

KEEPING IT SIMPLE.

We've put together this guide to give you a hand with the who, what and how of our Critical Illness Cover. Everything you need to know about the 39 illnesses we cover is in here. Plain and simple. Why complicate things?

INTRODUCTION.

This guide explains our critical illness cover plans, including the illnesses and conditions we cover, what we exclude and how to make a claim.

As the range and definitions of the critical illnesses we cover may vary from time to time, you should check your policy document to see exactly which illnesses you are covered for.

WHY SHOULD I CONSIDER HAVING A CRITICAL ILLNESS COVER PLAN?

No one wants to think they'll be struck down with a critical illness – but it can affect anyone, at any age and any time.

If this happened to you, have you thought how you'd cope financially? How would your family manage?

Could you afford to take time off work or pay for expensive medical treatment?

The good news is that these days there is a good chance of surviving a critical illness because medical diagnosis and treatment has progressed so much.

That's why it's worth considering one of our critical illness cover plans. If this happened to you, we could pay out a lump sum which you could use to help pay off your mortgage for example, or invest for a regular income, leaving you to concentrate on getting better.

HOW DOES CRITICAL ILLNESS COVER WORK?

Depending on the type of plan you choose, we'll pay a lump sum or monthly benefit if you're diagnosed as having one of the critical illnesses we cover, as long as you're diagnosed during the term of the plan and you're eligible to claim. It also covers you if you die during the term of the plan.

There are several ways that critical illness cover could help look after you and your family financially. It could:

- Provide a lump sum which you could use to make any necessary alterations to your home, invest for a regular income or pay for medical treatment and expenses.
- Provide a monthly benefit to cover your monthly expenses, if chosen as part of our Family and Personal Income Plan.
- Help with your mortgage. You can choose either level or decreasing cover. Level cover pays the same amount whenever you claim during your plan. Decreasing cover reduces during your plan, approximately in line with the amount you owe on a repayment mortgage.

WHAT ELSE DOES THE COVER INCLUDE?

Children's critical illness cover

Our critical illness cover also protects your children. The plan automatically covers:

- your children;
- step children;
- legally adopted children; and
- any children you may have in the future.

Find out more on page 26.

LIFE COVER

This pays out a lump sum or monthly benefit, depending on the product chosen, if you die or are diagnosed with a terminal illness.

WHAT CRITICAL ILLNESSES ARE COVERED?

The following pages provide details of the critical illnesses covered by your policy. Please read through the definitions carefully so that you get a better understanding of what you are, and are not, covered for. Views of what constitutes a critical illness are constantly changing. What may once have been considered a critical illness years ago may not be regarded as a critical illness today. For example, we don't cover all types of cancers as not all cancers will have a severe impact on your lifestyle if they're detected early enough.

► CRITICAL ILLNESSES COVERED BY YOUR LEGAL & GENERAL PLAN.

Our plans cover 39 illnesses in total. The Association of British Insurers (ABI), which is one of our trade bodies, lists 23 illnesses in their statement of best practice for critical illness cover. Our plans cover all 23 ABI listed illnesses (and in some instances our definitions exceeds the ABI definition) plus 16 extra illnesses, providing you with wider cover.

A list of all the illnesses covered by your plan is provided in the following pages. For each illness we've first provided the formal definition as it's stated in your policy document and then given some more background information to help you understand exactly what you are, and are not, covered for.

Please note that where we refer to 'you' or 'your' in the following pages we are referring to the person/s whose life is covered by the policy.

ALZHEIMER'S DISEASE – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Alzheimer's disease by a Consultant Neurologist, Psychiatrist or Geriatrician.

There must be permanent clinical loss of 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:

- Other types of dementia.

WHAT DOES THIS MEAN?

Alzheimer's disease is a condition which affects the brain. Symptoms include memory loss, confusion, communication problems and general impairment of mental function. The condition gradually worsens, which can lead to changes in personality and makes routine tasks difficult. Eventually, 24 hour care may be needed.

AORTA GRAFT SURGERY – requiring surgical replacement

POLICY DEFINITION

The undergoing of 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.

WHAT DOES THIS MEAN?

The aorta is the body's main artery carrying blood from the heart. This definition covers surgery to the aorta, where part of it is removed and replaced with a graft. Surgery may be needed to correct a weakening or bulging in the artery. It covers only the aorta, which is the main blood vessel in the chest and abdomen. This definition doesn't cover the branches of the aorta.

We cover surgery for traumatic injury, as well as the ABI standard of surgery following disease.

APLASTIC ANAEMIA – with permanent bone marrow failure

POLICY DEFINITION

A definite diagnosis of Aplastic Anaemia by a Consultant Haematologist. There must be permanent bone marrow failure with anaemia, neutropenia and thrombocytopenia.

WHAT DOES THIS MEAN?

Aplastic anaemia is a rare but serious condition where bone marrow fails to produce sufficient blood cells or clotting agents. Symptoms include shortness of breath, excessive bleeding and an increased chance of catching infections. It can be life-threatening if left untreated.

BACTERIAL MENINGITIS – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Bacterial Meningitis resulting in permanent neurological deficit with persisting clinical symptoms*.

For the above definition, the following are not covered:

- All other forms of meningitis other than those caused by bacterial infection.

WHAT DOES THIS MEAN?

Bacterial meningitis causes inflammation to the meninges, which is the protective layer around the brain and spinal cord. It's caused by a bacterial infection and needs prompt medical treatment. Initial symptoms include headache, fever and vomiting. If left untreated, it can result in brain damage or death.

Some people will recover completely, while others will be left with permanent symptoms, which may affect their mobility or use of senses. This definition only covers people left with permanent symptoms.

This definition covers the bacterial form of meningitis. It excludes all other forms of meningitis – like viral meningitis, which is usually milder.

* See page 25

BENIGN BRAIN TUMOUR – resulting in either surgical removal or permanent symptoms**POLICY DEFINITION**

A non-malignant tumour or cyst in the brain, cranial nerves or meninges within the skull, resulting in either surgical removal or permanent neurological deficit with persisting clinical symptoms*.

For the above definition, the following are not covered:

- Tumours in the pituitary gland.
- Angiomas.

WHAT DOES THIS MEAN?

A benign brain tumour is a non-cancerous abnormal growth of tissue that can increase in size and cause pressure in the brain. Symptoms may vary depending on where the tumour is but may include headaches, seizures and blurred vision. Surgery to remove the tumour might be possible and once removed they tend not to recur.

However, surgery isn't always an option due to the size or location of the tumour.

This definition covers surgical removal of a tumour (whether permanent neurological symptoms persist or not) and tumours where surgery has not been performed but which result in permanent neurological symptoms.

This definition doesn't cover tumours in the pituitary gland (a small gland within the brain) and angiomas (a benign tumour of blood vessels).

BLINDNESS – permanent and irreversible**POLICY DEFINITION**

Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

WHAT DOES THIS MEAN?

This means permanent loss of vision. It's measured with a Snellen eye chart: the chart commonly used by opticians, which consists of a gradually decreasing series of letters and numbers. 3/60 vision means you can read a letter at three metres that can normally be read at 60 metres. To claim, your vision must be 3/60 or worse in your better eye.

This definition doesn't cover temporary blindness.

* See page 25

CANCER – excluding less advanced cases**POLICY DEFINITION**

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, lymphoma and sarcoma.

For the above definition, the following are not covered:

- All cancers which are histologically classified as any of the following:
 - pre-malignant;
 - non-invasive;
 - cancer in situ;
 - having either borderline malignancy; or
 - having low malignant potential.
- All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0.
- Chronic lymphocytic leukaemia unless histologically classified as having progressed to at least Binet Stage A.
- Any skin cancer other than malignant melanoma that has been histologically classified as having caused invasion beyond the epidermis (outer layer of skin).

WHAT DOES THIS MEAN?

Cancer (also known as a malignant tumour) is a disease where normal cells change and grow in an abnormal way. If left untreated, they can destroy surrounding healthy cells and eventually destroy healthy cells in other parts of the body.

There are about 200 different types of cancer, varying widely in outlook and treatment.

Some cancers are not covered by this definition. These tend to be ones that have not yet spread or are localised and can usually be successfully treated. Examples of these include some skin cancers and early stage prostate cancer.

CARDIOMYOPATHY – of specified severity**POLICY DEFINITION**

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's of functional capacity[†].

For the above definition, the following are not covered:

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

[†] NYHA Class 3. Heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain.

WHAT DOES THIS MEAN?

Cardiomyopathy is the name given to a group of disorders affecting the muscles of the heart that affect its function. Symptoms vary depending on the type of Cardiomyopathy, but may include shortness of breath, fainting and palpitations.

The New York Heart Association (NYHA) functional classification system is commonly used in the UK to assess heart function. The system relates symptoms to everyday activities and the patient's quality of life.

NYHA Class 3 is 'Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes fatigue, palpitation or dyspnoea.' (Source: Heart Failure Society of America, 2007).

Note: Dyspnoea is difficulty in breathing.

COMA – resulting in permanent symptoms**POLICY DEFINITION**

A state of unconsciousness with no reaction to external stimuli or internal needs, which results in permanent neurological deficit with persisting clinical symptoms*.

For the above definition the following is not covered:

- Coma secondary to alcohol or drug abuse.

WHAT DOES THIS MEAN?

A coma is a state of unconsciousness from which the patient cannot be aroused and has no control over bodily functions. It may be caused by illness, stroke, infection, very low blood sugar or serious accident. Recovery rates vary, depending upon the depth and duration of the coma.

While the ABI define a coma as lasting 'at least 96 hours', we don't set a time limit. Our definition does not require the use of life support systems.

* See page 25

CORONARY ARTERY BY-PASS GRAFTS – with surgical thoracotomy

POLICY DEFINITION

The undergoing of surgery requiring anterolateral thoracotomy on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts.

For the above definition, the following are not covered:

- balloon angioplasty;
- atherectomy;
- rotablation;
- insertion of stents; and
- laser treatment.

WHAT DOES THIS MEAN?

Coronary arteries can become narrowed or blocked by the build up of fatty deposits caused by poor lifestyle such as high fat diet, smoking and high blood pressure. This may cause symptoms including chest pain and can sometimes cause a heart attack. Coronary artery by-pass surgery is used to treat blocked arteries in the heart by diverting the blood supply around the blocked artery using a vein, usually taken from the leg, arm or chest.

This definition covers surgery if it requires the heart to be reached by a surgical incision through the chest wall to replace the blocked arteries with a vein. This definition doesn't cover other surgical procedures to treat blocked arteries such as balloon angioplasty or insertion of stents.

CREUTZFELDT-JAKOB DISEASE (CJD) – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Creutzfeldt-Jakob disease made by a Consultant Neurologist. There must be permanent clinical loss of the ability in mental and social functioning to the extent that permanent supervision or assistance by a third party is required.

WHAT DOES THIS MEAN?

Creutzfeldt-Jakob disease (CJD) is a rare disease of the nervous system. CJD can be present without symptoms for many years. Once they appear, symptoms may include failing memory, problems with vision, immobility, loss of speech and coma in advanced stages. There is currently no known cure.

DEAFNESS – permanent and irreversible**POLICY DEFINITION**

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.

WHAT DOES THIS MEAN?

This means permanent loss of hearing in both ears, measured by using an audiogram across different frequencies, which vary from low to high pitch. The hearing loss must be across all frequencies. This definition doesn't cover partial loss of hearing.

DEMENTIA – resulting in permanent symptoms**POLICY DEFINITION**

A definite diagnosis of Dementia by a Consultant Neurologist, Psychiatrist or Geriatrician. The diagnosis must be supported by evidence of progressive loss of ability to do all of the following:

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

For the above definition, the following are not covered:

- Dementia secondary to alcohol or drug abuse.

WHAT DOES THIS MEAN?

Dementia is a term used to describe various different brain disorders that have in common a loss of brain function. Symptoms may include memory loss, confusion and the inability to reason. Dementia is usually progressive and eventually severe. It causes the sufferer to become confused and disorientated and often unable to perform routine tasks like cooking a meal.

ENCEPHALITIS – resulting in permanent symptoms**POLICY DEFINITION**

A definite diagnosis of Encephalitis by a Consultant Neurologist resulting in permanent neurological deficit with persisting clinical symptoms*.

WHAT DOES THIS MEAN?

Encephalitis is inflammation of brain tissue. It is usually caused by an infection. Symptoms might include severe headache, nausea, vomiting, convulsions, personality changes, problems with speech and/or hearing, confusion and disorientation. Encephalitis can range in severity from relatively mild to life threatening.

* See page 25

HEART ATTACK – of specified severity

POLICY DEFINITION

Death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:

- New characteristic electrocardiographic changes.
- The characteristic rise of cardiac enzymes or Troponins recorded at the following levels or higher;
 - Troponin T > 1.0 ng/ml
 - AccuTnl > 0.5 ng/ml or equivalent threshold with other Troponin I methods.

The evidence must show a definite acute myocardial infarction.

For the above definition, the following are not covered:

- Other acute coronary syndromes including but not limited to angina.

WHAT DOES THIS MEAN?

A heart attack, also known as a myocardial infarction, happens when part of the heart muscle dies because it has been starved of oxygen. This causes severe pain and an increase in cardiac enzymes and Troponins, which are released into the blood stream from the damaged heart muscle.

Our definition doesn't include the words 'typical clinical symptoms (for example, characteristic chest pain)' as in the ABI's 'Heart attack' definition. This is because other tests can prove that a heart attack has taken place and it's possible to have a heart attack without common symptoms such as chest pain.

This definition doesn't cover angina or any other heart condition.

HEART VALVE REPLACEMENT OR REPAIR – with surgical thoracotomy

POLICY DEFINITION

The undergoing of surgery requiring anterolateral thoracotomy on the advice of a Consultant Cardiologist to replace or repair one or more heart valves.

WHAT DOES THIS MEAN?

Healthy heart valves are important to make sure blood flows through the heart in the right direction so that blood is circulated around the body efficiently. There are various causes of heart valve disease including birth defects, rheumatic fever, age and other heart related conditions such as cardiomyopathy. Symptoms of heart valve disease include breathlessness, chest pain, swelling of the ankles and legs and fainting. This definition covers surgery to a heart valve if it requires open heart surgery, reached by a surgical incision through the chest wall.

This definition doesn't cover surgical procedures that don't involve open heart surgery.

HIV INFECTION – caught from a blood transfusion, physical assault or accident at work**POLICY DEFINITION**

Infection by Human Immunodeficiency Virus 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 start of the policy 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 one of the following countries: Australia, Austria, Belgium, Bulgaria, Canada, the Channel Islands, Cyprus, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Gibraltar, Greece, Hong Kong, Hungary, Iceland, the Isle of Man, Italy, Japan, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, the Netherlands, New Zealand, Norway, Poland, Portugal, Republic of Ireland, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, the United Kingdom and the United States of America.

For the above definition, the following is not covered:

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

WHAT DOES THIS MEAN?

This definition covers HIV infection from a blood transfusion, physical assault or when caught at work.

HIV can lead to the development of Acquired Immune Deficiency Syndrome (AIDS). This is when the body's immune system breaks down, increasing the risk of infections and tumours. Although there are treatments for AIDS and HIV to slow down the virus's progression, there is currently no known cure.

When HIV is caught during an incident at work, our definition includes all occupations with established reporting procedures.

This definition doesn't cover HIV infection through other means, including sexual activity or drug abuse.

KIDNEY FAILURE – requiring dialysis

POLICY DEFINITION

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

WHAT DOES THIS MEAN?

The kidneys perform an important role filtering the body's waste to pass as urine. If the kidneys fail, there is a harmful build up of the body's waste products. In severe cases it may be necessary for the filtering to be done by a dialysis machine or, in some cases, a transplant may be needed. Kidney failure can become life threatening. This definition covers kidney failure that requires dialysis.

LIVER FAILURE – of advanced stage

POLICY DEFINITION

Liver failure due to cirrhosis and resulting in all of the following:

- permanent jaundice
- ascites
- encephalopathy

For the above definition, the following are not covered:

- Liver disease secondary to alcohol or drug abuse.

WHAT DOES THIS MEAN?

The liver is an important organ, which carries out several of the body's vital functions such as helping with digestion and clearing toxins. This definition covers liver failure at an advanced stage.

This type of liver failure must lead to permanent jaundice (yellow discolouration of the skin), ascites (build up of fluid in the abdomen), and encephalopathy (brain disease or damage).

This definition doesn't cover liver disease that's secondary to alcohol or drug abuse.

LOSS OF A HAND OR FOOT – permanent physical severance**POLICY DEFINITION**

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

WHAT DOES THIS MEAN?

This means physical severance and may be caused by illness or serious accident. This definition only requires severance of either a hand or foot above the wrist or ankle joints.

LOSS OF SPEECH – permanent and irreversible**POLICY DEFINITION**

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

WHAT DOES THIS MEAN?

This is when you won't be able to talk again. It's often caused when the vocal cords need to be removed because of a tumour or a serious injury.

This definition doesn't cover temporary loss of speech.

MAJOR ORGAN TRANSPLANT**POLICY DEFINITION**

The undergoing as a recipient of a transplant of bone marrow or of a complete heart, kidney, liver, lung, or pancreas, or inclusion on an official UK waiting list for such a procedure.

For the above definition, the following is not covered:

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

WHAT DOES THIS MEAN?

Occasionally, an organ may become so diseased that it needs to be replaced.

You will be covered as soon as you are put on the official UK waiting list because it may take a long time to find a donor.

This definition doesn't cover donating an organ.

MASTECTOMY FOR DUCTAL CARCINOMA IN SITU – requiring total removal of the breast

POLICY DEFINITION

The undergoing of a mastectomy operation (total removal of all the tissue of at least one breast) on the advice of your hospital consultant following the diagnosis of ductal carcinoma in situ of the breast.

For the above definition, the following are not covered:

- Prophylactic mastectomy without histological evidence of ductal carcinoma in situ, and
- Any other surgical procedures such as lumpectomy, partial mastectomy and partial or total sub cutaneous mastectomy.

WHAT DOES THIS MEAN?

Early cancerous changes in the breast may occur before the cancer spreads to other parts of the body (this is called in situ cancer). In these circumstances, removal of the breast (mastectomy) may be advised to protect against the disease spreading.

This definition doesn't cover partial breast removal or lump removal only.

See page 25 for more information on claims paid out under our mastectomy definition.

MOTOR NEURONE DISEASE – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Motor Neurone Disease by a Consultant Neurologist. There must be permanent clinical impairment of motor function.

WHAT DOES THIS MEAN?

Motor neurone disease (MND) is a gradual weakening and wasting of the muscles, usually beginning in the arms and legs. This may cause difficulty walking or holding objects. As the disease develops, other muscle groups may be affected, such as those involving speech, swallowing and breathing. Eventually, 24 hour care may be needed.

The progression rate of MND varies between individual sufferers. An effective treatment has yet to be discovered.

MULTIPLE SCLEROSIS – with persisting symptoms

POLICY DEFINITION

A definite diagnosis of Multiple Sclerosis by a Consultant Neurologist. There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least six months.

WHAT DOES THIS MEAN?

Multiple sclerosis (MS) is the most common disabling neurological disease among young adults and is usually diagnosed between the ages of 20 and 40.

Symptoms may be slight, particularly in the early stages. Symptoms may include changes in vision, altered sensation, loss of muscle strength and lack of coordination. To claim, the symptoms need to occur continuously for six months or more. There's no known cure and treatment aims to manage symptoms only.

MULTIPLE SYSTEM ATROPHY – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Multiple System Atrophy by a Consultant Neurologist. There must be evidence of permanent clinical impairment of either:

- motor function with associated rigidity of movement; or
- the ability to coordinate muscle movement; or
- bladder control and postural hypotension.

WHAT DOES THIS MEAN?

Multiple system atrophy is a progressive disease of the nervous system. Symptoms are varied and include muscle weakness, swallowing difficulties and increasingly severe impairment of physical function. There are treatments to delay some of the symptoms of the disease but no cure currently exists and life expectancy is greatly reduced.

OPEN HEART SURGERY – with Median Sternotomy

POLICY DEFINITION

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiologist to correct any structural abnormality of the heart.

WHAT DOES THIS MEAN?

Open heart surgery is an operation in which the heart is opened by a surgical incision for a corrective procedure to be carried out. This definition covers any surgery which involves dividing the breast bone.

This definition doesn't cover other surgical procedures, such as balloon angioplasty or insertion of stents.

PARALYSIS OF A LIMB – total and irreversible

POLICY DEFINITION

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

WHAT DOES THIS MEAN?

Paralysis is the complete loss of use. It may be caused by injury or illness.

A limb is an arm or leg.

PARKINSON'S DISEASE – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Parkinson's disease by a Consultant Neurologist. There must be permanent clinical impairment of motor function with associated tremor, rigidity of movement and postural instability.

WHAT DOES THIS MEAN?

Parkinson's disease is a slowly progressive disease of the brain. Symptoms can include tremors (uncontrollable shaking or trembling), muscle stiffness and slowness of movement. Treatment focuses on slowing the progression of symptoms. There's currently no known cure.

PRIMARY PULMONARY HYPERTENSION – of specified severity

POLICY DEFINITION

A definite diagnosis of Primary Pulmonary Hypertension. 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's of functional capacity[†].

For the above definition, the following are not covered:

- Pulmonary Hypertension secondary to any other known cause i.e. not Primary.

[†] NYHA Class 3. Heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain.

WHAT DOES THIS MEAN?

Primary pulmonary hypertension is abnormally high blood pressure in the arteries of the lungs.

It's a rare but serious condition, causing a range of symptoms. These commonly include breathlessness, dizziness, fainting, chest pain and palpitations. Symptoms can occur at rest or during mild exercise.

The New York Heart Association (NYHA) functional classification system is commonly used in the UK to assess heart function. The system relates symptoms to everyday activities and the patient's quality of life.

NYHA Class 3 is 'Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes fatigue, palpitation or dyspnoea.' (Source: Heart Failure Society of America, 2007)

Note: Dyspnoea is difficulty in breathing.

Primary pulmonary hypertension may eventually lead to heart failure.

PROGRESSIVE SUPRANUCLEAR PALSY – resulting in permanent symptoms

POLICY DEFINITION

A definite diagnosis of Progressive Supranuclear Palsy by a Consultant Neurologist. There must be permanent clinical impairment of eye movements and motor function.

WHAT DOES THIS MEAN?

Progressive supranuclear palsy (PSP) is a brain disease that develops slowly. It progresses to seriously affect vision and movement. PSP can also cause changes in behaviour and personality, memory loss and slurred speech.

As the disease progresses, the ability to swallow becomes difficult and physical movement less stable. 'Weighted walkers' and wheelchairs may be needed for mobility and communication may also become more difficult.

The effect and pattern of the disease varies between sufferers. Most cases start between ages 50 and 60, although it can occur from the late thirties onwards.

There's currently no effective treatment or cure.

REMOVAL OF AN EYEBALL – due to injury or disease

POLICY DEFINITION

Surgical removal of an eyeball as a result of injury or disease.

For the above definition the following is not covered:

- Self inflicted injuries.

WHAT DOES THIS MEAN?

This means total removal of either eye due to illness or injury.

RESPIRATORY FAILURE – of advanced stage

POLICY DEFINITION

Advanced stage emphysema or other chronic lung disease, resulting in all of the following:

- The need for regular oxygen treatment on a permanent basis.
- The permanent impairment of lung function tests as follows; Forced Vital Capacity (FVC) and Forced Expiratory Volume at 1 second (FEV1) being less than 50% of normal.

WHAT DOES THIS MEAN?

The lungs allow us to breathe in oxygen and get rid of harmful carbon dioxide. This definition covers advanced lung failure when breathing is severely affected and regular oxygen therapy is required.

Respiratory failure may be described by some insurers as 'chronic lung disease' or 'severe lung disease'.

STROKE – resulting in permanent symptoms

POLICY DEFINITION

Death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in permanent neurological deficit with persisting clinical symptoms*.

For the above definition, the following are not covered:

- Transient ischaemic attack.
- Traumatic injury to brain tissue or blood vessels.

WHAT DOES THIS MEAN?

Strokes are caused by a sudden loss of blood supply or haemorrhage to a particular part of the brain.

The symptoms and how well a person recovers will depend on which part of the brain is affected and the extent of the damage. Strokes are a significant cause of disability in the UK.

A transient ischaemic attack, sometimes referred to as a 'mini-stroke', is similar to a stroke. These are not covered by this definition, because symptoms aren't permanent and will disappear within 24 hours.

* See page 25

SYSTEMIC LUPUS ERYTHEMATOSUS – with severe complications

POLICY DEFINITION

A definite diagnosis of Systemic Lupus Erythematosus by a Consultant Rheumatologist resulting in either of the following:

- Permanent neurological deficit with persisting clinical symptoms*; or
- The permanent impairment of kidney function tests as follows; Glomerular Filtration Rate (GFR) below 30 ml/min.

WHAT DOES THIS MEAN?

Systemic lupus erythematosus (SLE), sometimes called 'lupus', involves chronic inflammation of body tissues caused by autoimmune disease. Autoimmune diseases are illnesses that occur when the body's tissues are attacked by its own immune system, i.e. the body creates antibodies, which work against it.

SLE causes a variety of symptoms, which may flare up from time to time but rarely disappear completely. These may include painful, swollen joints, unexplained fever and extreme fatigue. 'Systemic' means it can affect many parts of the body, from the skin to joints and kidneys.

Although it can occur at any age, it's more common in women in their early twenties. There's currently no known cure and treatment involves managing symptoms.

TERMINAL ILLNESS

POLICY DEFINITION

Advanced or rapidly progressing incurable illness where, in the opinions of an attending Consultant and our Chief Medical Officer, the life expectancy is no greater than 12 months.

For the above definition, the following is not covered:

- Terminal Illness as defined above during the last eighteen months of the policy.

WHAT DOES THIS MEAN?

This definition provides cover for illnesses or conditions where the life expectancy is 12 months or less.

* See page 25

THIRD DEGREE BURNS – covering 20% of the surface area of the body or 50% of the face or head

POLICY DEFINITION

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 covering 50% of the area of the face or head.

WHAT DOES THIS MEAN?

Third degree burns are the most serious type of burns, involving the full thickness of the skin and underlying connective tissue.

These can be life threatening and need numerous skin grafts.

The burns must cover at least 20% of the body's surface area or 50% of the face or head.

TOTAL AND PERMANENT DISABILITY

POLICY DEFINITION

Your plan will pay out if you are totally and permanently disabled. There are two types of cover:

1. Own occupation definition

If, when you take out your plan, your occupation is class 1 or 2, you can choose to take the own occupation definition of Total and Permanent Disability. This means your plan will pay out if you are totally unable to follow your own occupation due to illness or an accident, and in Legal & General's opinion, are likely to remain so permanently.

You'll be assessed on the occupation you were following immediately before the onset of disability. However, if you are not in gainful employment at the time of a claim, then your claim will be assessed under the Functional Assessment Tests definition described overleaf. Full details are provided in your policy document.

WHAT DOES THIS MEAN?

This benefit may cover any condition not specifically covered elsewhere, which results in total and permanent disability. The exact definition that applies to you depends upon your occupation and is in the policy document.

'Permanent' is defined as "expected to last throughout the insured person's life, irrespective of when the cover ends or the insured person retires."

TOTAL AND PERMANENT DISABILITY *continued*

POLICY DEFINITION *continued*

2. Functional Assessment Tests Definition

This definition applies to all other occupation classes, those not in gainful employment and those in occupation classes 1 or 2 who do not choose the own occupation definition. Under this definition the plan will pay out if, due to illness or accident, you suffer an irreversible mental or physical disability which, in the opinion of Legal & General's Chief Medical Officer, results in you being permanently unable to carry out at least three of the following Functional Assessment Tests without the help of another person.

These tests include:

- Walking – the ability to walk a distance of 200 metres on flat ground with or without the aid of a walking stick and without stopping or experiencing discomfort.
- Bending – the ability to get into or out of a standard saloon car and the ability to bend or kneel to pick up an object from the floor and straighten up again.
- Communicating – the ability to answer a telephone and to take a message.
- Reading – having the required eyesight (corrected if necessary) to be able to read a daily newspaper.
- Writing – having the physical ability to write legibly using a pen or pencil without aid.
- Climbing – having the ability to climb up a flight of 12 stairs without stopping or suffering severe discomfort.

You do not need to notify us if you change your occupation during the term of the plan.

For joint life plans, only one definition of disability will apply to both lives if both of you are in gainful employment.

To see what definition applies to you, please see your personal illustration. The full definition of total and permanent disability can be found in your policy document.

WHAT DOES THIS MEAN?

All reasonable treatment options must have been tried and given sufficient time to work before making a claim.

TRAUMATIC HEAD INJURY – resulting in permanent symptoms

POLICY DEFINITION

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

WHAT DOES THIS MEAN?

Traumatic head injury is covered by this definition when permanent symptoms result from the injury. An example is a severe head injury caused by a road accident.

CLAIMS UNDER THE MASTECTOMY DEFINITION

If you make a valid claim under our mastectomy definition we'll pay out an additional payment of 25% of your current sum assured or £25,000, whichever is less. This helps ensure that you have some financial protection against the impact a mastectomy will have on your lifestyle, and also means that your full sum assured is still intact in case you suffer another critical illness. This additional payment won't affect your cover or premium.

* Permanent neurological deficit with persisting clinical symptoms

Symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the insured person's life.

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.

▶ CHILDREN'S CRITICAL ILLNESS COVER.

We automatically include children's cover with your policy. This will cover any natural child, legally adopted child or stepchild of the person/s covered, and also any children you may have in the future.

We'll pay a lump sum if a child is diagnosed with one of the critical illnesses we cover during your plan, as long as they survive for 14 days from diagnosis.

HOW MUCH BENEFIT IS PAID FOR CHILDREN'S COVER?

The most we pay for a child under this policy is £25,000 or 50% of the sum assured, whichever is lowest. For our Family and Personal Income Plan, the maximum we pay for a child is up to £25,000, or 60 times the chosen monthly benefit, whichever is lowest.

This is the maximum amount we'll pay out, regardless of how many Legal & General critical illness policies you have.

ELIGIBILITY

Children are covered provided they are more than 30 days old and less than 18 years old. The 14 day survival period may extend beyond their 18th birthday.

WHICH CRITICAL ILLNESSES ARE CHILDREN COVERED FOR?

Children are covered for the same critical illnesses covered by the plan, except for total and permanent disability. Children's cover is only for the defined critical illnesses and isn't paid on a child's death.

ARE THERE ANY EXCLUSIONS FOR CHILDREN'S COVER?

As well as total and permanent disability, children's cover also excludes any condition that arises as a direct or indirect result of congenital (present at birth), hereditary and pre-existing conditions.

WHEN WILL CHILDREN'S CRITICAL ILLNESS COVER END?

We'll only pay one claim for each child and once two claims have been accepted, children's critical illness cover will end. However, cover will continue for you.

Children's cover will also end once you make a claim yourself.

WHAT IF I AM PLANNING ON GOING ABROAD?

You must be resident in the United Kingdom to apply for a new policy.

Your Legal & General Critical Illness Cover Plan continues if you live in or travel to any part of the European Union, USA, Canada, Australia, New Zealand, the Isle of Man, or Channel Islands. If you live in any other countries for more than 12 months, we reserve the right to decline a claim under the policy.

A man with grey hair, wearing a light-colored checkered shirt, is seen from the back and side, holding a black mobile phone to his ear. The background is a blurred indoor setting with a wooden frame.

HOW DO I MAKE A CLAIM?



If you or your representatives need to make a claim, please write to us at:

**Claims Department
Legal & General Assurance Society Limited
City Park
The Droveaway
Hove
East Sussex
BN3 7PY**

We'll then send you a claim form to fill in and return to us. When we look at your claim we might ask you for certificates or other evidence, and we may ask you to take a medical examination. All diagnoses and medical opinions must be provided by a medical specialist:

- who is a consultant at a hospital in the UK;
- whose specialism is appropriate to the cause of the claim; and
- who is accepted by our Chief Medical Officer.



For more information please contact your usual financial adviser.



Legal & General Assurance Society Limited.

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We are authorised and regulated by the Financial Services Authority.

We are members of the Association of British Insurers.

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