

ERGO Life Insurance SE Eesti filiaal

# Terms & Conditions of ERGO Child's Critical Illness Insurance



## Dear customer,

In these Special Terms & Conditions of Child's Critical Illness Insurance, we explain the principles that guide us in the provision of services to you. You can choose the child's critical illness insurance as an extra cover when taking out ERGO life insurance if you have chosen one or both of the following basic insurances: life insurance, accident insurance.

In addition to these Terms & Conditions, the General Terms & Conditions of ERGO Life Insurance Services also apply to your relationship with us. In the case of any conflicts between these terms and conditions, on one side, and the general terms and conditions, on the other side, these terms and conditions will prevail.

All terms and conditions can be found on our website: [www.ergo.ee](http://www.ergo.ee)

The Terms & Conditions that apply to a particular service and insurance contract are stated in the insurance policy.

Please take your time and read the insurance terms and conditions carefully. Please contact us on [info@ergo.ee](mailto:info@ergo.ee) if you have any questions.

We're happy to help you.

## Table of Contents

1.	Who do we insure?	3
2.	What does the insurance cover?	3
3.	What is not covered (exclusions)?	3
4.	What should you do if an insured event occurs?	4
5.	What are the principles of indemnification?	4
6.	List of critical illnesses and diagnostic criteria	4

## 1. Who do we insure?

- 1.1 The insured person is a child aged 2-17 years (hereinafter referred to as the Child) named in the insurance contract.
- 1.2 The beneficiary is the parent or guardian of the Child.

## 2. What does the insurance cover?

- 2.1 An insured event is considered to be a medically proven critical illness of the Child which is included in the list given in point 6.1 of these terms and conditions and meets the criteria for the diagnosis of critical illnesses described in point 6.2. above. In the case of an insured event, we will pay the beneficiary the amount agreed in the insurance contract. In the case of a cancer diagnosis, we will pay the insurance indemnity as a percentage of the sum insured in accordance with point 6.2.1.
- 2.2 The insurance contract is valid worldwide. The cover is valid for a limited period until the end of the calendar month in which the Child reaches the age of 18.

## 3. What is not covered (exclusions)?

- 3.1 We will not pay out the insurance indemnity in the following cases:
  - 3.1.1 events not covered under our General Terms & Conditions of Life Insurance services (general exclusions);
  - 3.1.2 the diagnosis does not meet all the requirements for the diagnosis of a critical illness listed in point 6.2 of these insurance terms and conditions, including the events described under the relevant illness for which cover is not provided;
  - 3.1.3 the critical illness was diagnosed within the first three months of the date of commencement of the critical illness cover, as stated in the policy;
  - 3.1.4 the critical illness was caused by intentional bodily injury or attempted suicide by the Child;
  - 3.1.5 the critical illness is caused by the Child's participation in professional and/or extreme sports, unless we have agreed otherwise with you in the insurance contract;
  - 3.1.6 the critical illness caused the death of the Child within one month of the date of diagnosis of the critical illness.
- 3.2 We will not pay the insurance indemnity if the critical illness was caused by an event that occurred while you were not covered. If cover was suspended or terminated, it will start applying to events of critical illness again three months after the date on which cover is reinstated.
- 3.3 Child's critical illness insurance does not apply if:
  - 3.3.1 the Child has a congenital disease or disability causally linked to a diagnosis of a critical illness;
  - 3.3.2 the Child has AIDS or is a carrier of HIV;
  - 3.3.3 the Child has chronic blood, liver, kidney or lung diseases;
  - 3.3.4 the Child is mentally ill or has been diagnosed with a chronic severe neurological disorder;
  - 3.3.5 the event is causally linked to the use of alcohol, drugs, toxic or narcotic substances or medicines not prescribed by a doctor;
  - 3.3.6 the Child has been transferred to a special educational institution or is serving a custodial sentence or has to use compulsory medical aids.

## 4. What should you do if an insured event occurs?

- 4.1 Notify us of the diagnosis of the Child's critical illness immediately, but no later than within 30 days after the diagnosis, and provide us with the following information:
- 4.1.1 a notice of claim;
  - 4.1.2 your and your Child's identity document;
  - 4.1.3 the Child's medical records to prove your critical illness: medical history of the diagnosis of the disease, its course, tests, treatment and operations performed;
  - 4.1.4 other documents requested by us that are important for identifying the circumstances of the insured event.
- 4.2 We have the right to refer the Child for further medical examinations or a medical check-ups to determine our liability for payment.
- 4.3 We have the right to ask the doctors and medical institutions that have treated the Child for further information to establish whether an insured event occurred.

## 5. What are the principles of indemnification?

- 5.1 In the case of an insured event, we will pay out the child's critical illness sum insured as a lump sum.
- 5.2 We will only pay out the sum insured once, irrespective of the number of critical illnesses or their recurrence. The cover ends after the total sum insured has been paid out.
- 5.3 If you have increased the sum insured of critical illness cover and the Child is diagnosed with a critical illness within the first three months of the date of the increase, we will pay out the critical illness insurance indemnity equal to the amount of cover before the increase.

## 6. List of critical illnesses and diagnostic criteria

- 6.1 List of critical illnesses:
- Cancer
  - Chronic kidney disease
  - Major organ, composite tissue or bone marrow transplantation
  - Paralysis of limbs
  - Profound vision loss
  - Deafness
  - Benign brain tumour
  - Coma
  - Acute viral encephalitis
  - Major head trauma
  - Loss of limbs
  - Bacterial meningitis
  - Insulin dependent diabetes mellitus (Type I)
  - Severe asthma exacerbation

## 6.2 List of the diagnostic of criteria critical illnesses

### 6.2.1 Cancer

Based on the specific diagnosis of cancer or a malignant tumour, we pay insurance indemnity as a percentage of the sum insured as follows:

6.2.1.1 malignant invasive tumours, in the case of which we indemnify 100% of the sum insured.

#### Explanation

The diagnoses of the diseases in version 10 of the International Classification of Diseases (ICD-10, available at <https://rhc.sm.ee>) are with the codes C00-C97. This disease group also includes haematopoietic malignancies such as leukaemia and lymphoma.

Insured events do not include:

- benign tumours;
- dysplasias, tumours of uncertain or unknown behaviour;
- preinvasive and in situ forms of tumours;
- non-melanoma skin neoplasms;
- early stages of papillary and follicular thyroid cancer;
- malignant neoplasms diagnosed only based on malignant cells in body fluids.

6.2.1.2 **Early cases of cancer or pre-invasive malignant tumours** in the case of which we will indemnify 20% of the sum insured.

#### Explanation

Early cases are evaluated on the basis of the TNM classification.

Insured events include the following:

- all forms of malignant neoplastic diseases that have not spread further from their primary sites and not damaged the basal membrane;
- in situ diseases, D01-D09 based on ICD-10. This also covers melanoma in situ;
- papillary and follicular thyroid cancer at the stage of T1aN0M0 and T1bN0M0.
- Wilms tumour stage I and favourable histology (no anaplasia).

Insured events do not include:

- benign tumours;
- tissue changes or dysplasias and monitoring thereof if malignancy is suspected;
- neoplasms of uncertain or unknown behaviour;
- cases of skin neoplasms other than melanoma;
- gastric MALT Lymphoma if the condition can be treated with Helicobacter eradication;

6.2.1.3 **Invasive non-melanoma skin neoplasms** in the case of which we will indemnify 10% of the sum insured.

#### Explanation

Skin neoplasms such as basal cell carcinoma and squamous cell carcinoma of the skin.

#### 6.2.2 **Chronic kidney disease**

Chronic and irreversible failure of both kidneys, as a result of which either regular haemodialysis or peritoneal dialysis is instituted or renal transplantation is carried out. The dialysis must be medically necessary and confirmed by a Consultant Nephrologist.

The above definition does not cover the following:

- acute reversible kidney failure with temporary renal dialysis;
- chronic kidney disease (kidney failure) due to congenital renal and/or congenital urinary tract abnormalities;
- chronic kidney disease (kidney failure) due to impaired renal perfusion at perinatal stage.

#### 6.2.3 **Major organ, composite tissue or bone marrow transplantation**

The Child must be the recipient of an allograft or isograft transplant of one or more of the following:

- heart;
- kidney;
- liver (including split liver and living donor liver transplantation);
- lung (including living donor lobe transplantation or single- lung transplantation);
- bone marrow (allogeneic hematopoietic stem cell transplantation preceded by total bone marrow ablation);
- small bowel;
- pancreas.

This definition also covers partial or full face, hand, arm and leg transplantations (composite tissue allograft transplantation). The condition leading to transplantation must be deemed untreatable by any other means, as confirmed by a Specialist.

The above definition does not cover the following:

- Transplantation of other organs, body parts or tissues (including cornea and skin);
- transplantation of other cells (including islet cells and stem cells other than hematopoietic);
- transplantation due to congenital malformations or abnormalities.

#### 6.2.4 **Paralysis of limbs**

Total and irreversible loss of muscle function to the whole of any two limbs as a result of injury to, or disease of the spinal cord or brain. Limb is defined as the complete arm or the complete leg. Paralysis must be present for more than three months, confirmed by a specialist and supported by clinical and diagnostic findings.

The above definition does not cover the following:

- paralysis due to self-harm or mental disorders;
- paralysis due to congenital abnormalities of the brain and/or spinal cord including brain tumours and spinal cord tumours;
- Guillain-Barré syndrome;
- periodic or hereditary paralysis.

#### 6.2.5 **Profound vision loss**

Profound loss of vision in both eyes caused by disease or trauma that cannot be corrected by refractive correction, medication or surgery. Profound loss of vision is evidenced by either a visual acuity of 3/60 or less (0.05 or less in the decimal notation) in the better eye after best correction or a visual field of less than 10° diameter in the better eye after best correction. The diagnosis must be confirmed by a Specialist. The diagnosis needs to be supported by appropriate testing.

Objective tests (e.g. visual evoked potential) are required in children under 3 years of age.

The above definition does not cover the following:

- Any form of blindness or profound vision disturbance that is congenital or hereditary including blindness/profound vision disturbance due to infection during pregnancy.

**6.2.6 Deafness**

A definite diagnosis of a permanent and irreversible loss of hearing in both ears as a result of sickness or accidental injury, which cannot be sufficiently compensated by hearing aids to allow normal communication (auditory threshold of more than 90dB). The diagnosis must be confirmed by a ENT specialist and supported by objective audiometry (e.g. Auditory brain stem response).

The above definition does not cover the following:

- Any form of deafness that is congenital or hereditary including deafness due to infection during pregnancy.

**6.2.7 Benign brain tumour**

A definite diagnosis of a benign brain tumour, which is defined as a non-malignant growth of tissue located in the cranial vault and limited to the brain, meninges or cranial nerves. The tumour must be treated with at least one of the following:

- complete or incomplete surgical removal;
- stereotactic radiosurgery;
- external beam radiation.

If none of the treatment options is possible due to medical reasons, the tumour must cause a persistent neurological deficit<sup>1</sup>, which has to be documented for at least three months following the date of diagnosis. The diagnosis must be confirmed by a Specialist and supported by imaging findings.

The above definition does not cover the following:

- the diagnosis or treatment of any cyst, granuloma, hamartoma or malformation of the arteries or veins of the brain;
- tumours of the pituitary gland;
- congenital tumours.

**6.2.8 Coma**

A definite diagnosis of a state of unconsciousness with no reaction or response to external stimuli or internal needs, which:

- results in a score of 8 or less on the Glasgow coma scale for at least 96 hours, requires the use of life support systems, and results in a persistent neurological deficit<sup>1</sup> which must be assessed at least 30 days after the onset of the coma.

The diagnosis must be confirmed by a neurologist.

The above definition does not cover the following:

- medically induced coma;
- any coma due to child abuse or assault;
- any coma due to intentional injury, alcohol or drug use;
- any coma due to birth complications or congenital malformations.

**6.2.9 Acute viral encephalitis**

A definite diagnosis of acute viral encephalitis resulting in:

- a persistent neurological deficit<sup>1</sup> documented for at least three months following the date of diagnosis (applies to every age); or
- a complete cessation/stagnation of motor-, cognitive- and language-development for at least 12 months (applies to ages below 6 years only).

The diagnosis must be confirmed by a neurologist and supported by typical clinical symptoms and cerebrospinal fluid or brain biopsy findings.

The above definition does not cover the following:

- encephalitis in the presence of HIV;
- encephalitis caused by bacterial or protozoal infections;
- myalgic or paraneoplastic encephalomyelitis.

#### 6.2.10 **Major head trauma**

A definite diagnosis of a disturbance of the brain function as a result of traumatic head injury. The head trauma must result in a score of 3-5 on the Paediatric Glasgow Coma Scale (PGCS) and in

- a persistent neurological deficit<sup>1</sup> documented for at least three months following the date of diagnosis (applies to every age); or
- a complete cessation/stagnation of motor-, cognitive- and language-development for at least 12 months (applies to ages below 6 years only).

The diagnosis and neurological deficit, with no reasonable chance of recovery must be confirmed by a Specialist and supported by typical imaging findings (CT scan or brain MRI).

The above definition does not cover the following:

- any major head trauma due to child abuse or assault;
- any major head trauma due to intentional injury, alcohol or drug use.
- an abnormality seen on CT- or MRI-scans or other imaging techniques without definite related clinical symptoms;
- neurological signs occurring without symptomatic abnormality, e.g. brisk reflexes without other symptoms;
- symptoms of psychological or psychiatric origin.

#### 6.2.11 **Loss of limbs**

A definite diagnosis of complete severance of two or more limbs at or above the wrist or ankle joint as the result of an accident or medically required amputation. The diagnosis must be confirmed by a Specialist.

The above definition does not cover the following:

- loss of limbs due to self-inflicted injury.

#### 6.2.12 **Bacterial meningitis**

A definite diagnosis of bacterial meningitis resulting in:

- a persistent neurological deficit<sup>1</sup> documented for at least three months following the date of diagnosis (applies to every age); or
- a complete cessation/stagnation of motor-, cognitive- and language-development for at least 12 months (applies to ages below 6 years only).

The diagnosis must be confirmed by a Specialist and supported by growth of pathogenic bacteria from cerebrospinal fluid culture.



The above definition does not cover the following:

- aseptic, viral, parasitic or non-infectious meningitis.

#### 6.2.13 **Insulin dependent Diabetes Mellitus (Type 1)**

A definite diagnosis of diabetes type 1 characterised by the pancreas's failure to produce enough insulin, hence resulting in a lifelong dependence on exogenous insulin.

The diagnosis must be confirmed by a specialist and supported by typical clinical characteristics and laboratory testing.

The laboratory testing should show at least one of the following:

- pancreatic autoantibodies;
- insulin and C-peptide levels leading to the diagnosis of Diabetes type 1.

The above definition does not cover the following:

- diseases of the exocrine system (e.g. Cystic fibrosis, hereditary hemochromatosis, chronic pancreatitis);
- endocrine abnormalities in glucose regulation (e.g. Cushing syndrome);
- drug-induced diabetes;
- diabetes mellitus type 2.

#### 6.2.14 **Severe asthma exacerbation**

A definite diagnosis of acute severe asthma exacerbation leading to at least two hospital admissions within the last 12 months and evidenced by a Pulmonary Index Score (PIS) >12 or the equivalent in alternative scores.

The above definition does not cover the following:

- asthma caused by gastroesophageal reflux disease (GERD);
- drug-induced asthma;
- asthma as complication of respiratory infection.

### **1 Neurological deficit**

Symptoms of dysfunction in the nervous system that are present on clinical examination. Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, lethargy, dementia, delirium and coma.