

## Edelweiss Tokio Life – Payor Waiver Benefit Rider

### ❖ Plan Summary:

Entry Age (last birthday)	18 to 65 years
Maximum Maturity Age (last birthday)	70 years
Rider Term*	Equal to the premium paying term of the base plan. <i>(Any base plan having limited pay and regular pay can avail this rider)</i>
Premium Paying Term*	Equal to the premium paying term of the base plan
Minimum Premium	Rs. 3.40/-
Maximum Premium	Maximum premium will be restricted to 30% of the base product premium
Frequency of payment	Same as base policy. Any premium rebate or modal factors will also be same as the base plan.
Minimum premium to be waived	Rs. 1000/-
Maximum premium to be waived	No limit, subject to underwriting.

\* The term of the rider cannot be less than the premium paying term of the base plan. So this rider will be offered to those where sum of age at entry of the proposer and premium paying term of the base policy does not exceed 70 years of age.

### ❖ Benefit payable

This rider is available with policies where life insured and the proposer of the base policy are different lives. The customer can choose any one of the three benefit options given below as per his/her requirement. The proposer can choose only one of the three options.

#### Option 1:

##### ✓ On Death

On the death of the proposer we will waive off all future premiums under the base plan till the term of this rider while the base plan is in-force.

#### Option 2:

##### ✓ On Accidental Total and Permanent disability\*

In the event of total and permanent disability due to accident, we will waive off all future premiums under the base plan till the term of the rider or death of assured life, if earlier.

##### ✓ On Critical Illness<sup>#</sup>

In the event the life insured is diagnosed to be suffering from any one of the below 12 critical illnesses, we will waive off all future premiums under the base plan till the term of the rider or death of assured life, if earlier.

Claim will be triggered only once on the first diagnosis of critical illness or accidental total and permanent disability during the rider term.

**Option 3:**

✓ **On Death**

On the death of the proposer we will waive off all future premiums under the base plan till the term of this rider while the base plan is in-force.

✓ **On Accidental Total and Permanent disability\***

In the event of total and permanent disability due to accident, we will waive off all future premiums under the base plan till the term of the rider or death of assured life, if earlier.

✓ **On Critical Illness<sup>#</sup>**

In the event the life insured is diagnosed to be suffering from any one of the below 12 critical illnesses, we will waive off all future premiums under the base plan till the term of the rider or death of assured life, if earlier.

Claim will be triggered only once on the first diagnosis of critical illness or accidental total and permanent disability or death of the proposer of the base plan during the rider term.

**Accident**

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

**\* Accidental Total and Permanent Disability**

Accidental Total and Permanent Disability is defined as disability caused by bodily injury, which causes permanent inability to perform any occupation or to engage in any activities for remuneration or profits. This disability should last for at least one hundred and eighty (180) days before being eligible for total and permanent disability benefits. Further the company reserves the right to call for medical examination as they may require fit in this regard. The premium during the 180 day waiting period needs to be paid by the policyholder. However once the policyholder is eligible for the claim, the company will reimburse the premiums paid by the policyholder during the 180 days.

Total and permanent disability also includes the loss of both arms, or both legs, or one arm and one leg, or of both eyes. Loss of arms means dismemberment by amputation from the wrist joint and loss of legs means dismemberment by amputation from the ankle joint. Loss of eyes means entire and irrecoverable loss of sight. In these circumstances waiting period of 180 days will not be applicable.

**# Critical Illness**

This rider provides protection against 12 critical illnesses, namely:

1. Cancer of Specified Severity
2. Open Chest CABG
3. First Heart Attack - of Specified Severity
4. Open Heart Replacement OR Repair of Heart Valves
5. Kidney Failure Requiring Regular Dialysis
6. Major Burns
7. Major Organ / Bone Marrow Transplant
8. Permanent Paralysis of Limbs
9. Stroke Resulting in Permanent Symptoms
10. Surgery of aorta
11. Coma of Specified Severity

## 12. Total Blindness

### Conditions for Critical Illness:

- The life insured should survive for 30 more days following the date of confirmed diagnosis.  
The diagnosis is confirmed once it is established through medical tests or is certified by a medical practitioner.
- Claim for critical illness will only be accepted if the illness has occurred after 90 days from the date of issue/ date of revival of the rider.

### ❖ **Non-forfeiture benefits**

There is no surrender value, paid up value or loan available on this rider. On surrender of the base plan no rider benefit will be paid.

The rider benefit will cease immediately if the base plan is terminated, discontinued or made paid-up. The rider cover will also cease when a claim is paid.

### ❖ **Taxes**

The Policyholder will be liable to pay all applicable taxes as levied by the Government from time to time.

### ❖ **Terms and conditions:**

#### ✓ **Free look Period**

This product offers a 15 day free look period. In the event that policyholder is not satisfied with the terms and conditions of the rider, and wish to cancel the rider, he/she can do so by returning the policy to the company along with a letter requesting for cancellation within 15 days of receipt of policy. Premium paid by policyholder will be refunded after deducting cost of medical expenses incurred in that connection.

#### ✓ **Suicide claim provisions**

If the proposer, whether sane or insane, commits suicide, within one year from the date of issuance or date of revival, then the policy shall be void. No benefits under this rider will be payable if a covered critical illness results either directly or indirectly from an attempted suicide of the proposer, while sane or insane.

#### ✓ **Exclusions**

##### Critical Illness exclusions:

- Diseases in the presence of an HIV infection;
- Any pre-existing or recurring disease which is diagnosed or which the life insured contracted prior to the policy issue date or the revival date of the policy, whichever is later;
- Any disease covered under Critical Illness as mentioned above occurring within 90 days of the start of coverage (i.e. during the waiting period);
- No payment will be made by the Company for any claim directly or indirectly caused by, based on, arising out of, or howsoever, to any Critical Illness for which care, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted before the start of the Policy Period, or for which a claim has or could have been made under any earlier policy; Date of occurrence of critical illness will be reckoned for the above purpose and for the purpose of evaluating waiting/ survival period as the date of diagnosis of the illness/condition. It will be the date on which the medical examiner first

examines the life assured and certifies the diagnosis of any of the illness/ conditions.

- Any congenital condition.
- Intentional self-inflicted injury, attempted suicide, while sane or insane.
- Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
- Failure to seek or follow medical advice.
- War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes.
- Taking part in any naval, military or air force operation during peace time.
- 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.
- Participation by the insured person in a criminal or unlawful act.
- Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping.
- Nuclear Contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature

Total & Permanent Disability exclusions:

The life insured will not be entitled to any benefits for any disability caused directly or indirectly due to or caused, occasioned, accelerated or aggravated by any of the following:

- Suicide or attempted suicide or self inflicted injury, whether the life assured is medically sane or insane.
- Any condition that is pre-existing at the time of inception of the policy.
- Failure to seek medical advice or treatment.
- War, terrorism, invasion, act of foreign enemy, hostilities, civil war, martial law, rebellion, revolution, insurrection, military or usurper power, riot or civil commotion. War means any war whether declared or not.
- Service in the armed forces, or any police organization, of any country at war or service in any force of an international body.
- Committing an assault, a criminal offence, an illegal activity or any breach of law.
- Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee jumping
- Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner

- 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.
- Disability as a result of any disease or infection.

✓ **Grace period for non-forfeiture provisions**

Grace period is same as the base plan.

In case the rider premium is not paid (even if the base policy premium is paid), the rider will be terminated.

✓ **Revival:**

As per the base plan

❖ **Appendix : Critical Illness Definitions**

**i) Cancer of Specified Severity**

A malignant tumour characterised by the uncontrolled growth & spread of malignant cells with invasion & destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy & confirmed by a pathologist. The term cancer includes leukemia, lymphoma and sarcoma.

The following cancers are excluded -

- i. Tumours showing the malignant changes of carcinoma in situ & tumours which are histologically described as premalignant or non invasive, including but not limited to:  
Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 & CIN-3.
- ii. Any skin cancer other than invasive malignant melanoma
- iii. 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.....
- iv. Papillary micro - carcinoma of the thyroid less than 1 cm in diameter
- v. Chronic lymphocytic leukaemia less than RAI stage 3
- vi. Microcarcinoma of the bladder
- vii. All tumours in the presence of HIV infection.

**ii) Open Chest CABG**

The actual undergoing of open chest surgery for the correction of one or more coronary arteries, which is/are narrowed or blocked, by coronary artery bypass graft (CABG). The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a specialist medical practitioner.

The following are excluded:

- i. Angioplasty and/or any other intra-arterial procedures
- ii. any key-hole or laser surgery.

**iii) First Heart Attack - of Specified Severity**

The first occurrence of 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 this will 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. Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T

ii. Other acute Coronary Syndromes

iii. Any type of angina pectoris.

**iv) 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.

**v) 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 (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

**vi) Major Burns**

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

**vii) 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

**viii) 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.

**ix) 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.

**x) Aorta Surgery**

Undergoing of a laparotomy or thoracotomy to repair or correct an aneurysm, narrowing, obstruction or dissection of the aortic artery. For this definition, aorta means the thoracic and abdominal aorta but not its branches. Surgery performed using only minimally invasive or intraarterial techniques such as percutaneous endovascular aneurysm repair are excluded.

**xi) 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.

**xii) Total Blindness**

Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.

The diagnosis must be clinically confirmed by an appropriate consultant. The blindness must not be correctable by aides or surgical procedures.

❖ **Appendix 2 : Other Definitions**

**Congenital Anomaly**

Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.

a. Internal Congenital Anomaly

Congenital anomaly which is not in the visible and accessible parts of the body

b. External Congenital Anomaly

Congenital anomaly which is in the visible and accessible parts of the body

**Day Care Centre**

A day care centre means any institution established for day care treatment of illness and / or injuries or a medical set -up within a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criteria as under:- has qualified nursing staff under its employment has qualified medical practitioner (s) in charge has a fully equipped operation theatre of its own where surgical procedures are carried out- maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.

**Day Care Treatment**

Day care treatment refers to medical treatment, and/or surgical procedure which is:

- i. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hours because of technological advancement, and
- ii. which would have otherwise required a hospitalization of more than 24 hours.

Treatment normally taken on an out-patient basis is not included in the scope of this definition.

**Grace Period**

Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre existing diseases. Coverage is not available for the period for which no premium is received.

**Hospital**

A hospital means any institution established for in- patient care and day care treatment of illness and / or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under:

- has at least 10 inpatient beds, in those towns having a population of less than 10,00,000 and at least 15 inpatient beds in all other places;
- has qualified nursing staff under its employment round the clock;
- has qualified medical practitioner (s) in charge round the clock;
- has a fully equipped operation theatre of its own where surgical procedures are carried out



- maintains daily records of patients and makes these accessible to the Insurance company's authorized personnel.

**Hospitalization**

Means admission in a Hospital for a minimum period of 24 In patient Care consecutive hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

**Illness**

Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical treatment.

- Acute condition - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/illness/injury which leads to full recovery.
- Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
  - it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
  - it needs ongoing or long-term control or relief of symptoms
  - it requires your rehabilitation or for you to be specially trained to cope with it
  - it continues indefinitely
  - it comes back or is likely to come back.

**Injury**

Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

**Medical Advice**

Any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.

**Medically Necessary**

Medically necessary treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

- is required for the medical management of the illness or injury suffered by the insured;
- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- must have been prescribed by a medical practitioner,
- must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

**Medical Practitioner**

A Medical practitioner is a person who holds a valid registration from the medical council of any state or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license.

**Pre-Existing Disease**

Any condition, ailment or injury or related condition(s) for which you had signs or symptoms, and / or were diagnosed, and / or received medical advice / treatment within 48 months to prior to the first policy issued by the insurer.

**Qualified Nurse**

Qualified nurse is a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

**Surgery**

Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner.

**Prohibition of Rebate:** (SECTION 41 OF INSURANCE ACT 1938) 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 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 one such rebate as may be allowed in accordance with the published prospectus or tables of the Insurer. Any person making default in complying with the provisions of this section shall be punishable with a fine which may extend to five hundred rupees.

**Non Disclosure Clause:** (SECTION 45 OF INSURANCE ACT 1938) No policy of life insurance shall after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statement was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policyholder and that the policyholder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose. Provided that 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.

Edelweiss Tokio Life Insurance is a new generation Insurance company, set up with a start up capital of INR 550 Crores, thereby showing our commitment to building a long term sustainable business focused on a consumer centric approach.

The company is a joint venture between Edelweiss Financial Services, one of India's leading diversified financial services companies with business straddling across Credit, Capital Markets, Asset Management, Housing finance and Insurance and Tokio Marine Holdings Inc, one of the oldest and the biggest Insurance companies in Japan now with presence across 39 countries around the world.

As a part of the company's corporate philosophy of customer centricity, our products have been developed based on our understanding of Indian customers' diverse financial needs and help them through all their life stages.



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