



LIFEONE[®]

WITH OPTIONAL
CRITICAL ILLNESS

Policy Wording

Together, all the way.



LifeOne® Policy Wording

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LIFEONE® COVER



0800 900 047



www.cigna.co.nz



contactus.nz@cigna.com



1. Introducing your Policy

This Life Insurance Policy pays you a lump sum on the death of the Life Insured or diagnosis of the Life Insured's Terminal Illness.

If you have our Critical Illness Benefit the Policy pays you a lump sum if the Life Insured is diagnosed with one of the listed conditions described in the Optional Critical Illness Benefit section.

The Policy is underwritten by Cigna Life Insurance New Zealand Limited (Cigna) who will be responsible for all claims and administration relating to this Policy.

As the Policy Owner it is your responsibility to arrange payment of the premiums from the Premium Start Date and as they become due.

All mail will be sent to the most recent address that we hold for you. If you change your address, it is your responsibility to notify us of your new address so we can continue to send you important information about your Policy.

Please read all your policy documents including your Policy Summary, this document and your application form carefully. These documents describe the terms and conditions that apply to your Policy and form the basis of the contract between you and Cigna. Meanings of important words and terms are given in Section 7. If you have any questions, please contact us.

We offer a 30 day Free Look Period so you have time to make sure you are happy with your insurance. If for any reason you want to cancel this Policy, please call our Customer Services team. Any premiums that have been paid will be refunded and we will confirm in writing that the Policy has been cancelled. If you cancel outside this 30 day period, there will be no refund of premiums.

All payments made in respect of this Policy are in New Zealand currency.

This Policy does not have any surrender or cash value.

Your duty to be truthful

We rely on the information you and the Life Insured give us to provide this cover for you and pay any claims.

If you haven't given us all the information we ask for or any other Material Information we may decline your claim, cancel your Policy from the Cover Start Date, and/or retain all or some of your Premiums. We may also alter the terms of the Policy by adding endorsements or exclusions to it, which will apply from the Cover Start Date.

We may decline your claim and/or cancel your Policy if you give us false or incorrect information to support a claim.

2. What you're covered for

Cigna's Insurance Promise

Cigna will pay you the benefits shown on the Policy Summary and as described here, providing the terms and conditions are met and the premiums are up to date.

Life Benefit

We will pay the current Life Cover Amount to you if the Life Insured dies.

Advanced Funeral Benefit

If the Life Insured dies, we will pay an Advanced Funeral Benefit on receipt of evidence of the Life Insured's death. The amount payable will be the lesser of:

- \$15,000; or
- 5% of the current Life Cover Amount.

Payment of this benefit will reduce the current Life Cover Amount by the amount paid.

If the Life Benefit claim is declined after this Advanced Funeral Benefit is paid, we will have the right to recover any amount paid.

We will only make one payment of the Advanced Funeral Benefit for the Life Insured under all life insurance policies issued by Cigna in respect of the Life Insured.

Terminal Illness Benefit

If the Life Insured is diagnosed with a Terminal Illness, we will pay you the current Life Cover Amount, up to a maximum of \$500,000.

If we pay a Terminal Illness Benefit equal to the current Life Cover Amount, the Policy will end and no further premiums will be payable.

If the Terminal Illness Benefit paid is less than the current Life Cover Amount, the Life Cover Amount will be reduced by the amount paid. The remaining Life Cover Amount will be payable on the death of the Life Insured. Premiums for the remaining Life Cover Amount will be adjusted to reflect the reduced cover.

Special Events Increase Benefit

This benefit guarantees that you can apply to increase the Life Cover Amount for specified events, without having to provide further health information.

You can do this providing that:

- the Life Insured is aged under 55 and is residing in New Zealand or Australia on the date of the event; and
- at the time you apply you have not lodged a claim under the Policy and neither you or the Life Insured are aware, or should be aware, of a potential claim under the Policy; and
- the Policy was not issued with an increased premium because of the Life Insured's health, medical history, occupation or leisure activities.

If the Policy was issued with an exclusion, the same exclusion(s) will apply to any increases applied for under this benefit.

You can apply to increase the Life Cover Amount under this benefit if the Life Insured:

- gets married or enters a civil union
- takes out a loan necessary to purchase a property, including bare land, that will be used for the purposes of the Life Insured's primary residence. In this event the maximum increase (as specified below) will be further limited to the amount of the loan.

- has a child (by birth or legal adoption)
- has a Dependent Child who starts their first course of full-time tertiary study.

An application to increase the Life Cover Amount must be made within 90 days of the event.

We'll need you to provide evidence, satisfactory to us, to confirm the details of the event and the date it occurred. You can apply to increase the Life Cover Amount each time one of the events listed happens, subject to the following:

- each increase made under this benefit is limited to a maximum of 25% of the original Life Cover Amount; and
- the total of all increases made under this benefit during the term of this Policy may not exceed \$200,000; and
- taking out these increases may not increase the Life Cover Amount by more than 50% of the original Life Cover Amount.

There must be a period of at least 12 months between successful applications, even if more than one event occurs during that period.

Each time a Special Events Increase Benefit is accepted, the premium will increase to reflect the increased Life Cover Amount and will be based on the Life Insured's current age. The increased cover applies from the date when we confirm the new Life Cover Amount to you, subject to payment of the additional premium.

An increase will be invalid if it is accepted and we later become aware that you or the Life Insured knew at the time of the application for the increase that there was a potential claim under the Policy.

Optional Critical Illness Benefit

This benefit only applies if there is a Critical Illness Benefit shown on the Policy Summary.

If the Life Insured suffers one of the following conditions, for the first time, after the Cover Start Date and before the Anniversary Date after their 65th birthday, we will pay you the Critical Illness Cover Amount.

Here is a list of conditions covered by the Critical Illness Benefit:

- Cancer
- Early Stage Cancer
- Stroke
- Heart Attack
- Open Coronary Artery Bypass Surgery
- Coronary Artery Angioplasty
- Paralysis
- Third Degree Burns.

Except where the condition is caused by Accidental Injury, there is no cover under the Critical Illness Benefit for conditions or symptoms of conditions which existed or first occurred (whether diagnosed or not) within 3 months after the later of:

- the Cover Start Date
- any increase to the Critical Illness Cover Amount (in respect of the increased portion only)
- the most recent date this Policy was reinstated.

The Life Insured must survive at least 14 days after the event causing the above condition. If the Life Insured is on a life support system for more than 3 days after the event, then the required survival period will extend by one day for each day (beyond 3 days) that the Life Insured remains on life support.

The amount we will pay under the Critical Illness Benefit will be the Critical Illness Cover Amount shown on your latest Policy Summary, unless the claim is in respect of:

- Coronary Artery Angioplasty – the payment will be limited to the lesser of 20% of the Critical Illness Cover Amount or \$20,000
- Early Stage Cancer (with the exception of Early Stage Chronic Lymphocytic Leukaemia) – the payment will be limited to the lesser of 10% of the Critical Illness Cover Amount or \$20,000

- Early Stage Chronic Lymphocytic Leukaemia – the payment will be limited to the lesser of 20% of the Critical Illness Cover Amount or \$20,000.

We will pay a Critical Illness Benefit only once for Coronary Artery Angioplasty.

An Early Stage Cancer that is the same or similar to, related to, or directly or indirectly caused by an Early Stage Cancer for which a Critical Illness Benefit has previously been paid will not be covered.

Payment of this benefit will reduce the current Life Cover Amount and the Critical Illness Cover Amount by the amount paid. Premiums for the remaining Life Cover Amount and any remaining Critical Illness Cover Amount will be adjusted to reflect the reduced cover. The Critical Illness Benefit will end when the Critical Illness Cover Amount has reduced to zero.

Cover under the Critical Illness Benefit will stop on the Anniversary Date following the Life Insured's 65th birthday and no premiums will be payable for this benefit after this date.

3. What you're not covered for

We will not pay any benefit under this Policy if:

- the claim is due, directly or indirectly, to War or any act of War, invasion, Terrorism or any acts of Terrorism, act of foreign enemy, hostilities, strike, riot and/or civil commotion, civil War, rebellion, revolution, insurrection, military or usurped power,
- you or the Life Insured did not completely and truthfully answer the questions asked when the Policy was issued, increased or reinstated. We may cancel the Policy from the Cover Start Date and keep any premiums paid,
- you or the Life Insured failed to provide us with any Material Information before the Policy was issued, increased or reinstated. We may cancel the Policy from the Cover Start Date and keep any premiums paid.

If, because of any of the above exclusions, we do not pay a Life Benefit claim, then we will not pay any claim relating to an increase made under the Special Events Increase Benefit.

We will not pay any claim for the Life Benefit, the Advanced Funeral Benefit or the Terminal Illness Benefit if the Life Insured's death or Terminal Illness is caused or contributed to, directly or indirectly, by suicide, attempted suicide or intentional self-injury, whether sane or insane, within 13 months of the Cover Start Date or, from the date your Policy was reinstated after being cancelled.

If the Life Cover Amount is increased under the Special Events Increase Benefit, and the Life Insured dies or becomes terminally ill within 6 months of the Cover Start Date of the increase, we will only pay the increased Life Cover Amount if the Life Insured's death or Terminal Illness is due to an Accidental Injury.

If the Life Cover Amount is increased within 13 months prior to the Life Insured's death from suicide, attempted suicide or intentional self-injury, whether sane or insane, we will only pay the Life Cover Amount that applied immediately before the increase.

We will not pay any benefit under the Critical Illness Benefit if the claimed condition is caused or contributed to, directly or indirectly, by:

- attempted suicide, intentional self-injury, whether sane or insane
- an unlawful act by you or the Life Insured
- alcohol or drugs taken by the Life Insured (unless prescribed and taken as prescribed by a registered medical practitioner)
- driving a motor vehicle with a blood alcohol level in excess of the minimum legal limit.

4. Changing your cover

It's important to review your insurance regularly to make sure you have the right amount of cover you need.

You can apply to change your Life or Critical Illness Cover Amounts and how you pay your premiums at any time, simply contact us to discuss your options.

The terms and conditions for your additional cover may differ from those for your existing cover so we'll make sure you know about any changes.

Your original Life Cover Amount and/or Critical Illness Cover Amount will continue with your original terms and conditions, unless Material Information was not provided or was misrepresented on the earlier application(s).

Cancelling your Policy

You can cancel your Policy any time. There is no cash value for this Policy if you cancel it unless you cancel during our 30 day Free Look Period, then we'll refund any premiums paid.

Changing the Policy Owner

You can transfer Policy ownership at any time, by contacting us. We will need to register the transfer for it to be legally recognised.

Reinstating your cover

You can apply to reinstate your cover if your Policy has been cancelled because of unpaid premiums.

You may need to provide us with information about the Life Insured's health and lifestyle and reinstatement will be at Cigna's discretion. The terms applying to the reinstated cover may be different to that applied before it was cancelled. We'll give you a new Policy Summary when your Policy is reinstated.

5. What you can expect from us

Guaranteed renewal of your cover

We will renew this Policy each year on the Anniversary Date and cover will continue if you do not cancel the Policy and premiums continue to be paid.

Premium adjustments

Your initial premium payable is shown in your Policy Summary and is based on the Life Cover Amount and Critical Illness Cover Amount.

Your premiums will be adjusted on each Anniversary Date as you get older to reflect your current age and cover amounts.

We will advise you in writing before your Anniversary Date of any changes to your premium payable for the coming year.

We may review and change the premium rates for all Cigna LifeOne policies. We will write to you at least 30 days before any changes happen.

Inflation adjustments

To help keep your cover up to date, we will offer you a yearly increase in the current Life Cover Amount and Critical Illness Cover Amount, up to 10%, on each Anniversary Date. The percentage increase offered will be based on the most recent 12 month increase in the Consumer Price Index (CPI).

The first indexation offer will be made on the 1st Anniversary Date and yearly from then on.

You don't have to accept an increase but no further increases will be offered once any of the following happens:

- you have declined 3 successive offers
- an offer to increase will lead to the total Life Cover Amount under the Policy exceeding \$1,000,000

- we have been notified of a possible Life or Terminal Illness or Critical Illness claim under this Policy
- the Anniversary Date after the Life Insured's 65th birthday has been reached.

Increases of the Critical Illness Benefit Cover Amount will not be offered once the Anniversary Date after the Life Insured's 60th birthday has been reached.

When will your Policy end?

We will stop the Policy when any of the following happens:

- if the premiums are unpaid for 3 months, cover will end on the date the last premium was paid up to
- we pay a Terminal Illness benefit equal to the Life Cover Amount
- we pay a Critical Illness Benefit equal to the Life Cover Amount
- we pay out the full Life Cover Amount
- you ask us to cancel your Policy.

6. How to make a claim

If you need to make a claim, contact us as soon as possible and we'll guide you through the process. You'll need to complete a claim form and return it to us together with any information we ask for to assess your claim. Any medical information we need to support your claim must be:

- provided by appropriately qualified medical practitioners registered in New Zealand or Australia (or any other country approved by us)
- paid for by you.

If we need the Life Insured to have any other examinations or tests to confirm that the Life Insured is suffering a Terminal Illness or a Critical Illness Benefit condition these costs will be met by us.

7. Some terms defined

Accidental Injury means bodily injury, occurring after the Cover Start Date, which occurs solely, directly and independently of any other cause by violent, unexpected, external and visible means.

Anniversary Date means the date 12 months after the Premium Start Date and the same date every year after that.

Cancer means the uncontrolled growth and spread of malignant cells and the invasion and destruction of tissue for which major interventionist therapy including surgery, radiotherapy, chemotherapy, biological response modifiers or any other major treatment is considered medically necessary or the tumour is sufficiently advanced such that major interventionist therapy is no longer recommended.

The following cancers are specifically excluded:

- all cancers which are histologically described as premalignant or Carcinoma in Situ or cervical intraepithelial neoplasia, unless it results directly in the removal of the entire organ. The procedure must be performed specifically to arrest the spread of malignancy and be medically considered to be the necessary and appropriate treatment.
- all skin cancers unless:
 - there is evidence of metastasis or
 - the tumour is a malignant melanoma of Clark Level 3 and above or
 - the tumour is a malignant melanoma with invasion greater than 1.5mm maximum thickness as determined by histological examination using the Breslow method or
 - the tumour is a malignant melanoma showing signs of ulceration as determined by histological examination.
- Prostate cancers diagnosed as TNM classification T1 with a Gleason score of 5 or less, unless major interventionist therapy (including but not limited to surgery, radiotherapy, brachytherapy or chemotherapy) is performed.
- Chronic lymphocytic leukaemia less than Rai Stage 1.

Carcinoma in Situ means a Carcinoma in Situ characterised by a focal autonomous new growth of Carcinomatous cells, which has not yet resulted in the invasion of normal tissues. 'Invasion' means an infiltration and/or active destruction of normal tissues beyond the basement membrane. The tumour must be confirmed by a tissue biopsy and classified as Tis according to the TNM staging method or FIGO stage 0. Carcinoma in Situ of the cervix uteri of Cervical Intraepithelial Neoplasia (CIN) classifications CIN1 and CIN2 are not covered.

Coronary Artery Angioplasty means the undergoing of angioplasty (with or without insertion of a stent) to the coronary arteries to treat Coronary Artery disease.

Coronary Artery Bypass Surgery means the actual undergoing of Coronary Artery Bypass Surgery to correct or treat Coronary Artery disease.

Cover Start Date means the date that the cover began.

Critical Illness Cover Amount means the amount this Policy pays out if the Life Insured is diagnosed as suffering from a condition covered by the Critical Illness Benefit.

Dependent Child means a child aged up to 20, belonging to you, your spouse or partner (including legally adopted or fostered children) who is financially dependent on you.

Early Stage Cancer means:

- Carcinoma in Situ
- Early Stage Chronic Lymphocytic Leukaemia
- Early Stage Prostate Cancer

Papillary micro-carcinoma, non-invasive papillary carcinoma and flat, non-invasive Carcinoma in Situ of the bladder are not covered under this Policy.

Early Stage Chronic Lymphocytic Leukaemia means the presence of chronic lymphocytic leukaemia diagnosed as Rai stage 0, which is defined to be in the blood and bone marrow only.

Early Stage Prostate Cancer means prostate cancers which are histologically described as TNM classification T1 or a Gleason score of 5 or less.

Free Look Period means a 30 day period starting on the day that we send your Policy to you.

Heart Attack means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area, confirmed by a cardiologist or general physician and evidenced by:

- Typical rise and/or fall of cardiac biomarkers (Troponin T or Troponin I or CK-MB) with at least one value above the 99th percentile of the upper reference limit; and
- one of the following:
 - signs and symptoms of ischemia which are consistent with myocardial infarction
 - new serial ECG manifestations of acute myocardial ischemia with the development of any one of the following:
 - ST changes
 - T wave inversion
 - left bundle branch block
 - pathological Q waves or
 - imaging evidence of new loss of viable myocardium or new regional wall motion abnormality.

A rise in cardiac biomarkers resulting from a percutaneous procedure for Coronary Artery disease is excluded unless the baseline value is normal and the elevation is greater than 10 times the 99th percentile of the upper reference limit.

If the above tests are inconclusive we will consider the evidence in conjunction with other appropriate and medically recognised tests.

Life Cover Amount means the amount this Policy pays out on the death of the Life Insured.

Life Insured means the person who is insured under this Policy.

Material Information means all the relevant information that we need in order to decide the terms relating to your Policy. It includes, but is not limited to, information about the Life Insured's health, medical history, occupation and leisure activities.

Paralysis means the permanent and total loss of functions as a result of injury of the spinal cord or brain as defined below:

- Diplegia: loss of function of both sides of the body
- Hemiplegia: loss of function of one side of the body
- Paraplegia: loss of function of both legs
- Tetraplegia (Quadraplegia): loss of function of both arms and legs.

Policy means the terms and conditions applying to this insurance as described in the Policy Document, Policy Summary and your application form.

Policy Owner means the person(s) initially named as the Policy Owner, or the assignee(s) named on the most recent Change of Policy Ownership form if the Policy has been assigned. The Policy Owner is also referred to as "you" or "your" in this document.

Policy Summary means the summary sent to you with this document on which details specific to your Policy are listed, or any replacement summary.

Premium Start Date means the date that the first premium is due.

Stroke means diagnosis of a cerebrovascular event producing permanent neurological deficit lasting more than 24 hours.

A consultant neurologist must produce clear evidence:

- of infarction of brain tissue or intracranial or subarachnoid haemorrhage and
- on a CT, MRI, or similar scan that a stroke has occurred and
- of the onset of objective neurological deficit.

The following are specifically excluded:

- transient ischemic attacks (TIA)
- cerebral symptoms due to reversible neurological deficits, migraine, cerebral injury from trauma or hypoxia and vascular disease affecting the eye, optic nerve or vestibular functions.

Terminal Illness means an illness that we believe will result in the death of the Life Insured within 12 months of the Policy Owner applying for a Terminal Illness Benefit. The illness must start after the Cover Start Date or the reinstatement date if we reinstate this Policy, and be diagnosed while this Policy is active. This illness must be supported by written diagnosis and prognosis by a registered medical practitioner.

Terrorism means the use or threatened use of force or violence against human life or property, or commission of an act dangerous to human life or property, or commission of an act that interferes with or disrupts an electronic or communication system, undertaken by any person or group. This applies whether or not acting on behalf of or in any connection with any organisation, government, power, authority or military force, when the intent is to intimidate, coerce or harm a government, civilian population or any segment thereof, or to disrupt any segment of the economy.

Third Degree Burns means burns destroying the full thickness or third-degree burns to:

- at least 20% of the body's surface area (as measured by the age appropriate use of the Rule of Nines or the Lund and Browder Body Surface chart); or
- 50% of each hand and/or 50% of the face, requiring surgical debridement and/or grafting.

War means any War, whether declared or not, or any warlike activities including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial or religious ends.

We, Us means Cigna Life Insurance New Zealand Limited (Cigna).

8. If you need to register a complaint

If you have a complaint we are happy to discuss it. Please contact us in the first instance, our Customer Service team will do their best to resolve your issue straight away. If they can't sort out the issue, our dedicated Customer Resolution Consultant will personally take on your case.

We are members of the Insurance and Financial Services Ombudsman (IFSO) scheme, a free, independent service which can help settle any dispute you are unable to resolve with us.

Any dispute or action relating to this Policy will be determined in accordance with New Zealand law.

IFSO contact details

Post **P O Box 10 845, Wellington 6143**

Phone **0800 888 202**

Email **info@ifso.nz**

Website **www.ifso.nz**

9. About Cigna

Cigna New Zealand is a leading specialist provider of insurance products and services including travel insurance, life insurance, funeral insurance, income protection insurance, accidental death insurance and serious illness insurance.

We've been operating in New Zealand for nearly a century, and protect over 500,000 New Zealanders with our insurance policies.

Cigna New Zealand is part of Cigna Corporation, a Fortune 500 company and one of the world's largest publicly owned companies.

A copy of Cigna's latest financial statements is available on request.

We are required under the Insurance (Prudential Supervision) Act 2010 to establish a statutory fund. The statutory fund relevant to your policy is Cigna's Statutory Fund Number One.

Privacy

Any details you provide will be held securely by Cigna for the purpose of providing you with quotations and information about Cigna products and services. Your details will never be disclosed to third parties, except for purposes of setting up and administering any policy you wish to take out. From time to time, Cigna may contact you with information about products and services, which it feels may be of interest to you. Under the Privacy Act 1993 you have the right of access to and correction of personal information provided by you.

If you would prefer not to be contacted about these products **please call us on 0800 900 047.**

10. Cigna's Financial Strength

Cigna Life Insurance New Zealand Limited has an A (Excellent) financial strength rating which was given by A.M. Best Company Inc.

The rating scale is:

| Secure | | | Vulnerable | | |
|--------|----|-----------|------------|----|------------------------------|
| A++ | A+ | Superior | B | B- | Fair |
| A | A- | Excellent | C++ | C+ | Marginal |
| B++ | B+ | Good | C | C- | Weak |
| | | | D | | Poor |
| | | | E | | Under regulatory Supervision |
| | | | F | | In Liquidation |
| | | | S | | Suspended |

For more rating information visit

www.ambest.com/ratings/guide.pdf

Contact us

By phone **0800 900 047**

By email **contactus.nz@cigna.com** for general information about your Policy such as premiums and address changes

complaintsandquality.nz@cigna.com to register a complaint

claims.nz@cigna.com to request a claim form or ask any questions related to a claim

By letter **Cigna Life Insurance**

P O Box 24031

Manners Street

Wellington 6142

By fax **04 470 9152**



Together, all the way.