

# Life Protection

Policy Addendum  
Dated 23 April 2007



# Life Protection

Please read this document and keep it in a safe place with your Life Protection Policy Document. It is important that you read this document in conjunction with your Policy Document and any other Policy Addenda or policy notices issued by The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809.

This Policy Addendum applies from 23 April 2007 and the improved conditions it provides are only effective on and from this date.

## **Note**

The improved conditions must be read subject to, and in conjunction with, your existing policy terms and conditions. Any pre-existing condition at the time this improvement is offered may be excluded from being eligible for payment under any improved conditions.

### **Important information**

This document is an agreement between you and The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809.

This document is issued by The Colonial Mutual Life Assurance Society Limited Level 7, 39 Martin Place, Sydney NSW 2000.

Feature/Benefit	Change	New Policy wording
<p><b>Definition of Occupation has been amended</b></p> <p>We now only consider your occupation just prior to disability regardless of whether you had been in that occupation for less than twelve months.</p>	<p>For the definition of Occupation that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Occupation, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Occupation</b></p> <p>Occupation means the full-time gainful occupation of the Life Insured immediately prior to Total and Permanent Disablement or Total Disability, as applicable.</p>
<p><b>The wording of the Guaranteed Insurability Option (Personal Events) has been amended</b></p> <p>There is no longer a limit of five cover increases. You can now increase your cover once per year up to expiry.</p> <p>If your policy was issued before 21 November 2005, this upgrade does not apply to your policy.</p>	<p>For the wording of the Guaranteed Insurability Option (Personal Events) that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The wording of the Guaranteed Insurability Option (Personal Events), which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p> <p>All other parts of the wording not referenced in the 'New Policy Wording' column continue to apply.</p>	<p><b>Guaranteed Insurability Option (Personal Events)</b></p> <p>...</p> <p><b>Premiums</b></p> <p>On the exercising of a right under this option, your Annual Premium will (whether or not the Level Premium Rate Option applies) be recalculated to take into account the increase in cover according to the premium rates current at the time and with regard to the age of the Life Insured at the time of the increase in cover.</p> <p>The premium we charge you for Guaranteed Insurability Option (Personal Events) will cease to be payable on the earlier of the Cover Expiry Date, if any, and the Policy Anniversary Date following the 45th birthday of the Life Insured.</p> <p><b>Restrictions</b></p> <p>The Life Care benefit and any Trauma Cover benefit can only be increased once every twelve months under this option.</p> <p>A Trauma Cover benefit cannot be increased under this option if:</p> <ul style="list-style-type: none"> <li>• the benefit exceeds \$2,000,000 or the increase would result in the benefit exceeding \$2,000,000</li> <li>• it was issued subject to special conditions or exclusions or the premium payable for the benefit is subject to a premium loading</li> <li>• a Life Care benefit does not apply under this Policy to the Life Insured for whom the Trauma Cover benefit applies</li> <li>• a death, trauma or disablement benefit has been paid or is payable by us under this or any other policy issued in respect of the Life Insured or</li> <li>• circumstances exist which, if the subject of a claim under this or any other policy issued in respect of the Life Insured, would result in a death, trauma or disablement benefit being payable by us for the Life Insured.</li> </ul> <p>The sum of all increases to the Trauma Cover benefit under this option cannot exceed the amount of the Trauma Cover benefit as at the date the benefit came into force</p> <p>...</p>

# Life Protection Policy Addendum

Feature/Benefit	Change	New Policy wording
<p><b>The wording of Trauma Cover has been amended</b></p> <p>There are three new trauma conditions under Trauma Cover</p> <ul style="list-style-type: none"> <li>– Advanced Diabetes</li> <li>– Cancer of the Vulva or Perineum</li> <li>– Multiple Sclerosis of limited extent (results in a partial benefit).</li> </ul>	<p>For the wording of Trauma Cover that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The wording of Trauma Cover, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p> <p>All other parts of the wording not referenced in the 'New Policy Wording' column continue to apply.</p>	<p><b>Trauma Cover</b></p> <p>The Trauma Cover benefit applies when the words 'Trauma Cover' appear under the 'Plan Benefits' section in the Policy Schedule. The Trauma Cover benefit cannot apply to a person if the Child Cover benefit applies to that person.</p> <p>Subject to the Qualifying Period, we will pay you the Trauma Cover benefit if you:</p> <ul style="list-style-type: none"> <li>• suffer from Loss of Independent Existence (as defined in this Policy Document) before the Trauma Cover benefit ceases to apply or</li> <li>• are found to have one of the other conditions listed below under 'Trauma Cover conditions' and as defined in this Policy Document before the earlier of the following dates: <ul style="list-style-type: none"> <li>– the Policy Anniversary Date preceding your 70th birthday</li> <li>– the date the Trauma Cover benefit ceases to apply.</li> </ul> </li> </ul> <p>The Trauma Cover benefit ceases to apply:</p> <ul style="list-style-type: none"> <li>• from the Policy Anniversary Date preceding the Life Insured's 80th birthday</li> <li>• from the Cover Expiry Date, if any</li> <li>• when this Policy terminates</li> </ul> <p>and, subject to the Trauma Cover Buy Back described in this Policy Document, the Trauma Cover benefit also ceases to apply:</p> <ul style="list-style-type: none"> <li>• once we have become liable to pay the Trauma Cover benefit for any condition other than Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent,</li> <li>• if the benefit reduces to less than \$10,000</li> </ul> <p>whichever happens first.</p>

Feature/Benefit	Change	New Policy wording
<p><b>The wording of Trauma Cover has been amended (continued)</b></p>		<p>If we become liable to pay the Trauma Cover benefit for Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent, the Trauma Cover benefit is reduced by the amount we have become liable to pay (including any Trauma Cover Loyalty Bonus Benefit). If, as a result of this reduction, the Trauma Cover benefit would be less than \$10,000 the Trauma Cover benefit will cease.</p> <p><b>Trauma Cover conditions</b></p> <p><b>Heart Disorders</b></p> <ul style="list-style-type: none"> <li>Heart Attack</li> <li>Out of Hospital Cardiac Arrest</li> <li>Coronary Artery Disease Requiring By-pass Surgery</li> <li>Coronary Artery Angioplasty</li> <li>Coronary Artery Angioplasty – Triple Vessel</li> <li>Repair and Replacement of a Heart Valve</li> <li>Surgery for Disease of the Aorta</li> <li>Cardiomyopathy</li> <li>Primary Pulmonary Hypertension*</li> <li>Open Heart Surgery</li> </ul> <p><b>Nervous System Disorders</b></p> <ul style="list-style-type: none"> <li>Stroke</li> <li>Major Head Trauma</li> <li>Motor Neurone Disease*</li> <li>Multiple Sclerosis*</li> <li>Multiple Sclerosis of limited extent</li> <li>Muscular Dystrophy*</li> <li>Paraplegia*</li> <li>Quadriplegia*</li> <li>Hemiplegia*</li> <li>Diplegia*</li> <li>Tetraplegia*</li> <li>Dementia and Alzheimer’s Disease*</li> <li>Coma</li> <li>Encephalitis*</li> <li>Parkinson’s Disease*</li> </ul>

Feature/Benefit	Change	New Policy wording
<p><b>The wording of Trauma Cover has been amended (continued)</b></p>		<p><b>Body Organ Disorders</b>            Cancer            Cancer of the Vulva or Perineum            Removal of Carcinoma in situ of the Breast            Benign Brain Tumour            Blindness            Chronic Kidney Failure            Major Organ or Bone Marrow Transplant*            Placement on a Waiting List for Major Organ Transplant            Severe Burns*            Loss of Speech*            Loss of Hearing*            Chronic Liver Disease*            Chronic Lung Disease*            Severe Rheumatoid Arthritis*</p> <p><b>Blood Disorders</b>            Occupationally Acquired HIV*            Medically Acquired HIV*            Aplastic Anaemia*            Advanced Diabetes</p> <p><b>Other Events</b>            Serious Injury*            Critical Care*            Loss of Limbs or Sight*            Loss of One Hand or One Foot            Loss of Independent Existence</p> <p>* Despite any other condition in this Policy, a Trauma Cover benefit is not payable in respect of the Trauma Cover Conditions marked with an asterisk unless the words 'TotalCover' appear under the relevant Life Insured's name in the Policy Schedule.</p> <p>...</p> <p><b>Partial payments</b>            The amount of the Trauma Cover benefit (excluding any Trauma Cover Loyalty Bonus Benefit) payable for any of the following:</p> <ul style="list-style-type: none"> <li>• the procedure that is Coronary Artery Angioplasty</li> <li>• Serious Injury</li> <li>• Critical Care</li> <li>• Removal of Carcinoma in situ of the Breast</li> <li>• Loss of One Hand or One Foot</li> <li>• Placement on a Waiting List for Major Organ Transplant</li> </ul>

Feature/Benefit	Change	New Policy wording
<p><b>The wording of Trauma Cover has been amended (continued)</b></p>		<p>is the greater of:</p> <ul style="list-style-type: none"> <li>• 10% of the Trauma Cover benefit (up to a maximum of \$25,000 for Coronary Artery Angioplasty) or</li> <li>• \$10,000.</li> </ul> <p>The amount of the Trauma Cover benefit (excluding any Trauma Cover Loyalty Bonus Benefit) payable for Multiple Sclerosis of limited extent is the lesser of:</p> <ul style="list-style-type: none"> <li>• 25% of the Trauma Cover benefit</li> <li>• \$50,000</li> </ul> <p>but will be no less than \$10,000.</p> <p>We will not pay the Trauma Cover benefit for the procedure that is Coronary Artery Angioplasty where the procedure occurs within six months after a prior procedure for which the Trauma Cover benefit was paid.</p> <p>We will not pay the Trauma Cover benefit for Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent on more than one occasion for a Life Insured under this Policy.</p>
<p><b>The wording of the Trauma Cover Buy Back Benefit has been amended</b></p> <p>The wording now makes reference to the three new trauma conditions under Trauma Cover</p>	<p>For the wording of the Trauma Cover Buy Back Benefit that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The wording of the Trauma Cover Buy Back Benefit, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p> <p>All other parts of the wording not referenced in the 'New Policy Wording' column continue to apply.</p>	<p><b>Trauma Cover Buy Back Benefit</b></p> <p>The Trauma Cover Buy Back Benefit applies if a claim for the Trauma Cover benefit is paid which results in a reduction of the benefit to less than \$10,000. If the Trauma Cover Buy Back Benefit applies then, twelve months following the date of payment of the Trauma Cover claim which resulted in the Trauma Cover benefit reducing to less than \$10,000, the Trauma Cover benefit will be reinstated to the amount which would have applied under the Policy had no Trauma Cover benefits ever been paid.</p> <p>The Trauma Cover Buy Back Benefit will not apply to a Life Insured if:</p> <ul style="list-style-type: none"> <li>• the Trauma Cover Buy Back Benefit previously applied to the Life Insured</li> <li>• a TPD Benefit or a benefit for Terminal illness has been paid for the Life Insured</li> <li>• only a partial payment was made under the original Trauma Cover in respect of the Life Insured or</li> </ul>

Feature/Benefit	Change	New Policy wording
<p><b>The wording of the Trauma Cover Buy Back Benefit has been amended (continued)</b></p>		<ul style="list-style-type: none"> <li>• under the original Trauma Cover, we paid a claim for Cardiomyopathy, Primary Pulmonary Hypertension, Motor Neurone Disease, Multiple Sclerosis, Dementia and Alzheimer’s Disease, Parkinson’s Disease, Chronic Kidney Failure, Chronic Liver Disease, Chronic Lung Disease, Occupationally or Medically Acquired HIV, Advanced Diabetes or Loss of Independent Existence in respect of the Life Insured.</li> </ul> <p>The Trauma Cover Buy Back Benefit will cease to apply:</p> <ul style="list-style-type: none"> <li>• from the Policy Anniversary Date preceding the Life Insured’s 70th birthday</li> <li>• from the Cover Expiry Date, if any,</li> <li>• when this Policy terminates</li> <li>• once we have become liable to pay the Trauma Cover benefit for any condition other than Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent</li> </ul> <p>whichever happens first.</p> <p>If we pay the reinstated Trauma Cover benefit for Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent the Trauma Cover benefit is reduced by the amount we have to pay. If, as a result of this reduction, the reinstated Trauma Cover benefit would be less than \$10,000 then the reinstated Trauma Cover benefit will cease.</p> <p>In respect of the reinstated Trauma Cover:</p> <ul style="list-style-type: none"> <li>• any exclusions, medical, occupational or pastime loadings which applied to the original cover will also apply to the reinstated Trauma Cover, and</li> <li>• the Guarantee Insurability Option (Personal Events ), Trauma Cover Loyalty Bonus Benefit, Trauma Cover Severe Hardship Booster Benefit will not apply.</li> </ul> <p>The Trauma Cover Buy Back Benefit only applies to Trauma Cover Benefits paid after 1 September 2006.</p>



Feature/Benefit	Change	New Policy wording
<p><b>The wording of the Trauma Cover Buy Back Benefit has been amended (continued)</b></p>		<p>We will not pay a claim under the reinstated Trauma Cover in respect of the Life Insured:</p> <ul style="list-style-type: none"> <li>• for any trauma condition that first occurred or is first diagnosed, or symptoms leading to the condition occurring or being diagnosed first become reasonably apparent, before the date of reinstatement of the reinstated Trauma Cover</li> <li>• for the same trauma condition as paid for under the original cover</li> <li>• for Chronic Liver Disease, Chronic Lung Disease, Chronic Kidney Failure, Loss of Speech, Major Organ or Bone Marrow Transplant, Placement on a Waiting List for Major Organ Transplant or Stroke if we paid for Cancer or Cancer of the Vulva or Perineum under the original cover and, in the opinion of a Medical Practitioner nominated by us, the condition for which you claim under the reinstated Trauma Cover is directly or indirectly related to, or is a complication of, or is a treatment for the Cancer or Cancer of the Vulva or Perineum for which we paid under the original cover</li> <li>• for any condition listed under Heart Disorders, Dementia and Alzheimer's Disease, Advanced Diabetes and Loss of Independent Existence, if we paid for Stroke or any condition listed under Heart Disorder in the original cover</li> </ul> <p>...</p>
<p><b>The wording of the Child Cover Option has been amended</b></p> <p>When a child insured under Child Cover reaches age 18, they are offered a Continuation Option which now extends to Trauma Cover.</p> <p>If your policy was issued before 21 November 2005, this upgrade does not apply to your policy.</p>	<p>For the wording of the Child Cover Option that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The wording of the Child Cover Option, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p> <p>All other parts of the wording not referenced in the 'New Policy Wording' column continue to apply.</p>	<p><b>Child Cover Option</b></p> <p>...</p> <p><b>Partial payments</b></p> <p>The amount of the Child Cover benefit (excluding any Child Cover Loyalty Bonus Benefit) payable for any of the following:</p> <ul style="list-style-type: none"> <li>• the procedure that is Coronary Artery Angioplasty</li> <li>• Serious Injury</li> <li>• Critical Care</li> <li>• Loss of One Hand or One Foot</li> <li>• Placement on a Waiting List for Major Organ Transplant</li> </ul> <p>is the greater of:</p> <ul style="list-style-type: none"> <li>• 10% of the Child Cover benefit</li> <li>• \$10,000.</li> </ul>

Feature/Benefit	Change	New Policy wording
<p><b>The wording of the Child Cover Option has been amended (continued)</b></p>		<p>We will not pay the Child Cover benefit for the procedure that is Coronary Artery Angioplasty where the procedure occurs within six months after a prior procedure for which the Child Cover benefit was paid.</p> <p>We will not pay the Child Cover benefit for Serious Injury, Critical Care, Loss of One Hand or One Foot or Placement on a Waiting List for Major Organ Transplant on more than one occasion for a Child Life Insured under this Policy.</p> <p>...</p> <p><b>Child Continuation Option</b></p> <p>If, within 30 days before the Child Cover Expiry Date, the Child Life Insured asks us in writing to provide death and trauma cover under a new individual policy on his or her life, we will issue such a policy without evidence of insurability provided that:</p> <ul style="list-style-type: none"> <li>• the cover which applies to the Child Life Insured under this policy ceases to apply from the Child Cover Expiry Date and no earlier</li> <li>• we receive the first premium payable under the new individual policy before the Child Cover Expiry Date</li> <li>• no benefit is, or is about to be, payable for the Child Life Insured under this Policy and no circumstances exist which, if the subject of a claim under this Policy, would result in a benefit being payable for the Child Life Insured under this Policy</li> <li>• this Policy is still in force</li> <li>• the premium payable in respect of the Child Life Insured's cover under this Policy is not overdue as at the Child Cover Expiry Date</li> <li>• our minimum policy issue requirements are met</li> <li>• our underwriting requirements for residency, occupation and pastimes are met and, if necessary, a non-smoking declaration is completed.</li> </ul> <p>The death and trauma cover issued under this continuation option will be issued:</p> <ul style="list-style-type: none"> <li>• under a new individual policy owned by the Child Life Insured that provides a death and trauma benefit no greater than the amount of the Child Cover benefit which applied to the Child Life Insured under this Policy on the day before the Child Cover Expiry Date</li> <li>• effective from the day after the Child Cover Expiry Date and no earlier</li> </ul> <p>...</p>

Feature/Benefit	Change	New Policy wording
<p><b>The wording of Total and Permanent Disability Cover (TPD Cover) has been amended</b></p> <p>The minimum sum insured for TPD Cover has been reduced from \$25,000 to \$10,000. This means your TPD cover will now end when it reduces to less than \$10,000 rather than \$25,000.</p>	<p>For the wording of Total and Permanent Disability Cover (TPD Cover) that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>That part of the wording of Total and Permanent Disability Cover (TPD Cover), which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p> <p>All other parts of the wording not referenced in the 'New Policy Wording' column continue to apply.</p>	<p><b>Total and Permanent Disability Cover (TPD Cover)</b></p> <p>The TPD Cover benefit applies when the words 'Total and Permanent Disability Cover' appear under the 'Plan Benefits' section in the Policy Schedule.</p> <p>Subject to the conditions of this Policy, we will pay you the TPD Cover benefit if, while the TPD Cover benefit applies, the Life Insured suffers Total and Permanent Disablement.</p> <p>The TPD Cover benefit ceases to apply:</p> <ul style="list-style-type: none"> <li>• on payment of the benefit</li> <li>• if the benefit reduces to less than \$10,000</li> <li>• from the Policy Anniversary Date preceding the Life Insured's 80th birthday</li> <li>• from the Cover Expiry Date, if any</li> <li>• when this Policy terminates</li> </ul> <p>whichever happens first</p> <p>...</p>
<p><b>Definition of Coronary Artery Angioplasty – Triple Vessel has been amended</b></p> <p>The requirement for angiographic evidence of at least 50% obstruction of each of the arteries treated has been removed.</p>	<p>For the definition of Coronary Artery Angioplasty – Triple Vessel that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Coronary Artery Angioplasty – Triple Vessel, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Coronary Artery Angioplasty – Triple Vessel</b></p> <p>Undergoing in the same procedure coronary artery angioplasty to three or more coronary arteries, where the procedure is considered necessary by a cardiologist to treat coronary artery disease.</p>
<p><b>Definition of Major Head Trauma has been amended</b></p> <p>The definition has been broadened by adding an alternative measure based on the ability to perform Activities of Daily Living (ADL).</p>	<p>For the definition of Major Head Trauma that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Major Head Trauma, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Major Head Trauma</b></p> <p>Injury to the head resulting in neurological deficit causing either:</p> <ul style="list-style-type: none"> <li>• a permanent loss of at least 25% whole person function (as defined in the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment'); or</li> <li>• the permanent and irreversible inability to perform without the assistance of another person any one of the 'Activities of Daily Living' (as defined under Loss of Independent Existence); as certified by a consultant neurologist.</li> </ul>

Feature/Benefit	Change	New Policy wording
<p><b>Definition of Multiple Sclerosis has been amended</b></p> <p>The requirement for permanent loss of at least 25% whole body function has been removed.</p>	<p>For the definition of Multiple Sclerosis that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Multiple Sclerosis, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Multiple Sclerosis</b></p> <p>The unequivocal diagnosis of Multiple Sclerosis as confirmed by a consultant neurologist and characterised by demyelination in the brain and spinal cord evidenced by Magnetic Resonance Imaging or other investigations acceptable to us. There must have been more than one episode of well-defined neurological deficit with persisting neurological abnormalities.</p>
<p><b>Definition of Multiple Sclerosis of limited extent has been added</b></p>	<p>The definition of Multiple Sclerosis of limited extent did not apply to you before 23 April 2007.</p>	<p><b>Multiple Sclerosis of limited extent</b></p> <p>The unequivocal diagnosis of Multiple Sclerosis as defined above but without the existence of persisting neurological abnormalities.</p>
<p><b>Definition of Coma has been amended</b></p> <p>The requirement for continuous assisted ventilation to maintain life has been reduced from 96 to 72 consecutive hours.</p>	<p>For the definition of Coma that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Coma, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Coma</b></p> <p>A state of total unconsciousness with no reaction to external stimuli or internal needs, requiring continuous assisted ventilation to maintain life for at least 72 consecutive hours.</p>
<p><b>Definition of Encephalitis has been amended</b></p> <p>The definition has been broadened by adding an alternative measure based on the ability to perform activities of Daily Living (ADL).</p>	<p>For the definition of Encephalitis that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Encephalitis, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Encephalitis</b></p> <p>The severe inflammation of brain substance which results in significant neurological sequelae causing either:</p> <ul style="list-style-type: none"> <li>• a permanent loss of at least 25% whole person function (as defined in the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment'); or</li> <li>• the permanent and irreversible inability to perform without the assistance of another person any one of the 'Activities of Daily Living' (as defined under Loss of Independent Existence);</li> </ul> <p>as certified by a consultant neurologist.</p> <p>Encephalitis as a result of HIV infection is excluded.</p>
<p><b>Definition of Cancer of the Vulva or Perineum has been added</b></p>	<p>The definition of Cancer of the Vulva or Perineum did not apply to you before 23 April 2007.</p>	<p><b>Cancer of the Vulva or Perineum</b></p> <p>Any lesion described by a histopathologist as carcinoma of the vulva or perineum that meets the criteria of either Stage 3 or 4 (tumour of any size with contiguous invasion of local organs) of the 1988 International Federation of Gynaecology and Obstetrics (FIGO) surgical staging system.</p>

Feature/Benefit	Change	New Policy wording
<p><b>Definition of Chronic Liver Disease has been amended</b></p> <p>The exclusion for disease related to alcohol abuse or intravenous drug use has been removed.</p>	<p>For the definition of Chronic Liver Disease that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Chronic Liver Disease, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Chronic Liver Disease</b> Permanent liver failure resulting in permanent jaundice, ascites and/or encephalopathy.</p>
<p><b>Definition of Advanced Diabetes has been added</b></p>	<p>The definition of Advanced Diabetes did not apply to you before 23 April 2007.</p>	<p><b>Advanced Diabetes</b> Severe diabetes mellitus (either Insulin or Non-Insulin dependent) as certified by a consultant endocrinologist and resulting in at least two of the following criteria:</p> <ul style="list-style-type: none"> <li>• Severe Diabetic Retinopathy resulting in visual acuity uncorrected and corrected of 6/36 or worse in both eyes</li> <li>• Severe Diabetic Neuropathy causing motor and/or autonomic impairment</li> <li>• Severe Diabetic Nephropathy causing chronic irreversible renal impairment (as measured by a corrected creatinine clearance below the laboratory/ies measured normal range)</li> <li>• Diabetic Gangrene leading to surgical intervention</li> </ul> <p>Diabetes Complication (as defined below) is excluded.</p> <p><b>Diabetes Complication</b> means Diagnosis of Type 1 Insulin dependent diabetes mellitus as certified by a consultant endocrinologist and resulting in at least two of the following criteria:</p> <ul style="list-style-type: none"> <li>• urinary protein excretion of more than 300mg per day</li> <li>• diabetic retinopathy with a minimum severity of at least exudates and/or dot-blot haemorrhages</li> <li>• persistent sensory neuropathy.</li> </ul>

Feature/Benefit	Change	New Policy wording
<p><b>Definition of Benign Brain Tumour has been amended</b></p> <p>The definition now refers to the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment' with respect to describing permanent 25% impairment of whole person function.</p>	<p>For the definition of Benign Brain Tumour that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Benign Brain Tumour, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Benign Brain Tumour</b></p> <p>A non-cancerous tumour in the brain giving rise to characteristic symptoms of increased intracranial pressure such as papilloedema, mental symptoms, seizures and sensory impairment as confirmed by a Medical Practitioner who is a consultant neurologist. The tumour must result in permanent neurological deficit:</p> <ul style="list-style-type: none"> <li>causing at least a permanent 25% impairment of whole person function or</li> <li>requiring cranial surgery for its removal.</li> </ul> <p>The presence of the underlying tumours 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, and tumours in the pituitary gland or spine are excluded.</p>
<p><b>Definition of Blindness has been amended</b></p> <p>The definition now articulates who must certify the permanent loss of sight.</p>	<p>For the definition of Blindness that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Blindness, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Blindness</b></p> <p>The permanent loss of sight in both eyes, whether aided or unaided, due to Sickness or Injury to the extent that visual acuity is 6/60 or less in both eyes or to the extent that the visual field is reduced to 20 degrees or less of arc, as certified by an ophthalmologist.</p>
<p><b>Definition of Motor Neurone Disease has been amended</b></p>	<p>For the definition of Motor Neurone Disease that applied to you before 23 April 2007, please refer to your Policy Document.</p> <p>The definition of Motor Neurone Disease, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.</p>	<p><b>Motor Neurone Disease</b></p> <p>Motor Neurone Disease diagnosed by a consultant neurologist.</p>







