Life & Living Insurance

Critical Illness Cover



The following terms and conditions of Critical Illness Cover tell you:

- > what benefits are available under this cover and how they work
- what we don't cover
- > the definitions of the medical conditions covered under the benefits on your policy.

You must read these terms and conditions together with the general terms of your policy.

Getting an outline of your built-in benefits

The table below summarises this cover's built-in benefits and tells you where you can read the full terms of each benefit.

Built-in benefits

Your Critical Illness Cover includes these benefits.

Benefit	Summary	Full terms
Full Critical Illness Benefit	You can get the full Critical Illness Cover <i>sum insured</i> if the life assured meets the Full Critical Illness Benefit criteria for a condition we cover.	Page 5
Diagnosis Benefit	You can get 25 percent of the Critical Illness Cover <i>sum insured</i> up to \$75,000 if the life assured meets the Diagnosis Benefit criteria for a condition we cover.	Page 5
Life Events Benefit	You can increase cover if certain events happen in a life assured's life, without assessment of the life assured's health.	Page 5

Definitions for conditions covered under your policy

The conditions covered under the Full Critical Illness Benefit and Diagnosis Benefit in this cover are defined from page 7.

Additional or Optional benefits

If your policy includes any additional or optional benefits, these will be detailed after page 13.



Understanding what we don't cover

We won't pay any claim under this Critical Illness Cover for a condition that's a direct or indirect result of:

- > intentional self-harm, including attempted suicide
- > taking part in a criminal activity
- harm to a child we cover under a benefit that you or the child's parents or guardians cause.

90-day stand-down

If the 90-day stand-down period applies to a condition we cover, we won't pay a claim at any time for the condition if the life assured, or a child we cover, either:

- > meets the criteria for the condition; or
- is diagnosed with, or has signs or symptoms of, an illness or injury that could directly or indirectly result in the life assured meeting the criteria for a condition we cover,

within 90 days immediately after:

- > we get your application for this cover
- we get your application to increase the sum insured on this cover, other than by inflation.

In the case of a *sum insured* increase, this 90-day stand-down only applies to the increased amount.

The life assured must survive for at least 14 days

We won't pay any benefit if the life assured or any child we cover doesn't survive for at least 14 days after first meeting the criteria for a covered condition.

When this cover ends

This Critical Illness Cover ends for a life assured when one of the following happens.

- The full *sum insured* under the Full Critical Illness Benefit has been paid.
- > At the end of the Cover Term.
- > They die.
- > The Policy ends.



Conditions we cover and when you can claim them

This table shows all the medical conditions we cover, whether we cover them as full or diagnosis conditions, and whether the 90-day stand-down period applies. The criteria for these conditions begin on page 7.

Conditions we cover

√	= Covered condition
√	= 90-day stand-down period applie

Condition	Full Critical Illness Benefit	Diagnosis Benefit
Alzheimer's disease	√	
Aortic surgery	√	
Aplastic anaemia	√	
Benign brain tumour or spinal cord tumour	√	
Blindness	√	√
Cancer	√	
Cardiomyopathy	√	√
Chronic kidney (renal) failure	√	√
Chronic liver failure	√	√
Coma	√	
Coronary artery surgery	√	
Creutzfeldt-Jakob disease	√	
Dementia	√	
Encephalitis	√	
End stage chronic lung disease	√	√
Heart attack	√	
Heart valve replacement	√	
HIV — medically acquired	√	
HIV — occupationally acquired	√	
Intensive care treatment	√	
Loss of hearing	√	√
Loss of independent existence	√	
Loss of limb and sight	√	
Loss of limbs	√	
Loss of speech	√	√



Condition	Full Critical Illness Benefit	Diagnosis Benefit
Major burns	√	
Major head trauma	√	
Meningitis or meningococcal disease	√	
Motor neurone disease	√	
Multiple sclerosis	√	√
Muscular dystrophy	√	
Open heart surgery	√	
Organ transplant	√	
Out of hospital cardiac arrest	√	
Paralysis	√	
Parkinson's disease	√	
Pneumonectomy	√	
Primary pulmonary hypertension	√	
Severe cognitive impairment	√	
Severe diabetes	√	
Severe inflammatory bowel disease	√	
Severe peripheral neuropathy	√	
Stroke	√	
Systemic lupus erythematosus (SLE) with lupus nephritis	√	
Systemic sclerosis	√	√
Terminal illness	√	
Triple vessel angioplasty	√	



Understanding your built-in benefits

This section details the built-in benefits we include in Critical Illness Cover.

Full Critical Illness Benefit

With the Full Critical Illness Benefit, we will pay you the Critical Illness Cover *sum insured* if a life assured meets the criteria for one of the Full Critical Illness Benefit conditions we cover.

The Full Critical Illness Benefit conditions we cover are listed and marked with a \checkmark in the table on pages 3-4. The criteria for these conditions begin on page 7.

We'll pay if a life assured meets the criteria for a Full Critical Illness Benefit condition

A life assured must meet the Full Critical Illness Benefit criteria for a condition we cover while this policy is in force, for us to accept a Full Critical Illness Benefit claim.

We'll pay the full Critical Illness Cover sum insured

We'll pay the Critical Illness Cover sum insured for that life assured.

We'll subtract the amount we pay for a Full Critical Illness Benefit from the Critical Illness Cover *sum insured* for that life assured.

Diagnosis Benefit

With the Diagnosis Benefit, we will pay you some of the Critical Illness Cover *sum insured* if a life assured meets the criteria for one of the Diagnosis Benefit conditions we cover.

The Diagnosis Benefit conditions we cover are listed and marked with a ' \checkmark ' in the table on pages 3-4. The criteria for these conditions begin on page 7.

We'll pay if a life assured meets the criteria for a Diagnosis Benefit condition

A life assured must meet the Diagnosis Benefit criteria for a condition we cover while this policy is in force, for us to accept a Diagnosis Benefit claim.

We'll only pay this benefit if we haven't already paid claims for the same condition under this cover.

We'll pay 25 percent of the sum insured, up to \$75,000

We'll pay the lesser of:

- > 25 percent of the sum insured
- **\$75,000.**

We'll subtract the amount we pay for a Diagnosis Benefit from the Critical Illness Cover *sum insured* for that life assured.

Life Events Benefit

With the Life Events Benefit, you can increase the Critical Illness Cover *sum insured* when certain events happen in a life assured's life.

If the life assured experiences a certain life event, you can apply to increase the Critical Illness Cover *sum insured* without assessment of their health.

Your premiums will increase from the date we've increased the *sum insured*.

We cover certain life events

You can increase the Critical Illness Cover *sum insured* for a life assured if they experience one of the following.

- Getting married or entering a civil union
- > Getting a divorce or separating from a de facto partner
- Death of a partner (a partner is a wife, husband, civil union partner or de facto partner)
- Pregnancy at 28 weeks gestation
- Giving birth to or legally adopting a child. You cannot apply to increase the *sum insured* under this benefit for pregnancy and birth of the same child
- Getting an annual salary increase of more than \$5,000
- Increasing their residential mortgage
- Buying a home, holiday home, residential investment property, or bare block of residential land
- Providing full-time care for their dependent parent, sibling, child, parent-in-law, grandparent or partner (a partner is a wife, husband, civil union partner or de facto partner)
- Having a dependent child start private secondary school or full-time tertiary education for the first time.

You can increase the sum insured for each event

For each event, you can increase the Critical Illness Cover *sum insured* for a life assured by up to the lesser of:

- the amount of the new or increased mortgage (if applicable)
- > 5 times the increase in annual salary (if applicable)
- \$250,000.

You're limited in how much you can increase the sum insured

All increases under this benefit for a life assured can't be more than 75 percent of their underwritten sum insured.



Apply within a certain period of time after the event happening

You must apply for the increase under this benefit within either:

- > 180 days of the event happening
- > 60 days of the *anniversary date* after the event happened.

Send us evidence of the event when you apply.

We'll accept your application to increase the *sum insured* under this benefit on the terms we most recently offered for the life assured at either:

- > the commencement date of this cover
- any application to increase this cover's sum insured, whether the increase was accepted or not.

When you cannot use this benefit

You cannot use this benefit for a life assured if:

- we've paid a claim for any benefit included in this Critical Illness Cover, including any built-in, additional or optional benefits
- they meet all the criteria for a claim for any benefit included in this Critical Illness Cover, even if you haven't made the claim yet
- > they're aged 60 years old or older.



Defining medical conditions

You can read the criteria for the Full Critical Illness Benefit conditions and Diagnosis Benefit conditions below.

Read the full terms of the Full Critical Illness Benefit and Diagnosis Benefit on page 5.

Alzheimer's disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of Alzheimer's disease.

Aortic surgery

Full Critical Illness Benefit criteria

Undergoing aortic surgery to repair or correct one or more of the following.

- An aortic aneurysm
- An obstruction of the aorta
- A coarctation of the aorta
- A traumatic rupture of the aorta.

Aplastic anaemia

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of irreversible bone marrow failure that causes anaemia, neutropenia and thrombocytopenia, that requires at least one of the following treatments.

- Marrow stimulating agents
- Bone marrow transplant
- Peripheral blood stem cell transplantation
- Blood product transfusions
- Immunosuppressive agents

Benign brain tumour or spinal cord tumour

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of a histologically described, non-cancerous tumour in either the brain, cranial nerves, meninges or the spinal cord, that either:

- results in neurological damage and functional impairment that an appropriate specialist considers permanent
- is medically necessary to remove through surgery (whether it can be removed or not).

We do not cover:

- cysts, granulomas and cerebral abscesses
- malformations in one or more of the arteries or veins of the brain or spinal cord
- haematomas.

We also do not cover tumours in the pituitary gland unless an appropriate specialist considers that the tumour either:

- is creating permanent neurological damage and functional impairment
- needs surgery to remove it.

Blindness

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of irreversible loss of sight in both eyes caused by an illness or injury.

Loss of sight means one of the following.

- Visual acuity less than 6/60 in both eyes after correction
- A field of vision constricted to 20 degrees or less of arc in both eyes
- A combination of visual defects causing the same amount of impairment as either of the above

Diagnosis Benefit criteria

An unequivocal diagnosis by an appropriate specialist that either:

- The Full Critical Illness Benefit criteria for blindness is likely to be met within the next 12 months.
- An illness or injury caused the irreversible loss of sight in one eye.

Loss of sight means one of the following:

- Visual acuity less than 6/60 in one eye after correction
- A field of vision constricted to 20 degrees or less of arc in one eve
- A combination of visual defects causing the same amount of impairment as either of the above

Cancer

Full Critical Illness Benefit criteria

The 90-day stand-down applies to this condition.

An unequivocal diagnosis by an appropriate specialist of a malignant tumour or malignant melanoma.

Malignant tumours - including leukaemia, lymphoma and Hodgkin's disease - must be characterised by the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue.

Malignant melanomas require one or more of the following to apply.

- A histological examination finds evidence of ulceration
- There's at least Clark level 3 depth of invasion
- A histological examination finds thickness measuring at least 1.0mm using the Breslow method

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We exclude:

- all tumours showing the malignant changes of carcinoma in situ (including cervical dysplasia CIN-1, CIN-2 and CIN-3) or which are histologically described as premalignant or non-invasive, unless it results in either:
 - treatment by either radiotherapy or systemic chemotherapy
 - radical surgery. Radical surgery is surgery to remove all of a diseased organ.

The treatment must be undertaken to specifically stop the spread of malignancy and must be considered most appropriate and necessary by an appropriate *specialist*.

- prostatic cancers histologically described as TNM Classification T1 or Gleason score of equal to or less than 5 (or equivalent histological classification), unless it results in either:
 - treatment by either radiotherapy or chemotherapy
 - the removal of the entire prostate

The treatment must be undertaken to specifically stop the spread of malignancy and must be considered most appropriate and necessary by an appropriate *specialist*.

- all other types of skin cancers, unless there's evidence of metastases
- > chronic lymphocytic leukaemia less than Rai Stage 1.

Cardiomyopathy

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of impaired ventricular function of variable aetiology, resulting in permanent and irreversible physical impairments of at least Class 3 of the New York Heart Association classification of cardiac impairment.

Diagnosis Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of cardiomyopathy.

Chronic kidney (renal) failure

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of end stage kidney (renal) failure presenting as chronic irreversible failure of both kidneys to function, requiring either regular renal dialysis or a renal transplantation.

Diagnosis Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of irreversible chronic kidney (renal) failure.

Chronic liver failure

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of end stage liver failure with any of the following symptoms.

- Permanent jaundice
- Ascites
- Encephalopathy

Diagnosis Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of irreversible chronic liver failure.

Coma

Full Critical Illness Benefit criteria

A state of unconsciousness resulting in a documented Glasgow Coma Scale of 6 or less, for at least 3 days in a row.

We exclude comas that are caused by alcohol or drug abuse.

Coronary artery surgery

Full Critical Illness Benefit criteria

The 90-day stand-down applies to this condition.

Undergoing a coronary artery bypass grafting to correct or treat coronary artery disease.

Creutzfeldt-Jakob disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of Creutzfeldt-Jakob disease that causes signs and symptoms of cerebellar dysfunction, severe progressive dementia, uncontrolled muscle spasms, tremors and athetosis and that requires permanent and continual medical supervision.

Dementia

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of dementia.

Encephalitis

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of severe inflammatory disease of the brain, resulting in a neurological deficit that causes either:

- permanent impairment of at least 25 percent of whole person function
- the total and irreversible inability to perform at least one of the activities of daily living without the help of another adult.



End stage chronic lung disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of end stage chronic lung disease with the need for permanent supplementary oxygen to treat the lung disease and with at least one of the following.

- > FEV 1 test results of consistently less than 1 litre.
- Permanent impairment of at least 25 percent of whole person function.
- > The total and irreversible inability to perform at least one of the *activities of daily living* without the help of another adult.

Diagnosis Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of irreversible chronic lung failure.

Heart attack

Full Critical Illness Benefit criteria

The 90-day stand-down applies to this condition.

An unequivocal diagnosis by a cardiologist of a heart attack (myocardial infarction) where part of the heart muscle has died because of a lack of blood supply to the heart. This must be evidenced by a rise or fall of cardiac biomarkers, such as troponins, with at least one value above the upper reference range of laboratory normal (99th percentile), and at least one of the following.

- New cardiac signs and symptoms consistent with a heart attack.
- Electrocardiogram (ECG) tests that show new changes associated with a heart attack.
- Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality consistent with a heart attack.

If the above tests are inconclusive, outdated because of technical advances, or they didn't take place, we'll consider other appropriate and medically recognised tests that diagnose a heart attack of the same degree of severity as outlined above.

This definition doesn't cover:

- other acute coronary syndromes
- elevation of troponins in the absence of overt ischaemic disease.

Heart valve replacement

Full Critical Illness Benefit criteria

Undergoing surgery to replace or repair cardiac valves because of heart valve defects or abnormalities.

We exclude repair solely by intra-arterial/intra-vascular procedures or other non-surgical techniques.

HIV - medically acquired

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of HIV where sero-conversion to HIV infection occurs within 6 months of the incident which Chubb Life believes, on the balance of probabilities, arose from one of the following medical procedures.

- A blood transfusion
- Transfusion with blood products
- Organ transplant to the life assured
- Assisted reproductive techniques
- A medical procedure or operation that a doctor performed

A suitable *medical practitioner* must have done the medical procedure.

We exclude HIV transmission by any other means.

HIV - occupationally acquired

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of acquired HIV where sero-conversion to HIV infection occurs within 6 months of one of the following occupational incidents.

- > An accident that occurs during the life assured's normal work.
- A malicious act of another person that occurs during the life assured's normal work.

Any occupational incident that causes a potential claim must be reported to the relevant authority or employer within 7 days.

A negative HIV antibody test must have taken place within 7 days of the incident. We must be given access to independently test any blood samples used.

We exclude HIV transmission by any other means.

We exclude HIV that is occupationally acquired if a cure for HIV or AIDS was available at the time the accident or act that caused the infection takes place.

Intensive care treatment

Full Critical Illness Benefit criteria

An illness or injury that results in either:

- continuous mechanical ventilation by tracheal intubation for at least 3 days in a row
- admission to the intensive care ward of a registered medical hospital for at least 5 days in a row on the recommendation of an appropriate specialist.

We exclude intensive care treatment that's needed because of alcohol or drug abuse.



Loss of hearing

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of permanent and profound loss of hearing in both ears caused by an *illness* or *injury*.

Profound loss of hearing is having an average hearing threshold of 91dB or greater, measured at frequencies 500, 1000 and 1500 Hz.

Diagnosis criteria

Loss of hearing requires one of the following to apply:

- An unequivocal diagnosis by an appropriate specialist of permanent and profound loss of hearing in one ear caused by an illness or injury.
- An appropriate *specialist* considers that all hearing in both ears is likely to be lost within the next 12 months.

Loss of independent existence

Full Critical Illness Benefit criteria

An illness or injury that results in either:

- the total and irreversible inability to perform at least two of the activities of daily living without the help of another adult
- > the permanent need for continuous full-time care.

Loss of limb and sight

Full Critical Illness Benefit criteria

Total and permanent loss of both of the following.

- > Use of a whole hand or whole foot
- Sight in one eye

Loss of sight means one of the following.

- > Visual acuity less than 6/60 in one eye after correction
- A field of vision constricted to 20 degrees or less of arc in one eye
- A combination of visual defects causing the same amount of impairment as either of the above

Loss of limbs

Full Critical Illness Benefit criteria

Total and permanent loss of use of two or more limbs caused by an illness or injury. In this case, limb is a whole hand or whole foot.

Loss of speech

Full Critical Illness Benefit criteria

The unequivocal diagnosis by an appropriate *specialist* of total and irreversible loss of speech caused by an *illness* or *injury*.

Diagnosis Benefit criteria

An appropriate *specialist* considers that all speech will be lost within the next 12 months.

Major burns

Full Critical Illness Benefit criteria

Full thickness burns to at least one of the following.

- 20 percent of the body surface area as measured by 'The Rule of Nines' or the Lund & Browder Body Surface Chart
- 25 percent of the face needing surgical debridement, grafting or both
- 50 percent of the total combined area of both hands needing surgical debridement, grafting or both

Major head trauma

Full Critical Illness Benefit criteria

Neurological deficit caused by a cerebral injury resulting in either:

- permanent impairment of at least 25 percent of whole person function
- the total and irreversible inability to perform at least one of the activities of daily living without the help of another adult.

Meningitis or meningococcal disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of meningococcal disease, including meningitis and meningococcal septicaemia, that causes either:

- permanent impairment of at least 25 percent of whole person function
- the total and irreversible inability to perform at least one of the activities of daily living without the help of another adult.

Motor neurone disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of motor neurone disease.

Multiple sclerosis

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of multiple sclerosis with evidence of both of the following:

- more than one episode of well-defined neurological deficit with persistent neurological impairment
- neurological investigations that support the diagnosis (such as lumbar puncture abnormalities, MRI showing evidence of lesions in the central nervous system, evoked visual responses and evoked auditory responses).

Diagnosis Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of multiple sclerosis.



Muscular dystrophy

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of muscular dystrophy.

Open heart surgery

Full Critical Illness Benefit criteria

Undergoing open heart surgery to treat either:

- a cardiac defect
- cardiac aneurysm
- benign cardiac tumour

We exclude treatment by catheter surgery, percutaneous devices, minimally invasive 'keyhole' or similar techniques.

Organ transplant

Full Critical Illness Benefit criteria

Undergoing human-to-human organ transplant from a donor, or being approved for human-to-human organ transplant from a donor and placed on a recognised New Zealand or Australian organ transplant waiting list for transplant of one or more of the following organs:

- Kidney
- Heart
- Lung
- Liver (including partial liver)
- Pancreas
- Small bowel.

We also cover the transplant of bone marrow.

We exclude the transplant of all other organs or parts of organs (except partial liver transplants) and any other tissue or cell transplant.

Out-of-hospital cardiac arrest

Full Critical Illness Benefit criteria

A cardiac arrest that occurred out of hospital where all the following apply.

- The cardiac arrest wasn't associated with any medical procedure.
- An electrocardiogram documented the cardiac arrest.
- The cardiac arrest was caused by cardiac asystole, ventricular fibrillation, or ventricular tachycardia.

Paralysis

Full Critical Illness Benefit criteria

The total and permanent loss of use of one or more limb caused by illness or injury to the spinal cord or brain. In this case, limb is a whole arm or whole leg.

Included in this definition are monoplegia, paraplegia, quadriplegia/tetraplegia, diplegia and hemiplegia.

Parkinson's disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of idiopathic Parkinson's disease.

Pneumonectomy

Full Critical Illness Benefit criteria

Undergoing surgery to remove an entire lung where an appropriate specialist considers that it's medically necessary and the most suitable treatment.

Primary pulmonary hypertension

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of primary idiopathic pulmonary hypertension associated with right ventricular enlargement established by cardiac catheterisation.

Severe cognitive impairment

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of permanent and irreversible loss of cognitive function caused by an illness or injury of the brain, resulting in both of the following:

- the life assured needing paid care and supervision by a carer for at least 4 hours every day, as confirmed by an appropriate needs assessment
- a mini-mental score of less than 20 out of 30, or an equivalent level of impairment under an equivalent test.

A carer cannot be a spouse, civil union partner, de facto partner or family member.

Severe diabetes

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of diabetes mellitus confirming at least one of the following.

- Severe diabetic retinopathy resulting in visual acuity less than 6/36 in each eye after correction
- Severe diabetic neuropathy causing motor impairment, autonomic impairment or both
- Diabetic gangrene leading to surgical intervention
- Severe diabetic nephropathy that causes chronic irreversible renal impairment, as measured by a corrected creatinine clearance of 29ml/min or less (CKD stage 4 or 5, International Chronic Kidney Disease classification).



Severe inflammatory bowel disease

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of Crohn's disease, ulcerative colitis or both, that has failed conventional medical intervention and needs either:

- indefinite immunosuppressive therapy
- surgical removal of the entire large bowel (colon and rectum).

Severe peripheral neuropathy

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of irreversible loss of function of peripheral nerves causing either:

- permanent impairment of at least 25 percent of whole person function
- the total and irreversible inability to perform at least one of the activities of daily living without the help of another adult.

Stroke

Full Critical Illness Benefit criteria

The 90-day stand-down applies to this condition.

An unequivocal diagnosis by an appropriate *specialist* of an acute cerebrovascular event that causes a neurological deficit, with infarction of brain tissue or intracranial or subarachnoid haemorrhage, supported by clear evidence on neuroimaging.

If neuroimaging is inconclusive, we may consider other investigations in support of the diagnosis that the *specialist* considers medically appropriate.

We exclude:

- transient ischaemic attacks
- cerebral symptoms due to migraines
- > cerebral injury because of trauma or hypoxia
- cerebral symptoms due to vascular disease affecting the eye, optic nerve or vestibular functions.

Systemic sclerosis

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate *specialist* of systemic sclerosis that causes the total and irreversible inability to perform at least one of the *activities of daily living* without the help of another adult.

Diagnosis criteria

An unequivocal diagnosis by an appropriate *specialist* of systemic sclerosis.

Terminal illness

Full Critical Illness Benefit criteria

The 90-day stand-down applies to this condition.

A diagnosis from an appropriate *medical practitioner* of a terminal *illness* or *injury* that is likely to result in the death of the life assured within the next 12 months.

Triple vessel angioplasty

Full Critical Illness Benefit criteria

The 90-day stand-down applies to this condition.

Undergoing coronary artery angioplasty to correct a narrowing or blockage of three or more coronary arteries within a procedure period of 60 days.

The triple vessel angioplasty must be necessary because of angiographic evidence that indicates an obstruction of three or more coronary arteries.



Systemic lupus erythematosus (SLE) with lupus nephritis

Full Critical Illness Benefit criteria

An unequivocal diagnosis by an appropriate specialist of SLE that confirms any four of the criteria in the following table.

Criteria	Definition
Malar rash	Fixed erythema, flat or raised, over the malar eminences, tending to spare the nasolabial folds
Discoid rash	Erythematosus, raised patches with adherent keratotic scaling and follicular plugging, atrophic scarring may occur in older lesions
Photosensitivity	Skin rash because of unusual reaction to sunlight, shown by patient history or specialist report
Oral ulcers	Oral or nasopharyngeal ulceration reported by a specialist
Arthritis	Non-erosive arthritis involving two or more peripheral joints, characterised by tenderness, swelling, or effusion
Serositis	Pleuritis – convincing history of pleuritic pain or pleuritic rub heard by a <i>specialist</i> or evidence of pleural effusion or Pericarditis – documented by ECG or rub or evidence of pericardial effusion
Renal disorder	Persistent proteinuria greater than 0.5 grams/24hr or greater than 2+ if quantitation not performed or Tubular casts – may be red cell, haemoglobin, granular, cellular or mixed
Neurological disorder	Seizures – without offending drugs or known metabolic derangements, such as uraemia, ketoacidosis or electrolyte imbalance
Hematologic disorder	Hemolytic anaemia – with reticulocytosis or Leucopoenia – less than 3,500/mm3 on two or more occasions or Thrombocytopenia – less than 100,000mm3 without offending drugs
Immunologic disorder	Positive LE cell preparation or Anti-DNA: antibody to native DNA in abnormal titre or Anti-Sm: presence of antibody to Sm (Smooth Muscle) nuclear antigen or False positive serologic test for syphilis known to be positive for at least 6 months and confirmed by Treponema pallidum immobilisation or fluorescent treponemal antibody absorption test
Antinuclear antibody	An abnormal titre of antinuclear antibody by immunofluorescence or an equivalent assay at any point in time and without drugs known to be associated with 'drug-induced lupus' syndrome.

As well as the diagnosis of SLE, renal changes must confirm the life assured has lupus nephritis. A renal biopsy must measure class 3 to 6 of the International Society of Nephrology/Renal Pathology Society (ISN/RPS) classification of lupus nephritis. The lupus nephritis must also be associated with persisting proteinuria (more than 2+).



Additional benefit included in your Critical Illness Cover

The table below summarises an additional benefit that is included in your Critical Illness Cover. You can read the full terms of the benefit below the table.

Benefit	Summary
Financial and Legal Advice Benefit	You can get help to pay for financial planning or legal advice about using money from a claim.

Understanding your Additional benefit

Financial and Legal Advice Benefit

With the Financial and Legal Advice Benefit, we can reimburse you for professional advice you get about using money from a Full Critical Illness Benefit claim.

When we'll pay this benefit

We'll pay this benefit if all the following apply.

- We've paid a Full Critical Illness Benefit claim.
- Within 12 months of us paying the claim, you've received professional advice about using the money from the claim payment.
- You apply for this benefit within 12 months of receiving the advice.
- The professional advice is either:
 - legal advice from a lawyer, solicitor, or barrister who's registered with the New Zealand Law Society
 - advice about financial planning from a financial advice provider licensed by the Financial Markets Authority.

We'll reimburse you for the costs, up to \$2,500

We'll reimburse you up to \$2,500 for the professional advice you get.



Additional benefit included in your Critical Illness Cover

The table below summarises an additional benefit that is included in your Critical Illness Cover. You can read the full terms of the benefit below the table.

Benefit	Summary
Complimentary Children's Benefit	You can get financial support if the life assured's child gets a condition we cover.

Understanding your Additional benefit

Complimentary Children's Benefit

The Complimentary Children's Benefit covers a life assured's *dependant* child if they get any of the conditions we cover.

When we'll pay this benefit

We'll pay this benefit if all the following apply.

The *dependant* child of a life assured meets the criteria for a medical condition we cover under this policy.

The child is aged from 3 months to 18 years old when they first meet the criteria for the condition.

The condition did not show signs or symptoms, or was not diagnosed, before the later of the *commencement date* or date of legal adoption or guardianship of the child.

> The condition isn't congenital.

A congenital condition is a medical condition that's recognised or diagnosed within 4 months of birth, whether inherited or caused by external factors such as drugs or alcohol.

How much we'll pay under the Complimentary Children's Benefit

The Complimentary Children's Benefit amount for each child is the lesser of:

- the total amount we're insuring the child's parents for under our Life & Living Critical Illness Cover
- **\$50,000.**

If the child meets the criteria for one of the:

- Full Critical Illness Benefit conditions we cover we'll pay the full Complimentary Children's Benefit amount
- Conditions that we cover under any other benefit that pays 25 percent of the Critical Illness sum insured - we'll pay 25 percent of the Complimentary Children's Benefit amount

We'll subtract the amount we pay from the Complimentary Children's Benefit amount for that child.

We'll only cover each child under one Complimentary Children's Benefit, no matter who this policy covers or how many policies you or anyone else has with us.

Once we've paid the maximum Complimentary Children's Benefit amount, we'll stop covering the child under this benefit.