

Investec Life risk product guide

A private client experience, *made for you*.



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A PRIVATE CLIENT EXPERIENCE, MADE FOR YOU.

Investec Life product suite

Death benefits







- Cover and premiums are linked to the Investec Private Home Loan balance
- A quick underwriting process for most applications
- Optional Accelerated Disability Cover for protection against disability
- Upfront payouts of up to R300 000
- Clients have a choice between lump sum or instalment payouts
- Up to R100 000 in cover
- Cover up to 10 individuals on one policy

Living benefits (lump sum benefit payouts)





- Claim up to 100% of your total cover amount (for up to three unrelated conditions) within three major categories
- Early cancer benefit
- Child benefit
- Catch-all benefit for unknown future conditions
- Also available as an accelerated benefit linked to Life Cover
- Payouts are based on objective medical criteria and take into account your specific occupation.
- 50% payout of less severe disabilities
- Also available as an accelerated benefit linked to Life Cover

Living benefits (income protection)







- Cover up to 75% of your clients' net of tax income
- Benefit can be upgraded to cover up to 100% of the clients' net of tax income (in the event of permanent disability)
- Tops up temporary income cover up to 100% of net income
- Up to 24 months payout period
- Up to 100% of qualifying expenses
- Up to 12 or 24 months payout period



COVER THAT AUTO-ADJUSTS IN LINE WITH YOUR CLIENTS' HOME LOAN

Mortgage Protection Cover

This policy pays out a lump sum to Investec Private Banking to settle the outstanding Investec Private Home Loan balance as at the date of death plus any interest that accrues until the date of claim approval. The Mortgage Protection Cover adjusts to the outstanding Investec Private Home Loan balance, and the premium is adjusted monthly to the latest balance.

This product is available to all new and existing Investec Private Home Loan clients. Multiple home loans and building loans are dealt with by issuing separate Mortgage Protection Cover policies for each Investec Private Home Loan.

Product details

Qualifying criteria

The home loan must be with Investec Private Banking (i.e. an Investec Private Home Loan).

Age limit at entry

18 to 70 (next birthday)

Term

Investec Private Home Loan term

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Waiting period

None, because the policy is underwritten.

Joint home loans

Each qualifying Investec Private Home Loan owner can take out a policy covering the full home loan balance. In the event of simultaneous death of the joint Investec Private Home Loan owners, each with a Mortgage Protection Cover policy, Investec Life will pay out on both policies to Investec Private Banking. The bank will then pay out the excess amount to the deceased estates in the proportion of Investec Private Home Loan ownership.

Minimum Cover Amount

None; the cover is linked to the Investec Private Home Loan balance.

Maximum Cover Amount

None; the cover is linked to the Investec Private Home Loan balance.

Terminal illness

Not applicable

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Investec Private Home Loan balance changes

Balance reduction

Capital repayments and capital advance repayments reduce the Investec Private Home Loan balance, which automatically reduces the monthly premium on the Mortgage Protection Cover.

Balance increase

Investec Private Home Loan withdrawals increase the home loan balance, which automatically increases the monthly premium on the Mortgage Protection Cover.

The following terms and conditions apply to accumulated withdrawals over any rolling 12-month period:

- If up to R1m is withdrawn, then the increased cover amount is automatically covered
- If more than R1m is withdrawn, then the amount above R1m is not covered for death due to a pre-existing medical condition, for 12 months after the withdrawal unless the medical condition was disclosed and accepted at the application stage
- Accidental death and death due to a medical condition that is diagnosed after the withdrawal (even if above R1m) is fully covered

Example 1:

On 1 January 2016, John took out Mortgage Protection Cover on his existing Investec Private Home Loan. On 1 March 2017, he is diagnosed with cancer, and he makes a withdrawal of R650k on 1 June 2017 and another of R500k on 1 September 2017 from his Investec Private Home Loan.

- Should he die due to cancer any time between 1 September 2017 and 31 May 2018, then the payout will exclude R150 000, which is the amount of the accumulated withdrawal above R1m during the 12 months preceding this period
- Should he die due to cancer anytime after 1 June 2018 then the payout will have no excluded amount because the accumulated withdrawal is under R1m during the 12 months preceding this period (i.e. R500 000)
- Should he die due to a car accident at any time, then the payout will have no excluded amount

Example 2:

On 1 January 2016, Jane took out Mortgage Protection Cover on her new Investec Private Home Loan. She makes a withdrawal of R650k on 1 June 2017 and another of R500k on 1 September 2017 from her Investec Private Home Loan. She is then diagnosed with cancer on 1 October 2017.

• Should she die due to cancer any time after 1 October 2017, the payout will have no excluded amount because the withdrawals were made prior to her cancer diagnosis

Socio-economic classification

For prospective clients, Investec Life classifies an application into one of the following socio-economic classifications: Class 1, Class 2, Class 3, Class 4 or Professional.

An application qualifies for a Professional Classification only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association
- Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia
- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa

- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for Professional Classification on a case-by-case basis.



General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of the Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- · Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not),invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped

power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in overinsurance.

Product-specific exclusions

None

Travel disclosures

An application will either undergo faster limited underwriting or normal full underwriting online, with the travel disclosure required as below.

Limited underwriting:

- No disclosure required
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Full underwriting:

- Only require disclosure of travel in the 12 months following underwriting
- Travel to Class 1, Class 2 and Class 3 countries: standard rates apply.
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: the Policyholder must inform Investec Life, and cover will be confirmed depending on the country and purpose of living abroad.

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to the disclosed countries.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



ENHANCE MORTGAGE PROTECTION COVER WITH

Accelerated Disability Cover

This benefit pays out a lump sum to Investec Private Banking to settle the outstanding Investec Private Home Loan balance if a client becomes permanently disabled based on the 100% functional impairment definitions in **Annexure B**, or their inability to permanently perform their own occupational duties (100%). If the client is temporarily disabled, the policy will payout the monthly interest charged on the home loan until the client has recovered, or up to a maximum of 24 months. The payout on temporary disability is subject to a 30-day deferred period.

Accelerated Disability Cover is an optional add-on to your standard death benefit (i.e. Mortgage Protection Cover). When a payout is made on permanent disability, the benefit on death falls away.

This benefit is exclusively available to clients who have, or are in the process of applying for Mortgage Protection Cover with Investec Life.

Product details

Qualifying criteria

The client must have or be in the process of applying for Mortgage Protection Cover with Investec Life.

Age limit at entry

18 to 60 (next birthday)

Term

Earlier of Retirement Age (60, 65 or 70) or the Investec Private Home Loan term.

Premiums

- · Age-rated pattern
- Premiums are payable monthly during the month of cover.
- Premiums are reviewable annually.

Survival period

None; a claim is paid once permanent disability is confirmed.

Minimum Cover Amount

None; the cover is linked to the Investec Private Home Loan balance.

Maximum Cover Amount

- None; the cover is linked to the Investec Private Home Loan balance.
- Cover above R20m is subject to further underwriting.

Deferred period

One (1) month deferred period for any claims on temporary disability under this policy

Maximum period

24 months (including the deferred period) for any temporary disability claim.

How Accelerated Disability Cover works

Example 1:

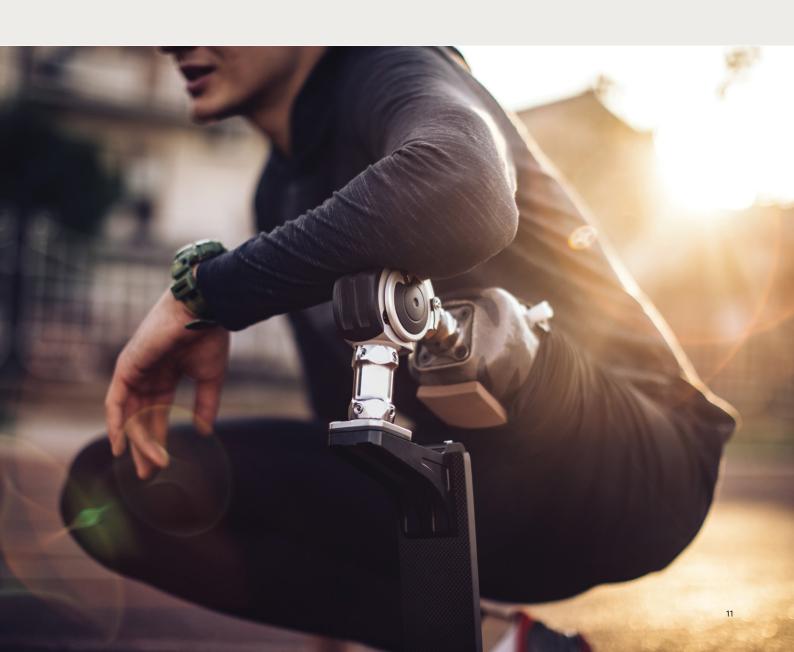
On 1 January 2022, Michael took out Mortgage Protection Cover with Accelerated Disability Cover on his existing Investec Private Home Loan. The outstanding balance on his Investec Private Home Loan is currently R2m.

 If Michael is deemed permanently disabled, his Accelerated Disability Cover will pay Investec Private Bank a lump sum of R2m, and the benefit on death (i.e. Mortgage Protection Cover) will fall away.

Example 2:

Lindsay also took out Mortgage Protection Cover with Accelerated Disability Cover on her Investec Private Home Loan with a value of R1.5m. Lindsay was involved in a car accident that resulted in the need for treatment and physical therapy to recover from the injuries sustained in the accident.

- During that period of recovery she was not able to work, and the monthly interest charged on her home loan was paid to her until she was deemed permanently disabled which was nine (9) months after the accident.
- Once permanently disabled, her Accelerated
 Disability Cover paid out an amount equal to the
 outstanding balance on her Investec Private Home
 Loan at at the date of the accident (i.e., R1.5m).



Occupation Class

For prospective clients, Investec Life classifies an application into one of the following occupation classes based on the Life Covered's occupation and whether he/she belong to any of the professional bodies in the Investec Life list:

- Medical Professional Occupation Class
- Non-medical Professional Occupation Class
- Occupation Class 1
- Occupation Class 2
- Occupation Class 3
- Occupation Class 4

An application is classified as a Medical Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association

Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- · Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia

- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for a corresponding professional occupation class on a case-by-case basis.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after:

- · Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not),

invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions on permanent disability

- · Chronic fatigue syndrome
- · Chronic pain syndrome
- Fibromyalgia



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- · Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- · Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



COVER THAT'S SPECIFICALLY TAILORED TO YOUR CLIENTS' NEEDS

Life Cover

This benefit pays out a lump sum or recurring payout to nominated beneficiaries or the Life Covered's deceased estate in the event of death.

Product details

Age limit at entry

18 to 70 (next birthday)

Term

Whole life

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Minimum Cover Amount

R500 000

Maximum Cover Amount

Unlimited.

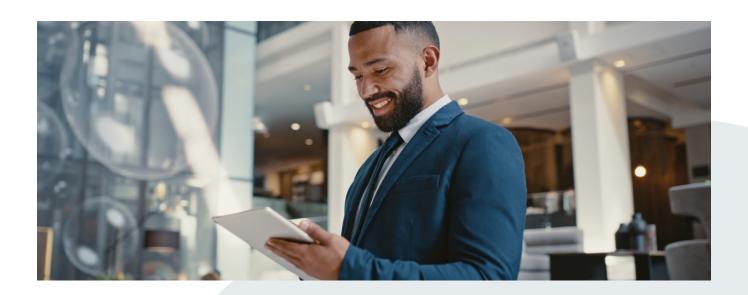
Cover above R30m is subject to further underwriting.

Annual cover increase

- 0%, 5% or CPI
- CPI is capped at 10%

Waiting period

None, because the policy is underwritten.



Upfront payouts

5% of the Cover Amount may be paid upfront over three (3) payments, subject to a maximum of R100 000 per payment (maximum of R300 000 for three payments).

Example 1:

If the cover amount is R10m, then the upfront payout is up to R300 000 (the maximum upfront payout) paid as:

- First upfront payout –
 R100 000 (paid within two (2)
 business days of receiving all
 requirements)
- Second upfront payout R100 000 (30 days later if Investec Life is still assessing the final claim)
- Third upfront payout –
 R100 000 (60 days later if Investec Life is still assessing the final claim)

Example 2:

If the cover amount is R5m, then the upfront payout is up to R250 000 (5% of the cover amount) paid as:

- First upfront payout –
 R83 333 (paid within two (2)
 business days of receiving all
 requirements)
- Second upfront payout –
 R83 333 (30 days later if
 Investec Life is still assessing
 the final claim)
- Third upfront payout –
 R83 333 (60 days later if Investec Life is still assessing the final claim)

Terms and conditions for upfront payouts:

The cover must have been active for at least 12 consecutive months to qualify for an upfront payout in the event of natural death.

Upfront payouts are at Investec Life's discretion in the case of an accidental death where there is a criminal investigation in connection with the death of the Life Covered, or any beneficiary is a suspect in connection with the death of the Life Covered.

The cover must have been active for at least 24 consecutive months to qualify for an upfront payout in the event of suicide.

Final payout

The balance of the approved claim amount (after the upfront payouts) is paid as a lump sum or in instalments, subject to Investec Life's terms and conditions and regulations applicable at the time. The instalment payout option is only available for nominated beneficiaries who have a final payout of at least R1m.

Terminal illness benefit

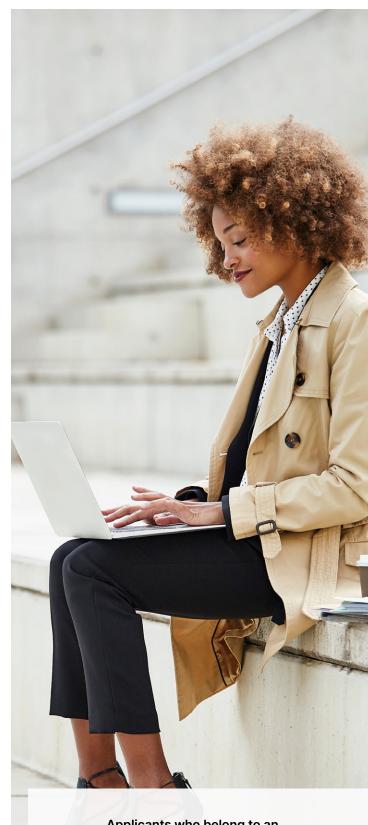
Should the Life Covered be diagnosed with a terminal illness and the treating specialist has confirmed that he or she will not survive for a period longer than 12 months, the full cover amount may be requested to be paid out as Terminal Illness Benefit. Investec Life may appoint a medical specialist to confirm the diagnosis. Investec Life will pay out 100% of the Cover Amount upon receiving a satisfactory medical confirmation of the diagnosis.

Socio-economic classification

For prospective clients, Investec Life classifies an application into one of the following socio-economic classifications: Class 1, Class 2, Class 3, Class 4 or Professional.

An application qualifies for a Professional Classification only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association
- Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia
- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa



Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for Professional Classification on a case-by-case basis.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of the Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- · Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law,

rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions

None

Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to Class 1, Class 2 and Class 3 countries: standard rates apply.
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: the Policyholder must inform Investec Life, and cover will be confirmed depending on the country and the purpose of living abroad.

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to the disclosed countries.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- · Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- · Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



COVER FOR A DIGNIFIED FUNERAL

Funeral Cover

This benefit pays out a lump sum in the event of the Life Covered's death or the death of an insured dependant, payable within two (2) business days of receiving all required documents.

Product details

Qualifying criteria

 The Life Covered must have Life Cover from Investec Life or be in the process of applying for Life Cover from Investec Life

Age limit at entry (next birthday)

Main life: 18 to 70 (next birthday)

Spouse: 18 to 75Parent: 40 to 75

 Own Child: 1 to 24 (after age 24 next birthday the child is classified as extended)

Extended family: 1 to 75

Term

Whole life

Annual cover increase

0%, 5% or CPI

• CPI is capped at 10%

Cover Amounts

Main Life Covered

- May select R50 000 or R100 000
- · Main Life Covered must always be covered
- Main Life Covered is fully underwritten

Spouse

- Non-underwritten spouse or partner of the main Life Covered
- Can be covered for 100% of main Life Covered's cover amount, which is R50 000 or R100 000
- A maximum of one spouse is allowed, additional spouse may be added under 'Extended'

Own child

- Non-underwritten biological or legally adopted child of the main Life Covered
- Age 0 5: 25% of main Life Covered's cover amount, maximum of R20 000
- Age 6 13: 25% of main Life Covered's cover amount, maximum of R50 000
- Age 14 23: 50% of main Life Covered's cover amount
- Age over 23: 50% of main Life Covered's cover amount, under Extended family

An overall maximum of nine (9) dependants (so maximum 10 Lives Covered including the Policyholder).

Parent or parent-in-law

- Non-underwritten parent or parent-in-law of the main Life Covered
- Can be covered for 50% of main Life Covered's Cover Amount
- A maximum of four (4) parents and parents-in-law, additional may be added under 'Extended'

Extended

- Non-underwritten extended family member of the main Life Covered
- Can be covered for 50% of main Life Covered's Cover Amount, subject to R20 000 and R50 000 limit for family members younger than six (6) and those between the ages of six (6) and 13 respectively
- Extended family members mean second and additional partners, fifth and additional parents, siblings, grandparents, grandchildren, parent's siblings, cousins, nephews, nieces
- The extended family member must be a biological or legally adopted/adoptive family member of the main Life Covered

Waiting periods

Main Life Covered

- No waiting period on the main Life Covered because of full underwriting
- General 12-month waiting period on suicide is applicable

Accidental death

- No waiting period on deaths due to an accident
- Accidental death is a death caused by an unexpected, external event that is not in any way traceable, neither directly nor indirectly, to the Life Covered's state of mental or physical health before the event. Death must have occurred within 14 days of such an event. These conditions must be proved to the satisfaction of Investec Life, at its discretion

Funeral cover lives added at policy inception

- 12-month waiting period on suicide
- Six (6) month waiting period on a natural death of a biological or legally adopted child up to age 24 (next birthday)
- Six (6) month waiting period on a natural death of any other Life Covered
- No waiting periods on accidental deaths

Funeral cover lives added to in-force policy

- 12-month waiting period on suicide
- Six (6) month waiting period on a natural death of any dependant added after policy inception
- A biological or legally adopted child or a spouse can be added after policy inception is subject to the same waiting periods as at inception if these dependants are added within six (6) months of the event i.e. birth / adoption / marriage

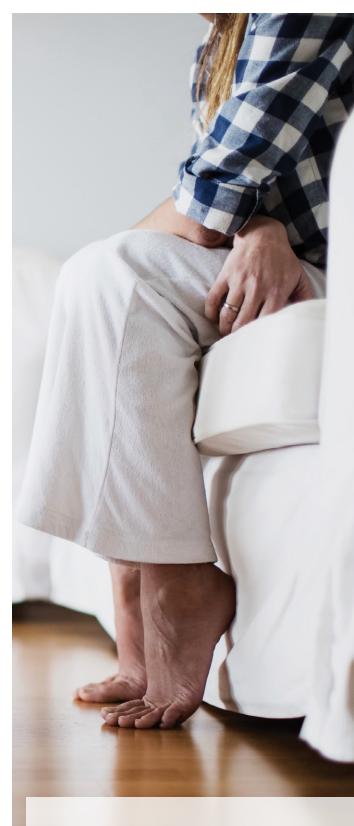
Socio-economic classification

(applies to the main Life Covered only)

For prospective clients, Investec Life classifies an application into one of the following socio-economic classifications: Class 1, Class 2, Class 3, Class 4 or Professional.

An application qualifies for a Professional Classification only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association
- Any of the Societies of Advocates of South Africa
- · Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia
- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa



Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for Professional Classification on a case-by-case basis.

General exclusions

(applies to all Lives Covered)

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 12 months after the:

- Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

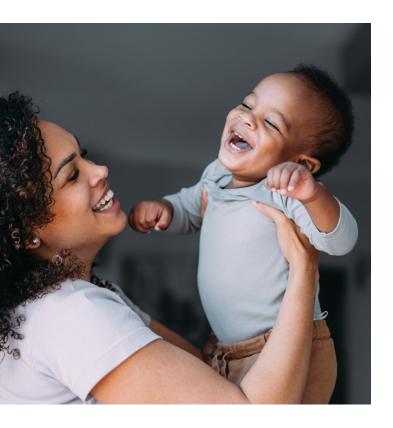
If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from your dependants or your treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions

None



Travel disclosures

(applies to the main Life Covered, unless stated otherwise)

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to Class 1, Class 2 and Class 3 countries: standard rates apply.
- Travel to any level four (4) or sanctioned countries (applies to all Lives Covered): general exclusion applicable on the entire policy.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

(applies to the main Life Covered only)

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



COVER THAT DOES NOT FALL SHORT

Severe Illness Cover

This benefit pays out a lump sum in the event of the Life Covered being diagnosed with a severe illness or suffers from a trauma-related injury as defined in **Annexure A.**

Product details

Age limit at entry

18 to 65 (next birthday)

Term

Whole life

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Minimum Cover Amount

R250 000

Maximum Cover Amount

R10m

Annual cover increase

- 0%, 5% or CPI
- CPI is capped at 10%

Survival Period

• 14 days survival period



Payout categories

The following categories of severe illness events are covered:

- Cardiovascular
- Cancer
- Neurological
- Respiratory
- Gastrointestinal
- Urogenital tract and kidney
- Visual
- ENT and speech
- Endocrine and metabolic
- Connective tissue disorders
- Musculoskeletal
- Trauma
- HIV/AIDS

For the event definitions as well as the qualifying criteria, please see $\underline{\textbf{Annexure A}}$ below.

The tiering levels are 100%, 75%, 50%, 25%, 15%, 10%, 5% based on the severity of the condition.

Early cancer pays 15% of the sum assured up to a maximum of R150 000.

Survival period

 $14\ \mbox{days}$ for conditions paid at severities of 25% or more.

There is no survival period for conditions paid at 5%, 10% or 15%.

The catch-all definition only applies for conditions not listed elsewhere

The condition must be diagnosed by a registered medical specialist. The diagnosis must be supported by the relevant medical investigations, and the claim may be subject to an independent assessment.

- 100% payout: permanent impairment whereby an inability to perform three (3) or more basic ADLs exists
- 75% payout: permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists
- 50% payout: permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists

Automatic child cover, up to the age of 24 years (next birthday), is included and linked to the claim criteria in **Annexure A.** The maximum payout is 10% of the sum assured, up to R150 000 for the entire time that the child is covered.

Early cancer and other early diagnosis

Investec Life will pay between 5% and 15% of the cover amount for early diagnosis, or stage 0, of certain cancers and other diseases, as defined in the Severe Illness Cover definitions in **Annexure A.**

The benefit for early-stage cancers is capped at a once-off payment of R150 000.



Multiple claims

Tiered and multiple payouts

Payout is based on the severity of the illness or trauma-related injury at the point of assessment.

Example:

If the Life Covered (with R1m Cover Amount) is diagnosed with stage I pancreatic cancer, 25% of the Cover Amount will be paid out, which is R250 000. If this cancer progresses to stage II, a further 25% of the Cover Amount (which is a further R250 000) will be paid out to make up a total of 50% at this stage.

If this cancer progresses to stage III, the remaining 50% of the Cover Amount (R500 000) will be paid out, which makes up the 100% total payout for pancreatic cancer.

This allows Investec Life to pay, in respect of the Life Covered, multiple lump-sum payouts up to a maximum of 100% of the Cover Amount, with reinstatement for major categories, as defined below.

Cover reinstatement

The cover is automatically reinstated after 30 days of diagnosis, which means that up to 100% of the cover amount can be paid out for up to three (3) unrelated claim events.

The cover reinstatement only applies to the following categories:

- Cardiovascular
- Cancer
- Cerebrovascular and central nervous system

Unrelated claim events are defined as claim events that do not result as a direct consequence or complication from a previous severe illness or trauma-related claim event.

Example 1:

Should a Life Covered (with R1m Cover Amount) be diagnosed with stage II breast cancer, 50% of the Cover Amount will be paid out (which is R500 000). The full R1m cover will be reinstated after 30 days of the breast cancer diagnosis such that the full Cover Amount is still available in the future for unrelated claim events within the cancer category. The Life Covered will still have up to 50% of the Cover Amount available for breast cancer should it progress.

Example 2:

Should a Life Covered (with R1m Cover Amount) be diagnosed with stage I lung cancer, 25% of the Cover Amount will be paid out (which is R250 000), and cover will be reinstated after 30 days for unrelated cancers. Should the Life Covered then be diagnosed with a stage II prostate cancer (unrelated to the lung cancer), 50% of the Cover Amount will be paid out (which is R500 000), and cover will be reinstated again, but for the last time, after 30 days.

This means the Life Covered still has up to 100% of the Cover Amount available for cancer claim events that are unrelated to the lung cancer and prostate cancer already claimed for. However, the Life Covered will still have up to 75% of the Cover Amount available should the lung cancer progress, and up to 50% of the Cover Amount available should the prostate cancer progress.

Related claim payouts

Related claim events are defined as claim events that result as a direct consequence or complication from a previous severe illness or trauma-related claim event.

For related claim events in different categories that occur within 30 days of each other, Investec Life will limit the total claim payout to the highest individual claim.

Example:

The Life Covered suffers a mild heart attack and a severe stroke (subsequent and related to the heart attack), only 100% of the Cover Amount (for the severe stroke) will be paid.

For related claim events in different categories that occur 30 or more days apart, we will pay each claim according to its severity within its category.

Other multiple payouts

A progressive claim event is defined as a worsening of a previous event for which a severe illness or trauma-related injury has been paid. Progressive claims are treated as explained under the <u>'Tiered and multiple payouts'</u> section above.

If multiple claim events that are not progressive occur within a category, we will pay each claim at its level of severity, up to a maximum of 100% of the Cover Amount.

Example:

A Life Covered had a partial pancreatectomy (due to a disease). 25% of the Cover Amount would have been paid from the gastroenterology category. Subsequent to this, should the Life Covered be diagnosed with portal hypertension (which is also defined under the gastroenterology category), the payout would then be 50% of the Cover Amount. There would then be 25% of the Cover Amount remaining for future claims in the gastroenterology category because the gastroenterology category is not subject to reinstatement.

Please refer to the 'Cover reinstatement' section above for those categories where reinstatement is permitted.





Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for Professional Classification on a case-by-case basis.

Socio-economic classification

For prospective clients, Investec Life classifies an application into one of the following socio-economic classifications: Class 1, Class 2, Class 3, Class 4 or Professional.

An application qualifies for a Professional Classification only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association
- Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia
- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- · CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of the Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war,

riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions

- Mental health conditions
- · Chronic fatigue syndrome
- Chronic pain syndrome
- Fibromyalgia



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: the Policyholder must inform Investec Life, and cover will be confirmed depending on the country and purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- · Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.

ENHANCE LIFE COVER WITH

Accelerated Severe Illness Cover

This benefit pays out a lump sum if the Life Covered suffers from a qualifying severe illness or trauma-related injury as defined in the policy definitions in **Annexure A.** The claim payouts are based on the tiered definitions (5% to 100%) across 13 categories, plus a Catch-All.

This benefit is exclusively available to clients who have or are in the process of applying for Life Cover with Investec Life. The benefit accelerates the Life Cover amount, which means that if a claim is paid out on this benefit, there will be a corresponding reduction on the Life Cover amount.

Product details

Qualifying criteria

The client must have or be in the process of applying for Life Cover with Investec Life.

Age limit at entry

18 to 65 (next birthday)

Term

Whole life, or cancellation of Life Cover

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Minimum Cover Amount

None

Maximum Cover Amount

- The Cover Amount is linked to the Life Cover and cannot exceed the Life Cover amount.
- Cover above R10m is subject to further financial underwriting.

Survival Period

None

Cover features

- Once a claim is paid on Accelerated Severe Illness Cover, there is a corresponding reduction in the value of the Life Cover amount.
- The Accelerated Severe Illness Cover benefit will end once 100% of the Life Cover amount is paid out.

Payout categories

The following categories of critical illness events are covered:

- Cardiovascular
- Cancer
- Neurological
- Respiratory
- Gastrointestinal
- Urogenital tract and kidney
- Visual
- ENT and speech
- Endocrine and metabolic
- Connective tissue disorders
- Musculoskeletal
- Trauma
- HIV/AIDS

For the event definitions as well as the qualifying criteria, please see **Annexure A** below.

The tiering levels are 100%, 75%, 50%, 25%, 15%, 10%, 5% based on the severity of the condition.

Early cancer pays 15% of the sum assured up to a maximum of R150 000.

Survival period

There is no survival period.

The catch-all definition only applies for conditions not listed elsewhere.

The condition must be diagnosed by a registered medical specialist. The diagnosis must be supported by the relevant medical investigations, and the claim may be subject to an independent assessment.

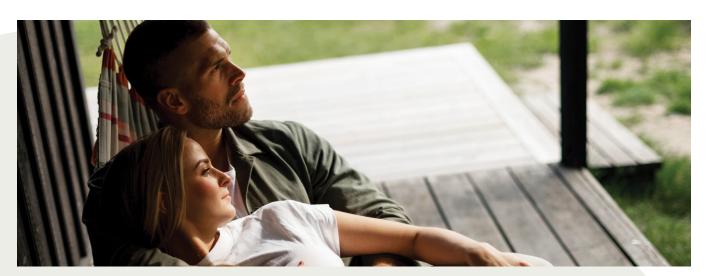
- 100% payout: permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.
- 75% payout: permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.
- **50% payout:** permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

Automatic child cover, up to the age of 24 years (next birthday), is included and linked to the claim criteria in **Annexure A**. The maximum payout is 10% of the sum assured, up to R150 000 for the entire time that the child is covered.

Early cancer and other early diagnosis

Investec Life will pay between 5% and 15% of the cover amount for early diagnosis, or stage 0, of certain cancers and other diseases, as defined in the Severe Illness Cover definitions in **Annexure A.**

The benefit for early-stage cancers is capped at a once-off payment of R150 000.





Multiple claims

Tiered and multiple payouts

Payout is based on the severity of the illness or trauma-related injury at the point of assessment.

Example:

If the Life Covered (with R1m Accelerated Severe Illness Cover linked to R1m Life Cover) is diagnosed with stage I pancreatic cancer, 25% of the Accelerated Severe Illness Cover will be paid out, which is R250 000. This claim reduces the Life Cover amount to R750 000, which also reduces the Accelerated Severe Illness Cover to R750 000. If this cancer progresses to stage II, a further 25% of the Severe Illness Cover (which is a further R250 000) will be paid out to make up a total of 50% at this stage. The Life Cover and Accelerated Severe Illness Cover will each reduce to R500 000.

If this cancer progresses to stage III, the remaining 50% of the Accelerated Severe Illness Cover (R500 000) will be paid out, which makes up the 100% total payout for pancreatic cancer. Both the Life Cover and Accelerated Severe Illness Cover will be depleted.

This allows Investec Life to pay, in respect of the Life Covered, multiple lump-sum payouts up to a maximum of 100% of the Cover Amount, with reinstatement for major categories, as defined below.

Cover reinstatement

The cover is automatically reinstated after 30 days of diagnosis, which means that up to 100% of the cover amount can be paid out for up to three (3) unrelated claim events.

- Cardiovascular
- Cancer
- · Cerebrovascular and central nervous system

Unrelated claim events are defined as claim events that do not result as a direct consequence or complication from a previous severe illness or trauma-related claim event.

Examples for cover reinstatement and acceleration of cover

Example 1:

Should a Life Covered (with R1m Accelerated Severe Illness Cover and R2m Cover Amount) be diagnosed with stage II breast cancer, 50% of the Accelerated Severe Illness Cover will be paid out (which is R500 000). The Life Cover will reduce to R1.5m while the Accelerated Severe Illness Cover will be reinstated after 30 days of the breast cancer diagnosis such that the full R1m Accelerated Severe Illness Cover is still available in the future for unrelated claim events within the cancer category. The Life Covered will still have up to 50% of the Accelerated Severe Illness Cover available for breast cancer should it progress.

Example 2:

Should a Life Covered (with R1m Accelerated Severe Illness Cover and R2m Cover Amount) be diagnosed with stage I lung cancer, 25% of the Accelerated Severe Illness Cover will be paid out (which is R250 000). The Life Cover will reduce to R1.75m while the Accelerated Severe Illness Cover will be reinstated after 30 days of the lung cancer diagnosis such that the full R1m Accelerated Severe Illness Cover is still available in the future for unrelated claim events within the cancer category.

Should the Life Covered then be diagnosed with a stage II prostate cancer (unrelated to the lung cancer), 50% of the Accelerated Severe Illness Cover will be paid out (which is R500 000).

The Life Cover will reduce to R1.25m while the Accelerated Severe Illness Cover will be reinstated after 30 days of the prostate cancer diagnosis such that the full R1m Accelerated Severe Illness Cover is still available in the future for unrelated claim events within the cancer category.

This means the Life Covered still has up to 100% of the Accelerated Severe Illness Cover available for cancer claim events that are unrelated to the lung cancer and prostate cancer already claimed for. However, the Life Covered will still have up to 75% of the Accelerated Severe Illness Cover available should the lung cancer progress, and up to 50% of the Accelerated Severe Illness Cover available should the prostate cancer progress.



Socio-economic classification

For prospective clients, Investec Life classifies an application into one of the following socio-economic classifications: Class 1, Class 2, Class 3, Class 4 or Professional.

An application qualifies for a Professional Classification only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association
- Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia
- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa



General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of the Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- · Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war,

riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions

- Mental health conditions
- Chronic fatigue syndrome
- · Chronic pain syndrome
- Fibromyalgia



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: the Policyholder must inform Investec Life, and cover will be confirmed depending on the country and purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- · Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- · Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



COVER THAT PROECTS YOUR CLIENT IN CASE OF A PERMANENT DISABILITY

Disability Cover

This benefit pays out a lump sum in the event of the Life Covered's permanent impairment as defined in the policy definitions in <u>Annexure B</u> or inability to perform their own occupational duties.

Product details

Age limit at entry

18 to 60 (next birthday)

Benefit and premium payment term

- Up to the planned retirement age of 60, 65 or 70
- Subject to a minimum of five (5) years between issue age (next birthday) and planned retirement age
- For example, a 58-year-old client can only select 65 and 70 as their planned retirement age

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Minimum Cover Amount

R250 000

Maximum Cover Amount

Unlimited.

Cover above R20m is subject to further underwriting.

Annual cover increase

- 0%, 5% or CPI
- CPI is capped at 10%

Survival period

None



Cover features

This benefit pays out a lump sum in the event of the Life Covered's permanent disability based on the tiered functional impairment definitions (50% or 100%), or their inability to permanently perform their own occupational duties (100%).

The following functional impairment events are covered:

- Cardiovascular
- Respiratory
- · Mental and behavioural
- Nervous system
- Digestive
- Renal
- Endocrine
- Haematology
- Cancer
- Musculoskeletal
- HIV/AIDS

A catch-all definition is included:

- 100% payout: permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.
- 50% payout: permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

The diagnosis must be confirmed by an appropriate health practitioner who is registered with the Health Professions Council of South Africa (HPCSA) and must be supported by relevant medical investigations.

All claims submitted may be subject to an independent assessment and independent functional capacity evaluation.

For the event definitions as well as the qualifying criteria, please see **Annexure B** below.

Multiple claims

Claims are paid up to a maximum of 100% of the Cover Amount.



Occupation Class

For prospective clients, Investec Life classifies an application into one of the following occupation classes based on the Life Covered's occupation and whether he/she belong to any of the professional bodies in the Investec Life list:

- Medical Professional Occupation Class
- Non-medical Professional Occupation Class
- Occupation Class 1
- Occupation Class 2
- Occupation Class 3
- Occupation Class 4

An application is classified as a Medical Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association

Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- Any of the Societies of Advocates of South Africa
- · Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia

- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for a corresponding professional occupation class on a case-by-case basis.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after:

- Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions

- · Chronic fatigue syndrome
- · Chronic pain syndrome
- Fibromyalgia



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



ENHANCE LIFE COVER WITH

Accelerated Disability Cover

This benefit pays out a lump sum in the event of the Life Covered's permanent disability based on the tiered functional impairment definitions (50% or 100%), or their inability to permanently perform their own occupational duties (100%).

This benefit is exclusively available to clients who have or are in the process of applying for Life Cover with Investec Life. This benefit accelerates the Life Cover amount, therefore when a claim is paid out on disability, there will be a corresponding reduction on the Life Cover amount.

Product details

Qualifying criteria

The client must have or be in the process of applying for Life Cover with Investec Life.

Age limit at entry

18 to 60 (next birthday)

Term

- Cancellation of Life Cover
- Planned Retirement Age (60, 65 or 70)
- Subject to a minimum of five (5) years between issue age (next birthday) and planned retirement age.

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Annual Cover Increase

- 0%, 5% or CPI (where CPI is capped at 10%)
- This can be different to the annual cover increase selected on Life Cover

Minimum Cover Amount

None

Maximum Cover Amount

- The cover amount is linked to the Life Cover benefit and cannot exceed the Life Cover amount.
- Cover above R20m is subject to further financial underwriting.

Survival period

None

Cover features

- Once a claim is paid on Accelerated Disability Cover, there is a corresponding reduction in the value of the Life Cover amount.
- The Accelerated Disability Cover benefit will end once 100% of the Cover Amount is paid out. The Life Cover benefit can continue, given that the Cover Amount is higher than the Accelerated Disability Cover amount.

The claim will be paid if one of the functional impairment definitions are met or if the Life Covered is unable to permanently perform their own occupation despite recognized maximal medical treatments and therapies.

The following functional impairment events are covered:

- Cardiovascular
- Respiratory
- Mental and behavioural
- Nervous system
- Digestive
- Renal
- Endocrine
- Haematology
- Cancer
- Musculoskeletal
- HIV/AIDS

The tiering levels are 100% and 50%.

A catch-all definition is included:

- 100% payout: permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.
- 50% payout: permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

The diagnosis must be confirmed by an appropriate health practitioner who is registered with the Health Professions Council of South Africa (HPCSA) and must be supported by relevant medical investigations. All claims submitted may be subject to an independent assessment and independent functional capacity evaluation.

For the event definitions as well as the qualifying criteria, please see **Annexure B** below.

Multiple claims

Claims are paid up to a maximum of 100% of the Cover Amount.

How acceleration of cover works

Example:

Peter has R2.5m Life Cover and R2.5m Accelerated Disability Cover on his policy with Investec Life.

- Should he suffer an illness or injury that leaves him partially disabled, then 50% of the Accelerated Disability
 Cover will be paid out, which is R1.25m. Both the Life Cover and the Accelerated Disability Cover will each
 reduce to R1.25m.
- Should he get into an accident that leaves him fully disabled, the remaining 50% of the Accelerated Disability Cover will be paid out, which is R1.25m. This payout will automatically deplete both the Life Cover and the Accelerated Disability Cover.

Occupation Class

For prospective clients, Investec Life classifies an application into one of the following occupation classes based on the Life Covered's occupation and whether he/she belong to any of the professional bodies in the Investec Life list:

- Medical Professional Occupation Class
- Non-medical Professional Occupation Class
- Occupation Class 1
- Occupation Class 2
- Occupation Class 3
- Occupation Class 4

An application is classified as a Medical Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association

Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia

- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for a corresponding professional occupation class on a case-by-case basis.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after:

- Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.

Product-specific exclusions

- · Chronic fatigue syndrome
- Chronic pain syndrome
- Fibromyalgia



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- · Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- · Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



COVER THAT PROTECTS YOUR CLIENTS' FUTURE EARNINGS

Income Protection Cover

This benefit pays out a regular payment in the event that the Life Covered is unable to work or earn an income.

Product details

Benefit structure

- Pays out up to 75% of the net of tax income for temporary conditions
- Pays out up to 100% of the net of tax income for permanent conditions

Occupation definition

Own occupation

Age limit at entry

18 to 60 (next birthday)

Benefit and premium payment term

- Up to the planned retirement age of 60, 65 or 70
- Subject to a minimum of five (5) years between issue age (next birthday) and planned retirement age
- For example, a 58-year-old client can only select 65 and 70 as their planned retirement age

Premiums

- Age-rated pattern
- Premiums are payable monthly during the month of cover
- Premiums are reviewable annually

Minimum Cover Amount

R5 000 per month

Maximum Cover Amount

Unlimited.

Cover above R112 500 per month is subject to further underwriting.

Maximum payout

Up to 75% of their net of tax personal income, except in the case of a permanent upgrade where up to 100% of their net of tax personal income is paid.

Backpay feature

For self-employed or professionals with a one (1) month deferred period.

Annual cover increase

- 0%, 5% or CPI
- CPI is capped at 10%

In-claim income increase

Based on the Annual Cover Increase, applied at policy anniversary even during the claim payment period.

Deferred Period

- Seven (7) days, one (1) month or three (3) months.
- Deferred period not applied to permanent upgrade claims

Early assessment

Early assessment if the claim is for a period longer than that recommended by the Official Disability Guidelines (ODG) or for claims that will benefit from early intervention. A Full Functional Evaluation (FCE) may be performed for complex cases.

Criteria for a permanent upgrade

In the event of a permanent medical condition or traumatic event as shown in **Annexure C** or if the Life Covered is permanently unable to perform their own occupational duties, then the monthly payout will be upgraded up to 100% of the net of tax income.

The upgraded amount is determined as: Cover Amount ÷ 75% x 100%

Example:

Cover of R60 000 would be upgraded to R80 000

Upgraded claims are reviewed periodically to determine if the Life Covered continues to qualify for the monthly payout.

Cover Amount

Selected by the client at new business and updated anytime during the policy term.

Income is defined as follows:

In the case of a salaried employee, income is the cost-to-company, excluding discretionary bonuses.

In the case of a commissioned employee, income is the monthly commission averaged over the past 12 months, excluding discretionary bonuses. In the case of a sole proprietor, partner, member of a close corporation, director or shareholder of a private company, income is the share of fees for services rendered and gross profit from trading activities, less the share of the business overhead expenses. Where it is difficult to determine the share of the income or expenses of the business, it shall be any income, dividends, loan account repayments and other benefits the Life Covered derive from the business in the Life Covered's personal capacity.

Income for the purposes of this definition excludes passive income from assets such as property or shares in a business acquired purely for investment purposes and where the Life Covered is not engaged in the management of this business.

Waiver of premium

If a claim has been approved by Investec Life, premiums will no longer be payable during the Deferred Period and when the claim is in payment. If the Life Covered returns to work, and cover recommences, premiums will again become due.

In a month where the Life Covered is off work for part of the month, the premium payable for that month will be pro-rated. For example, the Life Covered recovers halfway through the month, the last payout will be pro-rated.

Claims Aggregation

Aggregation is applied after five (5) months of claim payments on a one-month deferred period or after three (3) months of claim payments on a three (3) month deferred period, so that:

The monthly claim payout plus all income as defined above (from any forms of work engaged in) plus income payouts from other insurers, employers or retirement funds do not exceed 75% of the pre-claim net of tax personal income.

In case of the monthly claim payouts from Income Protection Cover and Temporary Income TopUp Cover plus all income as defined above (from any forms of work engaged in) plus income payouts from other insurers, employers or retirement funds do not exceed 100% of the pre-claim net of tax personal income.

In case of a permanent upgrade, the monthly claim payout plus all income as defined above (from any forms of work engaged in) plus income payouts from other insurers, employers or retirement funds do not exceed 100% of the pre-claim net of tax personal income.

Occupation Class

For prospective clients, Investec Life classifies an application into one of the following occupation classes based on the Life Covered's occupation and whether he/she belong to any of the professional bodies in the Investec Life list:

- Medical Professional Occupation Class
- Non-medical Professional Occupation Class
- Occupation Class 1
- Occupation Class 2
- Occupation Class 3
- Occupation Class 4

An application is classified as a Medical Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association

Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- · Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia

- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for a corresponding professional occupation class on a case-by-case basis.

Product-specific exclusions

On a 7-day Deferred Period, any non-permanent disability due to the conditions listed below will be subject to a 30-day Deferred Period:

- Adjustment disorders, chronic fatigue syndrome/myologic encephalomyelitis (yuppie flue), chronic pain syndrome, mental and psychiatriac disorders, and stress related disorders. For stress related or psychotic disorders, a claim will be considered under the 7-days Deferred Period only if the Life Covered has been treated in a hospital or clinic for at least 7 days by a specialist psychiatrist. Sleep therapy as a treatment is excluded.
- For back injury, back disorders, headaches, migraines, fribromyalgia, influenza, bronchitis, gastric influenza, laryngitis. sinusitis, and pharyngitis. For back injury or disorders, a claim will be considered under 7-days Deferred Period only if the life covered has been treated in a hospital or clinic for at least 7 days by an orthopaedic surgeon or neurosurgeon.
- Operations or treatment of a purely cosmetic nature other than due to an accident.
- Surgical procedures for infertility and surgical procedures to improve potency.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- · Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- · Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.



ENHANCE INCOME PROTECTION COVER WITH

Temporary Income TopUp Cover

This benefit enhances the Income Protection Cover benefit such that the Life Covered can be covered for up to 100% of their net of tax income when temporarily unable to work for up to 24 months or for the first 24 months of a claim that lasts longer than 24 months.

Product details

Qualifying criteria

 The Life Covered must have an active Investec Life Income Protection Cover policy (or be in the process of applying for one)

Benefit structure

Pays out up to 25% of net of tax income for temporary conditions.

Type of premium

- Monthly in arrears
- Age-rated premium pattern
- · Annually reviewable

Entry age limits

18 to 60 (next birthday)

Benefit and premium payment term

- Up to the planned retirement age of 60, 65 or 70
- Subject to a minimum of five (5) years between issue age (next birthday) and planned retirement age
- For example, a 58-year-old client can only select 65 and 70 as their planned retirement age

Minimum Cover Amount

R1 666

Maximum Cover Amount

Unlimited.

Cover above R37 500 per month is subject to further underwriting.

Maximum payout

Up to 25% of net of tax personal income.

Annual cover increase

- 0%, 5% or CPI
- CPI is capped at 10%

Cover Amount

The Cover Amount is determined as the difference between the permanent upgrade amount and the Income Protection Cover amount, or simply:

Cover Amount = Income Protection Cover Amount ÷ 3

Example:

A client earns R120 000 net of tax. He can take out an Income Protection Cover of R90 000, which would be upgraded to R120 000 on permanent disability. He can take out R30 000 Temporary TopUp Income Cover to enhance the temporary income to R120 000, which is 100% net of tax income.

In-claim income increase

Based on the Annual Cover Increase, applied at policy anniversary even during the claim payment period.

Deferred Period

Seven (7) days, one (1) month or three (3) months. As selected for Income Protection Cover.

Backpay feature

For self-employed or professionals with a one (1) month deferred period.

Claim payment period

Maximum of 24 months per claim event, including the deferred period.

Payment and product cease

Claim payment ceases on the earlier of:

- The Life Covered recovering
- 24 months after the claim event (including the Deferred Period)
- · Confirmation of permanency
- End of the month that the Life Covered reaches the planned retirement age
- Failure to provide proof of continuing disability
- · The death of the Life Covered
- The policy ends for any of the reasons set out in the General Terms and Conditions

Product ceases on the earlier of:

- Cancelation of the Income Protection Cover
- Cancelation of the Temporary Income TopUp Cover
- Reaching planned retirement age
- Death of the Life Covered
- Failure to provide proof of continuing disability
- The policy ends for any of the reasons set out in the General Terms and Conditions

Claims aggregation

After six (6) months of temporary disability we may reduce the monthly income payout so that the total monthly income payout from Investec Life (this includes all income payouts from all Investec Life benefits) plus all income (from any forms of work engaged in) plus income payouts from other insurers, employers or retirement funds do not exceed 100% of the pre-claim net of tax personal income.

Waiver of premium

If a claim has been approved by Investec Life, premiums will no longer be payable during the Deferred Period and when the claim is in payment. If the Life Covered returns to work, and cover recommences, premiums will again become due.

Occupation Class

For prospective clients, Investec Life classifies an application into one of the following occupation classes based on the Life Covered's occupation and whether he/she belong to any of the professional bodies in the Investec Life list:

- Medical Professional Occupation Class
- Non-medical Professional Occupation Class
- Occupation Class 1
- Occupation Class 2
- Occupation Class 3
- Occupation Class 4

An application is classified as a Medical Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association

Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- · Any of the Societies of Advocates of South Africa
- Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia

- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for a corresponding professional occupation class on a case-by-case basis.

Product-specific exclusions

On a 7-day Deferred Period, any non-permanent disability due to the conditions listed below will be subject to a 30-day Deferred Period:

- Adjustment disorders, chronic fatigue syndrome/myologic encephalomyelitis (yuppie flue), chronic pain syndrome, mental and psychiatriac disorders, and stress related disorders. For stress related or psychotic disorders, a claim will be considered under the 7-days Deferred Period only if the Life Covered has been treated in a hospital or clinic for at least 7 days by a specialist psychiatrist. Sleep therapy as a treatment is excluded.
- For back injury, back disorders, headaches, migraines, fribromyalgia, influenza, bronchitis, gastric influenza, laryngitis. sinusitis, and pharyngitis. For back injury or disorders, a claim will be considered under 7-days Deferred Period only if the Life Covered has been treated in a hospital or clinic for at least 7 days by an orthopaedic surgeon or neurosurgeon.
- Operations or treatment of a purely cosmetic nature other than due to an accident.
- Surgical procedures for infertility and surgical procedures to improve potency.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- · Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from the Life Covered's dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.

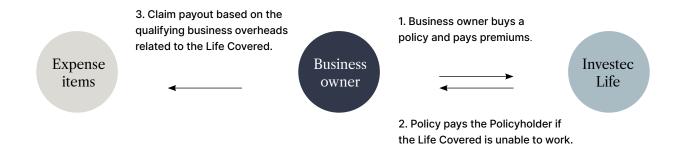


COVER THAT PROTECTS YOUR CLIENTS' BUSINESS

Business Overheads Cover

This benefit protects the Life Covered against financial losses from certain agreed business overheads while they are unable to work. Investec Life pays the Life Covered a monthly payout, subject to specified maximum limits.

How this benefit works



Product details

Investec Life's Business Overheads Cover pays out in the event that the Life Covered is unable to perform their own occupational duties due to a temporary or permanent illness, injury or disability. These monthly expenses must continue during the period of disability, up to a specified maximum period.

Qualifying criteria

- The Life Covered must have an active Investec Life Income Protection Cover policy (or be in the process of applying for one)
- Must be self-employed

Monthly payouts

Covers non-permanent and permanent events.

Type of premium

- Monthly in arrears
- Age-rated premium pattern
- Annually reviewable

Entry age limits

18 to 60 (next birthday)

Benefit and premium payment term

- Up to the planned retirement age of 60, 65 or 70
- Subject to a minimum of five (5) years between issue age (next birthday) and planned retirement age
- For example, a 58-year-old client can only select 65 and 70 as their planned retirement age

Cover amount limit

Up to 100% of the Life Covered's share of the qualifying business overhead expenses, which must continue to be incurred during the period of disability.

Minimum Cover Amount

R5 000 per month

Maximum Cover Amount

Unlimited.

Cover above R150 000 per month is subject to further underwriting.

Annual cover increase

- 0%, 5% or CPI
- CPI is capped at 10%

In-claim income increase

Same as annual cover increase, and happens on policy anniversary even during the claim payment period.

Lives Covered

One (1) individual covered per benefit.

Backpay feature

For self-employed or professionals with a one (1) month deferred period.

Deferred Period

Seven (7) days, one (1) month or three (3) months.

Maximum payment period

12 or 24 months per claim event (including the Deferred Period):

- Once claimed the full 12 or 24 month period, the payments cease but the product can be kept active for the Life Covered to still be covered if he or she fully recovers and goes back to work on full time basis for another continuous 90 days
- Premiums are payable in full once the claim payments cease
- Upon permanent disability the benefit is cancelled after the end of the selected payment period

Payment and product cease

Claim payment ceases on the earlier of:

- The Life Covered recovers
- Reaching the end of the payout period
- The Life Covered's share of the business being sold
- The business being no longer a going concern
- Failure to provide proof of continuing disability
- End of the month that the Life Covered reaches planned retirement age
- · The death of the Life Covered
- The policy ending for any of the reasons set out in the General Terms and Conditions

The benefit will end on the earliest of the following dates:

- The death of the Life Covered
- When Income Protection Cover is cancelled
- When the Life Covered reaches the Planned Retirement Age
- The policy ends for any of the reasons set out in the General Terms and Conditions

Definition of business expenses

Business overhead expenses include:

Rent of business premises; mortgage interest for business premises; interest portion of other debt repayments; property taxes and levies; electricity; water; telephone; internet services; instrument/ equipment leasing costs; insurance premiums; accounting fees; regular maintenance services; salaries of staff who are unable to generate turnover in absence of the Life Covered.

Where a locum is employed and the business does not suffer business overhead expense losses during the period that the Life Covered is unable to work, then Investec Life will make a payout up to the cost of a locum, subject to the cover amount.

Business overhead expenses exclude:

Life Covered's income, depreciation, capital portion of debt repayments, cost of stock, expenditure on assets, cost of furniture, cost of instrument/equipment, drawing accounts, salaries of staff who are able to generate turnover in absence of the Life Covered, retrenchment costs, all personal expenses not related to business expenses, and any payments to other person or institution who shares directly or indirectly in the profits of the business.

It's important to remind clients that actual business expenses are expenses paid to third parties in the normal operation of their business.

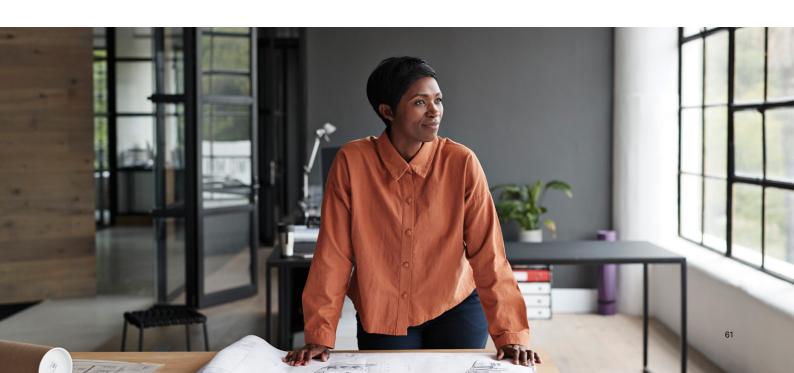
Claims aggregation

The claim amount payable is subject to a maximum of 100% of the average amount of the Life Covered's share of qualifying business overhead expenses incurred during the 12-month period before occurrence of the insured event.

The Policyholder has 60 days from the first claim payment to prove the Life Covered's share of qualifying business overhead expenses incurred over the last 12 months before occurrence of the insured event. Continuity of overhead expenses must be proven by the Policyholder every month thereafter.

After six (6) months from the occurrence of the insured event, payout will be aggregated with other business overheads payouts from Investec Life or from other insurers.

Payout will not be aggregated with other personal income protection payouts (which insures the loss of personal income rather than overhead expenses) from Investec Life or from other insurers while the Life Covered is disabled.



Payout recipient

Policyholder

Waiver of premium

If a claim has been approved by Investec Life, premiums will no longer be payable during the Deferred Period and when the claim is in payment. If the Life Covered returns to work, and cover recommences, premiums will again become due.

Occupation Class

For prospective clients, Investec Life classifies an application into one of the following occupation classes based on the Life Covered's occupation and whether he/she belong to any of the professional bodies in the Investec Life list:

- Medical Professional Occupation Class
- Non-medical Professional Occupation Class
- Occupation Class 1
- Occupation Class 2
- Occupation Class 3
- Occupation Class 4

An application is classified as a Medical Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- The Health Professions Council of South Africa
- South African Pharmacy Council
- The Pharmaceutical Society of South Africa
- The South African Veterinary Association

Professional Occupation Class only if the Life Covered belongs to the following professional bodies:

- Any of the Societies of Advocates of South Africa
- · Any of the Law Societies of South Africa
- Any of the IAA recognised actuarial bodies
- The Association of South African Quantity Surveyors
- Any of the Institutes of Professional Land Surveyors of South Africa or Namibia

- The South African Council for the Architectural Profession
- The Institute of South African Architects
- The South African Institute of Patent Agents
- CFA charter holder with the CFA Institute
- Any of the Societies of Chartered Accountants of South Africa
- Trainee accountants writing the SAICA qualifying exams
- The South African Institute of Professional Accountants
- The Chartered Institute of Management Accountants
- The Institute of Internal Auditors
- The Institute of Internal Auditors of South Africa
- The Engineering Council of South Africa (ECSA)
- The Financial Planning institute note that this only applies to Certified Financial Planners (CFPs) with five (5) years of experience in the financial planning field
- The South African Council for Natural Scientific Professions
- The Institute of Information Technology Professionals South Africa
- The South African Council of Planning
- The Institute of Certificated and Chartered Statisticians of South Africa
- The Royal institute of Charted Surveyors
- The Chartered Governance Institute of Southern Africa

Applicants who belong to an international professional body that is equivalent to one of the above professional bodies will be considered for a corresponding professional occupation class on a case-by-case basis.

Product-specific exclusions

On a 7-day Deferred Period, any non-permanent disability due to the conditions listed below will be subject to a 30-day Deferred Period:

- Adjustment disorders, chronic fatigue syndrome/myologic encephalomyelitis (yuppie flue), chronic pain syndrome, mental and psychiatriac disorders, and stress related disorders. For stress related or psychotic disorders, a claim will be considered under the 7-days Deferred Period only if the Life Covered has been treated in a hospital or clinic for at least 7 days by a specialist psychiatrist. Sleep therapy as a treatment is excluded.
- For back injury, back disorders, headaches, migraines, fibromyalgia, influenza, bronchitis, gastric influenza, laryngitis. sinusitis, and pharyngitis. For back injury or disorders, a claim will be considered under 7-days Deferred Period only if the Life Covered has been treated in a hospital or clinic for at least 7 days by an orthopaedic surgeon or neurosurgeon.
- Operations or treatment of a purely cosmetic nature other than due to an accident.
- Surgical procedures for infertility and surgical procedures to improve potency.

General exclusions

No part of the cover amount in respect of any of the benefits will be paid by Investec Life if an insured event in respect of the benefit is due to an excluded event. These are explained below.

In the case of the insured event being the death of a Life Covered, if the death is due to, or hastened by, his or her own actions (including suicide) in the first 24 months after the:

- Cover Start Date of the benefit
- Voluntary Cover Increase Date of the benefit, but this will only apply to the increased portion of the cover
- Restart Date after an earlier lapse / cancellation

This exclusion is irrespective of whether, at the time of the act, the Life Covered is sane or insane.

In the case of the insured event involving disability, impairment or illness of the Life Covered, if the disability or illness of the Life Covered is due to, or hastened by, his or her own actions, including elective cosmetic surgery or attempted suicide, irrespective of whether, at the time of the act, the Life Covered is sane or insane.

If the Life Covered commits or attempts to commit any criminal acts.

If the Life Covered wilfully and actively participates in war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

If the Life Covered visits (for any purpose) any countries under international sanctions or those that are experiencing internal conflict, war (whether war has been declared or not), invasion, act of foreign enemy, hostilities or war–like operations (whether war has been declared or not), civil war, riots, strikes, military or usurped power, military uprising, martial law, rebellion, revolution, insurrection or terrorism.

Intentional and negligent consumption of alcohol, poison or drugs and narcotics unless prescribed by a medical practitioner or the Life Covered being affected (temporarily or otherwise) by alcohol or drugs other than as prescribed by a medical practitioner.

The Life Covered drives a motor vehicle while under the influence of alcohol, or under the influence of drugs having a narcotic effect or where the blood alcohol levels of the Life Covered exceed the legal limit.

If the Life Covered fails to disclose information honestly to us.

If we cannot obtain enough medical evidence from the Life Covered dependants or their treating doctor to fulfil our criteria for making a Benefit Payment.

A claim payout in respect of any benefit will be reduced if the Policyholder or the Life Covered failed to disclose information honestly about existing insurance policies, and this resulted in over-insurance.



Travel disclosures

Travel disclosures required during underwriting are as follows:

- Disclosure of travel in the 12 months following underwriting
- Travel to risk level one (1) countries: standard rating
- Any travel to risk level two (2) or three (3) countries: travel exclusion applied on cover
- Travel to any level four (4) or sanctioned countries: general exclusion applicable on the entire policy

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer travelling to disclosed countries.

Throughout the policy term:

Travel outside of South Africa (for any purpose) for longer than 90 consecutive days or relocation abroad: Policyholder must inform Investec Life, cover will be confirmed depending on the country travelling to and the purpose of living abroad.

Risky activity disclosures

The Life Covered is required to disclose participation in any of the following sports or activities during full underwriting, but not during limited underwriting:

- Big game hunting
- Bodybuilding or weightlifting (for competitive reasons)
- Boxing or mixed martial arts
- Cage fighting
- Motorcar or motorcycle racing
- Mountaineering

- Microlighting, hand-gliding or gyrocopter flying
- Private flying, including flying a fixed-wing aircraft and helicopter
- Quad-bike racing
- Sky diving or parachuting
- Underwater diving

Premium loadings or exclusions are reviewable by Investec Life should the Policyholder inform Investec Life that the Life Covered is no longer participating in a sport or activity loaded or excluded for.

Financial underwriting on personal cover

Investec Life will not provide cover that exceeds the following multiples of gross annual income, less existing cover (with Investec Life or elsewhere):

	Multiple of gross annual income	
Age band (next birthday)	All mortality	All disability lump sum cover
	(Life Cover + Funeral Cover + Mortgage Protection Cover)	(Lump sum cover)
<36	25	25
36-45	20	20
46-55	20	15
56-60	15	15
61-65	15	10
66+	10	5

Aggregation rules

Mortgage Protection Cover, Funeral Cover or Severe Illness Cover

No aggregation will be applied at claims stage

Income Protection Cover, Temporary Income TopUp Cover or Business Overheads Cover

 Aggregation is applied as detailed under each benefit

Life Cover or Disability Cover

- If the client does not disclose existing cover or discloses that they are replacing cover (but fail to do so), aggregation may be applied at the claims stage if the total cover exceeds the limits specified above
- Aggregation will not be applied, even if there was non-disclosure of existing cover, where cover does not result in over-insurance at claims stage

Non-payment of premiums

If there is a failed premium collection, Investec Life will raise a double debit order on the following premium collection date.

Example:

If the policy's premium collection date is the 25th of every month, and there is a failed premium collection on 25 March, Investec Life will raise a double debit order on 25 April.

Lapse rules

If a policy is in arrears for two (2) premiums, the policy will automatically lapse at the end of that month.

This means the Policyholder has a grace period of two (2) months should they miss premiums before a policy lapses. If there is a failed premium collection, as in the case with the example above, and the premium collection on 25 April also fails, the policy will lapse on 30 April.

Restart rules

Once a policy has lapsed or is cancelled, the Policyholder can ask Investec Life to restart the benefit/s. Investec Life may do this without changing the terms and conditions of the Policyholder's cover, provided that:

- The Policyholder has requested the restart within three (3) months after the policy has lapsed or is cancelled
- Investec Life has confirmation by way of a health questionnaire that the Life Covered's state of health has not changed since they were last underwritten by Investec Life

Investec Life may request further underwriting requirements (including questionnaires and medical tests, where necessary) during a restart application.

After the health questionnaire and/or submission of the additional underwriting requirements have been received, Investec Life may apply new terms and conditions to the policy from the restart date.

Any waiting periods applicable prior to the lapse or cancellation will resume on the restart date.

As there will be no cover in place from the policy having lapsed/cancelled until the restart date, there will be no arrear premiums payable in order to restart the benefit/s.

Annexure A: Severe Illness definitions

Severe Illness Cover and Accelerated Severe Illness Cover cover certain covers certain medical conditions or traumatic events which result in a change to your lifestyle. For a claim to be valid, the following criteria must be met:

All conditions must be diagnosed by the appropriate health practitioner mentioned, and one who is recognised by the Health Professions Council of South Africa (HPCSA).

Diagnoses must be supported by relevant special investigations, including blood tests, imaging, histology, or any other tests that confirm the diagnosis.

The severities of certain conditions are assessed against Activities of Daily Living (ADL). This is an industry recognised scoring system whereby an individual's functional ability to perform important activities of daily living is used.

Investec Life reserves the right to request an independent assessment by a health practitioner recognised by the HPCSA to confirm the diagnosis and severity.

Please note that all conditions resulting from any form of substance abuse will be excluded.



Category A: Cardiovascular

The diagnosis of the cardiovascular condition must be made and confirmed by a cardiologist or vascular surgeon. All supporting investigations such as ECGs, echocardiograms, blood tests, angiograms, including all other relevant tests must be submitted to confirm the diagnosis.

Heart attack (Myocardial Infarction)

A heart attack is the death or injury of the heart muscle due to a lack of blood supply, usually caused by the blockage of a blood vessel supplying the heart. This results in typical symptoms, and the severity can be assessed by doing an ECG (electrocardiogram), a scan of the heart (echocardiogram) and by blood tests that show a release of enzymes into the bloodstream due to heart muscle injury or death.

The maximum payout on the diagnosis of a heart attack is 50%, thereafter any higher payout will be assessed after 28 days.

Exclusions

An acute coronary syndrome without infarction, stable or unstable angina.

100%

A heart attack (myocardial infarction) that meets the criteria for a moderate heart attack resulting in severe, permanent impairment of function, as measured by the following functional criteria, measured 28 days post infarction:

- NYHA class 4
- METS 1 or less
- LVEF < 40%
- LVEDD > 72
- Ultrasound in FS < 16%

75%

A heart attack (myocardial infarction) that meets the criteria for a moderate heart attack resulting in permanent impairment of function, as measured by the following functional criteria, measured 28 days post infarction:

- METS 2-7
- LVEF 40-50%
- LVEDD 59-72
- Ultrasound in FS 16-25%

50%

A moderate heart attack.

This is defined as the death of heart muscle, due to inadequate blood supply, as evidenced by any of the following combinations of criteria:

- Compatible clinical symptoms and raised cardiac biomarkers
- Compatible clinical symptoms and new pathological Q-waves on ECG defined as:
 - Any new Q-wave in leads V1 through V3
 - A Q-wave greater than or equal to 40ms (0.04s) in leads I, II, AVL, AVF, V4, V5 or V6
 - The Q-wave changes must be present in any two (2) contiguous leads, and be greater than or equal to 1mm in depth
 - The appearance of new complete bundle branch block

or

- 3. New pathological Q-waves on ECG as defined above and raised cardiac biomarkers
- 4. ST-segment and T-wave changes on ECG indicative of myocardial injury (as defined below) and raised cardiac biomarkers

50% (continued)

ECG changes indicative of Myocardial Ischaemia that may progress to Myocardial Infarction:

Patients with ST-segment elevation

- New or presumed new ST segment elevation at the J point in two (2) or more contiguous leads with the cut-off points greater than or equal to 0.2mV in leads V1, V2, or V3, and greater than or equal to 0.1mV in other leads
- Contiguity in the frontal plane is defined by the lead sequence AVL, I and II, AVF, III

Patients without ST-segment elevation

- ST-segment depression of at least 0.1 mV
- T-wave abnormalities only

Where raised cardiac biomarkers are referenced above, they are defined as any one of the following Troponin or Non-Troponin Markers:

Sensitive Troponin Markers

Marker		Value**	
*Assay (test)	Troponin Type	Unit: ng/L	Unit: ng/ml
Roche hsTnT	TnT	> 1000	> 1,0
Abbott ARCHITECT	Tnl	> 3000	> 3,0
Beckman AccuTnI	Tnl	> 5000	> 5,0
Siemens Centaur Ultra	Tnl	> 6000	> 6,0
Siemens Dimension RxL	Tnl	> 6000	> 6,0
Siemens Stratus CS	Tnl	> 6000	> 6,0

^{*} Use the relevant manufacturer's assay (test) or equivalent as it appears on the laboratory report.

Conventional Troponin Markers

Marker		Value	
Assay (test)	Troponin Type	Unit: ng/L	Unit: ng/ml
Conventional TnT	TnT	> 1000	> 1,0
Conventional AccuTnI***	Tnl	> 500	> 0,5

^{***} Or equivalent threshold with other Troponin I methods.

Non-Troponin Markers

Marker	Value
Raised CK-MB mass	Raised two (2) times or more the upper limit of the normal laboratory reference range in the acute presentation phase.
Total CPK elevation	Raised two (2) times or more the upper limit of the normal laboratory reference range in the acute presentation phase, with at least 6% being CK-MB.

^{**} Values represent multiples of the World Health Organisation (WHO) MI rule in levels and not the 99th percentile values (upper limit of normal) as quoted on the laboratory result.

25%

A mild heart attack.

This is defined as the death of heart muscle, due to inadequate blood supply, as evidenced by all three (3) of the following criteria:

- 1. Compatible clinical symptoms
- Characteristic ECG changes indicative of myocardial ischaemia or myocardial infarction (as defined below) or angiographic evidence of 50% or more stenosis of a coronary artery treated with a stent or hypokinesis of the myocardium confirmed on echocardiogram

ECG changes indicative of Myocardial Ischaemia that may progress to Myocardial Infarction:

Patients with ST-segment elevation

- New or presumed new ST segment elevation at the J point in two (2) or more contiguous leads with the cut-off points greater than or equal to 0.2mV in leads V1, V2, or V3, and greater than or equal to 0.1mV in other leads
- Contiguity in the frontal plane is defined by the lead sequence AVL, I and II, AVF, III

Patients without ST-segment elevation

- ST-segment depression of at least 0.1 mV
- T-wave abnormalities only

3. Raised cardiac biomarkers defined as any one of the following Troponin or Non-Troponin Markers:

Sensitive Troponin Markers

Marker		Value**	
*Test	Troponin Type	Unit: ng/L	Unit: ng/ml
Roche hsTnT	TnT	> 500	> 0,5
Abbott ARCHITECT	Tnl	> 1500	> 1,5
Beckman AccuTnI	Tnl	> 2500	> 2,5
Siemens Centaur Ultra	Tnl	> 3000	> 3,0
Siemens Dimension RxL	Tnl	> 3000	> 3,0
Siemens Stratus CS	Tnl	> 3000	> 3,0

^{*} Use the relevant manufacturer's assay (test) as it appears on the laboratory report.

Conventional Troponin Markers

Marker		Value	
Assay (test)	Troponin Type	Unit: ng/L	Unit: ng/ml
Conventional TnT	TnT	> 500	> 0.5
Conventional AccuTnI***	Tnl	> 250	> 0,25

^{***} Or equivalent threshold with other Troponin I methods.

^{**} Values represent multiples of the World Health Organisation (WHO) MI rule in levels and not the 99th percentile values (upper limit of normal) as quoted on the laboratory result.

Non-Troponin Markers

Marker	Value
Raised CK-MB mass	Raised above the upper limit of the normal laboratory reference range but not meeting the severity C definition (i.e. below two (2) times the upper limit of the normal laboratory reference range) in the acute presentation phase.
Total CPK elevation	Raised above the upper limit of the normal laboratory reference range but not meeting the severity C definition (i.e. below two (2) times the upper limit of the normal laboratory reference range) in the acute presentation phase, with at least 6% being CK-MB.

Cardiomyopathy

A ventricular impairment that results in permanent heart failure.

100%

Permanent or irreversible heart failure receiving optimal treatment for at least six (6) months or longer and still with EF < 40% or NYHA IV or METS < = 3.

75%

Permanent or irreversible heart failure receiving optimal treatment for at least six (6) months or longer and still with EF 40-49% or NYHA III or METS < 5.

15%

Acute heart failure resulting in more than five (5) days of ICU stay or cardiac care stay.



Coronary Artery Bypass Graft (CABG) and Vascular Surgery

Coronary artery bypass graft surgery, also called heart bypass or bypass surgery, is a surgical procedure performed to relieve chest pain and reduce the risk of death from heart disease.

Arteries or veins from elsewhere in the patient's body (most commonly the leg) are joined to the coronary arteries of the heart to bypass the narrowing of the affected or diseased arteries. This improves the blood supply and circulation to the heart muscle.

The terms 'single bypass', 'double bypass', 'triple bypass', 'quadruple bypass', and 'quintuple bypass' refer to the number of coronary arteries bypassed in the procedure.

This surgery is usually performed with the heart stopped, necessitating the usage of highly specialised theatre equipment to keep the heart and the lungs working during the course of the operation.

Vascular surgery means undergoing surgery on one or more blood vessels to repair a narrowing, dissection or aneurysm by means of a bypass graft, stent or endarterectomy.

100%

- Bypass graft surgery to correct the narrowing of, or blockage to, three (3) or more coronary arteries
- Bilateral carotid artery endarterectomy or bypass surgery
- Surgery to repair an aneurysm, dissection or narrowing of the thoracic or abdominal aorta (this excludes endovascular procedures or stenting)

Arrhythmias

25%

Arrhythmia having undergone pathway ablation treatment.

5%

- Arrhythmia having undergone electrical cardioversion
- Atrial fibrillation having undergone at least six (6) months of optimal treatment or emergency room administration of intravenous treatment

75%

Unilateral carotid artery endarterectomy or bypass surgery.

50%

Bypass graft surgery to correct the narrowing of, or blockage to, one (1) or two (2) coronary arteries.

Surgical repair to an aneurysm, dissection or narrowing of the following branches of the aorta: subclavian, brachiocephalic, splenic, renal, iliac, or ileo-femoral arteries. This excludes endovascular procedures or stenting, which will be paid at 25% as set out below.

25%

- Stenting of one (1) or both carotid arteries due to stenosis
- Bypass graft surgery to correct the narrowing of, or blockage to, any one (1) coronary artery
- Angioplasty with or without stenting
- Endovascular surgery or stent to repair any aneurysm of the following branches of the aorta: subclavian, brachiocephalic, splenic, renal, iliac or ileo-femoral arteries
- Endovascular surgery or stent to repair any aortic aneurysm



Peripheral Arterial Disease

100%

Severe peripheral arterial disease with gangrene or amputation as a complication or where ankle brachial index (ABI) of < 0.4 has been confirmed.

75%

Severe peripheral arterial disease with persistent claudication and leg ulcers despite receiving optimal treatment for at least six (6) months (surgical or medical) where ankle brachial index (ABI) of < 0.7 has been confirmed.

Heart surgery

100%

Heart valve replacement.

75%

- Open-heart pericardiectomy
- Heart valve repair

50%

- Open heart surgery to repair a cardiac abnormality not otherwise specified
- Medically indicated permanent defibrillator insertion

25%

- Minimally invasive pericardiectomy
- Arrhythmia having undergone permanent pacemaker insertion

10%

Surgical repair of atrial or ventricular septal defect.

Heart Transplant

100%

Heart transplant

Other

15%

- Endocarditis or pericarditis resulting in more than three (3) days ICU stay
- Acute rheumatic fever with three (3) days ICU or cardiac care unit stay due to cardiac complications

5%

Hypertensive emergency with acute signs of end organ damage and a diastolic pressure of higher than 120 mmHg treated in hospital by a specialist physician.

Category B: Cancer

A cancer or malignancy is characterised by the uncontrolled growth of malignant cells and invasion of surrounding tissue or spread to distant organs. The malignancy must be diagnosed by an appropriate specialist and the diagnosis must be supported with histological confirmation or relevant special investigations.

The terms cancer and malignancy include leukaemia, lymphoma and sarcoma.

Cancers are generally classified by severity into four (4) stages. However, brain and prostate cancer, leukaemia and lymphoma do not conform to this general classification.

Unless specified elsewhere, internationally recognised staging systems will be used to assess the cancer.

The following conditions are excluded from this definition:

All cancers in situ and all pre-malignant conditions or conditions with low malignant potential or classified as borderline malignancy which are not mentioned in the below.

100%

- Acute Myeloid Leukaemia (AML)
- Chronic Myeloid Leukaemia (CML)
- Acute Lymphocytic Leukaemia (ALL)
- Chronic Lympthocytic Leukaemia (CLL) stage III or IV on Rai Classification system or Binet Stage C
- Aplastic anaemia having undergone bone marrow transplant or blood transfusion
- Multiple myeloma stage III
- Hodgkins or Non-Hodgkins Lymphoma stage III or IV
- Prostate cancer T4N0M0 or T(any)N1M0 or T (any) N (any) M1
- Malignant melanoma stage III or IV
- Carcinoid syndrome with evidence of liver metastasis
- Brain tumours grade III or IV WHO classification
- Basal cell or squamous cell skin carcinoma stage IV
- Stage III or IV cancer unless specified elsewhere
- Bone marrow transplant due to haematological malignancy

50%

 Chronic Lymphocytic Leukaemia (CLL) stage II on Rai Classification system or Binet Stage B

- Multiple myeloma stage I or II
- Hodgkins or Non-Hodgkins lymphoma Stage II
- Prostate cancer T3N0M0
- Malignant melanoma stage II
- Brain tumours grade II WHO classification
- Stage II cancer unless specified elsewhere

25%

- Chronic Lymphocytic Leukaemia (CLL) Stage 0 or I on Rai Classification system or Binet Stage A
- Hodgkins or Non-Hodgkins lymphoma Stage I
- Prostate cancer T1N0M0 with Gleason score > = 7
- Prostate cancer T2N0M0
- Total mastectomy for ductal or lobular carcinomain-situ of the breast
- Prophylactic bilateral total mastectomy which has been medically indicated (not for cosmetic purposes)
- · Hairy cell leukaemia
- Basal cell or squamous cell skin carcinoma stage III
- Malignant melanoma with invasion beyond the epidermis or with a Breslow thickness of more than 1mm or where ulceration is present (stage 1B)
- Bone marrow aplasia
- Stage I cancer unless specified elsewhere

15%

Myeloproliferative disorders with fibrotic transformation.

10%

- Basal cell skin carcinoma or squamous cell skin carcinoma (stage I or II) having undergone a skin graft or skin flap
- Carcinoid syndrome

5%

- Prostate cancer T1N0M0 with Gleason score < 7
- Myeloproliferative disorders: polycythemia vera, essential thrombocytosis

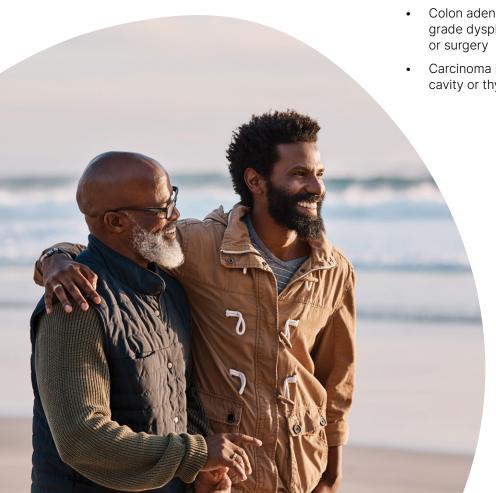
Early-stage Cancers

The following cancers in-situ, pre-malignant conditions or conditions with low malignant potential, or classified as borderline malignancy, will be paid at 15% of the Cover Amount, and the benefit will be capped at a once-off R150 000 payment.

The diagnosis must be made by an oncologist and supported with histological confirmation or relevant special investigations.

- Lobular carcinoma in situ of the breast with chemotherapy, lumpectomy or breast-conserving surgery
- Ductal carcinoma in situ of the breast with chemotherapy, lumpectomy or breast-conserving surgery
- Carcinoma in situ of the cervix (cervical intraepithelial neoplasia II & III) with excision
- Carcinoma in situ of the ovary, fallopian tubes, vagina or vulva with excision
- Carcinoma in situ of the uterus with excision or hysterectomy
- Carcinoma in situ of the testis (intratubular germ cell neoplasia) with radiotherapy or orchidectomy
- Carcinoma in situ or high-grade dysplasia of the oesophagus with excision, oesophagectomy or endoscopic (including ablation) therapy

- Bladder carcinoma in situ (Tis) with excision or partial or total cystectomy or treated with intravesical bacillus Calmette-Guerin (BCG) treatment
- Carcinoma in situ of the stomach (intraepithelial tumour without invasion of the lamina propria) with radiotherapy, chemotherapy, excision or gastrectomy
- · Carcinoma in situ of the penis with excision
- Carcinoma in situ of the lung with excision
- T1N0M0 Melanoma (lentigo maligna melanoma, nodular melanoma, superficial spreading melanoma or acral lentiginous melanoma) with excision
- Trichilemmal carcinoma, pilomatrix carcinoma, sebaceous carcinoma, apocrine carcinoma, eccrine gland carcinoma, adenoid cystic carcinoma, Merkel cell carcinoma treated with a skin flap or skin graft
- Carcinoma in situ of the kidney with excision (excludes biopsy) or nephrectomy
- Colon adenoma with polyp size > 1 cm or highgrade dysplasia, treated with polypectomy or surgery
- Carcinoma in situ of the larynx, pharynx, nasal cavity or thyroid with radiotherapy or excision





Category C: Cerebrovascular and Central Nervous System

All neurological conditions or disorders must be diagnosed by a neurologist or neurosurgeon and supported by imaging or relevant special investigations.

Brain tumours classified under the World Health Organisation classification are paid under the cancer benefit.

Severity levels for all neurological conditions or disorders must be assessed through a full neurological examination by a specialist neurologist after three (3) months.

Stroke

A stroke is defined as death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in neurological deficit lasting longer than 24 hours, confirmed by neuro-imaging investigation and appropriate clinical findings by a specialist neurologist.

For the above definition, the following are not covered:

- Transient ischaemic attack
- · Vascular disease affecting the eye or optic nerve
- Migraine and vestibular disorders
- Traumatic injury to brain tissue or blood vessels

100%

Severe stroke resulting in the need for constant assistance, as measured by permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.

75%

Moderate stroke resulting in the inability to function independently, as measured by permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

Mild stroke resulting in the ability to function independently, as measured by permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

25%

Almost fully recovered stroke, with little residual symptoms or signs, as measured by the ability to do all basic or advanced ADLs.

Paralysis

Paralysis refers to the total and permanent loss of function of two (2) or more limbs as a result of injury to or disease of the spinal cord.

100%

- Permanent paraplegia
- · Permanent quadriplegia
- Permanent hemiplegia
- Permanent diplegia

Parkinson's Disease

Definitive diagnosis of Parkinson's disease. The diagnosis must be confirmed by a consultant neurologist. Where the diagnosis is deemed equivocal, Investec Life reserves the right to request a DaT scan to further support the diagnosis.

100%

Parkinson's disease resulting in severe permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.

75%

Parkinson's disease resulting in moderate permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

Parkinson's disease resulting in mild permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

25%

On diagnosis of Parkinson's disease.

Multiple Sclerosis

The diagnosis must be confirmed by a neurologist and must show distribution of central nervous system lesions in both space (imaging) and time (more than two (2) clinical events) which can be confirmed by either clinical findings alone or a combination of clinical and MRI findings.

Clinically isolated syndromes are excluded.

100%

Relapsing-remitting multiple sclerosis resulting in severe, permanent impairment whereby an inability to perform or more basic ADLs exists.

75%

Relapsing-remitting multiple sclerosis resulting in moderate, permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

25%

Definitive diagnosis of multiple sclerosis.

Dementia (including Alzheimer's Disease)

The diagnosis must be confirmed by a neurologist or psychiatrist and must exclude all other causes of cognitive dysfunction and deterioration.

100%

Confirmed diagnosis of Alzheimer's disease or dementia.

Motor Neuron Disease

A definitive diagnosis of motor neuron disease. The diagnosis must be confirmed by a neurologist and supported by special investigations.

100%

Diagnosis of motor neuron disease.

Myasthenia Gravis

The diagnosis must be confirmed by a neurologist or physician and supported by special investigations.

100%

Myasthenia gravis resulting in severe and permanent neurological impairment whereby an inability to perform three (3) or more basic ADLs or exists.

75%

Myasthenia gravis resulting in moderate and permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

Myasthenia gravis resulting in mild and permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

25%

Definitive diagnosis of generalised myasthenia gravis.

Guillain Barre Syndrome

The diagnosis must be made by a specialist neurologist with the necessary supporting special investigations to confirm the diagnosis.

100%

Diagnosis of Guillain Barre syndrome with more than two (2) months of mechanical ventilation or more than six (6) months of continuous neurological deficit.

25%

Diagnosis of Guillain Barre with one to two (1-2) months of mechanical ventilation or three to six (3-6) months of continuous neurological deficit.

15%

On diagnosis of Guillain Barre syndrome.

Coma

A coma means a definite diagnosis of a state of unconsciousness with failure to respond to external stimuli or response to internal needs and requiring life support for a continuous period as specified below, with a Glasgow coma score must be eight (8) or less. The diagnosis must be made by a specialist.

100%

Coma with Glasgow Coma Scale score of less than 8/15 lasting longer than 96 hours.

75%

Coma with Glasgow Coma Scale score of less than 8/15 lasting longer than 72 hours but less than 96 hours.

25%

Coma with Glasgow Coma Scale score of less than 8/15 lasting longer than 48 hours but less than 72 hours.

Intracranial lesions

100%

Any intracranial lesion resulting in a permanent neurological impairment despite optimal medical or surgical management which results in severe impairment whereby an inability to perform three (3) or more basic ADLs exists.

75%

Any intracranial lesion resulting in a permanent neurological impairment despite optimal medical or surgical management which results in moderate impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

Any intracranial lesion resulting in a permanent neurological impairment despite optimal medical or surgical management which results in mild impairment whereby an inability to perform three (3) or more advanced ADLs exists.

25%

Any intracranial lesion resulting in any characteristic symptoms of raised intra-cranial pressure.

Brain Surgery

100%

Post-surgical neurological deficit resulting in severe permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.

75%

Post-surgical neurological deficit resulting in moderate permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

- Post-surgical neurological deficit resulting in mild permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists
- Open brain surgery performed due to a medical condition or trauma
- Craniotomy performed due to a medical condition or trauma
- Shunt insertion for the treatment of hydrocephalus

25%

Intracranial endovascular procedure.

15%

Brain abscess having undergone surgical drainage.

10%

- Benign brain tumour having undergone stereotactic-radio surgery
- Intracranial aneurysm or an arteriovenous malformation having undergone endoscopic or stereotactic surgical intervention

Epilepsy

Status epilepticus (unremitting convulsions) that is refractory to optimal medical treatment.

100%

Status epilepticus (unremitting convulsions) resulting in permanent neurological impairment which results in severe impairment whereby an inability to perform three (3) or more basic ADLs exists.

50%

Status epilepticus (unremitting convulsions) resulting in permanent neurological impairment which results in mild impairment whereby an inability to perform three (3) or more advanced ADLs exists.

25%

Treatment refractory severe epilepsy whereby there is documented failure of two (2) recognised anticonvulsant drugs by a neurologist.

5%

Intubation and ventilation for status epilepticus.

Cerebrovascular or Central Nervous system not elsewhere specified

25%

- Diagnosis of cerebral malaria
- · Diagnosis of subarachnoid haemorrhage
- Depressed skull fracture with brain laceration

15%

Depressed skull fracture.

10%

- · Diagnosis of bacterial meningitis
- Diagnosis of raised intracranial pressure resulting in associated typical symptoms.
 Only one (1) payment will be made
- Brain abscess

5%

Diagnosis of cerebral oedema



Category D: Respiratory

All respiratory conditions covered in this benefit are required to be diagnosed by a pulmonologist and supported by the appropriate special investigations. The diagnosis must be confirmed by at least two (2) measurements taken six (6) months apart.

100%

- Lung transplant
- Irreversible cor pulmonale on optimal medical treatment
- End-stage respiratory failure with a permanent FEV1 or FVC or Dco of 40% or less than predicted

100%

- Confirmed diagnosis of pulmonary hypertension including pulmonary veno-occlusive disease, with a pulmonary artery pressure of more than 40mmHg
- Chronic obstructive or restrictive lung disease with a permanent FEV1 or FVC or Dco of 40% or less than predicted
- Proof of permanent home oxygen treatment for at least eight (8) hours per day

75%

- Chronic obstructive or restrictive lung disease with a permanent FEV1 or FVC or Dco of 41% to 45% of predicted
- Removal of one (1) lung or more than one (1) lobe of the lung due to a medical disease or condition. (Removal of lung for donor purposes is excluded)

50%

- Recurrent pulmonary emboli having undergone veno-caval filter insertion
- Chronic obstructive or restrictive lung disease with permanent FEV1 or FVC or Dco of 46% to 49% of predicted

25%

- Removal of one (1) lobe of the lung
- On diagnosis of a lung abscess
- Pleurectomy, decortication, drainage of empyema or other open lung surgery not specified elsewhere
- On diagnosis of a bronchopleural fistula
- On diagnosis of a pulmonary embolism

10%

- On diagnosis of any of the following conditions: bronchiectasis, fibrosing alveolitis, pneumoconiosis, or interstitial lung diseases
- Drainage of pleural effusion by intercostal drain
- Status asthmaticus resulting in intubation and ICU admission



Category E: Gastroenterology

All gastrointestinal conditions covered in this Benefit are required to be diagnosed by an appropriate specialist and supported by the appropriate special investigations.

Liver

100%

- Diagnosis of chronic liver disease classified as Child Pugh class C
- Total hepatectomy or liver transplant due to medical condition or disease
- Diagnosis of end-stage liver failure
- Fulminant hepatic failure
- On diagnosis of biliary cirrhosis

75%

- Diagnosis of chronic liver disease classified as Child Pugh class B
- On diagnosis of primary sclerosing cholangitis

50%

- Diagnosis of chronic liver disease classified as Child Pugh class A
- Diagnosis of chronic persistent hepatitis having resulted in histological changes which are confirmed on liver biopsy
- Diagnosis of portal hypertension

25%

- Partial hepatectomy due to a medical disease or condition (excludes biopsy)
- Partial hepatectomy due to a medical disease or condition (excludes biopsy)

Pancreas

100%

Complete pancreatectomy or pancreas transplant due to a medical condition or disease.

50%

Chronic pancreatitis resulting in diabetes or malabsorption syndrome.

25%

Partial pancreatectomy due to disease (excludes non-therapeutic procedures).

10%

Drainage of pancreatic cyst or abscess.

Bowel Disease

100%

- Total colectomy
- Permanent colostomy
- Permanent ileostomy

50%

Ulcerative colitis or Crohn's disease having undergone more than one (1) surgery. Colonoscopic treatment is excluded.

25%

- Ulcerative colitis or Crohn's disease on optimal medical treatment for more than six (6) months
- Diagnosis of a tracheal-oesophageal fistula

10%

Chronic rectal fistula despite surgical repair.

Category F: Kidney – Urogenital

All urogenital and renal conditions covered in this Benefit are required to be diagnosed by nephrologist or urologist and supported by the appropriate special investigations.

100%

- Kidney transplant
- Auto-transplantation of a kidney is excluded
- Diagnosis of chronic irreversible kidney failure with a GFR of 15mls/min or less or requiring permanent regular dialysis
- Radical cystectomy resulting in the need for permanent external stoma bag or permanent catheterisation

75%

Chronic renal failure with a permanent GFR between 16-30ml/min/1.73min and evidence of progressive renal failure as evidenced by sustained decrease of GFR of more than 5ml/min within the last 12 months despite optimal treatment.

50%

- Acute renal failure requiring more than five (5) treatments of haemodialysis
- Complete nephrectomy due to medical disease (excludes donors)
- Total amputation of the penis (excludes gender reassignment)
- Diagnosis of renal cortical necrosis

Complete cystectomy

Progressive chronic kidney disease with the GFR of 31-55ml/min and a documented decline in the GFR of greater than 5ml/min within the last 12 months despite optimal treatment

25%

- Partial amputation of the penis (excludes circumcision and gender reassignment)
- Unilateral or bilateral orchidectomy
- Partial nephrectomy (excludes biopsy)
- Partial cystectomy with at least 50% having been removed (excludes biopsies)
- Open kidney surgery for renal or renovascular disease or injury
- Diagnosis of vesicovaginal or rectovaginal fistula
- Diagnosis of nephrotic syndrome with renal artery or renal vein thrombosis

10%

- Diagnosis of chronic tubulointerstitial disease
- Diagnosis of chronic nephrotic syndrome
- Endoscopic or minimally invasive renal surgery (excluding biopsy or any surgery for renal stones)
- Diagnosis of a urethral fistula

5%

Diagnosis of a renal abscess.



Category G: Visual

Conditions covered under this section must be diagnosed by an ophthalmologist and be supported by any relevant special investigations.

100%

- Diagnosis of complete permanent blindness in both eyes due to injury or disease, with best corrected binocular Snellen rating of less than 20/200
- Diagnosis of irreversible hemianopia in both eyes

75%

- Best corrected binocular Snellen rating of less than 20/125
- Enucleation of an eye due to injury or disease
- Diagnosis of complete and permanent blindness in one (1) eye due to injury or disease
- Diagnosis of irreversible hemianopia in one (1) eye

50%

- Diagnosis of optic nerve atrophy
- Diagnosis of irreversible loss of sight in both eyes with best corrected
- Binocular Snellen rating of 20/100 or worse

25%

Diagnosis of retinitis pigmentosa.

15%

Having undergone a corneal transplant for a medical condition or disease.

10%

- Diagnosis of optic neuritis (only one (1) payment will be made)
- · Diagnosis of retinal detachment
- Diagnosis of an orbital abscess

Category H: Ear, Nose and Throat

Conditions covered under this section must be diagnosed by an ear, nose and throat specialist and be supported by any relevant special investigations. Diagnosis must be confirmed with readings taken six (6) months apart.

100%

Diagnosis of permanent hearing loss of more than 90 decibels (in both ears) measured at frequencies of 500, 1000, 2000, and 3000Hz despite use of a hearing aid.

75%

- Binaural hearing loss of more than 75%, as defined by the AMA guide
- Diagnosis of permanent hearing loss of more than 70 decibels (in both ears) at frequencies of 500, 1000, 2000, and 3000Hz despite use of a hearing aid

25%

- Binaural hearing loss of more than 60%, as defined by the AMA guide
- Diagnosis of an acoustic neuroma
- Mastoiditis having undergone surgery
- Cochlear implant insertion. Benefit payout will only occur if no previous payment for hearing loss has been made

10%

- Tympanosclerosis with hearing loss not defined elsewhere
- Diagnosis of otosclerosis
- Diagnosis of mastoiditis
- Nasal bone reconstruction due to a disease process (cosmetic or trauma related causes are excluded)

Speech

100%

- Permanent class IV dysarthria or speech impairment as defined by the AMA quidelines
- Permanent class IV aphasia impairment as defined by the AMA guidelines

Category I: Endocrine

Conditions covered in this section must be diagnosed by an endocrinologist or surgeon and must be supported with relevant special investigations.

25%

Having undergone hypophysectomy.

15%

- Diagnosis of thyroid storm
- Diagnosis of diabetes insipidus
- Diagnosis of acute adrenal crisis
- Diagnosis of Sheehan's syndrome
- · Addison's disease

10%

- Diagnosis of Cushing's syndrome
- Diagnosis of phaeochromocytoma or insulinoma
- Diagnosis of glycogen storage or lipid storage disease
- Diagnosis of Conn's syndrome
- · Having undergone an adrenalectomy
- Having undergone surgical removal of a benign neuroendocrine tumour

5%

- · Diagnosis of acromegaly
- Diagnosis of hypoparathyroidism resulting in parathyroid tetany

Category J: Connective Tissue Disorder and Autoimmune Disorders

Conditions covered in this section must be diagnosed by a rheumatologist and must be supported with relevant special investigations. The diagnosis must meet accepted international diagnostic criteria.

The following conditions are covered in this section: rheumatoid arthritis, systemic lupus erythematosus, sarcoidosis, progressive systemic sclerosis, polyarteritis nodosa, Behcet's disease, pseudoxanthoma elasticum, Ehlers-Danlos syndrome, giant cell arteritis and Wegener's granulomatosis.

100%

Diagnosis of a connective tissue disorder or an autoimmune disorder, as measured by permanent impairment whereby an inability to perform three (3) or more basic ADLs exists

Diagnosis of a connective tissue disorder or an autoimmune disorder with progressive organ or systemic involvement despite optimal therapy that results in organ failure. This will be assessed under the relevant organ or system involved.

75%

Diagnosis of a connective tissue disorder or an autoimmune disorder, as measured by permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

Diagnosis of a connective tissue disorder or an autoimmune disorder, as measured by permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

Any connective tissue disorder or autoimmune disorder that has failed treatment response to three (3) or more disease modifying anti-rheumatic drugs (DMARD) or biological therapy.

Any connective tissue disorder or autoimmune disorder having undergone major joint replacement or arthrodesis (spine, shoulder, elbow, wrist, hip, knee, ankle).

25%

Definitive diagnosis of a connective tissue disorder or autoimmune disorder.

10%

Diagnosis of arteritis or endarteritis diagnosed on biopsy and having been hospitalised for more than seven (7) days.

Category K: Musculoskeletal

Conditions covered in this section must be diagnosed by the treating specialist and must be supported with relevant special investigations. For loss of or loss of use of limbs and fingers, total, permanent and irreversible impairment must be demonstrated and be due to injury or disease. For loss of use of limbs, maximum medical improvement must have been reached. Investec Life reserves the right to have an independent functional ability assessment done by a health practitioner.

Definitions

- A limb is defined as either an upper limb
 (at the level of the wrist or higher) or lower limb
 (at the level of the ankle or higher)
- Hand is defined as the region below the wrist
- Foot is defined as the region below the ankle
- Loss of or loss of use of the finger(s) must involve the metacarpal joint
- Loss of or loss of use of the toe(s) must involve the metatarsal joint

100%

- Permanent loss of use of or loss of more than one (1) limb
- Confirmed diagnosis of muscular dystrophy resulting in the permanent inability to perform three (3) or more basic ADLs exists

75%

- Confirmed diagnosis of muscular dystrophy resulting in the permanent inability to perform six (6) or more advanced ADLs exists
- Permanent loss of use of or loss of one (1) limb (either upper or lower limb)
- Permanent loss of use of or loss of two (2) hands
- Permanent loss of use of or loss of one (1) hand and one (1) foot

50%

- Permanent loss of use of or loss of two (2) feet
- Permanent loss of use of or loss of one (1) hand
- Confirmed diagnosis of muscular dystrophy resulting in the permanent inability to perform three (3) or more advanced ADLs exists

25%

Permanent loss of use of or loss of one (1) foot.

10%

- Permanent loss of use of or loss of three (3) or more fingers on the same hand
- Permanent loss of use of or loss of a thumb
- Surgical repair of a major motor nerve after complete severance
- Having undergone a major joint replacement

5%

- Complete amputation of a full finger or total toe because of a medical condition
- Excludes cultural amputations
- Having undergone resurfacing of a knee, hip or shoulder joint

Category L: Trauma

100%

- Admission to ICU with mechanical ventilation for at least 96 consecutive hours or without mechanical ventilation for at least 10 consecutive days due to disease or trauma
- Full thickness burns involving more than 25% of the body surface area

75%

Full thickness burns involving more than 15% but less than or equal to 25% of the body surface area.

50%

Full thickness burns involving more than 10% but less than or equal to 15% of the body surface area.

25%

- Full thickness burns involving the face, the airways, or both hands
- Diagnosis of Le Fort II and III facial injuries

10%

Near drowning resulting in mechanical ventilation.

10%

Admission to ICU for acute poisoning or systemic toxic effects or drugs for more than two (2) days.

5%

- Admission to ICU for septicaemia for more than two
 (2) days
- Admission to ICU for shock (septic, cardiogenic or hypovolaemic) for more than two (2) days
- Emergency spinal surgery or traction for vertebral instability due to trauma

Category M: HIV

An HIV test, done at a SANAS accredited lab, must be done within 72 hours after the event leading to HIV exposure to confirm prior HIV negative status. A full course of post exposure prophylaxis must have been taken by the client for at least 28 consecutive days after the incident or event.

100%

Accidental HIV infection as a result of one of the following incidents:

- Accidental needle-stick injury whilst performing occupational duties as a health professional (recognised by the HPCSA)
- A road traffic accident
- The transfusion of infected blood from a transfusion by a service provider recognised by Investec Life
- Receiving an organ transplant where the organ was previously infected with HIV
- Violent crime or assault (including rape) which results in the opening of a criminal case by the police. A test confirming negative HIV status must be done within 24 hours of the assault and a medical examination performed directly after the assault

Advanced AIDS meeting the following requirements:

- 1. Positive HIV blood test
- 2. CD4 cell count of less than 200 while on anti-retroviral treatment for a minimum of three (3) months
- 3. Diagnosis of at least one of the following diseases:
- Kaposi's sarcoma
- Pneumocystis carinii pneumonia (PCP)
- Progressive multifocal leukoencephalopathy
- · Active extra-pulmonary tuberculosis
- Cryptococcal meningitis
- Disseminated atypical mycobacteria infection
- Confirmed diagnosis of any other condition as defined as stage 4 by the WHO AIDS classification

Category N: Activities of Daily Living (ADL) Catch-all

This ADL catch-all definition is only applicable for conditions not listed elsewhere. Conditions claimed based on the ADL catch-all definition will be subject to the limit of 100% of Cover Amount in the condition's relevant category, as described in the Benefit's Terms and Conditions.

The condition must be diagnosed by a registered medical specialist and who is recognised by the HPCSA. The diagnosis must be supported by the relevant medical investigations. Investec Life reserves the right to request an independent assessment by a health practitioner recognised by the HPCSA to confirm the diagnosis and severity.

100%

Permanent impairment whereby an inability to perform three (3) or more basic ADLs exists.

75%

Permanent impairment whereby an inability to perform six (6) or more advanced ADLs exists.

50%

Permanent impairment whereby an inability to perform three (3) or more advanced ADLs exists.

Basic Activities of Daily Living

- Bathing the ability to wash/bathe oneself independently
- Transferring the ability to move oneself from a bed to a chair or from a bed to a toilet independently
- Dressing the ability to take off and put on one's clothes independently
- **Eating** the ability to feed oneself independently. This does not include the making of food
- **Toileting** the ability to use a toilet and cleanse oneself thereafter, independently
- Locomotion on a level surface the ability to walk on a flat surface, independently
- Locomotion on an incline the ability to walk up a gentle slope, or a flight of steps independently

Advanced Activities of Daily Living

- Driving a car the ability to open a car door, change gears or use a steering wheel
- Medical care the ability to prepare and take the correct medication
- Money management the ability to do one's own banking and to make rational financial decisions
- Communicative activities the ability to communicate either verbally or written
- **Shopping** the ability to choose and lift groceries from shelves as well as carry them in bags
- Food preparation the ability to prepare food for cooking as well as using kitchen utensils
- Housework the ability to clean a house or iron clothing
- Community ambulation with or without assistive device, but not requiring a mobility device
- The ability to walk around in public places using only a walking stick if necessary
- Moderate activities activities like moving a table, pushing a vacuum cleaner, bowling, golf
- **Vigorous activities** able to partake in running, heavy lifting, sports

Annexure B: Disability definitions

The Benefit covers certain medical conditions or traumatic events which results in a permanent impairment or disability whereby there is an inability to perform daily tasks despite recognised maximal medical treatments and therapies.

The Benefit also pays out in the event of permanent impairment or disability that result in the Life Covered's inability to perform occupational duties despite recognised maximal medical treatments and therapies.

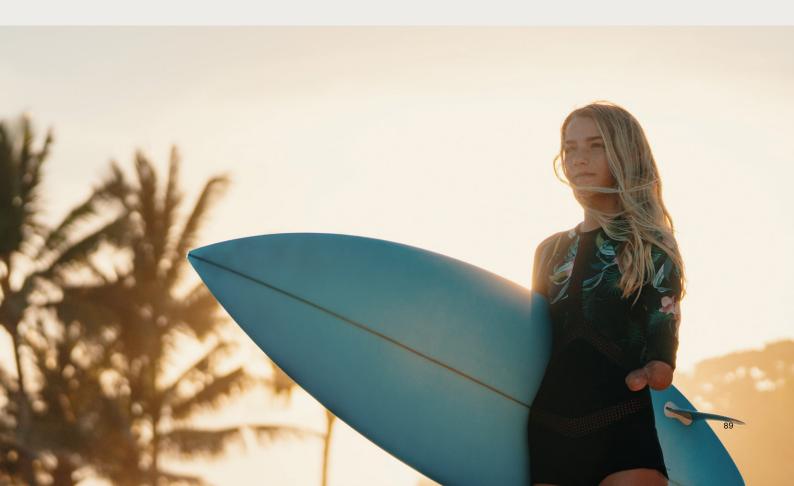
For a claim to be valid, the following criteria must be met:

- All conditions must be diagnosed by the appropriate health practitioner mentioned who is recognised by the Health Professions Council of South Africa (HPCSA)
- The diagnosis must be supported by relevant special investigations which include blood tests, imaging, histology or any other tests that confirm the diagnosis

The severities of certain conditions are assessed against Activities of Daily Living (ADL). This is an industry recognised scoring system whereby an individual's functional ability to perform important activities of daily living is used.

Investec Life reserves the right to request an independent assessment by a health practitioner recognised by the HPCSA to confirm the diagnosis and severity.

Please note that all conditions resulting from any form of substance abuse will be excluded.



Category A: Cardiovascular

The diagnosis of the cardiovascular condition must be made and confirmed by a cardiologist or vascular surgeon. All supporting investigations such as ECGs, echocardiograms, blood tests, angiograms and all other relevant tests must be submitted and confirm the diagnosis.

Heart Failure

Heart failure due to the following conditions (as defined by the criteria set out below):

- · Myocardial infarction
- Cardiac arrhythmias
- Valvular heart disease
- Cardiomyopathy
- Congenital heart disease
- Hypertensive heart disease
- · Pericardial disease
- Corpulmonale

100%

- NYHA III and EF less than 40%
- Maximum METs achieved on effort ECG less than two (2)
- Awaiting cardiac transplantation

50%

- EF less than 45%
- Maximum METs achieved on effort ECG less than five (5)

Peripheral Arterial Disease

100%

Severe peripheral arterial disease with gangrene or amputation as a complication or where ankle brachial index (ABI) of < 0.4 has been confirmed.

50%

Severe peripheral arterial disease with persistent claudication and leg ulcers despite receiving optimal treatment for at least six (6) months (surgical or medical) where ABI of < 0.7 has been confirmed.

Peripheral Venous Disease

50%

Non-healing venous ulcer, which has been present for more than six (6) months despite optimal treatment by a vascular surgeon. Diagnosis must be supported by documented doppler evidence of chronic deep venous insufficiency.

Category B: Respiratory

All respiratory conditions covered in this Benefit are required to be diagnosed by a pulmonologist and supported by the appropriate special investigations. The diagnosis must be confirmed by special investigations, with at least two (2) measurements taken six (6) months apart. Lung function tests must include post-bronchodilation testing and show less than 5% variation between three (3) technically accurate readings which are accepted by the treating pulmonologist.

This Benefit covers chronic respiratory disorders. This includes chronic obstructive airways disease, chronic bronchitis, emphysema, asthma or restrictive or mixed lung disease.

100%

- FVC less than 40% of predicted
- FEV1 less than 40% of predicted
- DCO less than 40% predicted

50%

- FVC 40% 49% of predicted
- FEV1 40% 49% of predicted
- DCO 40% 49% predicted

Category C: Mental and Behavioural

All psychiatric conditions covered in this Benefit are required to be diagnosed by a psychiatrist and supported by the appropriate special investigations and reports from allied health professionals. Psychiatric conditions covered include mood and anxiety disorders, schizophrenia and other psychotic disorders.

100%

Confirmed psychiatric diagnosis according to the current DSM criteria with evidence of all the following criteria in the last two (2) years:

Uninterrupted compliance with prescribed medication and therapy (including psychotherapy and occupational therapy) as prescribed by the treating specialist.*

and

Admission to a psychiatric in-patient facility of at least two to three (2-3) weeks or longer in total.

Severe impairment defined by continual supervision to prevent physical harm to self or others or symptoms that markedly interfere with social and occupational functioning and is confirmed by the treating psychiatrist and multi-disciplinary team including but not limited to psychologists and occupational therapists.

A functional capacity evaluation by an independent occupational therapist may be requested to confirm impairment.

* The claimant must be known to the treating specialist for a minimum of two (2) years. Should the treating specialist have changed, documentation confirming compliance to treatment may be requested from the previous treating specialist.



Category D: Neurological

All neurological conditions or disorders must be diagnosed by the relevant treating specialist and supported by imaging or relevant special investigations.

Severity levels for all neurological conditions or disorders must be assessed through a full neurological examination by a specialist neurologist or the treating specialist after six (6) months of the diagnosis having been made.

Voice and Speech

100%

- The total loss of the ability to speak due to injury or disease, as confirmed by an ear, nose and throat surgeon or neurologist and speech therapist
- Loss of speech due to psychiatric causes is excluded

50%

The partial loss of speech, as confirmed by an ear, nose and throat surgeon or neurologist and speech therapist.

Clinical evidence of two (2) of the following impairments must be present:

- Audibility: while whisper may be present, there is no audible voice
- Intelligibility: while single words may be recognisable, most words are unintelligible
- Function: speech is impractically slow and laboured
- Loss of speech due to psychiatric causes is excluded.

Aphasia and Dysphasia

100%

- Total loss of use of speech, writing, or the ability to understand spoken or written language, due to an injury or disease of the brain as confirmed by a neurologist and speech therapist
- Loss of speech due to psychiatric causes is excluded

50%

- Partial loss of use of speech, writing, or the ability to understand spoken or written language, due to an injury or disease of the brain as confirmed by a neurologist and speech therapist
- Loss of speech due to psychiatric causes is excluded

Organic Brain Disorders and Dementia

100%

- Traumatic or non-traumatic organic cognitive disorder resulting in irreversible cognitive impairment as evidenced by a Mini Mental State Examinations (MMSE) ≤ 18/30 as confirmed by a neuropsychologist and treating specialist
- Cognitive impairment due to psychiatric disorders is excluded

50%

- Traumatic or non-traumatic organic cognitive disorder resulting in irreversible cognitive impairment as evidenced by a MMSE ≤ 21/30 as confirmed by a neuropsychologist and treating specialist
- Cognitive impairment due to psychiatric disorders is excluded

Paralysis

Conditions covered are hemiplegia, diplegia, paraplegia and quadriplegia.

100%

Permanent and irreversible quadriplegia, hemiplegia, diplegia or paraplegia as confirmed by the treating specialist.

Visual

100%

- Total and irreversible (not correctable by treatment or operation) loss of sight in both eyes
- Permanent visual acuity impairment resulting in a Snellen rating of less than 20/200 or worse bilaterally
- The blindness must be certified through an Ophthalmologist's report and cataracts are specifically excluded

50%

- Total and irreversible (not correctable by treatment or operation) loss of sight in one eye
- Permanent visual acuity impairment resulting in a Snellen rating of less than 20/125 or worse
- The blindness must be certified through an Ophthalmologist's report and cataracts are specifically excluded

Epilepsy

50%

The diagnosis of drug resistant epilepsy, where at least three (3) anti-epileptic drugs have failed, with documented compliance greater than 12 months, with persistent recurring grand mal seizures. This must be confirmed by a specialist neurologist and up to date EEG confirming drug resistance. Non-epileptic seizures are excluded.

Hearing

100%

Hearing loss of 90db or more in both ears measured over the frequencies (500, 1000, 2000, 3000Hz) in two (2) measurements over six (6) months with a hearing aid. Diagnosis must be confirmed by an audiologist and ear, nose and throat specialist.

50%

Hearing loss of 70dB in both ears measured over the frequencies (500, 1000, 2000, 3000 Hz) in two (2) measurements over six (6) months with a hearing aid. Diagnosis must be confirmed by an audiologist and ear, nose and throat specialist.

Gait Disorders and Poor Motor Coordination

50%

The diagnosis of a cerebellar disorder by a neurologist or neurosurgeon, with clinical evidence of the following:

- An inability to perform three (3) or more advanced ADLs and the use of assistive devices or mechanical support for daily functions
- Documented previous falls and inability to stand and walk
- Documented inability to grasp and complete loss of fine or gross motor coordination or grip strength

Category E: Gastroenterology

All gastrointestinal conditions covered in this Benefit are required to be diagnosed by an appropriate specialist and supported by the appropriate special investigations.

Upper and Lower Digestive Tract Disease

100%

- Anatomical loss and alteration in the gastrointestinal tract with medical evidence of established gastrointestinal pathology and weight loss of more than 25% below the lower limit of normal BMI or BMI of less than 14
- Faecal incontinence defined as permanent, continuous uncontrolled passage of faecal material.
 Colostomies and ileostomies are not covered under this definition
- Irreparable hernia with previous bowel obstruction and the permanent inability to perform three (3) or more basic ADLs

Liver and Biliary Disease

100%

- Chronic liver disease classified as Child Pugh class C
- Primary sclerosing cholangitis or primary biliary cirrhosis
- Awaiting liver transplant on a recognised South African or international transplant list

50%

· Chronic liver disease classified as Child Pugh B



Category F: Renal

All renal conditions covered in this Benefit are required to be diagnosed by a nephrologist or treating doctor and supported by the appropriate special investigations.

100%

- Permanent renal dysfunction with a GFR of less than 15ml / min / 1.73m2 according to the MDRD study equation
- Ongoing peritoneal dialysis or haemodialysis
- Total or continuous permanent urinary incontinence

50%

Permanent kidney dysfunction with a GFR of less than 40ml/min/1.73m2 according to the MDRD study equation.

Category G: Endocrine

Conditions covered in this section must be diagnosed by an endocrinologist or surgeon and must be supported by the relevant special investigations.

100%

The diagnosis of an endocrine disorder, which despite optimal medical and surgical treatment, has resulted in end-organ failure, as confirmed by a specialist. End-organ failure will be assessed under the affected organ system definition.

Category H: Haematology

Haematological conditions covered in this section must be diagnosed by a physician or haematologist and must be supported by the relevant special investigations.

Anaemia

100%

The diagnosis of severe anaemia with evidence of the following:

- Hb less than 8g/dL
- Requiring 2-3U of blood transfusion every two (2) weeks

Clotting Disorders

100%

The diagnosis of a clotting disorder, which despite maximal medical and surgical treatment, has resulted in end organ failure, as confirmed by a medical specialist. End-organ failure will be assessed under the affected organ system definition.

White Blood Cells

100%

The diagnosis of a severe white blood cell disorder with evidence of the following:

 More than two (2) hospitalisations per year for acute bacterial infections and an absolute neutrophil count of less than 250

Category I: Cancer

The diagnosis of cancer must be made by an appropriate specialist and the diagnosis must be supported with histological confirmation or relevant special investigations.

100%

- Stage IV cancer, stage III multiple myeloma, brain tumour WHO grade III and IV
- Stage III cancer scoring three (3) on the ECOG performance status or less than 40 (forty) on the Karnofsky performance status with no reasonable expectation of improvement as assessed by Investec Life

Category J: Musculoskeletal

Conditions covered in this section must be diagnosed by the treating specialist and must be supported by relevant special investigations.

For loss of or loss of use of limbs and fingers, total, permanent and irreversible impairment must be demonstrated and be due to injury or disease.

For loss of use of limbs, maximum medical improvement must have been reached. Investec Life reserves the right to have an independent functional ability assessment done by a health practitioner.

- A limb is defined as either an upper limb
 (at the level of the wrist or higher) or lower limb
 (at the level of the ankle or higher)
- Hand is defined as the region below the wrist
- Foot is defined as the region below the ankle
- Loss of or loss of use of the finger(s) must involve the metacarpal joint
- Loss of or loss of use of the toe(s) must involve the metatarsal joint

Limbs

100%

- Permanent loss of or complete loss of use of the entire hand
- Permanent loss of or complete loss of use of thumb and index finger of the dominant hand
- Permanent loss of or complete loss of use of thumb and two (2) fingers of the non-dominant hand
- Permanent loss of or complete loss of use of one
 (1) or both upper limb(s) above the wrist or one
 (1) or both lower limb(s) above the ankle

50%

Complete loss of a foot.

All conditions mentioned above must have reached maximal medical improvement and may be subject to a functional capacity evaluation by an independent occupational therapist.

Spinal Disorders

100%

- Cervical, thoracic or lumbar spinal disease with permanent neurological fallout or radiculopathy as evidenced by special investigations, including MRI and EMG studies
- Spinal disease with permanent neurological fallout or radiculopathy resulting in bladder incontinence with a permanent indwelling catheter or bowel incontinence with a permanent colostomy
- Cauda equina syndrome

All conditions mentioned above must have reached maximal medical improvement and may be subject to a functional capacity evaluation by an independent occupational therapist.

Burns

The diagnosis must be confirmed by the treating specialist.

100%

Full thickness burns of greater than 25% of the face or 25% of the body surface area.

50%

Full thickness burns of 15% body surface area.

Facial Injury

The diagnosis must be confirmed by the treating specialist.

50%

Severe facial disfigurement as a result of trauma or accidental injury of 25% of the face with involvement of the nose, eye, ear or mouth.

Category K: AIDS

The diagnosis must be confirmed by the treating specialist and supported by the relevant investigations.

100%

- Despite optimal treatment and full adherence to prescribed antiretroviral therapy, a permanent CD4 count less than 50 and a positive PCR
- Despite optimal treatment and full adherence to prescribed antiretroviral therapy, a CD4 cell count of less than 200 and a positive PCR
- Cryptococcosis
- Disseminated non-tuberculous mycobacteria infection
- Confirmed diagnosis of any other condition as defined as stage 4 on the WHO clinical criteria list

and

At least one (1) of the following diseases must be diagnosed:

- · Kaposi's sarcoma
- Pneumocystis jirovecii pneumonia (PJP)
- Confirmed progressive multifocal leukoencephalopathy
- Active extra-pulmonary tuberculosis

Category L: Activities of Daily Living (ADL) Catch-All

This ADL catch-all definition is only applicable for conditions not listed elsewhere.

The condition must be diagnosed by a registered medical specialist and who is recognised by the HPCSA. The diagnosis must be supported by the relevant medical investigations. Investec Life reserves the right to request an independent assessment by a health practitioner recognised by the HPCSA to confirm the diagnosis and severity. All claims may be subject to an independent functional capacity evaluation.

100%

The permanent inability to perform three (3) or more basic ADLs due to a medical condition. The impairment and inability to perform these tasks must be aligned to the condition and its severity.

50%

The permanent inability to perform three (3) or more advanced ADLs due to a medical condition. The impairment and inability to perform these tasks must be aligned to the condition and its severity.

Basic Activities of Daily Living

- Bathing the ability to wash/bathe oneself independently
- Transferring the ability to move oneself from a bed to a chair or from a bed to a toilet independently
- Dressing the ability to take off and put on one's clothes independently
- **Eating** the ability to feed oneself independently. This does not include the making of food
- **Toileting** the ability to use a toilet and cleanse oneself thereafter, independently
- Locomotion on a level surface the ability to walk on a flat surface, independently
- Locomotion on an incline the ability to walk up a gentle slope, or a flight of steps independently

Advanced Activities of Daily Living

- Driving a car the ability to open a car door, change gears or use a steering wheel
- Medical care the ability to prepare and take the correct medication
- Money management the ability to do one's own banking and to make rational financial decisions
- Communicative activities the ability to communicate either verbally or written
- **Shopping** the ability to choose and lift groceries from shelves as well as carry them in bags
- Food preparation the ability to prepare food for cooking as well as using kitchen utensils
- Housework the ability to clean a house or iron clothing
- Community ambulation with or without assistive device, but not requiring a mobility device
- The ability to walk around in public places using only a walking stick if necessary
- Moderate activities activities like moving a table, pushing a vacuum cleaner, bowling, golf
- **Vigorous activities** able to partake in running, heavy lifting, sports

Annexure C: Income Protection Cover definitions

Monthly income will be upgraded in the event of certain medical conditions or traumatic events which results in a permanent impairment or disability whereby there is an inability to perform daily tasks or an inability to perform your occupational duties despite recognised maximal medical treatments and therapies.

For a claim to be valid, the following criteria must be met:

- All conditions must be diagnosed by the appropriate health practitioner mentioned who is recognised by the Health Professions Council of South Africa (HPCSA)
- The diagnosis must be supported by relevant special investigations which include blood tests, imaging, histology or any other tests that confirm the diagnosis

The severities of certain conditions are assessed against Activities of Daily Living. This is an industry recognised scoring system whereby an individual's functional ability to perform important activities of daily living is used.

Investec Life reserves the right to request an independent assessment by a health practitioner recognised by the HPCSA to confirm the diagnosis and severity.

Please note that all conditions resulting from any form of substance abuse will be excluded.



Category A: Cardiovascular

The diagnosis of the cardiovascular condition must be made and confirmed by a cardiologist or vascular surgeon. All supporting investigations such as ECGs, echocardiograms, blood tests, angiograms and all other relevant tests must be submitted and confirm the diagnosis.

Heart Failure

Heart failure due to the following conditions (as defined by the criteria set out below):

- · Myocardial infarction
- · Cardiac arrhythmias
- · Valvular heart disease
- Cardiomyopathy
- · Congenital heart disease
- · Hypertensive heart disease
- Pericardial disease
- Cor pulmonale
- NYHA III and EF less than 40%
- Maximum METs achieved on effort ECG less than two (2)
- Awaiting cardiac transplantation

Peripheral Arterial Disease

 Severe peripheral arterial disease with gangrene or amputation as a complication or where ankle brachial index (ABI) of < 0.4 has been confirmed

Category B: Respiratory

All respiratory conditions covered in this Benefit are required to be diagnosed by a pulmonologist and supported by the appropriate special investigations. The diagnosis must be confirmed by special investigations, with at least two (2) measurements taken six (6) months apart. Lung function tests must include post-bronchodilation testing and show less than 5% variation between three (3) technically accurate readings which are accepted by the treating pulmonologist.

This Benefit covers chronic respiratory disorders. This includes chronic obstructive airways disease, chronic bronchitis, emphysema, asthma or restrictive or mixed lung disease.

- FVC less than 40% of predicted
- FEV1 less than 40% of predicted
- DCO less than 40% predicted

Category C: Mental and Behavioural

All psychiatric conditions covered in this Benefit are required to be diagnosed by a psychiatrist and supported by the appropriate special investigations and reports from allied health professionals.

Psychiatric conditions covered include mood and anxiety disorders, schizophrenia and other psychotic disorders.

Confirmed psychiatric diagnosis according to the current DSM criteria with evidence of all the following criteria in the last two (2) years:

Uninterrupted compliance with prescribed medication and therapy (including psychotherapy and occupational therapy) as prescribed by the treating specialist.*

and

Admission to a psychiatric in-patient facility of at least two to three (2-3) weeks or longer in total.

and

Severe impairment defined by continual supervision to prevent physical harm to self or others or symptoms that markedly interfere with social and occupational functioning and is confirmed by the treating psychiatrist and multi-disciplinary team including but not limited to psychologists and occupational therapists.

A functional capacity evaluation by an independent occupational therapist may be requested to confirm impairment.

* The claimant must be known to the treating specialist for a minimum of two (2) years. Should the treating specialist have changed, documentation confirming compliance to treatment may be requested from the previous treating specialist.

Category D: Neurological

All neurological conditions or disorders must be diagnosed by the relevant treating specialist and supported by imaging or relevant special investigations. Severity levels for all neurological conditions or disorders must be assessed through a full neurological examination by a specialist neurologist or the treating specialist after six (6) months of the diagnosis having been made.

Voice and Speech

- The total loss of the ability to speak due to injury or disease, as confirmed by an ear, nose and throat surgeon or neurologist and speech therapist
- Loss of speech due to psychiatric causes is excluded

Aphasia and Dysphasia

- Total loss of use of speech, writing, or the ability to understand spoken or written language, due to an injury or disease of the brain as confirmed by a neurologist and speech therapist
- Loss of speech due to psychiatric causes is excluded

Organic Brain Disorders and Dementia

- Traumatic or non-traumatic organic cognitive disorder resulting in irreversible cognitive impairment as evidenced by a Mini Mental State Examination (MMSE) ≤ 18/30 as confirmed by a neuropsychologist and treating specialist
- Cognitive impairment due to psychiatric disorders is excluded

Paralysis

Conditions covered are hemiplegia, diplegia, paraplegia and quadriplegia.

Visual

- Total and irreversible (not correctable by treatment or operation) loss of sight in both eyes
- Permanent visual acuity impairment resulting in a Snellen rating of less than 20/200 or worse bilaterally

The blindness must be certified through an Ophthalmologist's report and cataracts are specifically excluded.

Hearing

Hearing loss of 90db or more in both ears measured over the frequencies (500, 1000, 2000, 3000Hz) in two (2) measurements over six (6) months with a hearing aid. Diagnosis must be confirmed by an audiologist and ear, nose and throat specialist.

Category E: Gastroenterology

All gastrointestinal conditions covered in this Benefit are required to be diagnosed by an appropriate specialist and supported by the appropriate special investigations.

Upper and Lower Digestive Tract Disease

- Anatomical loss and alteration in the gastrointestinal tract with medical evidence of established gastrointestinal pathology and weight loss of more than 25% below the lower limit of normal BMI or BMI of less than 14
- Faecal incontinence defined as permanent, continuous uncontrolled passage of faecal material.
 Colostomies and ileostomies are not covered under this definition
- Irreparable hernia with previous bowel obstruction and the permanent inability to perform three (3) or more basic ADLs

Liver and Biliary Disease

- Chronic liver disease classified as Child Pugh class C
- Primary sclerosing cholangitis or primary biliary cirrhosis
- Awaiting liver transplant on a recognised SA or international transplant list

Category F: Renal

All renal conditions covered in this Benefit are required to be diagnosed by a nephrologist or treating doctor and supported by the appropriate special investigations.

- Permanent renal dysfunction with a GFR of less than 15ml / min / 1.73m2 according to the MDRD study equation
- Ongoing peritoneal dialysis or haemodialysis
- Total or continuous permanent urinary incontinence

Category G: Endocrine

Conditions covered in this section must be diagnosed by an endocrinologist or surgeon and must be supported by the relevant special investigations.

The diagnosis of an endocrine disorder, which despite optimal medical and surgical treatment, has resulted in end-organ failure, as confirmed by a specialist. Endorgan failure will be assessed under the affected organ system definition.

Category H: Haematology

Haematological conditions covered in this section must be diagnosed by a physician or haematologist and must be supported by the relevant special investigations.

Anaemia

The diagnosis of severe anaemia with evidence of the following:

- Hb less than 8g/dL
- Requiring 2-3U of blood transfusion every two (2) weeks

Clotting Disorders

The diagnosis of a clotting disorder, which despite maximal medical and surgical treatment, has resulted in end-organ failure, as confirmed by a medical specialist. End-organ failure will be assessed under the affected organ system definition.

White Blood Cells

The diagnosis of a severe white blood cell disorder with evidence of the following:

 More than two (2) hospitalisations per year for acute bacterial infections and an absolute neutrophil count of less than 250

Category I: Cancer

The diagnosis of cancer must be made by an appropriate specialist and the diagnosis must be supported with histological confirmation or relevant special investigations.

- Stage IV cancer, stage III multiple myeloma, brain tumour WHO Grade III and IV
- Stage III cancer scoring three (3) on the ECOG performance status or less than 40 on the Karnofsky performance status with no reasonable expectation of improvement as assessed by Investec Life

Category J: Musculoskeletal

Conditions covered in this section must be diagnosed by the treating specialist and must be supported by relevant special investigations.

For loss of or loss of use of limbs and fingers, total, permanent and irreversible impairment must be demonstrated and be due to injury or disease. For loss of use of limbs, maximum medical improvement must have been reached. Investec Life reserves the right to have an independent functional ability assessment done by a health practitioner.

- A limb is defined as either an upper limb
 (at the level of the wrist or higher) or lower limb
 (at the level of the ankle or higher)
- Hand is defined as the region below the wrist
- Foot is defined as the region below the ankle
- Loss of or loss of use of the finger(s) must involve the metacarpal joint
- Loss of or loss of use of the toe(s) must involve the metatarsal joint

Limbs

- Permanent loss of or complete loss of use of the entire hand
- Permanent loss of or complete loss of use of thumb and index finger of the dominant hand
- Permanent loss of or complete loss of use of thumb and two (2) fingers of the non-dominant hand
- Permanent loss of or complete loss of use of one (1) or both upper limb(s) above the wrist or one (1) or both lower limb(s) above the ankle

Spinal Disorders

- Cervical, thoracic or lumbar spinal disease with permanent neurological fallout or radiculopathy as evidenced by special investigations, including MRI and EMG studies
- Spinal disease with permanent neurological fallout or radiculopathy resulting in bladder incontinence with a permanent indwelling catheter or bowel incontinence with a permanent colostomy
- Cauda equina syndrome

All conditions mentioned above must have reached maximal medical improvement and may be subject to a functional capacity evaluation by an independent occupational therapist.

Burns

- The diagnosis must be confirmed by the treating specialist
- Full thickness burns of greater than 25% of the face or 25% of the body surface area

Category K: AIDS

The diagnosis must be confirmed by the treating specialist and supported by the relevant investigations.

Despite optimal treatment and full adherence to prescribed antiretroviral therapy, a permanent CD4 count less than 50 and a positive PCR.

Despite optimal treatment and full adherence to prescribed antiretroviral therapy, a CD4 cell count of less than 200 and a positive PCR.

At least one (1) of the following diseases must be diagnosed:

- Kaposi's sarcoma
- Pneumocystis jirovecii pneumonia (PJP)
- Confirmed progressive multifocal leukoencephalopathy
- Active extra-pulmonary tuberculosis
- Cryptococcosis
- Disseminated non-tuberculous mycobacteria infection
- Confirmed diagnosis of any other condition as defined as stage 4 on the WHO clinical criteria list



Category L: Activities of Daily Living (ADL) catch-all

This ADL catch-all definition is only applicable for conditions not listed elsewhere.

The condition must be diagnosed by a registered medical specialist and who is recognised by the HPCSA. The diagnosis must be supported by the relevant medical investigations. Investec Life reserves the right to request an independent assessment by a health practitioner recognised by the HPCSA to confirm the diagnosis and severity. All claims may be subject to an independent functional capacity evaluation.

The permanent inability to perform three (3) or more basic ADLs due to a medical condition. The impairment and inability to perform these tasks must be aligned to the condition and its severity.

Basic Activities of Daily Living

- Bathing the ability to wash/bathe oneself independently
- Transferring the ability to move oneself from a bed to a chair or from a bed to a toilet independently
- Dressing the ability to take off and put on one's clothes independently
- **Eating** the ability to feed oneself independently. This does not include the making of food
- Toileting the ability to use a toilet and cleanse oneself thereafter, independently
- Locomotion on a level surface the ability to walk on a flat surface, independently
- Locomotion on an incline the ability to walk up a gentle slope, or a flight of steps independently







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