

HOMETEAMNS LIVING POLICY

INTRODUCTION

The HomeTeamNS Living Policy is specially designed by Income to provide additional financial protection to HomeTeamNS members and their dependents.

This document provides you with the key features and benefits of the Policy.

1. THE GROUP POLICY

BENEFITS

You are covered 24 hours a day anywhere in the world.

The benefits you will receive under the Policy are:

(A) Death

The Sum Assured will be payable in the event of Death from all causes except Death arising from suicide within one year from the commencement of the insurance.

(B) Permanent and Total Disablement

The Sum Assured will be payable in the event of Permanent and Total Disablement from any cause except self-inflicted injuries.

Permanent and Total Disablement shall mean such state of disability that there is neither then nor at any time thereafter, any work, occupation, or profession that you can ever sufficiently do or follow to earn or obtain any wages, compensation or profit.

Either one of the following conditions will also be considered as Permanent and Total Disablement:

- i) loss of two limbs
- ii) loss of sight of both eyes
- iii) loss of limb and an eye

(C) On Diagnosis of a Critical Illness

1. Benefits

Subject to the terms, conditions and provisions set out in this Annexure, if a Member is diagnosed to have any of the critical illnesses defined below for the first time after the Member's Effective Date of Insurance, Income will pay the Sum Assured as stated in the Schedule of Lives Insured attached to the policy.

The Member must provide adequate medical evidence to the satisfaction of Income and must be prepared to undergo a medical examination by a registered Medical Practitioner appointed by Income.

Every diagnosis of any of the critical illnesses defined below must be supported by acceptable clinical, radiological, histological and laboratory evidence and confirmed by a registered Medical Practitioner.

2. General Exclusions

- (a) The Sum Assured shall not be payable if the disease is caused by any of the following:
1. Self inflicted injury or illness.
 2. Wilful misuse of drugs and/or alcohol.
 3. An episode of coronary artery or ischaemic heart disease that occurred before the issue of this policy.
 4. Any pre-existing conditions relating directly or indirectly to the critical illnesses defined under the policy or where the Member received medical treatment or sought medical advice prior to the Member's Effective Date of Coverage under this policy.
- (b) The Sum Assured shall not be payable in respect of Major Cancer, Coronary Artery Bypass Surgery, Heart Attack of Specified Severity and Angioplasty and Other Invasive Treatment for Coronary Artery if the initial diagnosis is made 90 days from the Member's Effective date of Insurance.

3. Conditions and Provisions

- (a) The Member must notify Income in writing, giving full particulars, as soon as possible after the initial diagnosis of the disease and, in any case, not later than 6 months after the date of diagnosis. Proof satisfactory to Income of the title of the claimant and of the happening of the aforesaid event must be provided.
- (b) In the event that the Member suffers from one of the critical illnesses during the currency of a Permanent and Total Disability claim, the balance of installments, if any, due under the Permanent and Total Disability claim shall become payable.
- (c) The Proposal and Declaration made by the Policyholder/Member under the main Policy shall also form the basis of this Living Benefits Insurance.
- (d) The payment of the Sum Assured under this Living Benefits Insurance is subject to the Member surviving a period of 30 days from the date of diagnosis of the critical illness.
- (e) If the claim shall be in any respect fraudulent or if any false declaration be made or used in support thereof or if any fraudulent means or devices are used by the Policyholder/Member to obtain any compensation under this Policy, all compensation shall be forfeited.

4. Definitions

List of 30 Critical Illnesses

The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).

It is hereby declared that the following 30 Critical Illnesses shall be defined as Critical Illnesses for the purpose of this Policy.

1 Heart Attack of Specified Severity

Death of heart muscle due to ischaemia, that is evident by at least three of the following criteria proving the occurrence of a new heart attack:

- History of typical chest pain;
- New characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block;
- Elevation of the cardiac biomarkers, inclusive of CKMB above the generally accepted normal laboratory levels or Cardiac Troponin T or I at 0.5ng/ml and above;
- Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality. The imaging must be done by Cardiologist specified by Income.

For the above definition, the following are excluded:

- Angina;
- Heart attack of indeterminate age; and
- A rise in cardiac biomarkers or Troponin T or I following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

Explanatory note: 0.5ng/ml = 0.5ug/L = 500pg/ml

2 Stroke with Permanent Neurological Deficit

A cerebrovascular incident including infarction of brain tissue, cerebral and subarachnoid haemorrhage, intracerebral embolism and cerebral thrombosis resulting in permanent neurological deficit. This diagnosis must be supported by all of the following conditions:

- Evidence of permanent clinical neurological deficit confirmed by a neurologist at least 6 weeks after the event; and
- Findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques consistent with the diagnosis of a new stroke.

The following are excluded:

- Transient Ischaemic Attacks;
- Brain damage due to an accident or injury, infection, vasculitis, and inflammatory disease;
- Vascular disease affecting the eye or optic nerve;
- Ischaemic disorders of the vestibular system; and
- Secondary haemorrhage within a pre-existing cerebral lesion.

3 Major Cancer

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

The term Major Cancer includes, but is not limited to, leukemia, lymphoma and sarcoma.

Major Cancer diagnosed on the basis of finding tumour cells and/or tumour-associated molecules in blood, saliva, faeces, urine or any other bodily fluid in the absence of further definitive and clinically verifiable evidence does not meet the above definition.

For the above definition, the following are excluded:

- All tumours which are histologically classified as any of the following:
 - Pre-malignant;
 - Non-invasive;
 - Carcinoma-in-situ (Tis) or Ta;
 - Having borderline malignancy;
 - Having any degree of malignant potential;
 - Having suspicious malignancy;
 - Neoplasm of uncertain or unknown behaviour; or
 - All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia;
- Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification;
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below;
- All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;
- All Gastro-Intestinal Stromal tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual, or below;
- Chronic Lymphocytic Leukaemia less than RAI Stage 3;
- All bone marrow malignancies which do not require recurrent blood transfusions, chemotherapy, targeted cancer therapies, bone marrow transplant, haematopoietic stem cell transplant or other major interventionist treatment; and
- All tumours in the presence of HIV infection.

4 Coronary Artery By-pass Surgery

The actual undergoing of open-chest surgery or Minimally Invasive Direct Coronary Artery Bypass surgery to correct the narrowing or blockage of one or more coronary arteries with bypass grafts. This diagnosis must be supported by angiographic evidence of significant coronary artery obstruction and the procedure must be considered medically necessary by a consultant cardiologist.

Angioplasty and all other intra-arterial, catheter-based techniques, 'keyhole' or laser procedures are excluded.

5 End Stage Kidney Failure

Chronic irreversible failure of both kidneys requiring either permanent renal dialysis or kidney transplantation.

6 Fulminant Hepatitis

A submassive to massive necrosis of the liver by the Hepatitis virus, leading precipitously to liver failure. This diagnosis must be supported by all of the following:

- Rapid decreasing of liver size as confirmed by abdominal ultrasound;
- Necrosis involving entire lobules, leaving only a collapsed reticular framework;
- Rapid deterioration of liver function tests;
- Deepening jaundice; and
- Hepatic encephalopathy.

7 Major Organ / Bone Marrow Transplantation

The receipt of a transplant of:

- Human bone marrow using haematopoietic stem cells preceded by total bone marrow ablation;
or
- One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end stage failure of the relevant organ.

Other stem cell transplants are excluded.

8 Blindness (Irreversible Loss of Sight)

Permanent and irreversible loss of sight in both eyes as a result of illness or accident to the extent that even when tested with the use of visual aids, vision is measured at 6/60 or worse in both eyes using a Snellen eye chart or equivalent test, or visual field of 20 degrees or less in both eyes. The blindness must be confirmed by an ophthalmologist.

The blindness must not be correctable by surgical procedures, implants or any other means.

9 Paralysis (Irreversible Loss of Use of Limbs)

Total and irreversible loss of use of at least 2 entire limbs due to injury or disease persisting for a period of at least 6 weeks and with no foreseeable possibility of recovery. This condition must be confirmed by a consultant neurologist.

Self-inflicted injuries are excluded.

10 Primary Pulmonary Hypertension

Primary Pulmonary Hypertension with substantial right ventricular enlargement confirmed by investigations including cardiac catheterisation, resulting in permanent physical impairment of at least Class IV of the New York Heart Association (NYHA) Classification of Cardiac Impairment.

The NYHA Classification of Cardiac Impairment:

- Class I: No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, dyspnea, or anginal pain.
- Class II: Slight limitation of physical activity. Ordinary physical activity results in symptoms.
- Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

11 Multiple Sclerosis

The definite diagnosis of Multiple Sclerosis, and must be supported by all of the following:

- Investigations which unequivocally confirm the diagnosis to be Multiple Sclerosis; and
- Multiple neurological deficits which occurred over a continuous period of at least 6 months.

Other causes of neurological damage such as SLE and HIV are excluded.

12 Alzheimer's Disease / Severe Dementia

Deterioration or loss of cognitive function as confirmed by clinical evaluation and imaging tests, arising from Alzheimer's disease or irreversible organic disorders, resulting in significant reduction in mental and social functioning requiring the continuous supervision of the insured. This diagnosis must be supported by the clinical confirmation of an appropriate consultant and supported by Income's appointed Registered Medical Practitioner.

The following are excluded:

- Non-organic diseases such as neurosis and psychiatric illnesses; and
- Alcohol related brain damage.

13 Open Chest Surgery to Aorta

The actual undergoing of major surgery to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta through surgical opening of the chest or abdomen. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

Surgery performed using only minimally invasive or intra-arterial techniques are excluded.

14 Coma

A coma that persists for at least 96 hours. This diagnosis must be supported by evidence of all of the following:

- No response to external stimuli for at least 96 hours;
- Life support measures are necessary to sustain life; and

- Brain damage resulting in permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

For the above definition, medically induced coma and coma resulting directly from alcohol or drug abuse are excluded.

15 Deafness (Irreversible Loss of Hearing)

Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by audiometric and sound-threshold tests provided and certified by an Ear, Nose, Throat (ENT) specialist.

Total means “the loss of at least 80 decibels in all frequencies of hearing”.

Irreversible means “cannot be reasonably restored to at least 40 decibels by medical treatment, hearing aid and/or surgical procedures consistent with the current standard of the medical services available in Singapore after a period of 6 months from the date of intervention.”

16 Open Chest Heart Valve Surgery

The actual undergoing of open-heart surgery to replace or repair heart valve abnormalities. The diagnosis of heart valve abnormality must be supported by cardiac catheterization or echocardiogram and the procedure must be considered medically necessary by a consultant cardiologist.

17 Irreversible Loss of Speech

Total and irreversible loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist.

All psychiatric related causes are excluded.

18 Major Burns

Third degree (full thickness of the skin) burns covering at least 20% of the surface of the insured’s body.

19 Terminal Illness

The conclusive diagnosis of an illness that is expected to result in the death of the insured within 12 months. This diagnosis must be supported by a specialist and confirmed by Income’s appointed Registered Medical Practitioner.

Terminal illness in the presence of HIV infection is excluded.

20 HIV Due to Blood Transfusion and Occupationally Acquired HIV

- A. Infection with the Human Immunodeficiency Virus (HIV) through a blood transfusion, provided that all of the following conditions are met:
- The blood transfusion was medically necessary or given as part of a medical treatment;
 - The blood transfusion was received in Singapore after the Issue Date, Date of Endorsement or Date of Reinstatement of this policy, whichever is the later; and
 - The source of the infection is established to be from the Institution that provided the blood transfusion and the Institution is able to trace the origin of the HIV tainted blood.
- B. Infection with the Human Immunodeficiency Virus (HIV) which resulted from an accident occurring after the Issue Date, Date of Endorsement or Date of Reinstatement of this policy, whichever is the later whilst the insured was carrying out the normal professional duties of his or her occupation in Singapore, provided that all of the following are proven to Income's satisfaction:
- Proof that the accident involved a definite source of the HIV infected fluids;
 - Proof of sero-conversion from HIV negative to HIV positive occurring during the 180 days after the documented accident. This proof must include a negative HIV antibody test conducted within 5 days of the accident; and
 - HIV infection resulting from any other means including sexual activity and the use of intravenous drugs is excluded.

This benefit is only payable when the occupation of the insured is a medical practitioner, housemen, medical student, state registered nurse, medical laboratory technician, dentist (surgeon and nurse) or paramedical worker, working in medical centre or clinic (in Singapore).

This benefit will not apply under either section A or B where a cure has become available prior to the infection. "Cure" means any treatment that renders the HIV inactive or non-infectious.

21 End Stage Lung Disease

End stage lung disease, causing chronic respiratory failure. This diagnosis must be supported by evidence of all of the following:

- FEV₁ test results which are consistently less than 1 litre;
- Permanent supplementary oxygen therapy for hypoxemia;
- Arterial blood gas analyses with partial oxygen pressures of 55mmHg or less ($\text{PaO}_2 \leq 55\text{mmHg}$); and
- Dyspnea at rest.

The diagnosis must be confirmed by a respiratory physician.

22 End Stage Liver Failure

End stage liver failure as evidenced by all of the following:

- Permanent jaundice;

- Ascites; and
- Hepatic encephalopathy.

Liver disease secondary to alcohol or drug abuse is excluded.

23 Motor Neurone Disease

Motor neurone disease characterised by progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurones which include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis. This diagnosis must be confirmed by a neurologist as progressive and resulting in permanent neurological deficit.

24 Muscular Dystrophy

The unequivocal diagnosis of muscular dystrophy must be made by a consultant neurologist. The condition must result in the inability of the insured to perform (whether aided or unaided) at least 3 of the 6 “Activities of Daily Living” for a continuous period of at least 6 months.

For the purpose of this definition, “aided” shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

25 Idiopathic Parkinson’s Disease

The unequivocal diagnosis of idiopathic Parkinson’s Disease by a consultant neurologist. This diagnosis must be supported by all of the following conditions:

- The disease cannot be controlled with medication; and
- Inability of the insured to perform (whether aided or unaided) at least 3 of the 6 “Activities of Daily Living” for a continuous period of at least 6 months.

For the purpose of this definition, “aided” shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

26 Irreversible Aplastic Anaemia

Chronic persistent and irreversible bone marrow failure, confirmed by biopsy, which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:

- Blood product transfusion;
- Bone marrow stimulating agents;
- Immunosuppressive agents; or
- Bone marrow or haematopoietic stem cell transplantation.

The diagnosis must be confirmed by a haematologist.

27 Angioplasty & Other Invasive Treatment for Coronary Artery

The actual undergoing of balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of minimum 60% stenosis, of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist.

Coronary arteries herein refer to left main stem, left anterior descending, circumflex and right coronary artery.

Payment under this condition is limited to 10% of the Sum Assured under this policy subject to a S\$25,000 maximum sum payable. This benefit is payable once only and shall be deducted from the amount of this policy, thereby reducing the amount of the Sum Assured which may be payable herein.

Diagnostic angiography is excluded.

28 Severe Bacterial Meningitis

Bacterial infection resulting in severe inflammation of the membranes of the brain or spinal cord resulting in significant, irreversible and permanent neurological deficit. The neurological deficit must persist for at least 6 weeks. This diagnosis must be confirmed by:

- The presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and
- A consultant neurologist.

Bacterial Meningitis in the presence of HIV infection is excluded.

29 Benign Brain Tumor

Benign brain tumour means a non-malignant tumour located in the cranial vault and limited to the brain, meninges or cranial nerves where all of the following conditions are met:

- It has undergone surgical removal or, if inoperable, has caused a permanent neurological deficit; and
- Its presence must be confirmed by a neurologist or neurosurgeon and supported by findings on Magnetic Resonance Imaging, Computerised Tomography, or other reliable imaging techniques.

The following are excluded:

- Cysts;
- Abscess;
- Angioma;
- Granulomas;
- Vascular Malformations;
- Haematomas; and
- Tumours of the pituitary gland, spinal cord and skull base.

30 Severe Encephalitis

Severe inflammation of brain substance (cerebral hemisphere, brainstem or cerebellum) and resulting in permanent neurological deficit which must be documented for at least 6 weeks. This diagnosis must be certified by a consultant neurologist, and supported by any confirmatory diagnostic tests.

Encephalitis caused by HIV infection is excluded.

Others

The following two terms can be found in some of the above definitions, and their meanings are as follows:

1. Permanent Neurological Deficit

Permanent means expected to last throughout the lifetime of the insured.

Permanent neurological deficit means symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the lifetime of the insured. Symptoms that are covered include numbness, paralysis, localized weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, dementia, delirium and coma.

2. Activities of Daily Living (ADLs)

- (i) 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;
- (ii) Dressing - the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- (iii) Transferring - the ability to move from a bed to an upright chair or wheelchair and vice versa;
- (iv) Mobility - the ability to move indoors from room to room on level surfaces;
- (v) Toileting - the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- (vi) Feeding - the ability to feed oneself once food has been prepared and made available.

Note:

On diagnosis of a critical illness caused directly or indirectly from the following are excluded:

- I. Self-inflicted injury or illness
- II. Wilful misuse of drugs and/or alcohol
- III. Pre-existing conditions which were diagnosed prior to the effective date of the Member's coverage

- IV. Pre-existing conditions for which were the Member received medical treatment or investigations for medical conditions related directly or indirectly to the critical illness prior to the effective date of the Member's coverage
- V. Acquired Immunodeficiency Syndrome (AIDS), AIDS related complex or infection by Human Immunodeficiency Virus (HIV)
- VI. Diagnosis of cancer and/or coronary artery disease made within 90 days from the commencement date of the Member's coverage

(D) Daily Hospital Benefit

Daily cash payment for each day of hospitalisation in Singapore due to illness or injury, subject to a maximum of 365 days for each confinement.

Note:

Confinement to a hospital for an illness or injury caused directly or indirectly from the following are excluded:

- I. Strike, riot, civil commotion
- II. War or warlike operations
- III. Being under the influence of intoxicating liquor or any narcotic or drug
- IV. Suicide, attempted suicide, provoked assault, intentional self injury, or engaging in any brawl
- V. Insanity or any other disorders of the mind
- VI. Venereal disease, childbirth, pregnancy or miscarriage and their sequelae
- VII. Infertility, sub-infertility, assisted conception or contraceptive operation
- VIII. Congenital anomalies
- IX. An illness or injury which occurs during the first thirty days of the commencement of the Member's coverage
- X. Taking part in flying or other aerial activities except as a fare-paying passenger on a regular scheduled passenger flight of commercial aircraft

2. COVERAGE & PREMIUMS

You have the option of selecting your Sum Assured in multiples of \$10,000 up to a maximum of \$150,000.

Age next birthday (Years)	Annual premium for every \$10,000/- Sum Assured (per person)
Up to 45	\$28.90
46 – 55	\$41.60
56 – 60	\$80.80

For every \$10,000 sum assured, the daily hospital benefit shall be \$10 per day, subject to a maximum of \$150 per day.

You may insure your spouse up to a maximum of \$150,000/- and your children (above 5 years) up to maximum of \$50,000/- each, provided you are insured as well. For male children, the insurance cover shall cease upon their attainment of 21 years, National Service enlistment date or at the end of the Policy year, whichever is the earlier.

The Sum Assured for your spouse or children should also not exceed your Sum Assured.

A proposal received on or before the 15th day of the month will commence (upon approval) on the 1st day of the following month. For example, a proposal received on or before 15th June 2005 will commence (if approved) on 1st July 2005.

3. HOW TO FILE A CLAIM

In the event of any mishap, notice of a claim should be made on a prescribed form available from Income.

The following documents must be submitted together with the claim form:

For Death Claim

- (a) Certificate of Insurance
- (b) Copy of marriage/birth certificate
- (c) Copy of death certificate

For Disability/Critical Illness Claim

- (a) Medical report from your doctor
- (b) Clinical Abstract Application Form

For Hospitalization Claim

- (a) Original receipts/final medical bills

4. TERMINATION OF COVERAGE

The insurance coverage for all insured members will automatically cease upon:

- i. The termination of the Group Policy by the Policyholder.
- ii. The non-payment of premium.
- iii. The termination of the Principal Member's membership with the Policyholder.
- iv. The Principal Member attaining the age of 60 years.
- v. The termination of this assurance by the Principal Member.

The Insurance cover for insured spouse and female children shall also cease upon their attainment of 60 years. For insured male children, the insurance cover shall cease upon their attainment of 21 years or National Service Enlistment date, whichever is the earlier.

Notwithstanding the above, the Insured Member(s) shall continue to be covered under the group policy for the remaining period of the year for which premium has been paid.

5. INTERPRETATION OF THE PLAN

This information is designed to briefly describe the HomeTeamNS Living Policy. The final interpretation of any specific provision or its applicability is subject to the provision of the Group Policy issued by Income.

A person who is not party to the Group Policy shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

6. POLICY OWNERS' PROTECTION SCHEME

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact Income or visit the GIA/LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

7. REFUSING TO PAY A CLAIM

After the insured or Principal Member have been continuously covered for one year from the cover commencement date or reinstatement date, Income will pay the claim unless:

- it is a case of fraud;
- the Principal Member fails to pay a premium;
- the insured or Principal Member has a material pre-existing condition which the insured or Principal Member did not tell Income about when the Principal Member applied for this Policy if health declaration is required;
- the insured or Principal Member fails to tell Income any significant information or information which is true, correct and complete which would have reasonably affected Income's decision to accept the Principal Member's application; or
- the claim is excluded or not covered under the terms of this Policy.