NAVIGATOR
Insurance Brokers Ltd.
Unit 8E Golden Sun Centre 223 Wing Lok St Sheung Wan HK
Tel. (852) 2530 2530 Fax (852) 2530 2535
Email: crew@navigator-insurance.com
www.navigator-insurance.com

Liberty Insurance™

Protecting your employees by adding Critical Illness Benefit

Why is Critical Illness Benefits ("CI") important?

- According to Department of Health, the top 3 killers in Hong Kong are: Cancer, Heart Disease and Pneumonia (total 60% among reason of death)*.
- Huge medical expenses of Critical Illness treatment with example below:

Medical Treatment	Medical Cost
Angioplasty	HK$200,000
Chemotherapy	HK$200,000 (4-6 months)
Target Therapy	HK$300,000 (4-6 months)
Electrotherapy	HK$200,000 (30 times)

- Intense Medical Expenses Inflation

What is Critical Illness Benefit?

- Rider benefit on Term Life Benefits
- A lump sum amount payable if the insured person is diagnosed to have suffered from defined critical illnesses
- Sum insured: 50% of Term Life Benefits up to HK$2,000,000
- CI (35):
  - 35 critical illnesses
  - Payable in addition to Term Life Benefits

How can Critical Illness benefit to your members?

- Providing immediate cash flow for choice of treatment
- Recovery without worry

Please contact your consultant for quotation details.

Help People Live Safer, More Secure Lives

** http://www.chp.gov.hk/en/data/4/10/27/117.html*

SPECIMEN

SUPPLEMENTARY CRITICAL ILLNESS BENEFIT RIDER

PART I – DEFINITION

a) The Term "Member" shall mean any person who is regular full-time active employee of the Policyholder in Hong Kong and has been eligible for coverage under the Basic Term Life Policy No. **GTL-** and has been accepted for coverage under this Rider.

b) DIAGNOSIS - shall mean the definitive diagnosis made by a Registered Specialist, as hereinafter defined, based upon such specific evidence, as referred to herein below in the definition of the particular Diseases concerned or in the absence of such specific evidence, based upon radiological, clinical, histological or laboratory evidence acceptance to the Company.

In the event of any doubt regarding the appropriateness of the diagnosis, the Company shall have the right to call for an examination, of either the Member or the evidence used in arriving at such diagnosis, by an independent acknowledged expert in the field of medicine concerned selected by the Company and the opinion of such expert as to such diagnosis shall be binding on both the Member and the Company.

c) REGISTERED SPECIALIST - shall mean any person who is qualified in western medicine and is registered as a medical practioner with the medical authority of the country to provide medical or surgical services and is a specialist in the respective Disease speciality discipline, but excluding a physician who is the Member himself, or the spouse or lineal relative of the Member.

d) DISEASES - shall mean diseases following the commencement date of this Rider or the date of reinstatement of this Rider, which is the later, and shall include the Diagnosis of no more than one such diseases as per the list of Critical Illness under coverage.

e) ACTIVITIES OF DAILY LIVING - For the purpose of this Supplementary Contract, activities of daily living shall have the following meanings :

- 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 and out of bed or chair without requiring the physical assistance of another person.
- Continence : The ability to voluntarily control bladder and bowel functions so as to be able 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.

PART II - BENEFITS

Subject to the terms and conditions set up in this Rider, benefit is payable only in respect of the first incidence of one of the specified Diseases, regardless of whether the earlier incidence occurred before the Member was covered or whether the Member was covered by the Company or another insurer. The Member while assured hereunder and prior to his sixty-fifth (65) birthday is confirmed upon diagnosis by a Registered Specialist and supported by acceptable medical evidence to be suffering from any of the Diseases, as defined above and listed below, and if the Member has survived for at least thirty (30) days after a diagnosis of any Disease as defined the Company will pay the Critical Illness Sum Assured as stated in this Assurance Schedule, provided that notice of such event and full particulars thereof shall be given in writing to the Company. The benefit provided by this Rider is payable only once regardless of the subsequent occurrence of the same or different condition.

List of Critical Illness under coverage :

1. **AIDS: HIV due to blood transfusion**
   Infection by any Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS) or other similar or related conditions or syndrome, provided that all of the following conditions are met:
   - The infection is due to a medically necessary blood transfusion received after commencement of the policy.
   - The institution which provided the transfusion admits liability.
   - The Insured is not a haemophiliac.

2. **AIDS: HIV by (medical) profession**
   Covers infection with the Human Immunodeficiency Virus (HIV) where it was aquired as a result of an accident while carrying out normal occupational duties. Seroconversion to HIV infection must occur within 6 months of the accident. Any accident giving rise to a potential claim must be reported within thirty days and be supported by a negative HIV antibody test taken immediately after the incident.

3. **Alzheimer's Disease before age 66**
   Clinically established diagnosis of Alzheimer's Disease (presenile dementia) before age 66 resulting in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or resulting in need of supervision and the permanent presence of care staff due to the disease. These conditions have to be medically documented for at least 3 months.

4. **Amyotrophic Lateral Sclerosis**
   Neurological deficit with persistent signs of involvement of the spinal nerves and the motor centres in the brain and spastic weakness and atrophy of the muscles of the extremities. The disease must be unequivocally diagnosed by a consultant neurologist holding such an appointment at an approved hospital and must result in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or must result in a permanent bedridden situation and inability to get up without outside assistance. These conditions have to be medically documented for at least 3 months.

5. **Angioplasty**
   A Limited Advance Payment benefit equal to 10% of the Sum Assured subject to a HK$100,000 maximum (or US$12,500 maximum if the relevant Supplementary Critical Illness Contract is issued in United State Dollar Currency) shall be paid if the Member actually undergoes balloon angioplasty, atherectomy or laser treatment to correct a narrowing (minimum of 70% stenosis) of 2 or more major coronary arteries and shows a history of physical activity/exercise limiting symptomatology. If the Member has more than one Critical Illness coverage of any type, the total payment shall in no case exceed the maximum amount given above.
   Such history shall consist of:
   - Symptoms which are sufficiently severe to indicate that the Member's future level of exercise tolerance would be restricted at a minimal level to prevent further episodes of chest pains.
   - A specialist medical opinion which defines the need to limit physical exercise so as to minimize moderate to severe anginal pain.

   Medical evidences shall include all of the following:
   - Full report from attending Cardiologist;
   - Evidence of significant and relevant ECG changes (ST segment depression of 2 millimetres or more); and
   - Angiographic evidence to confirm the location and degree of stenosis of 2 or more major coronary arteries.

   The Limited Advance Payment shall be deducted from the amount of this Supplementary Contract thereby reducing the amount of the Sum Assured for that Member.
   This benefit shall cease upon payment of one Limited Advance Payment.

6. **Aorta (Surgery of Aorta)**
   The actual undergoing of surgery for a chronic disease of the aorta needing excision and surgical replacement of the diseased aorta with a graft. For the purpose of this definition aorta shall mean the thoracic and abdominal aorta but not its branches.

7. **Apallic Syndrome**
   Universal necrosis of the brain cortex, with the brain stem remaining intact. The definite diagnosis must be confirmed by a consultant neurologist holding such an appointment at an approved hospital. The condition has to be medically documented for at least one month.

8. **Aplastic Anaemia**
Bone marrow failure diagnosed as aplastic anaemia resulting in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:
- blood product transfusion
- marrow stimulating agents
- immunosuppressive agents
- bone marrow transplantation

9. **Bacterial Meningitis**
Inflammation of the membranes of the brain or spinal cord, confirmed by definite diagnosis of a consultant neurologist holding such an appointment at an approved hospital. The inflammation must result in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or must result in a permanent bedridden situation and inability to get up without outside assistance. These conditions have to be medically documented for at least 3 months.

10. **Benign Brain Tumour**
Removal of a non-cancerous growth of tissue in the brain under general anaesthesia leading to a permanent neurological deficit or if inoperable also leading to a permanent neurological deficit. Specifically excluded are all cysts, granulomas, malformations in or of the arteries or veins of the brain, haematomas and tumours in the pituitary gland or spine.

11. **Blindness**
Total, permanent and irreversible loss of all sight in both eyes as a result of sickness or accident, confirmed by an ophthalmologist.

12. **Cancer**
A disease manifested by the presence of a malignant tumour characterised by the uncontrolled growth and spread of malignant cells, and the invasion of tissue. The diagnosis must be evidenced by definite histology. The term cancer also includes leukaemia and malignant disease of the lymphatic system such as Hodgkin's Disease. Excluded are:
- Any CIN stage (cervical intraepithelial neoplasia)
- Any pre-malignant tumour
- Any non-invasive cancer (cancer in situ)
- Prostate cancer stage 1 (T1a, 1b, 1c)
- Basal cell carcinoma and squamous cell carcinoma
- Malignant melanoma stage IA (T1a N0 M0)
- Any malignant tumour in the presence of any Human Immunodeficiency Virus.

13. **Cardiomyopathy**
Covers impairment of ventricular function resulting in physical impairment to the degree of at least class 4 of the New York Heart Association classification of cardiac impairment. These conditions have to be medically documented for at least 3 months. Cardiomyopathy directly related to alcohol misuse is excluded.

14. **Coma**
A state of unconsciousness with no reaction or response to external stimuli or internal needs persisting continuously, with the use of life support systems, for a period of at least 96 hours and resulting in permanent neurological deficit. Coma secondary to alcohol or drug misuse is not covered.

15. **Coronary Artery (Bypass) Surgery**
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 surgery must have been proven to be necessary by means of coronary angiography.
Excluded are:
- Angioplasty
- Any other intra-arterial procedures
- Key-hole surgery

16. **Deafness**
Total and irreversible loss of hearing in both ears as a result of sickness or accident. The diagnosis has to be confirmed by an ear, nose and throat specialist (ENT specialist) and proven by means of audiometry.

17. **Encephalitis**
Inflammation of the brain (cerebral hemisphere, brainstem or cerebellum) associated with viral or bacterial infections, the diagnosis of which is confirmed by a consultant neurologist holding such an appointment at an approved hospital. The disease must result in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or must result in a permanent bedridden situation and inability to get up without outside assistance. These conditions have to be medically documented for at least 3 months.

18. **End Stage Liver Disease**
End stage liver disease resulting in cirrhosis and evidenced by all of the following criteria:
- permanent jaundice
- ascites
- encephalopathy
- portal hypertension

Liver disease secondary to alcohol or drug misuse is excluded.

19. **Heart Valve Surgery**
Open heart valvuloplasty, valvulotomy or replacement of one or more heart valves. This includes surgery to the aortic, mitral, pulmonary or tricuspid valves for stenosis or incompetence or a combination of these factors.

20. **Hepatitis (Fulminant Viral Hepatitis)**
Submassive to massive necrosis of the liver caused by hepatitis leading precipitously to liver failure. The diagnostic criteria to be met are:
- a rapidly decreasing liver size
- necrosis involving entire lobules, leaving only a collapsed reticular framework (proved by histological finding)
- rapidly degenerating liver function tests
- deepening jaundice

Hepatitis B carriership or infection alone is not a condition which constitutes a liability of company.

21. **Loss of Limbs**
Total and irrecoverable severance of two or more limbs from above the elbow/wrist or knee/ankle joint as the result of an accident or of a medically required amputation.

22. **Loss of Speech**
Total and irreversible loss of the ability to speak due to physical injury or physical disease. The condition has to be medically documented by an otolaryngologist for at least 6 months.

23. **Lung: Chronic Lung Disease**
Severe and permanent impairment of respiratory function which has to be confirmed by a specialist and evidenced by all of the following criteria:
- persistent reduction in respiratory volume per second FEV1 to less than 1 litre (Tiffeneau respiratory test)
- persistent reduction in arterial oxygen tension (PaO2) below 55 mmHg
- permanent oxygen supply is necessary

24. **Major Burns**
Third degree burns covering at least 20% of the surface area of the Insured's body.

25. **Major Head Trauma**
Major trauma to the head with disturbance of the brain function, confirmed by definite diagnosis of a consultant neurologist holding such an appointment at an approved hospital. The disturbance must result in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or must result in a permanent bedridden situation and inability to get up without outside assistance. These conditions have to be medically documented for at least 3 months.

26. **Major Organ Transplantation**
The actual undergoing of a transplantation as the recipient of a heart, lung, liver, pancreas, small bowel, kidney or bone marrow.

27. **Multiple Sclerosis**
Unequivocal diagnosis of Multiple Sclerosis by a consultant neurologist holding such an appointment at an approved hospital. This must be evidenced by the typical clinical symptoms of demyelination and impairment of motor and sensory functions as well as by typical MRI findings.
For proving the diagnosis the Insured must **either** exhibit neurological abnormalities that have existed for a continuous period of at **least 6** months **or** must have had at least **two** clinically documented episodes at least one month apart **or** must have had at least **one** clinically documented episode **together** with characteristic findings in the cerebrospinal fluid **as well as** specific cerebral MRI lesions.

28. **Myocardial Infarction**
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:
- a history of typical chest pain
- new characteristic electrocardiogram changes
- elevation of infarction specific enzymes, Troponins or other biochemical markers

Excluded are:
- Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T
- Other acute Coronary Syndromes

29. **Muscular Dystrophy**
Confirmation of definite diagnosis of either Duchenne, Becker or Limb Girdle Muscular Dystrophy (all other types of Muscular Dystrophy are excluded) by a consultant neurologist holding such an appointment at an approved hospital. The diagnosis must be supported by muscle biopsy and CPK estimations and the disease must result in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or must result in a permanent bedridden situation and inability to get up without outside assistance. These conditions have to be medically documented for at least 3 months.

30. **Parkinson's Disease before age 66**
Unequivocal diagnosis of idiopathic or primary Parkinson's Disease (all other forms of Parkinsonism are excluded) before age 66 by a consultant neurologist holding such an appointment at an approved hospital. The disease must result in a permanent inability to perform independently three or more Activities of Daily Living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or must result in need of supervision and permanent presence of care staff due to the disease. These conditions have to be medically documented for at least 3 months.

31. **Paralysis**
Total and irreversible loss of use of two or more limbs through paralysis due to accident or sickness of
the spinal cord. These conditions have to be medically documented for at least 3 months.
Excluded is:
- Paralysis due to Guillain-Barré-Syndrome

32. **Primary Pulmonary Arterial Hypertension**
An increase in the blood pressure in the pulmonary arteries, caused by either an increase in pulmonary capillary pressure, increased pulmonary blood flow or increased pulmonary vascular resistance. The diagnosis has to be proved by cardiac catheteriziation showing a mean pulmonary artery pressure of at least 20 mmHg. Right ventricular hypertrophy, dilatation and signs of right heart failure have to be documented for at least 3 months.

33. **Renal Failure**
End stage renal disease presented 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.

34. **Stroke**
Any cerebrovascular incident producing neurological sequelae lasting more than 24 hours and including infarction of brain tissue, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by typical clinical symptoms and by CCT scan or MRI of the brain. Evidence of neurological deficit for at least 3 months has to be produced.
Excluded are:
- Transient ischemic attacks (TIA)
- Traumatic injury of the brain
- Neurological symptoms due to migraine
- Lacunar strokes without neurological deficit

35. **Systemic Lupus Erythematosus**
An autoimmune illness in which tissues and cells are damaged by deposition of pathologic autoantibodies and immune complexes. Of significant importance for the outcome is the involvement of the kidneys. The renal function of the life insured has to be impacted due to the SLE (it has to be classified as Class III to Class VI lupus nephritis according to the classification of results of renal biopsy by WHO). Other types of lupus, such as the discoid lupus erythematosus or those that only affect the blood and joints are excluded. Diagnosis has to be confirmed by the registered rheumatologist.
- WHO's classification of lupus nephritis:
- WHO I: normal glomeruli
- WHO II: pure mesangial alterations
- WHO III: focal segmental or focal proliferative glomerulonephritis
- WHO IV: diffuse proliferative glomerulonephritis
- WHO V: diffuse membranous glomerulonephritis
- WHO VI: advanced sclerosing glomerulonephritis

PART III - EXCLUSIONS

The insurance under this Supplementary Contract shall not cover any loss caused directly or indirectly, wholly or partly, by any one of the following occurrences:

1. Active, passive participation in war, declared or undeclared, civil war, revolution, riot, civil commotion, strike, insurrection or criminal activities.

2. An act or attempted act of self injury or suicide whether mentally sane or insane or whilst under the influence of alcohol or drugs other than those prescribed by a registered, qualified medical practitioner.

3. Engaging or taking part in professional sports or hazardous activities, including but not limited to martial arts, scuba diving, mountaineering or rock climbing, aviation of any kind other than as a passenger on a regularly scheduled passenger flight on a commercial aircraft or any form of racing other than on foot.

4. Pre-existing conditions. No benefit shall be payable in respect of any claim which results directly or indirectly from a condition for which the Member had previously received treatment or of which he was aware at the Member's Effective Date of this Rider Benefit.

5. Any Diseases as defined under Part (I)d with diagnosis confirmed prior or within three (3) months from the Member's Effective Date of this Rider Benefit.

6. Coronary Artery Surgery and/or Other Serious Coronary Artery Disease and/or angioplasty and other Invasive Treatment for Coronary Artery Disease if the Member had a diagnosis of "Myocardial Infarction" prior to the effective date of his coverage.

7. Any Critical Illness or performance of any covered surgery caused by any illness if it can be established that the Member sought medical advice or treatment for signs and symptoms which, in the opinion of the Company, had contributed directly or indirectly to the Critical Illness prior to the effective date of coverage.

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