

Critical Illness Conditions Covered and Exclusions Glossary



This glossary details the illnesses and operations covered under the Unum Critical Illness policy arranged by your employer.

Benefit is paid if you, your spouse or partner (if covered) or your child are:

- Diagnosed with a defined medical condition, or undergo, or where applicable are placed on a waiting list for one of the listed surgical procedures, and
- Then survive for at least 14 days

For benefit to be payable the illness or operation must meet the policy definition.

Please note that limitations and exclusions apply and these can be found in the "Pre-existing and related conditions exclusions" section at the end of this glossary.

Conditions covered – policy definitions

You are covered for the following medical conditions and procedures (and no others).

Aorta graft surgery

The undergoing of surgery, or inclusion on an official UK waiting list for surgery, to the aorta with excision and surgical replacement of a portion of the aorta with a graft. The term aorta includes the thoracic and abdominal aorta but not its branches.

For the above definition, the following are not covered:

- Any other surgical procedure, for example, the insertion of stents or endovascular repair

Aplastic anaemia – of specified severity

Complete bone marrow failure which results in anaemia, neutropenia and thrombocytopenia and requires as a minimum one of the following treatments:

- Blood transfusion
- Bone-marrow transplantation
- Immunosuppressive agents
- Marrow stimulating agent

Bacteria meningitis – resulting in permanent symptoms

A definite diagnosis of bacterial meningitis by a consultant neurologist resulting in permanent neurological deficit with persisting clinical symptoms.

For the above definition, the following are not covered:

- All forms of non-bacterial meningitis

Benign brain tumour – with permanent symptoms or specified treatments

A non-malignant tumour or cyst originating from the brain, cranial nerves or meninges within the skull, resulting in any of the following:

- Permanent neurological deficit with persisting clinical symptoms, or
- Undergoing invasive surgery to remove part or all of the tumour, or
- Undergoing either stereotactic radiosurgery or chemotherapy treatment to destroy tumour cells

For the above definition, the following are not covered:

- Tumours in the pituitary gland
- Tumours originating from bone tissue
- Angioma and cholesteatoma

Benign spinal cord tumour – with permanent symptoms or specified treatments

A non-malignant tumour originating from the spinal cord, spinal nerves or meninges, resulting in any of the following:

- Permanent neurological deficit with persisting clinical symptoms, or
- Undergoing invasive surgery to remove the tumour, or
- Undergoing stereotactic radiotherapy to the tumour

For the above definition, the following are not covered:

- Granulomas, haematomas, abscesses, disc protrusions or osteomyelitis

Blindness – permanent and irreversible

Permanent and irreversible loss of sight to the extent that when tested with the use of visual aids, vision is measured at 6/60 or worse in the better eye using a Snellen chart, or visual field is reduced to an arc of 20 degrees or less, as certified by an ophthalmologist.

Cancer – excluding less advanced cases

Any malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells and invasion of tissue.

The term malignant tumour includes leukaemia, sarcoma, and lymphoma except those that arise from and are confined to the skin (including cutaneous lymphomas and sarcomas).

For this definition of cancer, the following are not covered:

- All cancers which are histologically classified as any of the following:
 - pre-malignant,
 - cancer in situ,
 - having borderline malignancy, or
 - having low malignant potential.
- All tumours of the prostate unless histologically classified as having a Gleason score of 7 or above or having progressed to at least TNM classification cT2bN0M0 or pT2N0M0 following prostatectomy (removal of the prostate).
- All urothelial tumours unless histologically classified as having progressed to at least TNM classification T1N0M0.
- Malignant melanoma skin cancers that are confined to the epidermis (outer layer of skin).
- All skin cancers (other than malignant melanoma) that arise from and are confined to one or more of the epidermal, dermal, and subcutaneous tissue layers of the skin (including cutaneous lymphomas and sarcomas).
- All thyroid tumours unless histologically classified as having progressed to at least TNM classification T2N0M0.
- Neuroendocrine tumours without lymph node involvement or distant metastases unless classified as WHO Grade 2 or above.
- Gastrointestinal stromal tumours without lymph node involvement or distant metastases unless classified by either AFIP/Miettinen and Lasota as having a moderate or high risk of progression, or as UICC/TNM8 stage II or above.

Cancer – second and subsequent

This provides some cover for employees who have been previously diagnosed with cancer. A benefit would be payable for a diagnosis of a new, unrelated cancer as defined by the general terms.

The pre-existing condition exclusion applies in the normal manner to subsequent cancer claims unless:

- the member has been treatment free for a period of 5 years from the date of the most recent previous diagnosis of cancer, and
- there is no evidence, confirmed by appropriate up-to date investigations and tests, of any continuing presence, recurrence or spread of the previous cancer, and the new cancer:
 - affects an organ that is physically and anatomically separate to any previous cancer, and
 - is not a secondary cancer or histologically related to any previous cancer; or
 - for haematological cancers, the new cancer is categorised or divided according to defined cell characteristics in a distinctly different manner to any previous cancer.

Treatment includes chemotherapy, radiotherapy, monoclonal antibody therapy, and invasive or non-invasive surgery, but does not include long term maintenance hormone treatment.

In addition to the above, in no circumstances will a claim for subsequent cancer be payable if the employee has:

- any signs, symptoms or investigations, that lead to a subsequent diagnosis of cancer regardless of when the diagnosis is made, or
- a subsequent diagnosis of cancer, which gives rise to a claim during the 120 days following:
 - the policy start date, or their meeting the eligibility conditions for being a member (which may have been during cover with a previous insurer), or
 - an increase in benefit (claims will still be considered for the pre-increase amount).

Cardiac arrest

– with insertion of a defibrillator

Sudden loss of heart function with interruption of blood circulation around the body resulting in unconsciousness and resulting in either of the following devices being surgically implanted:

- Implantable Cardioverter-Defibrillator (ICD); or
- Cardiac Resynchronization Therapy with Defibrillator (CRT-D)

For the above definition the following are not covered:

- Insertion of a pacemaker

Cardiomyopathy

– of specified severity

A definite diagnosis of cardiomyopathy by a consultant cardiologist. There must be clinical impairment of heart function resulting in the permanent loss of ability to perform physical activities to at least Class 3 of the New York Heart Association classification of functional capacity (marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain). The diagnosis must be supported by echocardiogram.

For the above definition, the following are not covered:

- All other forms of heart disease, heart enlargement and myocarditis
- Cardiomyopathy secondary to alcohol or drug abuse

Coma

– with associated permanent symptoms

A state of unconsciousness with no reaction to external stimuli or internal needs which:

- Requires the use of life support systems for a continuous period of at least 96 hours, and
- With associated permanent neurological deficit with persisting clinical symptoms

For the above definition, the following are not covered:

- Medically induced coma
- Coma secondary to alcohol or drug abuse

Coronary angioplasty

– to 2 or more coronary arteries

The undergoing of balloon angioplasty, including atherectomy, laser treatment or stent insertion on the advice of a consultant cardiologist to two or more main coronary arteries as a single procedure to correct:

- Narrowing or blockages of at least 70%, or
- Narrowing or blockages where there is a fractional flow reserve ratio of <0.8

The main coronary arteries for this purpose are defined as right coronary artery, left main stem, left anterior descending and (left) circumflex.

Angiographic evidence will be required.

Coronary artery bypass grafts

The undergoing of surgery, or inclusion on an official UK waiting list for surgery, on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

Creutzfeldt-Jakob disease

– resulting in permanent symptoms

A definite diagnosis of Creutzfeldt-Jakob disease by a consultant neurologist resulting in permanent neurological deficit with persisting clinical symptoms.

Deafness – permanent and irreversible

Permanent and irreversible loss of hearing to the extent that the loss is greater than 95 decibels across all frequencies in the better ear using a pure tone audiogram.

Dementia including Alzheimer's disease

– of specified severity.

A definite diagnosis of Dementia, including Alzheimer's disease, by a Consultant Geriatrician, Neurologist, Neuropsychologist or Psychiatrist or supported by evidence including neuropsychometric testing.

There must be permanent cognitive dysfunction with progressive deterioration in the ability to do all of the following:

- remember,
- reason; and
- perceive, understand, express and give effect to ideas.

For the above definition, the following are not covered:

- Mild cognitive Impairment (MCI)

Encephalitis

– resulting in permanent symptoms

A definite diagnosis of encephalitis by a consultant neurologist resulting in a permanent neurological deficit with persisting clinical symptoms.

Heart attack

A definite diagnosis of acute myocardial infarction with death of heart muscle, as evidenced by all of the following:

- New characteristic electrocardiographic changes or new diagnostic imaging changes.
- The characteristic rise of cardiac enzymes or Troponins

The evidence must show a definite acute myocardial infarction.

For the above definition, the following are not covered:

- Myocardial injury without myocardial infarction
- Angina without myocardial infarction.

Heart valve replacement or repair

The undergoing of surgery, or inclusion on an official UK waiting list for surgery, (including balloon valvuloplasty) on the advice of a consultant cardiologist to replace or repair one or more heart valves.

HIV Infection

– caught within specified geographic limits from a blood transfusion, physical assault or at work

Infection by Human Immunodeficiency Virus (HIV) resulting from:

- A blood transfusion given as part of medical treatment
- A physical assault, or
- An incident occurring during the course of performing normal duties of employment, after the date of becoming a member and satisfying all of the following:
 - The incident must have been reported to appropriate authorities and have been investigated in accordance with the established procedures

- Where HIV infection is caught through a physical assault or as a result of an incident occurring during the course of performing normal duties of employment, the incident must be supported by a negative HIV antibody test taken within 5 days of the incident
- There must be a further HIV test within 12 months confirming the presence of HIV or antibodies to the virus
- The incident causing infection must have occurred in the E.C., North America or Australasia

For the above definition the following is not covered:

- HIV infection resulting from any other means, including sexual activity or drug abuse

Kidney failure

– requiring permanent dialysis

Chronic and end stage failure of both kidneys to function, as a result of which regular dialysis is permanently required.

Liver failure – of specified severity

End-stage liver failure resulting in all of the following:

- Permanent jaundice
- Ascites (fluid retention in the abdominal cavity)
- Encephalopathy (mental confusion due to nitrogenous substances not being removed by the liver)

For the above definition, the following are not covered:

- Liver disease secondary to alcohol or drug misuse

Loss of hand or foot

– permanent physical severance

Permanent physical severance of a hand or foot at or above the wrist or ankle joint.

Loss of speech

– total, permanent and irreversible

Total permanent and irreversible loss of the ability to speak as a result of physical injury or disease.

Major organ transplant

– from another donor

The undergoing as a recipient from another donor, or inclusion on an official UK waiting list for a transplant of any of the following:

- Bone marrow, or
- A complete heart, kidney, liver, lung or pancreas, or
- A lobe of liver, or
- A lobe of lung

For the above definition, the following are not covered:

- Transplant of any other organs, parts of organs, tissues or cells

Motor neurone disease

– resulting in permanent symptoms

A definite diagnosis of one of the following motor neurone diseases by a consultant neurologist:

- Amyotrophic lateral sclerosis (ALS)
- Primary lateral sclerosis (PLS)
- Progressive bulbar palsy (PBP)
- Progressive muscular atrophy (PMA)

There must be permanent clinical impairment of motor function.

Multiple sclerosis

– with persisting symptoms

A definite diagnosis of multiple sclerosis by a consultant neurologist that has resulted in either of the following:

- Clinical impairment of motor or sensory function, which must have persisted from the time of diagnosis, or
- Two or more attacks of impaired motor or sensory function together with findings of clinical objective evidence on Magnetic Resonance Imaging (MRI scan)

All of the evidence must be consistent with multiple sclerosis.

Paralysis of limb – total and irreversible

Total irreversible loss of muscle function to the whole of any limb.

Parkinson's disease and Parkinson plus syndromes

– resulting in permanent symptoms

A definite diagnosis of Parkinson's disease or one of the following Parkinson plus syndromes by a consultant neurologist or geriatrician:

- Multiple system atrophy
- Progressive supranuclear palsy
- Parkinsonian-dementia-amyotrophic lateral sclerosis complex
- Corticobasal ganglionic degeneration
- Diffuse lewy body disease

There must be permanent clinical impairment of motor function with associated tremor and muscle rigidity.

For the above definition, the following are not covered:

- Any other Parkinsonian syndromes/Parkinsonism

Primary pulmonary arterial hypertension

– of specified severity

A definite diagnosis of pulmonary arterial hypertension of unknown cause. There must be clinical impairment of heart function resulting in the permanent loss of ability to perform physical activities to at least Class 3 of the New York Heart Association classification of functional capacity (marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain).

For the above definition, the following are not covered:

- Pulmonary hypertension secondary to any other known cause i.e. not primary

Pulmonary artery surgery – for disease

The undergoing of surgery, or inclusion on an official UK waiting list for surgery, on the advice of a consultant cardiothoracic surgeon for a disease of the pulmonary artery to excise and replace the diseased pulmonary artery with a graft.

Respiratory failure – of specified severity

Confirmation by a consultant physician of severe lung disease which is evidenced by the need for continuous daily oxygen therapy on a permanent basis and that has either of the following:

- Carbon monoxide diffusion capacity (DLCO) of less than 40% of normal, or
- Lung function tests persistently showing Forced Expiratory Volume in 1 second 1 (FEV1) less than 50% and Forced Vital Capacity (FVC) less than 50% of normal

Rheumatoid arthritis – of specified severity

A definite diagnosis by a consultant rheumatologist of chronic rheumatoid arthritis as evidenced by widespread joint destruction with major clinical deformity.

In addition the member must permanently satisfy three of the four following criteria:

- Bending - The inability to bend or kneel to pick up something from the floor and stand up again and the inability to get into and out of a standard saloon car
- Dexterity - The inability to use hands and fingers to pick up and manipulate small objects such as cutlery, including being unable to write using a pen or pencil
- Lifting - The inability to lift, carry or otherwise move everyday objects by hand. Everyday objects include a kettle of water, a bag of shopping and an overnight bag or briefcase
- Mobility - The inability to walk a distance of 200 metres on flat ground, with or without the aid of a walking stick and without having to rest or experiencing severe discomfort

Stroke

Death of brain tissue due to inadequate blood supply or haemorrhage within the skull that has resulted in all of the following evidence of stroke:

- Neurological deficit with persisting clinical symptoms lasting at least 24 hours, and
- Definite evidence of death of tissue or haemorrhage on a brain scan

For the above definition, the following are not covered:

- Transient ischaemic attack
- Traumatic injury to brain tissue or blood vessels
- Death of tissue of the optic nerve or retina / eye stroke

Structural heart surgery – with surgery to divide the breastbone

The undergoing of surgery, or inclusion on an official UK waiting list for surgery, requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist to correct any structural abnormality of the heart.

Terminal illness – where death is expected within 12 months

A definite diagnosis by the attending consultant of an illness that satisfies both of the following:

- The illness either has no known cure or has progressed to the point where it cannot be cured, and
- In the opinion of the attending Consultant, the illness is expected to lead to death within 12 months

Third degree burns – covering 20% of the body or face

Burns that involve damage or destruction of the skin to its full depth through to the underlying tissue and covering at least 20% of the body's surface area or 20% of the face.

For the purposes of this definition the face includes the forehead and ears.

Traumatic brain injury – resulting in permanent symptoms

Death of brain tissue due to traumatic injury resulting in permanent neurological deficit with persisting clinical symptoms.

Total permanent disability – of specified severity

The definition of total permanent disability is policy specific and can be found in the policy documents issued to your employer.

Conditions covered (children's cover) – policy definitions

Children are covered for the following medical conditions and procedures in addition to those included within your cover as listed above (and no others).

Cerebral palsy

A definite diagnosis of cerebral palsy by an attending consultant

Children's intensive care benefit

Sickness or injury resulting in continuous mechanical ventilation by means of tracheal intubation for 7 consecutive days (24 hours per day) or more.

For the above definition the following is not covered:

- Sickness or injury as a result of premature birth (before 37 weeks).

Cystic fibrosis

A definite diagnosis of cystic fibrosis by an attending consultant.

Hydrocephalus

– treated with the insertion of a shunt

A definite diagnosis of hydrocephalus by an attending consultant that is treated with the insertion of a shunt.

Muscular dystrophy

A definite diagnosis of muscular dystrophy by a consultant neurologist.

Spina bifida myelomeningocele

A definite diagnosis of spina bifida myelomeningocele by a paediatrician.

For the above definition the following are not covered:

- Spina bifida meningocele
- Spina bifida occulta

Total permanent disability

– permanently unable to look after yourself

Permanent physical inability through an illness or injury to do at least 3 of the 6 tasks listed below.

The relevant specialists must reasonably expect that the disability will last throughout life with no prospect of improvement.

The child must permanently need the help or supervision of another person and be unable to perform the task on their own, even with the use of special equipment routinely available to help and having taken any appropriate prescribed medication.

The tasks are:

- Washing – the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means
- Getting dressed and undressed – the ability to put on, take off, secure and unfasten all garments and, if needed, any braces, artificial limbs or other surgical appliances
- Feeding yourself – the ability to feed yourself when food has been prepared and made available
- Maintaining personal hygiene – the ability to maintain a satisfactory level of personal hygiene by using the toilet or otherwise managing bowel and bladder function
- Getting between rooms – the ability to get from room to room on a level floor
- Getting in and out of bed – the ability to get out of bed into an upright chair or wheelchair and back again

For the above definition, disabilities for which the relevant specialists cannot give a definite prognosis are not covered.

Pre-existing and related conditions exclusions

Pre-existing and related conditions exclusions apply to all cover under this policy. By all cover we mean:

- Cover for you, your spouse/partner and your children; and
- All increases in benefit

The pre-existing conditions exclusion means that if you, your spouse/partner or child have suffered from a medical condition or undergone one of the surgical procedures before your/their cover started, other than for cancer – second and subsequent, you will not be able to claim for any further incidence of that critical illness.

Under the related conditions exclusion, you, your spouse/partner or child will not be able to claim for a critical illness event which is linked to a related condition which you/they were aware of, or received treatment or advice for, on or before the date your/their cover started.

The related conditions for each group of critical illnesses are listed on the next page. The related conditions either apply indefinitely or are limited to the two years from the start of cover as shown in the table on the next page.

For this exclusion, if you, your spouse/partner or child experience any of the heart and circulatory diseases you/they may not claim later for any critical illnesses in that group.

If you, your spouse/partner or child suffer or have previously suffered any malignant tumour under the cancer critical illness you will not be able to claim for a recurrence of cancer, other than under the cancer – second and subsequent event.

If you, your spouse/partner or child have previously suffered any critical illness, no benefit is payable under terminal illness or disability critical illnesses groups.

If you, your spouse/partner or child qualify under the terminal illness event you/they will not be able to claim again under any other critical illness event.

No benefit will be paid for any medical condition or surgical procedure where you, your spouse/partner or child were undergoing ongoing medical investigations or monitoring before your/their cover started, which led to the later diagnosis of a critical illness or related condition.

Children's cover: No benefit will be paid in respect of a child if symptoms first arose or the underlying condition was first diagnosed before the member joined the policy.

No benefit will be paid for any subsequent critical illness event related to a child-specific critical illness for which benefit has been paid.

Related conditions

The specific related conditions exclusions which apply to each group of critical illness events are shown in the table below:

Group	Critical illnesses	Related conditions
Cancer	Cancer – excluding less advanced cases Cancer – second and subsequent	Applies for 2 years Polyposis coli Papilloma of the bladder Any carcinoma-in-situ
Heart and circulatory diseases	Aorta graft surgery Cardiac arrest – with insertion of a defibrillator Cardiomyopathy – of specified severity Coronary angioplasty – to 2 or more coronary arteries Coronary artery bypass grafts Heart attack Heart valve replacement or repair Primary pulmonary arterial hypertension – of specified severity Pulmonary artery surgery – for disease Stroke Structural heart surgery – with surgery to divide the breastbone	Applies for 2 years Any disease or disorder of the heart Any obstructive or occlusive arterial disease Blood pressure treated at any time by prescribed medication Diabetes mellitus
Organ failure	Aplastic anaemia – of specified severity Kidney failure – requiring permanent dialysis Liver failure – of specified severity Major organ transplant – from another donor	Applies for 2 years Any chronic lung disease Any chronic renal disease or disorder Any chronic liver disease Any disease or disorder of the heart Chronic pancreatitis Chronic leukemia Diabetes mellitus

Diseases of the brain and central nervous system	<p>Bacterial meningitis – resulting in permanent symptoms</p> <p>Benign brain tumour – with permanent symptoms or specified treatments</p> <p>Benign spinal cord tumour – with permanent symptoms or specified treatments</p> <p>Coma - with associated permanent symptoms</p> <p>Creutzfeldt-Jakob disease – resulting in permanent symptoms</p> <p>Dementia including Alzheimer’s disease – resulting in permanent symptoms</p> <p>Encephalitis – resulting in permanent symptoms</p> <p>Motor neurone disease – resulting in permanent symptoms</p> <p>Multiple sclerosis – with persisting symptoms</p> <p>Parkinson’s disease and Parkinson plus syndromes – resulting in permanent symptoms</p>	<p>Applies for 2 years</p> <p>Any disease or disorder of the brain or central nervous system</p>
Respiratory diseases	Respiratory failure – of specified severity	<p>Applies for 2 years</p> <p>Any chronic lung disease</p>
Accidents	<p>HIV infection – caught within specified geographic limits from a blood transfusion, physical assault or at work</p> <p>Third degree burns – covering 20% of the body or face</p> <p>Traumatic brain injury – resulting in permanent symptoms</p>	There are no related conditions
Terminal illness	Terminal illness – where death is expected within 12 months	<p>Applies indefinitely</p> <p>All other critical illness events</p>
Disability group 1	<p>Blindness – permanent and irreversible</p> <p>Deafness – permanent and irreversible</p> <p>Loss of hand and foot – permanent physical severance</p> <p>Loss of speech – total, permanent and irreversible</p> <p>Rheumatoid arthritis – of a specified severity</p>	<p>Applies for 2 years</p> <p>Any disease or disorder of the brain or central nervous system</p> <p>Diabetes mellitus</p> <p>Peripheral vascular disease</p> <p>Inflammatory polyarthropathy</p> <p>Applies indefinitely</p> <p>All other critical illness events</p>
Disability group 2	<p>Paralysis of limb – total and irreversible</p> <p>Total permanent disability – of specified severity</p>	<p>Applies indefinitely</p> <p>All other critical illness events</p> <p>Any disease or disorder of the brain or central nervous system</p> <p>Chronic or recurring mental illness</p> <p>Chronic symptoms of fatigue, back, joint or muscle pain</p> <p>Diabetes mellitus</p>