



Sanlam Office Staff  
**Critical illness Insurance**  
April 2023

Insurance

Financial Planning

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# introduction

This insurance is additional to the group life insurance. Critical illness insurance will pay a benefit when a member is diagnosed with an illness listed under "Critical illness".

## Membership

- All permanent employees appointed before 1 July 2005 had an once-off option to become members of this insurance from 1 July 2005.
- Employees who were permanently appointed between 1 July 2005 and 30 April 2011 had a once-off option at appointment to become members of this insurance.
- As from 1 May 2011 membership of the critical illness insurance is compulsory for all new permanent appointees.
- Employees who migrated to this insurance had a once-off option at migration date.
- As from 1 May 2017 the comprehensive critical illness option was added and all employees had a once-off option to select the comprehensive cover.



# definitions

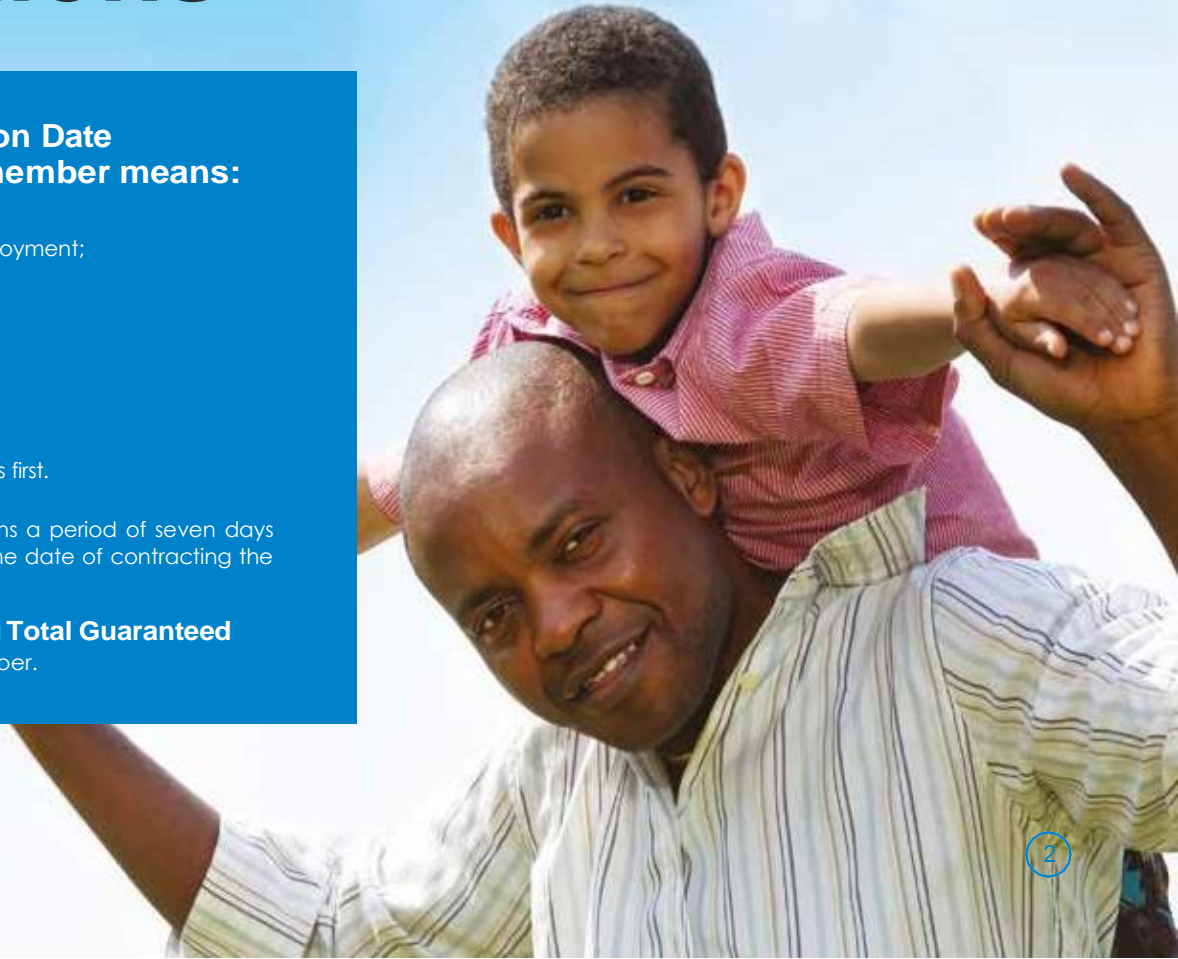
## **Benefit Cessation Date in regard to a member means:**

- termination of employment;
- retirement;
- death; or
- at age 65;

whatever event happens first.

**Waiting period** means a period of seven days immediately following the date of contracting the **critical illness**.

**TGP** means the annual **Total Guaranteed Package** of the member.



# comparative summary of two critical illness options

	Standard option		Comprehensive option	
	Claim event	% of the cover amount paid	Claim event	% of the cover amount paid
Critical illnesses covered	➤ Chronic renal failure	100%	➤ Chronic renal failure	100%
	➤ Paraplegia	100%	➤ Paraplegia	100%
	➤ Myocardial infarction	100%	➤ Myocardial infarction	100%
	➤ Blindness (two eyes)	100%	➤ Blindness – Two eyes – One eye	100% 25%
	➤ Organ transplant	100%	➤ Organ transplant	100%
	➤ Major burns	100%	➤ Major burns	100%
	➤ Stroke (Excluding a stroke resulting from external injuries)	100%	➤ Stroke (Excluding a stroke resulting from external injuries)	100%

	Standard option		Comprehensive option	
	Claim event	% of the cover amount paid	Claim event	% of the cover amount paid
<b>Critical illnesses covered</b>	<p>➤ Coronary artery bypass surgery (Excluding other procedures on the coronary vessels like percutaneous transluminal angioplasty or laser therapy)</p>	100%	<p>➤ Coronary artery bypass surgery (Excluding other procedures on the coronary vessels like percutaneous transluminal angioplasty or laser therapy)</p>	100%
	<p>➤ Deep coma (Excluding a coma which is artificially induced for purposes of ventilation)</p>	100%	<p>➤ Deep coma (Excluding a coma which is artificially induced for purposes of ventilation)</p>	100%
	<p>➤ Cancer Excluding ...</p> <ul style="list-style-type: none"> <li>– Carcinoma in situ, like carcinoma in situ of the cervix;</li> <li>– All skin cancers (except malignant melanomas with Clark level 2 or more depth invasion);</li> <li>– Early prostatic cancers, medically classified as TNM class T1 (a) or T1 (b) or equivalent; and</li> <li>– Kaposi sarcoma</li> </ul>	100%	<p>➤ Cancer Excluding ...</p> <ul style="list-style-type: none"> <li>– Carcinoma in situ, like carcinoma in situ of the cervix;</li> <li>– All skin cancers (except malignant melanomas with Clark level 2 or more depth invasion);</li> <li>– Early prostatic cancers, medically classified as TNM class T1 (a) or T1 (b) or equivalent; and</li> <li>– Kaposi sarcoma</li> </ul>	100%
			<p>➤ Aortic artery surgery (Excluding aortic surgery done on the branches of the aorta)</p>	100%

Critical illnesses covered	Standard option	Comprehensive option	
		Claim event	% of the cover amount paid
		➤ Heart valve surgery	100%
		➤ Chronic liver failure (Excluding cirrhosis due to alcohol or substance abuse)	100%
		➤ End-stage lung disease	100%
		➤ Sero-positive rheumatoid arthritis (Excluding joints in hands and feet)	100%
		➤ Multiple sclerosis	100%
		➤ Parkinson's disease	100%
		➤ Alzheimer's disease	100%
		➤ Accidental HIV infection	100%
		➤ Motor neurone disease	100%
		➤ Muscular dystrophy	100%
		➤ Aplastic anaemia	100%

Critical illnesses covered	Standard option	Comprehensive option	
		Claim event	% of the cover amount paid
		<p>➤ Cardiomyopathy:</p> <ul style="list-style-type: none"> <li>– Any type of cardiomyopathy on optimal treatment with functional impairment to the degree of New York Heart Association (NYHA) class IV shortness of breath</li> <li>– Any type of cardiomyopathy on optimal treatment with functional impairment to the degree of New York Heart Association (NYHA) class III shortness of breath, and 4 or less metabolic equivalents (METS) on a maximal effort test</li> </ul>	<p>100%</p> <p>50%</p>
		<p>➤ Benign brain tumour:</p> <ul style="list-style-type: none"> <li>– A brain tumour with malignant behaviour that is inoperable or recurrent, or causes permanent neurological impairment, excluding cognitive impairment</li> <li>– A brain tumour with malignant behaviour that is only partially removable, or that is treated with chemotherapy or radiotherapy</li> </ul>	<p>100%</p> <p>50%</p>



Critical illnesses covered	Standard option	Comprehensive option	
		Claim event	% of the cover amount paid
		<p>➤ Loss of limb function due to medical causes:</p> <ul style="list-style-type: none"> <li>– Permanent loss of more than 90% of the use of each of any two limb functions due to medical causes</li> <li>– Permanent loss of more than 90% of the use of a limb function due to medical causes <i>(Excluding loss of limb functions originating from bodily injury)</i></li> </ul>	<p>100%</p> <p>50%</p>
		<p>➤ Hearing loss:</p> <ul style="list-style-type: none"> <li>– Total and permanent hearing loss in two ears</li> <li>– Permanent binaural loss of hearing of 60% or more</li> </ul>	<p>100%</p> <p>50%</p>
		➤ Pulmonary embolism	30%
		➤ Angioplasty	25%
		➤ Arrhythmia	25%

Number of claim events	Standard option	Comprehensive option
	<p>Pays a benefit only <b>once</b>. There after critical illness benefit is cancelled.</p>	<p>It pays a benefit once per critical illness. The benefit remains payable for other critical illnesses;</p> <ul style="list-style-type: none"> <li>➤ in the event of a critical illness of which the cause, in Sanlam's opinion, is totally unrelated to the critical illness for which a benefit has already been paid;</li> <li>➤ in the case of 'angioplasty' and 'arrhythmia', provided that the claims with regard to 'angioplasty' is limited to two (2); and</li> <li>➤ in the event of a critical illness involving any one organ, system or body part, or related group of organs, systems or body parts, which in Sanlam's opinion is related to a critical illness, for which less than 100% has already been paid to the member. (Such benefit will be reduced by all the amounts that have already been paid in this regard.)</li> </ul>

# contracting of a critical illness

Sanlam determines the time of contracting a **critical illness** taking into account the medical proof submitted.

- in the case of **cancer** the date of contracting the **critical illness** is taken as the date of the first diagnosis thereof; and
- in the case of **coronary artery bypass surgery** and **organ transplant** the date of contracting the **critical illness** is taken as the date on which the need for the surgery or transplant was first diagnosed by a registered medical practitioner.

The preceding subclause must not be construed as meaning that the critical illness benefit is payable for **coronary artery bypass surgery** or **organ transplant** before the actual undergoing of the surgery or transplant.



# benefit payable

If a member contracts a critical illness before the benefit cessation date and does not die before the end of the waiting period, Sanlam pays the member an amount equal to maximum once the member's annual TGP as applicable immediately before contracting the critical illness, but not exceeding R1.5 million.

## Please note

- As from 1 August 2018 the cover of all members as on 31 July 2018 was converted to a multiple of TGP. As a result of this conversion some members enjoy cover of more than one (1) times TGP.
- Critical illness benefits are limited so that the aggregate amount, which is paid to one person in terms of similar benefits from all sources, does not exceed R7.5 million.

# limitation of benefit on transfer

If a member was transferred from another insurance scheme which was replaced by this insurance (i.e. the member was uninterruptedly insured and transferred as a result of an employer transaction), then the pre-existing health conditions exclusions are applicable from the date of transfer. However, in such a case the lesser of the current or previous critical illness benefit applicable to the member is payable.



# submission of claims

A claim for critical illness insurance must be submitted to HR Support Services within 6 months from contracting the critical illness.

## payment of claims

- ④ The critical illness benefit is paid only if and after **Sanlam** is satisfied on grounds of proof submitted on behalf of the member and at his/her expense that the benefit has become payable.
- ④ No obligation to make any payment for a **critical illness** exists, unless the claim is received by Sanlam's Human Resources department within **six months** of the time of contracting the particular **critical illness**.
- ④ A critical illness claim is payable only if the member has survived the critical illness for at least 7 days.  
**For example:** No critical illness benefit will be paid if a member dies within 7 days of a heart attack.



# exclusions

No benefit is paid if the **critical illness**

- (a) is a direct or indirect consequence of active participation in war, invasion, acts of foreign enemies, hostilities, warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power;
- (b) is a direct or indirect consequence of:
  - (i) the use of nuclear, biological or chemical weapons, or any radioactive contamination; or
  - (ii) attacks on or sabotage of facilities (including, but not limited to, nuclear power plants, reprocessing plants, final repository sites and research reactors) and storage depots, which lead to the release of radioactivity or nuclear, biological or chemical warfare agents,

Irrespective whether any of the aforesaid has been performed with the specific use of information technology.



# waiting period

- If, on the latest date on which the insurance of the critical illness benefit, or of any increase in the insurance by virtue of an amendment to the stipulations regarding the benefit, commences with regard to a member (but for this clause), the member is incapable of performing his/her normal duties with the employer as a result of an illness or a bodily injury, then he/she becomes entitled to the benefit or the increase (as the case may be) only when he/she is capable of resuming his/her normal duties and has done so for twenty continuous working days.



The critical illness benefit or any increase in the benefit by virtue of an amendment to the Policy, is not paid for a **critical illness** contracted by a member within two years of the latest date on which the insurance of this benefit or the increase, as the case may be, commences with regard to him/her, if that **critical illness** directly or indirectly arises from or is traceable to a diseased condition of which the member was aware or experienced symptoms or for which medical treatment was received during the two years immediately before the said date.

# continuation of cover



At termination of service this cover can be converted to a policy. Subject to a maximum cover amount determine according to years of completed service.



Critical illness cover is continued during disability if the disablement is the result of a cause other than a CRITICAL ILLNESS.







## Disclaimer

This summary does not form part of the official Rules and Policies. In the event of any contradiction between the contents of this summary and the official Rules and/or Policies, the provisions of the Rules and Policies shall prevail. These Rules and Policies are available on request at Alfreda April, Glacier Place, Tel: 021 947 8404.

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