



PROVISIONS FOR
Essential Cancer Care



Contents

1	Our Agreement	Page
1.1	The Agreement	1
1.2	No Restriction on Residence, Travel and Occupation	1
1.3	Policy Currency	1
2	Policy Owners' Protection Scheme	1
3	Our Responsibilities	
3.1	Covered Events	2
3.2	Guaranteed Renewability	2
4	Your Responsibilities	
4.1	Premium	3
4.2	Reinstatement	3
5	What Is Covered?	
5.1	Death Benefit	3
5.2	Cancer Benefit	3
5.3	Monthly Payout Benefit	4
6	What Is Not Covered?	
6.1	Death Benefit	4
6.2	Cancer Benefit	4
6.3	Waiting Period	5
6.4	Survival Period	5
7	Making Claims From The Policy	
7.1	How to make a Claim	5
7.2	Who do We pay Benefits to	5
8	Our Rights	
8.1	Incontestability	5
8.2	Correction of Mistakes and Errors	6
8.3	Fraud and Misrepresentation	6
8.4	Change of Address, Country of Residence or Citizenship	6
8.5	No Cover	6
8.6	Changes in Taxation, Regulations and Legislation	7
8.7	Errors In Age / Gender / Smoker Status / Country of Residence	7
9	Your Rights	
9.1	Free Look	7
9.2	Transferring the Legal Right of the Policy	7
9.4	Nominees	7
10	When Will Your Policy End?	8
11	What Do We Mean With These Words?	8-9
12	Appendix A – Definition of Cancer	10-11

1 Our Agreement

1.1 The Agreement

Your policy is regulated using the laws of Singapore. It forms the entire legal agreement between You and Us. It is made up of:

- Provisions for Essential Cancer Care
- Cover Page
- Your Policy Information Page
- Your Proposal form
- Your Policy Illustration
- Your Product Summary
- Your Financial Needs Analysis
- Our offer of conditional acceptance (if any)
- Any Endorsements We may issue to You on this policy
- Any supplementary questionnaires that You have given to Us for Our risk assessment purpose, including information in medical reports

We took the information You have provided in the Proposal form, supplementary questionnaires, medical reports and medical examination to decide whether or not to insure You. The information obtained will form the basis of the contract of insurance between You and Us.

You must disclose all material facts required under this policy. We reserve the rights to void Your policy if You have provided incomplete or inaccurate information. When this happens, We will refund all Premiums paid (less any amounts previously paid to You under this policy) without interest and less any expenses incurred in providing You the policy.

In exchange for the Premiums You pay, We agree to give You the Benefits written on Your Policy Information Page and which are explained in this Provisions.

Anyone not directly a party to this contract has no right to enforce the Contracts (Rights of Third Parties) Act 2001 of Singapore or any statutory modification or re-enactment of the said Act.

1.2 No Restriction on Residence, Travel and Occupation

There is no restriction as to the Life insured's residence, travel and occupation, unless We state differently in the Endorsements.

1.3 Policy Currency

All Premiums and Benefits of this policy are in Singapore dollars, unless We state differently on the Policy Information Page.

2 Policy Owners' Protection Scheme

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

3 Our Responsibilities

This is a regular Premium Non-participating term policy that provides financial protection against death and cancer (early, intermediate or severe stages) of the Life insured. This policy provides an additional monthly payout of 1% of the Sum insured over the course of 12 months upon the diagnosis of a severe stage cancer.

At the policy Expiry date, if We have not paid out any claims, this policy will end and no Benefits will be payable.

Your policy covers the Benefits described below.

3.1 Covered Events

If Your policy is valid and a covered event happens, We will pay You the Benefits less any amounts You owe Us under this policy. The covered events of Your policy are written on the Policy Information Page.

3.2 Guaranteed Renewability

Guaranteed renewability Benefit is only applicable for policy term of 5 years (renewable) and 10 years (renewable).

5 years (renewable)

At the end of each five (5) years policy term, this policy will be renewed automatically from the renewal date for the same policy term of five (5) years on the same terms and conditions, unless otherwise decided by Us, without giving Us proof of good health if the following conditions are met:

- a) This policy is in force on the Expiry date before the renewal;
- b) The Life insured has not reached Age 81 at the renewal date;
- c) There are no previously admitted or submitted claims on this policy; and
- d) The Life insured is insured for the same Sum insured or less.

If this policy is issued on non-standard terms, the same terms, conditions and exclusions shall continue to be applicable on the renewed term. The renewal Premium will be calculated based on the prevailing Premium rates at the attained Age of the Life insured and will stay level throughout the renewed term.

10 years (renewable)

At the end of each ten (10) years policy term, this policy will be renewed automatically from the renewal date for the same policy term of ten (10) years on the same terms and conditions, unless otherwise decided by Us, without giving Us proof of good health if the following conditions are met:

- a) This policy is in force on the Expiry date before the renewal;
- b) The Life insured has not reached Age 76 at the renewal date;
- c) There are no previously admitted or submitted claims on this policy; and
- d) The Life insured is insured for the same Sum insured or less.

If this policy is issued on non-standard terms, the same terms, conditions and exclusions shall continue to be applicable on the renewed term. The renewal Premium will be calculated based on the prevailing Premium rates at the attained Age of the Life insured and will stay level throughout the renewed term.

4 Your Responsibilities

4.1 Premium

The Premium that You pay for this policy is not guaranteed and may change depending on the claims experience. We will write to You to inform You of the new Premiums at least thirty (30) days before We make any changes to Your Premium. Premiums are payable throughout the policy term and can be paid on a monthly, quarterly, half-yearly or yearly basis.

You will pay the first Premium at the time You apply for this policy. Thereafter, You will pay all future Premiums within thirty (30) days from the due date so as to continue the policy. If You fail to pay Premiums before the due date, this policy will end. We will deduct any outstanding Premium from any amount We may be due to pay under this policy.

4.2 Reinstatement

If Your policy ends due to not paying an outstanding amount due, You may apply to bring back Your policy (reinstatement) within twelve (12) months by:

- paying the outstanding amount You owe with interest; and
- giving Us satisfactory proof of the Life insured's good health, at Your own expense.

Reinstatement is subject to Our approval at Our sole discretion.

5 What is Covered?

Your policy covers the Benefits described below while the policy is in force.

5.1 Death Benefit

Upon death of the Life insured during the policy term, We will pay S\$3,000 in one lump sum less any amounts owing to Us. When We make this payment, the policy ends.

While We assess the death claims, if the claimant needs financial assistance to prepare the funeral, We may consider offering an immediate payment of up to S\$3,000 per Life insured. This funeral expense financial aid, if given, will be deducted from the final death Benefit to the claimant. Our advance payment of this financial aid does not mean We have approved the death claim. If the death claim is not approved later, after Our assessment, We have the right to ask You to return this advance payment.

We will not pay the death Benefit if any of the following occurs:

- (i) When the cancer Benefit is fully paid out; or
- (ii) When any of the exclusions listed in point 6.1 of this policy provisions applies.

5.2 Cancer Benefit

Early and Intermediate stage cancer

Upon diagnosis of the Life insured with early or intermediate stage cancer during the term of the policy, 50% of the Sum insured will be accelerated and paid in one lump sum. Once a claim is made, the early and intermediate stage of the cancer Benefit will no longer be applicable. This Benefit will not be paid again even if the policy is renewed.

You must continue to pay the Premiums to keep the policy in force. This policy will continue with the remaining 50% of the cancer Benefit to be payable upon the diagnosis of a severe stage cancer.

Severe stage cancer

Upon diagnosis of the Life insured with severe stage cancer during the term of the policy, 100% of the Sum insured less any early or intermediate stage cancer Benefit paid will be paid in one lump sum. Once this claim is made, the policy will terminate.

We will only provide a maximum aggregate amount of S\$2,000,000 per Life insured for early, intermediate or severe stages of critical illness, subject to a cap of S\$350,000 per Life insured for early or intermediate stages of critical illness, for all policies and riders issued by Us with critical illness Benefits.

Please refer to Appendix A for the definition of cancer.

5.3 Monthly Payout Benefit

If the Life insured is diagnosed with a severe stage cancer while the policy is in force, We will pay You a twelve (12) monthly payout, starting from the following policy month immediately after the date of diagnosis by a Doctor. The monthly payout is equivalent to 1% of the policy's Sum insured. Before Our payment, any amounts owing to Us will first be deducted. This Benefit ends when either one of these events happens first:

- a) Death of the Life insured; or
- b) The twelve (12) monthly payouts have been paid.

Our payment on the monthly payouts will not reduce the cancer Benefit of the Basic policy and it shall be paid to You as an additional Benefit.

6 What is Not Covered?

There are certain conditions under which no Benefits will be payable. These conditions are stated as exclusions.

6.1 Death Benefit

We do not pay the death Benefit if the death is directly or indirectly, wholly or partly caused by:

- a) Life insured commits intentional acts (sane or insane) such as self-inflicted injuries, suicide or attempted suicide within the first twelve (12) months from the Policy issue date or the latest Reinstatement date, whichever is later.
- b) Pre-existing conditions within the first twelve (12) months from the Policy issue date or the latest Reinstatement date, whichever is later.

6.2 Cancer Benefit

We will not pay the cancer Benefit if the cancer (early, intermediate or severe stages) is directly or indirectly, wholly or partly caused by:

- A Pre-existing condition;
- Intentional acts (sane or insane) such as self-inflicted injuries, suicide or attempted suicide;
- Effects of drug or alcohol addiction; or
- Acquired Immune Deficiency Syndrome (AIDS), AIDS-related conditions or infection in the presence of Human Immunodeficiency Virus (HIV) except HIV due to blood transfusion and occupationally acquired HIV.

6.3 Waiting Period

We will not pay the cancer Benefit (early, intermediate or severe stages) or the monthly payout Benefit if:

The early, intermediate and severe stage cancer is diagnosed within 90 days from the Policy issue date, latest Reinstatement date or the latest increase in Sum insured, whichever is later.

6.4 Survival Period

We will not pay the cancer Benefit (early, intermediate or severe stages) or the monthly payout Benefit if the Life insured did not survive for seven (7) days after the date of diagnosis of the covered cancer by a Doctor.

When there is condition(s) specific to the Life insured which We will not cover, We will state them on Our Letter of Conditional Acceptance. When any of the exclusion happens, We will return the total Premiums paid (less any amounts previously paid to You under this policy) without interest, less any amounts owing to Us.

7 Making Claims from the Policy

7.1 How to make a Claim

We must be informed in writing within three (3) months of the event giving rise to the claim. At the Proper claimant's own expense, he/she must give Us all documents and evidence We ask for to assess the claim. This may include re-examining the Life insured by a particular Doctor We appoint.

We reserve the rights to reject Your claim if the terms and conditions stated in this provision are not met.

7.2 Who do We pay Benefits to

If the policy has been assigned, the Benefit amount will be paid to the Assignee. If the policy has not been assigned, the Benefit amount will be paid to either You or Your executors, administrators, Nominees or any other Proper claimant, provided We have proof, as deemed sufficient by Us, of the relationship of the person claiming the Benefit.

Before We pay any Benefit, We will deduct any amount You owe on this policy from the Benefit. By paying out the Benefit, it will end Our legal responsibility on this policy.

8 Our Rights

8.1 Incontestability

Claims will not be rejected and this policy will not be voided or have its terms revised after this policy has been in-force for two (2) years from the Policy commencement date or the latest Reinstatement date, whichever is later, except for:

- a) fraud;
- b) material non-disclosure and/or misrepresentation of a material fact that would have impacted acceptance of coverage;
- c) non-payment of Premium; or
- d) policy exclusions.

However, if the above mentioned event occurs, We reserve the rights to void the policy, revise the terms of the policy or reject any claims even after two (2) years have passed. We will refund all Premiums paid (less any amounts previously paid to You under this policy) without interest and less any amounts owing to Us as well as any expenses incurred by Us in providing You the policy.

8.2 Correction of Mistakes and Errors

In the event of any mistake or error made in this policy, We will make the correction and inform You by way of an Endorsement.

8.3 Fraud and Misrepresentation

If You or Your executors, administrators, Nominees or any other Proper claimant obtains any sum payable under this policy through fraudulent means or devices, all Benefits paid under this policy shall be forfeited and must be immediately repaid. This policy will be terminated immediately and there will be no refund of Premiums. We shall have no liability in respect of such claims and shall be entitled to recover any payment made prior to the discovery of the fraud or misrepresentation.

8.4 Change of Address, Country of Residence or Citizenship

You must, as soon as practicable within three (3) months of the changes, notify Us in writing if there is a change in Your citizenship and / or usual country of residence. A change in the usual country of residence will be deemed to mean Your living or intending to live in another country other than Singapore in excess of twelve (12) consecutive calendar months.

You must also, as soon as practicable within three (3) months of the change, notify Us in writing if there is a change of address for the Life insured (if any).

We reserve the right and sole discretion to terminate or decline to renew the policy or continue cover on prevailing or varied terms and conditions.

8.5 No Cover

Notwithstanding anything to the contrary, this policy shall not cover or provide for the payment of claims or Benefits to specific persons or entities where the application of or compliance with certain laws and regulations including but not limited to trade sanctions, anti-terrorism or anti-money laundering (as may be applicable to Us, Our parent companies and/or Our ultimate controlling entities, Our reinsurers, their parent company and/or ultimate controlling entity) prohibit performance under the policy based on:

- the identity, domicile, residence, place of incorporation, establishment (whether incorporated or unincorporated), or citizenship, of You, or claimant or the parent company and ultimate controlling entity of You, or claimant; or
- the country where the claim arises.

Should any person or entity be found to have been erroneously enrolled under this policy, insurance coverage for such person or entity shall cease with immediate effect and any unearned Premiums paid in respect of such person or entity shall, subject to compliance with laws and regulations, be refunded without interest to You.

Should any claim for payment of any nature be found to have been made under this policy by a person or entity excluded by this provision, no such payment will be made.

8.6 Changes in Taxation, Regulations and Legislation

Should there be any changes in taxation, regulations or legislation that will affect this policy, We may vary the terms of the policy accordingly. If We do so, We shall notify You by giving You thirty (30) days' notice prior to such change.

8.7 Errors in Age / Gender / Smoker Status / Country of Residence

If the Age, gender, smoker status and/or country of residence of the Life insured is not correctly stated such that the Premium paid is wrong, We reserve the rights to adjust the Benefits. For underpayment of Premium, the claims will be pro-rated as if You have purchased a lower cover. For overpayment of Premium, We will refund the excess Premium paid without interest.

Based on the correct Age, gender, smoker status and/or country of residence, if the Life insured is not eligible to apply for this policy, We will not pay any Benefits and the policy will be terminated. When this happens, We will refund all Premiums paid (less any amounts previously paid to You under this policy) without interest and less any amounts owing to Us as well as any expenses incurred by Us in providing You the policy.

9 Your Rights

9.1 Free Look

You may return this policy for cancellation within fourteen (14) days after You receive the policy document, for any reason. We will deduct any costs incurred by the Company in assessing the risk under the policy, such as payments for medical check-up and other expenses, from the Premium You paid and refund the balance to You.

If Your policy document is sent by email, We consider this policy is delivered to You one (1) day after the date of emailing. If Your policy document is sent by post, We consider this policy is delivered to You seven (7) days after the date of posting.

9.2 Transferring the Legal Right of the Policy

If You write to Us and We agree to the transfer, You can transfer (assign) this policy to another person. When We do so, You may not make any further transfer until the previous transfer has been properly cancelled by the Assignee.

We will not be responsible for the validity of any transfer of policy.

9.4 Nominees

Subject to the current laws and regulations, You may add, change or remove a Nominee(s) to receive the share of the Benefit by giving Us written notice in the prescribed form. However, if there is a trustee(s) appointed or created under the policy, the trustee(s) must consent before any change can be effected.

10 When Will Your Policy End?

Your policy will end when one of these events happens first:

- a) We paid out 100% of the cancer Benefit or death Benefit amount;
- b) Premium is not paid on time;
- c) Upon expiry of this policy and We did not admit the claim for the monthly payout Benefit;
- d) You choose not to renew Your policy at the end of the policy term (applicable for policy term 5 years (renewable) and 10 years (renewable));
- e) Your written request and Our acceptance of the application to terminate the policy. If You write to Us to terminate Your policy, there will not be any prorated refund of Premium and Your policy will terminate from the Premium due date immediately following the date We accept Your written request for termination.

11 What Do We Mean With These Words?

Age means the Age at next birthday.

Assignee means any person to whom You have transferred Your rights as the Policy owner and the assignment is registered with Us.

Basic policy means the policy as it exists, including the supplementary terms and any Endorsement made to it, without any optional supplementary contract / rider.

Benefit(s) means any payments that We will pay and/or the amount of Premium that We will waive when certain events defined in this policy occur.

Doctor means a licensed person who is qualified by degree in western medicine to practice medicine. The license is given by the appropriate medical authority of his country of residence to practice medicine within his scope of licensing and training. This cannot be You, the Life insured, a family member or a relative.

Endorsement means any written change to the policy which is issued and properly authorised by Us.

Expiry date means the date the policy ends and where no Benefit is payable.

Life insured means the person whom We provide the cover for. The Life insured does not have any right to the policy, unless he/she is also the Policy owner.

Nominee(s) is a person that You have nominated (under the **Insurance Act 1966** and **Insurance (Nomination of Beneficiaries) Regulations 2009**) to receive the policy monies payable under the policy upon Your death. The nomination must be registered with Us.

Non-participating means it does not share in any surplus or profits of the Company's fund.

Policy commencement date means the date the policy commences, as shown in the Policy Information Page.

Policy issue date means the date We issue the policy. This is shown in the Policy Information Page.

Policy owner is the person named as the owner in the Policy Information Page or any Endorsement issued by Us. The Policy owner has full rights on the policy, unless the policy has been transferred to another party.

Policy year / Policy anniversary is the 1-year period that starts on the Policy commencement date or any subsequent anniversary of the Policy commencement date.

Pre-existing condition means the existence of any signs or symptoms before the rider commencement date or latest Reinstatement date, whichever is later, for which treatment, medication, consultation, advice, or diagnosis has been sought or received by the Life insured or would have caused any reasonable and sensible person to get medical advice or treatment.

Premium(s) is the amount of money that You pay to Us to keep this policy in force.

Proper claimant(s) has the meaning in the **Insurance Act 1966**. It means a person who claims to be entitled to the sums in question as executor of the deceased, or who claims to be entitled to that sum (whether for his own Benefit or not) and is the widower, widow, parent, child, brother, sister, nephew or niece of the deceased.

Proposal form means the form You signed to buy this policy from Us. It includes anything written, said (and recorded) and/or any document given to Us which has information for Us to rely on before We decide to issue this policy.

Reinstatement date is the date We reinstate Your rider back to inforce.

Sum insured is the amount of insurance coverage provided by the Basic policy or optional rider (where applicable).

We, Our, Us, the Company means Etiqa Insurance Pte. Ltd. (Company Registration No. 201331905K).

You, Your means the Policy owner.

12 Appendix A – Definition of Cancer

Early and Intermediate stages	Severe Stage*
<p>Carcinoma in-situ (CIS) and Early Cancers</p> <p>(a) Carcinoma in-situ (CIS)</p> <p>CIS of the following organs: breast, uterus, ovary, fallopian tube, vulva, vagina, cervix uteri, colon, rectum, penis, testis, lung, liver, stomach, nasopharynx or bladder.</p> <p>CIS means the focal autonomous new growth of carcinomatous cells confined to the cells in which it originated and has not yet resulted in the invasion and/or destruction of surrounding tissues. 'Invasion' means an infiltration and/or active destruction of normal tissue beyond the basement membrane.</p> <p>(b) Early Cancers</p> <ul style="list-style-type: none"> • Early Prostate Cancer: Prostate Cancer that is histologically described using the TNM Classification as T1a or T1b or Prostate cancers described using another equivalent classification. • Early Thyroid Cancer: Thyroid Cancer that is histologically described using the TNM Classification as T1N0M0 as well as Papillary microcarcinoma of thyroid that is less than (one) 1 cm in diameter. • Early Bladder Cancer: Papillary microcarcinoma of Bladder. • Early Chronic Lymphocytic Leukaemia: Chronic Lymphocytic Leukaemia (CLL) RAI Stage 1 or 2. • Early Melanoma: Invasive melanomas of less than 1.5mm Breslow thickness, or less than Clark Level 3. • Gastro-Intestinal Stromal tumours: All Gastro-Intestinal Stromal tumours histologically classified as T1N0M0 (TNM Classification) with tumour diameter less than two (2) cm and with mitotic count of more than 5/50 HPFs. <p>The diagnosis of Cancer or Carcinoma in-situ must always be positively diagnosed upon the basis of a microscopic examination of the fixed tissue, supported by a biopsy result. Clinical diagnosis does not meet this standard.</p> <p>The following conditions are specifically excluded from coverage:</p>	<p>Major Cancer</p> <p>A malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells with invasion and destruction of normal tissue.</p> <p>The term Major Cancer includes, but is not limited to, leukemia, lymphoma and sarcoma.</p> <p>Major Cancer diagnosed on the basis of finding tumour cells and/or tumour-associated molecules in blood, saliva, faeces, urine or any other bodily fluid in the absence of further definitive and clinically verifiable evidence does not meet the above definition.</p> <p>For the above definition, the following are excluded:</p> <ul style="list-style-type: none"> • All tumours which are histologically classified as any of the following: <ul style="list-style-type: none"> - Pre-malignant; - Non-invasive; - Carcinoma-in-situ (Tis) or Ta; - Having borderline malignancy; - Having any degree of malignant potential; - Having suspicious malignancy; - Neoplasm of uncertain or unknown behaviour; or - All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia; • Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond; • Malignant melanoma that has not caused invasion beyond the epidermis; • All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification; • All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below; • All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below; • All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;

<ul style="list-style-type: none"> • All tumours which are histologically classified as any of the following: <ul style="list-style-type: none"> - Pre-malignant; - Having borderline malignancy; - Having any degree of malignant potential; - Having suspicious malignancy; - Neoplasm of uncertain or unknown behavior; or - Cervical Intraepithelial Neoplasia (CIN) classification which reports CIN I, CIN II, and CIN III (severe dysplasia without carcinoma in-situ). • All tumours in the presence of Human Immunodeficiency Virus (HIV) infection; • All Gastro-Intestinal Stromal tumours histologically classified below T1N0M0 (TNM Classification) and with mitotic count of less than or equal to 5/50 HPFs; • Carcinoma in-situ of the biliary system is also specifically excluded; • CLL RAI stage 0 or lower is excluded; and • Non-invasive melanoma histologically described as “in-situ” is excluded. 	<ul style="list-style-type: none"> • All Gastro-Intestinal Stromal tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual, or below; • Chronic Lymphocytic Leukaemia less than RAI Stage 3; • All bone marrow malignancies which do not require recurrent blood transfusions, chemotherapy, targeted cancer therapies, bone marrow transplant, haematopoietic stem cell transplant or other major interventionist treatment; and • All tumours in the presence of HIV infection.
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*The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). This Critical Illness falls under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).