GROUP LIVING BENEFIT COVERING 36 CRITICAL ILLNESSES

What is Living Benefits?

This is the benefit payable when a person is diagnosed to have contracted one of the 36 listed Critical Illnesses.

Why Living Benefit?

When a person suffers from a major illness, a large amount of money is needed for treatment. Medical insurance covers only the hospital bills. Apart from potential loss of income much money is often needed while recovering at home. Living Benefit helps to pay for these expenses.

What Types of Living Benefit Cover are Available?

There are 2 types: 1. Advance-payment of life benefit. 2. Stand-alone cover. Under advance-payment type, once a Living Benefit is paid, the life cover stops. The stand-alone cover is independently payable.

What is the Survival Period?

This is the 30 days or the period for a specific Critical Illness whichever is longer, which a person must survive after his Critical Illness is first confirmed to be eligible to claim.

This condition applies to Stand-alone Living Benefit cover.

What is the Maximum Living Benefit Cover?

The maximum amount allowed is RM1,000,000 per person for total coverage under Group Insurance and Ordinary Life Policy of Great Eastern.

FAQ

1. Can a claim for Heart Attack be admitted if the life assured does not have a history of typical chest pain? It is clearly stated that all three symptoms must be present before it is considered a heart attack under the Policy. Although it may be possible for a person to suffer a "silent" heart attack without knowing it, the "silent" heart attack is not meant to be covered under our Policy for various reasons among which is that it will be very difficult to pinpoint when the heart attack actually occurred if the only evidence is an ECG scar.

2. What are non-invasive cancers?

Non-invasive cancers are actually early cancers. The early cancer cells usually develop on the surface of the organ. A this stage, it is called "in situ" cancer and our Policy is not meant to cover such cancers. An example is cancer of the cervix. In its early stage, the cancer will be confined to the cervix without invading surrounding tissues. However, if it is not treated, it will invade the surrounding tissue and it is then referred to as "invasive". At this stage a claim for cancer under the Policy will be admissible.

3. What are skin cancers?

Skin cancer is the most common type of cancer. Most cancers are slow-growing and tend not to spread. Malignant melanoma, the one type of skin cancer that is difficult to treat, grows and spreads quickly.

All types of skin cancers except malignant melanoma are not covered under the policy.

4. Kidney Failure-When is a claim payable?

A claim is payable only when the life assured has kidney disease and is undergoing regular peritoneal dialysis or haemodialysis or has had a renal transplant.

A. LIST OF CRITICAL ILLNESSES

(1) "Heart Attack"

The death of a portion of the heart muscle (myocardium) as a result of inadequate blood supply and being evidenced by:-

- (a) A history of typical prolonged chest pain; and
- (b) New electrocardiographic changes resulting from this occurrence; and
- (c) Elevation of the cardiac enzyme (CPK-MB) above the generally accepted laboratory levels of normal.

Diagnosis based on the elevation of Troponin T test alone shall not

be considered diagnostic of a heart attack.

Angina is specifically excluded.

(2) "Stroke"

Defined as a cerebrovascular accident or incident producing neurological sequelae of a permanent nature, having lasted not less than six months. Infarction of brain tissue, hemorrhage and embolisation from an extra-cranial source are included. The diagnosis must be based on changes seen in a CT scan or MRI and certified by a Consultant Neurologist.

Specifically excluded are cerebral symptoms due to transient ischaemic attacks, any reversible ischaemic neurological deficit, vertebrobasilar ischaemia, cerebral symptoms due to migraine, cerebral injury resulting from trauma or hypoxia and vascular disease affecting the eye or optic nerve or vestibular functions.

(3) "Coronary Artery Disease Requiring Surgery" Refers to the actual undergoing of coronary artery by-pass surgery by way of thoracotomy to correct or treat coronary artery disease but not including angioplasty, other intra-arterial, keyhole or laser procedures.

(4) "Cancer"

Cancer is defined as the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue for which major interventionist treatment or surgery (excluding endoscopic procedures alone) is considered necessary. The cancer must be confirmed by histological evidence of malignancy.

The following conditions are excluded:-

- (a) Carcinoma in situ including of the cervix
- (a) Ductal Carcinoma in situ of the breast
- (c) Papillary Carcinoma of the bladder and Stage 1
 Prostate Cancer
- (d) All skin cancers except malignant melanoma
- (e) Stage I Hodgkin's disease
- (f) Tumors manifesting as complications of Acquired Immune Deficiency Syndrome.

(5) "Kidney Failure"

End stage kidney failure presenting as chronic irreversible failure of both kidneys to function, as a result of which regular renal dialysis is initiated or renal transplantation carried out.

(6) "Fulminant Viral Hepatitis"

This is defined as a sub massive to massive necrosis of the liver caused by any virus leading precipitously to liver failure.

The diagnostic criteria to be met are:

- (a) A rapidly decreasing liver size as confirmed by abdominal ultrasound; and
- (b) Necrosis involving entire lobules, leaving only a collapsed reticular framework; and
- (c) Rapidly deteriorating liver functions tests; and
- (d) Deepening jaundice.

Hepatitis B infection or carrier status alone does not meet the diagnostic criteria.

(7) "Major Organ Transplant"

The actual undergoing of a transplant as a recipient of one of the following human organs:

- (a) Kidney
- (b) Lung(s)
- (c) Liver
- (d) Heart
- (e) Bone marrow
- (8) "Paralysis / Paraplegia"

The complete and permanent loss of use of both arms or both legs, or one arm and one leg, through paralysis caused by illness or injury persisting for at least six (6) months from the date of trauma or illness.

(9) "Multiple Sclerosis"

Unequivocal diagnosis by a Consultant Neurologist confirming the following combination, which has persisted for at least a continuous period of six (6) months:

- (a) Symptoms referable to tracts (white matter) involving the optic nerves, brain stem and spinal cord, producing well-defined neurological deficits; and
- (b) A multiplicity or discrete lesions; and
- (c) A well-documented history of exacerbation and
- (d) remissions of said symptoms / neurological deficits.
- (10) "Primary Pulmonary Arterial Hypertension"

Means primary pulmonary hypertension with substantial right ventricular enlargement established by investigations including cardiac catheterization, resulting in permanent irreversible physical impairment to the degree of at least Class 3 of the New York Heart Association Classification of cardiac impairment, and resulting in the Life Assured being unable to perform his/her usual occupation.

(11) "Blindness"

The total, permanent and irrecoverable loss of the sight of both eyes. Certification by an ophthalmologist is necessary.

(12) "Heart Valve Replacement" The actual undergoing of open-chest surgery to replace or repair cardiac valves as a consequence of heart valve defects or abnormalities that have occurred after the date of issue or date of reinstatement of this contract.

Repair, via valvotomy, intra-arterial procedure, key-hole surgery or similar techniques are specifically excluded.

(13) "Loss Of Hearing / Deafness"

Total, permanent and irreversible loss of hearing in both ears as a result of disease or accident. Medical evidence in the form of an audiometry and sound-threshold test must be provided.

(14) "Surgery To Aorta"

The actual undergoing of surgery via a thoracotomy or laprotomy to

repair or correct an aortic aneurysm, an obstruction of the aorta or a coarctation of the aorta. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

(15) "Loss of Speech"

Total and irrecoverable loss of the ability to speak for a continuous period of 12 months. Medical evidence to confirm injury or illness to the vocal cords to support this disability must be supplied by an appropriate (Ear, Nose, Throat) specialist.

All psychiatric related causes are excluded.

(16) "Alzheimer's Disease / Irreversible Organic Degenerative Brain Disorders" Deterioration or loss of intellectual capacity or abnormal behavior as evidenced by the clinical state and accepted standardized questionnaires or tests arising from Alzheimer's Disease or irreversible organic degenerative brain disorders excluding neurosis, psychiatric illness, and any drug or alcohol related organic disorder, resulting in significant reduction in mental and social functioning requiring the continuous supervision of the Life Assured. The diagnosis must be clinically confirmed by an appropriate consultant.

(17) "Major Burns"

Third degree burns covering at least twenty percent (20%) of the Life Assured's body surface area as measured by "The Rule of 9" of the Lund & Browder Body Surface Chart.

(18) "Coma"

A state of unconsciousness with no reaction or response to external stimuli or internal needs, persisting continuously for at least 96 hours, requiring the use of

life support systems and resulting in a neurological deficit, lasting more than 30 days. Confirmation by a Consultant Neurologist must be present.

Coma resulting directly from self-inflicted injury, alcohol or drug misuse is excluded.

(19) "Terminal Illness"

The Life Assured must be suffering from a condition, which in the opinion of an appropriate Medical Practitioner is highly likely to lead to death within 12 months. The Life Assured must no longer be receiving active treatment other than that for pain relief.

(20) "Motor Neurone Disease"

Motor neurone disease of unknown aetiology is characterized by progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. These include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis.

Diagnosis must be confirmed by a Consultant Neurologist.

(21) "AIDS Due To Blood Transfusion"

The Life Assured being infected by HIV virus or AIDS provided that:

- (a) the infection is due to blood transfusion received in Malaysia or Singapore after the commencement of the Policy; and
- (b) the Life Assured is not a haemophiliac; and
- (c) the Life Assured is not a member of any high risk groups such as but not limited to homosexuals, intravenous drug users or sex workers.

Notification and proof of incident will be required via a statement from a statutory Health Authority that the infection is medically acquired.

(22) "Parkinson's Disease"

Unequivocal diagnosis of Parkinson's Disease by a Consultant Neurologist where the condition:

- (a) Cannot be controlled with medication; and
- (b) Shows signs of progressive impairment; and
- (c) Activities of Daily Living assessment confirm the inability of the Life Assured to perform without assistance three (3) or more of the Activities of Daily Living.

Only idiopathic Parkinson's Disease is covered. Drug-induced or toxic causes of Parkinsonism are excluded.

(23) "Chronic Liver Disease"

End stage liver failure evidenced by permanent jaundice, ascites, encephalopathy and portal hypertension.

Wernicke's encephalopathy and liver failure secondary to alcohol or drug misuse is excluded.

(24) "Chronic Lung Disease"

End stage respiratory failure including chronic interstitial lung disease.

The following criteria must be met:

- (a) Requiring permanent oxygen therapy as a result of a consistent FEV1 test value of less than one liter.
- (Forced Expiratory Volume during the first second of a forced exhalation); and
- (b) Arterial Blood Gas analysis with partial oxygen pressures of 55mmHg or less; and
- (c) Dyspnoea at rest.

(25) "Major Head Trauma"

Physical head injury causing significant permanent functional impairment lasting for a minimum period of three (3) months from the date of the trauma or injury. The resultant permanent functional impairment is to be verified by a Consultant Neurologist and duly concurred by the Company's Medical Officer and must result in an inability to perform at least three (3) of the Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent", shall mean beyond the hope of recovery with current medical knowledge and technology.

(26) "Aplastic Anaemia"

Chronic persistent bone marrow failure which results in total aplasia of the bone marrow and requires treatment with at least one of the following:

- (a) Regular blood product transfusion
- (b) Marrow stimulating agents
- (c) Immunosuppressive agents
- (d) Bone marrow transplantation

(27) "Muscular Dystrophy"

The diagnosis of muscular dystrophy shall require a confirmation by a Consultant Neurologist of the combination of 3 out of 4 of the following conditions:

- (a) Family history of other affected individuals
- (b) Clinical presentation including absence of sensory disturbance, normal cerebro-spinal fluid and mild tendon reflex reduction
- (c) Characteristic electromyogram

excluded.

(d) Clinical suspicion confirmed by muscle biopsy

No benefit will be payable under this Covered Event before the Life Assured had reached the age of 12 years next birthday.

(28) "Benign Brain Tumor"

A life-threatening, non-cancerous tumor in the brain giving rise to characteristic signs of increased intra-cranial pressure such as papilloedema, mental symptoms, seizures and sensory impairment. The presence of the underlying tumor must be confirmed by imaging studies such as CT Scan or MRI.

Cysts, granulomas, malformations in or of the arteries or veins of the brain, haematomas, tumors in the pituitary gland or spine and tumors of the acoustic nerve are

(29) "Encephalitis"

Defined as severe inflammation of brain substance, resulting in permanent neurological deficit lasting for a minimum period of 30 days and certified by a Consultant Neurologist. The permanent deficit must result in an inability to perform at least three (3) of the Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent", shall mean beyond the hope of recovery with current medical knowledge and technology.

Encephalitis as a result of HIV infection is excluded.

(30) "Poliomyelitis"

Unequivocal diagnosis by a Consultant Neurologist of infection with the Poliovirus leading to paralytic disease as evidenced by impaired motor function or respiratory weakness. Cases not involving paralysis will not be eligible for this benefit. Other causes of paralysis (such as Guillain-Barre syndrome) are specifically excluded.

(31) "Brain Surgery"

The actual undergoing of surgery to the brain under general anesthesia during which a craniotomy is performed. Bur Hole and brain surgery as a result of an accident is excluded.

(32) "Bacterial Meningitis"

Bacterial meningitis causing inflammation of the membranes of the brain or spinal cord resulting in permanent neurological deficit lasting for a minimum period of 30 days and resulting in a permanent inability to perform at least three (3) of the Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent", shall mean beyond the hope of recovery with current medical knowledge and technology.

(33) "Other Serious Coronary Artery Disease" The narrowing of the lumen of at least three major arteries i.e. Circumflex, Right Coronary Artery (RCA), Left Anterior Descending Artery (LAD), by a minimum of 60 percent or more as proven by coronary arteriography. This benefit is payable regardless of whether or not any form of coronary artery surgery has been performed.

(34) "Apallic Syndrome"

Universal necrosis of the brain cortex, with the brainstem remaining intact. Diagnosis must be confirmed by a Consultant Neurologist and condition must be documented for at least one month.

(35) "AIDS Cover of Medical Staff"

Infection by any Human Immunodeficiency Virus (HIV) only if the Life Assured is a Medical Staff as defined below, and that such infection was considered by the medical authorities involved to be caused by a needlestick/sharp instrument injury or by exposure to blood or bloodstained body fluid which occurred after the commencement of the Policy. The accident must

have occurred whilst the Life Assured was following his normal occupational duties and reported in accordance with the established occupational procedures for such accidents. The Life Assured must, within 5 days of the accident have undergone a blood test indicating the absence of HIV or its antibodies but a further blood test performed within 6 months of the accident must indicate the presence of HIV or its antibodies after the

a further blood test performed within 6 months of the accident must indicate the presence of HIV or its antibodies after the commencement of the Policy.

However, the benefit payable will not apply if any medical cure is found for Acquired Immune Deficiency Syndrome or the effects of the HIV virus or a medical treatment is developed which results in the prevention of the occurrence of AIDS.

"Medical Staff" is defined as Doctors (General Physicians and Specialists), nurses, laboratory technicians, dentists (surgeons and nurses), ambulance workers who are working in the medical centre or hospital or dental clinics/polyclinics in Malaysia.

(36) "Full Blown AIDS"

The clinical manifestation of AIDS (Acquired Immune-deficiency Syndrome) must be supported by the results of a positive HIV (Human Immuno-deficiency Virus) antibody test and a confirmatory Western Blot test. In addition, the Life Assured must have a CD4 cell count of less than two hundred (200) and one or more of the following criteria are met:

- (a) Weight loss of more than 10% of body weight over a period of six (6) months or less (wasting syndrome)
- (b) Kaposi Sarcoma
- (c) Pneumocystic Carinii Pneumonia
- (d) Progressive multifocal leukoencephalopathy
- (e) Active Tuberculosis
- (f) Less than one-thousand (1000) lymphocytes
- (g) Malignant Lymphoma

B. 60-DAY WAITING PERIOD

Each new participant under this benefit will not be covered if a Critical Illness is first incurred or diagnosed in the first 60 days that he participates under this scheme starting from his Effective Date.

C. The Company at its own expenses shall have the right and opportunity to examine by physician the Life Assured whose Critical Illness is the basis of the Critical Illness claim. The physician shall be designated by the Company and shall have the right to conduct medical tests as he deems necessary.

D. EXCLUSIONS

- 1. A Benefit is not payable for any Critical Illness of which the Life Assured should have been aware, or of which symptoms were evident, or for which he received medical advice or treatment prior to his Effective Date under this benefit
- 2. With reference to the Table below, the Company shall not be liable for any Critical Illness in List A if the Life Assured had previously
- (i) been diagnosed as having suffered or undergone surgery for a Critical Illness Event specified in List B; or
- (ii) been diagnosed as having suffered an illness specified in List C prior to the Effective Date of his cover or increase of cover under this

insurance.

ITEM	LIST A	LIST B	LIST C
1	Any of : (i)Cancer (ii)Heart Attack (iii)Stroke (iv)Kidney Failure (v)Fulminant Hepatitis (vi)Coronary Artery Disease Surgery (vii)Major Organ Transplant	The same Covered Event	-
2	Coronary Artery Disease Surgery	Heart Attack	-
3	Heart Attack	Coronary Artery By-pass Surgery	-
4	(i) Coronary Artery By-pass Surgery; or (ii) Heart Attack	Heart Transplant	-
5	Heart Transplant	(i) Coronary Artery By-pass Surgery ;or (ii) Heart Attack	-
6	Fulminant Hepatitis	Major Organ Transplant – liver	-
7	Liver Transplant	-	Chronic Active Hepatitis
8	End Stage Liver Disease	Major Organ Transplant – liver	Chronic Active Hepatitis
9	End Stage Lung Disease	-	(i)Chronic bronchitis ;or (ii)bronchial asthma
10	Heart Valve Surgery	-	Rheumatic Endocarditis

- 3. Critical Illness Benefit is not be payable for any Critical Illness which is contracted in the first sixty (60) days following the initial Effective Date of coverage for Critical Illness Benefit. This sixty days exclusion does not apply beyond the initial year of coverage for Critical Illness Benefit.
- 4. Critical Illness Benefit is payable only once if multiple Critical Illnesses are contracted. In no case shall a Critical Illness Benefit be payable more than once to a Life Assured.
- 5.. If at any time a Life Assured is found to be infected with any human immuno-deficiency virus he ceases to be eligible for cover except as provided for under Critical Illness # (xxi), (xxxv) and (xxxvi) above. For the purpose of this clause this exclusion takes effect when blood tests indicate in the opinion of the Company either the presence of any human immuno-deficiency virus or antibodies to such a virus.

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