

LifePlan

Critical Illness Guide for Financial Advisers



Contents

- 2 Introduction
- 3 Cancer
- 4 Central nervous system problems
- 5 Circulatory problems
- 6 Heart disease
- 8 Organ failure
- 9 Other conditions
- 12 Important notes

Introduction

RL360 Insurance Company (the Company) has produced this guide to provide you with an explanation of the definitions used to assess any claim for critical illness.

The definitions used in this guide have been extracted from the LifePlan *Terms and Conditions* and it will be the wording taken from the *Terms and Conditions* that the Company uses to assess any claim. Each definition is followed by an explanation or commentary to help you understand the critical illness portion of the LifePlan policy your client is taking out.

Critical illness cover is available only as an acceleration of part of, or all of, the primary life cover or term cover. If critical illness cover is chosen and a claim is made, the level of the primary or term life cover will be reduced by the same amount.

When selecting critical illness cover, clients can choose any level of cover between the minimum of USD45,000 and of the maximum of USD750,000 or 100% of the total life cover (whichever is lower).

The table (right) shows the conditions and procedures covered by LifePlan's accelerated critical illness cover.

Covered conditions and procedures

Aorta graft surgery	Kidney failure
Blindness	Loss of independent existence
Cancer	Major organ transplant
Coma	Motor neurone disease
Coronary Artery by-pass graft	Multiple sclerosis
Deafness	Paralysis of limbs
Disability	Stroke
Heart attack	Third degree burns
Heart valve replacement or repair	

We will not pay a claim if the Life Assured is diagnosed with, or has symptoms of, a covered condition/procedure within 90 days of the policy start date or its reinstatement.

Cancer

Risk factors

- Tobacco
- Sunlight
- Radiation
- Certain viruses

However, the causes of many cancers remain unknown.

The 4 most common cancers are:

- Breast
- Colon
- Lung
- Prostate

Cells are the building blocks of all living things. Our cells multiply when needed, and die when not needed. Cancer appears when cells forget how to die and continue to multiply, creating a mass of constantly growing tissue, this is called a tumour. Cells can break out of the tumour and can spread to other parts of the body.

Different types of cancer are more likely in some parts of the world than in others. This can be caused by environmental factors such as diet or sunlight for instance. The sooner a cancer is detected and treated the greater the chance the client will survive. Although environment is a contributing factor, family history and lifestyle choices are greater contributors to the likelihood of getting cancer.

It is important to differentiate between a malignant and non-invasive cancer in situ. The latter is a very early stage cancer which has not invaded the surrounding tissue. Such cancers can be successfully treated. As a result cancer in situ or cancers described as non-invasive are not covered by our definition.

Most skin cancers can be successfully treated and are excluded. The important exception is invasive malignant melanoma, which is a serious form of skin cancer that can spread rapidly to other parts of the body.

Technical definition: Cancer – excluding less advanced cases

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

The term malignant tumour includes leukaemia, lymphoma and sarcoma. For the above definition, the following are not covered:

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

Central nervous system problems

Motor Neurone Disease

Risk factors

There are no known associated risk factors (other than family history) with Motor Neurone Disease.

Motor Neurone Disease is a progressive neurodegenerative disease that attacks the upper and lower motor nerves of the brain and spinal cord. These motor nerves (or neurones) pass messages to the muscles telling them what to do. Degeneration of the motor neurones leads to weakness and wasting of muscles, causing increasing loss of mobility in the limbs, as well as difficulties with speech, swallowing and breathing.

It is a relatively rare disease, and is a difficult condition to diagnose.

Technical definition: Motor Neurone Disease - resulting in permanent symptoms

A definite diagnosis of Motor Neurone Disease by a consultant neurologist. There must be permanent clinical impairment of motor function.

Multiple Sclerosis

Risk factors

- Family history
- Living in a geographical area with higher incidence rate for Multiple Sclerosis (MS)
- Being female

Although there are no specific risk factors associated with MS, there are environmental factors. Northern Europe, northern United States, southern Australia and New Zealand all have a higher incidence of the disease, although the underlying cause is not known.

MS is an incurable disease of the central nervous system. Effectively, the body turns on itself and begins to attack the central nervous system. Nerve fibres are covered by a myelin sheath which normally protects and insulates them. In MS these myelin sheaths are attacked and inflamed. They become damaged leaving fibrous tissue which restricts the ability of the nerve fibres to conduct impulses to parts of the body.

Symptoms can include temporary blurred vision, blindness, double vision, involuntary movement of the eyeballs, tremors to the hands, weakness of arms or legs, lack of co-ordination and slurred speech.

The disease is progressive but can run a variable course. There can be long periods of remission during which symptoms can diminish or even disappear completely.

As the range of symptoms is extensive, it is a difficult disease to diagnose.

Modern Magnetic Resonance Imaging (MRI) scanning can now assist an earlier diagnosis to be made.

Technical definition: Multiple Sclerosis - with persisting symptoms

A definite diagnosis of Multiple Sclerosis by a consultant neurologist. There must be current impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

Circulatory problems

Risk factors

- Diabetes
- Family history of stroke
- Heart disease
- High cholesterol
- High blood pressure
- Increasing age

Other lifestyle factors that can increase the risk:

- Alcohol use
- Bleeding disorders
- Cocaine usage
- Head injury

A stroke is the result of an interference with the blood supply to the brain, normally caused by damage to blood vessels. Brain damage can cause a person to have problems with communication, sight, their ability to walk, a loss of strength, and even mental confusion are among some of the problems people experience.

There are two types of stroke - Ischaemic strokes and Hemorrhagic strokes. Ischaemic strokes are generally caused by blockages outside the brain (i.e. in arteries carrying blood from the heart to the brain) by the build up of plaque. Hemorrhagic strokes are caused by burst blood vessels in the brain, which causes permanent damage to the surrounding cells.

Technical definition: Stroke - resulting in permanent symptoms

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

For the above definition, the following are not covered:

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

Heart disease

Risk factors

- Being male
- Diabetes
- Family history of heart disease before 50
- High blood pressure
- High cholesterol
- Menopause
- Inactivity (not enough exercise)
- Obesity
- Smoking

Lifestyle choices are by far the largest contributor to heart disease the world over. A poor diet, a lack of exercise, and family history all contribute to cause a number of different conditions, but clients who fit into the above risk factors are more likely to require at least one of the following treatments.

Aorta graft surgery

Commentary

The heart muscle is constantly working, so it needs a continuous supply of oxygenated blood. This oxygenated blood is carried to and from the heart by the coronary arteries. Disease (from lifestyle choices) results in a fatty build up around the artery walls. This causes the coronary arteries to narrow and weaken. Surgery may be required to replace or repair the part of the aorta that is damaged.

Technical definition: Aorta graft surgery – for disease

The undergoing of surgery for disease to the aorta with excision and surgical replacement of a portion of the diseased aorta with a graft. The term aorta includes the thoracic and abdominal aorta but not its branches.

For the above definition, the following are not covered:

- Any other surgical procedure, for example the insertion of stents or endovascular repair.
- Surgery following traumatic injury to the aorta.

Coronary artery by-pass grafts

Coronary artery by-pass surgery is one of the main surgical methods used to treat coronary artery disease. If one or more of the arteries around the heart become blocked, the flow of oxygenated blood to the heart muscle is impeded and angina (chest pain) or even a heart attack can occur. A coronary artery by-pass involves a surgeon grafting around the blockage using a length of alternative blood vessel. The aim of the by-pass is to restore the flow of oxygenated blood to the heart muscle.

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

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist to correct narrowing or blockage of 1 or more coronary arteries with by-pass grafts.

Heart disease continued

Heart attack

The heart is an essential organ in the body, pumping oxygenated blood to the other organs where it is needed. The heart itself needs oxygenated blood to work effectively and, when that supply is interrupted, damage will occur to the heart muscle.

Sometimes the coronary arteries (the arteries supplying the heart itself with oxygenated blood) can become blocked by fatty build ups. This will result in damage to some of the heart muscle. When the heart is no longer supplied with the oxygen it needs, it will simply stop. Doctors call this a myocardial infarction, more commonly known as a heart attack.

Damage of the heart muscle usually causes severe pain and results in an increase in cardiac enzymes in the blood. A heart attack will also result in electrocardiograph changes (ECG).

Technical definition: Heart attack – of specified severity

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

- Typical clinical symptoms (for example, characteristic chest pain)
- New characteristic electrocardiographic changes
- The characteristic rise of cardiac enzymes or Troponins recorded at the following levels or higher
- Troponin T > 1.0 ng/ml
- AccuTnl > 0.5 ng/ml or equivalent threshold with other Troponin I methods

The evidence must show a definite acute myocardial infarction.

For the prior definition, the following are not covered:

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

Heart valve replacement or repair

The heart contains a number of valves that open and close as part of the normal pumping action. Heart failure occurs when the valves of the heart muscle are no longer working properly. This results in a drop in the heart's ability to move blood around the body. As the heart's ability to pump the blood is lost, it starts to become stuck in other areas of the body. This causes blood congestion in the lungs, the liver, the gastrointestinal tract, and the arms and legs, which as a result, means there is a lack of oxygen and nutrition to organs. This causes damage and lowers the ability of the body to work properly.

Surgery may be necessary to either replace or repair the faulty valve.

Technical definition: Heart valve replacement or repair-with surgery to divide the breastbone

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist to replace or repair 1 or more heart valves.

Organ failure

Kidney failure

Risk Factors

- Diabetes
- Autoimmune disease
- Infections to the kidneys
- Injury
- Urinary tract complications

It is not often that an individual's kidneys fail; rather it is generally caused as a result of another underlying condition.

The body normally contains two kidneys whose function it is to filter the unwanted waste material from the bloodstream. If the kidneys are unable to function then waste products can build up in the blood and can eventually poison the person. A single kidney can take on the workload of two provided it remains healthy and the person adjusts their lifestyle accordingly. Medical treatment takes various forms. The kidneys' cleansing role can either be carried out artificially (known as dialysis), or the kidney can be replaced by one from a donor (known as a transplant).

Technical definition: Kidney failure - requiring dialysis

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

Major organ transplant

Risk Factors

- Environment
- Gender
- Genetics
- Lifestyle

Major body organs can be damaged either by disease or poor lifestyle choices and replacing it is the only way to avoid death.

A careful genetic match of donor and recipient must take place to ensure the best possible results. If this is not done, the person's body can reject the new organ and their immune system will attack, destroying the replacement. Even with careful matching, drugs are given to reduce the likelihood of the recipient's natural defences rejecting the donated organ.

Technical definition: Major organ transplant

The undergoing as a recipient of a transplant of bone marrow or of a complete heart, liver, lung, or pancreas.

For the above definition, the transplant of any other organs, parts of organs, tissues or cells is not covered.

Other conditions

Loss of independent existence

Risk Factors

- Age
- Injury
- Illness

Age, injury, or serious illness can leave a person needing help in their day-to-day lives. Serious head injuries from car accidents, difficulties caused by strokes, or even Alzheimer's and Parkinson's disease can all cause a person to need help with their day-to-day living.

Technical definition: Loss of independent existence

A loss of independent existence means that in the opinion of our Chief Medical Officer the Life Assured is:

1. Permanently disabled by means of mental incapacity. For the purposes of this condition mental incapacity means that the Life Assured is suffering from:
 - an organic brain disease or brain injury or benign brain tumour which affects the Life Assured's ability to reason and understand, and
 - the mental incapacity has deteriorated to the extent that continual supervision of the Life Assured and the assistance of another person is required, and
 - the mental incapacity is irreversible with no reasonable prospect of there ever being any improvement in the Life Assured's condition.

OR

2. Permanently unable to perform at least 3 Activities of Daily Living.

Activities of Daily Living means each of the following:

- Transfer and mobility – the ability to move from one room to an adjoining room or from one side of a room to another or to get in or out of bed or a chair without requiring the physical assistance of another person.
- Continence – the ability to voluntarily control bowel and bladder functions such as to maintain personal hygiene.
- Dressing – putting on and taking off all necessary items of clothing without requiring the assistance of another person.
- Toileting – getting to and from the toilet, transferring on and off the toilet and associated personal hygiene.
- Eating – all tasks of getting food into the body once it has been prepared.

Paralysis of limbs

Risk Factors

- Environmental
- Serious Accident

In order for the body to move, the brain must send signals to the muscles via the spinal column or nervous system. A person can become paralysed or become paraplegic when these signals fail to reach their destination. Often this is caused by disease although more commonly by injury to the spinal cord. More severe forms of paralysis, such as quadriplegia (paralysis of all four limbs) are also covered.

Technical definition: Paralysis of limbs – total and irreversible

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

Other conditions continued

Third degree burns

Risk factors

- Accidental
- Environmental

This is the most serious type of burn. It involves the destruction of the full thickness of the skin and can harm fat, muscle and bone. Burns of this scale are likely to be life-threatening.

Technical definition: Third degree burns - covering 20% of the body's surface area

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

Blindness

Risk Factors

- Accidental
- Age
- Environmental

Definition: Blindness - Permanent and irreversible

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

Coma

Risk Factors

- Accidental
- Poor Health

A coma is an ongoing state of unconsciousness. A person in a coma cannot be awakened, will not respond normally to pain, light or sound, does not have sleep-wake cycles, and does not take voluntary actions.

Coma may result from a variety of conditions, including intoxication, metabolic abnormalities, central nervous system diseases, acute neurologic injuries such as stroke, and hypoxia. A coma may also result from head trauma caused by falls or car accidents. The underlying cause of coma is damage to the part of the brain which regulates sleep.

Technical definition: Coma - resulting in permanent symptoms

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

- requires life support systems for a continuous period of at least 96 hours; and
- results in permanent neurological deficit with persisting clinical symptoms.

For the above definition, the following is not covered:

Coma secondary to alcohol or drug abuse.

Other conditions continued

Deafness

Risk Factors

- Accidental
- Age
- Environmental

Technical definition: Deafness - permanent and irreversible

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

Disability

Risk Factors

- Accidental
- Age

Technical definition: Disability

Total & Permanent Disability - for the purposes of this condition (if the relevant Life Assured is under age 65 at the time when, for the purposes of this Policy, the Disability is deemed to have commenced), the Life assured must be medically certified (by a medical practitioner approved by the Company) to be unable to ever again to follow any occupation or employment for profit or reward.

Long Term Care - if the relevant Life Assured is over age 65 at the time when, for the purposes of this Policy, the Disability is deemed to have commenced, the Loss of Independent Existence (please refer to the definition of 'Relevant Condition' below) resulting in the Permanent inability of the Life Assured to perform at least 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.

Important notes

For financial advisers only. Not to be distributed to, nor relied on by, retail clients.

The commentary wordings are designed to give a better understanding of each condition covered by LifePlan. Any claim made will be considered using the full criteria as set out in the *Terms and Conditions*.

New Business

RL360 House, Cooil Road, Douglas,
Isle of Man, IM2 2SP, British Isles.
Tel: +44 (0)1624 681 578 Fax: +44 (0)1624 690 578
Email: newbusiness@rl360.com

Servicing

RL360 House, Cooil Road, Douglas,
Isle of Man, IM2 2SP, British Isles.
Tel: +44 (0)1624 681 682 Fax: +44 (0)1624 677 336
Email: csc@rl360.com

Representative Office - Dubai

Office 1402, 14th Floor, Single Business Tower,
Sheikh Zayed Road, Dubai, UAE.
Tel: +971 4378 2700
Email: dubai@rl360.com

Regional Office - Hong Kong

Suite 3605, The Center,
99 Queen's Road Central, Hong Kong.
Tel: +852 3929 4333 Fax: +852 2169 0181
Email: hongkong@rl360.com

Website

www.rl360.com