

CancerCare (II)

General conditions

1. The contract

This **policy** is a written confirmation of a contract between **you** and **us**. This is a regular-premium **non-participating** life insurance **policy** that provides coverage for all stages of **cancer** and death, and an additional coverage against the child's advanced stage cancer.

2. Definitions

Unless **we** say otherwise, the following are definitions of words and expressions **we** use in this **policy**.

- (a) **Advanced stage cancer of a child benefit** means the amount payable as determined in accordance with clause 26.
- (b) **Age** means the **life insured's age** as at his/her last birthday, on the **policy effective date**, or any **policy anniversary**, where applicable.
- (c) **Application** means information **you** and/or the **life insured** gave to buy this **basic benefit** or any **supplementary benefit** of this **policy**. Whether **we** accept **your application** depends on **our** assessment of the information submitted.
- (d) **Attained age** means **your** or the **life insured's age** as at **your** or his/her last birthday.
- (e) **Basic benefit** means the basic insurance cover as shown on the **schedule page** or **endorsement** and as stated in the **basic benefit** conditions of this **basic benefit** contract.
- (f) **Cancer** means the conditions that are covered under this **policy** and defined in Appendix A.
- (g) **Cancer benefit** means the amount payable for a claim for **cancer** as determined in accordance with clause 23.
- (h) **Child** means the biological or adopted (in accordance with the adoption laws of Singapore) child (but not the step-child) of the **life insured** who is between the age of 30 days old and less than 18 years old as at the date of **diagnosis**. For avoidance of doubt, the **child** need not have come into existence at point of purchase of this **policy**.
- (i) **Country of residence** means country where the **life insured** currently lives for more than 183 days consecutively.
- (j) **Dates**
 - (i) **Benefit start date** means the date when the cover for the **basic benefit** or any **supplementary benefit** takes effect, as shown on the **schedule page**.
 - (ii) **Benefit end date** means the date when the **basic benefit** or any **supplementary benefit** cover ends, as shown on the **schedule page**.
 - (iii) **Date of event** means the date of **diagnosis** of a **cancer**.
 - (iv) **Grace period** means a period of 30 calendar days after the **premium due date**.
 - (v) **Policy anniversary** means any anniversary of the **policy effective date**.
 - (vi) **Policy start date** (or **policy effective date**) means the date when this **policy** takes effect, as shown on the **schedule page**. If there is no day in any month or year that coincides with the **policy effective date**, the **policy anniversary**, **policy** monthiversary, and **policy year** (where applicable) will be the first calendar day of the next calendar month.
 - (vii) **Policy issue date** means the date when this **policy** is issued, as shown on the **schedule page**.
 - (viii) **Policy year** means a consecutive 12-month period. The first **policy year** begins on the **policy effective date** and ends 1 day before the first **policy anniversary**. Each subsequent **policy year** begins on the day of the **policy anniversary** and ends 1 day before the next **policy anniversary**.
 - (ix) **Policy term** means a prescribed number of years as provided for in the plan name on the **schedule page**, which begins from the **policy start date**.

- (x) **Premium end date** means the date on which the final **premium** is due and is to be paid, as shown on the **schedule page**.
 - (xi) **Premium due date** means the date when the **premium** is due and payable according to the payment frequency **you** have chosen.
 - (xii) **Renewed term** means a period equivalent to the **policy term** for each renewal of the policy, except for the final **renewed term** which may be shorter than the **policy term** as provided under clause 5.
- (k) **Death benefit** means benefit payable to **you** for a claim due to the death of **life insured** as determined in accordance with clause 22.
- (l) **Diagnosis** or **diagnosed** means the definitive **diagnosis** made by a **medical examiner**, based on radiological, clinical, histological or laboratory evidence which **we** accept. **We** may appoint another **medical examiner** to examine the **life insured** or the evidence presented. The opinion and **diagnosis** of this **medical examiner** will be final and binding.
- (m) **Endorsement** means any document issued and signed by **our** Chief Executive Officer to change the terms of this **policy**. It forms an integral part of this **policy**.
- (n) **Life insured** means the person named as the **life insured** on the **schedule page** or **endorsement**. This is the person that this **policy** insures.
- (o) **Medical examiner** means:
- (i) any medical practitioner or specialist doctor with a recognised degree in western medicine who is licensed and authorised to practise in his or her country, who has the relevant skill to provide medical or surgical services for the illness, disability or disease; or
 - (ii) any medical practitioner or specialist doctor in Singapore **we** choose if **you** or the **life insured** makes a claim for **basic benefit** or **supplementary benefit** (if applicable) under this **policy**.
- This person must not be **you** or the **life insured**, or **your** or the **life insured's** husband, wife, relative or business partner.
- (p) **Non-participating**
This **policy** does not benefit from **our** surplus distributions. When **you** ask to end the **policy** or if the **policy** lapses or ends, it will have no cash value.
- (q) **Policy**
- (i) This **policy** is made up of the following:
 - a. the **application** form, any amendments, other forms and documents provided by **you** and the **life insured** to apply for this **policy**;
 - b. this **basic benefit** contract;
 - c. the **supplementary benefit** contract (if any);
 - d. the **schedule page**;
 - e. the **endorsement** (if any);
 - f. any counter offers **we** made and **you** accepted; and
 - g. any information and documents provided by **you** and the **life insured** with or after **your application**.
 - (ii) **We** may issue revised **schedule pages** and/or **endorsements** to show changes made to this **policy**. Any change to this **policy** must be in writing and signed by **our** Chief Executive Officer.
 - (iii) **We** are not bound by any representation made by or to any other person not included in this **policy**.
- (r) **Pre-existing cancer** refers to any **cancer** which existed before the **policy issue date** or the date of reinstatement, whichever is later, unless the condition had been declared and accepted by **us**:
- (i) which presented signs or symptoms of which **you** or the **life insured** was aware of or should reasonably have been aware of; or
 - (ii) for which treatment was recommended by or received from a **medical examiner**; or
 - (iii) for which the **life insured** or **child** has undergone medical tests or investigations.
- (s) **Pre-existing condition** refers to any condition or illness which existed before the **policy issue date** or the date of reinstatement, whichever is later, unless the condition had been declared and accepted by **us**:

- (i) which presented signs or symptoms of which **you** or the **life insured** was aware of or should reasonably have been aware of; or
 - (ii) for which treatment was recommended by or received from a **medical examiner**; or
 - (iii) for which the **life insured** has undergone medical tests or investigations.
- (t) **Premium** means the amount **you** pay in accordance with the payment frequency as shown on the **schedule page** or **endorsement**. It consists of the regular **premiums** payable for the **basic benefit** and for the **supplementary benefits** (where applicable) as reflected in **our** records.
- (u) **Schedule page** forms part of this **policy** setting out specific details.
- (v) **Specified cancer treatment benefit** means the amount payable for a claim for **specified cancer treatment** as determined in accordance with clause 25.
- (w) **Specified cancer treatment** refers to the list of treatments according to clause 25 as defined in Appendix B.
- (x) **Sum insured** means and is equivalent to the amount payable for the **basic benefit** in accordance with the specified **sum insured** for each **basic benefit** as stated in this **basic benefit** contract.
- (y) **Supplementary benefit** means an optional insurance coverage attached to this **basic benefit** contract. **You** can find details of the **supplementary benefit** on the **schedule page** or **endorsement**, and the terms in the **supplementary benefit** contract.
- (z) **We, our, us** refer to Manulife (Singapore) Pte. Ltd.
- (aa) **You, your, yourself** refer to the policy owner of this **policy** as shown in **schedule page** or **endorsement** (if there is an assignment to change the ownership of this **policy**).

3. Free-look period

- (a) **You** may cancel this **policy** by writing to **us** within 14 days after **you** receive this **policy**.
- (b) If **you** cancel the **policy** within this **free-look period**, **we** will refund all **premiums** paid without interest and less any medical or other expenses **we** have had to pay in processing **your application**.
- (c) If **we** send this **policy** to **you** by post or email, it will be considered delivered by **us** and received by **you** 7 days after the date of posting or email sent.

4. Premiums

- (a) The **premiums** payable for this **basic benefit**
 - (i) during the **policy term** is shown on the **schedule page** or **endorsement**; and
 - (ii) during any **renewed term**, will be based on the **attained age** of the **life insured** as at the start of each **renewed term**.
- (b) The **premium** for this **policy** is shown on the **schedule page** or **endorsement** and the **premium** rate is not guaranteed. **We** reserve the right to change the **premium** rate for this **policy** by giving **you** 30 days' notice.
- (c) The **premium** shown will be based on the frequency of payment **you** have chosen.
- (d) If any **supplementary benefit** is attached to this **policy**, the **premium** shown on the **schedule page** includes the **premium** for the **supplementary benefits**.
- (e) **You** must pay the **premiums** by the **premium due date**. It is **your** responsibility to pay all **premiums** when due and until the **premium end date** as shown on the **schedule page**.
- (f) **We** will not process the payment if **we** do not receive the full **premiums** for the **policy**.
- (g) If **you** pay **premiums** monthly, **you** must do so using a direct debit facility (GIRO) approved by **us**. **We** may charge an administrative fee for any **premiums** not paid through GIRO or where the GIRO transaction has not been successful.

5. Renewal

- (a) Subject to an extension of this **policy** pursuant to clause 24, this **policy** is guaranteed renewable (without any evidence of health) on the day after the expiry date of either (i) the **policy term**; or (ii) subsequent **renewed term**, and the **policy** will continue to be in force until the **policy anniversary** immediately following the **life insured's** 85th birthday.
- (b) The first **renewed term** will start on the day after the expiry of the **policy term**, and each subsequent **renewed term** (if applicable) will start on the day after the expiry of the immediately preceding **renewed term**.
- (c) The **premium** rates will be revised at the start of each **renewed term**. The revised **premium** and the renewal date will be stated on the **premium** notice issued by **us**.
- (d) Once this **policy** has been extended pursuant to clause 24, this **policy** will not be further renewed and will terminate upon the expiry of the extended coverage period.

6. Lapsing and reinstating the policy

- (a) This **policy** will lapse (no cover will be provided) if **you** do not pay the **premiums** by the end of the **grace period**.
- (b) **You** may ask **us** to reinstate the **policy** within 3 months from the date the **policy** lapsed.
- (c) **We** will decide whether to reinstate the **policy** and **we** must receive:
 - (i) evidence of the **life insured's** eligibility for insurance cover (**you** will have to pay for any medical reports and tests needed);
 - (ii) all overdue **premiums** which would have been paid had the **policy** not lapsed and the interest **we** may charge on these **premiums** (in a way which **we** will decide); and
 - (iii) any amount **you** may owe **us**.
- (d) **We** can include new terms and conditions on the reinstated **policy**.

7. Non-disclosure

- (a) Under the Insurance Act 1966, **you** and the **life insured** must disclose all facts **you** and/or the **life insured** know or ought to know (including any facts which may affect **our** decision to provide insurance coverage under this **policy**).
- (b) If **you** and/or the **life insured** misrepresent or fail to disclose any facts (as described above), **we** may void this **policy**. **We** may determine at **our** sole discretion whether to refund all **premiums** received without interest, less the policy debt, amounts **you** owe to **us**, medical and other expenses incurred and to be incurred by **us** under this **policy**.

8. Incontestability

- (a) Except for fraud, non-payment of **premium**, any claim that is not covered under this **policy**, or **non-disclosure** as described under clause 7, **we** will not contest the validity of or void this **policy** after 2 years from any of the following dates, whichever is the latest:
 - (i) the **policy issue date**; or
 - (ii) the date of the most recent reinstatement of the **policy**.
- (b) If **we** contest the validity of or void this **policy**, **we** may determine at **our** sole discretion whether to refund all **premiums** received without interest, less the policy debt, amounts **you** owe to **us**, medical and other expenses incurred and to be incurred by **us** under this **policy**.

9. Making a claim

- (a) **You** or the person making a claim must give **us** notice in writing of the claim within 30 days of the event (or as soon as possible).

- (b) **You** or the person making the claim must give **us** evidence of the claim within 30 days after notice of the claim (or as soon as possible) and **we** must receive:
 - (i) this **policy**;
 - (ii) proof of ownership or entitlement of the person making the claim;
 - (iii) the birth certificate, identification documents or other relevant documents **we** may need for the **life insured** or the person making the claim;
 - (iv) the completed claim form and the medical report;
 - (v) proof of the event giving rise to the claim under this **policy**; and
 - (vi) any other document **we** may ask for so **we** can process the claim.
- (c) **We** may appoint another **medical examiner** to examine the **life insured** in Singapore or the evidence presented. The opinion and **diagnosis** of this **medical examiner** will be binding on the **life insured** and **us**. **You** will have to pay any travel, accommodation and other costs, but not the cost of the examination carried out by **our** appointed **medical examiner**.
- (d) **We** will not be legally responsible if **you** or the person making the claim fails to provide the documents **we** need to check the claim or entitlement under this **policy**.
- (e) If the **age** or sex (or both) were incorrect on the **application**, **we** will adjust the **premiums** paid or due under this **policy** to that which would have been appropriate had the **age** or sex been correctly stated.
- (f) If **we** make a payment under this **policy**, this will fulfill **our** duty under the **policy** and **we** will have no further responsibility to **you** or any other person for the claim. This will apply to any action, claim, proceedings, cost, damages, demand, interest, liability, loss, penalty, tax and expenses **you** or they may suffer or have to pay as a result of or in connection with the claim.
- (g) **We** can ask **you** or the person claiming to repay any amount which **we** have paid as a result of any mistake or oversight (including on **our** part or on the part of **our** employees or representatives).
- (h) **We** will take any amount **you** owe **us** on **your policy** before **we** pay any claim.
- (i) **We** will not pay the **death benefit** if the **life insured** dies due to a **pre-existing condition** within 1 year from the **policy issue date** or the date of reinstatement of the **policy**, whichever is later, and **we** will refund all **premiums** paid without interest and less any medical or other expenses **we** have had to pay in connection with this **policy**.
- (j) **We** will not pay the **cancer benefit** and **specified cancer treatment benefit** if:
 - (i) the **life insured** did not survive for at least 7 days from the **date of event**; or
 - (ii) the **date of event** is within 90 days from the **policy issue date** or the date of reinstatement of this **policy**, whichever is later; or
 - (iii) they are in the presence of Human Immunodeficiency Virus (HIV), Acquired Immunodeficiency Syndrome (AIDS) or any AIDS-related condition; or
 - (iv) they are due to a **pre-existing cancer**.
- (k) **We** will not pay the **advanced stage cancer of a child benefit** if:
 - (i) the **date of event** is within 90 days from the **policy issue date** or the date of reinstatement of this **policy**, whichever is later; or
 - (ii) they are due to a **pre-existing cancer**.

10. Residence, travel and occupation

There are no restrictions on where the **life insured** stays, travels or works, unless **we** say otherwise.

11. Change of country of residence

- (a) **You** must tell **us** as soon as possible about any change to the **country of residence** but not more than 30 days from the change.
- (b) If **we** are not told about the change, **we** can refuse a claim if the **country of residence** is not one which **we** insure for this product.

- (c) **We** may end the **policy** according to the risk classification of the new **country of residence** from the next **premium due date** of the **policy**.

12. Assignment

- (a) While this **policy** is in force and during the lifetime of the **life insured**, **you** may use **your policy** as security or collateral or **you** may fully transfer the benefits of the **policy** to another person or organisation.
- (b) **You** must give **us**:
- (i) written notice of the assignment; and
 - (ii) a copy of the assignment.
- (c) **We** will only treat the notice of assignment as received when it is delivered to **our** registered address. If **you** provide the notice through **our** representative, **we** will only treat it as received when the representative delivers it to **our** registered address.
- (d) By acknowledging the notice of assignment, **we** are not responsible for whether the assignment is valid or legally enforceable.

13. Survival period

For the payment of **cancer benefit** and **specified cancer treatment benefit** mentioned in the **basic benefit** conditions, the **life insured** is required to survive for at least 7 days from the **date of event** before the relevant benefit is payable. Otherwise, only the **death benefit** shall be payable.

Any **premium** due and paid within the 7 days of survival period will be refunded without interest if the **life insured** is alive after the survival period.

14. Waiting period

We will not cover the **cancer benefit**, **specified cancer treatment benefit** and **advanced stage cancer of a child benefit** if **cancer** is diagnosed within 90 days from:

- (i) the **policy issue date**; or
- (ii) the date of reinstatement of this **policy**, whichever is later.

15. Suicide

- (a) If the **life insured** dies from suicide, whether sane or insane, within 1 year from the **policy issue date**, **we** will not pay the **death benefit** and will refund all **premiums** paid without interest and less any policy debt, medical or other expenses **we** have had to pay in connection with this **policy** and this **policy** will end.
- (b) If the **life insured** dies from suicide, whether sane or insane, within 1 year from the date of the most recent reinstatement of the **policy**, **we** will not pay the **death benefit** and will refund all **premiums** paid from the start date of the most recent reinstatement without interest and less any policy debt, medical or other expenses **we** have had to pay in connection with this **policy** and this **policy** will end.

16. Termination

This **policy** will end:

- (a) when **we** receive **your** notice in writing to end the **policy**;
- (b) when it lapses or terminates pursuant to the terms and conditions of this **policy**;
- (c) when the **life insured** dies;
- (d) on the expiry of the extended coverage period; or
- (e) on the **benefit end date**, whichever happens first.

17. Governing law

This **policy** is subject to, governed by and construed in accordance with the laws of Singapore. The Singapore courts shall have exclusive jurisdiction over this **policy**.

18. Contracts (Rights of Third Parties) Act 2001

A person who is not directly involved in this **policy** will have no rights under the Contracts (Rights of Third Parties) Act 2001 of Singapore to enforce any of the terms.

19. Policy transactions

If **you** want to carry out any transaction under this **policy**, **you** must use the forms **we** provide to **you**. **You** must update **us** about any change in **your** personal information, especially **your** correspondence address, residential address, email address and contact number.

20. Currency

All **premiums** and benefits quoted in this **policy** are in Singapore dollars. Payments to **us** under this **policy** or payments which **we** make under this **policy** will also be in Singapore dollars.

21. 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 LIA or SDIC web-sites (www.lia.org.sg or www.sdic.org.sg).

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Basic benefit conditions

22. Death benefit

- (a) If the **life insured** dies while this **policy** is in force, **we** will pay the **sum insured** in accordance with the plan type selected by **you**. The different plan types are shown in the table below for reference.

Basic Benefit	Plan Type / Sum Insured (S\$)				
	Headstart	Essential	Advantage	Supreme	Elite
Death benefit	5,000	10,000	15,000	20,000	25,000

- (b) Upon payment of the **death benefit**, this **policy** will end.

23. Cancer benefit

- (a) If the **life insured** is **diagnosed** with **cancer** while this **policy** is in force, **we** will pay the **sum insured** in accordance with the plan type selected by **you**. The different plan types are shown in the table below for reference.

Basic Benefit	Plan Type / Sum Insured (S\$)				
	Headstart	Essential	Advantage	Supreme	Elite
Cancer benefit	50,000	100,000	150,000	200,000	250,000

- (b) If there are other policies with **cancer benefit** under simplified issuance offered by **us** or applied by **you** or the **life insured** that cover(s) the same **life insured**, the maximum **cancer benefit** **we** will pay under all the policies issued by **us** shall not exceed S\$250,000.
- (c) The most **we** will pay for any critical illness condition under this **policy** and all **policies** **we** have issued covering the same **life insured** shall not exceed S\$2 million.
- (d) **We** will pay this benefit only once under this **policy**.

24. Extended coverage period upon diagnosis of cancer

- (a) If the **life insured** is **diagnosed** with **cancer**, this **policy** will continue to be in force and the coverage period for **death benefit**, **specified cancer treatment benefit** and **advanced stage cancer of a child benefit** will automatically extend:
- for 5 years from the date of **diagnosis** of **cancer**; or
 - until **age 85** of the **life insured**, whichever is shorter.
- (b) No further premiums will be payable during this period.
- (c) This extension of coverage period will only be applicable once.

25. Specified cancer treatment benefit

- (a) This benefit will only be available when the coverage period of this **policy** is extended in accordance with clause 24.
- (b) If the **life insured** is diagnosed with **cancer** and is undergoing any of the covered **specified cancer treatments** in Singapore as advised by a **medical examiner** while the policy is in force, **we** will pay an additional 20% of the **cancer benefit**.
- (c) **We** will pay this benefit only once under this **policy**.

26. Advanced stage cancer of a child benefit

- (a) If the **life insured's child** is **diagnosed** with an advanced stage **cancer** (as defined in Appendix A) while this **policy** is in force, **we** will pay the **sum insured** in accordance with the plan type selected by **you**. The different plan types are shown in the table below for reference.

Basic Benefit	Plan Type / Sum Insured (S\$)				
	Headstart	Essential	Advantage	Supreme	Elite
Advanced stage cancer of a child benefit	5,000	5,000	10,000	10,000	10,000

- (b) The payment under **advanced stage cancer of a child benefit** is subject to the following conditions:
- (i) **we** will pay this benefit up to a maximum of 2 claims and each claim must be on a different **child**;
 - (ii) the most **we** will pay for this benefit under this **policy** and all other policies **we** have issued (including policies with "serious illness of a child benefit") covering the same **child** shall not exceed S\$40,000 per **child** and S\$80,000 in total per family; and
 - (iii) payment of **advanced stage cancer of a child benefit** will not reduce the **sum insured**.

Appendix A

Cancer Definition

Early Stage Cancer	Intermediate Stage Cancer	Advanced Stage Cancer
Carcinoma in situ Carcinoma in situ 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. The diagnosis of the Carcinoma in situ must always be supported by a histo-pathological report. Furthermore, the diagnosis of Carcinoma in situ must always be positively diagnosed upon the basis of a microscopic examination of the fixed tissue, supported by a biopsy result. Early Prostate Cancer Prostate cancer that is histologically described using the TNM Classification as T1N0M0 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. Early Bladder Cancer Bladder cancer that is histologically described using the TNM Classification as Tis or T1N0M0. Non-invasive papillary urothelial carcinoma of the bladder (stage Ta) is excluded. Early Chronic Lymphocytic Leukaemia Chronic Lymphocytic Leukaemia (CLL) RAI Stage 1 or 2. CLL RAI stage 0 or lower is excluded. Neuroendocrine Tumours All Neuroendocrine tumours histologically classified as T1N0M0 (TNM Classification). Gastro-intestinal Stromal Tumours All Gastro-intestinal Stromal Tumours histologically classified as Stage I or IA according to the latest edition of the AJCC Cancer Staging Manual which are treated with surgery or chemotherapy as	Carcinoma in situ of Specified Organs treated with Radical Surgery The actual undergoing of a Radical Surgery to arrest the spread of malignancy in that specific organ, which must be considered as appropriate and necessary treatment. "Radical Surgery" is defined in this policy as the total and complete removal of one (1) of the following organs: breast (mastectomy), prostate (prostatectomy), corpus uteri (hysterectomy), ovary (oophorectomy), fallopian tube (salpingectomy), colon (partial colectomy with end to end anastomosis) or stomach (partial gastrectomy with end to end anastomosis). The diagnosis of the Carcinoma in situ must always be positively diagnosed upon the basis of a microscopic examination of fixed tissues additionally supported by a biopsy of the removed organ. Early prostate cancer that is histologically described using the TNM Classification as T1N0M0 or Prostate cancers described using another equivalent classification is also covered if it has been treated with a radical prostatectomy. The actual undergoing of the surgeries listed above and the surgery must be certified to be absolutely necessary by an oncologist. Partial surgical removal such as lumpectomy and partial mastectomy and partial prostatectomy are specifically excluded. Carcinoma in situ 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. The diagnosis of the Carcinoma in situ must always be supported by a histopathological report. The following conditions are specifically excluded from the	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, leukaemia, 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: A) 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; B) Any non-melanoma skin carcinoma, skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans unless there is evidence of metastases to lymph nodes or beyond; C) Malignant melanoma that has not caused invasion beyond the epidermis; D) All Prostate cancers histologically described as T1N0M0 (TNM Classification) or below; or Prostate cancers of another equivalent or lesser classification; E) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below; F) All Neuroendocrine tumours

recommended by an oncologist. Bone Marrow Malignancies 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. The diagnosis of the above minor cancers must be established by histological evidence and be confirmed by a specialist in the relevant field. The following conditions are specifically excluded from coverage: • Clinical diagnosis; • Any diagnosis on the basis of finding tumour cells and/or tumor-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; • Any lesion or tumour which is histologically described as benign, dysplasia, premalignant, borderline malignant, or suspicious malignant potential; • Cervical Dysplasia, CIN-1, CIN-2 and CIN-3 and low grade & high grade squamous epithelial lesions unless specifically reported as CIS (carcinoma in situ); • Prostatic Intraepithelial Neoplasia (PIN); • Vulvar Intraepithelial Neoplasia (VIN); • Melanoma in situ and any non-melanoma skin carcinoma (in-situ or invasive), skin confined primary cutaneous lymphoma and dermatofibrosarcoma protuberans; • Non-invasive papillary urothelial carcinoma of the bladder (stage Ta); • All Pituitary neuroendocrine tumours (PitNETs); • All tumours in the presence of Human Immunodeficiency Virus (HIV) infection.	coverage: • Clinical diagnosis; • Any diagnosis on the basis of finding tumour cells and/or tumor-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; • Any lesion or tumour which is histologically described as benign, dysplasia, premalignant, borderline malignant, or suspicious malignant potential. • Cervical Dysplasia, CIN-1, CIN-2 and CIN-3 and low grade & high grade squamous epithelial lesions unless specifically reported as CIS (carcinoma in situ); • Prostatic Intraepithelial Neoplasia (PIN); • Vulvar Intraepithelial Neoplasia (VIN); • All Pituitary neuroendocrine tumours (PitNETs); • All tumours in the presence of Human Immunodeficiency Virus (HIV) infection.	histologically classified as T1N0M0 (TNM Classification) or below; and all pituitary neuroendocrine tumours (PitNET) except Metastatic PitNET and Pituitary Carcinoma; G) All tumours of the Urinary Bladder histologically classified as T1N0M0 (TNM Classification) or below; H) 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; I) Chronic Lymphocytic Leukaemia less than RAI Stage 3; J) 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 K) All tumours in the presence of HIV infection.
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Appendix B

Specified Cancer Treatment Definitions

Treatment	Definition
Proton Therapy	Proton Therapy involves the use of protons obtained by accelerating hydrogen atom nuclei to irradiate the Cancer.
Clinical Trial Cancer Drug Treatment	Clinical Trial Cancer Drug Treatment shall mean the treatment regimen of a Cancer with a drug or a combination of drugs (as the case maybe) which fulfils either one of the following conditions: - Such treatment regimen has completed phase III (Phase 3) clinical trial with achievement of the positive endpoints of the Phase 3 clinical trial for the same Cancer which the life insured is being treated at the time of recommendation by the treating medical examiner who is qualified as a specialist doctor in the relevant field; or - Such treatment regimen is on active Phase 3 clinical trial for the same Cancer which the life insured is being treated and at the same time the life insured is enrolled in such clinical trial. The Phase 3 clinical trial must be approved and registered by the relevant institutional review board in the location in which the trial is being conducted. Acceptable registries include: - Clinicaltrials.gov (https://clinicaltrials.gov/) - Primary and partner registries found on the World Health Organisation's (WHO) International Clinical Trials Registry Platform (ICTRP); or - Any other Singapore MOH approved or international registry for clinical trials where the treatment is performed. Such Clinical Trial Cancer Drug Treatment must be based on the recommendation of a medical examiner who is qualified as a specialist doctor in the relevant field and as a result of documented failure or non-response of at least one first line cancer treatment that is approved by local pharmaceutical regulatory authority in the location of undergoing treatment for the type of Cancer which the life insured is being treated. Documented enrolment into Phase 3 and receiving of such Clinical Trial Cancer Drug Treatment at Phase 3 must be provided.
Off-Label Cancer Drug Treatment	Off-Label Cancer Drug Treatment shall mean the treatment regimen of a Cancer with a drug or a combination of drugs (as the case maybe) which at the time of undergoing treatment - Has already received approval from any pharmaceutical regulatory authority (including but not limited to United States Food and Drug Administration (USFDA), European Medicines Agency (EMA), Health Sciences Authority (HSA) of Singapore for treatment of any other Cancer which is different from the Cancer that the life insured is being treated; and - Has been recommended as a treatment option for the Cancer which the life insured is being treated by the National Comprehensive Cancer Network (NCCN) or the European Society for Medical Oncology (ESMO) or any other established society or recognised local/regional authority guidelines if it is used more predominantly; and - As per the recommendation of a medical examiner who is qualified as a specialist doctor in the relevant field, the life insured has received the treatment in accordance with the treatment criteria and protocol outlined by the NCCN or the ESMO or any other established society or recognised local/regional authority guidelines.
Cell, Tissue and Gene Therapy	A Cell, Tissue and Gene Therapy Product (CTGTP) for cancer treatment refers to any substance used in humans to treat, manage, or alleviate cancer by targeting tumour cells, enhancing the immune response, or modifying genetic material. These products may include viable or non-viable human or animal cells, tissues, or recombinant nucleic acids and achieve their effect through pharmacological, immunological, or physiological mechanisms. Common applications include cell-based immunotherapies, gene therapies to modify cancer-related genes, and tissue-engineered products for cancer treatment. Exclusions include minimally manipulated blood, organ transplants, and reproductive cells.

	For the purpose of this benefit, Cell, Tissue and Gene Therapy will adopt the same definition as defined under the Health Products Act.
CAR-T Cell Therapy	CAR-T Cell Therapy is a specialised form of immunotherapy where a patient's T-cells are genetically modified to attack specific diseased cells. For the purpose of this benefit, CAR-T Cell Therapy will adopt the same definition as defined under the Health Products Act, focusing on its use for hematological malignancies and targeting specific antigens on cancer cells.
Stem Cell Transplant	The receipt of human bone marrow using hematopoietic stem cells preceded by total bone marrow ablation to treat advanced stage cancer. The diagnosis and need for hematopoietic stem cell treatment must be based on the recommendation of a medical examiner who is qualified as a specialist doctor in the relevant field. For the purpose of this benefit, Stem Cell Transplant will adopt the same definition as defined under the Health Products Act. Other stem cell treatments or transplants are specifically excluded.

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