

HDFC STANDARD LIFE INSURANCE COMPANY LIMITED

Additional Policy Provisions

Total & Partial Permanent disability benefit

This booklet is numbered _____

1. Benefits

If the Scheme Member becomes,

(A) totally disabled (defined below) as a result of an accident and remains totally disabled for a period of twenty six weeks (the deferred period) then the Insurer will pay an amount as specified in the Schedule to the Policy Holder for the benefit of that Scheme Member if the Insurer is satisfied that he is totally and permanently disabled (defined below).

If after twenty six weeks the Insurer is not satisfied that the Scheme Member is totally and permanently disabled then the Insurer may extend the deferred period in order to establish the validity of the claim.

The maximum amount payable in respect of this benefit is Rs 1,00,00,000.

The amount payable would be reduced by the amount(s) already paid in respect of partial permanent disability due to the same accident.

The Insurer will pay the total permanent disability benefit only if all of the following are satisfied:

- all due premiums (including those which will fall due during the deferred period) have been paid
- the total and partial permanent disability benefit commenced prior to, and has not terminated prior to, the date of the accident
- the total and partial permanent disability benefit commenced prior to, and has not terminated prior to, the date of the total disability
- the Scheme Member becomes totally disabled within 90 days of the accident
- the Policy Holder informs the Insurer within 30 days of the date of total disability of the Scheme Member
- the Policy Holder produces satisfactory evidence that the Scheme Member has suffered and continues to suffer a total permanent disability when the Insurer asks for it

- the Policy Holder files the claim with the Insurer in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the Insurer, within 90 days from the date of total disability.

or

(B) partially disabled (defined below) as a result of an accident and remains partially disabled for a period of twenty six weeks (the deferred period) then the Insurer will pay a percentage of the amount specified in the Schedule to the Policy Holder for the benefit of that Scheme Member if the Insurer is satisfied that he is partially and permanently disabled.

If after twenty six weeks the Insurer is not satisfied that the Scheme Member is partially and permanently disabled then the Insurer may extend the deferred period in order to establish the validity of the claim.

The Insurer will pay the partial permanent disability benefit only if all of the following are satisfied:

- all due premiums (including those which will fall due during the deferred period) have been paid
- the total and partial permanent disability benefit commenced prior to, and has not terminated prior to, the date of the accident
- the total and partial permanent disability benefit commenced prior to, and has not terminated prior to, the date of the partial disability
- the Scheme Member becomes partially disabled within 90 days of the accident
- the Policy Holder informs the Insurer within 30 days of the date of partial disability of the Scheme Member
- the Policy Holder produces satisfactory evidence that the Scheme Member has suffered and continues to suffer a partial permanent disability when the Insurer asks for it
- the Policy Holder files the claim with the Insurer in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the Insurer, within 90 days from the date of partial disability.

2. Total Disability and Total Permanent Disability

Total disability is disability resulting from an accident caused by outward, violent and visible means such that there is not any work, occupation or profession that the Scheme Member is capable of doing or following to earn or obtain wages, compensation or profit, as a result of the accidental injury.

Total and permanent disability is disability resulting from an accident caused by outward, violent and visible means such that there is neither at the time disability commences nor at any time thereafter, any work, occupation or profession that the Scheme Member can ever be capable of doing or following to earn or obtain wages, compensation or profit, as a result of the accidental injury.

3. Partial Permanent Disability and benefits payable

The Scheme Member will be considered to be partially & permanently disabled if, as a result of an accident, one of the following losses occurs and the Insurer is satisfied that the loss is permanent. The percentage of the amount specified in the Schedule payable for each loss is given below.

Nature of disability	Percentage Payable
Permanent loss of sight (both eyes)	100%
Permanent loss of sight (one eye)	50%
Loss of or permanent loss of use of two limbs *	100%
Loss of or permanent loss of use of one limb *	50%
Permanent loss of speech and loss of hearing in both ears	100%
Permanent loss of hearing in both ears	75%
Permanent loss of speech	50%

* leg above ankle or arm above the wrist

A maximum of 100% of the amount specified in the Schedule is payable in any one policy year. A maximum of 100% of the amount specified in the Schedule is payable in respect of any one accident.

The amount specified in the Schedule will be subject to a maximum of Rs 1,00,00,000.

A Scheme Member would be covered for each type of disability only once in his lifetime. Where the Scheme Member has claimed under one disability, subsequent recovery does not entitle him to further cover under the same disability.

An accident is an event that causes disability by violent, accidental, external and visible means independently of any physical or mental illness.

4. Medical Evidence

The Insurer may request the Scheme Member to undertake a medical examination or test, which, in its opinion, is reasonable to determine the extent of disability. The Insurer will not accept a claim if the Scheme Member does not undertake any medical examination or test which the Insurer considers reasonable or necessary. The Insurer will not pay for any fees or expenses in connection with the production of medical evidence except for the fees and expenses for any medical examination or test which the Insurer has asked a medical practitioner to provide.

5. Termination of the rider benefit

The total & partial permanent disability benefit on the life of a Scheme Member shall immediately terminate upon the happening of any of the following events and no benefits will be payable thereafter:

- (a) non-payment of the Premium by the Policy Holder before the start of the Policy Year, OR
- (b) the Scheme Member reaching the Terminal Date.

6. Eligibility

Upon admittance of a total permanent disability claim the Scheme Member ceases to be an Eligible Person, he will not be eligible to participate in the scheme at any future date and no benefits will be payable thereafter.

7. Lapsing

- (1) No amount of the benefit under this rider shall be payable where the date of total or partial disablement is on or after the Lapsing Date.
- (2) However, the same may be reinstated as provided under L12.

8. Exclusions

No total & partial permanent disability benefit shall be payable if the Scheme Member is totally or partially permanently disabled directly or indirectly by:

- **Intentionally self-inflicted injury or attempted suicide, irrespective of mental condition**
- **Alcohol or solvent abuse, or the taking of drugs except under the direction of a registered medical practitioner**
- **Taking part in or practising any hazardous hobby, pursuit or any race unless previously agreed to by the Insurer in writing**
- **War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion**
- **Taking part in any flying activity, other than as a passenger in a commercially licensed aircraft**
- **Taking part in any act of a criminal nature.**

SAMPLE

ADDITIONS TO THE RULES OF----- GROUP TERM INSURANCE SCHEME

TOTAL & PARTIAL PERMANENT DISABILITY BENEFIT

1. BENEFITS

If the Scheme Member becomes,

(A) totally disabled (defined below) as a result of an accident and remains totally disabled for a period of twenty six weeks (the deferred period) then the Insurer will pay the amount as specified in the Schedule to the Policy Holder for the benefit of that Scheme Member if the Insurer is satisfied that he is totally and permanently disabled (defined below).

If after twenty six weeks the Insurer is not satisfied that the Scheme Member is totally and permanently disabled then the Insurer may extend the deferred period in order to establish the validity of the claim.

The total disablement of the Scheme Member should occur within 90 days of the accident.

The maximum amount payable in respect of this benefit is Rs 1,00,00,000.

The amount payable would be reduced by the amount(s) already paid in respect of partial and permanent disability due to the same accident.

or

(B) partially disabled (defined below) as a result of an accident and remains partially disabled for a period of twenty six weeks (the deferred period) then the Insurer will pay a percentage of the amount specified in the Schedule to the Policy Holder for the benefit of that Scheme Member if the Insurer is satisfied that he is partially and permanently disabled.

If after twenty six weeks the Insurer is not satisfied that the Scheme Member is partially and permanently disabled then the Insurer may extend the deferred period in order to establish the validity of the claim.

The partial disablement of the Scheme Member should occur within 90 days of the accident.

2. TOTAL DISABILITY AND TOTAL PERMANENT DISABILITY

Total disability is disability resulting from an accident caused by outward, violent and visible means such that there is not any work, occupation or profession that the Scheme Member is capable of doing or following to earn or obtain wages, compensation or profit, as a result of the accidental injury.

Total and permanent disability is disability resulting from an accident caused by outward, violent and visible means such that there is neither at the time disability commences nor at any time thereafter, any work, occupation or profession that the Scheme Member can ever be capable of doing or following to earn or obtain wages, compensation or profit, as a result of the accidental injury.

3. PARTIAL PERMANENT DISABILITY AND BENEFITS PAYABLE

The Scheme Member will be considered to be partially & permanently disabled if, as a result of an accident, one of the following losses occurs and the Insurer is satisfied that the loss is permanent. The percentage of the amount specified in the Schedule payable for each loss is given below.

Nature of disability	Percentage payable
Permanent loss of sight (both eyes)	100%
Permanent loss of sight (one eye)	50%
Loss of or permanent loss of use of two limbs *	100%
Loss of or permanent loss of use of one limb *	50%
Permanent loss of speech and loss of hearing in both ears	100%
Permanent loss of hearing in both ears	75%
Permanent loss of speech	50%

* leg above ankle or arm above the wrist

A maximum of 100% of the amount specified in the Schedule is payable in any one policy year. A maximum of 100% of the amount specified in the Schedule is payable in respect of any one accident.

The amount specified in the Schedule will be subject to a maximum of Rs 1,00,00,000.

A Scheme Member would be covered for each type of disability only once in their lifetime. Where the Scheme Member has claimed under one disability, subsequent recovery does not entitle him to further cover under the same disability.

An accident is an event that causes disability by violent, accidental, external and visible means independently of any physical or mental illness.

4. CONTRIBUTIONS

The Policy Holder is required to pay premiums due in respect of the Scheme Members who are totally or partially disabled until a claim for total and partial permanent disability has been admitted.

5. TERMINATION OF THE RIDER BENEFIT

The total & partial permanent disability benefit on the life of a Scheme Member shall immediately terminate upon the happening of any of the following events and no benefits will be payable thereafter:

- (a) non-payment of the Premium by the Policy Holder before the start of the Policy Year, OR
- (b) the Scheme Member reaching the Terminal Date.

6. ELIGIBILITY

Upon admittance of a total permanent disability claim the Scheme Member ceases to be an Eligible Person, he will not be eligible to participate in the scheme at any future date and no benefits will be payable thereafter.

7. CLAIMS

The Policy holder shall inform the Insurer within 30 days of the total or partial disability of a Scheme Member and shall file a claim with the Insurer on behalf of the Scheme Member in the form prescribed by the Insurer and accompanied by all relevant documents as may be required by the insurer, within 90 days from the date of the total or partial disability.

The Insurer shall pay the claim amount in the name of the Scheme Member to the Policy Holder who shall give a valid discharge/ receipt for the same on behalf of the said Scheme Member to the Insurer.