1. **Standard Definitions**

1.1. 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 setup 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.

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

1.3. Acute condition - Acute condition is a disease, illness, or injury that is likely to respond 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

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

2. **Definition of Additional Extended Critical Illness.**

2.1. The terms and conditions specified in this rider document are applicable only if your policy schedule shows that we have offered this rider to you. The UIN allotted by IRDAI for this rider is 111B010V02.

2.2. The cover would be applicable to those members whose cover has been accepted by us and mentioned in the policy schedule. For mid-joiners, the cover would take effect from the day on which we add them as eligible members for the rider.

2.3. SBI Life – Group – Additional Extended Critical Illness Rider benefit is paid if the Insured Member is diagnosed with one of the following Critical illness mentioned below.

2.3.1. Major Cancer,
2.3.2. Coronary Artery Bypass Surgery,
2.3.3. Heart Attack,
2.3.4. Kidney Failure,
2.3.5. Stroke,
2.3.6. Major Organ Transplant
2.3.7. Aorta Surgery
2.3.8. Major Burns
2.3.9. Paralysis
2.3.10. Heart Valve Surgery

The definitions of the conditions are as follows:

2.4. **Major Cancer,**

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 are excluded:

2.4.1. 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.

2.4.2. Any skin cancer other than invasive malignant melanoma

2.4.3. 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........

2.4.4. Papillary micro-carcinoma of the thyroid less than 1 cm in diameter

2.4.5. Chronic lymphocytic leukaemia less than RAI stage 3

2.4.6. Microcarcinoma of the bladder

2.4.7. All tumours in the presence of HIV infection.

2.5. **Coronary Artery Bypass Surgery**

2.5.1. 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:

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

2.5.3. any key-hole or laser surgery.

2.6. **Heart Attack,**

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:

2.6.1. a history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain)

2.6.2. new characteristic electrocardiogram changes

2.6.3. elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

2.6.4. Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T

2.6.5. Other acute Coronary Syndromes

2.6.6. Any type of angina pectoris.

2.7. **Kidney Failure**

2.7.1. 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.

2.8. **Stroke**

2.8.1. 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:

2.8.2. Transient ischemic attacks (TIA)
2.8.3. Traumatic injury of the brain

2.8.4. Vascular disease affecting only the eye or optic nerve or vestibular functions.

2.9. **Major Organ Transplant**

The actual undergoing of a transplant of:

2.9.1. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or

2.9.2. 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:

2.9.3. Other stem-cell transplants

2.9.4. Where only islets of langerhans are transplanted

2.10. **Aorta Surgery**

2.10.1. Means the actual undergoing of surgery via thoracotomy or laparotomy to repair or correct an aortic aneurysm, an obstruction of the aorta, a coarctation of the aorta or a traumatic rupture of the aorta. For the purpose of this definition aorta shall mean the thoracic and abdominal aorta but not its branches.

2.10.2. There must have been excision and replacement of a portion of diseased aorta with a graft.

2.11. **Major Burns**

2.11.1. Third degree (full thickness of the skin) burns covering at least 20% of the body surface area as measured by "The Rule of 9" of the Lund and Browder Body Surface Chart."

2.12. **Paralysis**

2.12.1. 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.

2.13. **Heart Valve Surgery**

2.13.1. 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.
2.13.2. Catheter based techniques including but not limited to, balloon valvotomy / valvuloplasty are excluded.

3. **Additional Extended Critical Illness.**

3.1. Additional Extended Critical Illness Benefits are payable in addition to the base benefit under the master policy.

3.2. If an insured member is diagnosed with any of the extended critical illness as mentioned above, sum assured shall be payable to the insured member in lump sum as per scheme rules and subject to all of the following:

3.2.1. Base cover and rider for the insured member are in-force force at the time of occurrence of events mentioned above.

3.3. Once the benefit under this rider is claimed and admitted, the coverage of the Member under this rider shall cease. There is no death benefit under this rider cover.

3.4. There is no maturity benefit under this rider cover.

3.5. There would be no benefits payable under a lapsed rider cover.

3.6. To avail extended critical illness benefits, there is waiting period of 90 days from the date of commencement of policy or the member’s entry to the scheme whichever is later. If member is diagnosed with extended critical illness during the waiting period, no benefits are payable.

3.7. If a member is diagnosed with critical illness as defined above and death of a insured member occurs within 30 days, then extended critical illness benefits are not be payable.

4. **Eligibility Conditions**

4.1. An employee / member shall be considered eligible for Additional Extended Critical Illness Rider Benefits only if he becomes eligible for base benefit under the Master Policy.

5. **General Conditions**

5.1. If in respect of the Insured Member, the Date of Entry is later than the Date of commencement of the Master Policy or the Annual Renewal Date, proportionate Premiums shall be payable immediately and thereafter the insurance Coverage shall be effective.

5.2. Premiums are payable by the Master Policyholder to the Company in advance and according to the Premium Payment Mode and the due dates of premium.

5.3. The amount of Sum Assured under the Additional Extended Critical Illness Rider benefit shall be determined based on the amount of premium that has been actually paid in respect of the Rider cover. Any enhancement of this rider benefit including extending of cover beyond FCL shall be subject to acceptance by Us and if the additional premium for this enhanced cover is received by Us.
5.4. In the event the Insured Member ceases to be an Insured Member during the policy year for any reason other than death, the Company will refund to the Master Policyholder any premium paid in excess of the appropriate proportion of coverage provided.

6. Termination of Rider.

6.1. Additional Extended Critical Illness cover shall terminate on the earliest of the following:

6.1.1. The date on which base policy is terminated.

6.1.2. The date of expiration of the period for which the last premium payment is received in respect of the Insured member’s rider cover.

6.1.3. The date on which the member is no longer an eligible member for the rider cover.

6.1.4. The end of the policy year during which the insured member attains the cover ceasing age for Additional Extended Critical Illness rider cover or such other age as may be agreed by the Company and the Master Policyholder in writing.

6.1.5. Date on which we admit claim for the rider.

6.1.6. Additional Extended Critical Illness cover may be terminated on Annual Renewal Date by either the master policyholder or the Company by giving thirty days advance written notice to the other party, before the Annual Renewal Date on which such termination shall be effective. Termination shall be without prejudice to any claim originating prior to the effective date of termination. However, the Additional Extended Critical Illness rider cover shall automatically terminate if it is not renewed by the Master Policy Holder on the Annual Renewal Date within the grace period.

7. Exclusions: The Insured member will not be entitled to any benefits under this rider, if a covered extended critical illness results directly or indirectly from any one of the following:

7.1.1. Unreasonable failure to seek or follow medical advice.

7.1.2. Living abroad (living outside the territory for more than 13 consecutive weeks in any 12 months). This exclusion does not apply if the Life Insured is medically examined and/or has undergone tests in India after the occurrence of the event, and is available for medical examination or other reasonable tests in India to confirm the occurrence of an insured event.

7.1.3. War or hostilities (whether war be declared or not).

7.1.4. Civil war, rebellion, revolution, civil unrest or riot.

7.1.5. Participation in any armed force or peace keeping activities.

7.1.6. An act of any person acting on their own or on behalf of or in connection with any group or organization to influence by force any group, corporation or government by terrorism, kidnapping or attempted kidnapping, attack, assault, or any other violent means.
7.1.7. An intentional or self-inflicted act.

7.1.8. Shall any of the covered conditions ever be deemed to be generally curable on the basis of genetic manipulation, substitution, deletion, vaccination or any other treatment medical or otherwise, such condition will no longer be valid.

7.1.9. Drug-taking other than under the direction of a qualified medical practitioner, abuse of alcohol or the taking of poison.

7.1.10. Nuclear fusion, nuclear fission, nuclear waste or any radioactive or ionising radiation.

7.1.11. Deliberate participation of the Life assured in an illegal or criminal act.

7.1.12. Injuries or diseases arising from professional sports, racing of any kind, scuba-diving, aerial flights (including bungee-jumping, hang-gliding, ballooning, parachuting and sky-diving) other than as a crew member or as a fare-paying passenger on a licensed carrying commercial aircraft operating in a regular scheduled route or any hazardous activities or sports unless agreed by special endorsement.

8. Revival / Re-instatement: Conditions applicable are same as mentioned in base policy document of SBI Life - Sampoorn Suraksha.

9. The provisions under all the other Terms, Conditions and Relevant statutes referred to in the Master Policy booklet of SBI Life - Sampoorn Suraksha will also be applicable for this rider.