

critical illness plan



Key features

Peace of mind from
the financial impact of
serious illness - the
'critical five'

This is not a policy document.
Please refer to your policy document for
the full terms and conditions of the policy

DID YOU KNOW THAT?

Over 21,000¹ new cancer cases are diagnosed each year with the number of new cancer cases expected to increase by 108% between 2010 and 2030.²

8,500 people suffer a stroke in Ireland each year.³

Chronic nephritis, a persistent, destructive inflammation of both kidneys accounts for well over **60%** of the deaths from terminal kidney failure.⁴



Sources: ¹Donnelly DW, Gavin AT and Comber H. Cancer in Ireland: A summary report. Northern Ireland Cancer Registry/National Cancer Registry, Ireland; 2009, ²National Cancer Registry (2008). Cancer projections 2005-2035. National Cancer Registry, Cork. ³Hunter, Niall, "Stroke-how we could save 500 lives a year" [Online] Available <http://www.irishhealth.com/article.html?id=7486> 01/05/09 , ⁴"Kidney disease" [Online] Available <http://www.irishhealth.com/article.html?con=356#q9> 05/05/09



Today you are more likely to survive a serious illness than to die, with survival rates for cancer continuing to rise even though the number of cases being diagnosed is increasing.¹

However, the impact on your life will be significant. The 'Critical Five' Plan can ease the financial strain for you and your family by making available a tax-free lump sum which you can use to pay for the best medical treatment, to reduce your mortgage, to take a family holiday - whatever you please - the choice is yours.



This key features document gives you the main points about the critical illness plan you're considering. It should be read with any quotation. Please read it carefully and keep it with your plan documents.

ITS AIMS

- To pay you a guaranteed lump sum for a specified critical illness or surgery provided that:
 - You survive for at least 28 days following diagnosis or surgery
 - The covered condition, its diagnosis and initial consultation take place after the policy has been in force for at least 90 days.

YOUR COMMITMENT

- To give us all the medical and other information we ask for when applying for your plan and when claiming. If you don't do this we may not pay you.
- You agree to pay regular premiums throughout the duration of the policy to keep the cover in force, up to age 70. Premiums can be paid monthly, quarterly, semi-annually or annually.
- To tell us of any claim within the time limits we set.

RISK FACTORS

- If you do not provide any information we ask for, we will not pay out under the plan. All information must be entered on the application form before you sign it.
- If you stop paying your premiums your cover will lapse after 31 days.
- Your premium may increase when we review our premium rates in the light of our claims experience. Your premium will only increase if we apply a general increase to all policyholders. We will tell you if we intend to do so.
- We will not pay out in the circumstances described under the heading 'When will the plan not pay out?' on page 3.
- The policy has no surrender value.

QUESTIONS AND ANSWERS

What is the Combined 'Critical Five' Plan?

It is an insurance plan that pays out a guaranteed lump sum on surviving diagnosis or surgery for a specified critical illness by at least 28 days.

You decide the amount of cover you want that best suits your needs and budget.

You may be covered under this plan if you are aged between 16 and 64 years (inclusive).

You must pay your premiums to keep your cover in force.

You can continue cover until age 70 or until a claim is made, whichever is the earliest.

Your policy can cover your eligible children, see 'Which Critical Illnesses are covered?' on page 3.

Claims for your children do not affect your cover.

To be covered, eligible children must be named in the policy or added later, by notifying Combined in writing.

When does the plan pay out?

The plan pays out a guaranteed lump sum on surviving diagnosis or surgery for a specified critical illness by at least 28 days. The covered condition, its diagnosis and initial consultation must take place after the policy has been in force for at least 90 days.

Cancer benefits are double those paid for other conditions under this plan, see 'Which Critical Illnesses are covered?' below.

Which Critical Illnesses are covered?

The complete list of conditions covered by the Combined 'Critical Five' Plan is as follows:

- Cancer
- Coronary Artery By-pass Surgery
- Heart Attack
- Kidney Failure
- Stroke

Please remember that the heading of each critical illness is only a guide to what is covered.

For example, some types of cancer are not covered. Further details of how we will consider your claim, including the full definitions we will use and the evidence we will need, are given in the policy provisions. You can ask us for a copy of this.

Eligible dependent children, from age 3 to 15 inclusive, are also covered free of charge for the listed conditions, as long as the policy is in force. For a child's claim, we will pay 50% of your benefit and we will pay only one claim for each child.



When will the plan not pay out?

We will not pay a claim:

- If you do not tell us about your claim within 6 months of diagnosis or surgery, or as soon after that as is reasonably possible.
- If death occurs within 28 days of diagnosis of the condition or surgery.
- If the cause of the claim is specifically excluded by any specific terms we apply to your policy. If applicable, we will show these on separate endorsements to your policy, copies of which will be issued to you.
- If the initial consultation, diagnosis or surgery takes place within 90 days of the policy issue or within 10 days of the reinstatement of a lapsed policy.
- If the cause of the claim results from:
 - bodily injuries
 - pre-existing conditions
 - infection with HIV or conditions due to AIDS
 - loss resulting from or contributed to by unreasonable failure to follow medical advice
 - the misuse of alcohol, drugs or solvent abuse

- If the claim is for children's cover and the condition is familial or congenital or if symptoms first arose before the start of the cover for the child.

No claim will be paid unless medical reports and evidence are given by a suitably qualified medical practitioner or hospital and in a form satisfactory to Combined's chief medical adviser.

Full details of what is covered, and any limits to the cover, are given in the policy provisions. You can ask us for a copy of this.

We may apply specific exclusions to your policy. You will be advised of any such exclusions once your application has been underwritten at our Head Office.

What will my premium payments be?

Your premium payments depend upon your age, smoker status, medical history and upon the level of the cover you choose.

Your copy of your quotation under 'Benefit Levels' on page 6, shows the normal cost of the cover you have chosen.

Payments to us can be monthly, quarterly, semi-annually or annually.

Changes to my premium payments in the future

Your premium may increase when we review our premium rates in the light of our claims experience. Your premium will only increase if we apply a general increase to all policyholders. We will tell you if we intend to do so.

What are the charges?

The premium payments, including policy fees, shown on your application form include all the costs of administration, underwriting, claim and selling expenses.

What if I stop paying premiums?

Your plan and cover will end. You will not get any money back.

Does the plan have a cash-in value?

Your plan has no cash-in value at any time.

What about tax?

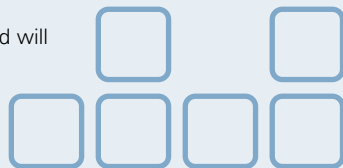
Present Irish tax law and Revenue Commissioners' practice means that:

- You don't get tax relief on premiums, and
- Benefit payments are free from Income Tax and Capital Gains Tax

This may change in the future.

Can I change my mind?

If you change your mind you will have 30 days to notify us, Combined will refund the initial premium. A policy cancelled after this will remain in force until its next renewal date.



OTHER INFORMATION

Terms and Conditions

This key features document gives a summary of the **Combined 'Critical Five' Plan**. It does not include all the definitions, exclusions, terms and conditions.

If you'd like a copy of the full terms and conditions, please contact us.

We have the right to change some of the terms and conditions. We'll write and explain if this happens.

Further details are given in the policy document. You should get expert advice about the legal and tax information in this leaflet.

Law

The law of Ireland applies to this policy.

What other features are there?

- Whilst you keep your policy in force with Combined, you receive access to the services of Best Doctors® – a leading medical advisory service.* The conditions listed below qualify you to use Best Doctors services.
- Best Doctors InterConsultation™ service* – an expert is identified from a database of over 50,000 specialists worldwide to review your case with the aim of answering two questions: is your diagnosis correct and what are the best treatment options?
- Best Doctors FindBestDoc™ and FindBestCare® services* - can identify and recommend the top specialists and most experienced centres worldwide to treat your condition.
"I think Best Doctors is an excellent service. It allowed me to gain access to the most up-to-date information and research regarding treatments for my condition." Laura M, Best Doctors customer.
- Conditions which qualify you for Best Doctors services: AIDS, Alzheimer's Disease, Blindness, Cancer, Cardiovascular Conditions, Coma, Deafness, Kidney Failure, Loss of Speech, Major Organ Transplant, Motor Neurone Disease, Multiple Sclerosis, Paralysis, Parkinson's Disease, Severe Burns and Stroke.

Best Doctors, InterConsultation, FindBestDoc and FindBestCare are registered trademarks and service marks of Best Doctors, Inc. in the United States and other countries.

* Please note: the services described are provided solely by Best Doctors. Combined Insurance Company of Europe Ltd. is in no way obligated to provide this service under the terms of your policy. Combined Insurance Company of Europe Ltd, may at its sole discretion, cancel access to the service at any time without notice.



BENEFIT LEVELS

Important conditions for all claims under all sections

- The covered condition, its diagnosis and initial consultation must take place after the policy has been in force for at least 90 days
- The insured must survive for at least 28 days after such diagnosis (or in the case of coronary artery by-pass surgery, 28 days after surgery)
- The lump sum benefit is payable once only and is payable for the first claim (Sections A & B)
- The lump sum benefit in respect of an eligible child's claim is payable once only and is payable for the first claim accepted. Such a claim will not terminate the policy (Sections C & D)

There are eleven benefit level options - 3 are shown here (option chosen is circled)

	3	7	11
Section A	Cancer, heart attack, kidney failure or stroke		
	A1 - cancer A2 - heart attack, kidney failure or stroke. A lump sum will be payable:		
	A1	€39,000	€91,000
A2	€19,500	€45,500	€71,500
B	Coronary artery by-pass surgery		
	The insured must survive for at least 28 days following such surgery. A lump sum will be payable:		
	€19,500	€45,500	€71,500
C	Cancer, heart attack, kidney failure or stroke - children		
	C1 - cancer C2 - heart attack, kidney failure or stroke. A lump sum will be payable:		
	C1	€19,500	€45,500
C2	€9,750	€22,750	€35,750
D	Coronary artery by-pass surgery - children		
	The insured must survive for at least 28 days following such surgery, then the following lump sum will be payable:		
	€9,750	€22,750	€35,750

Quotation for name:

Valid for one month from the date shown:

subject to the insured's age and medical/health qualification on the day of purchase

No cover is provided until a policy has been purchased.

Initial Premium (Including Policy fee and Government Insurance levies)

Benefit level selected		Quarterly	Semi-annual	Annual
Direct debit	<input type="checkbox"/>			
Mail	<input type="checkbox"/>			

Representative's Name:Licence No

To contact us:

If you have any questions or want to make a claim, please contact the Customer Services Department on 01 - 269 6522. You can also contact us by letter or e-mail using the details below.

Please quote your policy number and, if possible, a daytime phone number.

Customer Services

Telephone: 01 269 6522 Fax: 01 283 8585

Office hours: Monday to Friday, 9am – 5pm

Email

csd@ie.combined.com

Website

www.combinedinsurance.ie

Registered Office

Merrion House, Merrion Road, Dublin 4



We want you to be entirely satisfied with your new accident insurance cover, however, should any problem occur we have a procedure to help you resolve the matter. In the first instance, write or telephone our Policyholder Service Department on the details above, giving full details of your query or complaint. If you phone, you may find it helpful to record the name of the person who deals with your inquiry. Whether writing or phoning please quote a policy number or claim number as appropriate. Provide home and day time telephone numbers, if possible.

Whilst we make every effort to resolve problems, should you feel we have not handled the matter to your satisfaction you may refer it to the Financial Services Ombudsman Bureau for review or you can contact the Irish Insurance Federation. Making a referral to these services will not affect your right to take legal proceedings at a later stage.

Financial Services Ombudsman Bureau, 3rd Floor Lincoln House, Lincoln Place, Dublin 2,
Locall: 1890 88 20 90, Fax: 01 662 0890,
Email: enquiries@ombudsman.ie, Web: www.financialombudsman.ie

Irish Insurance Federation, 39 Molesworth Street, Dublin 2, Tel: 01 676 1820, Fax: 01 676 1943
Web: www.iif.ie

Please note: this leaflet is a guide to the Combined 'Critical Five' Policy and is based on our understanding of current Law and Revenue Commissioners' practice. Further details are contained in the policy provisions that make up the policy. If required we recommend you seek specialist advice about the legal and tax information contained in this leaflet.



A Company incorporated in the Republic of Ireland with Limited liability.
Combined Insurance Company of Europe Ltd.
Registered Office: Merrion House,
Merrion Road, Dublin 4, Ireland

Registration Number: 53550

Combined Insurance Company of Europe Limited is regulated by
the Financial Regulator.