

Major Cancer

POLICY TERMS AND CONDITIONS

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This is a group insurance policy issued to SingCash Pte. Ltd. (Company Registration No. 201106360E) (“Group Policy Owner”) and provides coverage to eligible Singtel Dash Customer (“Life insured”).

1. 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 websites (www.lia.org.sg or www.sdic.org.sg).

2. Our Responsibilities

This is a yearly renewable, Non-participating rider that pays the Sum assured if the Life insured is diagnosed with Major Cancer while the rider is in force. At the rider Expiry date, if We have not paid out any claims, this rider will end and no Benefits will be payable.

Your rider covers the Benefits described below.

2.1 Major Cancer Benefit

While the rider is in force, upon diagnosis of Major Cancer of the Life insured by a Doctor, We will pay the Sum assured less any amounts owing to Us. When We make this payment, the rider ends.

Definition of Major Cancer*

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

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

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

For the above definition, the following are excluded:

- All tumours which are histologically classified as any of the following:
 - Pre-malignant;
 - Non-invasive;
 - Carcinoma-in-situ (Tis) or Ta;
 - Having borderline malignancy;
 - Having any degree of malignant potential;
 - Having suspicious malignancy;
 - Neoplasm of uncertain or unknown behavior; or
 - All grades of dysplasia, squamous intraepithelial lesions (HSIL and LSIL) and intra epithelial neoplasia;
- Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond;

- Malignant melanoma that has not caused invasion beyond the epidermis;
- All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification;
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification) or below;
- All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below;
- All Gastro-Intestinal Stromal tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual, or below;
- Chronic Lymphocytic Leukaemia less than RAI Stage 3;
- All bone marrow malignancies which do not require recurrent blood transfusions, chemotherapy, targeted cancer therapies, bone marrow transplant, haematopoietic stem cell transplant or other major interventionist treatment; and
- All tumours in the presence of HIV infection

*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).

Benefit Limitation

We will only provide a maximum aggregate amount of S\$2.0 million per Life insured for all policies and riders issued by Us with Critical Illness benefits.

2.2 De-activate the Rider

Your rider will be de-activated when any one of the following event happens:

- (a) de-activation of the Basic policy;
- (b) free-look of the rider;
- (c) upon Your request to de-activate the rider. The de-activation will take effect on the next calendar day; or
- (d) the deduction of the daily Insurance cover charge will result to Account value in Basic policy falls below S\$1.00 and Insurance cover charge for this rider is not paid by expiry date of the grace period.

When Your rider is de-activated, all Benefits under this rider will end. The rider will remain dormant and You may choose to re-activate Your rider at any time before termination of this rider occurs.

2.3 Re-activate the Rider

If Your rider is de-activated, You may re-apply to re-activate the rider to in force.

Re-activation of the rider is subject to Our approval, depending on the insurability of the Life insured and such other terms and conditions as We shall determine from time to time. Upon our approval, re-activation will take effect on the next calendar day. All exclusions will begin from the effective day of re-activation.

2.4 Yearly Renewability

This is a yearly renewable rider and the policy term is 1 year. At the end of 1 year policy term, this rider will be renewed automatically for another 1 year at the same conditions on the expiry date before renewal, so long as the following conditions are met:

- (a) this rider is in force on the expiry date before the renewal; and

(b) the Life insured has not reached Age 86 at the renewal date.

We reserve the right to terminate Your rider by giving you 90 days' notice.

3. Your Responsibilities

3.1 Insurance Cover Charge

We will deduct Insurance cover charge daily in respect of the Sum assured of the rider, starting from the Rider commencement date. The Insurance cover charge will depend on the Sum assured of the rider, the attained age of the Life insured, the Life insured's gender and smoker status on each Basic policy's policy anniversary. Insurance cover charge are payable daily via deduction from the Account value in Basic policy. In the event that the deduction of the daily Insurance cover charge will result to Account value in Basic policy falls below S\$1.00, no deduction of the daily insurance cover charge will take place. We will provide a three (3) days' grace period such that Your rider is kept in force. This rider will be de-activated if the required Insurance cover charge is not paid by the expiry date of the grace period.

The Insurance cover charge for this rider is not guaranteed. We reserve the right to change the Insurance cover charge at any time by giving You thirty (30) days' written notice in advance.

4. What Is Not Covered?

There are certain conditions under which no Benefits will be payable.

4.1 Major Cancer Benefit

1. We do not pay the Benefits if the Major Cancer is directly or indirectly, wholly or partly caused by:
 - Intentional acts (sane or insane) such as self-inflicted injuries, suicide or attempted suicide within the first 12 months from the Rider issue date, the last increase in rider's Sum assured made or the latest rider re-activation date, whichever is later;
 - Effects of drug or alcohol addiction;
 - Human Immunodeficiency Virus (HIV) infection, Acquired Immune Deficiency Syndrome (AIDS) and any AIDS related condition, unless the HIV infection is due to blood transfusion or occupationally acquired HIV; or
 - A Pre-existing condition.
2. The Major Cancer is diagnosed within the first 90 days waiting period. Waiting period will start from the Rider issue date, the last increase in rider's Sum assured made or the latest rider re-activation date, whichever is later;
3. The Life insured did not survive for 30 days after the date of diagnosis of the Major Cancer.
4. When there is condition(s) specific to the Life insured which We will not cover, We will state them on Our offer of conditional acceptance, the Certificate of Insurance and Endorsement.

When any of the exclusion happens, We will return the total Insurance cover charge paid for this rider without interest back into the Basic policy's Account value, less any amounts owing to Us.

5. Making Claims from the Policy

5.1 How to make a Claim

We must be informed in writing within 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.

Material facts required under this policy that were not disclosed when required for applying for a new policy may result in Your claim being rejected. When this happens, We will refund all Insurance cover charge paid (less any amounts previously paid to You under this rider) back into the Basic policy's Account value, without interest and less any amounts owing to Us as well as any expenses incurred by Us in providing You the rider.

5.2 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 if We have proof 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.

6. Our Rights

6.1 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 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 abovementioned event occurs, We reserve the rights to void the policy, revise the terms of the policy or reject any claims even after 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.

6.2 Correction of Mistakes and Errors

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

6.3 Changes in Taxation, Regulations and Legislation

At any time when there are 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 in writing prior to such change.

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

If Your Age, gender, smoker status and/or country of residence is not correctly stated such that the Insurance cover charge is wrong, We reserve the rights to adjust the Benefits. For underpayment of Insurance cover charge, the claims will be pro-rated as if You have purchased a lower cover. For overpayment of Insurance cover charge, We will refund the excess Insurance cover charge paid (less any amounts previously paid to You under this rider) back into the Basic policy's Account value, without interest.

Based on the correct Age, gender, smoker status and/or country of residence, if You are 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 Insurance cover charge paid (less any amounts previously paid to You under this rider) back into the Basic policy's Account value, without interest and less any amounts owing to Us as well as any expenses incurred by Us in providing You the rider.

7. Your Rights

7.1 Free Look

You may return this rider for cancellation within 14 days after You receive the rider document, for any reason. We will deduct any costs incurred by the Company in assessing the risk under the rider, such as payments for medical check-up and other expenses, from the Insurance cover charge You paid. The balance Insurance cover charge (if any) will be refunded back into the Basic policy's Account value.

If Your policy document is sent by email, We consider this policy is delivered to You 1 day after the date of emailing.

Free look period is only applicable for the first time when this rider is issued. It is not applicable to the subsequent re-activation of the rider.

7.2 Assignment

You are not allowed to transfer (assign) Your policy to another person and/or entity unless the policy has been assigned to You by the Group Policy Owner.

We will have to agree to the assignment in writing in order for it to be effective. 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.

7.3 Nominees

You are not allowed to make nomination of beneficiary under this policy unless the policy has been assigned to You by the Group Policy Owner.

Subject to the current laws and regulations, nomination can be made 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.

Where the Group Policy Owner is an entity, nomination of beneficiary is not allowed.

Free look period is only applicable for the first time when this rider is issued. It is not applicable to the subsequent re-activation of the rider.

8. When Will Your Rider End?

This rider will end when any of the following events happens first:

- (a) Termination of the Basic policy;
- (b) 90 days after We give You notice that the rider cannot be renewed; or
- (c) We paid out the rider Benefit subject to the maximum aggregate amount.

9. What Do We Mean With These Words?

Age means the age at next birthday.

Account value is calculated as:

The single premium paid plus

- (a) any ad-hoc Top-up(s); and
- (b) accumulated interest;

less

- (c) Insurance cover charge of the optional supplementary riders You added;
- (d) any partial withdrawal(s); and
- (e) any transaction fee(s).

Basic policy means the policy as it exists, including the supplementary terms and any endorsement made to it, without any optional supplementary benefit / 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 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 rider ends and where no benefit is payable.

Group Policy Owner is SingCash Pte. Ltd. (Company Registration No. 201106360E). The Group Policy Owner has full rights on the policy.

Insurance cover charge is the amount of money that you pay to us to keep the optional supplementary riders in force so you may claim for the benefits.

Life insured means the person named in the Certificate of Insurance whom We provide the cover for. Throughout this document, where the context so admits, words embodying the masculine gender shall include the feminine gender and vice-versa. The Life insured does not have ownership of this Group Policy.

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

Rider commencement date means the date the rider commences, as shown in the Endorsement on Addition of Supplementary Rider. The rider's policy anniversary is same as the Basic policy's policy anniversary, as shown in the Basic policy's Certificate of Insurance.

Rider issue date means the date we issue the rider. This is shown in the Certificate of Insurance.

Premium(s) is the amount of money that you pay to us to keep Dash PET policy inforce so you may claim for the benefits.

Pre-existing condition means the existence of any signs or symptoms before the Rider issue date, the last increase in rider's Sum assured made or the rider re-activation 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.

Proper claimant(s) has the meaning in the **Insurance Act, Chapter 142**. 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.

Top-up(s) means the subsequent premium(s) you make to your policy after Your policy is issued.

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

You, Your means the Life Insured.