Sagicor

overview

Modern life has made us particularly susceptible to certain illnesses whilst at the same time modern medicine has increased the chances of our surviving these illnesses. Ultra Lifeline is an entirely new kind of product designed to protect you and your family from the additional financial demands which these serious illnesses bring with them.

The Ultra Lifeline Plan is an equity-linked insurance plan available to anyone between the ages of 20 and 60, which provides a benefit on death or upon first diagnosis of one of the conditions listed in the "definitions" below.

Additional Product Details

products benefits

The minimum sum insured is 2M.

The maximum sum insured is $35 million per life insured.

1. **Different premium rates apply for each option.**
The lifeline benefit is payable on first diagnosis of any of the Lifeline Conditions, provided that the diagnosis is not made within 3 months of the issue date. In this circumstance, the benefit is restricted to a return of all basic premiums paid. Furthermore, claims must be made no later than 6 months after diagnosis. If any Lifeline benefit or death benefit is paid, then the policy terminates and no further benefit shall be payable. If no claim has been made by age 75, or the 20th policy anniversary is later, the Lifeline benefit no longer applies.

2. **Automatic Inflation Linking**
You may choose at the outset to have the basic sum insured increased automatically on each plan anniversary by a rate equivalent to the annual inflation rate, subject to a minimum increase of 5% and a maximum increase of 20%. These increases are not subject to any medical evidence at the time of the increases. The basic premium is increased in accordance with the increase in the basic sum insured based on your attained age at the time of the increase. The last increase takes place on the policy anniversary at which you are age 60 at your nearest birthday. **Automatic inflation linking maintains the value of your life insurance cover in real terms.**

At each plan anniversary, you also have the option to increase the regular additional premium. Taking advantage of this facility means that all the benefits of your plan are maintained in real terms.

3. **Other Changes in the Basic Sum Insured**
You may apply for any other change in the basic sum insured to respond to any specific need. This means that you can increase the amount of coverage by more than that allowed for by automatic inflation linking or you can decrease the amount of coverage, thereby channelling more of your premium into savings as your circumstances change in the future.

Any ad hoc increase of this nature is subject to satisfactory evidence of insurability. Overall minimum and maximum limits in respect of the size of the basic sum insured may apply from time to time and are available upon request from the company. A transaction fee, determined by the company from time to time, is taken by cancelling units in the interest fund on exercising an ad hoc change of this nature. This transaction fee does not apply if you choose automatic inflation linking.

The basic premium is increased or decreased in accordance with the increase or decrease in the basic sum insured based on your attained age at the time of the change.

4. **Periodic Policy Reviews**
Periodic policy reviews take place to ensure that the fund value can continue to maintain the benefits provided. These reviews may necessitate either an increase in basic premium or a decrease in the basic sum insured or some combination of both.

5. **Non-Payment of Premiums**
Thirty (30) days of grace are allowed for the payment of any premium from its due date. In the event that premiums are not received within this period, the basic sum insured remains payable provided that the value of the units in the interest fund is sufficient to cover the monthly charges. When the cash value is no longer sufficient to cover these deductions, your plan lapses and the value of any residual units in any other of the Sagicor Segregated Funds will be encashed.

Additional Benefits

You may add to your plan any of the following additional benefits (riders) for a small extra premium:

- Accidental death and dismemberment,
- Total disability waiver of premiums.
- Supplemental Term

The following are not covered:

An abnormality seen on brain or other scans without definite related clinical symptoms.
Neurological signs occurring without symptomatic abnormality, e.g. brisk reflexes without other symptoms.
Symptoms of psychological or psychiatric origin
Traumatic head injury secondary to alcohol or drug abuse.

definitions

Alzheimer's Disease

Means a definitive clinical diagnosis by a specialist of Alzheimer's Disease, which is a progressive degenerative disease of the brain. The insured must exhibit loss of intellectual capacity involving impairment of memory and judgement, which results in a significant reduction in mental and social functioning, as to require continuous daily supervision. All other dementing organic brain disorders and psychiatric illnesses are specifically excluded.

Angioplasty (to two or more coronary arteries)

Means the undergoing of a cardiac catherization procedure on the advice of a Consultant Cardiologist to correct a narrowing or blockage of two or more coronary arteries using balloon angioplasty and involving the use of transluminal coronary catheters to correct significant stenosis of at least 50% diameter narrowing. Angiographic evidence to support the necessity for the above operation will be required.

Aorta Graft Surgery

Means 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. 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.

Aplastic Anaemia

Means a definite diagnosis of a chronic persistent bone marrow failure, confirmed by biopsy, which results in anaemia, neutropenia and thrombocytopenia requiring blood product transfusion, and treatment with at least one of the following: marrow stimulating agents; immunosuppressive agents; bone marrow transplant. The diagnosis of aplastic anaemia must be made by a specialist.

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

- Regular blood product transfusion
- Marrow stimulating agents
- Immunosuppressive agents
- Bone marrow transplantation

Bacterial Meningitis

Means 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 (bathing, dressing, toileting, bladder and bowel continence, transferring, feeding) 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.

Exclusion: No benefit will be payable under this condition for viral meningitis.

Benign Brain Tumour

Means a tumour arising from the brain or meninges. The histologic nature of the tumour must be confirmed by examination of tissue (biopsy or surgical excision). Tumours of the bony cranium and pituitary micro-adenomas (less than 10 mm in diameter) are excluded.

Blindness

Means permanent loss of sight in both eyes, as confirmed by a licensed and practicing Ophthalmologist. The corrected visual acuity must be worse than 20/200 in both eyes, or the field of vision must be less than 20 degrees in both eyes. Blindness caused from diagnosed and untreated glaucoma is specifically excluded.

Cancer

Means the diagnosis of a malignancy, which is characterized by the uncontrolled growth of cancer cells with invasion of tissue, diagnosed not earlier than 90 days after the date of issue of this policy, or, in the case of reinstatement of the policy, 90 days after the date of the Certificate of Reinstatement.

The following conditions are excluded:

a) Early prostate cancer, diagnosed as T1A NO MO and T1B NO MO or equivalent staging
b) Non-invasive cancer in situ
c) Pre-malignant lesions, benign tumours or polyps
d) Any tumour in the presence of any Human Immunodeficiency Virus (HIV)
e) Any skin cancer other than invasive malignant melanoma greater than 0.75mm
f) Hydatidiform Mole (Gestational Trophoblastic Disease)

Coma

Means a state of unconsciousness with no reaction to external stimuli or response to internal needs for a continuous period of four days. A coma which results directly from alcohol or drug use is excluded.

Coronary Artery Bypass Surgery

Means the undergoing of heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts. The surgery must have been recommended by a licensed and practicing Cardiologist. Non-surgical techniques such as balloon angioplasty, laser embolectomy or other non-bypass techniques are excluded.

Deafness

Means the permanent loss of hearing in both ears with an auditory threshold of more than 90 decibels, as confirmed by a licensed and practicing Otolaryngologist.

Fulminant Viral Hepatitis

Means 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:

- Regular blood product transfusion

- Marrow stimulating agents
- Immunosuppressive agents
- Bone marrow transplantation
- A rapidly decreasing liver size as confirmed by abdominal ultrasound; and
- Necrosis involving entire lobules, leaving only a collapsed reticular framework; and
- Rapidly deteriorating liver functions tests; and
- Deepening jaundice.

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

Heart Attack

Means the death of a portion of heart muscle as a result of inadequate blood supply, as evidenced by a) new electrocardiographic (ECG) changes indicative of a myocardial infarction, and by b) the elevation of cardiac biochemical markers to levels considered diagnostic for infarction. Heart attack during coronary angioplasty is covered provided that there are diagnostic changes of new Q wave infarction on the ECG in addition to elevation of cardiac markers.

Exclusions: Heart attack does not include an incidental finding of ECG changes suggesting a prior myocardial infarction, in the absence of a corroborating event. Lesser acute coronary syndromes including unstable angina and acute coronary insufficiency are specifically excluded.

Heart Valve Replacement

Means the undergoing of surgery to replace a malfunctioning heart valve with either a natural or mechanical replacement valve. The repair of an existing heart valve is specifically excluded.

Kidney Failure

Means end stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular haemodialysis, peritoneal dialysis or renal transplantation is initiated.

Loss of Limbs

Means the irreversible severance of two or more limbs from above the wrist or ankle joint as the result of an accident or medically required amputation.

Loss of speech

Means the total and irreversible loss of the ability to speak as the result of physical injury or disease which must be established for a continuous period of at least 180 days. All psychiatric related causes are specifically excluded.

Major Burns

Means third degree burns covering at least 20% of the body surface area with survival for at least 30 days.

Major Organ Transplant

Means the undergoing of surgery, as a recipient by transplant of any of the following organs or tissues: heart, liver, lung, kidney or bone marrow.