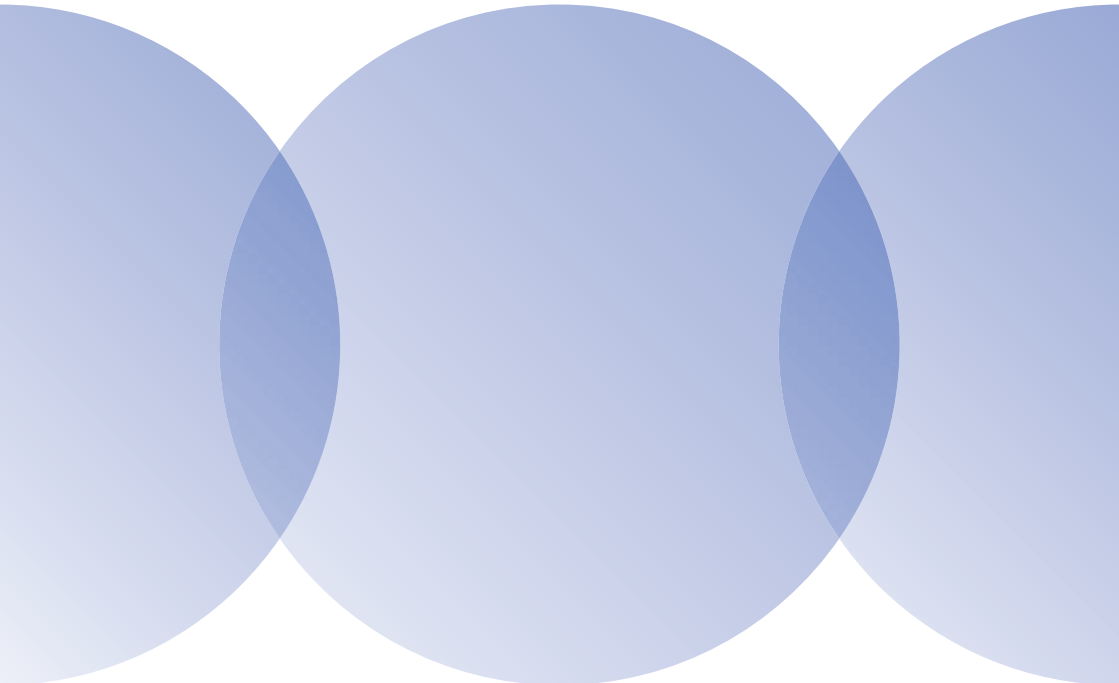


Critical illness plans

Your guide to your cover



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Understanding your cover

It's important you understand the critical illness cover you're buying from us. This booklet gives you full, plain English, explanations of the conditions and operations covered by the Decreasing Mortgage Cover plan or Level Protection plan.

In some places we've had to use medical terms, but where this is the case we've included additional background information to give you a better understanding of what they mean.

The definitions in this booklet are the same as those in the Plan Terms and Conditions, which is your contract with us. If you have any questions about your cover, please contact your adviser or us – our address is on the back of this booklet.

Key definitions

The Life Assurance Industry through the Association of British Insurers (the ABI) has agreed standard definitions for a number of operations and conditions. For those operations and conditions, our definitions match the ABI standard.

There are certain key definitions to be aware of whilst reading this booklet:

- **'Major UK hospital'** means any National Health Service hospital and any other hospital which the company agrees is a major UK hospital.

- **'Diagnosis'** means unequivocal diagnosis of the relevant condition.

All diagnosis and medical opinions must be given by a medical specialist who:

- is a consultant of a hospital in the UK
 - is acceptable to our chief medical officer
 - is a specialist in an area of medicine appropriate to the cause of the claim.
- **'Irreversible'** means cannot be reasonably improved upon by medical treatment and/or surgical procedures used by the National Health Service in the UK at the time of claim.
 - **'Occupation'** means a trade, profession or type of work undertaken for profit or pay. It is not a specific job with any particular employer and is independent of location.
 - **'Permanent'** means expected to last throughout the insured person's life, irrespective of when the cover ends or the insured person retires.

- **'Permanent neurological deficit with persisting clinical symptoms'** means symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the insured person's life.

Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of co-ordination, tremor, seizures, lethargy, dementia, delirium and coma.

The following are not covered:

- An abnormality seen on brain or other scans without definite clinical symptoms.
- Neurological signs occurring without symptomatic abnormality, e.g. brisk reflexes without other symptoms.
- Symptoms of psychological or psychiatric origin.

Important notes

You must survive for 14 days from the date a condition is diagnosed, or an operation is undergone, to be able to claim the critical illness cover on your plan. If your plan includes life cover, and you make a successful critical illness claim, you don't have to survive for 14 days before we'll pay the critical illness benefit, or an amount equal to the level of life cover if lower.

However, if your plan includes both life cover and critical illness cover (and the amount of critical illness cover is greater than the amount of life cover) you must survive 14 days from the date of diagnosis (of a critical illness that meets over plan definition) before we'll pay any excess critical illness cover.

The information contained in this booklet does not override, or in any way change, the cover provided by your plan or the definitions contained in the terms and conditions which apply to your plan.

Exclusions

The terms and conditions applicable to your plan include details of situations when we won't pay out. For example, we won't pay a critical illness claim or children's critical illness claim if the illness suffered does not meet the plan definitions exactly or the illness suffered is an illness that is not covered by the plan.

You should also be aware that we won't pay out a claim if the cause results either directly or indirectly from any of the events listed in the following exclusions table.

Event	Critical illness cover	Children's critical illness cover
Living abroad The medical condition arises while you are living abroad and you don't return to the United Kingdom or one of the other countries we specify. These are countries which, from our experience, we know we can manage the claims process effectively. Our current list of countries is Australia, Austria, Belgium, Canada, the Channel Islands, Denmark, Eire, Finland, France, Germany, Gibraltar, Greece, the Isle of Man, Italy, Luxembourg, the Netherlands, New Zealand, Norway, Portugal, Spain, Sweden, Switzerland and the USA.	Not paid	Not paid
Terrorism, war and civil commotion Any act of terrorism, war, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.	Not paid	Not paid

Operations and conditions covered

The complete list of conditions we cover is set out below. These headings are only a guide to what is covered. The full definitions of the illnesses covered and the circumstances in which you can claim start on page 9. These typically use medical terms to describe the illnesses but in some cases the cover may be limited. For example:

- Some types of cancer are not covered
- To make a claim for some illnesses, such as a stroke, you need to have permanent symptoms, and for others, such as a heart attack, the illness must be of a specified severity.
- Alzheimer’s disease before age 65 – resulting in permanent symptoms.
- Aorta graft surgery – for disease and trauma.
- Aplastic anaemia – resulting in permanent symptoms.
- Bacterial meningitis – resulting in permanent symptoms.
- Benign brain tumour – resulting in permanent symptoms.
- Blindness – permanent and irreversible.
- Cancer – excluding less advanced cases.
- Cardiomyopathy.
- Coma – resulting in permanent symptoms.
- Coronary artery by-pass grafts – with surgery to divide the breastbone (a payment is available to pay for surgery after being placed on an NHS waiting list).
- Creutzfeldt-Jakob Disease (CJD) – requiring continuous assistance.
- Deafness – permanent and irreversible.
- Encephalitis.
- Heart attack – of specified severity.
- Heart-valve replacement or repair – with surgery to divide the breastbone.
- HIV caught in the UK from a blood or blood product transfusion, by physical assault or at work in an eligible occupation*.
- Kidney failure – requiring dialysis.
- Liver failure – end stage.
- Loss of independent existence – resulting in permanent symptoms.
- Loss of hands or feet – permanent physical severance.
- Loss of speech – permanent and irreversible.
- Major organ transplant.
- Motor neurone disease – resulting in permanent symptoms.
- Multiple sclerosis – with persisting symptoms.
- Open heart surgery – with surgery to divide the breast bone.
- Paralysis of limbs – total and irreversible.
- Parkinson’s disease before age 65 – resulting in permanent symptoms.
- Pre-senile dementia before age 65 – resulting in permanent symptoms.

- Primary pulmonary arterial hypertension – resulting in permanent symptoms.
 - Progressive supranuclear palsy.
 - Pulmonary artery surgery – with surgery to divide the breastbone
 - Severe lung disease/respiratory failure – of specified severity.
 - Stroke – resulting in permanent symptoms.
 - Systemic Lupus Erythematosus – of specified severity.
 - Terminal illness.
 - Third degree burns – covering 20% of the body's surface area or 50% of the face's surface area.
 - Total permanent disability before age 65.
 - Traumatic head injury – resulting in permanent symptoms.
- * The eligible occupations for HIV caught at work are:
- any occupation which provides accident and emergency, medical, laboratory, phlebotomy, dental or nursing services;
 - the police force;
 - the prison service.

Plan definitions

Alzheimer's disease before age 65 – resulting in permanent symptoms

A definite diagnosis of Alzheimer's disease before age 65 by a consultant neurologist, Psychiatrist or Geriatrician. There must be permanent clinical loss of the ability to do all of the following:

- remember;
- reason; and
- perceive, understand, express and give effect to ideas.

For the above definition, the following are not covered:

- Other types of dementia

Alzheimer's disease is a progressive and degenerative disease. The nerve cells in the brain deteriorate and the size of the brain substance shrinks. There are various ways in which Alzheimer's can affect a person, such as severe loss of memory and concentration; but overall, there is a general decline in all areas of mental ability.

Aorta graft surgery – for disease and trauma

The undergoing of surgery for disease or following traumatic injury to the aorta with excision and surgical replacement of a portion of the diseased aorta with a graft.

The term aorta includes the thoracic and abdominal aorta but not its branches.

For the above definition, the following are not covered:

- Any other surgical procedure, for example the insertion of stents or endovascular repair.

The aorta is the main artery of the body from which all others derive, and it supplies oxygenated blood to other arteries. The aorta may be narrowed, typically as a result of fatty deposits that build up on the walls of the artery. It may also weaken due to 'aneurysm', which means that the artery wall has become thin and dilated. A graft may be required to replace the part of the artery that has weakened. You will be able to claim if you require surgery to remove and replace the aorta or a segment of it.

Aplastic anaemia

– resulting in permanent symptoms

Bone marrow failure that results in permanent anaemia, neutropenia and thrombocytopenia requiring as a minimum one of the following treatments:

- marrow stimulating agents
- bone marrow transplant
- blood transfusion
- immunosuppressive agents

This is the permanent failure of the bone marrow to make new blood cells. This leads to anaemia, an increase in infections that the body cannot fight, and haemorrhaging. Treatment is usually by repeated blood transfusions or a bone marrow transplant.

Bacterial meningitis

– resulting in permanent symptoms

The unequivocal diagnosis of bacterial meningitis resulting in permanent neurological deficit with persisting clinical symptoms or physical deficit.

This is an infection of the meninges, the membrane covering the brain and spinal cord, caused by bacterial infection. The feverish illness can be life threatening and may cause permanent physical disability or permanent damage to the nervous system. Viral meningitis and other forms of meningitis are not covered.

Benign brain tumour

– resulting in permanent symptoms

A non-malignant tumour or cyst in the brain, cranial nerves or meninges within the skull, resulting in permanent neurological deficit with persisting clinical symptoms.

For the above definition, the following are not covered:

- Tumours in the pituitary gland.
- Angiomas.

In addition, the requirement for permanent neurological deficit with persisting clinical symptoms will be waived if the benign brain tumour is surgically removed.

A benign tumour is a non-cancerous abnormal growth of tissue. A benign tumour in the brain, although not cancerous, is very serious because the growth may be pressing on areas of the brain. Such growths may be potentially life threatening and may need removing by surgery.

Blindness – permanent and irreversible

Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

For the above definition, the following is not covered:

- Deliberate injury to the life assured
- Self-inflicted injury

You will be able to claim only if you have permanent and irreversible loss of sight in both eyes. You do not need to be totally blind in both eyes but your permanent and irreversible loss of sight must be to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

Cancer – excluding less advanced cases

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

The term malignant tumour includes leukaemia, lymphoma and sarcoma.

For the above definition, the following are not covered:

- All cancers which are histologically classified as any of the following:
 - pre-malignant;
 - non-invasive;
 - cancer in situ;
 - having either borderline malignancy; or having low malignant potential.
- All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0.
- Chronic lymphocytic leukaemia unless histologically classified as having progressed to at least Binet Stage A.
- Any skin cancer other than malignant melanoma that has been histologically classified as having caused invasion beyond the epidermis (outer layer of skin).

Cancer is the general term used to refer to all types of 'malignant tumours'. An invasive malignant tumour is made up of cancerous cells which invade surrounding tissues and then may spread via the bloodstream or lymphatic system to form more growths in other parts of the body.

You will be able to claim if you are diagnosed as suffering from a cancer, even if there is no evidence that the cancer has spread to other parts of the body, unless the type of cancer is specifically excluded.

Leukaemia (a cancer of white blood cells), lymphoma (a cancer of the lymphatic system, a vital part of the body's immune system) and Hodgkin's disease, a type of lymphoma, are all covered by your plan.

Pre-malignant tumours, non-invasive tumours and cancers in-situ are not covered. Such tumours are generally in a very early stage and have not shown signs of invasion in their native tissue or spread to surrounding tissues. These tumours are usually readily treatable and not life threatening.

All forms of skin cancer are excluded apart from invasive malignant melanoma. Invasive malignant melanoma is a serious form of cancer but other skin cancers are usually easily treated, unlikely to spread and not life threatening.

Cardiomyopathy

A definite diagnosis by a consultant cardiologist of cardiomyopathy causing permanent impaired ventricular function such that the ejection fraction is 35% or less for at least 6 months when stabilised on therapy advised by the consultant. The diagnosis must also be;

- Evidenced by echocardiographic abnormalities consistent with the diagnosis of cardiomyopathy.
- Classified as Stage III under the New York Heart Association (NYHA) Functional Classification.

For the purposes of this condition, NYHA Stage III (as classified means);

- a marked limitation of physical activity of the person covered due to symptoms of less than ordinary activity causes fatigue, palpitations, dyspnoea or anginal pain. The person covered is only comfortable at rest.

All other forms of heart disease, heart enlargement and myocarditis are specifically excluded.

Cardiomyopathy is the name given to a series of diseases affecting the heart muscle producing heart dysfunction. Symptoms vary depending on the type of Cardiomyopathy but may include shortness of breath, fainting and palpitations.

Coma – resulting in permanent symptoms

A state of unconsciousness with no reaction to external stimuli or internal needs which:

- requires the use of life support systems
- results in permanent neurological deficit with persisting clinical symptoms.

A coma is a state of unrousable unconsciousness. Someone in a coma is unlikely to respond to any form of physical stimulation and unlikely to have any control of their bodily functions.

There are various depths to a coma, measured by the response to repeated external stimuli. A coma may be due to damage or disturbance to certain areas of the brain, which control and maintain conscious activity. A coma may, for example, occur as a result of a head injury, an abnormal growth like a brain tumour, or an abscess or ruptured blood vessel that bleeds into the brain.

If you are in a coma you will be covered provided there is no reaction to stimuli and life support systems are necessary resulting in permanent neurological deficit.

Coronary artery by-pass grafts – with surgery to divide the breastbone

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts.

If you are placed on the NHS waiting list for coronary artery by-pass surgery, up to 20% of the critical illness cover amount can be accelerated to enable the surgery to be performed privately.

Coronary artery by-pass surgery may be required when one or more coronary arteries, which supply blood to the heart, are narrowed or blocked.

Coronary artery by-pass surgery is done by taking a vein, usually from the thigh, and using it by way of a graft to by-pass the diseased or blocked artery.

You will be able to claim if you undergo coronary artery by-pass surgery to correct one or more blocked arteries.

Balloon angioplasty, atherectomy and laser treatment are not covered under this condition.

Creutzfeldt-Jakob disease

– requiring continuous assistance

The unequivocal diagnosis of Creutzfeldt-Jakob disease, made by a consultant neurologist, evidenced by a significant reduction in mental and social functioning such that continuous supervision or assistance by a third party is required.

This is a rare disease with no known cure. From the onset of the first symptoms, intellectual ability deteriorates rapidly, leading to neurological problems and dementia.

Constant care and nursing is usually required after six to 18 months.

Deafness

– permanent and irreversible

Permanent and irreversible loss of hearing to the extent that the loss is greater than 95 decibels across all frequencies in the better ear using a pure tone audiogram.

For the above definition, the following is not covered:

- Deliberate injury to the life assured
- Self-inflicted injury

You will be able to claim if you have permanent and irreversible loss of hearing in both ears.

Encephalitis

A definite diagnosis of encephalitis by a consultant neurologist resulting in permanent neurological deficit with persisting clinical symptoms.

For the above definition, the following are not covered:

- chronic fatigue syndrome and myalgic encephalomyelitis.

Encephalitis is inflammation of the brain. Symptoms might include severe headaches, nausea, vomiting, convulsions, personality changes, problems with speech and/or hearing, confusion or disorientation. It's usually caused by an infection and can range in severity from relatively mild to life threatening.

Heart attack – of specified severity

Death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:

- New characteristic electrocardiographic changes.
- The characteristic rise of cardiac enzymes or Troponins recorded at the following levels or higher;
 - Troponin T > 1.0 ng/ml
 - AccuTnl > 0.5 ng/ml or equivalent threshold with other Troponin I methods.

The evidence must show a definite acute myocardial infarction.

For the above definition, the following are not covered:

- Other acute coronary syndromes including but not limited to angina.

A heart attack, often called a 'myocardial infarction', happens when an area of heart muscle dies because it is deprived of oxygenated blood, usually because of a blocked artery (coronary occlusion) or a blood clot (coronary thrombosis).

You will be able to claim if you have been diagnosed as having suffered a heart attack. We will require your claim to be supported by new ECG changes (ECG is an abbreviation for electrocardiogram, a graphical record of the electrical impulses that make the heart beat), and an increase in cardiac enzymes (which are released into the blood stream from a damaged heart muscle), which are characteristic of a heart attack. The ECG will confirm that you have had a heart attack but raised levels of cardiac enzymes will support the diagnosis and confirm that the heart attack occurred recently. Your plan will not cover 'angina' as this condition does not result in the death of a part of the heart muscle.

Heart valve replacement or repair – with surgery to divide the breastbone

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist to replace or repair one or more heart valves.

When a heart valve is not working properly because it has become narrow or is leaking, an operation may be required to repair or replace the valve. You will be able to claim if you need to undergo open-heart surgery. This will depend on the seriousness of the problem with the heart valve and the state of your general health.

HIV caught in the UK from a blood transfusion, a physical assault or at work in an eligible occupation*

Infection by Human Immunodeficiency Virus resulting from:

- a blood transfusion given as part of medical treatment;
- a physical assault; or
- an incident occurring during the course of performing normal duties of employment from the eligible occupations listed below;

after the plan starts and satisfying all of the following:

- The incident must have been reported to appropriate authorities and have been investigated in accordance with the established procedures.
- Where HIV infection is caught through a physical assault or as a result of an incident occurring during the course of performing normal duties of employment, the incident must be supported by a negative HIV antibody test taken within five days of the incident.
- There must be a further HIV test within 12 months confirming the presence of HIV or antibodies to the virus.
- The incident causing infection must have occurred in the UK.

For the above definition, the following is not covered:

- HIV infection resulting from any other means, including sexual activity.
- * The eligible occupations for HIV caught at work are:
 - any occupation which provides accident and emergency, medical, laboratory, phlebotomy, dental or nursing services;
 - the police force;
 - the prison service.

HIV is the virus which can lead to Acquired Immune Deficiency Syndrome (AIDS). The body's defence system breaks down and leaves the patient open to infections and cancers that eventually prove fatal.

Kidney failure – requiring dialysis

Chronic and end stage failure of both kidneys to function, as a result of which regular dialysis is necessary.

The kidneys act as filters to remove waste materials from the blood. When the kidneys fail to function properly, a build-up of waste products in the blood can lead to life threatening problems. Although the body can function with one kidney, if both kidneys fail completely, renal dialysis (kidney machine treatment) or a kidney transplant operation will be needed.

You will be able to claim if, as a result of both your kidneys failing completely and permanently, you need regular long-term renal dialysis or a kidney transplant.

Liver failure – end stage

End stage liver failure due to cirrhosis and resulting in all of the following:

- Permanent jaundice
- Ascites
- Encephalopathy

The liver controls certain metabolic functions and when cirrhosis is present, its ability to function is impaired. In severe cases, the liver is said to be in 'chronic failure'. You can claim when so much damage to the liver has occurred that severe complications, including fluid retention (i.e. ascites) and impaired functioning of the brain (i.e. encephalopathy) have developed.

Loss of independent existence – resulting in permanent symptoms

A condition which means that the life assured is, through an illness or accident, totally and irreversibly unable to do the things in four of the six following categories, without the assistance of someone else:

- I. Personal hygiene – washing or bathing to the extent needed to maintain personal cleanliness.
- II. Dressing – putting on and taking off all necessary clothes.
- III. Mobility – moving from one room to another or getting in and out of a bed or chair.
- IV. Eating and drinking – eating and drinking once food and drink has been prepared and made available.
- V. Using the lavatory – getting on and off the lavatory and maintaining personal hygiene.
- VI. Continenence – controlling bowel and bladder functions.

Loss of hands or feet

– permanent physical severance

Permanent physical severance of any combination of two or more hands or feet at or above the wrist or ankle joints.

For the above definition, the following are not covered:

- Deliberate injury to the life assured
- Self-inflicted injury

You will be able to claim if you have lost your limbs whether by injury or necessary surgical removal.

Loss of speech

– permanent and irreversible

Total permanent and irreversible loss of the ability to speak as a result of physical injury or disease.

For the above definition, the following are not covered:

- Deliberate injury to the life assured
- Self-inflicted injury

You will be able to claim if you suffer from total and permanent loss of speech as a direct result of physical injury or disease. Loss of speech as a direct result of mental trauma is not covered.

Major organ transplant

The undergoing as a recipient of a transplant of bone marrow or of a complete heart, kidney, liver, lung, or pancreas, or inclusion on an official UK waiting list for such a procedure.

For the above definition, the following is not covered:

- Transplant of any other organs, parts of organs, tissues or cells.

Major organ transplant surgery is needed when it is necessary to replace a diseased or damaged organ with a healthy organ. Sometimes it is necessary to wait a long time because a suitable organ is not available.

You will be able to claim if your condition is life threatening, a transplant is the best treatment, and you need to be included on an official local health authority waiting list for one of the transplants listed in the definition.

Motor neurone disease

– resulting in permanent symptoms

A definite diagnosis of motor neurone disease by a consultant neurologist. There must be permanent clinical impairment of motor function.

This is a rare progressive degenerative disorder which affects the central nervous system that controls muscular activity. As the nerves degenerate the muscles weaken and deteriorate. The cause of motor neurone disease is still unknown.

Multiple sclerosis

– with persisting symptoms

A definite diagnosis of Multiple Sclerosis by a consultant neurologist. There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least six months.

This is a progressive disease of the central nervous system in which the protective covering (myelin) of the nerve fibres in the brain and spinal cord is destroyed.

The cause of multiple sclerosis is unknown and the search for a cure is still being pursued. The severity of the disease can vary considerably and the symptoms can differ depending upon which areas of the brain or spinal cord have been affected.

Although there is no single diagnostic test for multiple sclerosis, which means it may take time to get a satisfactory diagnosis, a neurologist can perform various tests such as 'CT scanning' (computerised tomography, a computer and x-ray technique to produce images of the body from different angles); 'lumbar puncture' (a procedure to remove and test spinal fluid); or 'evoked responses' (which trace the electrical activity in the brain). These tests are done to help confirm the diagnosis of multiple sclerosis, once all other possible conditions have been considered.

Open heart surgery – with surgery to divide the breastbone

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist, to correct any structural abnormality of the heart.

Paralysis of limbs

– total and irreversible

Total and irreversible loss of muscle function to the whole of any two limbs.

The brain controls the muscle movement in the body by sending messages through the spinal cord and peripheral nerves. Paralysis/paraplegia is usually caused by an injury to the spinal cord.

You will be able to claim if you suffer complete and irreversible loss of the use of two or more limbs.

Parkinson's disease before age 65 – resulting in permanent symptoms

A definite diagnosis of Parkinson's disease before age 65 by a consultant neurologist. There must be permanent clinical impairment of motor function with associated tremor, rigidity of movement and postural instability.

Parkinson's disease is a progressive, degenerative disorder of the central nervous system. There are three main characteristics: tremor, slow movements and muscular rigidity. The symptoms may occur alone or in combination. As yet, there is no cure for Parkinson's disease.

Pre-senile dementia before age 65 – resulting in permanent symptoms

A definite diagnosis before your 65th birthday, by a consultant neurologist, psychiatrist or geriatrician, of pre-senile dementia. The diagnosis must, at the time it is made, be supported by evidence of progressive deterioration of memory and of the ability to reason and to perceive, understand, express and give effect to ideas.

Dementia is a term describing a number of progressive diseases of the brain. There are various ways in which dementia can affect a person, such as severe loss of memory and concentration; but, overall, there is a general decline in all areas of mental ability.

Primary pulmonary arterial hypertension – resulting in permanent symptoms

Primary pulmonary arterial hypertension with substantial right ventricular enlargement established by investigations including cardiac catheterisation, resulting in permanent irreversible physical impairment to the degree of at least Class III of the New York Heart Association Classification of cardiac impairment.

For the purposes of this condition, NYHA Class III (as classified):

- a marked limitation of physical activity of the person covered due to symptoms of less than ordinary activity causes fatigue, palpitations, dyspnoea or anginal pain. The person covered is only comfortable or at rest.

The pulmonary artery is the large vessel that carries blood from the heart into the lungs so it can pick up oxygen. Pulmonary arterial hypertension is a blood vessel disorder of the lung in which the pressure in the pulmonary artery rises above normal levels and becomes life threatening. Pulmonary arterial hypertension is known as primary where there is no known cause for the condition. Secondary pulmonary hypertension, where the cause is known, is not covered.

Progressive supranuclear palsy

A definite diagnosis by a consultant neurologist of Progressive supranuclear palsy.

Progressive supranuclear palsy (PSP) is a rare brain disorder that causes serious and permanent problems with control of gait and balance. The symptoms of PSP are caused by a gradual deterioration of brain cells in a few tiny but important places at the base of the brain, in the region called the brainstem.

Pulmonary artery surgery – with surgery to divide the breastbone

The undergoing of surgery requiring median sternotomy (surgery to divide the breast bone) on the advice of a consultant cardiothoracic surgeon for disease of the pulmonary artery to excise and replace the diseased pulmonary with a graft.

'Open heart' surgery is performed to gain access to repair the diseased section of the pulmonary artery with a graft.

Severe Lung Disease/Respiratory Failure – of specified severity

Confirmation by a consultant physician of severe lung disease which is evidenced by all of the following:

- the need for continuous daily oxygen therapy on a permanent basis;
- evidence that oxygen therapy has been required for a minimum period of six months;
- FEV1 being less than 40 percent of normal; and
- vital capacity less than 50 percent of normal

Stroke

– resulting in permanent symptoms

Death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in permanent neurological deficit with persisting clinical symptoms.

For the above definition, the following are not covered:

- Transient ischaemic attack.
- Traumatic injury to brain tissue or blood vessels.

The brain controls all the functions to the body, so damage to it can have serious effects. A stroke takes place when there is severe damage in the brain due to internal bleeding (haemorrhage) or when the flow of blood in an artery has been blocked by a piece of tissue or a blood clot (an embolus).

You will only be able to claim if you suffer a stroke that leaves evidence of permanent damage to the nervous system. Some examples of such evidence may be paralysis of the right or left side of the body, or disturbance of speech or vision.

Subarachnoid haemorrhages, although not technically strokes, are covered, provided permanent neurological damage has occurred.

Your plan will not cover 'Transient Ischaemic Attacks' (which are sometimes known as mini-strokes). Although there is a short-term interruption of the blood supply to all or part of the brain, it does not result in permanent effects.

Systemic Lupus Erythematosus

– of specified severity

A definite diagnosis of systemic lupus erythematosus (SLE) by a consultant rheumatologist where either of the following are also present:

Severe kidney involvement with SLE as evidenced by:

- permanent impaired renal function with a glomerular filtration rate (GFR) below 30 ml/min/1.73m² and
- abnormal urinalysis showing proteinuria or haematuria, or Severe Central Nervous System (CNS) involvement with SLE as evidenced by;

Permanent deficit of the neurological system as evidenced by at least any one of the following symptoms, which must be present on clinical examination and expected to last for the remainder of the claimant's life:

- paralysis
- localized weakness
- dysarthria (difficulty with speech)
- aphasia (inability to speak)
- dysphagia (difficulty in swallowing)
- difficulty in walking, lack of coordination
- severe dementia where the insured needs constant supervision, or
- permanent coma.

For the purposes of this definition:

- seizures, headaches, fatigue, lethargy or any symptoms of psychological or psychiatric origin will not be accepted as evidence of permanent deficit of the neurological system.

For the avoidance of doubt, all other forms of SLE are specifically excluded from the cover provided by this policy.

SLE involves chronic inflammation of body tissues caused by autoimmune disease. Autoimmune diseases are illnesses that occur when the body's tissues are attacked by its own immune system.

Terminal illness

Advanced or rapidly progressing incurable illness where, in the opinions of an attending Consultant and our Chief Medical Officer, the life expectancy is no greater than 12 months.

When life cover is included in your plan, the terminal illness benefit is merely an accelerated payment of the amount that is payable on death. Therefore, this benefit can be paid to you, irrespective of the cause of illness, provided your life expectancy has been confirmed to be less than 12 months.

Where life cover has not been included in your plan, but your life expectancy is confirmed to be less than 12 months, the full critical illness cover benefit will be paid.

Third-degree burns – covering 20% of the body's surface area or 50% of the face's surface area

Burns that involve damage or destruction of the skin to its full depth through to the underlying tissue and covering at least 20% of the body's surface area or covering 50% of the face's surface area.

For the above definition, the following are not covered:

- Deliberate injury to the life assured
- Self-inflicted injury

There are three levels of burns. The 'degree' of burning depends on the extent of the damage done to the skin. They are medically known as 'first', 'second' and 'third-degree'. 'First-degree' burns damage the top layer of skin (a common example of this is sunburn). 'Second-degree' burns go deeper into the layers of skin, but some may heal without scarring. 'Third-degree' burns are the most serious, as they destroy the full thickness of the skin.

You will be able to make a claim if you have suffered 'third-degree' burns covering at least 20% or more of the surface area of your body or covering 50% of the face's surface area. For the purpose of this definition the forehead and ears are included as part of the face.

Total permanent disability before age 65

In our reasonable opinion, you are, as a result of illness or accident before your 65th birthday, irreversibly unable to do the things in three of the six following categories without the assistance of someone else.

- I. Personal hygiene – washing or bathing to the extent needed to maintain personal cleanliness
- II. Dressing – putting on and taking off all necessary clothes.
- III. Mobility – moving from one room to another or getting in and out of a bed or chair
- IV. Eating and drinking – eating and drinking once food and drink has been made available.
- V. Using the lavatory – getting on and off the lavatory and maintaining personal hygiene
- VI. Contenance – controlling bowel and bladder functions

Any disability which, in our reasonable opinion, arises or continues directly or indirectly as a result of infection by, or treatment of, human immunodeficiency virus and/or acquired immune deficiency syndrome is not covered.

This benefit is intended to act as a safety net if you are unable to claim in respect of any of the other conditions covered by your plan. You will be able to claim for this if you are unable to perform certain activities of daily living before you are aged 65.

Traumatic head injury – resulting in permanent symptoms

Death of brain tissue due to traumatic injury resulting in permanent neurological deficit with persisting clinical symptoms.

Children's critical illness benefit

A child means your natural or legally adopted child. In either case, the child must be financially dependent on you.

Your children are also covered for the conditions in the following list at no extra cost. Child cover applies from the date each child turns three months and lasts until they reach age 18, as long as the plan is in force. The most we will pay for a child is half the level of critical illness cover at claim subject to a maximum of £25,000. We will only pay one claim for each child but there is no limit to the number of children covered.

The conditions covered under children's cover are:

- Alzheimer's disease – resulting in permanent symptoms.
- Aorta graft surgery – for disease and trauma.
- Aplastic anaemia – resulting in permanent symptoms.
- Bacterial meningitis – resulting in permanent symptoms.
- Benign brain tumour – resulting in permanent symptoms.
- Blindness – permanent and irreversible.
- Cancer – excluding less advanced cases.
- Cardiomyopathy.
- Coma – resulting in permanent symptoms.
- Coronary artery by-pass grafts – with surgery to divide the breastbone (a payment is available to pay for surgery after being placed on an NHS waiting list.)
- Creutzfeldt-Jakob Disease (CJD) – requiring continuous assistance.
- Deafness – permanent and irreversible.
- Encephalitis.
- Heart attack – of specified severity.
- Heart-valve replacement or repair – with surgery to divide the breastbone.
- HIV caught in the UK from a blood or blood product transfusion, by physical assault or at work in an eligible occupation#.
- Kidney failure – requiring dialysis.
- Liver failure – end stage.
- Loss of independent existence – resulting in permanent symptoms.
- Loss of hands or feet – permanent physical severance.
- Loss of speech – permanent and irreversible.
- Major organ transplant.
- Motor neurone disease – resulting in permanent symptoms.
- Multiple sclerosis – with persisting symptoms.
- Open heart surgery – with surgery to divide the breastbone.
- Paralysis of limbs – total and irreversible.
- Parkinson's disease before age 65 – resulting in permanent symptoms.

- Pre-senile dementia before age 65 – resulting in permanent symptoms.
- Primary pulmonary arterial hypertension – resulting in permanent symptoms.
- Progressive supranuclear palsy.
- Pulmonary artery surgery – with surgery to divide the breastbone
- Severe lung disease/respiratory failure – of specified severity.
- Stroke – resulting in permanent symptoms.
- Systemic Lupus Erythematosus.
- Terminal illness.
- Third-degree burns – covering 20% of the body’s surface area or 50% of the face’s surface area.
- Total permanent disability*.
- Traumatic head injury – resulting in permanent symptoms.

* In this context it means an irreversible level of disability which, in Zurich’s reasonable opinion, means the child would be disabled from performing any occupation whatsoever if he or she were an adult.

- # The eligible occupations for HIV caught at work are:
- any occupation which provides accident and emergency, medical, laboratory, phlebotomy, dental or nursing services;
 - the police force;
 - the prison service.

For the above definitions, the following is not covered:

- Deliberate injury to a child by a plan owner

The benefit is only payable if the child undergoes the relevant condition or operation and survives for 14 days. It’s important to note that only one claim can be made per child. The benefit is included, for the conditions and operations outlined above, if your children are aged between three months until their 18th birthday.

If your child is under the age of three months at the start of your plan, they will be included on reaching the age of three months. Each child will be covered for the lower of the amount of half the critical illness benefit on the plan or £25,000.

If you make a claim for your child, this will not reduce the amount of cover provided by your plan.

As we do not ask for any medical details on children before they are included on your plan, you should be aware that you would not be able to claim if your child had previously suffered, or was suffering, from one of the above conditions, or had previously had or was about to undergo one of the operations, before they were included on your plan.

For further details on the conditions and operations included for this benefit, please see the relevant pages in this booklet.

For further details of the exclusions, please see page 6.

How to claim

If you need to make a claim, you should first contact your adviser or us (our details are below).

We will provide you, or the person dealing with your affairs, with a claim form which must be completed in full and signed before we can proceed with the claim.

We'll let you know what information we'll need from your doctor, consultant or any other third party. We always try to pay all valid claims as soon as possible and we'll keep you informed of how the claim is progressing.

To claim for Critical illness cover

Telephone number 0870 850 0786

Opening hours 9am to 5pm

Claiming for critical illness benefit and children's critical illness benefit

You must tell us within six months of you or your child being diagnosed with the critical illness or having the operation.

When we receive your completed claim form, we'll tell you what medical evidence we'll need to obtain before we can pay the claim. We may ask you to send back your plan schedule. You will need to carry on making payments to the plan until we agree to pay the critical illness claim. Where your plan includes a higher level of life cover than critical illness cover, and we pay a critical illness claim, you will need to carry on making payments for the remaining life cover which will be reduced by the amount of the critical illness claim. For children's

critical illness benefit claims you will need to carry on making payments after we agree to pay the claim. In some circumstances we'll ask you or your child to have further medical examinations or tests which will be done by a medical officer we provide. If this is the case, we'll aim to make these as convenient as possible for you and we'll pay the costs of any extra medical examinations. You can claim, within reason, for any expenses you incur as a result of having these extra tests.

We reserve the right to ask for independent confirmation that any medical treatment is necessary and appropriate.

Please contact us or your adviser if you would like this in large print, Braille or on audio tape or CD.

If you would like further details or clarification on any of the information, please ask your adviser.
We have based this information on our understanding of law and practice as at August 2009.

Zurich Assurance Ltd

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