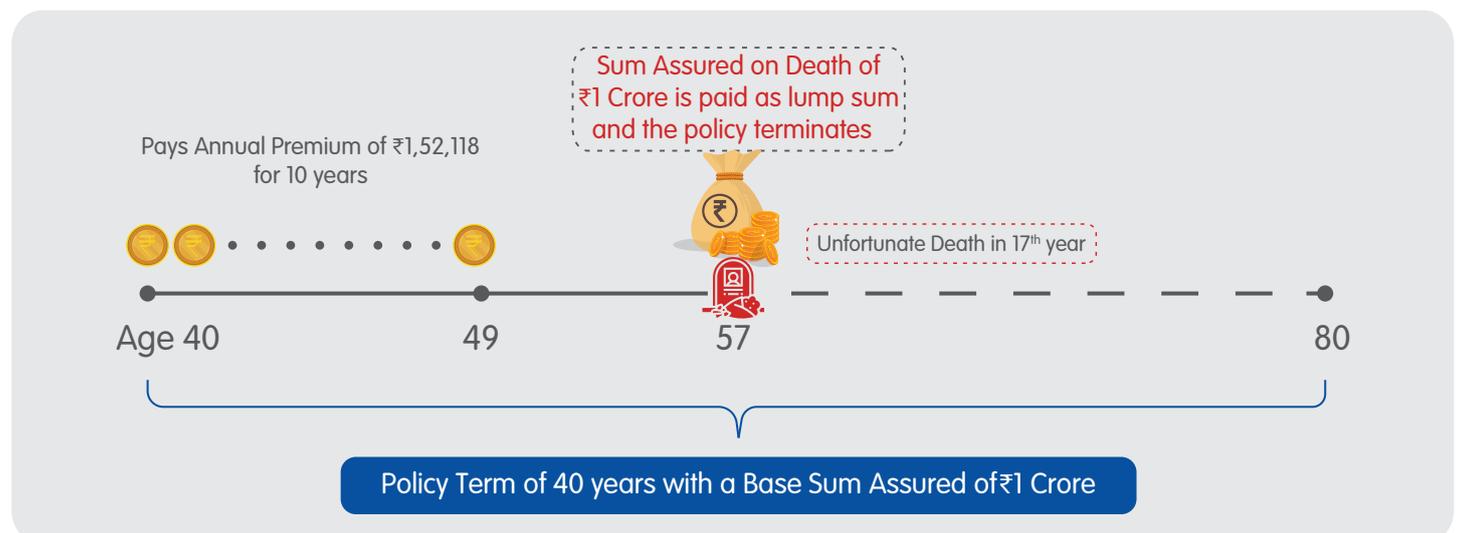
*Premium Paying Term shall not exceed beyond 60 years of Age

Illustration:

Mr. Rohit, 40-years old, buys Reliance Nippon Life Super Suraksha – Income Benefit variant with income amount of 0.1% of Base Sum Assured. He opts for a cover till the age of 80 years and decides to pay premiums annually for 10 years. He chooses Base Sum Assured of Rs 1 Crore by paying premium of Rs. 1,52,118.

Scenario 1:

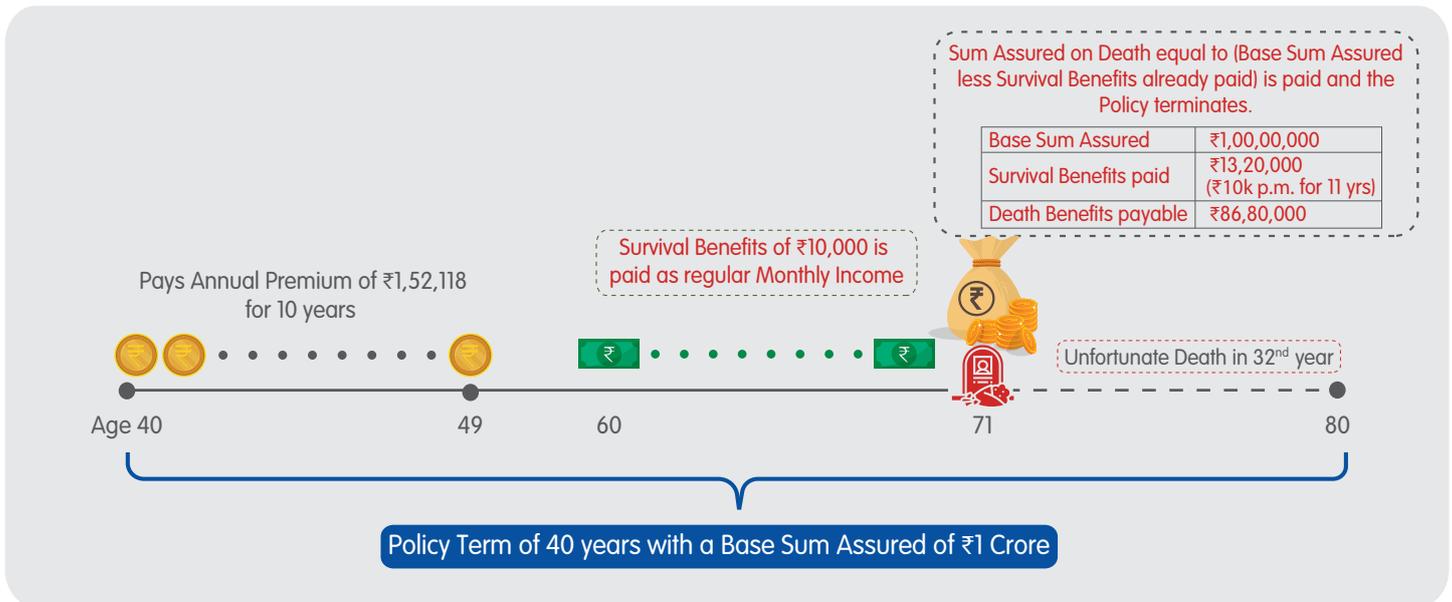
In case of an unfortunate demise of Mr. Rohit before the policy anniversary immediately following the attainment of the age of 60 years, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 1 Crore and the policy will terminate.



Scenario 2:

On Survival till the policy anniversary immediately following the attainment of the age of 60, provided the policy is in force, Mr. Rohit would start receiving a monthly income of Rs. 10,000 (i.e. 0.1% of Base Sum Assured) from the policy anniversary immediately following attainment of age 60.

In case of an unfortunate demise of Mr. Rohit after the policy anniversary immediately following the attainment of the age of 60 years but before the end of the policy term, provided the policy is in force, his nominee(s) / beneficiary(s) shall be paid Rs. 1 Crore less Survival Benefit already paid and the policy will terminate.



Benefits in details:

Death Benefit:

On unfortunate demise of the Life Assured during the policy term, provided the policy is in force, Sum Assured on Death shall be payable as a lump sum and the policy shall terminate.

Sum Assured on Death is higher of:

- 11 times of the Annualized Premium^{T&C6} at policy inception; or
- 105% of Total Premiums Paid^{T&C4} as on the date of death of Life Assured; or
- Absolute Amount Assured to be paid on Death of Life Assured

Where, Absolute Amount Assured to be paid on Death is equal to Base Sum Assured less Survival Benefit already paid till the date of death, if any.

Survival Benefit:

In case of survival of the Life Assured till the policy anniversary immediately following attainment of age 60 years, provided the policy is in-force, survival benefit equals to 0.1% of the Base Sum Assured, as chosen at inception, is payable as regular monthly income, till the end of the Policy Term or death, whichever is earlier.

Maturity Benefit:

There is no Maturity Benefit payable under this plan variant.

Life Plus Variant

A Term Plan with in-built Accidental Death Benefit

This plan variant provides level cover throughout the term of the policy with an additional benefit in case of an Accidental Death.

Eligibility Criteria:

Plan Variant	Life Plus
Entry Age	Minimum: 18 years Maximum: 65 years
Premium Payment Term (PPT)	Regular Pay
Policy Term (PT)	10,15,20,25,30,35 & 40 years Availability of Policy Term option is subject to Maximum Maturity Age
Max Maturity Age	75 years
Base Sum Assured	Minimum: 25 Lakhs Maximum: No Limit, subject to Board Approved Underwriting Policy

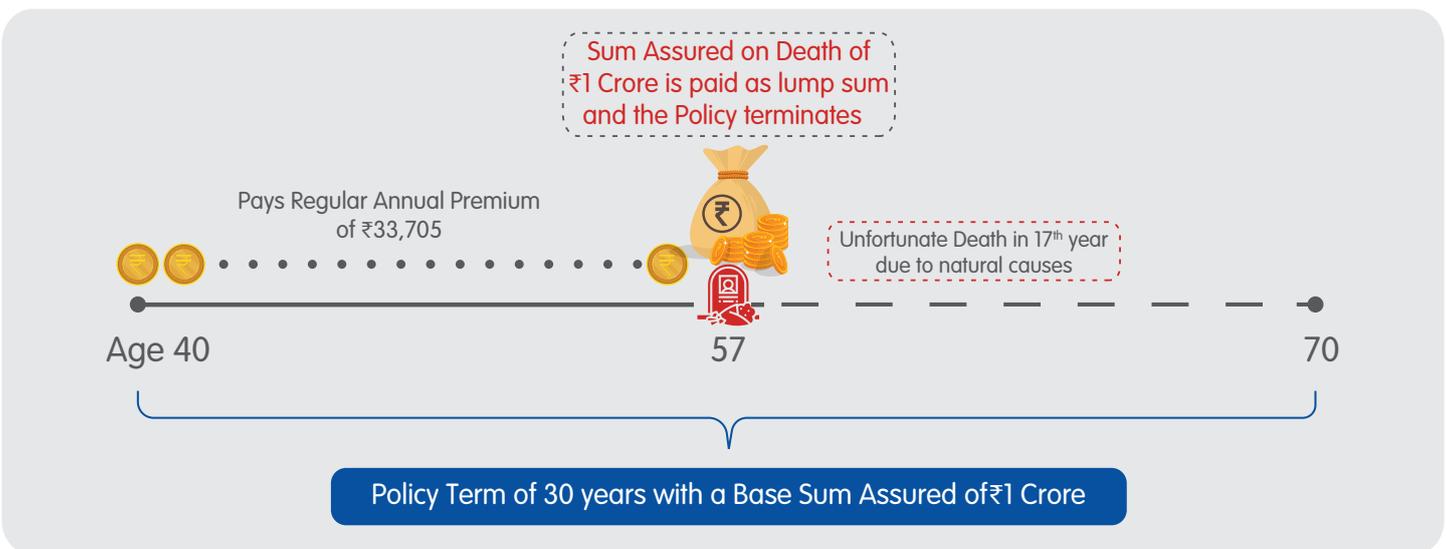
All the references to age are based on age last birthday.

Illustration:

Mr. Mohit, 40-years old, buys Reliance Nippon Life Super Suraksha – Life Plus variant. He opts for a policy term of 30 years and a Base Sum Assured of Rs 1 Crore. He would pay a premium of Rs. 33,705 annually for 30 years.

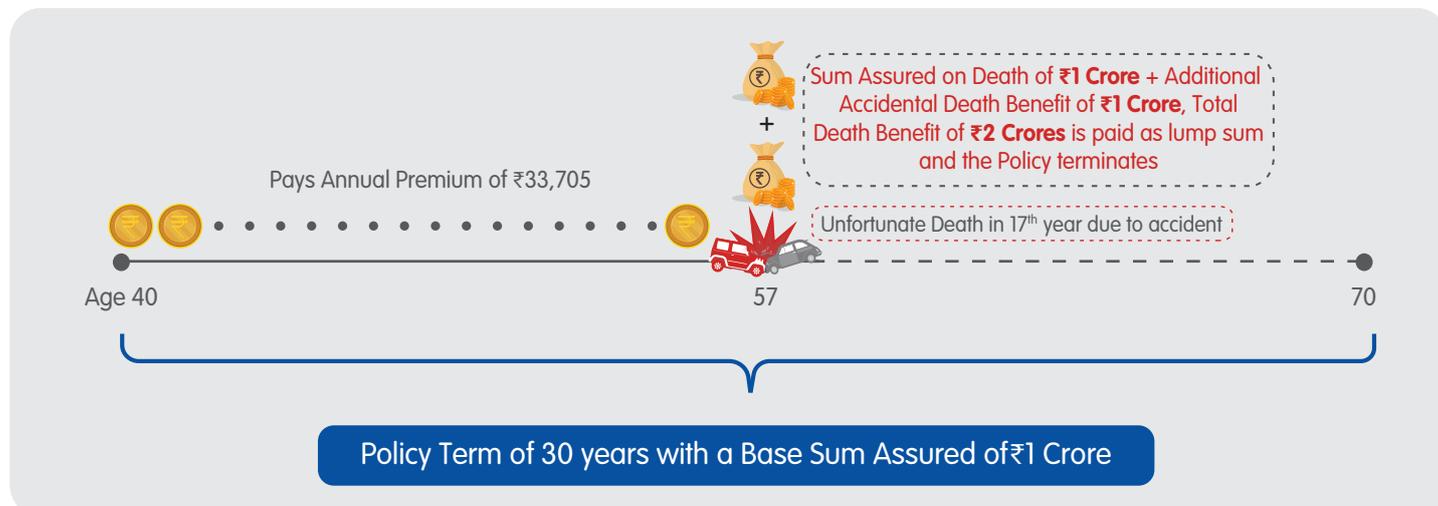
Scenario 1:

In case of an unfortunate demise of Mr. Mohit during the policy term, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 1 Crore and the policy will terminate.



Scenario 2:

In case of an unfortunate death of Mr. Mohit Due to an accident during the policy term, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 1 Crore + additional Rs. 1 Crore as accidental Death Benefit i.e. total of Rs. 2 Crore and the policy will terminate.



Benefits in details:

Death Benefit:

On unfortunate demise of the Life Assured during the policy term, provided the policy is in force, Sum Assured on Death shall be payable as a lump sum and the policy shall terminate.

Sum Assured on Death is higher of:

1. 11 times of the Annualized Premium^{T&C6} at policy inception; or
2. 105% of Total Premiums Paid^{T&C4} as on the date of death of Life Assured; or
3. Absolute Amount Assured to be paid on Death of Life Assured

Where, Absolute Amount Assured to be paid on Death is equal to Base Sum Assured chosen at inception.

Accidental Death Benefit:

In case of death due to an Accident within 180 days of the occurrence of an accident during the policy term, provided the policy is in force, an additional Accidental Death Benefit equal to Base Sum Assured, subject to maximum of 1 Crore, shall be payable.

If accident occurs during the policy term and the policy is in force at the time of accident, and death caused directly by such accident and independent of all other causes within 180 days of the accident, accidental death benefit shall be payable even if the death occurs after the end/lapse of the policy term.

An accident is defined as a sudden, unforeseen and involuntary event caused by external, visible and violent means.

“Accidental Death” means that the Life Assured sustains any bodily injury resulting solely from an accident and where such injury solely and directly and independently of all other causes results in the death of the Life Assured within 180 days of its occurrence.”The exclusions with respect to the benefit are as mentioned in the Terms & Conditions Section 7.

Survival Benefit:

There is no Survival Benefit payable under this plan variant.

Maturity Benefit:

There is no Maturity Benefit payable under this plan variant.

Life & Health Variant

A Term Plan with in-built Accidental Death Benefit and Critical Illness Benefit

This plan variant provides in-built additional Critical Illness benefit along with the benefits under Life Plus variant.

In the event of Life Assured being diagnosed with any one of the covered 25 Critical Illnesses, provided the policy is in force, an amount equal to 25% of Base Sum Assured shall be payable, subject to maximum of Rs. 50 Lakhs.

Post payment of Critical Illness benefit, the Critical Illness benefit would terminate and the premium corresponding to it will not be payable. However, the premium for all other benefits would be payable to keep the policy in force.

Eligibility Criteria:

Plan Variant	Life & Health
Entry Age	Minimum: 18 years Maximum: 65 years
Premium Payment Term (PPT)	Regular Pay
Policy Term (PT)	10,15,20,25,30,35 & 40 years Availability of Policy Term option is subject to Maximum Maturity Age
Max Maturity Age	75 years
Base Sum Assured	Minimum: 25 Lakhs Maximum: No Limit, subject to Board Approved Underwriting Policy

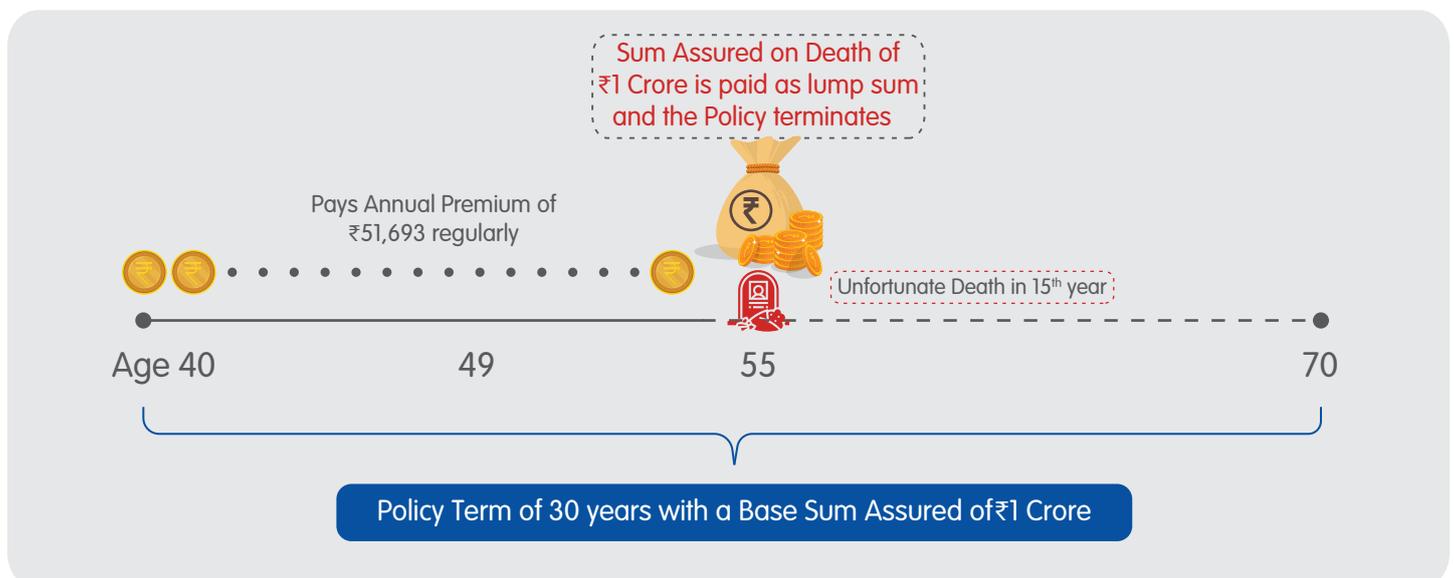
All the references to age are based on age last birthday.

Illustration:

Mr. Arvind, 40-years old, buys Reliance Nippon Life Super Suraksha – Life & Health variant. He opts for a policy term of 30 years and a Base Sum Assured of Rs 1 Crore. He would pay a premium of Rs. 51,693 annually for 30 years.

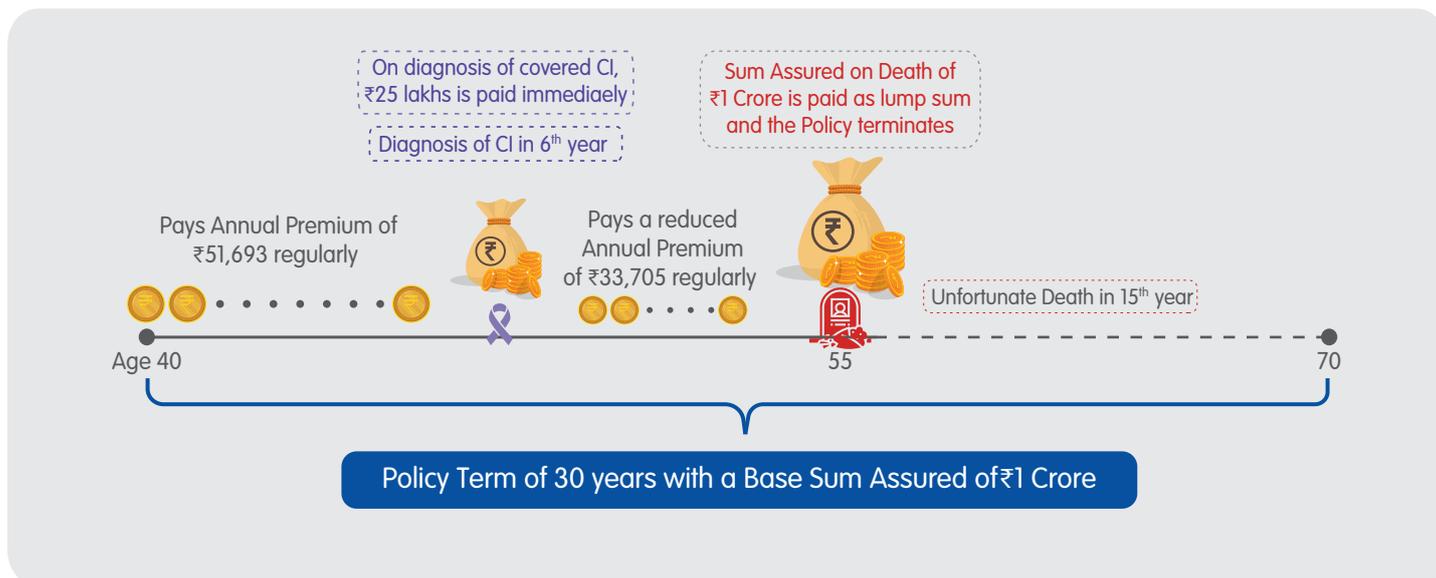
Scenario 1:

In case of an unfortunate demise of Mr. Arvind during the policy term, provided the policy is in force, his nominee(s)/ beneficiary(s) shall be paid Rs. 1 Crore and the policy will terminate.



Scenario 2:

In case Mr. Arvind is diagnosed with any of the 25 listed Critical Illness, provided the policy is in force, he shall receive Rs. 25 lakhs immediately as Critical Illness benefit. His future premiums will reduce to Rs. 33,705 post payment of Critical Illness benefit. Upon subsequent death of Mr. Arvind during the policy term, provided the policy is in force, his nominee(s)/ beneficiary(s) shall receive Rs. 1 Crore as Death Benefit and the policy shall terminate.



Benefits in details:

Death Benefit:

Death Benefit under Life & Health variant is same as Death Benefit under Life Plus variant.

Survival Benefit:

There is no Survival Benefit payable under this plan variant.

Maturity Benefit:

There is no Maturity Benefit payable under this plan variant.

Critical Illness Benefit:

In the event of Life Assured being diagnosed with any one of the covered 25 Critical Illnesses during policy term after waiting period of 90 days from date of commencement of risk or from the date of revival, provided the policy is in force, an amount equal to 25% of Base Sum Assured, subject to maximum of Rs. 50 Lakhs, shall be payable if the Life Assured survives for a period of 30 days following the diagnosis of the covered Critical Illnesses.

If the diagnosis is made within the policy term and however the survival period crosses the end point of policy term, a valid claim arising as a result of such a diagnosis shall not be denied.

The exclusions with respect to the benefit are as mentioned in the Terms & Conditions Section 8.

Waiting Period:

A waiting period of 90 days from the date of commencement of risk and from the date of revival for every subsequent revival during the policy term, will be applicable. No benefits shall be payable on diagnosis of the covered critical illness during this waiting period.

List of Critical Illnesses covered

1	Cancer of Specified Severity	14	Benign Brain Tumor
2	Open Chest CABG	15	Motor Neuron disease with permanent symptoms
3	Myocardial Infarction (First Heart Attack of Specific Severity)	16	End Stage Lung Failure
4	Stroke resulting in Permanent Symptoms	17	End Stage Liver Failure
5	Kidney Failure Requiring Regular Dialysis	18	Aplastic Anaemia
6	Major Surgery of Aorta	19	Systemic Lupus Erythematosus with Lupus Nephritis
7	Open Heart replacement or Repair of Heart Valves	20	Alzheimer's Disease (before age 61)
8	Major Organ /Bone Marrow Transplant	21	Parkinson's Disease (before age 61)
9	Permanent Paralysis of Limbs	22	Major Head Trauma
10	Blindness	23	Loss of Speech
11	Coma of Specified Severity	24	Primary (idiopathic) Pulmonary Hypertension
12	Third Degree Burns	25	Apallic Syndrome
13	Multiple Sclerosis with Persisting Symptoms		

A comprehensive list of definitions of each of the above critical illness and the relevant exclusions are covered in Annexure A.

Reliance Nippon Life Super Suraksha: Sample Premiums

Variant	Return of Premium		Early Return of Premium	Income Benefit (@0.1% of BSA)	Life Plus			Life & Health		
	10/20	10/30	10/upto age 75	10/upto age 75	10/10	20/20	30/30	10/10	20/20	30/30
Age	SA: 50 Lakhs									
30	18,616	22,084	37,228	51,122	10,632	10,690	11,526	12,223	13,526	15,263
35	24,925	31,208	42,276	54,592	11,701	12,416	14,138	14,490	16,939	19,876
40	34,631	43,523	57,886	65,674	13,494	15,472	18,262	18,337	22,295	27,256
45	51,969	64,789	87,495	79,369	17,625	20,909	25,653	24,839	30,894	39,215
50	75,406	NA	NA	NA	24,720	29,594	NA	34,124	44,504	NA
55	1,11,621	NA	NA	NA	34,188	43,731	NA	47,531	66,745	NA
60	NA	NA	NA	NA	47,362	NA	NA	71,306	NA	NA
Age	SA: 1 Cr									
30	30,266	37,970	65,679	95,313	17,946	18,241	20,172	21,128	23,912	27,646
35	42,904	56,040	76,480	1,03,526	20,196	21,917	25,499	25,775	30,962	36,975
40	62,172	80,445	1,06,394	1,25,805	23,623	28,080	33,705	33,308	41,727	51,693
45	97,108	1,22,769	1,64,037	1,53,734	32,172	39,193	48,501	46,599	59,164	75,624
50	1,45,099	NA	NA	NA	47,036	57,003	NA	65,844	86,822	NA
55	2,17,788	NA	NA	NA	66,660	85,453	NA	93,346	1,31,481	NA
60	NA	NA	NA	NA	93,625	NA	NA	1,41,513	NA	NA

All the references to age are based on age last birthday.

Premium amount shown above is for healthy male Life Assured, non-staff/non-online sale and non-tobacco customer, annual premium payment frequency, exclusive of any applicable taxes and levies.

The premium rates under this product depend on the age at entry and gender of the Life Assured, plan variant chosen at inception of the policy, policy term, premium payment term, sum assured, health and tobacco consumption status.

Other Features

o Policy Loan

There is no loan facility available under this plan.

o Riders

We offer the following riders to help you enhance your protection. The following riders can be chosen with Return of Premium variant, Early Return of Premium variant and Income Benefit variant only:

- 1. Reliance Nippon Life Accidental Death Benefit Rider (UIN:121B032V02)** - Provides a lump sum equal to the rider sum assured in case of death due to accident of Life Assured.
- 2. Reliance Nippon Life Accidental Death and Disability Rider (UIN:121B017V02)** - Provides a lump sum equal to the rider sum assured in case of death due to accident of Life Assured. In case of total and permanent disability, an amount equal to the rider sum assured shall be payable in equal annual installments over 10 years period under this policy.
- 3. Reliance Nippon Life Accidental Death and Disability Plus Rider (UIN:121B016V02)** - Provides a lump sum equal to the rider sum assured in case of death due to accident of Life Assured. In case of total and permanent disability, an amount equal to the rider sum assured shall be payable in equal annual installments over 10 years period under this policy along with waiver of future premiums under the policy.

You can choose any one of the above riders.

- 4. Reliance Nippon Life Critical Illness Rider¹ (UIN: 121B018V01)** - Provides a lump sum amount equal to rider sum assured if diagnosed with any of the 25 critical illnesses including cancer, heart attack, paralysis, major organ transplant and many more.

Riders may be selected at the inception of the policy, if available or on any subsequent policy anniversary, if available, subject to the rider terms and conditions.

The rider sum assured cannot be higher than the sum assured on death under the base policy. Riders will be offered only where the outstanding premium payment term is at least 5 years. The rider premium payment term cannot be more than the premium payment term of the base policy if opted at the inception of the base policy or the outstanding premium payment term of the base policy, if taken subsequently. The rider policy term cannot be more than outstanding policy term of the base policy. Rider premium should be paid along with the premium for the base policy on the due date or within the grace period. The mode and frequency of rider premium payment shall be same as the mode and frequency of premium payment under the base policy.

For further details on all the conditions, exclusions related to the riders, please read the rider terms and conditions and rider sales brochure carefully or contact our customer service team.

¹Kindly refer the sales brochure for Reliance Nippon Life Critical Illness Rider for details of illnesses covered under this rider.

o Premium Payment Frequencies

You have an option to pay premiums at yearly, half-yearly, quarterly or monthly frequencies. Quarterly and monthly frequencies are allowed only if the premiums are paid electronically, like through ECS/NACH or online payment. For monthly frequency, first two months' premiums will be collected in advance at the time of issuance of the policy.

Frequency loading on premium will be applicable as per the table below:

Premium Payment Frequency	Yearly	Half- yearly	Quarterly	Monthly
Frequency loading (as a % of Annualized Premium)	0%	1.50%	2.25%	3.00%

o Grace Period for payment of premiums

If you are unable to pay your premium by the due date, you will be given a grace period of 30 days (15 days for monthly mode). During the grace period the policy shall continue to remain in force and all benefits under this policy shall be payable subject to deduction of the unpaid due premium for that policy year.

o Surrender

Return of Premium, Early Return of Premium and Income Benefit variants:

A policy shall acquire surrender value if all due premiums have been paid in full for at least first two consecutive policy years.

The surrender value payable is higher of

- Guaranteed Surrender Value (GSV)
- Special Surrender Value (SSV)

For more details on GSV and SSV, please refer to the policy document. The policy will be terminated once it is surrendered and cannot be reinstated.

Life Plus and Life & Health variants:

Policy does not acquire any surrender value.

o Premium Discontinuance

Lapse

Return of Premium, Early Return of Premium and Income Benefit variants:

A policy shall lapse at the end of the grace period, if premium due for first two policy years have not paid in full.

Life Plus and Life & Health variants:

A policy shall lapse at the end of the grace period if all due premiums have not been paid in full under the policy.

No benefits will be paid when the policy is in Lapsed status. A lapsed policy can be

revived within the revival period which is five years starting from the due date of first unpaid premium but before the maturity date. The revival is subject to company's Board Approved Underwriting Policy. If a lapsed policy is not revived till the end of period of revival, the policy will be terminated.

Paid-up or Reduced Paid-up

Return of Premium, Early Return of Premium and Income Benefit variants:

If all due premiums have been paid in full for at least first two consecutive policy years and no future premiums are paid, the policy will move to paid-up (or reduced paid-up) status.

On your policy becoming paid-up, benefits under the policy will be reduced as given below:

Benefit	Plan Variant	When is it Payable	Payout
Death Benefit	Return of Premium	On death of the Life Assured during the policy term	Paid-up Sum Assured on Death
	Early Return of Premium		
	Income Benefit		
Survival Benefit	Return of Premium	Not Applicable	Not Applicable
	Early Return of Premium	On policy anniversary immediately following attainment of age of 60 years	105% of Total Premium Paid ^{T&C4}
	Income Benefit	At the end of policy term	Lumpsum amount equal to sum of all monthly income payable at the end of policy term on survival multiplied by paid-up factor
Maturity Benefit	Return of Premium	At the end of policy term	Paid-up Sum Assured on Maturity
	Early Return of Premium	Not Applicable	Not Applicable
	Income Benefit	Not Applicable	Not Applicable

Where:

- ✓ Paid-up Sum Assured on Death = Sum Assured on Death multiplied by Paid-up Factor
- ✓ Paid-up Sum Assured on Maturity = 105% of Total Premium Paid
- ✓ Paid Up Factor = No of Premiums paid divided by Number of Premiums payable during the Premium Payment Term

The Policy will terminate on payment of the Paid-up Death Benefit or Paid-up Maturity Benefit, as applicable, to the nominee(s)/ beneficiary(s).

Life Plus and Life & Health variants:

Policy does not acquire any Paid-up or Reduced Paid-up value.

o **Revival**

A policy in a lapsed or reduced paid-up condition can be revived during the revival period by paying the arrears of premiums along with interest at the prevailing rate of interest. The prevailing rate of interest will change from time to time. Revival period is the period of five consecutive years from the date of first unpaid premium but before the policy Maturity date.

Prevailing interest shall be equal to 10 year benchmark G-sec effective annual yield as on last working day of previous financial year, round up to the next multiple of 25 basis points. The rate of interest for revivals for FY 22-23 is 7.00% p.a. compounded yearly. Please contact us to know the prevailing rate of interest for revival of policies.

The revival of the policy and riders, if any, will be subject to Board Approved Underwriting Policy of the Company. The revival interest rate will be declared on 1st April and will be applicable for the financial year. The company reserves the right to revise the applicable interest rate less frequently than annual and change in basis of determination of revival interest rate subject to prior IRDAI approval.

On revival, the policy will be eligible for its complete benefits and any due and unpaid benefit shall be paid immediately when the policy is revived.

1. Alterations

The premium payment frequency can be changed during the Premium Payment Term. No other alterations can be made under this Policy.

2. Tax benefit

Premiums paid under Reliance Nippon Life Super Suraksha and rider(s) opted for, if any, may be eligible for tax deductions, subject to the applicable tax laws and conditions. Income tax benefits under this plan and rider benefits, if any, shall be applicable as per the prevailing income tax laws and are subject to amendments from time to time, kindly consult your tax advisor.

3. Taxes

Taxes, duties, cess and surcharges as levied by Tax authorities as per extant Tax Laws as amended from time to time will be levied on the base premium and on the rider premiums, if any.

In future, the Company shall pass on any additional taxes levied by the Government or any statutory authority to the policyholder. The method of collection of these taxes shall be informed to the policyholders under such circumstances.

4. Total Premiums Paid

Total Premiums Paid means the sum of all premiums paid for the Base Policy excluding any, extra premiums, rider premiums, if any, taxes and cess, if any.

5. Suicide exclusion

In case of death of Life Assured due to suicide within 12 months from the date of commencement of risk under the base policy or from the date of revival of the policy, as applicable, the nominee(s)/beneficiary(s) of the policyholder shall be entitled to 80% of the at least Total Premiums Paid^{T&C4} till date of death or the surrender value available as on the date of death, whichever is higher, provided the base policy is in force.

6. Annualized Premium

The Annualized Premium is the amount payable in a year with respect to the Base Sum Assured chosen by the policyholder under the base plan, excluding the underwriting extra premiums, rider premium, if any, loading for modal premiums, if any and taxes, cess and/ or levies. Substandard lives with medical conditions or other impairments will be charged appropriate additional premiums in accordance with the Board approved underwriting policy of the Company.

7. In-built Accidental Death Benefit Exclusions

The Accidental Death Benefit is not payable if death occurs exceeding 180 days of the occurrence of the accident within the policy term. The company will not pay any accidental death claim which results directly or indirectly from any one or more of the following:

i. The Life Assured taking part in any hazardous sport or pastimes (including hunting,

mountaineering, racing, steeple chasing, bungee jumping, etc., any underwater or subterranean operation or activity and racing of any kind other than on foot.

- ii. Participation by the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- iii. Intentional self-inflicted injury unless in self-defense or to save life, suicide or attempted suicide-whether sane or insane.
- iv. Under the influence or abuse of drugs, alcohol, narcotics or psychotropic substance not prescribed by a registered medical practitioner.
- v. War, civil commotion, invasion, terrorism, hostilities (whether war be declared or not).
- vi. The Life Assured taking part in any strike, industrial dispute or riot.
- vii. Participation by the insured person in a criminal or unlawful act with illegal or criminal intent.
- viii. Exposure to Nuclear reaction, Biological, radiation or nuclear or chemical contamination.

8. In-built Critical Illness Benefit Exclusions

The company shall not be liable to make any payment under this Policy towards a covered Critical Illness resulting from or in respect of any of the following:

- i. Any Illness, sickness or disease other than those specified as Critical Illnesses under this Policy;
- ii. Pre-existing Disease, unless Life Assured has disclosed the same at the time of proposal or date of revival whichever is later, and the Company has accepted the same.

Where, Pre-existing Disease means any condition, ailment, injury or disease:

- a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or
 - b) For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy or its reinstatement.
- iii. Any Critical Illness caused due to treatment for Alcoholism or any addictive condition and consequences thereof.
 - iv. Any condition caused by or associated with any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis, but excluding HIV / AIDs.
 - v. Drugs or substances or narcotics used by the Insured Person unless taken as prescribed by a registered Medical Practitioner,
 - vi. Any Critical Illness caused due to intentional self-injury, suicide or attempted suicide
 - vii. Any Critical Illness, caused by foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), civil war, public defense, rebellion, revolution, insurrection, military or usurped power.
 - viii. Any Critical Illness caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.

- ix. Congenital External Anomalies or any complications or conditions therefrom including any developmental conditions of the Insured.
- x. Any critical illness caused by any treatment necessitated due to participation as a professional in hazardous or adventure sport, including but not limited to, para jumping rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep sea diving.
- xi. Participation by the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- xii. Any Critical Illness, caused by Medical treatment traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy. Any Critical Illness due to miscarriages (unless due to an accident) and lawful medical termination of pregnancy during the policy period.
- xiii. Any Critical Illness, caused by any unproven treatment, service and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.
- xiv. Any Critical Illness based on certification/diagnosis/treatment from persons not registered as Medical Practitioners, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for.
- xv. Any Critical Illness, caused due to any treatment, including surgical management, to change characteristics of the body to those of opposite sex.
- xvi. Any Critical Illness, caused due to cosmetic or plastic surgery or any treatment to change the appearance unless for reconstruction following an Accident, Burn(s), or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered as a medical necessity, it must be certified by the attending Medical Practitioner.
- xvii. Any Critical Illness, caused due to surgical treatment of obesity that does not fulfil all the below conditions:
 - a) Surgery to be conducted is upon the advice of the Doctor
 - b) The Surgery / Procedure conducted should be supported by clinical protocols
 - c) The member has to be 18 years of age or older and
 - d) Body Mass Index (BMI);
 - 1) greater than or equal to 40 or
 - 2) greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - i) Obesity related cardiomyopathy
 - ii) Coronary heart disease
 - iii) Severe Sleep Apnea
 - iv) Uncontrolled Type 2 Diabetes
- xviii. Any Critical Illness caused due to treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reason.
- xix. Any Critical Illness directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

- xx. In the event of the death of the Insured Person within the stipulated survival period as set out above.
- xxi. Any Critical Illness, caused by treatment related to Birth Control, sterility and infertility. This includes:
 - a) Any type of contraception, sterilization
 - b) Assisted Reproductive services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - c) Gestational Surrogacy
 - d) Reversal of sterilization

9. Online Mode

The product is available for online sale.

10. Premium Rate Guarantee

Premium rates are guaranteed for the entire policy term except for Life & Health variant. The premium rates for in-build additional critical illness benefit Life & Health variant are guaranteed for an initial period of fifteen years from Date of Commencement of risk of the policy and are reviewable thereafter subject to IRDAI approval. Any revision in the premium rates shall be notified to the policyholder at least three months prior to date of such revision.

The review in premium rates shall be in compliance with regulation 6 of IRDA (Health Insurance) Regulations, 2016.

11. Free look period

In the event you are in disagreement with the terms and conditions stipulated in the policy document, you may wish to opt out of this plan, by stating the reasons of your disagreement in writing and return the policy to the company within 15 days of its receipt where policy has been obtained through other than distance marketing⁸ (30 days of receipt where the policy has been obtained through distance marketing⁸ mode) for cancellation.

You are requested to take appropriate acknowledgement of your request letter and return of policy document.

In such event, the company will refund the premium paid subject to a deduction of a proportionate risk premium for the period of cover and the expenses incurred by the Company on your medical examination, if any, and stamp duty charges.

The Policy shall terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.

Please note that if the policy is opted through Insurance Repository ('IR'), the computation of the said free look period will be from the date of the email informing policy credit in IR. Any request received for free look cancellation of the policy shall be processed and premium refunded within 15 days of receipt of the request.

⁸Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through the following modes:

- i. Voice mode, which includes telephone-calling:
- ii. Short Messaging services (SMS):
- iii. Electronic mode which includes e-mail, internet and interactive television (DTH):

- iv. Physical mode which includes direct postal mail and newspaper & magazine inserts; and
- v. Solicitation through any means of communication other than in person.

12. Nomination & Assignment

Nomination is allowed as per Section 39 of the Insurance Act, 1938, as amended from time to time. Assignment is allowed under this plan as per Section 38 of the Insurance Act, 1938, as amended from time to time.

13. Section 41 of the Insurance Act, 1938, as amended from time to time

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

14. Section 45 of the Insurance Act, 1938, as amended from time to time

1. No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later.
2. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based.
3. Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.
4. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the Policy of life insurance is based: provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall

be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation.

5. Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the Life Assured was incorrectly stated in the proposal.

Note

This product brochure gives only the salient features of the plan and it is only indicative of terms, conditions, warranties and exceptions. This brochure should be read in conjunction with the Benefit Illustration and Policy Terms and Conditions. For further details on all the conditions, exclusion related to Reliance Nippon Life Super Suraksha, please contact our insurance advisors.

Tax laws are subject to change, consulting a tax expert is advisable.

Reliance Nippon Life Insurance Company Limited. IRDAI Registration No: 121 CIN: U66010MH2001PLC167089 Registered & Corporate Office: Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road, Bandra Kurla Complex, Bandra East, Mumbai- 400051 For more information or any grievance,

1. Call us between 9am to 6pm, Monday to Saturday on our Toll Free Number 1800 102 1010 or
2. Visit us at www.reliancenipponlife.com or
3. Email us at: rnlife.customerservice@relianceada.com.
4. Chat with us on our WhatsApp number (+91 7208852700)

Unique Identification Number (UIN): Reliance Nippon Life Super Suraksha: 121N144V01

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BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS/FRAUDULENT OFFERS

IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

Mktg/RNLIC_Super Suraksha Brochure 01/V1/December 2022

Annexure A – Definitions & Exclusions of covered critical illnesses

1. Cancer of Specified Severity

A malignant tumor 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. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded –

- i. 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.
- ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- iii. Malignant melanoma that has not caused invasion beyond the epidermis;
- iv. All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- vi. Chronic lymphocytic leukemia less than Rai stage 3
- vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- viii. 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;

2. 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 breastbone) 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:

- i. Angioplasty and/or any other intra-arterial procedures

3. Myocardial Infarction (First Heart Attack of Specific 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 should be evidenced by all of the following criteria:

- i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g., typical chest pain)
- ii. New characteristic electrocardiogram changes
- iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

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

4. Stroke resulting in Permanent Symptoms

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

The following are excluded:

- i. Transient ischemic attacks (TIA)
- ii. Traumatic Injury of the brain
- iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

5. Kidney Failure Requiring Regular Dialysis

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. diagnosis has to be confirmed by a specialist medical practitioner.

6. Major Surgery of 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.

7. 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.

8. Major Organ/Bone Marrow Transplant

The actual undergoing of a transplant of:

- i. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

- i. Other stem-cell transplants
- ii. Where only islets of Langerhans are transplanted.

9. Permanent Paralysis of Limbs

Total and irreversible loss of use of two or more limbs as a result of Injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis

will be permanent with no hope of recovery and must be present for more than 3 months.

10. Blindness

Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident. The Blindness is evidenced by:

- i. corrected visual acuity being 3/60 or less in both eyes or;
- ii. the field of vision being less than 10 degrees in both eyes.

The diagnosis of blindness must be confirmed and must not be correctable by aids or Surgical Procedure.

11. Coma of Specified Severity

A state of unconsciousness with no reaction or response to external stimuli or internal needs.

This diagnosis must be supported by evidence of all of the following:

- i. no response to external stimuli continuously for at least 96 hours;
- ii. life support measures are necessary to sustain life; and
- iii. permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

The condition has to be confirmed by a specialist medical practitioner. Coma resulting directly from alcohol or drug abuse is excluded.

12. Third Degree Burns

There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

13. Multiple Sclerosis with Persisting Symptoms

The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:

- i. investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
- ii. there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

Neurological damage due to SLE is excluded.

14. Benign Brain Tumor

Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.

This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.

- i. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
- ii. Undergone surgical resection or radiation therapy to treat the brain tumor.

The following conditions are excluded:

Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas,

abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

15. Motor Neuron disease with permanent symptoms

Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

16. End Stage Lung Failure

End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:

- i. FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
- ii. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
- iii. Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less ($\text{PaO}_2 < 55\text{mmHg}$); and
- iv. Dyspnea at rest

17. End Stage Liver Failure

Permanent and irreversible failure of liver function that has resulted in all three of the following:

- i. Permanent jaundice; and
- ii. Ascites; and
- iii. Hepatic encephalopathy.

Liver failure secondary to drug or alcohol abuse is excluded.

18. Aplastic Anaemia

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

- i. Blood product transfusion;
- ii. Marrow stimulating agents;
- iii. Immunosuppressive agents; or
- iv. Bone marrow transplantation.

The diagnosis must be confirmed by a haematologist using relevant laboratory investigations including Bone Marrow Biopsy resulting in bone marrow cellularity of less than 25% which is evidenced by any two of the following:

- i. Absolute neutrophil count of less than $500/\text{mm}^3$ or less
- ii. Platelets count less than $20,000/\text{mm}^3$ or less
- iii. Reticulocyte count of less than $20,000/\text{mm}^3$ or less

Temporary or reversible Aplastic Anaemia is excluded.

19. Systemic Lupus Erythematosus with Lupus Nephritis

A multi-system autoimmune disorder characterised by the development of autoantibodies directed against various self-antigens. In respect of this Policy, systemic

lupus erythematosus will be restricted to those forms of systemic lupus erythematosus which involve the kidneys (Class III to Class V Lupus Nephritis, established by renal biopsy, and in accordance with the WHO Classification). The final diagnosis must be confirmed by a registered doctor specialising in Rheumatology and Immunology.

The WHO Classification of Lupus Nephritis:

Class I Minimal Change Lupus Glomerulonephritis

Class II Messangial Lupus Glomerulonephritis

Class III Focal Segmental Proliferative Lupus Glomerulonephritis

Class IV Diffuse Proliferative Lupus Glomerulonephritis

Class V Membranous Lupus Glomerulonephritis

20. Alzheimer's Disease (before age 61)

Clinically established diagnosis of Alzheimer's Disease (presenile dementia) resulting in a permanent inability to perform independently three or more activities of daily living - bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication - or resulting in need of supervision and permanent presence of care staff due to the disease. These conditions have to be medically documented for at least 3 months.

21. Parkinson's Disease (before age 61)

The occurrence of Parkinson's Disease where there is an associated Neurological Deficit that results in Permanent Inability to perform independently at least three of the activities of daily living as defined below.

- i. Transfer: Getting in and out of bed without requiring external physical assistance
 - ii. Mobility: The ability to move from one room to another without requiring any external physical assistance
 - iii. Dressing: Putting on and taking of all necessary items of clothing without requiring any external physical assistance
 - iv. Bathing/Washing: The ability to wash in the bath or shower (including getting in and out of the bath or shower) or wash by other means
 - v. Eating: All tasks of getting food into the body once it has been prepared
- Parkinson's disease secondary to drug and/or alcohol abuse is excluded.

22. Major Head Trauma

Accidental head Injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes.

The Accidental Head Injury must result in an inability to perform at least three (3) of the following Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of

this benefit, the word “permanent” shall mean beyond the scope of recovery with current medical knowledge and technology.

The 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.

The following are excluded:

- i. Spinal cord Injury;

23. Loss of Speech

Total and irrecoverable 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.

24. Primary (Idiopathic) Pulmonary Hypertension

An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Catheterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.

The NYHA Classification of Cardiac Impairment are as follows:

- i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

25. Apallic Syndrome

Universal necrosis of the brain cortex with the brainstem remaining intact. The diagnosis must be confirmed by a Neurologist acceptable to Us and the condition must be documented for at least one month.