



PRUActive Protect

Protect Plus

Early Protect

Early Protect Plus

Life Protect Plus

Severe Infections Protect

Monthly Benefit

Product Information Pack
for
Financial Consultants / Representatives

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PRUActive Protect

PRODUCT FEATURES

1. INTRODUCTION

PRUActive Protect is a regular premium, non-participating term plan that provides financial protection for a specific term against critical illness and death. It also has a Crisis Care Accelerator benefit, an Additional benefit, a Child Cover benefit & Spouse Waiver benefit. It allows you to convert (replace) your policy with a new whole life or endowment policy without evidence of good health.

The product allows customers to customize their Critical Illness plan to suit their unique needs. The modular structure of the plan with standalone CI options allows customers to meet their CI needs without having to purchase packaged plans with high death coverage, addressing budget constraints and over-coverage concerns.

Early stage, multi-pay supplementary benefits, additional death cover, additional severe infectious diseases cover and a monthly benefit are also made available to offer more options for customers who want more comprehensive coverage.

2. BENEFITS OF PRUACTIVE PROTECT

2.1 Critical Illness Benefit

If the life assured is diagnosed as having any one of the 36 critical illnesses listed below, before the cover end date, we pay 100% of the sum assured, less any amounts owing to us. The life assured must survive at least 7 days from the date of diagnosis.

We pay this benefit for one critical illness and up to 100% of the sum assured shown in your certificate of life assurance. Once we pay a successful claim for critical illness, the Critical Illness benefit ends.

The Critical Illness benefit sum assured includes claims for any pre-critical medical condition claim under the Early Protect benefit (if this benefit is included). Once 100% of the sum assured is paid out, the benefit ends.

The critical illness must be diagnosed by a registered medical practitioner.

We can ask for a medical examination to be carried out by a medical practitioner registered with the Singapore Medical Council if we decide the medical reports you give us are not enough for our purposes.

A "Registered Medical Practitioner" is any person properly qualified with a degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.



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What Critical Illnesses* are covered?

- | | |
|--|---|
| 1. Alzheimer's Disease / Severe Dementia | 18. Major Cancer |
| 2. Benign Brain Tumour | 19. Major Head Trauma |
| 3. Blindness (Irreversible Loss of Sight) | 20. Major Organ / Bone Marrow Transplantation |
| 4. Coma | 21. Motor Neurone Disease |
| 5. Coronary Artery By-pass Surgery | 22. Multiple Sclerosis |
| 6. Deafness (Irreversible Loss of Hearing) | 23. Muscular Dystrophy |
| 7. End Stage Kidney Failure | 24. Open Chest Heart Valve Surgery |
| 8. End Stage Liver Failure | 25. Open Chest Surgery to Aorta |
| 9. End Stage Lung Disease | 26. Other Serious Coronary Artery Disease |
| 10. Fulminant Hepatitis | 27. Paralysis (Irreversible Loss of Use of Limbs) |
| 11. Heart Attack of Specified Severity | 28. Persistent Vegetative State (Apallic Syndrome) |
| 12. HIV Due to Blood Transfusion and Occupationally Acquired HIV | 29. Poliomyelitis |
| 13. Idiopathic Parkinson's Disease | 30. Primary Pulmonary Hypertension |
| 14. Irreversible Aplastic Anaemia | 31. Progressive Scleroderma |
| 15. Irreversible Loss of Speech | 32. Severe Bacterial Meningitis |
| 16. Loss of Independent Existence | 33. Severe Encephalitis |
| 17. Major Burns | 34. Stroke with Permanent Neurological Deficit |
| | 35. Systemic Lupus Erythematosus with Lupus Nephritis |
| | 36. Terminal Illness |

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**



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2.2 Crisis Care Accelerator Benefit

We pay 50% from your PRUActive Protect sum assured if the life assured:

- has surgery for any of the following vital organs as a result of illness or an accident - heart, lung, brain, kidney or liver, and
- Is admitted to the Intensive Care Unit (ICU) as a result of the surgery, for at least three continuous days,

A certified specialist must confirm that the surgery and hospitalisation is medically necessary.

Any condition must be first considered or claimed against the 36 critical illnesses before being considered under this benefit.

Surgery means any surgical operation listed in MOH's surgical operations fees table 1 to 7 (as at the date of the surgery).

Intensive Care Unit (ICU) refers to the intensive care unit of a hospital. The High Dependency Unit and other hospital wards are not considered intensive care unit.

Medically Necessary means a treatment which, in the opinion of a specialist doctor, is appropriate and consistent with the symptoms, findings, diagnosis and other relevant clinical circumstances of the related illness. The treatment must be provided in accordance with generally accepted medical practice in Singapore.

MOH stands for the Ministry of Health, Singapore.

We pay this benefit once only and up to \$100,000.

The PRUActive Protect sum assured will be reduced by the claim amount paid out under this benefit. If there has already been a claim on the policy and the sum assured of PRUActive Protect has been reduced, the Crisis Care Accelerator Benefit would pay 50% from the remaining PRUActive Protect sum assured.

The Crisis Care Accelerator benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

We do not pay the Crisis Care Accelerator Benefit in any of the following circumstances:

- If the surgery is due to organ donation.
- If any critical illness is due directly or indirectly to a pre-existing condition.
- If the treatment is for investigation or research (for example, experimental or new physiotherapy, medical techniques or surgical techniques, medical devices not approved by the Institutional Review Board and the Health Sciences Authority, and medical trials for medicinal products, whether or not these trials have a clinical trial certificate issued by the Health Sciences Authority or similar bodies);
- If the treatment is for preventive purposes or for health screening or promoting good health (such as dietary replacement or supplement).
- If the treatment is for the convenience of the insured or registered medical practitioner or specialist (for example, treatment that can reasonably be provided out of a hospital, but is provided as an inpatient treatment)
- If the life assured suffered symptoms of or had investigations for or was diagnosed with a critical illness any time before or within 90 days from the cover start date.
- If the critical illness is due to deliberate acts such as self-inflicted injuries, illnesses or attempted suicide;
- If the treatment is for improving appearance, such as cosmetic surgery or any treatment relating to a previous cosmetic treatment;



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- If it is for overseas medical treatment;
- If the treatment is for pregnancy, childbirth, miscarriage, abortion or termination of pregnancy, or any form of related stay in hospital or treatment;
- If treatment is for infertility, sub-fertility, assisted conception, erectile dysfunction, impotence or any contraceptive treatment;
- If treatment is for psychological disorders, personality disorders, mental conditions or behavioural disorders, including any addiction or dependence as a result of these disorders such as gambling or gaming addiction;
- If treatment is due to unlawful acts, provoked assault or deliberate exposure to danger;
- If the treatment is for sexually-transmitted diseases;
- If the life assured undergoes sex-change operations;
- If treatment is experimental or pioneering medical or surgical techniques and medical devices not approved by the Institutional Review Board and the Centre of Medical Device Regulation and medical trials for medicinal products whether or not these trials have a clinical trial certificate issued by the Health Sciences Authority of Singapore;
- If the life assured undergoes alternative or complementary treatments, including traditional Chinese medicine (TCM) or stays in any health-care establishment for social or non-medical reasons;
- If treatment is for injuries due to being directly involved in civil commotion, riot or strike;
- If the critical illness is due to radiation or contamination from radioactivity;
- If the critical illness is due to warlike operations (whether war is declared or not), war, invasion, riot or any similar event
- If the critical illness is due to the deliberate misuse of drugs or alcohol;
- If the critical illness is caused by acquired immunodeficiency syndrome (AIDS), AIDS-related complex or infection by human immunodeficiency virus (HIV), except as stated under HIV due to blood transfusion and occupationally acquired HIV

2.3 Death Benefit

If the life assured dies, we pay the Death benefit which is 20% of your PRUActive Protect sum assured as shown on your certificate of life assurance, less any amounts you owe us.

All other claims under your PRUActive Protect policy and its riders will not reduce the Death benefit sum assured.

However, if you reduced your PRUActive Protect sum assured, your Death benefit will be revised to 20% of the reduced sum assured.

If the life assured dies directly or indirectly from an activity under special exclusion or special terms and conditions shown in your certificate of life assurance, we do not pay the death benefit but we will refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) and any claim we have had to pay for your policy.

If the life assured dies from suicide within 12 months from the cover start date or date of reinstatement (if any) of your policy, we will make your policy void. In this case, we cancel it and refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) and any claim we have had to pay for your policy.

The policy automatically terminates once we have paid a claim for this benefit.



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2.4 Additional Benefit

If the life assured is diagnosed with a medical condition that requires him to undergo Angioplasty and Other Invasive Treatment for Coronary Artery, we pay 10% of the PRUActive Protect sum assured up to \$25,000.

We pay this benefit once only.

The life assured must survive at least seven days from the date of diagnosis.

The medical condition must be diagnosed by a registered medical practitioner. We can ask for a medical examination to be carried out by a medical practitioner registered with the Singapore Medical Council if we decide the medical reports you give us are not enough for our purposes.

A claim under this benefit will not affect the sum assured of your policy.

Angioplasty and other invasive treatment for coronary artery involves having a balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of at least 60% stenosis of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist. Coronary arteries refer to the left main stem, left anterior descending, circumflex and right coronary artery.

Diagnostic angiography is excluded.

The Additional Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

2.5 Child Cover Benefit

When the life assured and spouse each buys a PRUActive Protect policy, their child or children will be provided with free child cover.

If the child is diagnosed as having any one of the 36 critical illnesses (listed in Section 2.1 above) or 9 juvenile medical conditions (listed below), we pay:

- 25% of one of the parents' PRUActive Protect sum assured, whichever is higher
- only once for each child and up to \$25,000 for each child
- this benefit only after the second policy anniversary of the parent's policy.

If the claim is received when the covered condition is diagnosed:

- before the first policy anniversary of the parent's policy, we will not pay anything
- after the first but before the second policy anniversary of the parent's policy, we will pay 50% of the benefit. This means we pay 12.5% of the sum assured only.

The policy anniversary above is based on the cover start date of the parent's policy. We will base on the most recent cover start date if the dates are different. If either one or both parents' policy have been reinstated, we will base on the most recent reinstatement date.

For us to pay the claim, the following must apply:

- The child must survive at least 14 days from the date of diagnosis;
- The child is 17 years old and below, and
- Both parents' policies must still be effective and not ended at the time of the claim, unless one of the parents' policy ended because of a claim

Child or children refer to either the biological or adopted child of the life assured, including an unborn child or children.



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To make a claim, the life assured has to submit the child's birth certificate or adoption papers as proof of relationship.

A pay out under this benefit will not reduce the parent's PRUActive Protect policy's sum assured.

We cover the following 9 Juvenile Medical Conditions:

1. Glomerulonephritis with Nephrotic Syndrome
2. Haemophilia A and Haemophilia B
3. Insulin Dependent Diabetes Mellitus
4. Kawasaki Disease with heart complications
5. Osteogenesis Imperfecta
6. Rheumatic Fever with valvular impairment
7. Still's Disease
8. Wilson's Disease
9. Hand Foot Mouth Disease with serious complications

We do not pay the Child Cover benefit in any of the following circumstances:

- If the child is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- If the child is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- If the child is diagnosed as having a critical illness
 - o within 12 months from the most recent cover start date or date of reinstatement (if any)
 - o before the child is 30 days old,
 - o and dies within 14 days from the date of diagnosis,
 - o when the child is 18 years old and above
- If the child is diagnosed as having a covered illness caused by:
 - o Acquired Immune Deficiency Syndrome (AIDS), AIDS-related complex or infection by Human Immunodeficiency Virus (HIV), except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o self-inflicted injuries while sane or insane;
 - o alcohol or drug abuse.
 - o taking part or attempting to take part in an unlawful act;

The cover start date above refers to the cover start date of the parent's policy. We will base on the most recent cover start date if the dates are different. If either one or both parents' policy have been reinstated, we will base on the most recent reinstatement date.

2.6 Spouse Waiver Benefit

When the life assured's spouse is diagnosed as having any one of the 36 critical illnesses we will waive the premiums of the PRUActive Protect policy and its supplementary benefits (if any) for 12 months from the next premium due date.

You can only claim once under this benefit.

To make a claim, the life assured would have to submit their marriage certificate as proof of their relationship.

The Spouse Waiver benefit does not waive the premiums of any waiver supplementary benefits attached to your PRUActive Protect policy

If the Payer Security Plus benefit has already been included to this plan, this Spouse Waiver benefit will not apply.



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The Spouse Waiver Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

We do not waive premiums under the Spouse Waiver benefit in any of the following circumstances, if the spouse:

- is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- is diagnosed with a Heart Attack of Specified Severity, Major Cancer, Other Serious Coronary Artery Disease or requiring Coronary Artery By-pass Surgery within 90 days from the cover start date or date of reinstatement (if any);
- is diagnosed with Angioplasty and Other Invasive Treatment for Coronary Artery;
- dies within 30 days from the date of diagnosis
- is diagnosed as having a covered illness caused by:
 - o self-inflicted injuries while sane or insane;
 - o AIDS, AIDS-related complex or infection by HIV except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o using unprescribed drugs if the drugs are required by law to be prescribed by a registered medical practitioner;
 - o taking part or attempting to take part in an unlawful act; or
 - o alcohol or drug abuse.

2.7 Option to convert to another policy

If you bought your policy on standard terms (in other words, you were not given our offer of conditional acceptance where the life assured was offered special terms and conditions for accepting the proposal for life assurance), you can convert your policy to a new policy.

Before the cover end date, you can choose to replace your PRUActive Protect policy and buy a new available regular premium whole life or endowment policy without showing evidence of good health.

We can change the types of policy you can buy.

You can only do this if:

- the life assured is under 65 years old;
- you have paid all the premiums due under your PRUActive Protect policy;
- you pay the premiums for your new policy; and
- we have not paid out any claim under your PRUActive Protect policy and all its supplementary benefits;

The new policy must:

- meet the stated minimum sum assured, minimum premium and policy terms; and
- have a sum assured that is:
 - o the same or less than the sum assured of your PRUActive Protect policy; and
 - o not more than \$500,000.

If you do a partial conversion, the balance sum assured of your current PRUActive Protect must be more than the minimum sum assured of the new regular premium whole life or endowment policy that you are converting to. You must also meet the minimum premium amount allowed for the new policy.

The premium charged will be based on the age of the life assured at the time you convert your policy.

If any of the benefits in your PRUActive Protect policy are offered with special terms and conditions that are not medical-related and we allowed the conversion, these same terms and conditions will continue to apply on the new policy.



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To apply to convert your policy, you must use our appropriate application form and meet the conditions on it. We will let you know if we accept your application.

3. SUPPLEMENTARY BENEFITS OF PRUACTIVE PROTECT

3.1 Protect Plus

Protect Plus is a supplementary benefit, which restores the PRUActive Protect sum assured to 100% after a Critical illness benefit claim.

The life assured is able to claim up to a maximum of 500% of the PRUActive Protect sum assured (**total sum assured**).

This 500% of the sum assured includes claims for any pre-critical medical condition claim under the Early Protect benefit (if this benefit is included).

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out. Otherwise, we pay only the Death benefit.

For us to accept the next claim, the following must apply

- If it is not the same critical illness as the one before it, there must be a period of 12 months between the dates of diagnosis (**waiting period**)
- If it is the same critical illness as the one before it, then there must be a waiting period of 24 months between the dates of diagnosis.

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims. However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.

If there was a claim under the Crisis Care Accelerator benefit, the Critical Illness benefit will be restored to 100% after a waiting period of 12 months.

If the life assured is diagnosed with more than one critical illness at the same time, we will only pay for one critical illness that has the highest severity level.

What is a recurring critical illness condition under the same category?

Recurring critical illness conditions under the same category means the critical illness condition is a recurrence or metastasis of the same critical illness condition that you claimed previously.

To avoid any doubt, the recurring critical illness condition of the same category, must meet the criteria set out in the critical illness definitions covered in this policy, and will not apply to any illness which falls outside this definition. In addition, the medical evidence must clearly show that the initial or previous critical illness condition (which has been admitted) was already in complete remission before the recurring critical illness condition was diagnosed.

Complete Remission means complete absence of clinical and objective evidence of any previous critical illness claimed condition(s), verified by a registered specialist, evidenced by absence of any signs, symptoms and supported by clinical, radiological, histological and laboratory evidence in regular follow-ups.

What is a recurring critical illness condition under different categories?

Recurring critical illness conditions under a different category means any of the following conditions:

- The claimed condition is from a different critical illness category as the previous critical illness claim that has been admitted under this policy;



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- The claimed condition is from a different pathological and histological type and occurs in a different organ* or site as all previous critical illness claims that has been admitted under this policy; or
- The claimed condition is newly diagnosed with a primary cause that is identified as not related or due to any previous critical illness claim that has been admitted under this policy.

* Paired organs such as breast, ear, eyes, kidneys, lungs, ovary & testicles are considered as same organ.

To avoid any doubt, the recurring critical illness condition of a different category, must meet the criteria set out in the critical illness definitions covered in this policy, and will not apply to any illness which falls outside this definition.

Once you have made a Critical Illness benefit or Early Protect benefit claim, you cannot end this benefit.

Once there has been a successful claim under the Critical Illness benefit, the total sum assured will be reduced by the amount paid out under this benefit. The total sum assured would be 500% of the basic sum assured for your PRUActive Protect policy.

Pls refer to Section 11 on the claims scenarios for Protect Plus.

3.2 Early Protect

Early Protect is a supplementary benefit, which offers financial protection against Pre-critical medical conditions. Any pre-critical medical conditions payout under Early Protect will reduce the sum assured of the PRUActive Protect policy. It also has a Special benefit.

If the life assured is diagnosed as having any one of the pre-critical medical conditions listed below, before the cover end date, we pay 100% of the Early Protect sum assured, less any amounts owing to us.

The life assured must survive at least 7 days from the date of diagnosis.

We pay this benefit for one pre-critical medical condition and up to 100% of the Early Protect sum assured shown in your certificate of life assurance. This 100% of the sum assured includes claims for any of the 36 critical illness under PRUActive Protect's Critical Illness benefit.

If there is a claim under PRUActive Protect's Critical Illness benefit, this could result in the reduction of the sum assured of Early Protect or the termination of this supplementary benefit.

This benefit ends once we pay 100% of the Early Protect sum assured.



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Pre-critical medical conditions covered:

	Critical illness category	Pre-critical medical conditions
1	Alzheimer's Disease / Severe Dementia	Moderately severe Alzheimer's disease or dementia
2	Benign Brain Tumour	<ul style="list-style-type: none"> - Surgical removal of pituitary tumour or surgery for subdural haematoma - Surgical removal of pituitary tumour (by open craniotomy)
3	Blindness (Irreversible Loss of Sight)	<ul style="list-style-type: none"> - Loss of sight in one eye - Optic nerve atrophy with low vision
4	Coma	<ul style="list-style-type: none"> - Coma for 48 hours - Severe epilepsy
5	Coronary Artery By-pass Surgery	<ul style="list-style-type: none"> - Port access or keyhole cardiac surgery - Transmyocardial laser revascularisation or enhanced external counterpulsation device insertion
6	Deafness (Irreversible Loss of Hearing)	<ul style="list-style-type: none"> - Partial loss of hearing or cavernous sinus thrombosis surgery - Cochlear implant surgery
7	End Stage Kidney Failure	<ul style="list-style-type: none"> - Surgical removal of one kidney - Chronic kidney disease
8	End Stage Liver Failure	<ul style="list-style-type: none"> - Liver surgery - Liver cirrhosis
9	End Stage Lung Disease	<ul style="list-style-type: none"> - Severe asthma or insertion of a vena-cava filter - Surgical removal of one lung
10	Fulminant Hepatitis	<ul style="list-style-type: none"> - Biliary tract reconstruction surgery - Chronic primary sclerosing cholangitis
11	Heart Attack of Specified Severity	<ul style="list-style-type: none"> - Cardiac pacemaker insertion or pericardectomy - Cardiac defibrillator insertion or early cardiomyopathy
12	HIV due to Blood Transfusion and Occupationally Acquired HIV	HIV due to assault, organ transplant or occupationally acquired HIV
13	Idiopathic Parkinson's Disease	Early and moderately severe Parkinson's disease
14	Irreversible Aplastic Anaemia	<ul style="list-style-type: none"> - Reversible aplastic anaemia - Myelodysplastic syndrome or myelofibrosis
15	Irreversible Loss of Speech	<ul style="list-style-type: none"> - Loss of speech due to permanent or temporary tracheostomy - Loss of speech due to vocal cord paralysis
16	Loss of Independent Existence	<ul style="list-style-type: none"> - Loss of independent existence (early stage) - Loss of independent existence (intermediate stage)
17	Major Burns	<ul style="list-style-type: none"> - Mild severe burns - Moderately severe burns



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	Critical illness category	Pre-critical medical conditions
18	Major Cancer	<ul style="list-style-type: none"> - Carcinoma in situ of specified organs <ul style="list-style-type: none"> - Early prostate cancer - Early thyroid cancer - Early bladder cancer - Early chronic lymphocytic leukaemia - Early melanoma - Gastro-intestinal stromal tumour (GIST) - Carcinoma in situ of specified organs treated with radical surgery
19	Major Head Trauma	<ul style="list-style-type: none"> - Facial reconstructive surgery - Intermediate stage major head trauma
20	Major Organ / Bone Marrow Transplantation	<ul style="list-style-type: none"> - Small bowel transplant or corneal transplant - Major organ/bone marrow transplant (on waitlist)
21	Motor Neurone Disease	<ul style="list-style-type: none"> - Early motor neurone disease
22	Multiple Sclerosis	<ul style="list-style-type: none"> - Early multiple sclerosis - Mild multiple sclerosis
23	Muscular Dystrophy	<ul style="list-style-type: none"> - Moderately severe Muscular dystrophy - Spinal-cord disease or injury resulting in bowel and bladder dysfunction
24	Open Chest Heart Valve Surgery	<ul style="list-style-type: none"> - Percutaneous valve surgery - Percutaneous valve replacement or device repair
25	Open Chest Surgery to Aorta	<ul style="list-style-type: none"> - Minimally invasive surgery to aorta or - Large asymptomatic aortic aneurysm
26	Other Serious Coronary Artery Disease	<ul style="list-style-type: none"> - Early stage other serious coronary artery disease - Intermediate stage other serious coronary artery disease
27	Paralysis (Irreversible Loss of Use of Limbs)	<ul style="list-style-type: none"> - Loss of use of one limb - Loss of use of one limb needing a prosthesis
28	Persistent Vegetative State (Apallic Syndrome)	<ul style="list-style-type: none"> - Akinetic Mutism - Locked in syndrome
29	Poliomyelitis	<ul style="list-style-type: none"> - Peripheral Neuropathy - Poliomyelitis (intermediate stage)
30	Primary Pulmonary Hypertension	<ul style="list-style-type: none"> - Early pulmonary hypertension - Secondary pulmonary hypertension
31	Progressive Scleroderma	<ul style="list-style-type: none"> - Early progressive scleroderma - Progressive scleroderma with CREST syndrome
32	Severe Bacterial Meningitis	<ul style="list-style-type: none"> - Bacterial meningitis with full recovery - Bacterial meningitis with reversible neurological deficit
33	Severe Encephalitis	<ul style="list-style-type: none"> - Viral encephalitis with full recovery - Moderate viral encephalitis with full recovery
34	Stroke with Permanent Neurological Deficit	<ul style="list-style-type: none"> - Brain aneurysm surgery or cerebral shunt insertion - Carotid artery surgery



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	Critical illness category	Pre-critical medical conditions
35	Systemic Lupus Erythematosus with Lupus Nephritis	<ul style="list-style-type: none">- Mild systemic lupus erythematosus- Erythematosus- Moderately severe systemic lupus erythematosus with lupus nephritis (early stage)
36	Terminal Illness	-

The definitions of these pre-critical medical conditions can be found in Early Protect's product summary.

3.2.1 Special Benefit

If the life assured is diagnosed with any of the 12 listed medical conditions below, we pay 20% of the Early Protect benefit sum assured up to \$25,000 for each medical condition and up to a maximum of \$200,000 for each life assured.

A claim under this benefit will not affect the sum assured of your PRUActive Protect policy.

The life assured must survive at least seven days from the date of diagnosis.

The medical conditions must be diagnosed by a registered medical practitioner.

We can ask for a medical examination to be carried out by a medical practitioner registered with the Singapore Medical Council if we decide the medical reports you give us are not enough for our purposes

We pay this benefit once for each of the listed Special benefit medical conditions up to 10 different medical conditions.

We cover the following medical conditions:

1. Diabetic complications
2. Osteoporosis with fractures
3. Severe rheumatoid arthritis

These three medical conditions will cover a life assured up to the age of 84 years old only.

Juvenile medical conditions:

4. Glomerulonephritis with Nephrotic Syndrome
5. Haemophilia A and Haemophilia B
6. Insulin Dependent Diabetes Mellitus
7. Kawasaki Disease with heart complications
8. Osteogenesis Imperfecta
9. Rheumatic Fever with valvular impairment
10. Still's Disease
11. Wilson's Disease
12. Hand Foot Mouth Disease with serious complications

These Juvenile medical conditions will cover the life assured up to the age of 17 years old only.

The definitions of these Special benefit medical conditions can be found in Early Protect's product summary.



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3.3 Early Protect Plus

Early Protect Plus is a supplementary benefit, which restores the Early Protect sum assured to 100% after a Pre-critical medical condition claim.

The life assured is able to claim up to a maximum of 500% of the Early Protect sum assured for a Pre-critical medical condition. This 500% includes claims for any of the critical illnesses under the PRUActive Protect policy.

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out. Otherwise, we pay only the Death benefit.

For us to accept the next claim, the following must apply

- If it is not the same pre-critical medical condition as the one before it, there must be a period of 12 months between the dates of diagnosis (**waiting period**)
- If it is the same pre-critical medical condition as the one before it, then there must be a waiting period of 24 months between the dates of diagnosis.

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims. However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.

If the life assured is diagnosed with more than one pre-critical medical condition or critical illness at the same time, we will only pay for one medical condition that has the highest severity level.

What is a recurring pre-critical medical condition under the same category?

Recurring pre-critical medical conditions under the same category means the pre-critical medical condition is a recurrence or metastasis of the same pre-critical medical condition that you claimed previously.

To avoid any doubt, the recurring pre-critical medical condition of the same category, must meet the criteria set out in the pre-critical medical definitions covered in this policy, and will not apply to any illness which falls outside this definition. In addition, the medical evidence must clearly show that the initial or previous pre-critical medical condition (which has been admitted) was already in complete remission before the recurring pre-critical medical condition was diagnosed.

Complete Remission means complete absence of clinical and objective evidence of any previous pre-critical medical claimed condition(s), verified by a registered specialist, evidenced by absence of any signs, symptoms and supported by clinical, radiological, histological and laboratory evidence in regular follow-ups.

What is a recurring pre-critical medical condition under different categories?

Recurring pre-critical medical conditions under a different category means any of the following conditions:

- The claimed condition is from a different pre-critical medical category as the previous pre-critical medical claim that has been admitted under this policy;
- The claimed condition is from a different pathological and histological type and occurs in a different organ* or site as all previous pre-critical medical claims that has been admitted under this policy; or
- The claimed condition is newly diagnosed with a primary cause that is identified as not related or due to any previous pre-critical medical claim that has been admitted under this policy.



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- * Paired organs such as breast, ear, eyes, kidneys, lungs, ovary & testicles are considered as same organ.

To avoid any doubt, the recurring pre-critical medical condition of a different category, must meet the criteria set out in the pre-critical medical definitions covered in this policy, and will not apply to any illness which falls outside this definition.

Once there has been a successful claim for a pre-critical medical condition, the total sum assured will be reduced by the amount paid out under this benefit. The total sum assured would be 500% of the basic sum assured for your PRUActive Protect policy.

Once you have made a Critical Illness benefit or Early Protect benefit claim, you cannot end this benefit.

Pls refer to Section 11 on the claims scenarios for Early Protect Plus.

3.4 Life Protect Plus

Life Protect Plus is a supplementary benefit, which offers additional financial protection against Death and Terminal Illness.

3.4.1 Death Benefit

If the life assured dies directly or indirectly from an activity under special exclusion or special terms and conditions shown in your certificate of life assurance, we do not pay the sum assured but we will refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) we have had to pay for your policy.

If the life assured dies from suicide within 12 months from the cover start date or date of reinstatement (if any) of your policy, we will make your policy void. In this case, we cancel it and refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) we have had to pay for your policy.

The whole policy automatically ends once we have paid a claim for this benefit.

3.4.2 Accelerated Terminal Illness Benefit

If the life assured is shown on the certificate of life assurance to be covered for this benefit and is diagnosed as having a Terminal Illness during the policy term, we pay the Accelerated Terminal Illness Benefit shown in your certificate of life assurance.

We pay if the life assured is diagnosed as suffering from Terminal Illness. “**Terminal Illness**” is defined as a condition which, in the opinion of a registered medical practitioner, and our appointed doctor agrees, is highly likely to lead to death within 12 months.

A “**registered medical practitioner**” is any person properly qualified with a degree in western medicine to practise medicine, and is licensed by the appropriate medical authority of the country they live in to practise medicine within the scope of his licensing and training. This cannot be you, the life assured or a family member of either.

Once we pay an Accelerated Terminal Illness Benefit claim, the Accelerated Terminal Illness Benefit ends. The following will also apply:

- a) If the sum assured of the Death Benefit is the same as the sum assured of the Accelerated Terminal Illness Benefit, the policy and all its benefits will end.



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b) If the sum assured of the Death Benefit is more than the sum assured of the Accelerated Terminal Illness Benefit, we will reduce the sum assured of the Death Benefit to an amount equal to the difference between the sum assured of the Death Benefit and the sum assured of the Accelerated Terminal Illness Benefit. You can continue the policy for this Death Benefit and any other supplementary benefits (if applicable) by paying the necessary premiums.

3.5 Severe Infections Protect

Severe Infections Protect is a supplementary benefit, which offers financial protection against serious infectious diseases.

If a life assured is shown on your certificate of life assurance to be covered for this benefit, we pay the Severe Infections Protect benefit sum assured as shown in your certificate of life assurance if the life assured is:

- is diagnosed with any one of the serious infectious diseases listed below and
- is admitted to the Intensive Care Unit (ICU) as a result of the serious infectious disease, for at least five continuous days.

The life assured must survive 30 days from the date of diagnosis.

We pay this benefit once only and up to a maximum of \$100,000 per life assured.

A claim under this benefit will not affect the sum assured of your PRUActive Protect policy.

List of Serious infectious disease covered:

- 1 Avian Influenza
- 2 Nipah Virus Infection
- 3 Plague
- 4 Poliomyelitis
- 5 Rabies
- 6 Yellow Fever
- 7 Botulism
- 8 Dengue Fever
- 9 Dengue Haemorrhagic Fever
- 10 Diphtheria
- 11 Japanese Encephalitis
- 12 Malaria
- 13 Measles
- 14 Rubella
- 15 Zika Virus Infection
- 16 Cholera
- 17 Haemophilus Influenzae Type b Disease
- 18 Leptospirosis
- 19 Meningococcal Disease
- 20 Murine Typhus
- 21 Paratyphoid
- 22 Typhoid Fever
- 23 Tetanus
- 24 Tuberculosis
- 25 Campylobacteriosis
- 26 Hepatitis A, acute
- 27 Hepatitis B, acute
- 28 Hepatitis C, acute
- 29 Hepatitis E, acute
- 30 Legionellosis
- 31 Leprosy
- 32 Melioidosis



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- 33 Pertussis
- 34 Pneumococcal Disease (Invasive)
- 35 Salmonellosis (non-typhoidal)

Exclusions:

We do not pay if the life assured is diagnosed with an infectious disease that arises directly or indirectly out of one of the following:

- Any infectious disease that is not set out in list above
- Any pre-existing medical condition, except for any infectious disease which you were previously diagnosed with and had fully recovered from before the cover start date of the benefit.
- Any infectious disease diagnosed within 14 days from the cover start date of the benefit.
- Pandemics and communicable diseases requiring quarantine by law.

3.6 Monthly Benefit

Monthly benefit is a supplementary benefit, which offers financial protection in the form of a monthly benefit against critical illness.

If a life assured is shown on your certificate of life assurance to be covered for this benefit and has made a successful claim on the Critical Illness benefit, we pay a Monthly benefit for a selected amount over a period of time.

The client can choose to receive the monthly payout for 1, 2 or 3 years with choice of monthly payout amount between \$100 to \$5,000.

We pay this benefit once on the first Critical Illness benefit claim only. The Monthly benefit payments will start from the next month after the date we paid the critical illness claim.

We will not pay this benefit:

- On another Critical Illness claim under the Protect Plus benefit
- On a pre-critical medical condition claim under the Early Protect or Early Protect Plus benefits; or
- On a Crisis Care Accelerator claim.

If the life assured dies during the monthly payout period, we will pay the Death benefit instead. The Monthly benefit ends and the PRUActive Protect policy will also end.

3.7 Crisis Waiver III on PRUActive Protect

Crisis Waiver III is a supplementary benefit that helps to waive premiums of the covered benefits when the life assured is diagnosed with a Critical Illness before the end of the premium term of the basic policy.

If a life assured is covered for this benefit and is diagnosed as having any one of the 35 critical illnesses, we waive all future premiums for the covered benefits from the next premium due date after the critical illness is diagnosed until:

- the cover end date as shown on your certificate of life assurance
 - until the end of your premium payment term,
- whichever event happens first.

This will mean the life assured does not have to pay any more premiums but we will do so on the life assured's behalf to ensure the policy continues as if premiums never stopped.

If the life assured have made no claim on the Crisis Waiver III Benefit, it ends on the cover end date as shown on the certificate of life assurance. If the life assured make a claim for Crisis Waiver III Benefit, we waive future premiums until the end of your premium payment term.



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The critical illness must be diagnosed by a registered medical practitioner.

A "Registered Medical Practitioner" is any person properly qualified by degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.

This Crisis Waiver III benefit expires when you reach the age of 75 years. As such, we waive your future premiums until you reach age 75 or until the end of your premium payment term, whichever event occurs first.

List of Critical Illnesses* are covered

- | | |
|--|---|
| 1. Alzheimer's Disease / Severe Dementia | 18. Major Cancer |
| 2. Benign Brain Tumour | 19. Major Head Trauma |
| 3. Blindness (Irreversible Loss of Sight) | 20. Major Organ / Bone Marrow Transplantation |
| 4. Coma | 21. Motor Neurone Disease |
| 5. Coronary Artery By-pass Surgery | 22. Multiple Sclerosis |
| 6. Deafness (Irreversible Loss of Hearing) | 23. Muscular Dystrophy |
| 7. End Stage Kidney Failure | 24. Open Chest Heart Valve Surgery |
| 8. End Stage Liver Failure | 25. Open Chest Surgery to Aorta |
| 9. End Stage Lung Disease | 26. Other Serious Coronary Artery Disease |
| 10. Fulminant Hepatitis | 27. Paralysis (Irreversible Loss of Use of Limbs) |
| 11. Heart Attack of Specified Severity | 28. Persistent Vegetative State (Apallic Syndrome) |
| 12. HIV Due to Blood Transfusion and Occupationally Acquired HIV | 29. Poliomyelitis |
| 13. Idiopathic Parkinson's Disease | 30. Primary Pulmonary Hypertension |
| 14. Irreversible Aplastic Anaemia | 31. Progressive Scleroderma |
| 15. Irreversible Loss of Speech | 32. Severe Bacterial Meningitis |
| 16. Loss of Independent Existence | 33. Severe Encephalitis |
| 17. Major Burns | 34. Stroke with Permanent Neurological Deficit |
| | 35. Systemic Lupus Erythematosus with Lupus Nephritis |

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**



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Exclusions:

We do not waive premiums in any of the following circumstances:

- the Critical Illness existed before the Cover Start Date or date of reinstatement (if any) of this benefit;
- any benefit for any Critical Illness that is due directly or indirectly to a Pre-existing Condition unless it was declared in the proposal and specifically accepted by us. A **"Pre-existing Condition"** is the existence of any signs or symptoms for which treatment, medication, consultation, advice or diagnosis has been sought or received by the life assured or would have caused an ordinary sensible person to seek treatment, diagnosis or cure, prior to the Cover Start Date or the date of reinstatement (if any) of this benefit;
- the life assured is diagnosed as having a Heart Attack of a Specified Severity, Major Cancer or Other Serious Coronary Artery Disease within 90 days of the Cover Start Date or the date of reinstatement (if any) of this benefit;
- a doctor has diagnosed coronary artery disease within 90 days of the Cover Start Date or the date of reinstatement (if any) of this benefit. This diagnosis has led to the performance of a Coronary Artery Bypass Surgery on the life assured;
- the life assured is diagnosed before age 6 as having a covered illness caused by a congenital or inherited disorder;
- the life assured is diagnosed before age 2 as having deafness
- the life assured needs angioplasty and other invasive treatment for coronary artery.
- the life assured is diagnosed as having a Critical Illness caused by:
 - self-inflicted injuries while sane or insane;
 - Acquired Immunodeficiency Syndrome (**"AIDS"**), AIDS related complex or infection by Human Immunodeficiency Virus (**"HIV"**) except HIV Due to Blood Transfusion and Occupationally Acquired HIV;
- the use of unprescribed drugs where such drugs are required by law to be prescribed by a Registered Medical Practitioner;
- an activity under Special Exclusion and/or Special Terms and Conditions shown on the Certificate of Life Assurance; or
- participation or attempted participation in an unlawful act.

3.8 Early Crisis Waiver on PRUActive Protect

Early Crisis Waiver is a supplementary benefit that waives the future premiums for the covered benefits as shown in your certificate of life assurance, upon the diagnosis of any one of the Pre-critical medical conditions.

If the life assured is shown on your certificate of life assurance to be covered for the Early Crisis Waiver benefit and is diagnosed as having any one of the Pre-Critical Medical Conditions, we will waive the future premiums of the covered benefits from the next premium due date following the date of diagnosis of the Pre-Critical Medical Condition for 5 years or until you reach age 75 or until the end of your premium payment term, whichever event happens first.

After the end of the Premium Waiver Period, premium payment for the covered benefits will resume.



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List of Pre-critical medical conditions* are covered

	Critical Illness	Pre-Critical Medical Condition
1	Alzheimer's Disease / Severe Dementia	Moderately severe Alzheimer's Disease or Dementia
2	Benign Brain Tumour	<ul style="list-style-type: none"> • Surgical removal of pituitary tumour or Surgery for subdural haematoma • Surgical Removal of Pituitary Tumour (by Open Craniotomy)
3	Blindness (Irreversible Loss of Sight)	<ul style="list-style-type: none"> • Loss of sight in one eye • Optic Nerve Atrophy with low vision
4	Coma	<ul style="list-style-type: none"> • Coma for 48 hours • Severe Epilepsy
5	Coronary Artery By-pass Surgery	<ul style="list-style-type: none"> • Transmyocardial Laser Revascularisation or Enhanced External Counterpulsation Device Insertion • Port Access or Key hole Cardiac Surgery
6	Deafness (Irreversible Loss of Hearing)	<ul style="list-style-type: none"> • Partial loss of hearing or Cavernous sinus thrombosis surgery • Cochlear implant surgery
7	End Stage Kidney Failure	<ul style="list-style-type: none"> • Surgical removal of one kidney • Chronic Kidney Disease
8	End Stage Liver Failure	<ul style="list-style-type: none"> • Liver surgery • Liver Cirrhosis
9	End Stage Lung Disease	<ul style="list-style-type: none"> • Severe Asthma or Insertion of a Veno-cava filter • Surgical removal of one lung
10	Fulminant Hepatitis	<ul style="list-style-type: none"> • Biliary Tract Reconstruction Surgery • Chronic Primary Sclerosing Cholangitis
11	Heart Attack of Specified Severity	<ul style="list-style-type: none"> • Cardiac pacemaker insertion or Pericardectomy • Cardiac defibrillator insertion or Early Cardiomyopathy
12	HIV Due to Blood Transfusion and Occupationally Acquired HIV	<ul style="list-style-type: none"> • HIV due to <ul style="list-style-type: none"> ◦ Assault, ◦ Organ Transplant • Occupationally Acquired HIV
13	Idiopathic Parkinson's Disease	<ul style="list-style-type: none"> • Early and Moderately severe Parkinson's Disease
14	Irreversible Aplastic Anaemia	<ul style="list-style-type: none"> • Reversible Aplastic Anaemia • Myelodysplastic Syndrome or Myelofibrosis
15	Irreversible Loss of Speech	<ul style="list-style-type: none"> • Loss of Speech due Permanent or Temporary Tracheostomy • Loss of Speech due to Vocal Cord Paralysis
16	Loss of Independent Existence	<ul style="list-style-type: none"> • Loss of Independent Existence (Early Stage) • Loss of Independent Existence (Intermediate Stage)
17	Major Burns	<ul style="list-style-type: none"> • Mild Severe Burns • Moderately severe burns
18	Major Cancer	<ul style="list-style-type: none"> • Carcinoma in situ of specified organs • Carcinoma in situ of specified organs treated with Radical Surgery • Early Prostate Cancer • Early Thyroid Cancer • Early Bladder Cancer • Early Chronic Lymphocytic Leukaemia • Early Melanoma • Gastro-intestinal Stromal Tumour (GIST)
19	Major Head Trauma	<ul style="list-style-type: none"> • Facial reconstructive surgery • Intermediate Stage Major Head Trauma
20	Major Organ / Bone Marrow Transplantation	<ul style="list-style-type: none"> • Small bowel transplant; or Corneal transplant • Major Organ/Bone Marrow Transplant (on waitlist)
21	Motor Neurone Disease	<ul style="list-style-type: none"> • Early Motor Neurone Disease



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	Critical Illness	Pre-Critical Medical Condition
22	Multiple Sclerosis	<ul style="list-style-type: none"> • Early Multiple Sclerosis • Mild Multiple Sclerosis
23	Muscular Dystrophy	<ul style="list-style-type: none"> • Moderately severe Muscular Dystrophy or • Spinal-cord disease or injury resulting in Bowel and Bladder Dysfunction
24	Open Chest Heart Valve Surgery	<ul style="list-style-type: none"> • Percutaneous Valve Surgery • Percutaneous Valve Replacement or Device Repair
25	Open Surgery to the Aorta	<ul style="list-style-type: none"> • Minimally invasive surgery to Aorta or • Large asymptomatic aortic aneurysm
26	Other Serious Coronary Artery Disease	<ul style="list-style-type: none"> • Early Stage and Intermediate stage other serious Coronary Artery Disease
27	Paralysis (Irreversible Loss of Use of Limbs)	<ul style="list-style-type: none"> • Loss of Use of One Limb • Loss of Use of One Limb requiring Prosthesis
28	Persistent Vegetative State (Apallic Syndrome)	<ul style="list-style-type: none"> • Akinetic Mutism • Locked in syndrome
29	Poliomyelitis	<ul style="list-style-type: none"> • Peripheral Neuropathy • Poliomyelitis (Intermediate Stage)
30	Primary Pulmonary Hypertension	<ul style="list-style-type: none"> • Early Pulmonary Hypertension • Secondary Pulmonary Hypertension
31	Progressive Scleroderma	<ul style="list-style-type: none"> • Early Progressive Scleroderma • Progressive Scleroderma with CREST syndrome
32	Severe Bacterial Meningitis	<ul style="list-style-type: none"> • Bacterial Meningitis with <ul style="list-style-type: none"> ◦ full recovery ◦ Reversible Neurological Deficit
33	Severe Encephalitis	<ul style="list-style-type: none"> • Viral Encephalitis with full recovery • Moderate Viral Encephalitis with Full Recovery
34	Stroke with Permanent Neurological Deficit	<ul style="list-style-type: none"> • Brain aneurysm surgery or Cerebral shunt insertion <ul style="list-style-type: none"> ◦ Carotid artery surgery
35	Systemic Lupus Erythematosus with Lupus Nephritis	<ul style="list-style-type: none"> • Mild Systemic Lupus Erythematosus • Erythematosus • Moderately Severe Systemic Lupus Erythematosus (S.L.E) with Lupus Nephritis (Early Stage)

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These medical conditions do not fall under Version 2019. For medical conditions that do not fall under Version 2019, the definitions are determined by the insurance company. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**

You can find the definitions of these pre-critical medical conditions in the policy document.

The medical conditions must be diagnosed by a registered medical practitioner.

A "Registered Medical Practitioner" is any person properly qualified by degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.

Exclusions:

We do not waive premiums in any of the following circumstances:

- the critical illness existed before the cover start date or date of reinstatement (if any) of this benefit;
- any benefit for any covered illness that is due directly or indirectly to a pre-existing condition unless it was declared in the proposal and specifically accepted by us;



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- the life assured is diagnosed as having a heart attack of specified severity or major cancer (including carcinoma in situ) or other serious coronary artery disease at all severity levels within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- a doctor has diagnosed coronary artery disease within 90 days of the cover start date or date of reinstatement (if any) of this benefit. This diagnosis of the coronary artery disease has led to the carrying out of a coronary artery by-pass surgery at all severity levels, or angioplasty and other invasive treatment for coronary artery on the life assured;
- the life assured is diagnosed before age 6 as having a covered illness caused by a congenital or inherited disorder;
- if the life assured is diagnosed before age 2 as having deafness and all claims at all severity levels for deafness (irreversible loss of hearing) is not payable.
- the life assured is diagnosed as having a claim for diabetic complications within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- *the life assured is diagnosed as having an covered illness caused by:*
 - self-inflicted injuries while sane or insane;
 - AIDS, AIDS-related complex or infection by HIV except as otherwise defined;
 - the use of unprescribed drugs where such drugs are required by law to be prescribed by a registered medical practitioner;
 - an activity under special exclusion and special terms and conditions shown on your certificate of life assurance;
 - participation or attempted participation in an unlawful act; or
 - alcohol or drug abuse.



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4. POLICY LIMITS

4.1 Age at Entry

Age at Entry	Min ANB	Max ANB
Critical Illness Benefit	1	65
Protect Plus	1	65
Early Protect		
Early Protect Plus		
Severe Infections Protect		
Monthly Benefit		
Crisis Waiver III	1	65
Early Crisis Waiver	1	65
Life Protect Plus	18	65

4.2 Age at Expiry

Maximum Age at Expiry	Max ANB
Critical Illness Benefit	100
Crisis Care Accelerator Benefit	
Death Benefit	
Additional Benefit	
Protect Plus	100
Early Protect	
Early Protect Plus	
Severe Infections Protect	
Monthly Benefit*	
Life Protect Plus	
Crisis Waiver III	75
Early Crisis Waiver	

*Once the stream of monthly income has started to be paid out, it will continue to pay for the selected no of years even if the policy has been terminated due to policy expiry.



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4.2.1 Age at Expiry for Special Benefits

Special Medical Conditions		Max age of expiry
1	Diabetic Complications	85ANB
2	Osteoporosis with Fractures	
3	Severe Rheumatoid Arthritis	
4	Glomerulonephritis with Nephrotic Syndrome	1ANB - 18ANB
5	Haemophilia A and Haemophilia B	
6	Insulin Dependent Diabetes Mellitus	
7	Kawasaki Disease with heart complications	
8	Osteogenesis Imperfecta	
9	Rheumatic Fever with valvular impairment	
10	Still's Disease	
11	Wilson's Disease	
12	Hand Foot Mouth Disease with serious complications	

4.3 Age at claim for child cover and spouse waiver benefits

Age at claim	Min ANB	Max ANB
Child Cover Benefit	1anb	18anb
Spouse Waiver Benefit	1anb	100anb

4.4 Policy Term

Policy Term = Premium Term

Policy Term/Premium Term	Min	Max
	(no of years)	(no of years)
Critical Illness Benefit	10	99
Protect Plus	Follows PRUActive Protect	
Early Protect		
Early Protect Plus		
Severe Infections Protect		
Monthly Benefit		
Life Protect Plus*	10	82

*Life Protect Plus policy term follows that of PRUActive Protect and is subject to the max term of 82 as min entry age for Life Protect Plus is 18anb.



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4.5 Premium Term

Premium Term = Policy Term

4.6 Size of Policy

Adults Limits		Critical Illness (Base plan)	Early Protect	Life Protect Plus	Severe Infections Protect	Monthly Benefit	Protect Plus	Early Protect Plus
Size of Policy		Min/Max Sum Assured (SA)				Min/Max Monthly Payout	Min/Max Claimable Amt	
17 – 65 anb	Min	\$10,000	\$10,000	\$5,000	\$10,000	\$100	\$10,000	\$10,000
	Max	\$3.6m	\$350k	No Max SA for Life Protect Plus, BUT SA must be equal or lower than that of CI SA	\$100,000 AND SA must be equal or lower than that of CI SA	\$5,000	\$720k x 5 = \$3.6m	\$200k x 5 = \$1m

Juvenile and non-income earners Limits		Critical Illness (Base plan)	Early Protect	Life Protect Plus (LPP)	Severe Infections Protect (SIP)	Monthly Benefit (MB)	Protect Plus (PP)	Early Protect Plus (EPP)
Size of Policy		Min/Max Sum Assured (SA)				Min/Max Monthly Income Payout (MIP)	Min/Max Claimable Amt	
1 – 16 anb	Min	\$10,000	\$10,000	\$5,000	\$10,000	\$100	\$10,000	\$10,000
	Max	\$1m	\$350k	No Max SA for Life Protect Plus, BUT SA must be equal or lower than that of CI SA *The min/max SA for LPP here is only valid for non-income earners. It does not apply to juveniles as Min entry age for LPP is 18anb	\$100,000 AND SA must be equal or lower than that of CI SA	\$5,000	\$200k x 5 = \$1m	\$200k x 5 = \$1m



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4.7 Aggregation Rules

Max sum assured that customers can buy for PRUActive Protect are as follows:

When Protect Plus is not attached:

Up to \$3.6m per life assured

When Protect Plus is attached:

Up to \$720K per life assured

Monthly benefit, Crisis Waiver III and other existing CC benefits customer has with prudential will add to the above limit mentioned.

Max early/intermediate/pre-critical stage CI sum assured that customers can buy for Early Protect are as follows:

When Early Protect Plus is not attached:

- Up to \$350k per life assured

When Early Protect Plus is attached:

- Up to \$200k per life assured

All other existing early/intermediate/pre-critical stage CC benefits customer has with prudential will add to the above limit mentioned.

Pls refer to the FAQ for more information and examples

5.1 Mode of payment

Annual, half-yearly, quarterly and monthly

5.2 Method of payment

Available via cash, cheque, GIRO and credit card.

Payment by all credit cards (VISA or MASTERCARD only) is allowed for first and subsequent renewal premiums.

For payment via GIRO, the first 2 monthly premiums must be made via cash, cheque or credit card.

6. POLICY VALUES

6.1 Surrender Values

N/A

6.2 Policy Loan

N/A



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6.3 Bonus Surrender

N/A

6.4 Surgical & Nursing Loan

N/A

7. POLICY CONDITIONS

7.1 Free Look Provision

We give the customer a period of 14 days after the date of receiving the policy to review its terms and conditions.

If the customer decides this policy is not suitable for your needs, simply write to us within the 14-day review period. We will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make the policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when the customer receive the relevant SMS or email telling the customer that the documents are accessible on PRUaccess.

Otherwise, we consider the policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address the customer gave us.

7.2 Grace Period for Renewal Premium

The policyowner has up to 30 days grace period for premium payment. The policy will lapse if premium is not received.

7.3 Non-guaranteed Premium

The premium rate for PRUActive Protect is not guaranteed and the company reserves the right to vary the premium rates at any time by giving 30 days' notice to the policyholder before doing so.

The premium rates for Protect Plus, Early Protect, Early Protect Plus, Severe Infections Protect and Monthly Benefit are also not guaranteed.

However, the premium rates for Life Protect Plus is guaranteed.

7.4 Policy Alteration

For any alteration, Policyowners would need to give 7 days written notification to the Company.



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This alteration can only be effective on the next Premium Due Date

Sum Assured

Policyowner can reduce the sum assured if there have been no successful claims (excluding additional benefit, special benefit, Spouse Waiver and Child Cover claims) on the policy.

Minimum reduction in sum assured is in multiples of \$500.

Increase in sum assured is not allowed.

Mode of Payment

Life assured can also change the Mode of Payment.

The change of premium payment frequency will only be effected on the next Premium Due Date i.e. if it is on monthly mode, the change will be effective from the following month.

If it is on yearly mode, the change will be effective the next Premium Due Date (1 year from last Premium Due Date).

7.5 Changes to Policy Benefit and Conditions

The Company reserves the right to terminate or vary the policy benefits, conditions or plan at any time if any material fact affecting the risk is incorrectly stated or represented to us or is omitted from any of the documents submitted to us.

7.6 Alter from Inception

The policyholder can change the billing frequency after the new proposal is issued without having to freelook the policy.

7.7 Mid-term Addition

MTA of supplementary benefits is allowed before the expiry of the PRUActive Protect policy provided that the remaining premium/policy term must be at least 10 years.

MTA of Monthly Benefit is not allowed when there is a successful claim on the policy (excluding Additional Benefit, Special Benefit, Spouse Waiver and Child Cover claims).

MTA of Protect Plus is allowed provided the sum assured for the PRUActive Protect is 720k and below.

If PRUActive Protect SA is >720k, client will need to reduce the SA of PRUActive Protect before MTA of Protect Plus is allowed.

MTA of Early Protect Plus is allowed provided the sum assured for the Early Protect is \$200K and below.



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If Early Protect SA is > \$200K, client will need to reduce the SA of Early Protect before MTA of Early Protect Plus is allowed

7.8 Conversion of smoker status

We allow the review of smoker status after the policy has been incepted.

7.9 Review of loading when health improves

We allow review of health loading after the policy has been incepted.

7.10 Cancellation of Supplementary Benefits

Yes, cancellation of supplementary benefits is allowed provided that there were no successful claims on the policy.

7.11 Governing Law

This plan is governed by and interpreted according to the laws of the Republic of Singapore.

7.12 Notice of Claim

For Death Claim, the beneficiary or legal representative must send us:

- A completed claim form
- Current Certificate of Life Assurance
- Clinical Abstract Application Form
- Medical report at his/her own expense
- Death certificate issued by relevant Authority
- Identification documents of Claimant
- Proof of relationship
- Evidence that the person is entitled to receive the payment (e.g. Deceased's Last WILL, Letter of Administration or Probate, Trust Deed, Assignment Deed etc.)
- Any documentary proof so required by us

In addition to the above documents,

- if death is due to unnatural causes (e.g. Accident, suicide, etc), the following documents are required:
 - the Post mortem report;
 - the Coroner's verdict; and
 - a Police report.
- If death occurs outside of Singapore, the following documents must also be submitted:
 - o the Death Abroad Questionnaire;
 - o the Declaration of Identity of the deceased;
 - o an official document from the relevant authority proving the death of the life assured.

We reserve the right to ask the life assured or life assured's legal representative to provide, at his/her own expense, more documents or evidence to help in the assessment of the claim.

For Critical Illness or Pre-Critical Medical Conditions Claim, the policyholder or claimant must send us as soon as practicable, at your own expense:



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- a completed Crisis Cover claim form;
- your current Certificate of Life Assurance;
- a medical report including clinical, radiological, imaging evidence, laboratory and histological evidence from the life assured's Registered Medical Practitioner;
- any documentary proof as required by us; and
- a completed Clinical Abstract Application Form

We reserve the right to ask the life assured or life assured's legal representative to provide, at his/ her own expense, more documents or evidence to help in the assessment of the claim.

All the requirements must be provided within 6 months from the date of diagnosis or else the claim will not be considered.

We reserve the right to appoint a Registered Medical Practitioner to re-examine the life assured.

"Registered Medical Practitioner" is any person properly qualified by degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyholder, the life assured or a family member of either.

We reserve the right to request for a medical examination to be performed by a registered medical practitioner if the medical report(s) you provided to us is, in our sole and absolute discretion, deemed to be insufficient for our purposes.

7.13 FATCA

PRUActive Protect is out of scope of FATCA.

7.14 Taxes

7.14.1 Goods and Services Tax

As this product is a Life insurance contract, no GST is chargeable.

7.14.2 Withholding Tax

Income, including interest income, from Life insurance policies paid to non-residents is exempt from withholding tax.

However, interest payments on death claims (if applicable) to non-residents is subject to withholding tax. Withholding tax is at 22% (based on the prevailing highest individual tax rate) on such payment of interest on death claims to non-residents.

The filing and payment of withholding tax must be made to IRAS by the 15th of the second month from the date with the withholding tax form to be filed electronically via myTax Portal and withholding tax payment to IRAS.

Please note that the withholding tax rate may change from year to year.

SRS account cannot be used for this product. Hence, withholding tax implication which applies to products purchased using SRS is not relevant for this case.



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7.15 Termination

The benefits under your policy will end:

- when the life assured dies;
- if you surrender the policy;
- if you fail to pay the premiums within 30 days of the date they are due; or
- on the cover end date of the policy as shown on your certificate of life assurance, whichever event occurs first.

8. EXCLUSIONS

8.1 Critical Illness, Protect Plus, Early Protect, Early Protect Plus and Special benefits

We do not pay the benefit or waive premiums (whichever applies) in any of the following circumstances:

- the covered illness existed before the cover start date or date of reinstatement (if any) of this benefit;
- any benefit for any covered illness that is due directly or indirectly to a pre-existing condition unless it was declared in the proposal and specifically accepted by us.
- the life assured is diagnosed as having a heart attack of specified severity or major cancer (including carcinoma in situ) or other serious coronary artery disease at all severity levels within 90 days of the cover start date or date of reinstatement (if any) of the benefit;
- If a doctor has diagnosed coronary artery disease within 90 days of the cover start date or date of reinstatement (if any) of this benefit. The diagnosis of the coronary artery disease has led to carrying out a coronary artery by-pass surgery at all severity levels or angioplasty and other invasive treatment for coronary artery on the life assured.
- the life assured is diagnosed as having a claim for diabetic complications within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- the life assured is diagnosed as having a covered illness caused by:
 - self-inflicted injuries while sane or insane;
 - AIDS, AIDS-related complex or infection by HIV except as defined
 - using unprescribed drugs if the drugs are required by law to be prescribed by a registered medical practitioner;
 - an activity under special exclusion and special terms and conditions shown in your certificate of life assurance;
 - taking part or attempting to take part in an unlawful act; or
 - alcohol or drug abuse.

8.2 Death Benefit

If the life assured dies directly or indirectly from an activity under special exclusion or special terms and conditions shown in your certificate of life assurance, we do not pay the death benefit but we will refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) and any claim we have had to pay for your policy.

If the life assured dies from suicide within 12 months from the cover start date or date of reinstatement (if any) of your policy, we will make your policy void. In this case, we cancel



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it and refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) and any claim we have had to pay for your policy.

The policy automatically terminates once we have paid a claim for this benefit.

8.3 Crisis Care Accelerator Benefit

We do not pay the Crisis Care Accelerator Benefit in any of the following circumstances:

- If the surgery is due to organ donation.
- If any critical illness is due directly or indirectly to a pre-existing condition.
- If the treatment is for investigation or research (for example, experimental or new physiotherapy, medical techniques or surgical techniques, medical devices not approved by the Institutional Review Board and the Health Sciences Authority, and medical trials for medicinal products, whether or not these trials have a clinical trial certificate issued by the Health Sciences Authority or similar bodies);
- If the treatment is for preventive purposes or for health screening or promoting good health (such as dietary replacement or supplement).
- If the treatment is for the convenience of the insured or registered medical practitioner or specialist (for example, treatment that can reasonably be provided out of a hospital, but is provided as an inpatient treatment)
- If the life assured suffered symptoms of or had investigations for or was diagnosed with a critical illness any time before or within 90 days from the cover start date.
- If the critical illness is due to deliberate acts such as self-inflicted injuries, illnesses or attempted suicide;
- If the treatment is for improving appearance, such as cosmetic surgery or any treatment relating to a previous cosmetic treatment;
- If it is for overseas medical treatment;
- If the treatment is for pregnancy, childbirth, miscarriage, abortion or termination of pregnancy, or any form of related stay in hospital or treatment;
- If treatment is for infertility, sub-fertility, assisted conception, erectile dysfunction, impotence or any contraceptive treatment;
- If treatment is for psychological disorders, personality disorders, mental conditions or behavioural disorders, including any addiction or dependence as a result of these disorders such as gambling or gaming addiction;
- If treatment is due to unlawful acts, provoked assault or deliberate exposure to danger;
- If the treatment is for sexually-transmitted diseases;
- If the life assured undergoes sex-change operations;
- If treatment is experimental or pioneering medical or surgical techniques and medical devices not approved by the Institutional Review Board and the Centre of Medical Device Regulation and medical trials for medicinal products whether or not these trials have a clinical trial certificate issued by the Health Sciences Authority of Singapore;
- If the life assured undergoes alternative or complementary treatments, including traditional Chinese medicine (TCM) or stays in any health-care establishment for social or non-medical reasons;
- If treatment is for injuries due to being directly involved in civil commotion, riot or strike;



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- If the critical illness is due to radiation or contamination from radioactivity;
- If the critical illness is due to warlike operations (whether war is declared or not), war, invasion, riot or any similar event
- If the critical illness is due to the deliberate misuse of drugs or alcohol;
- If the critical illness is caused by acquired immunodeficiency syndrome (AIDS), AIDS-related complex or infection by human immunodeficiency virus (HIV), except as stated under HIV due to blood transfusion and occupationally acquired HIV

8.4 Additional Benefit

Angioplasty and other invasive treatment for coronary artery involves having a balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of at least 60% stenosis of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist.

Coronary arteries refer to the left main stem, left anterior descending, circumflex and right coronary artery.

Diagnostic angiography is excluded.

The Additional Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

8.5 Child Cover Benefit

We do not pay the Child Cover benefit in any of the following circumstances:

- If the child is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- If the child is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- If the child is diagnosed as having a critical illness
 - o within 12 months from the most recent cover start date or date of reinstatement (if any)
 - o before the child is 30 days old,
 - o and dies within 14 days from the date of diagnosis,
 - o when the child is 18 years old and above
- If the child is diagnosed as having a covered illness caused by:
 - o Acquired Immune Deficiency Syndrome (AIDS), AIDS-related complex or infection by Human Immunodeficiency Virus (HIV), except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o self-inflicted injuries while sane or insane;
 - o alcohol or drug abuse.
 - o taking part or attempting to take part in an unlawful act;

The cover start date above refers to the cover start date of the parent's policy. We will base on the most recent cover start date if the dates are different. If either one or both parents' policy have been reinstated, we will base on the most recent reinstatement date.



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8.6 Spouse Waiver Benefit

We do not waive premiums under the Spouse Waiver benefit in any of the following circumstances, if the spouse:

- is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- is diagnosed with a Heart Attack of Specified Severity, Major Cancer, Other Serious Coronary Artery Disease or requiring Coronary Artery By-pass Surgery within 90 days from the cover start date or date of reinstatement (if any);
- is diagnosed with Angioplasty and Other Invasive Treatment for Coronary Artery;
- dies within 30 days from the date of diagnosis
- is diagnosed as having a covered illness caused by:
 - o self-inflicted injuries while sane or insane;
 - o AIDS, AIDS-related complex or infection by HIV except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o using unprescribed drugs if the drugs are required by law to be prescribed by a registered medical practitioner;
 - o taking part or attempting to take part in an unlawful act; or
 - o alcohol or drug abuse.

8.7 Crisis Waiver III on PRUActive Protect Benefit

We do not waive premiums in any of the following circumstances:

- the Critical Illness existed before the Cover Start Date or date of reinstatement (if any) of this benefit;
- any benefit for any Critical Illness that is due directly or indirectly to a Pre-existing Condition unless it was declared in the proposal and specifically accepted by us. A **"Pre-existing Condition"** is the existence of any signs or symptoms for which treatment, medication, consultation, advice or diagnosis has been sought or received by the life assured or would have caused an ordinary sensible person to seek treatment, diagnosis or cure, prior to the Cover Start Date or the date of reinstatement (if any) of this benefit;
- the life assured is diagnosed as having a Heart Attack of a Specified Severity, Major Cancer or Other Serious Coronary Artery Disease within 90 days of the Cover Start Date or the date of reinstatement (if any) of this benefit;
- a doctor has diagnosed coronary artery disease within 90 days of the Cover Start Date or the date of reinstatement (if any) of this benefit. This diagnosis has led to the performance of a Coronary Artery By-pass Surgery on the life assured;
- the life assured is diagnosed before age 6 as having a covered illness caused by a congenital or inherited disorder;
- the life assured is diagnosed before age 2 as having deafness
- the life assured needs angioplasty and other invasive treatment for coronary artery.
- the life assured is diagnosed as having a Critical Illness caused by:
 - self-inflicted injuries while sane or insane;
 - Acquired Immunodeficiency Syndrome ("**AIDS**"), AIDS related complex or infection by Human Immunodeficiency Virus ("**HIV**") except HIV Due to Blood Transfusion and Occupationally Acquired HIV;



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- the use of unprescribed drugs where such drugs are required by law to be prescribed by a Registered Medical Practitioner;
- an activity under Special Exclusion and/or Special Terms and Conditions shown on the Certificate of Life Assurance; or
- participation or attempted participation in an unlawful act.

8.8 Early Crisis Waiver on PRUActive Protect Benefit

We do not waive premiums in any of the following circumstances:

- the critical illness existed before the cover start date or date of reinstatement (if any) of this benefit;
- any benefit for any covered illness that is due directly or indirectly to a pre-existing condition unless it was declared in the proposal and specifically accepted by us;
- the life assured is diagnosed as having a heart attack of specified severity or major cancer (including carcinoma in situ) or other serious coronary artery disease at all severity levels within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- a doctor has diagnosed coronary artery disease within 90 days of the cover start date or date of reinstatement (if any) of this benefit. This diagnosis of the coronary artery disease has led to the carrying out of a coronary artery by-pass surgery at all severity levels, or angioplasty and other invasive treatment for coronary artery on the life assured;
- the life assured is diagnosed before age 6 as having a covered illness caused by a congenital or inherited disorder;
- if the life assured is diagnosed before age 2 as having deafness and all claims at all severity levels for deafness (irreversible loss of hearing) is not payable.
- the life assured is diagnosed as having a claim for diabetic complications within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- *the life assured is diagnosed as having an covered illness caused by:*
 - self-inflicted injuries while sane or insane;
 - AIDS, AIDS-related complex or infection by HIV except as otherwise defined;
 - the use of unprescribed drugs where such drugs are required by law to be prescribed by a registered medical practitioner;
 - an activity under special exclusion and special terms and conditions shown on your certificate of life assurance;
 - participation or attempted participation in an unlawful act; or
 - alcohol or drug abuse.

9. UNDERWRITING GUIDELINES

9.1 Medical Underwriting

Full underwriting (Medical and Financial) is applicable.

9.2 Financial Underwriting

Full underwriting (Medical and Financial) is applicable.

9.3 Aggregation Rules

Aggregation rules apply. Refer to section 4.7.



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9.4 Restriction on Nationality

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with **valid** passes residing in Singapore

9.5 Convertibility / Buy another policy

Convertibility option available. Refer to Section 2.6.

9.6 Backdating

Backdating is allowed up a maximum of 6 months.

Example 1:

PRUActive Protect Launch: 8 Sept 2020

Backdating is allowed up a maximum of 6 mths: 8 Mar 2020

However if the customer's birthday is on 20 Mar 2020, he can only backdate to 20 Mar 2020 but 8 Mar 2020.

Example 2:

Customer wish to purchase PRUActive Protect on 14 Jan 2021, can he backdate the policy to 15 Dec 2020?

Yes, he can backdate to 15 Dec 2020 as it is within 6 months.



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10. PREMIUM

10.1 Premium Rates

Premiums are level and are dependent on age of entry, gender, smoker status and policy term.

The premiums for PRUActive Protect, Protect Plus, Early Protect, Early Protect Plus, Severe Infections Protect and Monthly benefit are not guaranteed.

We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

The premium for Life Protect Plus is guaranteed during the premium payment period.

10.2 Large Sum Discount

PRUActive Protect (only for basic plan, not applicable to riders)

Increase/Decrease from basic premium as % of Annual Premium	
Sum assured	% of Annual Premium
<= \$99,999	20.00%
\$100,000 - \$499,999	0.00%
>= \$500,000	-10.00%

Life Protect Plus

Increase/Decrease from basic premium as % of Annual Premium			
Sum assured	Expiry Age		
	≤ 65 anb	66 - 75 anb	76 - 100 anb
<= \$499,999	25.00%	25.00%	25.00%
\$500,000 - \$749,999	0.00%	0.00%	0.00%
\$750,000 - \$999,999	-10.00%	-7.50%	-5.00%
\$1,000,000 - \$1,999,999	-20.00%	-15.00%	-10.00%
>=\$2,000,000	-23.00%	-17.00%	-11.00%



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10.3 Frequency Factors

The rates published are annual rates. The frequency factors used for conversion into other modes of payment are:

Premium payable	Yearly	Half-yearly	Quarterly	Monthly
Frequency factor	1	0.505	0.255	0.085

10.4 PruSmart Lady / PruLady / PruMan / PruTerm Plus Advantage Discount

Program	Discount
PruSmart Lady	15%
PruLady	15%
PruMan	15%
PruTermPlus Advantage	10%

10.5 Policy Fees

There are no policy fees



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11. Claims scenarios

Example 1

Basic Critical Illness Benefit (CI) SA = 200K with Protect Plus Early Protect (ECI) SA = 100K Total CI SA = 200K x 5 = 1m					
Scenario 1	Scenario 2	Scenario 3	Scenario 4	Scenario 5	Scenario 6
1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$200K <u>Upon successful claim payout.</u> Total remaining CI SA = 1m - 200k = 800k <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$200K <u>Upon successful claim payout.</u> Total remaining CI SA = 1m - 200k = 800k <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$200K <u>Upon successful claim payout.</u> Total remaining CI SA = 1m - 200k = 800k <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim , we pay 100% of ECI SA = \$100K 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout.</u> Total remaining CI SA = 1m - 100k = 900k <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim , we pay 100% of ECI SA = \$100K 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout.</u> Total remaining CI SA = 1m - 100k = 900k <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Crisis Care Accelerator (CCAB) claim Upon CCAB claim we pay 50% of CI SA OR 100k, whichever is lower = 100k Only 1 CCAB claim is payable per policy. CCAB benefit terminates <u>Upon successful claim payout.</u> Total remaining CI SA = 1m - 100k = 900k <i>No change to basic CI SA and premium</i>
100% CI/ECI SA has been restored					
2nd Claim: Policy Month 30 CI claim (same condition)	2nd Claim: Policy Month 30 CI claim (same condition)	2nd Claim: Policy Month 30 Pre-Critical Stage Claim	2nd Claim: Policy Month 16 CI claim (different condition)	2nd Claim: Policy Month 30 CI claim (same condition)	2nd Claim: Policy Month 16 Pre-Critical Stage Claim
100% CI/ECI SA has been restored					
Upon CI claim , we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u>	Upon CI claim , we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u>	Upon ECI claim , we pay 100% of ECI SA = 100k 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout.</u>	Upon CI claim , we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u>	Upon CI claim , we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u>	Upon ECI claim , we pay 100% of ECI SA = 100k 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout.</u>



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Total remaining CI SA = 800k - 200k = 600k <i>No change to basic CI SA and premium</i>	Total remaining CI SA = 800k - 200k = 600k <i>No change to basic CI SA and premium</i>	Total remaining CI SA = 800k - 100k = 700k <i>No change to basic CI SA and premium</i>	Total remaining CI SA = 900k - 200k = 700k <i>No change to basic CI SA and premium</i>	Total remaining CI SA = 900k - 200k = 700k <i>No change to basic CI SA and premium</i>	Total remaining CI SA = 900k - 100k = 800k <i>No change to basic CI SA and premium</i>
3rd Claim: Policy Month 43 CI claim (different condition)	3rd Claim: Policy Month 43 Pre-Critical Stage Claim (different condition)	3rd Claim: Policy Month 43 CI claim (different condition)	3rd Claim: Policy Month 19 CI claim (different condition)	3rd Claim: Policy Month 43 CCAB claim	3rd Claim: Policy Month 43 CI claim (different condition)
Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 200k = 400k <i>No change to basic CI SA and premium</i>	Upon ECI claim , we pay 100% of ECI SA = 100k 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 100k = 500k <i>No change to basic CI SA and premium</i>	100% CI/ECI SA has been restored Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 700k - 200k = 500k CI Benefit remains <i>No change to basic CI SA and premium</i>		Upon CCAB claim we pay 50% of CI SA OR 100k, whichever is lower = 100k <u>Upon successful claim payout.</u> Total remaining CI SA = 700k - 100k = 600k CI Benefit remains <i>No change to basic CI SA and premium</i>	Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 800k - 200k = 600k CI Benefit remains <i>No change to basic CI SA and premium</i>
4th Claim: Policy Month 70 CI claim (same condition) 100% CI SA has been restored Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 400k - 200k = 200k	4th Claim: Policy Month 70 CI claim (same condition) 100% CI SA has been restored Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 500k - 200k = 300k		4th Claim: Policy Month 42 CI claim (different condition) 100% CI SA has been restored Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 700k - 200k = 500k CI Benefit remains <i>No change to basic CI SA and premium</i>	4th Claim: Policy Month 56 CI claim (different condition) 100% CI SA has been restored Upon CI claim we pay 100% of CI SA = 200k <u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 200k = 400k CI Benefit remains <i>No change to basic CI SA and premium</i>	



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**5th Claim: Policy
Month 100**

**CI claim (same
condition)**

100% CI SA has
been restored

Upon **CI claim** we
pay

100% of CI SA
= 200k

**Upon successful
claim payout.**

Total remaining CI
SA = 300k - 200k
= 100k

**6th Claim: Policy
Month 150**

**CI claim (same
condition)**

100% CI SA has
been restored

Upon **CI claim** we
pay

(100% CI SA OR
Remaining CI SA);
whichever is lower
= min (200k, 100k)
= 100k

**Upon successful
claim payout.**

Total remaining CI
SA = 100k - 100k
= 0

**CI Benefit
terminates.**



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Example 2

<p style="text-align: center;"> Example 2 Basic Critical Illness Benefit (CI) SA = 350k with Protect Plus Early Protect (ECI) SA = 350K Total CI SA = 350k x 5 = 1.75m </p>					
Scenario 1	Scenario 2	Scenario 3	Scenario 4	Scenario 5	Scenario 6
1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$350k <u>Upon successful claim payout,</u> Total remaining CI SA = 1.75m - 350k = 1.4m <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$350k <u>Upon successful claim payout,</u> Total remaining CI SA = 1.75m - 350k = 1.4m <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$350k <u>Upon successful claim payout,</u> Total remaining CI SA = 1.75m - 350k = 1.4m <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim, we pay 100% of ECI SA = \$350k 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout,</u> Total remaining CI SA = 1.75m - 350k = 1.4m <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim, we pay 100% of ECI SA = \$350k 100% of ECI SA is paid out ECI terminates <u>Upon successful claim payout,</u> Total remaining CI SA = 1.75m - 350k = 1.4m <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Crisis Care Accelerator (CCAB) claim Upon CCAB claim we pay 50% of CI SA OR 100k, whichever is lower = 100k Only 1 CCAB claim is payable per policy. CCAB benefit terminates <u>Upon successful claim payout,</u> Total remaining CI SA = 1.75m - 100k = 1.65m <i>No change to basic CI SA and premium</i>
100% CI/ECI SA has been restored					
2nd Claim: Policy Month 30 CI claim (same condition) Upon CI claim, we pay 100% of CI SA = 350k	2nd Claim: Policy Month 30 CI claim (same condition) Upon CI claim, we pay 100% of CI SA = 350k	2nd Claim: Policy Month 30 Pre-Critical Stage Claim Upon ECI claim, we pay 100% of ECI SA = 350k	2nd Claim: Policy Month 16 CI claim (different condition) Upon CI claim, we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (350k, 1.4m) = 350k	2nd Claim: Policy Month 30 CI claim (same condition) Upon CI claim, we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (350k, 1.4m) = 350k	2nd Claim: Policy Month 16 Pre-Critical Stage Claim Upon ECI claim, we pay 100% of ECI SA = 350k
100% CI/ECI SA has been restored					



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<p>Total remaining CI SA = 700k - 350k = 350k</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 700k - 350k = 350k</p> <p>5th Claim: Policy Month 100</p> <p>CI claim (same condition)</p> <p>100% CI SA has been restored</p> <p>Upon CI claim we pay</p> <p>100% of CI SA = 350k</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 350k - 350k</p>			<p>= 350k</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 1.05m - 350k = 700k</p> <p><i>No change to basic CI SA and premium</i></p>	<p>= 350k</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 950k - 350k = 600k</p> <p><i>No change to basic CI SA and Premium</i></p> <p>5th Claim: Policy Month 100</p> <p>CI claim (same condition)</p> <p>100% CI SA has been restored</p> <p>Upon CI claim we pay</p> <p>100% of CI SA = 350k</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 600k - 350k = 250k</p> <p>6th Claim: Policy Month 170</p> <p>CI claim (same condition)</p> <p>Only 250k CI SA has been restored as remaining CI SA is less than 100% of CI SA</p> <p>Upon CI claim we pay</p> <p>(100% CI SA OR Remaining CI SA); whichever is lower</p> <p>= min (350k, 250k) = 250K</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 250k - 250k = 0</p> <p>CI Benefit terminates.</p>
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Example 3

<p align="center">Example 3 Basic (100%) Critical Illness (CI) SA = 200K with Protect Plus and Early Protect Plus Basic (100%) Early Protect (ECI) SA = 100K Total (500%) CI SA = 200K x 5 = 1m Total (500%) ECI SA = 100k x 5 = 500k *Total ECI SA cannot be higher than the Total remaining CI SA</p>					
Scenario 1	Scenario 2	Scenario 3	Scenario 4	Scenario 5	Scenario 6
<p>1st Claim: Policy Month 3 Pre-Critical Stage</p> <p>Upon ECI claim, we pay 100% of ECI SA = \$100K</p> <p><u>Upon successful claim payout,</u> Total remaining CI SA = 1m - 100k = 900k</p> <p>Total remaining ECI SA = 500k - 100k = 400k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and</i></p>	<p>1st Claim: Policy Month 3 CI Claim</p> <p>Upon CI Claim, we pay 100% of CI SA = \$200K</p> <p><u>Upon successful claim payout,</u> Total remaining CI SA = 1m - 200k = 800k</p> <p>Total ECI SA remains unchanged at \$500K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and</i></p>	<p>1st Claim: Policy Month 3 CI Claim</p> <p>Upon CI Claim, we pay 100% of CI SA = \$200K</p> <p><u>Upon successful claim payout,</u> Total remaining CI SA = 1m - 200k = 800k</p> <p>Total ECI SA remains unchanged at \$500K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and</i></p>	<p>1st Claim: Policy Month 3 Pre-Critical Stage</p> <p>Upon ECI claim, we pay 100% of ECI SA = \$100K</p> <p><u>Upon successful claim payout,</u> Total remaining CI SA = 1m - 100k = 900k</p> <p>Total remaining ECI SA = 500k - 100k = 400k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and</i></p>	<p>1st Claim: Policy Month 3 Pre-Critical Stage</p> <p>Upon ECI claim, we pay 100% of ECI SA = \$100K</p> <p><u>Upon successful claim payout,</u> Total remaining CI SA = 1m - 100k = 900k</p> <p>Total remaining ECI SA = 500k - 100k = 400k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and</i></p>	<p>1st Claim: Policy Month 3 Crisis Care Accelerator (CCAB) claim</p> <p>Upon CCAB claim we pay 50% of basic CI SA OR 100k, whichever is lower = 100k</p> <p>Only 1 CCAB claim is payable per policy. CCAB benefit terminates</p> <p><u>Upon successful claim payout,</u> Total remaining CI SA = 1m - 100k = 900k</p> <p>Total ECI SA remains unchanged at \$500K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and</i></p>



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<i>premium</i>	<i>premium</i>	<i>premium</i>	<i>premium</i>	<i>premium</i>	<i>premium</i>
<i>100% CI/ECI SA has been restored:</i>					
<u>2nd Claim:</u> <u>Policy Month 16</u> <u>Pre-Critical</u> <u>Stage (different</u> <u>condition)</u>	<u>2nd Claim:</u> <u>Policy Month 30</u> <u>CI claim (same</u> <u>condition)</u>	<u>2nd Claim:</u> <u>Policy Month 30</u> <u>CI claim (same</u> <u>condition)</u>	<u>2nd Claim:</u> <u>Policy Month 16</u> <u>Pre-Critical</u> <u>Stage (different</u> <u>condition)</u>	<u>2nd Claim:</u> <u>Policy Month 30</u> <u>CI claim (same</u> <u>condition)</u>	<u>2nd Claim:</u> <u>Policy Month 16</u> <u>Pre-Critical</u> <u>Stage</u>
Upon ECI claim , we pay 100% of ECI SA = 100k <u>Upon</u> <u>successful</u> <u>claim payout.</u> Total remaining CI SA = 900k - 100k = 800k Total remaining ECI SA = 400k - 100k = 300k <i>No change to basic ECI SA and premium No change to basic CI SA and premium</i>	Upon CI claim , we pay 100% of CI SA = 200k <u>Upon</u> <u>successful</u> <u>claim payout.</u> Total remaining CI SA = 800k - 200k = 600k Total ECI SA remains unchanged at \$500K as Total ECI SA is not higher than Total remaining CI SA <i>No change to basic ECI SA and premium No change to basic CI SA and premium</i>	Upon CI claim , we pay 100% of CI SA = 200k <u>Upon</u> <u>successful</u> <u>claim payout.</u> Total remaining CI SA = 800k - 200k = 600k Total ECI SA remains unchanged at \$500K as Total ECI SA is not higher than Total remaining CI SA <i>No change to basic ECI SA and premium No change to basic CI SA and premium</i>	Upon ECI claim , we pay 100% of ECI SA = 100k <u>Upon</u> <u>successful</u> <u>claim payout.</u> Total remaining CI SA = 900k - 100k = 800k Total remaining ECI SA = 400k - 100k = 300k <i>No change to basic ECI SA and premium No change to basic CI SA and premium</i>	Upon CI claim , we pay 100% of CI SA = 200K <u>Upon</u> <u>successful</u> <u>claim payout.</u> Total remaining CI SA = 900k - 200k = 700k Total ECI SA remains unchanged at \$400K as Total ECI SA is not higher than Total remaining CI SA <i>No change to basic ECI SA and premium No change to basic CI SA and premium</i>	Upon ECI claim , we pay 100% of ECI SA = 100k <u>Upon</u> <u>successful</u> <u>claim payout.</u> Total remaining CI SA = 900k - 100k = 800k Total remaining ECI SA = 500k - 100k = 400k <i>No change to basic ECI SA and premium No change to basic CI SA and premium</i>
<u>3rd Claim: Policy</u> <u>Month 41</u> <u>Pre-Critical</u> <u>Stage (same</u> <u>condition)</u> Upon ECI claim , we pay	<u>3rd Claim: Policy</u> <u>Month 19</u> <u>CI claim</u> <u>(different</u> <u>condition)</u> Upon CI claim , we pay	<u>3rd Claim: Policy</u> <u>Month 43</u> <u>Pre-Critical</u> <u>Stage (different</u> <u>condition)</u> Upon ECI claim , we pay	<u>3rd Claim: Policy</u> <u>Month 19</u> <u>CI claim</u> <u>(different</u> <u>condition)</u> Upon CI claim we pay	<u>3rd Claim: Policy</u> <u>Month 43</u> <u>CCAB claim</u> Upon CCAB claim we pay	<u>3rd Claim: Policy</u> <u>Month 43</u> <u>CI claim</u> <u>(different</u> <u>condition)</u> Upon CI claim we pay



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<p>100% of ECI SA</p> <p>= 100k</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 800k - 100k = 700k</p> <p>Total remaining ECI SA = 300k - 100k = 200k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>100% of CI SA</p> <p>= 200k</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 200k = 400k</p> <p>Total ECI SA is reduced to 400k as Total ECI SA cannot be higher than the Total remaining CI SA</p>	<p>100% of ECI SA</p> <p>= 100k</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 100k = 500k</p> <p>Total remaining ECI SA = 500k - 100k = 400k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>(100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 800k) = 200K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 800k - 200k = 600k</p> <p>Total ECI SA remains unchanged at \$300K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>50% of basic CI SA OR 100k, whichever is lower = 100k</p> <p>Only 1 CCAB claim is payable per policy. CCAB benefit terminates</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 700k - 100k = 600k</p> <p>Total ECI SA remains unchanged at \$400K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>(100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 800k) = 200K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 800k - 200k = 600k</p> <p>Total ECI SA remains unchanged at \$400K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>
<p><u>4th Claim: Policy Month 42</u></p> <p>CI claim (different condition)</p> <p>Upon CI claim we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 700k) = 200K</p>	<p><u>4th Claim: Policy Month 56</u></p> <p>CI claim (different condition)</p> <p>Upon CI claim we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 400k) = 200K</p>	<p><u>4th Claim: Policy Month 70</u></p> <p>CI claim (same condition)</p> <p>Upon CI claim we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 500k) = 200K</p>	<p><u>4th Claim: Policy Month 43</u></p> <p><u>Pre-Critical Stage (same condition)</u></p> <p>Upon ECI claim, we pay 100% of ECI SA = 100k</p>	<p><u>4th Claim: Policy Month 56</u></p> <p>CI claim (different condition)</p> <p>Upon CI claim we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 600k) = 200K</p>	



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<p><u>Upon successful claim payout.</u> Total remaining CI SA = 700k - 200k = 500k</p> <p>Total ECI SA remains unchanged at \$200K as Total ECI SA is not higher than Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p><u>Upon successful claim payout.</u> Total remaining CI SA = 400k - 200k = 200k</p> <p>Total ECI SA is reduced to 200k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p><u>Upon successful claim payout.</u> Total remaining CI SA = 500k - 200k = 300k</p> <p>Total ECI SA is reduced to 300k as Total ECI SA cannot be higher than the Total remaining CI SA</p>	<p><u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 100k = 500k</p> <p>Total remaining ECI SA = 300k - 100k = 200k</p> <p><i>No change to CI SA and premium</i></p>	<p><u>Upon successful claim payout.</u> Total remaining CI SA = 600k - 200k = 400k</p> <p>Total ECI SA remains unchanged at \$400K as Total ECI SA is not higher than Total remaining CI SA</p>	
			<p>5th Claim: Policy Month 70</p> <p>CI claim (different condition) Upon CI claim we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (200k, 500k) = 200k</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 500k - 200k = 300k</p> <p>Total ECI SA remains unchanged at \$200K as Total ECI SA is not higher than Total remaining CI SA</p>		



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Example 4

<p style="text-align: center;"> Example 4 Basic (100%) Critical Illness Benefit (CI) SA = 30K with Protect Plus and Early Protect Plus Basic (100%) Early Protect (ECI) SA = 30k Total (500%) CI SA = 30K x 5 = 150k Total (500%) ECI SA = 30k x 5 = 150k *Total ECI SA cannot be higher than the Total remaining CI SA </p>					
Scenario 1	Scenario 2	Scenario 3	Scenario 4	Scenario 5	Scenario 6
1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim , we pay 100% of ECI SA = \$30K Upon successful claim payout, Total remaining CI SA = 150k - 30k = 120k Total remaining ECI SA = 150k - 30k = 120k <i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$300K Upon successful claim payout, Total remaining CI SA = 150k - 30k = 120k Total ECI SA is reduced to 120k as Total ECI SA cannot be higher than the Total remaining CI SA <i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 CI Claim Upon CI Claim, we pay 100% of CI SA = \$30K Upon successful claim payout, Total remaining CI SA = 150k - 30k = 120k Total ECI SA is reduced to 120k as Total ECI SA cannot be higher than the Total remaining CI SA <i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim , we pay 100% of ECI SA = \$30K Upon successful claim payout, Total remaining CI SA = 150k - 30k = 120k Total remaining ECI SA = 150k - 30k = 120k <i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Pre-Critical Stage Claim Upon ECI claim , we pay 100% of ECI SA = \$30K Upon successful claim payout, Total remaining CI SA = 150k - 30k = 120k Total remaining ECI SA = 150k - 30k = 120k <i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i>	1st Claim: Policy Month 3 Crisis Care Accelerator Benefit (CCAB) claim Upon CCAB claim we pay 50% of CI SA OR 100k, whichever is lower = 15k <i>Only 1 CCAB claim is payable per policy.</i> <i>CCAB benefit terminates</i> Upon successful claim payout, Total remaining CI SA = 150k - 15k = 135k Total ECI SA is reduced to 135k as Total ECI SA cannot be higher than the Total remaining CI SA <i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i>
100% CI and ECI SA will be restored after waiting period:					
2nd Claim: Policy Month 16 Pre-Critical Stage Claim	2nd Claim: Policy Month 30 CI claim	2nd Claim: Policy Month 16 Pre-Critical Stage Claim	2nd Claim: Policy Month 30 CI claim	2nd Claim: Policy Month 30 CI claim	2nd Claim: Policy Month 16 Pre-Critical Stage Claim
100% CI/ECI SA has been restored:					



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<p>Upon ECI claim, we pay 100% of ECI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 120k - 30k = 90k</p> <p>Total remaining ECI SA = 120k - 30k = 90k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>Upon CI Claim, we pay 100% of CI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 120k - 30k = 90k</p> <p>Total ECI SA is reduced to 90k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>Upon ECI claim, we pay 100% of ECI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 120k - 30k = 90k</p> <p>Total remaining ECI SA = 120k - 30k = 90k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>Upon CI Claim, we pay 100% of CI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 120k - 30k = 90k</p> <p>Total ECI SA is reduced to 90k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>Upon CI Claim, we pay 100% of CI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 120k - 30k = 90k</p> <p>Total ECI SA is reduced to 90k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>	<p>Upon ECI claim, we pay 100% of ECI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 135k - 30k = 105k</p> <p>Total remaining ECI SA = 135k - 30k = 105k</p> <p><i>No change to basic ECI SA and premium No change to basic CI SA and premium</i></p>
<p>3rd Claim: Policy Month 41 Pre-Critical Stage Claim</p>	<p>3rd Claim: Policy Month 43 CI claim</p>	<p>3rd Claim: Policy Month 43 Pre-Critical Stage Claim</p>	<p>3rd Claim: Policy Month 43 CCAB claim</p>	<p>3rd Claim: Policy Month 43 CCAB claim</p>	<p>3rd Claim: Policy Month 43 CI claim</p>
100% CI/ECI SA has been restored					
<p>Upon ECI claim, we pay 100% of ECI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 90k - 30k = 60k</p>	<p>Upon CI claim we pay 100% of CI SA = \$30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 90k - 30k = 60k</p>	<p>Upon ECI claim, we pay 100% of ECI SA = \$30K</p> <p>Total remaining ECI SA = 90k - 30k = 60k</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 90k - 30k = 60k</p>	<p>Upon CCAB claim we pay 50% of CI SA OR 100k, whichever is lower = 15k</p> <p>Only 1 CCAB claim is payable per policy. CCAB benefit terminates</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 90k - 15k = 75k</p>	<p>Upon CCAB claim we pay 50% of CI SA OR 100k, whichever is lower = 15k</p> <p>Only 1 CCAB claim is payable per policy. CCAB benefit terminates</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 90k - 15k = 75k</p>	<p>Upon CI claim we pay (100% CI SA OR Remaining CI SA); whichever is lower = min (30k, 105k) = 30K</p> <p><u>Upon successful claim payout.</u> Total remaining CI SA = 105k - 30k = 75k</p>



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<p>Total remaining ECI SA = 90k - 30k = 60k</p> <p><i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i></p>	<p>Total ECI SA is reduced to 60k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i></p>		<p>Total ECI SA is reduced to 75k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i></p>	<p>Total ECI SA is reduced to 75k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p><i>No change to basic ECI SA and premium</i> <i>No change to basic CI SA and premium</i></p>	<p>Total ECI SA is reduced to 75k as Total ECI SA cannot be higher than the Total remaining CI SA</p> <p>CI benefit remains</p> <p><i>No change to basic CI SA and premium</i></p>
-		<p><u>4th Claim: Policy Month 56</u></p> <p><u>Pre-Critical Stage Claim</u></p> <p>Upon ECI claim, we pay</p> <p>100% of ECI SA = \$30K</p> <p>Total remaining ECI SA = 60k - 30k = 30k</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 60k - 30k = 30k</p> <p>No change to basic ECI SA and premium</p> <p>No change to basic CI SA and premium</p>	<p><u>4th Claim: Policy Month 56</u></p> <p><u>CI claim</u></p> <p>Upon CI claim we pay</p> <p>(100% CI SA OR Remaining CI SA); whichever is lower</p> <p>= min (30k, 75k)</p> <p>= 30K</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 75k - 30k = 45k</p> <p>Total ECI SA is reduced to 45k as Total ECI SA cannot be higher than the Total remaining CI SA</p>	<p><u>4th Claim: Policy Month 56</u></p> <p><u>Pre-Critical Stage Claim</u></p> <p>Upon ECI claim we pay</p> <p>(100% ECI SA OR Remaining ECI SA); whichever is lower</p> <p>= min (30k, 75k)</p> <p>= 30K</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 75k - 30k = 45k</p> <p>Total remaining ECI SA = 75k - 30k = 45k</p>	
-			<p><u>4th Claim: Policy Month 56</u></p> <p>CI claim (same condition)</p> <p>Upon CI claim we pay</p>	<p><u>5th Claim: Policy Month 70</u></p> <p>ECI claim (different condition)</p> <p>Upon ECI claim we pay</p>	



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	<p>(100% CI SA OR Remaining CI SA); whichever is lower</p> <p>= min (30k, 45k)</p> <p>= 30K</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 45k - 30k</p> <p>= 15k</p> <p>Total ECI SA is reduced to 15k as Total ECI SA cannot be higher than the Total remaining CI SA</p>	<p>(100% ECI SA OR Remaining ECI SA); whichever is lower</p> <p>= min (30k, 45k)</p> <p>= 30K</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 45k - 30k</p> <p>= 15k</p> <p>Total remaining ECI SA = 45k - 30k</p> <p>= 15k</p>
		<p>6th Claim: Policy Month 100</p> <p>CI claim (different condition)</p> <p>Only 15k CI SA has been restored as remaining CI SA is less than 100% of CI SA</p> <p>Upon CI claim we pay</p> <p>(100% CI SA OR Remaining CI SA); whichever is lower</p> <p>= min (30k, 15k)</p> <p>= 15K</p> <p><u>Upon successful claim payout.</u></p> <p>Total remaining CI SA = 15k - 15k</p> <p>= 0</p> <p>CI benefit terminates</p>



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PRUActive Protect

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q1 Why are we launching PRUActive Protect?

PRUActive Protect is an active series product in line with the marketing proposition to allow customers to customise their Critical Illness plan to suit their unique needs. The modular structure of the plan with standalone CI options allows customers to meet their CI needs without having to purchase packaged plans with high death coverage, addressing budget constraints and over-coverage concerns.

Early stage and multi-pay supplementary benefits are also made available to offer more options for customers who want more comprehensive coverage.

Q2 What is PRUActive Protect?

PRUActive Protect is a non-participating SGD regular premium term plan with choice of policy/premium term from 10 to 99 years. It has the following benefits:

- Critical Illness Benefit
- Crisis Care Accelerator Benefit
- Death Benefit
- Additional Benefit
- Guaranteed Convertibility Option
- Child Cover Benefit
- Spouse Waiver Benefit

Q3 What are the policy term and premium payment term option?

The policy term and premium term are the same. Customers have the choice of policy/premium term from 10 to 99 years.



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Q4 What do we pay for Critical Illness benefit?

If the life assured is diagnosed as having any one of the 36 critical illnesses listed below, before the cover end date, we pay 100% of the sum assured, less any amounts owing to us. The life assured must survive at least 7 days from the date of diagnosis.

We pay this benefit for one critical illness and up to 100% of the sum assured shown in your certificate of life assurance. Once we pay a successful claim for critical illness, the Critical Illness benefit ends.

The Critical Illness benefit sum assured includes claims for any pre-critical medical condition claim under the Early Protect benefit (if this benefit is included). Once 100% of the sum assured is paid out, the benefit ends.

List of Critical Illnesses* covered

- | | |
|--|---|
| 1. Alzheimer's Disease / Severe Dementia | 18. Major Cancer |
| 2. Benign Brain Tumour | 19. Major Head Trauma |
| 3. Blindness (Irreversible Loss of Sight) | 20. Major Organ / Bone Marrow Transplantation |
| 4. Coma | 21. Motor Neurone Disease |
| 5. Coronary Artery By-pass Surgery | 22. Multiple Sclerosis |
| 6. Deafness (Irreversible Loss of Hearing) | 23. Muscular Dystrophy |
| 7. End Stage Kidney Failure | 24. Open Chest Heart Valve Surgery |
| 8. End Stage Liver Failure | 25. Open Chest Surgery to Aorta |
| 9. End Stage Lung Disease | 26. Other Serious Coronary Artery Disease |
| 10. Fulminant Hepatitis | 27. Paralysis (Irreversible Loss of Use of Limbs) |
| 11. Heart Attack of Specified Severity | 28. Persistent Vegetative State (Apallic Syndrome) |
| 12. HIV Due to Blood Transfusion and Occupationally Acquired HIV | 29. Poliomyelitis |
| 13. Idiopathic Parkinson's Disease | 30. Primary Pulmonary Hypertension |
| 14. Irreversible Aplastic Anaemia | 31. Progressive Scleroderma |
| 15. Irreversible Loss of Speech | 32. Severe Bacterial Meningitis |
| 16. Loss of Independent Existence | 33. Severe Encephalitis |
| 17. Major Burns | 34. Stroke with Permanent Neurological Deficit |
| | 35. Systemic Lupus Erythematosus with Lupus Nephritis |
| | 36. Terminal Illness |

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**



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Q5 What is Crisis Care Accelerator benefit?

The Crisis Care Accelerator benefit aims to cover some of the major illnesses or even accidents that fall out of the 36 Critical Illness definitions set by LIA.

We pay 50% from the PRUActive Protect sum assured if the life assured:

- has surgery for any of the following vital organs as a result of illness or an accident - heart, lung, brain, kidney or liver, and
- Is admitted to the Intensive Care Unit (ICU) as a result of the surgery, for at least three continuous days

Only one claim is allowed for each policy up to \$100,000 per life.

If there has already been a claim on the policy and the sum assured of PRUActive Protect has been reduced, the Crisis Care Accelerator Benefit would pay 50% from the remaining PRUActive Protect sum assured.

Q6 If my customer made a Crisis Care Accelerator claim under PRUActive Life for \$100,000, will he be able to claim another \$100,000 under the Crisis Care Accelerator benefit in PRUActive Protect?

Yes, the \$100,000 cap only applies to the life assured of PRUActive Protect. If the client claims this same benefit in PRUActive Life, they can still claim from PRUActive Protect.

Example:

Client claims Crisis Care Accelerator benefit from PRUActive Life: \$80k

Client also claims Crisis Care Accelerator benefit from PRUActive Protect: \$100k

Total claim: \$180k

However, if the customer buys 2 PRUActive Protect policies at \$200,000 SA each, he will only be able to claim \$100,000 under the Crisis Care Accelerator benefit of PRUActive Protect.

Q7 Do we pay the Crisis Care Accelerator benefit if the medical treatment is conducted overseas?

No, we do not pay the Crisis Care Accelerator Benefit if the medical treatment is conducted overseas.



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Q8 What do we pay for death benefit?

The Death benefit is a lump sum payout of 20% of the PRUActive Protect sum assured.

All other claims under the PRUActive Protect policy and its riders will not reduce the Death benefit sum assured.

However if the client reduced his PRUActive Protect sum assured, his Death benefit will be revised to 20% of the reduced sum assured.

The death benefit will continue with no premium required to cover the life assured even after the critical illness benefit for PRUActive Protect has been fully claimed.

Q9 What do we pay for additional benefit?

If the life assured is diagnosed with a medical condition that requires him to undergo Angioplasty and Other Invasive Treatment for Coronary Artery, we pay 10% of the PRUActive Protect sum assured up to \$25,000.

We pay this benefit once only.

A claim under this benefit will not affect the sum assured of the policy.

The Additional Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.



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Q10 What is Guaranteed Convertibility Option?

The Guaranteed Convertibility Option allows customers to convert their policy at any time before the expiry date to a new available regular premium whole life or endowment policy without evidence of good health. We reserve the right to vary the types of policy policyowner can buy.

Customers can convert their PRUActive Protect CI sum assured into Death, TPD and CI sum assured of their new policy.

Example:

Customer with a PRUActive Protect policy of \$100,000 sum assured (SA) can convert his policy to a whole life plan with the following benefits:

Accelerated Death SA: \$100k

Accelerated TPD SA: \$100k

Accelerated CI SA: \$100k

Policyowner can make the conversion if:

1. The life assured is under 65 age next birthday;
2. All premiums due under PRUActive Protect policy are paid and the plan has not lapsed
3. The sum assured of the new plan must be equal or less than the PRUActive Protect CI sum assured, subject to maximum of \$500,000 at the time of conversion;
4. The min sum assured and/or min premium and/or policy term of the new plan is met
5. For partial conversion, balance sum assured of original policy must be more than the min SA requirements of the new available regular premium whole life or endowment policy to be converted into and meets minimum premium requirements
6. The policyowner has to pay the increase in premium for the new policy (the new premium charged will be based on the age of the life assured at the time of conversion) ;
7. The policy was purchased on standard medical terms (i.e. Life assured was not given our Offer of Conditional Acceptance on medical-related exclusions or loading);
8. We have not imposed any exclusion on the original PRUActive Protect policy;
9. We have not previously paid a claim under the PRUActive Protect policy and all its riders

The premium charged will be based on the age of the life assured at the time of conversion.

No refund of premiums is payable after conversion.



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Q11 What is Child Cover Benefit?

When the life assured and spouse each buys a PRUActive Protect policy, their child or children will be provided with the free child cover. Child or children refer to either the biological or adopted child of the life assured, including an unborn child or children.

Customers may or may not have child(ren) when they purchase their PRUActive Protect policy. All their child(ren) age 17 and below will be automatically covered under the Child Cover Benefit when they are born or adopted.

To make a claim, the life assured has to submit the child's birth certificate or adoption papers as proof of relationship.

If the child is diagnosed as having any one of the 36 critical illnesses or 9 juvenile medical conditions, we pay:

- 25% of one of the parents' PRUActive Protect sum assured, whichever sum assured is higher;
- only once for each child and up to \$25,000 for each child

Q12 What is the waiting period for the Child Cover Benefit?

If the claim is received when the covered condition is diagnosed:

- before the first policy anniversary of the parent's policy, we will not pay anything*
- after the first but before the second policy anniversary of the parent's policy, we will pay 50% of the benefit. This means we pay 12.5% of the sum assured only.

* Waiting Period for Child Cover is 1 year from any of the following:

- The most recent date of issue of one of the parent's policy or
- The latest date of reinstatement of one of the parent's policy (if applicable)

The policy anniversary above is based on the cover start date of the parent's policy. We will base on the most recent cover start date if the dates are different. If either one or both parents' policy have been reinstated, we will base on the most recent reinstatement date.

For us to pay the claim, the following must apply:

- The child must survive at least 14 days from the date of diagnosis;
- The child is 17 years old and below, and
- Both parents' policies must still be effective and not ended at the time of the claim, unless one of the parents' policy ended because of a claim

A pay out under this benefit will not reduce the parent's PRUActive Protect policy's sum assured.



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Q13 Are pre-existing conditions of the child covered under the Child Cover Benefit?

No, we do not pay the Child Cover benefit in any of the following circumstances:

- If the child is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- If the child is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- If the child is diagnosed as having a critical illness
 - o within 12 months from the most recent cover start date or date of reinstatement (if any)
 - o before the child is 30 days old,
 - o and dies within 14 days from the date of diagnosis,
 - o when the child is 18 years old and above
- If the child is diagnosed as having a covered illness caused by:
 - o Acquired Immune Deficiency Syndrome (AIDS), AIDS-related complex or infection by Human Immunodeficiency Virus (HIV), except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o self-inflicted injuries while sane or insane;
 - o alcohol or drug abuse.
 - o taking part or attempting to take part in an unlawful act;

Q14 How do I submit the details of my client's child(ren) when they are born?

There is no need to submit the details of the client's child(ren) when they are born. To make a claim, the life assured (either parent) just has to submit the child's birth certificate or adoption papers as proof of relationship.

Q15 How many children per set of parents are covered under the Child Cover benefit?

There are no limits to the number of children per set of parents that can claim from this benefit.

Q16 What is the maximum expiry age for the child under Child Cover Benefit?

The Child Cover benefit covers the child from 1 to 17 years old and below

Q17 Must both parent's policies be in force during a Child Cover claim?

Yes, both parents' policies must still be effective and not ended at the time of the claim. However if one of the parents' policy has ended because of a claim, we will still pay the Child Cover benefit.



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Q18 What happens if the parents are divorced at the point of a Child Cover claim?

The child cover benefit will not be affected by the marital status of the parents.

To make a claim, the life assured (either parent) just has to submit the child's birth certificate or adoption papers as proof of relationship. Marriage cert is not needed.

As long as both parents' policies are still effective and not ended at the time of the claim, we will pay the Child Cover benefit.

Q12 What is Spouse Waiver Benefit?

When the life assured's spouse is diagnosed as having any one of the 36 critical illnesses we will waive the premiums of the PRUActive Protect policy and its supplementary benefits (if any) for 12 months from the next premium due date.

We pay this benefit once only.

Customers may or may not have a spouse when they purchase their PRUActive Protect policy. Their spouse will be automatically covered under the Spouse Waiver Benefit when they are married.

To make a claim, the life assured would have to submit their marriage certificate as proof of their relationship.

If the Payer Security Plus benefit has already been included to this plan, this Spouse Waiver benefit will not apply.

The Spouse Waiver benefit does not waive the premiums of any waiver supplementary benefits attached to your PRUActive Protect policy.

The Spouse Waiver Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.



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Q20 Are pre-existing conditions of the Spouse covered under the Spouse Waiver Benefit?

No, we do not waive premiums under the Spouse Waiver benefit in any of the following circumstances, if the spouse:

- is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- is diagnosed with a Heart Attack of Specified Severity, Major Cancer, Other Serious Coronary Artery Disease or requiring Coronary Artery By-pass Surgery within 90 days from the cover start date or date of reinstatement (if any);
- is diagnosed with Angioplasty and Other Invasive Treatment for Coronary Artery;
- dies within 30 days from the date of diagnosis
- is diagnosed as having a covered illness caused by:
 - o self-inflicted injuries while sane or insane;
 - o AIDS, AIDS-related complex or infection by HIV except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o using unprescribed drugs if the drugs are required by law to be prescribed by a registered medical practitioner;
 - o taking part or attempting to take part in an unlawful act; or
 - o alcohol or drug abuse.

Q21 In the scenario where the Policy owner is the father and the life assured is the child, whose spouse is covered under Spouse Waiver benefit?

The spouse under the Spouse Waiver benefit refers to the spouse of the life assured. In this scenario, it will be the future wife of the child.

Q22 What are the other optional supplementary benefits that can be added to PRUActive Protect?

Other optional supplementary benefits include Protect Plus, Early Protect, Early Protect Plus, Life Protect Plus, Severe Infections Protect, Monthly Benefit, Payer Security Plus, Early Payer Security, Crisis Waiver III and Early Crisis Waiver.



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NEW BUSINESS

Q23 Who is eligible to apply?

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q24 What is the max sum assured that my customer can buy for PRUActive Protect?

When Protect Plus is not attached:

Up to \$3.6m per life assured

When Protect Plus is attached:

Up to \$720K per life assured

Monthly benefit, Crisis Waiver III and other existing CC benefits customer has with prudential will add to the above limit mentioned.

Q25 What is the max early/intermediate/pre-critical stage CI sum assured that my customer can buy for Early Protect?

When Early Protect Plus is not attached:

Up to \$350k per life assured

When Early Protect Plus is attached:

Up to \$200k per life assured

All other existing early/intermediate/pre-critical stage CC benefits customer has with prudential will add to the above limit mentioned.

Q26 What is the max sum assured that juveniles and non-income earners can buy for PRUActive Protect?

When Protect plus is not attached:

Up to \$1m per life assured

When Protect plus is attached:

Up to \$200K per life assured

Monthly benefit and other existing CC benefits customer has with prudential will add to the above limit mentioned.



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Q27 What is the max early/intermediate/pre-critical stage CI sum assured that juveniles and non-income earners can buy for Early Protect?

When Early Protect Plus is not attached:

- Up to \$350k per life assured

When Early Protect Plus is attached:

- Up to \$200k per life assured

All other existing early/intermediate/pre-critical stage CC benefits customer has with prudential will add to the above limit mentioned.

Q28 Can the customer choose to backdate the policy?

Yes. Backdating is allowed for PRUActive Protect provided it is up to 6 months from the proposal received date.

PREMIUM RATES

Q29 Are the premium rates guaranteed?

The premium rates for PRUActive Protect are not guaranteed.

The premium rates for Protect Plus, Early Protect, Early Protect Plus, Severe Infections Protect and Monthly Benefit are also not guaranteed.

However the premium rates for Life Protect Plus is guaranteed

Q30 What is the Large Sum Assured Discount for PRUActive Protect?

The Large Sum Assured Discount table as follows:

PRUActive Protect

Increase/Decrease from basic premium as % of Annual Premium	
Sum assured	% of Annual Premium
<= \$99,999	20.00%
\$100,000 - \$499,999	0.00%
>= \$500,000	-10.00%

For large sum assured discounts on PRUActive Protect supplementary benefits, pls refer to PRUActive Protect Supplementary Benefits FAQs.



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Q31 Is PRUActive Protect eligible for PruSmart Lady / PruLady / PruMan discount?

Yes, it is eligible for 15% PruSmart Lady / PruLady / PruMan discount.

POLICY SERVICES

Q32 Can customer choose to reduce the Sum Assured of PRUActive Protect?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$500.

Q33 Can customer choose to increase the Sum Assured of PRUActive Protect?

No, increase in sum assured is not allowed.

Q34 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.

Q35 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy

CLAIMS

Q36 Does a claim under Critical Illness reduce the sum assured of PRUActive Protect?

Yes, a claim under the Critical Illness benefit will accelerate the sum assured of PRUActive Protect.

If no Protect Plus rider is attached, the Critical Illness benefit of PRUActive Protect will be fully claimed/terminated upon a CI claim.

However the death benefit will continue with no premium required to cover the life assured even after the CI benefit for PRUActive Protect has been fully claimed.



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Q37 Does a claim under Crisis Care Accelerator benefit reduce the sum assured of PRUActive Protect?

Yes, a claim under the Crisis Care Accelerator benefit will accelerate the sum assured of PRUActive Protect.

Example:

PRUActive Protect sum assured: \$150k

No Protect Plus rider is attached

Customer makes a Crisis Care Accelerator benefit claim of \$75k.

PRUActive Protect sum assured is reduced to \$75k

The Crisis Care Accelerator benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

Q37 How would a claim under Death benefit affect the PRUActive Protect policy?

The policy automatically terminates after we have paid a claim for the death benefit.

Q38 Does a claim under Additional benefit reduce the sum assured of PRUActive Protect?

No, a claim under additional benefit will not reduce the sum assured of PRUActive Protect.

The Additional Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

Q39 Does a claim under Child Cover benefit reduce the sum assured of PRUActive Protect?

No, a claim under Child Cover benefit will not reduce the sum assured of PRUActive Protect.

Both parents' policies must still be effective and not terminated at the time of the child cover claim. However if one of the parents' policy has been terminated due to a claim, the Child Cover benefit will continue to apply.

Q40 Does a claim under Spouse waiver benefit reduce the sum assured of PRUActive Protect?

No, a claim under Spouse waiver benefit will not reduce the sum assured of PRUActive Protect.

The Spouse Waiver Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.



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Q41 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.

FACT FIND

Q42 Which are the financial goals that are required to be addressed and analysed before recommending this product?

The financial goals are 'Protect Income Upon Death' and 'Critical Illness Expenses'.

MARKETING SUPPORT

Q43 Will there be brochures for PRUActive Protect?

Yes. Electronic brochure will be made available and you can direct your customers to Prudential's corporate website at www.prudential.com.sg.

Q44 Will there be a new version of SQS? When will it be available?

Yes, there will be a new version of SQS on PRUONE Express and it will be available on 8 September 2020.

GENERAL

Q45 Is the PRUActive Protect training session compulsory?

In order to give advice and market PRUActive Protect, you are required to complete the e-Learn module and pass the course-end assessment for PRUActive Protect.

Q46 Does PRUActive Protect have lapse re-entry from PRUTriple Protect?

No, PRUActive Protect does not have lapse re-entry from PRUTriple Protect as they are not a like for like product.



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Protect Plus

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q11 What is Protect Plus?

Protect Plus is a supplementary benefit, which restores the PRUActive Protect sum assured to 100% after a Critical illness benefit claim.

Q2 What do we pay under Protect Plus?

The life assured is able to claim up to a maximum of 500% of the PRUActive Protect sum assured (**total sum assured**).

This 500% of the sum assured includes claims for any pre-critical medical condition claim under the Early Protect benefit (if this benefit is included).

Once there has been a successful claim under the Critical Illness benefit, the total sum assured will be reduced by the amount paid out under this benefit. The total sum assured would be 500% of the basic sum assured for the PRUActive Protect policy.

Q3 Is there a waiting period for recurring critical illness conditions?

Waiting Period:

- For recurring critical illness condition under the different categories, the waiting period is 12 months between the dates of diagnosis.
- For recurring critical illness condition under the same category, the waiting period is 24 months between the dates of diagnosis.

If there was a claim under the Crisis Care Accelerator benefit, the Critical Illness benefit will be restored to 100% after a waiting period of 12 months.

Q4 Is there a waiting period for progressive claims between Pre-critical medical conditions and Critical Illness of the same CI category?

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims.

However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.



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Q5 What is a recurring critical illness condition under the same category?

Recurring critical illness conditions under the same category means the critical illness condition is a recurrence or metastasis of the same critical illness condition that you claimed previously.

To avoid any doubt, the recurring critical illness condition of the same category, must meet the criteria set out in the critical illness definitions covered in this policy, and will not apply to any illness which falls outside this definition. In addition, the medical evidence must clearly show that the initial or previous critical illness condition (which has been admitted) was already in complete remission before the recurring critical illness condition was diagnosed.

Complete Remission means complete absence of clinical and objective evidence of any previous critical illness claimed condition(s), verified by a registered specialist, evidenced by absence of any signs, symptoms and supported by clinical, radiological, histological and laboratory evidence in regular follow-ups.

Q6 What is a recurring critical illness condition under different categories?

Recurring critical illness conditions under a different category means any of the following conditions:

- The claimed condition is from a different critical illness category as the previous critical illness claim that has been admitted under this policy;
- The claimed condition is from a different pathological and histological type and occurs in a different organ* or site as all previous critical illness claims that has been admitted under this policy; or
- The claimed condition is newly diagnosed with a primary cause that is identified as not related or due to any previous critical illness claim that has been admitted under this policy.

* Paired organs such as breast, ear, eyes, kidneys, lungs, ovary & testicles are considered as same organ.

To avoid any doubt, the recurring critical illness condition of a different category, must meet the criteria set out in the critical illness definitions covered in this policy, and will not apply to any illness which falls outside this definition.

Q7 What is the survival period for this benefit?

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out. Otherwise, we pay only the Death benefit.



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Q8 What are the policy term and premium payment term option?

The policy term and premium term of Protect Plus will follow the policy term and premium term of the PRUActive Protect policy.

Q9 The minimum policy term of Protect Plus is 10 years. Can I still MTA Protect Plus if my remaining policy term is less than 10 years?

No, you can only MTA Protect Plus if your remaining policy term is 10 years or more.

NEW BUSINESS

Q10 Who is eligible to apply?

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q11 Is there underwriting for this benefit?

Yes, Full underwriting (Medical and Financial) is applicable.

Q12 What is the max sum assured that my customer can buy for PRUActive Protect when Protect Plus is added to the plan?

The max SA your customer can buy for PRUActive Protect when Protect Plus is added to the plan is up to \$720k per life assured.

Monthly benefit, Crisis Waiver III and other existing CC benefits customer has with prudential will add to the above limit mentioned.

Example 1:

Customer do not have any Critical Illness coverage with Prudential.

He wants to get PRUActive Protect with the below riders:

- Monthly Benefit \$1,000 per month for 5 years = \$60,000
- Crisis Waiver = \$10,000

Max Sum Assured for PRUActive Protect with Protect Plus after aggregation:

$\$3.6\text{m} - \$60\text{k} - \$10\text{K} = \3.53m

$\$3.53\text{m}/5 = \706k

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

Example 2:

Customer has a PRUActive Life with Crisis Care benefit \$300k after Multiplier Benefit.



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He wants to get PRUActive Protect with the below riders:

- Monthly Benefit \$1,000 per month for 5 years = \$60,000
- Crisis Waiver = \$10,000

Max Sum Assured for PRUActive Protect with Protect Plus after aggregation:

$\$3.6\text{m} - \$300\text{k} - \$60\text{k} - \$10\text{k} = \$3.23\text{m}$

$\$3.23\text{m}/5 = \646k

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

Example 3:

Customer has a PRUActive Life with Crisis Care benefit \$300k after Multiplier Benefit.

He wants to get PRUActive Protect with the below riders:

- Monthly Benefit \$1,000 per month for 5 years = \$60,000
- Crisis Waiver = \$10,000

Max Sum Assured for PRUActive Protect with Protect Plus after aggregation:

$\$3.6\text{m} - \$300\text{k} - \$60\text{k} - \$10\text{k} = \$3.23\text{m}$

$\$3.23\text{m}/5 = \646k

He decided not to take up Protect Plus as he wish to take up a higher sum assured for his PRUActive Protect Critical Illness benefit.

Max sum assured for PRUActive Protect without Protect Plus is \$3.6m

Max Sum Assured for PRUActive Protect (without Protect Plus) after aggregation:

$\$3.6\text{m} - \$300\text{k} - \$60\text{k} - \$10\text{k} = \$3.23\text{m}$

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

Q13 What is the max sum assured that juveniles/non-income earners can buy for PRUActive Protect when Protect Plus is added to the plan?

The max SA juveniles/non-income earners can buy for PRUActive Protect when Protect Plus is added to the plan is up to \$200K per life assured

Monthly benefit, Crisis Waiver III and other existing CC benefits customer has with prudential will add to the above limit mentioned.

Example 1:

Customer do not have any Critical Illness coverage with Prudential.

He wants to get PRUActive Protect with the below riders:

- Monthly Benefit \$1,000 per month for 5 years = \$60,000



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- Crisis Waiver = \$10,000

Max Sum Assured for PRUActive Protect with Protect Plus after aggregation:

$\$1\text{m} - \$60\text{k} - \$10\text{k} = \930k

$\$930\text{k}/5 = \$186,000$

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

Example 2:

Customer has a PRUActive Life with Crisis Care benefit \$30k after Multiplier Benefit.

He wants to get PRUActive Protect with the below riders:

- Monthly Benefit \$1,000 per month for 5 years = \$60,000
- Crisis Waiver = \$10,000

Max Sum Assured for PRUActive Protect with Protect Plus after aggregation:

$\$1\text{m} - \$30\text{k} - \$60\text{k} - \$10\text{k} = \$900\text{k}$

$\$900\text{k}/5 = \180k

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

Example 3:

Customer has a PRUActive Life with Crisis Care benefit \$30k after Multiplier Benefit.

He wants to get PRUActive Protect with the below riders:

- Monthly Benefit \$1,000 per month for 5 years = \$60,000
- Crisis Waiver = \$10,000

Max Sum Assured for PRUActive Protect with Protect Plus after aggregation:

$\$1\text{m} - \$30\text{k} - \$60\text{k} - \$10\text{k} = \$900\text{k}$

$\$900\text{k}/5 = \180k

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

He decided not to take up Protect Plus as he wish to take up a higher sum assured for his PRUActive Protect Critical Illness benefit.

Max sum assured for PRUActive Protect without Protect Plus for juveniles is \$1m.

Max Sum Assured for PRUActive Protect (without Protect Plus) after aggregation:

$\$1\text{m} - \$30\text{k} - \$60\text{k} - \$10\text{k} = \$900,000$

Pls take note that this calculation is for your own reference only, not to be shared with the customer.



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PREMIUM RATES

Q14 Are the premium rates guaranteed?

No, premium rates are not guaranteed.

Q15 Is there a Large Sum Assured Discount for Protect Plus?

No, there is no large sum assured discount for Protect Plus.

POLICY SERVICES

Q16 Can customer choose to reduce the Sum Assured of Protect Plus?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$500.

Q17 Can customer choose to increase the Sum Assured of Protect Plus?

No, increase in sum assured is not allowed.

Q18 Can customer choose to terminate Protect Plus after a claim on PRUActive Protect?

No, once you have made a Critical Illness benefit or Early Protect benefit claim, you cannot end this benefit.

Q19 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.

Q20 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy.

CLAIMS

Q21 Does a claim under Critical Illness reduce the sum assured of PRUActive Protect when Protect Plus is attached?

Once there has been a successful claim under the Critical Illness benefit, the total sum assured will be reduced by the amount paid out under this benefit.



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The total sum assured would be 500% of the basic sum assured for the PRUActive Protect policy.

Q22 Can my customer claim for recurring pre-critical medical condition under Protect Plus?

No, to claim recurring pre-critical medical conditions, customer must add Early Protect and Early Protect Plus riders.

Q23 Can my customer make a claim for recurring critical illness conditions of the same category?

Yes, for recurring critical illness condition under the same category, the waiting period is 24 months between the dates of diagnosis.

Example:

Customer is diagnosed with major breast cancer on 14 May 2020. We pay 100% of PRUActive Protect SA.

On 1 Apr 2022, she is declared to be in complete remission.

On 15 May 2022, she is diagnosed with major breast cancer again. We pay another 100% of PRUActive Protect SA.

Q24 Can my customer make 2 Critical Illness claims at the same time?

No, if the life assured is diagnosed with more than one critical illness at the same time, we will only pay for one critical illness that has the highest severity level.

Q25 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.

FACT FIND

Q26 Which is the financial goal that is required to be addressed and analysed before recommending Protect Plus?

The financial goal is 'Critical Illness Expenses'.

GENERAL

Q27 Is the Protect Plus training session compulsory?

In order to give advice and market PRUActive Protect and its supplementary benefits, you are required to complete the e-Learn module and pass the course-end assessment for the benefit.



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Early Protect

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q1 What is Early Protect?

Early Protect is a supplementary benefit, which offers financial protection against Pre-critical medical conditions. It also has a Special benefit.

Q2 What do we pay under Early Protect?

If the life assured is diagnosed as having any one of the pre-critical medical conditions listed below, we pay 100% of the Early Protect sum assured for one pre-critical medical condition.

This 100% of the sum assured includes claims for any of the 36 critical illness under PRUActive Protect's Critical Illness benefit.

If there is a claim under PRUActive Protect's Critical Illness benefit, this could result in the reduction of the sum assured of Early Protect or the termination of this supplementary benefit.

Any pre-critical medical conditions payout under Early Protect will reduce the sum assured of the PRUActive Protect policy.

This benefit ends once we pay 100% of the Early Protect sum assured.

Q3 What pre-critical medical conditions are covered?

	Critical illness category	Pre-critical medical conditions
1	Alzheimer's Disease / Severe Dementia	Moderately severe Alzheimer's disease or dementia
2	Benign Brain Tumour	<ul style="list-style-type: none">- Surgical removal of pituitary tumour or surgery for subdural haematoma- Surgical removal of pituitary tumour (by open craniotomy)
3	Blindness (Irreversible Loss of Sight)	<ul style="list-style-type: none">- Loss of sight in one eye- Optic nerve atrophy with low vision
4	Coma	<ul style="list-style-type: none">- Coma for 48 hours- Severe epilepsy



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Critical illness category	Pre-critical medical conditions
5 Coronary Artery By-pass Surgery	<ul style="list-style-type: none"> - Port access or keyhole cardiac surgery - Transmyocardial laser revascularisation or enhanced external counterpulsation device insertion
6 Deafness (Irreversible Loss of Hearing)	<ul style="list-style-type: none"> - Partial loss of hearing or cavernous sinus thrombosis surgery - Cochlear implant surgery
7 End Stage Kidney Failure	<ul style="list-style-type: none"> - Surgical removal of one kidney - Chronic kidney disease
8 End Stage Liver Failure	<ul style="list-style-type: none"> - Liver surgery - Liver cirrhosis
9 End Stage Lung Disease	<ul style="list-style-type: none"> - Severe asthma or insertion of a vena-cava filter - Surgical removal of one lung
10 Fulminant Hepatitis	<ul style="list-style-type: none"> - Biliary tract reconstruction surgery - Chronic primary sclerosing cholangitis
11 Heart Attack of Specified Severity	<ul style="list-style-type: none"> - Cardiac pacemaker insertion or pericardectomy - Cardiac defibrillator insertion or early cardiomyopathy
12 HIV due to Blood Transfusion and Occupationally Acquired HIV	HIV due to assault, organ transplant or occupationally acquired HIV
13 Idiopathic Parkinson's Disease	Early and moderately severe Parkinson's disease
14 Irreversible Aplastic Anaemia	<ul style="list-style-type: none"> - Reversible aplastic anaemia - Myelodysplastic syndrome or myelofibrosis
15 Irreversible Loss of Speech	<ul style="list-style-type: none"> - Loss of speech due to permanent or temporary tracheostomy - Loss of speech due to vocal cord paralysis
16 Loss of Independent Existence	<ul style="list-style-type: none"> - Loss of independent existence (early stage) - Loss of independent existence (intermediate stage)
17 Major Burns	<ul style="list-style-type: none"> - Mild severe burns - Moderately severe burns



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	Critical illness category	Pre-critical medical conditions
18	Major Cancer	<ul style="list-style-type: none"> - Carcinoma in situ of specified organs <ul style="list-style-type: none"> - Early prostate cancer - Early thyroid cancer - Early bladder cancer - Early chronic lymphocytic leukaemia - Early melanoma - Gastro-intestinal stromal tumour (GIST) - Carcinoma in situ of specified organs treated with radical surgery
19	Major Head Trauma	<ul style="list-style-type: none"> - Facial reconstructive surgery - Intermediate stage major head trauma
20	Major Organ / Bone Marrow Transplantation	<ul style="list-style-type: none"> - Small bowel transplant or corneal transplant - Major organ/bone marrow transplant (on waitlist)
21	Motor Neurone Disease	<ul style="list-style-type: none"> - Early motor neurone disease
22	Multiple Sclerosis	<ul style="list-style-type: none"> - Early multiple sclerosis - Mild multiple sclerosis
23	Muscular Dystrophy	<ul style="list-style-type: none"> - Moderately severe Muscular dystrophy - Spinal-cord disease or injury resulting in bowel and bladder dysfunction
24	Open Chest Heart Valve Surgery	<ul style="list-style-type: none"> - Percutaneous valve surgery - Percutaneous valve replacement or device repair
25	Open Chest Surgery to Aorta	<ul style="list-style-type: none"> - Minimally invasive surgery to aorta or - Large asymptomatic aortic aneurysm
26	Other Serious Coronary Artery Disease	<ul style="list-style-type: none"> - Early stage other serious coronary artery disease - Intermediate stage other serious coronary artery disease
27	Paralysis (Irreversible Loss of Use of Limbs)	<ul style="list-style-type: none"> - Loss of use of one limb - Loss of use of one limb needing a prosthesis
28	Persistent Vegetative State (Apallic Syndrome)	<ul style="list-style-type: none"> - Akinetic Mutism - Locked in syndrome
29	Poliomyelitis	<ul style="list-style-type: none"> - Peripheral Neuropathy - Poliomyelitis (intermediate stage)
30	Primary Pulmonary Hypertension	<ul style="list-style-type: none"> - Early pulmonary hypertension - Secondary pulmonary hypertension
31	Progressive Scleroderma	<ul style="list-style-type: none"> - Early progressive scleroderma - Progressive scleroderma with CREST syndrome



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	Critical illness category	Pre-critical medical conditions
32	Severe Bacterial Meningitis	<ul style="list-style-type: none">- Bacterial meningitis with full recovery- Bacterial meningitis with reversible neurological deficit
33	Severe Encephalitis	<ul style="list-style-type: none">- Viral encephalitis with full recovery- Moderate viral encephalitis with full recovery
34	Stroke with Permanent Neurological Deficit	<ul style="list-style-type: none">- Brain aneurysm surgery or cerebral shunt insertion- Carotid artery surgery
35	Systemic Lupus Erythematosus with Lupus Nephritis	<ul style="list-style-type: none">- Mild systemic lupus erythematosus- Erythematosus- Moderately severe systemic lupus erythematosus with lupus nephritis (early stage)
36	Terminal Illness	-

The definitions of these pre-critical medical conditions can be found at the last section of Early Protect's product summary.

Q4 Is there a waiting period for progressive claims between Pre-critical medical conditions and Critical Illness of the same CI category?

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims.

However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.

Q5 What do we pay for the Special Benefit under Early Protect?

If the life assured is diagnosed with any of the 12 listed medical conditions below, we pay 20% of the Early Protect benefit sum assured up to \$25,000 for each medical condition and up to a maximum of \$200,000 for each life assured.

We pay this benefit once for each of the listed Special benefit medical conditions up to 10 different medical conditions.

A claim under this benefit will not affect the sum assured of Early Protect benefit.

List of medical conditions:



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1. Diabetic complications
2. Osteoporosis with fractures
3. Severe rheumatoid arthritis

These 3 medical conditions will cover the life assured up to the age of 84 years old only.

Juvenile medical conditions:

4. Glomerulonephritis with Nephrotic Syndrome
5. Haemophilia A and Haemophilia B
6. Insulin Dependent Diabetes Mellitus
7. Kawasaki Disease with heart complications
8. Osteogenesis Imperfecta
9. Rheumatic Fever with valvular impairment
10. Still's Disease
11. Wilson's Disease
12. Hand Foot Mouth Disease with serious complications

These Juvenile medical conditions will cover the life assured up to the age of 17 years old only.

The definitions of these 12 special benefit medical conditions can be found in Early Protect's product summary.

The Special Benefit automatically terminates once Early Protect has been fully claimed or terminated.

Q6 What is the survival period for this benefit?

The life assured must survive 7 days from the date of diagnosis before Early Protect benefit and Special benefit is paid out. Otherwise, we pay only the Death benefit.

Q7 What are the policy term and premium payment term option?

The policy term and premium term of Early Protect will follow the policy term and premium term of the PRUActive Protect policy.

Q8 The minimum policy term of Early Protect is 10 years. Can I still MTA Early Protect if my remaining policy term is less than 10 years?

No, you can only MTA Early Protect if your remaining policy term is 10 years or more.

NEW BUSINESS

Q9 Who is eligible to apply?



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The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q11 Is there underwriting for this benefit?

Yes, Full underwriting (Medical and Financial) is applicable.

Q12 What is the max early/intermediate/pre-critical stage CI sum assured that my customer can buy for Early Protect?

When Early Protect Plus is not attached:

Up to \$350k per life assured

When Early Protect Plus is attached:

Up to \$200k per life assured

All other existing early/intermediate/pre-critical stage CC benefits customer has with prudential will add to the above limit mentioned.

Q13 What is the max early/intermediate/pre-critical stage CI sum assured that juveniles and non-income earners can buy for Early Protect?

When Early Protect Plus is not attached:

Up to \$350k per life assured

When Early Protect Plus is attached:

Up to \$200k per life assured

All other existing early/intermediate/pre-critical stage CC benefits customer has with prudential will add to the above limit mentioned.

Q14 Will claims under the Special benefit be aggregated with other existing products?

No, Special benefit will not be aggregated with other products.

PREMIUM RATES

Q15 Are the premium rates guaranteed?

No, premium rates are not guaranteed.

Q16 Is there a Large Sum Assured Discount for Early Protect?

No, there is no large sum assured discount for Early Protect.



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POLICY SERVICES

Q17 Can customer choose to reduce the Sum Assured of Early Protect?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$500.

Q18 Can customer choose to increase the Sum Assured of Early Protect?

No, increase in sum assured is not allowed.

Q19 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.

Q20 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy

CLAIMS

Q21 Does a claim under Critical Illness reduce the sum assured of Early Protect?

Yes, the 100% of Early Protect's sum assured includes claims for any of the 36 critical illness under PRUActive Protect's Critical Illness benefit.

If there is a claim under PRUActive Protect's Critical Illness benefit, this could result in the reduction of the sum assured of Early Protect or the termination of this supplementary benefit.

Q22 Does a claim under Early Protect benefit reduce the sum assured of PRUActive Protect?

Yes, any pre-critical medical conditions payout under Early Protect will reduce the sum assured of the PRUActive Protect policy

The Early Protect benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

Q23 Can my customer claim for recurring pre-critical medical condition under Protect Plus?

No, to claim recurring pre-critical medical conditions, customer must add Early Protect Plus.



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Q24 Is there a waiting period for progressive claims between Pre-critical medical conditions and Critical Illness of the same CI category?

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims.

However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.

Q25 Can my customer make 2 pre-critical claims at the same time?

No, if the life assured is diagnosed with more than one pre-critical illness at the same time, we will only pay for one pre-critical illness that has the highest severity level.

Q26 Does a claim under Special benefit reduce the sum assured of PRUActive Protect?

No, a claim under this benefit will not affect the sum assured of PRUActive Protect.

Q27 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.

FACT FIND

Q28 Which is the financial goal that is required to be addressed and analysed before recommending Early Protect?

The financial goal is 'Critical Illness Expenses'.

GENERAL

Q29 Is the Early Protect training session compulsory?

In order to give advice and market PRUActive Protect and its supplementary benefits, you are required to complete the e-Learn module and pass the course-end assessment for the benefit.



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Early Protect Plus

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q1 What is Early Protect Plus?

Early Protect Plus is a supplementary benefit, which restores the Early Protect sum assured to 100% after a Pre-critical medical condition claim.

Q2 What do we pay under Early Protect Plus?

The life assured is able to claim up to a maximum of 500% of the Early Protect sum assured for a Pre-critical medical condition claim.

This 500% of the sum assured includes claims for any of the critical illnesses under the PRUActive Protect policy.

Once there has been a successful claim for a pre-critical medical condition, the total sum assured will be reduced by the amount paid out under this benefit. The total sum assured would be 500% of the basic sum assured for your PRUActive Protect policy.

Q3 Is there a waiting period for recurring pre-critical medical conditions?

Waiting Period:

- For recurring pre-critical medical condition under the different categories, the waiting period is 12 months between the dates of diagnosis.
- For recurring pre-critical medical condition under the same category, the waiting period is 24 months between the dates of diagnosis.

Q4 Is there a waiting period for progressive claims between Pre-critical medical conditions and Critical Illness of the same CI category?

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims.

However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.



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Q5 What is a recurring pre-critical medical conditions under the same category?

Recurring pre-critical medical conditions under the same category means the pre-critical medical condition is a recurrence or metastasis of the same pre-critical medical condition that you claimed previously.

To avoid any doubt, the recurring pre-critical medical condition of the same category, must meet the criteria set out in the pre-critical medical definitions covered in this policy, and will not apply to any illness which falls outside this definition. In addition, the medical evidence must clearly show that the initial or previous pre-critical medical condition (which has been admitted) was already in complete remission before the recurring pre-critical medical condition was diagnosed.

Complete Remission means complete absence of clinical and objective evidence of any previous pre-critical medical claimed condition(s), verified by a registered specialist, evidenced by absence of any signs, symptoms and supported by clinical, radiological, histological and laboratory evidence in regular follow-ups.

Q6 What is a recurring pre-critical medical conditions under different categories?

Recurring pre-critical medical conditions under a different category means any of the following conditions:

- The claimed condition is from a different pre-critical medical category as the previous pre-critical medical claim that has been admitted under this policy;
- The claimed condition is from a different pathological and histological type and occurs in a different organ* or site as all previous pre-critical medical claims that has been admitted under this policy; or
- The claimed condition is newly diagnosed with a primary cause that is identified as not related or due to any previous pre-critical medical claim that has been admitted under this policy.

* Paired organs such as breast, ear, eyes, kidneys, lungs, ovary & testicles are considered as same organ.

To avoid any doubt, the recurring pre-critical medical condition of a different category, must meet the criteria set out in the pre-critical medical definitions covered in this policy, and will not apply to any illness which falls outside this definition.

Q7 What is the survival period for this benefit?

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out. Otherwise, we pay only the Death benefit



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Q8 What are the policy term and premium payment term option?

The policy term and premium term of Early Protect Plus will follow the policy term and premium term of the PRUActive Protect policy.

Q9 The minimum policy term of Early Protect Plus is 10 years. Can I still MTA Early Protect if my remaining policy term is less than 10 years?

No, you can only MTA Early Protect Plus if your remaining policy term is 10 years or more.

NEW BUSINESS

Q10 Who is eligible to apply?

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q11 Is there underwriting for this benefit?

Yes, Full underwriting (Medical and Financial) is applicable.

Q12 What is the max early/intermediate/pre-critical stage CI sum assured that my customer can buy for Early Protect?

When Early Protect Plus is not attached:

Up to \$350k per life assured

When Early Protect Plus is attached:

Up to \$200k per life assured

Please take note that all other existing early/intermediate/pre-critical stage CC benefits customer has with prudential will add to the \$350k limit.

Example 1:

Customer has a PRUActive Life with Early Crisis Care benefit \$30k after Multiplier Benefit.

Max Sum Assured for Early Protect with Early Protect Plus after aggregation with existing early/intermediate/pre-critical stage CC benefits is:

\$200k or (\$350K – existing early/intermediate/pre-critical stage CC benefits) whichever is lesser

= \$200k or (\$350k - \$30k = \$320k) whichever is lesser

= \$200k

In this above example, the max Sum Assured client can propose is \$200K for Early Protect with Early Protect Plus attached.



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Example 2:

Customer has a PRUActive Life with Early Crisis Care benefit \$160k after Multiplier Benefit.

Max Sum Assured for Early Protect with Early Protect Plus after aggregation with existing early/intermediate/pre-critical stage CC benefits is:

\$200k or (\$350K – existing early/intermediate/pre-critical stage CC benefits) whichever is lesser
= \$200k or (\$350k - \$160k = \$190k) whichever is lesser
= \$190k

In this above example, the max Sum Assured client can propose is \$190K for Early Protect with Early Protect Plus attached.

Pls take note that this calculation is for your own reference only, not to be shared with the customer.

Q13 What is the max early/intermediate/pre-critical stage CI sum assured that juveniles and non-income earners can buy for Early Protect?

The max early/intermediate/pre-critical stage CI sum assured for juveniles and non-income earners is the same as those for adults and income-earners. Please refer to question 12.

Q14 What is the max early/intermediate/pre-critical stage CI sum assured that juveniles/non-income earners can buy for Early Protect when Early Protect Plus is added to the plan?

The max early/intermediate/pre-critical stage CI sum assured that juveniles/non-income can buy for Early Protect when Early Protect Plus is added to the plan is the same as those for adults and income-earners. Please refer to question 12.

PREMIUM RATES

Q15 Are the premium rates guaranteed?

No, premium rates are not guaranteed.

Q16 Is there a Large Sum Assured Discount for Early Protect Plus?

No, there is no large sum assured discount for Early Protect Plus.



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POLICY SERVICES

Q17 Can customer choose to reduce the Sum Assured of Early Protect Plus?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$500.

Q18 Can customer choose to increase the Sum Assured of Early Protect Plus?

No, increase in sum assured is not allowed.

Q19 Can customer choose to terminate Early Protect Plus after a claim on PRUActive Protect?

No, once you have made a Critical Illness benefit or Early Protect benefit claim, you cannot end this benefit.

Q20 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.

Q21 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy

CLAIMS

Q22 Does a claim under pre-critical medical conditions reduce the sum assured of Early Protect when Early Protect Plus is attached?

Once there has been a successful claim for a pre-critical medical condition, the total sum assured will be reduced by the amount paid out under this benefit.

The total sum assured would be 500% of the basic sum assured for your PRUActive Protect policy.



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Q23 Can my customer make a claim for recurring pre-critical medical conditions of the same category?

Yes, for recurring pre-critical medical condition under the same category, the waiting period is 24 months between the dates of diagnosis.

Example:

Customer is diagnosed with Early breast cancer on 14 May 2020. We pay 100% of Early Protect SA.

On 1 Apr 2022, she is declared to be in complete remission.

On 15 May 2022, she is diagnosed with Early breast cancer again. We pay another 100% of Early Protect SA.

Q24 Can my customer make 2 pre-critical medical conditions claims at the same time?

No, if the life assured is diagnosed with more than one pre-critical medical conditions at the same time, we will only pay for one pre-critical medical condition that has the highest severity level.

Q25 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.

FACT FIND

Q26 Which is the financial goal that is required to be addressed and analysed before recommending Early Protect Plus?

The financial goal is 'Critical Illness Expenses'.

GENERAL

Q27 Is the Early Protect Plus training session compulsory?

In order to give advice and market PRUActive Protect and its supplementary benefits, you are required to complete the e-Learn module and pass the course-end assessment for the benefit.



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Life Protect Plus

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q1 What is Life Protect Plus?

Life Protect Plus is a supplementary benefit, which offers financial protection against Death and Terminal Illness.

Q2 What do we pay for Death Benefit?

We pay the sum assured for death shown in the certificate of life assurance.

The whole policy automatically ends once we have paid a claim for this benefit.

A claim under the Critical Illness benefit of PRUActive Protect will not reduce the sum assured of Life Protect Plus.

This death benefit will continue to cover the life assured even after the CI benefit for PRUActive Protect has been fully claimed as long as the customer continues to pay premium for the benefit.

Q3 What do we pay for Terminal Illness Benefit?

If the life assured is diagnosed as having a Terminal Illness, we pay the Accelerated Terminal Illness Benefit shown in your certificate of life assurance.

“**Terminal Illness**” is defined as a condition which, in the opinion of a registered medical practitioner, and our appointed doctor agrees, is highly likely to lead to death within 12 months.

Once we pay an Accelerated Terminal Illness Benefit claim, the Accelerated Terminal Illness Benefit ends. The following will also apply:

- a) If the sum assured of the Death Benefit is the same as the sum assured of the Accelerated Terminal Illness Benefit, the policy and all its benefits will end.
- b) If the sum assured of the Death Benefit is more than the sum assured of the Accelerated Terminal Illness Benefit, we will reduce the sum assured of the Death Benefit to an amount equal to the difference between the sum assured of the Death Benefit and the sum assured of the Accelerated Terminal Illness Benefit. You can continue the policy for this



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Death Benefit and any other supplementary benefits (if applicable) by paying the necessary premiums.

Q4 What are the policy term and premium payment term option?

The policy term and premium term of Life Protect Plus will follow the policy term and premium term of the PRUActive Protect policy.

Q5 The minimum policy term of Life Protect Plus is 10 years. Can I still MTA Life Protect Plus if my remaining policy term is less than 10 years?

No, you can only MTA Life Protect Plus if your remaining policy term is 10 years or more.

NEW BUSINESS

Q6 Who is eligible to apply?

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q7 Is there underwriting for this benefit?

Yes, Full underwriting (Medical and Financial) is applicable.

PREMIUM RATES

Q8 Are the premium rates guaranteed?

Yes, premium rates for Life Protect Plus is guaranteed.

Q9 Is there a Large Sum Assured Discount (LSAD) for Life Protect Plus?

Yes, LSAD is applicable to Life Protect Plus.

Life Protect Plus LSAD table:

Increase/Decrease from basic premium as % of Annual Premium			
Sum assured	Expiry Age		
	≤ 65 anb	66 - 75 anb	76 - 100 anb
≤ \$499,999	25.00%	25.00%	25.00%
\$500,000 - \$749,999	0.00%	0.00%	0.00%
\$750,000 - \$999,999	-10.00%	-7.50%	-5.00%
\$1,000,000 - \$1,999,999	-20.00%	-15.00%	-10.00%
≥ \$2,000,000	-23.00%	-17.00%	-11.00%



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POLICY SERVICES

Q10 Can customer choose to reduce the Sum Assured of Life Protect Plus?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$500.

Q11 Can customer choose to increase the Sum Assured of Life Protect Plus?

No, increase in sum assured is not allowed.

Q12 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.

Q13 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy

CLAIMS

Q14 Does a claim under Critical Illness reduce the sum assured of Life Protect Plus?

No, a claim under Critical Illness will not reduce the sum assured of Life Protect Plus.

Life Protect Plus benefit will continue to cover the life assured even after the CI benefit for PRUActive Protect has been fully claimed as long as the customer continues to pay premium for the benefit.

Q15 Does a claim under Early Protect benefit reduce the sum assured of Life Protect Plus?

No, a claim under Early Protect will not reduce the sum assured of Life Protect Plus.

Life Protect Plus benefit will continue to cover the life assured even after the CI benefit for PRUActive Protect has been fully claimed as long as the customer continues to pay premium for the benefit.

Q16 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.



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FACT FIND

Q17 Which is the financial goal that is required to be addressed and analysed before recommending Life Protect Plus?

The financial goal is 'Protect Income Upon Death'.

GENERAL

Q18 Is the Life Protect Plus training session compulsory?

In order to give advice and market PRUActive Protect and its supplementary benefits, you are required to complete the e-Learn module and pass the course-end assessment for the benefit.



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Severe Infections Protect

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q1 What is Severe Infections Protect?

Severe Infections Protect is a supplementary benefit, which offers financial protection against serious infectious diseases.

Q2 What do we pay for Severe Infections Protect Benefit?

We pay the Severe Infections Protect benefit sum assured if the life assured:

- is diagnosed with any one of the serious infectious diseases listed below; and
- is admitted to the Intensive Care Unit (ICU) as a result of the serious infectious disease, for at least five continuous days.

We pay this benefit once only and up to a maximum of \$100,000 per life assured.

A claim under this benefit will not affect the sum assured of your PRUActive Protect policy.

Q3 What serious infectious disease are covered?

- 1 Avian Influenza
- 2 Nipah Virus Infection
- 3 Plague
- 4 Poliomyelitis
- 5 Rabies
- 6 Yellow Fever
- 7 Botulism
- 8 Dengue Fever
- 9 Dengue Haemorrhagic Fever
- 10 Diphtheria
- 11 Japanese Encephalitis
- 12 Malaria
- 13 Measles
- 14 Rubella
- 15 Zika Virus Infection
- 16 Cholera
- 17 Haemophilus Influenzae Type b Disease
- 18 Leptospirosis
- 19 Meningococcal Disease
- 20 Murine Typhus



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- 21 Paratyphoid
- 22 Typhoid Fever
- 23 Tetanus
- 24 Tuberculosis
- 25 Campylobacteriosis
- 26 Hepatitis A, acute
- 27 Hepatitis B, acute
- 28 Hepatitis C, acute
- 29 Hepatitis E, acute
- 30 Legionellosis
- 31 Leprosy
- 32 Melioidosis
- 33 Pertussis
- 34 Pneumococcal Disease (Invasive)
- 35 Salmonellosis (non-typhoidal)

Q4 What is not covered under Severe Infections Protect benefit?

We do not pay if the life assured is diagnosed with an infectious disease that arises directly or indirectly out of one of the following:

- Any infectious disease that is not set out in list above
- Any pre-existing medical condition, except for any infectious disease which you were previously diagnosed with and had fully recovered from before the cover start date of the benefit.
- Any infectious disease diagnosed within 14 days from the cover start date of the benefit.
- Pandemics and communicable diseases requiring quarantine by law.

Q5 What is the survival period for this benefit?

The life assured must survive 30 days from the date of diagnosis before any benefit is paid out.

Q6 What are the policy term and premium payment term option?

The policy term and premium term of Severe Infections Protect will follow the policy term and premium term of the PRUActive Protect policy.

Q7 The minimum policy term of Severe Infections Protect is 10 years. Can I still MTA Severe Infections Protect if my remaining policy term is less than 10 years?

No, you can only MTA Severe Infections Protect if your remaining policy term is 10 years or more.



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NEW BUSINESS

Q8 Who is eligible to apply?

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q9 Is there underwriting for this benefit?

Yes, Full underwriting (Medical and Financial) is applicable.

PREMIUM RATES

Q10 Are the premium rates guaranteed?

No, premium rates are not guaranteed.

Q11 Is there a Large Sum Assured Discount for Severe Infections Protect?

No, there is no large sum assured discount for Severe Infections Protect.

POLICY SERVICES

Q12 Can customer choose to reduce the Sum Assured of Severe Infections Protect?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$500.

Q13 Can customer choose to increase the Sum Assured of Severe Infections Protect?

No, increase in sum assured is not allowed.

Q14 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.

Q15 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy



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CLAIMS

Q16 Does a claim under Critical Illness reduce the sum assured of Severe Infections Protect?

No, a claim under Critical Illness will not reduce the sum assured of Severe Infections Protect.

Severe Infections Protect benefit will continue to cover the life assured even after the CI benefit for PRUActive Protect has been fully claimed as long as the customer continues to pay premium for the benefit.

Q17 Does a claim under Early Protect benefit reduce the sum assured of Severe Infections Protect?

No, a claim under Early Protect will not reduce the sum assured of Severe Infections Protect.

Severe Infections Protect benefit will continue to cover the life assured even after the CI benefit for PRUActive Protect has been fully claimed as long as the customer continues to pay premium for the benefit.

Q18 Does a claim under Severe Infections Protect reduce the sum assured of PRUActive Protect policy?

No, a claim under this benefit will not affect the sum assured of PRUActive Protect.

Q19 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.

FACT FIND

Q20 Which is the financial goal that is required to be addressed and analysed before recommending Severe Infections Protect?

The financial goal is 'Loss of Income due to Accident/ Illness'.

GENERAL

Q21 Is the Severe Infections Protect training session compulsory?

In order to give advice and market PRUActive Protect and its supplementary benefits, you are required to complete the e-Learn module and pass the course-end assessment for the benefit.



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Monthly Benefit

FREQUENTLY ASKED QUESTIONS

PRODUCT FEATURES

Q1 What is Monthly Benefit?

Monthly benefit is a supplementary benefit, which offers financial protection in the form of a monthly benefit against critical illness.

Q2 What do we pay for Monthly Benefit?

If a life assured has made a successful claim on the Critical Illness benefit, we pay a Monthly benefit for a selected amount over a period of time.

We pay this benefit once on the first Critical Illness benefit claim only. The Monthly benefit payments will start from the next month after the date we paid the critical illness claim.

Once the stream of monthly income has started to be paid out, it will continue to pay for the selected no of years even if the policy has been terminated due to policy expiry.

If the life assured dies during the monthly payout period, we will pay the Death benefit instead. The Monthly benefit ends and the PRUActive Protect policy will also end.

Q3 What is not covered under Monthly Benefit?

We will not pay this benefit:

- On another Critical Illness claim under the Protect Plus benefit
- On a pre-critical medical condition claim under the Early Protect or Early Protect Plus benefits; or
- On a Crisis Care Accelerator claim.

Q4 What is the survival period for this benefit?

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out.

Q5 What are the policy term and premium payment term option?

The policy term and premium term of Monthly benefit will follow the policy term and premium term of the PRUActive Protect policy.



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Q6 The minimum policy term of Monthly benefit is 10 years. Can I still MTA Monthly benefit if my remaining policy term is less than 10 years?

No, you can only MTA Monthly benefit if your remaining policy term is 10 years or more.

NEW BUSINESS

Q7 Who is eligible to apply?

The plan is available to all Singaporeans, Singapore permanent residents and foreigners with valid passes.

Q8 Is there underwriting for this benefit?

Yes, Full underwriting (Medical and Financial) is applicable.

PREMIUM RATES

Q9 Are the premium rates guaranteed?

No, premium rates are not guaranteed.

Q10 Is there a Large Sum Assured Discount for Monthly Benefit?

No, there is no large sum assured discount for Monthly Benefit.

POLICY SERVICES

Q11 Can customer choose to reduce the Sum Assured of Monthly benefit?

Customer can apply to reduce the sum assured of his policy if there have been no successful claims (excluding additional benefit, special benefit, spouse waiver and child cover claims) on the policy.

The minimum reduction in sum assured amount is in multiples of \$100 for monthly benefit.

Q12 Can customer choose to increase the Sum Assured of Monthly benefit?

No, increase in sum assured is not allowed.

Q13 Is Mid-Term Add (MTA) of supplementary benefit(s) allowed?

Yes. MTA of supplementary benefits are allowed with full medical underwriting. Do note that terms and conditions of the respective supplementary benefits apply.



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Q14 What will happen to the policy in the event of non-payment of premium?

The policy will lapse as there is no cash value on the policy.

CLAIMS

Q15 Does a claim under Critical Illness reduce the sum assured of Monthly benefit?

No, a claim under Critical Illness will not reduce the sum assured of Monthly benefit.

If a life assured has made a successful claim on the Critical Illness benefit, we pay a Monthly benefit for a selected amount over a period of time.

Q16 Does a claim under Early Protect benefit reduce the Monthly benefit amount?

No, a claim under Early Protect will not reduce the Monthly benefit amount.

Q17 Will the Monthly benefit be paid out upon recurring Critical Illness when Protect Plus is attached?

No, we pay this benefit once on the first Critical Illness benefit claim only.

Q18 What happens if the life assured dies during the monthly payout period?

If the life assured dies during the monthly payout period, we will pay the Death benefit instead. The Monthly benefit ends and the PRUActive Protect policy will also end.

Q19 What happens upon a claim should there be outstanding loans (eg. policy loan or surgical and nursing loan)?

No loans are allowed under PRUActive Protect plan.

FACT FIND

Q20 Which is the financial goal that is required to be addressed and analysed before recommending Monthly Benefit?

The financial goal is 'Loss of Income due to Accident/ Illness'.

GENERAL

Q21 Is the Monthly Benefit training session compulsory?

In order to give advice and market PRUActive Protect and its supplementary benefits, you are required to complete the e-Learn module and pass the course-end assessment for the benefit.



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PRUActive Protect

1. MARKET COMPARISON FOR PRUACTIVE PROTECT

We have made a comparison on the features, benefits and premiums of similar products offered in the market.

This will give you a clearer picture of the features and positioning of PRUActive Life.

1. PACS – PRUActive Protect
2. Company A – PCCV/PCCL Plan
3. Company M – RCC Plan
4. Company Av – MMPIV Plan

Important Notes:

- *The information presented is strictly confidential and for internal use only and cannot be reproduced, amended or circulated in whole or in part to anyone, including policyholders and potential prospects, for whatever purpose or reason.*
- *You should refer to respective product policy documents for exact wordings and details.*
- *This comparison does not include information on all similar products. PACS does not guarantee that all aspects of the products that have been illustrated. You may wish to conduct your own comparison for products that are listed in www.comparefirst.sg.*



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2. FEATURES COMPARISON WITH OTHER MULTI-PAY PLANS

Company	PACS	PACS	Co. A	Co. M	Co. Av
Plan Name	PRUActive Protect w Early Protect, Protect Plus and Early Protect Plus	PRUTriple Protect w Early Protector Rider	PCCV/PCCL	RCC w CMA	MMCPV
Policy Limits					
Entry age	1 to 65	1 to 65	1 to 65	1 to 65	1 to 65
Max expiry age	100	75	100	99	99
Policy=premium term	10 to 99	10 to 74	up to age 75 or 100	up to age 75 or 99	10 to 98
No of conditions covered					
Total no of CI conditions	72	71	150	106	132
Special	3	4	15	18	27
Juvenile	9	nil	10	nil	22
Pre-early	nil	nil	10	nil	22
Total no of additional conditions	12	4	25	18	49
Claim Limits					
CI Recurrence	Up to 500% for all Pre-Critical and Critical stage categories. We offer Recurrence and Relapse Cover for all Critical Illnesses	300% of SA	The Power Reset Benefit fully restores your coverage amount, once 12 months have passed from the last claim, allowing you to make multiple claims of up to 500% of your coverage amount.	Cover Me Again Option restarts coverage to 100% of basic sum insured after 12 claim-free months from the last CI claim, subject to a max payout of 500% of basic sum insured Additional Major CI benefit gives 200% of sum insured for 6 major advanced stage critical illness	Upon a CI diagnosis, we pay 300% of the Sum Assured less any claim paid for the Early and Intermediate Stage of the same CI Group (per claim). Waiting period is 1-year for the Severe stage CI benefit. Maximum total payout is 600% of the SA
CI Relapse		Nil	Up to 200% Additional SA with the Power Relapse Benefit if you suffer from the same critical illness, once 24 months have passed from the last claim Applies to 5 Power Relapse Critical Illnesses	Recurring Cancer benefit gives 100% of sum insured capped at 200% of basic sum insured for subsequent advanced stage major cancer conditions	Upon diagnosis of a) any one of the 6 specified Severe Stage CIs covered (after the CI Benefit has ceased) b) any one of the 6 Recurrent CIs we pay 150% of the Sum Assured (per claim), up to 2 claims. Waiting period is 2-years for the Recurrent CI benefit
CI total max claim limit	500% of SA	300% of SA	700% of SA	900% of SA	900% of SA
Pre-Critical Recurrence	Up to 500% for all Pre-Critical and Critical stage categories.	300% of SA	500% of SA	500% of SA	No pre-critical recurrence/relapse cover
Pre-Critical Relapse	We offer both Recurrence and Relapse Cover for all Pre-Critical conditions	Nil	Nil	Nil	
Pre-Critical total max claim limit	500% of SA	300% of SA	500% of SA	500% of SA	
Other benefits					
Death Benefit	20% of CI SA (regardless of CI claimed)	100% of CI SA - CI claimed	100% of CI SA - CI claimed + \$5,000	Total premium paid - CI claimed	\$5,000
TI Benefit	Included in CI	Included in CI	Included in CI	Included in CI	Included in CI
Special Features	1. Crisis Care Accelerator Benefit 2. Guaranteed Convertibility Option 3. Additional Benefit 4. Free Child Cover 5. Spouse Waiver Benefit	1. Guaranteed Convertibility Option	1. Pre-Early Benefit	1. Free coverage for your child in the event of advanced stage critical illness 2. Free health check (transferable) every 2 years	1. Choice of currency: SGD, USD, GBP, EUR, AUD and HKD 2. CI premium waiver 3. Pre-early benefit 4. Intensive care benefit
Unique Options	1. Life Protect Plus 2. Monthly Benefit 3. Severe Infections Protect		Option to choose plan which has maturity and surrender benefit	Cover Me Again Option	Advance Care Option
Premium Comparison 30 Female Non-smoker SA \$100k covered till age 75					
Total Premium	\$1,255	\$1,431	\$1,582	\$1,472	\$1,589

Unique Selling Points of PRUActive Protect:

- Flexible modular structure that allows customers to add on early and multi-pay riders as their budget grows with together with their life stages
- Flexible premium/policy term with yearly options from 10 to 99
- Crisis Care Accelerator that covers serious illness or accidents outside the 36 critical illnesses.
- Total Max claim limit of 500%
- Relapse cover for all Critical Illness conditions
- Relapse cover for all Pre-critical conditions
- Additional Death Benefit 20% of CI SA
- Additional Benefit
- Free Child Cover for CI and Juvenile conditions
- 1-year premium waiver if spouse contracts CI
- Guaranteed convertibility option
- Options to add additional death coverage, severe infectious disease coverage and monthly payout upon CI



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3. PREMIUM COMPARISON WITH PRUTRIPLE PROTECT

Male non-smoker, PAPt CI SA \$100k + Protect Plus with Early Protect SA \$50k + Early Protect Plus

20 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	392	577	1,040		
PRUActive Protect (ECI 50%)	366	465	590	734	884

25 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	477	733	1,292		
PRUActive Protect (ECI 50%)	413	545	695	894	1,018

30 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	570	842	1,361		
PRUActive Protect (ECI 50%)	496	692	872	1,178	1,455

35 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	773	1,094	1,737		
PRUActive Protect (ECI 50%)	607	899	1,189	1,485	1,764

40 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	1,054	1,378	2,038		
PRUActive Protect (ECI 50%)	732	1,215	1,529	1,868	2,120

45 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	1,688	1,916	2,571		
PRUActive Protect (ECI 50%)	965	1,553	1,997	2,503	2,892

50 Male non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	NA	2,569	3,204		
PRUActive Protect (ECI 50%)	NA	1,807	2,428	2,909	3,369



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Female non-smoker, PAPt CI SA \$100k + Protect Plus with Early Protect SA \$50k + Early Protect Plus

20 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	462	593	910		
PRUActive Protect (ECI 50%)	463	534	641	796	1,019

25 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	577	755	1,119		
PRUActive Protect (ECI 50%)	551	626	752	959	1,288

30 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	816	905	1,261		
PRUActive Protect (ECI 50%)	703	775	955	1,346	1,617

35 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	1,103	1,243	1,477		
PRUActive Protect (ECI 50%)	916	1,074	1,278	1,661	1,940

40 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	1,271	1,469	1,696		
PRUActive Protect (ECI 50%)	1,095	1,304	1,590	2,003	2,318

45 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	1,878	1,886	2,192		
PRUActive Protect (ECI 50%)	1,326	1,546	1,872	2,288	2,651

50 Female non-smoker SA \$100k					
Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
PRUTriple Protect w Early Protector	NA	2,232	2,667		
PRUActive Protect (ECI 50%)	NA	1,721	2,219	2,587	2,958



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4. PREMIUM COMPARISON WITH OTHER MULTI-PAY PLANS

Male non-smoker, PAPt \$100k SA for CI + Protect Plus + Early Protect + Early Protect Plus

20 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,386		
Co. A	PCCL					1,890
Co. M	RCC w CMA			1,024		1,605
Co. Av	MMCPV	514	789	1,157	1,576	1,810
PACS	PRUActive Protect	494	629	798	1,002	1,204
25 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,636		
Co. A	PCCL					2,247
Co. M	RCC w CMA			1,211		2,140
Co. Av	MMCPV	528	811	1,210	1,755	2,233
PACS	PRUActive Protect	541	709	908	1,197	1,400
30 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,899		
Co. A	PCCL					2,602
Co. M	RCC w CMA			1,418		2,685
Co. Av	MMCPV	643	938	1,465	2,167	2,890
PACS	PRUActive Protect	628	901	1,140	1,535	1,924
35 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			2,206		
Co. A	PCCL					3,031
Co. M	RCC w CMA			1,769		3,887
Co. Av	MMCPV	852	1,187	1,799	2,748	3,874
PACS	PRUActive Protect	748	1,143	1,514	1,916	2,301
40 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			2,598		
Co. A	PCCL					3,573
Co. M	RCC w CMA			2,125		5,067
Co. Av	MMCPV	1,151	1,614	2,284	3,889	5,326
PACS	PRUActive Protect	880	1,493	1,910	2,381	2,726
45 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			3,092		
Co. A	PCCL					4,309
Co. M	RCC w CMA			3,012		7,540
Co. Av	MMCPV	1,704	2,279	3,253	4,970	7,842
PACS	PRUActive Protect	1,142	1,852	2,411	3,056	3,589
50 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			3,895		
Co. A	PCCL					5,565
Co. M	RCC w CMA			4,081		10,246
Co. Av	MMCPV		3,219	4,593	6,975	9,374
PACS	PRUActive Protect		2,112	2,886	3,477	4,089
55 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			6,649		
Co. A	PCCL					11,214
Co. M	RCC w CMA			5,945		12,696
Co. Av	MMCPV					
PACS	PRUActive Protect		2,758	3,993	5,344	6,025



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Female non-smoker, PAPt \$100k SA for CI + Protect Plus + Early Protect + Early Protect Plus

20 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,182		
Co. A	PCCL					1,762
Co. M	RCC w CMA			1,077		1,638
Co. Av	MMCPiV	636	862	1,206	1,742	1,961
PACS	PRUActive Protect	631	726	879	1,109	1,384
25 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,360		
Co. A	PCCL					2,069
Co. M	RCC w CMA			1,251		2,134
Co. Av	MMCPiV	793	959	1,309	1,964	2,382
PACS	PRUActive Protect	729	820	990	1,299	1,712
30 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,582		
Co. A	PCCL					2,368
Co. M	RCC w CMA			1,472		2,621
Co. Av	MMCPiV	1,075	1,181	1,589	2,352	2,981
PACS	PRUActive Protect	914	997	1,255	1,746	2,136
35 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			1,803		
Co. A	PCCL					2,727
Co. M	RCC w CMA			1,866		3,577
Co. Av	MMCPiV	1,476	1,606	1,972	2,820	3,812
PACS	PRUActive Protect	1,163	1,365	1,638	2,137	2,549
40 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			2,130		
Co. A	PCCL					3,192
Co. M	RCC w CMA			2,151		4,374
Co. Av	MMCPiV	1,963	2,144	2,516	3,591	4,826
PACS	PRUActive Protect	1,354	1,626	2,007	2,578	3,017
45 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			2,637		
Co. A	PCCL					3,775
Co. M	RCC w CMA			2,913		5,994
Co. Av	MMCPiV	2,552	2,905	3,387	4,334	6,191
PACS	PRUActive Protect	1,607	1,888	2,300	2,868	3,365
50 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			3,115		
Co. A	PCCL					4,451
Co. M	RCC w CMA			3,759		7,768
Co. Av	MMCPiV		3,690	3,681	5,662	7,711
PACS	PRUActive Protect		2,068	2,653	3,172	3,688
55 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. A	PCCV			5,270		
Co. A	PCCL					9,141
Co. M	RCC w CMA			4,441		10,105
Co. Av	MMCPiV					
PACS	PRUActive Protect		2,316	3,184	4,195	5,057



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5. PREMIUM COMPARISON WITH OTHER CI + EARLY STAGE CI PLANS

Male non-smoker, PAPt \$100k SA for CI + Early Protect

20 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	511	794	958	1,163	
Co. Av	MECP	NA	539	838	988	1,397
PACS	PRUActive Protect	365	474	619	760	927
25 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA					
Co. Av	MECP	378	627	995	1,184	1,710
PACS	PRUActive Protect	395	530	697	906	1,058
30 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	708	1,074	1,323	1,598	
Co. Av	MECP	448	750	1,199	1,436	2,100
PACS	PRUActive Protect	447	681	877	1,035	1,290
35 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	708	1,074	1,323	1,598	
Co. Av	MECP	550	913	1,465	1,769	2,584
PACS	PRUActive Protect	512	839	1,146	1,406	1,655
40 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	1,027	1,485	2,303	2,629	
Co. Av	MECP	709	1,137	1,823	2,218	3,191
PACS	PRUActive Protect	601	1,038	1,440	1,781	2,049
45 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	1,027	1,485	2,303	2,629	
Co. Av	MECP	952	1,439	2,300	2,814	3,948
PACS	PRUActive Protect	764	1,245	1,778	2,151	2,562
50 Male non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA					
Co. Av	MECP		1,839	2,930	3,628	4,872
PACS	PRUActive Protect	NA	1,494	2,204	2,528	2,989



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Female non-smoker, PAPt \$100k SA for CI + Early Protect

20 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	555	730	983	1,183	
Co. Av	MECP	438	574	743	872	1,222
PACS	PRUActive Protect	441	512	643	796	967

25 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA					
Co. Av	MECP	519	676	877	1,042	1,490
PACS	PRUActive Protect	497	565	712	923	1,124

30 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	775	1,063	1,383	1,633	
Co. Av	MECP	682	874	1,129	1,355	1,819
PACS	PRUActive Protect	619	697	951	1,084	1,355

35 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	775	1,063	1,383	1,633	
Co. Av	MECP	890	1,112	1,434	1,738	2,215
PACS	PRUActive Protect	759	930	1,189	1,460	1,752

40 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	1,065	1,688	2,183	2,469	
Co. Av	MECP	1,137	1,373	1,776	2,181	2,686
PACS	PRUActive Protect	883	1,132	1,505	1,859	2,191

45 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA	1,065	1,688	2,183	2,469	
Co. Av	MECP	1,407	1,611	2,091	2,614	3,248
PACS	PRUActive Protect	1,050	1,320	1,719	2,116	2,493

50 Female non-smoker SA \$100k						
Company name	Plan name	to age 55	to age 65	to age 75	to age 85	to age 99/100
Co. G	CCA					
Co. Av	MECP		1,838	2,424	3,113	3,902
PACS	PRUActive Protect	NA	1,463	2,015	2,395	2,770



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6. PREMIUM COMPARISON WITH OTHER CI STANDALONE PLANS

Male non-smoker, PAPt \$100k SA for CI

30 Male non-smoker SA \$100k				
Company name	Plan name	to age 75	to age 85	to age 99/100
Co. G	GFC		609	
Co. Av	MCCP	393	648	
PACS	PRUActive Protect	417	475	NA
40 Male non-smoker SA \$100k				
Company name	Plan name	to age 75	to age 85	to age 99/100
Co. G	GFC		1,083	
Co. Av	MCCP	749	1,190	
Co. M	CSA		1,423	
Co. A	PCC			1,511
PACS	PRUActive Protect	805	931	1,049
50 Male non-smoker SA \$100k				
Company name	Plan name	to age 75	to age 85	to age 99/100
Co. G	GFC		1,748	
Co. Av	MCCP			
Co. M	CSA		2,562	
Co. A	PCC			2,400
PACS	PRUActive Protect	NA	1,668	1,889

Female non-smoker, PAPt \$100k SA for CI

30 Female non-smoker SA \$100k				
Company name	Plan name	to age 75	to age 85	to age 99/100
Co. G	GFC		524	
Co. Av	MCCP	356	600	
PACS	PRUActive Protect	466	504	NA
40 Female non-smoker SA \$100k				
Company name	Plan name	to age 75	to age 85	to age 99/100
Co. G	GFC		968	
Co. Av	MCCP	621	1,030	
Co. M	CSA		1,323	
Co. A	PCC			1,450
PACS	PRUActive Protect	825	939	1,091
50 Female non-smoker SA \$100k				
Company name	Plan name	to age 75	to age 85	to age 99/100
Co. G	GFC		1,461	
Co. Av	MCCP			
Co. M	CSA		2,071	
Co. A	PCC			2,098
PACS	PRUActive Protect	NA	1,465	1,620



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7. SUMMARY OF MARKET COMPARISON

PRUActive Protect is structured as a standalone CI plan to help customers meet their CI gap without having to buy a packaged plan with other benefits such as high death coverage and TPD to address budget constraints and over-coverage concerns.

As a multi-pay plan, it is simple to understand, providing both recurring and relapse coverage for all early to late stage critical illness conditions.

Premiums are kept competitive across all most competitors.

PRUActive Protect together with Protect Plus, Early Protect and Early Protect Plus provides the following options which is not offered by most competitors:

1. Flexible premium/policy term with yearly options from 10 to 99

- Only Co. Av offer yearly policy term options from 10 to 99
- Co. A and Co. M only have the option to age 75 or 99/100

This appeals to clients who wish customise their coverage term according to their unique needs

2. Flexible modular structure

- Allows clients to build their coverage according to their unique needs
- Younger clients who have budget constraints can also add on more coverage as their budget grows together with their financial needs

3. Crisis Care Accelerator Benefit

- Allows clients to make claims even if they do not meet the definition of listed Critical Illnesses as long as they meet the definition of the benefit
- Only Co. Av has a similar Intensive Care benefit which needs minimum 5 days stay in ICU and pays out only 20% of CI SA

4. Relapse cover for all CI conditions

- Most insurers offer relapse cover for selected CI conditions but not all
- This unique benefit assures customers of relapse coverage for any CI condition that may occur.

5. Relapse cover for all Pre-Critical conditions

- Most insurers offer recurrence but not relapse cover for early stage critical illnesses
- This unique benefit assures customers that they will be covered if they suffer an early stage CI relapse.

6. Free Child Cover for CI and Juvenile conditions

- Covers both CI and 9 juvenile conditions including HFMD with serious complications
- Only Co. M has a similar benefit that covers only CI

7. 1-year premium waiver if spouse contracts CI

- This benefit is unique to PRUActive Protect

8. Guaranteed Convertibility Option

- This benefit allows customers to replace their PRUActive Protect policy and buy a new available regular premium whole life or endowment policy without showing evidence of good health.

9. Life Protect Plus benefit

- This benefit allows customers to get additional death SA according to their unique needs



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10. Severe Infections Protect benefit

- This benefit allows customers to get additional serious infectious diseases such as dengue fever

11. Monthly benefit

- This benefit allows customers to receive a monthly payout to supplement their income as they recover from Critical Illness.



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PRUActive Protect

SALES & MARKETING PROPOSITION

PRUActive Protect is a new critical illness product that's highly customisable and flexible. It provides comprehensive CI coverage and financial support no matter which life stage our customers are at.

Protect Plus, Early Protect, Early Protect Plus, Life Protect Plus, Severe Infections Protect and Monthly Benefit offer options for customers who want more comprehensive coverage.

Here are some **Marketing Proposition**, which you may find useful for promoting **PRUActive Protect**:

Build your coverage according to your needs	<ul style="list-style-type: none"> ▪ We all have different financial needs at different stages of our lives ▪ Choose to add early or recurring riders anytime according to your budget/life stage
Comprehensive Multi-pay coverage	<ul style="list-style-type: none"> ▪ PRUActive Protect covers early stage illness relapse ▪ PRUActive Protect covers all recurrence and relapse medical conditions
Comprehensive Critical Illness conditions coverage	<ul style="list-style-type: none"> ▪ Crisis Care Accelerator benefit cover Major Illnesses or even accidents that fall out of the 36 LIA CI definitions
Leave something behind for the family	<ul style="list-style-type: none"> ▪ Additional Death Benefit 20% of CI SA continues to protect you and your family after your CI benefit has been fully claimed and your premium stops as long as your policy is in forced.
Coverage for your (future) children	<ul style="list-style-type: none"> ▪ Free Child Cover when both parents purchase PRUActive Protect ▪ Additional 25% payout based on either parent's CI SA, whichever SA is higher ▪ Covers both CI and juvenile conditions
Premium waiver if Spouse contract CI	<ul style="list-style-type: none"> ▪ 1-year premium waiver if Spouse contract CI ▪ Have your premiums waived for a year when your spouse is diagnosed with Critical Illness to help you focus on getting him better
Coverage till 100	Your customer can choose to be covered till 100 age next birthday.
Options for more coverage	<ul style="list-style-type: none"> ▪ Life Protect Plus ▪ Severe Infections Protect ▪ Monthly Benefit



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Here are some **Market Segments** that you may want to target:

Young working adults aged 20 – 34	PRUActive has 2 groups of target audience in this category: <ul style="list-style-type: none"> • Primary Target Audience: Young Families • Secondary Target Audience: Young Adults
Primary Target Audience: Young Families	<ul style="list-style-type: none"> • Savvy Young Married Couples without kids, aged 30 – 39, • Couples with 1 or 2 kids, aged 40 – 55
Secondary Target Audience: Young Adults	The older of Gen Z and the younger Millennials, aged 20 - 30
Young achievers with plans to start a family	PRUActive Protect lets you be comfortable during and after recovery without added financial burden
Young married couples without children	PRUActive Protect helps you keep like on track so you can continue working towards your goals when you recover.
Small families with 1-2 children	PRUActive Protect makes sure your loved ones will be taken care of in the event of critical illness so that you can recover with peace of mind

Proposal for life assurance Regular premium

Warning: You must reveal all the facts you know or ought to know, which may affect the insurance cover you are applying for. If you fail to do so, you may receive nothing from the policy. [Section 25(5) of the Insurance Act (CAP 142)]

Note:

- (1) For Fracture Care PA, we will not pay any claims for any injury, fracture or dislocation caused directly or indirectly by a medical condition (including but not limited to osteoporosis or bone disease) or its treatment.
- (2) For Accident Assist, we will only pay the benefits as a result of an accident. We will not pay claims for any accident caused directly or indirectly by any pre-existing medical conditions. A pre-existing condition is the existence of any signs or symptoms for which the life assured asked for or received treatment, medication, consultation, advice or a diagnosis for or would have caused an ordinary sensible person to get treatment, a diagnosis or cure, before the cover start date or date of reinstatement (if any) of this benefit.
- (3) For Max Protection Multiplier, if the life assured dies from cancer, heart attack, stroke, kidney failure, liver failure or AIDS which was diagnosed or was under any treatment or investigation before the cover start date or date of reinstatement (if any), we will only pay the premiums you have paid (without interest) for Max Protection Multiplier from the cover start date.
- (4) The total of all premiums paid for certain plans, for each life assured, issued in the past 24 months cannot be more than S\$5 million (or equivalent). This is based on the total premiums which have been agreed and must be paid for the product, but does not include premiums for supplementary benefits (if any) (for example 10 x the yearly premium for a 10-year premium term, or the full single premium for a single-premium product). The total premiums for policies in US dollars will be worked out after we convert the amount using an exchange rate of US\$1 to S\$1.40. We may review or vary this rate.

Details of life assured

Full name (as it appears on NRIC, passport or birth certificate)	
Title	Ms
Sex	Female
Marital status	Single
Nationality	Singaporean
Nationality of Singapore PR	-
Country and City of Residence	Singapore
Date of birth	08/06/2010
Age next birthday	11
Type of pass	-
NRIC, passport or birth certificate number	
Country of birth	Singapore
Occupation	Student
Name of employer, school or institution	Helo
Details of job duties	Not Applicable
Nature of business or industry	Unemployed
Height (cm)	-
Weight (kg)	-
Number of children	-
Number of dependents	-
Backdating	No
Yearly income	-
Are you a family member of your Financial Consultant? Note: "Family member" shall only mean parent, parent-in-law, child, spouse or sibling.	

Note: If the lives are not husband and wife, you must attach a letter signed by both lives giving full details.

Tick ☐ one box only

☒ **For a Singapore citizen**

Have you lived outside Singapore continuously for five years or more before the date of proposal?

☐ Yes ☒ No

☐ **For Singapore permanent resident, employment pass or work permit**

Have you lived in Singapore for less than 183 days in the 12 months before the date of proposal?

☐ Yes ☐ No

☐ **Others (for example, dependent pass, long term visit pass, student pass, social visit pass, and so on)**

Have you lived in Singapore for less than 90 days in the 12 months before the date of proposal?

☐ Yes ☐ No

Details of proposer of payer (if different from life assured)

Full name (as it appears on NRIC, passport or birth certificate)	-
Title	-
Sex	-
Marital status	-
Nationality	-
Nationality of Singapore PR	-
Country and City of Residence	-
Date of birth	-
Type of pass	-
NRIC, passport or birth certificate number	-
Country of birth	-
Occupation	-
Name of employer, school or institution	-
Details of job duties	-
Nature of business or industry	-
Number of children	-
Number of dependents	-
Yearly income	-
Relationship to life assured	-

Note: If the lives are not husband and wife, you must attach a letter signed by both lives giving full details.

Tick ☐ one box only

☐ **For a Singapore citizen**

Have you lived outside Singapore continuously for five years or more before the date of proposal?

☐ Yes ☐ No

☐ **For Singapore permanent resident, employment pass or work permit**

Have you lived in Singapore for less than 183 days in the 12 months before the date of proposal?

☐ Yes ☐ No

☐ **Others (for example, dependent pass, long term visit pass, student pass, social visit pass, and so on)**

Have you lived in Singapore for less than 90 days in the 12 months before the date of proposal?

☐ Yes ☐ No

Address of proposer

We will use the contact details shown here and update on all your existing policies. We will send all email correspondence to this email address.

Contact details

Home	-
Mobile	65- (Singapore)
<input type="checkbox"/>	If you do not give us your mobile number, we are unable to send you important notifications relating to your policy by SMS.
Office	-
Email	
<input type="checkbox"/>	If you do not give us your email address, we are unable to send you important notifications relating to your policy by email.
	I/We agree and accept that Prudential will not be responsible for any consequences arising from my/our failure to (i) provide Prudential with a true, complete and accurate mailing address, email address and mobile number and/or (ii) notify Prudential of any changes(s) to my/our mailing address, email address and mobile number. I/We acknowledge and accept that my/our Policy Document and/or Correspondence will be delivered via post if my/our email address and mobile number are not accurate/valid.

Note: Please indicate the country if your telephone number is registered outside Singapore.

eCORRESPONDENCE

Important

- Your policy-related documents will be made available to you electronically.
- You will receive electronic notifications informing you that your policy-related documents are accessible in PRUAccess. Click here for T&Cs.
- For documents that are unavailable electronically, Prudential will continue to provide you with hard copies.

Policy-related documents exclude Welcome Letter, Certificate of Life Assurance and Policy Contract (where applicable).

Residential address in full

--

We will use the address shown here and update on all your existing policies. We will send all correspondence to this address unless you give us a mailing address.

Mailing address in full (if not the same from residential address)

-

The mailing address will apply to this application only. If you want to change your mailing address for your existing policies, please submit a separate written request.

Note

You must give us a copy of your NRIC. The address on the NRIC must match the residential address above. Otherwise, please provide documentary proof (for example, a state issued document or bank statement) of the address shown in this proposal.

*** YOU HAVE COMPLETED THE PERSONAL DETAILS SECTION. PLEASE PROCEED TO THE NEXT SECTION ***

-

[illegible]

Currency	<input type="checkbox"/> S\$ <input type="checkbox"/> US\$
Total premium	

Model Portfolios for PruSelect Vantage and PruSelect

- ☐ I have received a copy of the latest portfolio report showing the Model Portfolio constructed by Mercer (Mercer Constructed Portfolio). I acknowledge that the reports or information I receive in connection with the portfolio or any other funds are for general information only. I confirm that I made all investment decisions on my own after considering and understanding the investment products, benefits and risks.
- ☐ I agree to receive all investment-related materials by email or in other electronic media including CD-ROMs and thumb drives. The materials may include reports every three months, every six months and every year, as well as prospectuses.

Important notes

PruSelect Vantage and PruSelect will give you access to confidential and proprietary information on the portfolios developed by Mercer and it is for general information only. This information is not investment advice and you must not rely on it as such.

You should read the product summary, Fund prospectuses and Product Highlights Sheet for the relevant investment products before deciding whether to invest in them. Neither we nor Mercer give any guarantees on the accuracy of any information provided to you in connection with the PruSelect Vantage and PruSelect. Neither we nor Mercer accept any responsibility for any loss or damage which you may suffer arising out of or in connection with your purchase of PruSelect Vantage and PruSelect. Where appropriate, you should seek independent legal, tax and other professional advice. As there may be changes in the market conditions, you should also refer to the Model Portfolios that will be updated every three months (for PruSelect Vantage), and every year (for PruSelect). You can get the updated Model Portfolios from your Prudential financial consultant and they will be available in PRUaccess.

Any opinion on, or rating of, investment products under the Model Portfolio developed by Mercer is not a guarantee as to the future investment performance of the investment products or Model Portfolios. Past performance is not a guide to future performance. Despite what we have said above, we can discontinue the PruSelect Vantage and PruSelect at any time without giving you notice.

Note Please give us your email address on this form. We will send a copy of all relevant investment-related materials to your email address.

Yearly cash benefit option for PruFlexiCash and PruFlexiCash Protection Plus

- Either ☐ Leave the yearly cash benefit with Prudential
- or ☐ Receive the yearly cash benefit by direct credit from the end of the second year onwards
(To complete bank details.)
- or ☐ Receive the yearly cash benefit by direct credit from the end of the year onwards
(please give any year from 10th year to the year before the policy term ends.)
(To complete bank details.)

Note : If you do not complete this section, your cash benefit will be left with us.

Client acknowledgement for PruFlexiCash, PruFlexiCash Protection Plus and PruFlexi Rewards

I acknowledge that:

- ☐ PruFlexiCash, PruFlexiCash Protection Plus and PruFlexi Rewards are insurance plans.
- ☐ I will pay premiums for the whole policy term.
- ☐ If I end the plan early, it will involve high costs and the surrender value I receive (if any) may be less than the total premiums I have already paid.
- ☐ The 5% cash benefit does not mean that the return on the policy is 5% a year.
(This applies to PruFlexiCash and PruFlexiCash Protection Plus only.)

Yearly cash benefit option for PruFlexi Rewards

- Either ☐ Leave the yearly cash benefit with Prudential
- or ☐ Receive the yearly cash benefit by direct credit starting after the second policy anniversary
(To complete bank details.)

Note If you do not complete this section, your cash benefit will be left with us.

Yearly Cash Benefit Option for PruCash Secure

- Either ☐ Leave the yearly cash benefit with Prudential
- or ☐ Receive Yearly Cash Benefit by Direct Credit starting from the 5th policy anniversary
(To complete bank details.)

Note If option is not indicated or bank details are incomplete, the Yearly Cash Benefit will be accumulated with Prudential.

Guaranteed cash benefit option for PruFirst Education

Either ☐ Leave the guaranteed cash benefit with Prudential

or ☐ Receive the guaranteed cash benefit by direct credit on the second last policy anniversary and the last policy anniversary before the policy matures (becomes due for payment).

Note : If you do not complete this section, your cash benefit will be left with us.

For PruLifetime Income

Cash benefit option

Either ☐ Leave the guaranteed and non-guaranteed cash benefit with Prudential

or ☐ Receive the guaranteed and non-guaranteed cash benefit by direct credit
(To complete bank details.)

Occupation class for Accident Assist, Medical Cash and Fracture Case PA

Occupation class ☐1 ☐2 ☐3 ☐4

Premium payment term for PruSave Limited Pay, PruSave Max Limited Pay (USD), PruWealth (SGD/USD), PruFirst Education, PruCover Total Refund and PruLifetime Income

Premium payment term ☒ 4 years^(see note 1) ☐ 5 years^(see note 2) ☐ 10 years ☒ 15 years^(see note 3)
☐ 20 years^(see note 4)

1 This does not apply to PruSave Limited Pay, PruSave Max Limited Pay (USD), PruWealth (SGD/USD), PruFirst Education and PruCover Total Refund.

2 This does not apply to PruCover Total Refund and PruLifetime Income.

3 This does not apply to PruWealth (SGD/USD), PruCover Total Refund and PruLifetime Income.

4 This does not apply to PruSave Limited Pay, PruSave Max Limited Pay (USD), PruFirst Education and PruWealth (USD).

Premium payment term for PruSelect Vantage and PruSelect

Premium payment term ☐ 5 years^(see note 1) ☐ 10 years ☒ 15 years ☐ 20 years

1 This does not apply to PruSelect.

Bank details for direct credit

Important notes:

(i) The owner of the bank account number provided must be confirmed and verified by the Financial Consultant with the proposer and/or the account holder of the bank account.

(ii) If the bank details provided are found to be invalid, the payout option will be defaulted to accumulation (if applicable). Otherwise, a cheque will be issued in the name of the Policyholder/ Assignee.

This applies to:

- PruCash Secure (for yearly cash benefit starting from the fifth policy anniversary);
- PruFlexiCash and PruFlexiCash Protection Plus;
- PruIncome Rewards / PruGolden Income (for guaranteed and non-guaranteed monthly income)
- PruFirst Education (for guaranteed cash benefit on the second last policy anniversary and the last policy anniversary before the policy matures (becomes due for payment));
- PruLifetime Income (guaranteed and non-guaranteed cash benefit);
- PruCash Secure (for Yearly Cash Benefit starting from the 5th policy anniversary)

Name of bank and branch	-
Bank account number	-
Name of account holder	-
Relationship (if account holder is not the same from proposer)	-

*** YOU HAVE COMPLETED THE PROPOSAL DETAILS SECTION. PLEASE PROCEED TO THE NEXT SECTION ***

Previous Insurance Details ()

1. Is this proposal intended for you to convert, increase or exercise the future insurance options on any policy(ies) listed below? ☐ Yes ☒ No

2. Is this proposal to replace, or intended to replace, any policies with us or any other company? ☐ Yes ☒ No

Warning - It is usually not to your advantage to replace an existing insurance policy with a new one. Some disadvantages are:

- You may not be insurable on standard terms;
- You may have to pay a higher premium because you are older;
- You may lose the financial benefit built up over the years; and
- Other terms and conditions may not be the same.

Please consult your present insurer before making a final decision. Hear from both sides and make a careful comparison. You can then be sure that you are making a decision suitable to your situation.

*** YOU HAVE COMPLETED THE PREVIOUS INSURANCE DETAILS. PLEASE PROCEED TO THE NEXT SECTION ***

Lifestyle Details ()

1. Aside from studies or leisure, does your child plan to travel aboard for more than 6 months in the next 12 months?
- ☐ Yes ☒ No

*** YOU HAVE COMPLETED THE LIFESTYLE DETAILS. PLEASE PROCEED TO THE NEXT SECTION ***

Health Details ()

1. Have either of your natural parents or any brothers or sisters, who prior to age 60 had cancer, heart disease, stroke, diabetes, polycystic kidney disease, Huntington's disease, dementia or Alzheimer's disease, Parkinson's disease, or any hereditary disease? ☐ Yes ☒ No
2. In the past 5 years, has your child had
- epilepsy, fits, migraines, prolonged headaches, panic attacks, anxiety? ☐ Yes ☒ No
3. In the past 5 years, has your child had
- impaired hearing, sight or speech or any other disorders of ear, eye, nose or throat? ☐ Yes ☒ No
4. In the past 5 years, has your child had
- asthma, bronchitis, pneumonia or other respiratory disorder? ☐ Yes ☒ No
5. In the past 5 years, has your child had
- gastritis, stomach or duodenal ulcer, or any other stomach or bowel disorders? ☐ Yes ☒ No
6. In the past 5 years, has your child had
- slipped disc, any form of arthritis, any other disorder of the bones, or limbs? ☐ Yes ☒ No
7. Has your child had any developmental abnormalities? ☐ Yes ☒ No
8. Has your child had
- paralysis, depression or any other nervous or mental disorders? ☐ Yes ☒ No
9. Has your child had
- raised blood sugar, diabetes or thyroid disorder? ☐ Yes ☒ No
10. Has your child had
- heart murmurs, mitral valve prolapse, or other heart valve disorders, irregular or fast heart rate, or any disorder of the heart or blood vessels? ☐ Yes ☒ No

11. Has your child had
-jaundice, hepatitis B carrier or any other form of hepatitis, liver disorder or gall bladder disorder? ☐ Yes ☒ No
12. Has your child had
- any other disorders of the kidney, bladder or urogenital organs? ☐ Yes ☒ No
13. Has your child had
- cancer, tumour, cyst, lump or growth of any kind? ☐ Yes ☒ No
14. Has your child had
- anaemia, thalassaemia, any other disorders of the blood? ☐ Yes ☒ No
15. Has your child had
- systemic lupus erythematosus, or any other disorders of the immune system? ☐ Yes ☒ No
16. Has your child had
- any medical advice or treatment relating to AIDS (including HIV positive)? ☐ Yes ☒ No
17. Has your child had
- any biopsy, CT scans, or
- any abnormal or pending investigations, scans, blood or urine tests? ☐ Yes ☒ No
18. Other than conditions declared above, has your child had any other health condition which led to:
- more than 10 consecutive days off school, or
- more than 5 consecutive days of hospital admission, or
- follow up consultations or treatment lasting more than 1 month? ☐ Yes ☒ No

*** YOU HAVE COMPLETED THE HEALTH DETAILS. PLEASE PROCEED TO THE NEXT SECTION ***

Payment information

Payment mode	Yearly
Instalment premium	\$ 390.95
Payment method	<input type="checkbox"/> GIRO - DBS/POSB <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Cash or cheque <input type="checkbox"/> Interbank GIRO

Preferred method

GIRO - DBS/POSB

- In the event of unsuccessful GIRO enrolment, your payment method will be changed to Cash/Cheque. Please proceed to our corporate website for GIRO enrolment
- Not applicable for PruSave Max Limited (USD), PruSelect Vantage (USD) and PruWealth (USD).

Interbank GIRO

- Please attach a completed copy of GIRO form. The first instalment must be paid by cash or cheque. For monthly cases, you need to pay two instalments.

Credit card or Interbank GIRO

- Does not apply to PruSave Max Limited Pay (USD), PruSelect Vantage (USD) and PruWealth (USD).

Other method

Cash or cheque

- You cannot use this method for the monthly payment mode.
- For cash payment, we will give you a cash receipt.
- If you are paying your premium by cheque, bank draft or money order, please cross it and make it payable to 'Prudential Assurance Company Singapore (Pte) Limited'.

Details of credit card payment

I authorise Prudential Assurance Company Singapore (Pte) Limited (Prudential) to charge the following premiums(including any extra premium) to my credit card account.

Pay for	First and Recurring Premium
Type of credit card	VISA
Name of cardholder	
Card expiry date	
Credit card number (VISA or MasterCard)	

*** YOU HAVE COMPLETED THE PAYMENT SECTION. PLEASE PROCEED TO THE NEXT SECTION ***

Client acknowledgement for PruSelect Vantage or PruSelect

I acknowledge that:

- ☐ PruSelect Vantage or PruSelect is a regular premium investment-linked plan and premiums are payable for the **entire** duration of the selected premium payment term.
- ☐ The non-guaranteed values shown in the Policy Illustration are based on the assumption that full premiums are paid over the **entire** duration of the selected premium payment term and there are no alterations to the policy.
- ☐ If I fail to pay premiums, my policy will be terminated or it will continue to incur the relevant fees and charges which will reduce my policy value and lead to eventual policy termination, as the case may be.

Signature of life assured

Signature of proposer or life assured

Signature of financial consultant

*** YOU HAVE COMPLETED THE CLIENT ACKNOWLEDGEMENT SECTION. PLEASE PROCEED TO THE NEXT SECTION ***

Others

☐ Nomination of beneficiary

Note: We can only register the beneficiary nomination if you submit a properly completed original nomination form with this proposal form or at any time after we issue the policy.

Consent for a minor

(A parent must fill this in if the proposer is between ages 11-16 next birthday.)
I give my consent for a life insurance policy to be issued on the life of my child and that they are the proposer of the policy.
I consent to the additional declaration to be given by my child/ ward in any questionnaires relating to this proposal.

Name of parent or legal guardian:	
NRIC or passport number	
Relationship to child	Mother

Please send us the letter of guardianship or other legal documents showing proof as legal guardian.

Signature of parent or legal guardian:

*** YOU HAVE COMPLETED THE OTHERS SECTION. PLEASE PROCEED TO THE NEXT SECTION ***

Declaration

Please read the terms and conditions carefully before signing this proposal.

1) Start of assurance

I understand that the assurance will not begin until you have received the proposal and officially accepted it and I have paid the premiums and you have issued an official letter indicating the start of my cover.

2) Information given to you

To the best of my knowledge, I declare that the information I have provided in this proposal and any information supplied to you or to your medical examiner is true and complete and I have not withheld material facts (facts likely to influence whether you accept this proposal). I agree that this application and other written answers, statements, information, or declaration made by me will form the basis of the contract of insurance between you and me. I also agree that you can ask for supporting documents in relation to the information asked in this form.

It is important that you provide us an accurate, complete and up-to-date mailing address, email address and mobile number in order for us to service you.

3) Providing medical information and updating personal details

(a) Medical information

I authorise:

- (i) any medical source, insurance office or organisation to release information to you; and
- (ii) you may release to any medical source or insurance office any relevant information on the life assured at any time, whether you accept the proposal or not.

A copy of this authorisation will be as valid as the original.

(b) Changing of details

I agree to tell you if there is any change in the state of health, occupation, financial status or lifestyle but not limited to engaging in hazardous activities of the life assured between the date of this proposal or medical examination and the date you issue my policy. Additionally, I agree to inform Prudential if I apply for additional insurance policy(ies) between the date of this proposal or medical examination and the issue of my policy. When you receive this information, you may accept or reject my proposal.

4) Unit price and charges

(a) Pricing units

- (i) For PruLink plans, I agree that if you receive the premium by 3 pm on the day before a pricing date, you will use the offer price on that date. If you receive the premium after 3 pm on the day before a pricing date, you will use the offer price on the following pricing date.
- (ii) For PruSelect plans, I agree that if you receive the regular premium and you accept my application, you will use the unit price on the date on which the Investment Manager sets the net asset value of the fund to buy units in my account.

(b) Assurance and administration charges

If I have chosen for the policy to be backdated, the assurance and the administration charges will apply from the first premium due date.

5) Free-look period

I understand that I have 14 days from the date of receiving the policy documents to review its terms and conditions. If I decide that the policy is not suitable, I may cancel the policy by writing to you within the same 14-day review period. You will refund any premiums paid, less medical fees, other expenses and any outstanding amounts I owe you in connection with the policy. I acknowledge that you will use your formula to work out the premium refund. If my policy is an investment-linked policy, in working out the amount to be refunded, you are entitled to adjust the amount to reflect the change in market value of the underlying assets.

6) When the documents are delivered

I understand that the policy document and all other documents from you are considered delivered and received (i) if they are available electronically by PRUaccess, and you receive the relevant SMS or email notification informing me that the documents are accessible on PRUaccess; and (ii) if posted, seven days from the date of posting to the last-known address you have for me.

7) Electronic receipt of policy documents and correspondences

I acknowledge and accept that if Prudential provides me with my policy document and correspondences relating to my policy ("Correspondences") electronically, my policy documents and correspondences will be made available in my PRUaccess. PRUaccess is Prudential's secure customer internet portal on Prudential's corporate website. I understand and agree to be notified by email or SMS to retrieve my policy document and correspondences in PRUaccess once my application has been officially approved by Prudential and correspondences are available for viewing. If I receive correspondences electronically, I acknowledge that the terms and conditions governing the policy document and electronic correspondence (a copy of which is available upon request) have been explained to me and I agree to be bound by them. I understand that not all of the Correspondences are currently available via electronic statements. I consent to Prudential providing me with Correspondences that are not available electronically in hard copy.

I agree and accept that Prudential will not be responsible for any consequences arising from my failure to (i) provide Prudential with a true, complete and accurate email address and mobile number and (ii) notify Prudential of any change(s) to my email address and mobile number. I acknowledge and accept that my policy document and correspondences will be sent by post if my email address and mobile number are not provided in this proposal.

8) PRUaccess - customer internet portals

I accept that if I do not already have a PRUaccess PIN, Prudential will notify me by SMS or post to activate my PRUaccess PIN. PRUaccess is your secure customer internet portal on your corporate website, for customers to access important information about their policy and to perform selected policy transactions. I agree that in case of any dispute, the policy documents in PRUaccess will prevail (will apply).

9) No offer or solicitation (attempting to sell, asking or urging a person to apply for insurance) outside Singapore

I understand the following.

- The investment funds (the funds) offered under the product that I am applying for have not been approved for offer, sale or purchase by any authority outside Singapore.
- This proposal and all other documents relating to the funds do not form an offer to sell or a solicitation of (attempting to sell, asking or urging a person to apply for insurance) any offer to buy or subscribe for any securities in any jurisdiction in which the distribution or offer is not authorised to any person; and
- In particular, this proposal and all other documents relating to the funds do not form an offer to buy or subscribe for any securities in the United States of America (US) to or for the benefit of people in the US (residents of the US or partnerships or corporations organized under the laws of the US or any state or territory).

For purposes of the clause above, residents of the US means:

- any person who is a US citizen;
- any person who is a lawful US permanent resident for immigration purposes; or
- any person who meets a substantial presence test (in other words, present in the US for at least 183 days in the current year or present in the US for at least 31 days in the current year and the sum of the number of days present in the US for the current year and the first two preceding years discounted at one-third for the first preceding year and one-sixth for the second preceding year, equals or exceeds 183).

9) Marketing and sales conducted in Singapore

I confirm that the entire marketing and selling process for my proposed insurance application has been carried out in Singapore, and includes but is not limited to the following:

- I have received all of the insurance-related marketing materials in Singapore.
- The agent(or sales staff) has explained the details of my proposed insurance plan in Singapore.
- I have signed all the documents for my proposed insurance application (including but not limited to the proposal form) in Singapore.
- I have paid the initial premium for my proposed insurance application in Singapore.

10) Documents received and explained

I declare that:

☒ I have received a hard copy or downloaded copy of the following:

- PruPlanner or financial needs analysis,
- Policy Illustration,
- Product summary,
- Vernacular (if this applies),
- Fund Information Booklet or prospectus, together with the Product Highlights Sheet (if this applies),
- Your guide to life insurance and/or your guide to health insurance. The contents in the documents I received have been explained to me and I confirm I understand the contents.

☐ I have requested and have been furnished with an electronic mail containing the following:

- PruPlanner or financial needs analysis,
- Policy Illustration,
- Product summary,
- Vernacular (if this applies),
- Fund Information Booklet or prospectus, together with the Product Highlights Sheet (if this applies),
- and weblinks to :
- Your guide to life insurance and/or your guide to health insurance.,

The contents in the documents I received have been explained to me and I confirm I understand the contents. I have also verified the accuracy of my email address used in the electronic email.

11) Singapore policy

I understand that the policy is a Singapore policy and entered in the register of Singapore policies of Prudential.

12) Bankruptcy

I declare that I am not an undischarged bankrupt and that I have committed no act of bankruptcy within the last 12 months. No receiving order or adjudication in bankruptcy has been made against me during that period.

13) Currency conversions

I understand that for a policy not in Singapore dollars, the Singapore-dollar return will depend on current exchange rates which may be highly uncertain. You will not suffer any loss resulting from converting any currency or the cost of charges on any transaction to convert the currency.

14) Breaching local laws

I understand that if I do not hold Singapore citizenship status, it is my responsibility to make sure that, by completing and submitting proposal, I will not break any of the local laws and regulations of the country and city I live in that apply (the local laws). I will fully indemnify (compensate you for losses you have suffered) and protect you, your officers, employees and agents against all losses, damages, civil penalties and expenses (including legal expenses on a solicitor-client basis) that you or they may suffer in connection with my breaking any local laws.

15) Authority to collect, use and disclose (reveal) information

I/We expressly authorise and consent Prudential Assurance Company Singapore (Pte) Limited and its related corporations, respective representatives, agents, third party service providers, contractors and/or appointed distribution/business partners (collectively referred to as "Prudential") to collect, use, retain, disclose and process, at their sole discretion, any and all information relating to me/us, including my/our personal particulars, my/our transactions and dealings and my/our policy or policies of insurance with Prudential, and disclosing such information to any of the following, whether in Singapore or elsewhere for purposes stated here and in Prudential's Privacy Notice (which is available at <https://www.prudential.com.sg/Privacy-Notice>):

- Prudential's holding companies, branches, representative offices, subsidiaries, related corporations or affiliates;
 - any of Prudential's contractors or third party service providers or distribution / business partners or professional advisers or agents;
 - any regulatory, supervisory or other authority, court of law, tribunal or person, in any jurisdiction, where disclosure is required by law, regulation, judgement or order of court or order of any tribunal or as a matter of practice;
 - any actual or potential assignee(s) or transferee(s) of any rights and obligations of Prudential under or relating to my/our policy or policies for any purpose connected with the proposed assignment or transfer; and
 - any credit bureau, insurer or financial adviser,
- for the purposes of providing financial advisory services, underwriting, customer servicing (which including contacting you for review of your financial and/or insurance portfolio), statistical analysis, investigation of Prudential's representatives, monitoring undesirable sales practices, conducting customer due diligence, reporting to regulatory or supervisory authorities and for auditing.

Where any personal data (third party Personal Data) relating to another person (Individual) (e.g. insured persons, family members, and beneficiaries) is disclosed by me/us, I/we represent and warrant that I/we have obtained the consent of the Individual for to collect and use the third party Personal Data and to disclose the third party Personal Data to the persons enumerated above, whether in Singapore or elsewhere, for the purposes stated above and in Prudential's Privacy Notice.

I/We understand that if I/We qualify for any reward program(s) / membership(s) under the products and/or services distributed by Prudential, I may receive regular updates from Prudential on the benefits and privileges entitled to me/us under such program(s) / membership(s).

I/We understand that I/we can refer to Prudential Data Privacy, which is available at <https://www.prudential.com.sg/Privacy-Notice> for more information on contacting Prudential for Feedback, Access, Correction and Withdrawal of using my/our personal data.

I/We understand that if I am / We are a European Union ("EU") resident individual (i.e. my / our residential address is based in any of the EU countries), I/we can refer to Prudential General Data Protection Regulation ("GDPR") Privacy Data (which is available at <https://www.prudential.com.sg/GDPR-Notice>) for more information on the rights available to me under the GDPR.

16) No tax advice

I will get my own advice on the tax implications or any other implications related to applying for this policy. I acknowledge that you and your representatives do not make any representations and cannot assume any responsibility for these matters.

17) Other Requirements

(a) Applicable Requirements including Foreign Account Tax Compliance Act (FATCA) and OECD Common Reporting Standard for Automatic Exchange of Financial Account Information (CRS)

I/We acknowledge that Prudential may be obliged to comply with or choose to have regard to, observe or fulfil the laws, regulations, orders, guidelines, codes, market standards, good practices, requests, requirements, or expectations of or agreements with public, judicial, taxation, governmental and other regulatory authorities or self-regulatory bodies in various jurisdictions (the "**Authorities**") and each an "**Authority**") as promulgated and amended from time to time (the "**Applicable Requirements**"). These Applicable Requirements include but are not limited to FATCA which the United States Internal Revenue Service has promulgated and the CRS. In this connection, I/we agree that Prudential may disclose my/our personal information (which shall include but are not limited to my/our nationality, date and place of birth, addresses, telephone numbers, tax status, tax identification numbers, tax residency changes or policy details) to any Authority and withhold payments otherwise payable to me/us under my/our policy as may be reasonably necessary to ensure Prudential's compliance or adherence (whether voluntary otherwise) with the Applicable Requirements.

(b) Consent to Collection, Use and Disclosure in relation to Applicable Requirements

I/We hereby consent to Prudential's, its officers', employees' and agents', collection, use and disclosure of my/our particulars or any information (which shall include my/our nationality, date and place of birth, addresses, telephone numbers, tax status, tax identification numbers, tax residency changes or details concerning my/our policy) to any Authority for the purpose of compliance with or adherence (whether voluntary or otherwise) to or otherwise in connection with the Applicable Requirements ("**the Purpose**") and/or I/we will be deemed to so consent when I/we provide Prudential, its officers, employees and agents, from time to time, with my/our particulars or any information when having been informed herein that my/our particulars or any information I/we provide may be collected, used and disclosed for the Purpose. Such disclosure may be effected by Prudential directly or sent and/or disclosed through any of its Head Office(s) or other related corporations or in such manner as it deems fit. For the purposes of the foregoing and notwithstanding any other provision in this proposal form or any other agreements between us, Prudential may need me/us to provide further information as may be required for disclosure to any Authority and it may request that I/we provide the same to it within such time as may be reasonably required.

(c) Updating of Information

I/We agree to update Prudential in a timely manner of any change of any detail previously provided to Prudential whether at time of application or at any other times. In particular, it is very important that I/we notify Prudential immediately if, where I/we are individuals, my/our nationality, addresses, telephone numbers, tax status, tax identification numbers, tax residency or personal identification numbers change or if I/we become tax resident in more than one country, or, where we are a corporation or any other type of entity, if our registered address, address of our place of business, substantial shareholders, legal and beneficial owners or controllers (who own or control more than 25% of our shares or ownership interest or control), tax status, tax residency changes or if I/we become tax resident in more than one country. If any of these changes occurs or if any other information comes to light concerning such changes, Prudential may request certain documents or information from me/us. Such information and documents include but are not limited to duly completed and/or executed (and, if necessary, notarized) tax declarations or forms or self-certifications.

(d) Assistance to Prudential

Notwithstanding any other provision in this proposal form or any other agreements between us, I/we agree to provide Prudential with such assistance as may be necessary to enable it to comply with its obligations under all Applicable Requirements concerning me/us or my/our policies with Prudential.

(e) Consequences of Failure to Report Information

If I/we do not provide or update Prudential with the information or documents requested in a timely manner or if any information or documents provided are not up-to-date, accurate or complete, I/we agree that some or all of the benefits under the policy of assurance may not be available to me/us. In particular, I/we consent to and agree that Prudential may, in order to ensure its ongoing compliance or adherence (whether voluntary or otherwise) with the Applicable Requirements, and to the extent permitted by law, terminate the policy and/or withhold payment of any amount due to me/us (or my/our personal representatives) under my/our policy as may be reasonably necessary to comply with the Applicable Requirements and/ or deduct such amount from any policy moneys payable to me/us and/or pay the same to any relevant Authority as the relevant Authority or Applicable Requirements may require.

(f) Account Holder

I/we certify that I/we are the Account Holder(s) (or am authorized to sign for the Account Holder(s)) of all the accounts to which this form relates.

18) Prohibited person

I agree that you are entitled not to accept or process this proposal should a person connected with it is found to be a 'prohibited person'. A prohibited person is a person or organisation (including but not limited to, any director, direct and indirect shareholder, person having executive authority or persons appointed to act on the behalf of myself and my beneficiaries, beneficial owner(s), beneficiaries' beneficial owner or assignees) who is prohibited by laws, regulations or sanctions to provide insurance cover, carry out business with or otherwise offer economic benefits to. Your decision will be final. If you become aware that a person connected with the policy is or has become a prohibited person, you may block or terminate the (i) cover of that insured, or (ii) relevant Policy, with immediate effect. You will then not have to carry out any business with any person connected with the relevant policy. This includes making or receiving any payments under the relevant policy. I also agree to tell you in writing immediately about any change to the identity, status, constitution, establishment, details and identification documents of a person connected with the relevant policy. If you accept or process my application despite a person connected with the relevant policy being a prohibited person, you can block or end the relevant policy at any time.

E-Ref No. [REDACTED]
Financial Consultant Number [REDACTED]
Policy Delivery Electronic contract

Form Version 9.5.0
Business Source Financial Consultant Referral
Referral Code N.A-N.A-N.A

I/We confirm that:

- a. my servicing adviser has explained to me/us to my satisfaction the procedure of submitting my/our proposal for life assurance electronically, through the use of electronic records and electronic signature, to Prudential Assurance Company Singapore (Pte) Limited;
- b. I/we authorise my/our adviser to transmit my/our proposal for life assurance electronically to Prudential;
- c. I/we will not hold Prudential liable for any loss or consequence arising directly or indirectly from the electronic transaction.

In consideration of Prudential considering my electronic proposal, I/we agree:

- a. that my/our electronic signature on the electronic proposal for life assurance bearing my/our name ("my/our Proposal") will be legally binding as if I/we had signed on the hardcopy of the Proposal;
- b. to the admission, as evidence in any court of law or tribunal in Singapore, the electronic records or documents shown to me/us or electronically signed by me/us during the preparation of my/our proposal (the "Electronic Records"); and
- c. that the Electronic Records, and any copies thereof, are admissible in any court of law in Singapore as original documents and agree not to challenge or dispute their admissibility, authenticity or accuracy in any proceedings.

You have completed the following sections of the proposal form,

- (1) Personal details
- (2) Proposal details
- (3) Lifestyle details
- (4) Health details
- (5) Payment details
- (6) Others
- (7) Questionnaire (if this applies)

Please check through the answers given by you in these sections again before signing the proposal form. Please note that our decision and acceptance of the proposal in your proposal form has been made based on the information that you have provided to us in your proposal form. In the event that you decide to submit a New Business Supplementary Form containing information which was not provided or disclosed in your proposal form, our proposal shall be automatically revoked and deemed void and we shall consider your proposal anew based on the fresh information that you have provided in the New Business Supplementary Form read together with the information previously submitted by you in your proposal form.

If you fail to give us any material fact in this proposal, any policy we issue may not be valid. If you are in doubt as to whether a fact is significant, tell us anyway. This includes any information that you may have given to your financial consultant but not included in the proposal. Please check to make sure you are fully satisfied with the information provided in this proposal.

我所呈上的英文投保书，是经过我口授而填充的，填后又经用华语重释和解释，我认为完全属实无讹，断无掩埋事实之弊，我同意为这份英文投保书的法律效果负责，特此宣言。

By signing below, I confirm that I have read, understood, and agree with the contents of the declarations in this form. This applies particularly to: authority to collect, use and disclose (reveal) information in relation to requirements and consequences of failure to report information.

通过下面签字，我/我们确认本人/吾等已阅读，理解，同意并确认本表格的宣言内容，尤其宣言章节所提及的“同意收集，使用和披露适用要求”，以及“没有通知信息的后果”。

How would you like to be contacted?

Both we and your Prudential representative would like to send you marketing information about our products and services by post, email, phone or SMS. If you agree to be contacted in these ways, please tick the box below.

☐ I would like to receive marketing information from you and my Prudential representative using any of the methods mentioned above.

I understand this consent will replace my previous consent (if any) on my existing policy. Any change in the consent will take effect starting 30 days from the date of cover.

Signature of life assured

Signature of proposer or payer

Signature of financial consultant

A copy of the completed proposal and policy terms and conditions will be available upon request.

*** YOU HAVE COMPLETED THE DECLARATION SECTION ***



This Cover Page is an important document.

- It highlights the key features and risks of this product and should be read together with the Policy Illustration, Product Summary and Bundled Product Disclosure Document, where it applies.
- It is important to read the Policy Illustration, Product Summary and Bundled Product Disclosure Document, where it applies, before deciding whether to purchase this product. If you do not have a copy of these documents, please contact us at 1800 333 0333 or a representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore to ask for them.
- You should not purchase this product if you do not understand or are not comfortable with the risks of this product.

PRUActive Protect

Product Type	Non-Participating Term Plan
Premium Payment Term	10 Years
Policy Term	10 Years
Name of Insurer	Prudential Assurance Company Singapore (Pte) Limited
Policy Currency	Singapore Dollars

WHAT ARE YOU PURCHASING?

This is a non-participating term plan which offers you insurance cover with critical illness coverage. It also comprises guaranteed benefits only.

HOW MUCH WILL YOU NEED TO PAY FOR ADVICE?

The total distribution cost of this product is the amount that you will pay for advice and for other distribution related expenses. It includes cash payments in the form of commissions and benefits paid to the distribution channel and its representative(s) who have provided you with financial advice. This is not an additional cost to you as it has been included in the premiums payable for this plan.

The Total Distribution Cost for this plan is \$137 as shown in the Policy Illustration. This makes up 9.7% of the total premiums payable.



WHAT HAPPENS IF YOU SURRENDER YOUR POLICY EARLY?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

OTHER IMPORTANT INFORMATION

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, Prudential Singapore will refund you the premiums you have paid, less any medical fees and other expenses, such as payments for medical check-ups and medical reports, paid by Prudential Singapore.

compareFIRST is an online portal that enables you to easily compare the premiums and features of life insurance products available to the retail market in Singapore. compareFIRST empowers you to make informed decisions when purchasing life insurance products. You can access the portal at www.comparefirst.sg before making a life insurance purchase. You can also find out more about life insurance products at www.moneysense.gov.sg.



Introduction

Prudential Singapore believes that it is important that you fully appreciate the benefits of your policy. You should also understand how the cost of your insurance cover and the expenses of administration and sales affect the benefits that you will receive.

The illustration that follows shows how the value of your policy progresses over time and the sum(s) that would be payable. The methods used to derive the values shown follow guidelines established by the Life Insurance Association, Singapore, to ensure that a fair and consistent approach is used in preparing this illustration.

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

If you need clarification, please do not hesitate to ask your representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore.



PRUDENTIAL

PRUActive Protect

Specially prepared for: **A**

Age next birthday: **30 Male / Non Smoker**

Occupation: **Others: Office-based (Class 1)**

	Sum Assured (\$)	Policy Term (Years)	Premium Term (Years)	Yearly Premium (\$)
PRUActive Protect (*)	100,000	10	10	141.00
Protect Plus (*)		10	10	67.00
Early Protect (*)	10,000	10	10	16.70
Early Protect Plus (*)		10	10	5.70
Life Protect Plus (*)	5,000	10	10	3.25
Severe Infections Protect (*)	10,000	10	10	18.00
Monthly Benefit - 1-year Payout (*)	100	10	10	1.67
Crisis Waiver III (PRUActive Protect) (On benefit with (*))				16.21
Early Crisis Waiver (PRUActive Protect) (On benefit with (*) and Crisis Waiver III (PRUActive Protect))				8.68

Total Premium:

Yearly: **\$278.21**

Half-Yearly: **\$140.49**

Quarterly: **\$70.95**

Monthly: **\$23.66**



Important Notes:

1. PRUActive Protect provides financial protection against critical illnesses and death.

The benefits are as follows:

Death Benefit *	\$20,000
Total Critical Illness Benefit **	\$500,000
Total Pre-Critical Medical Condition Benefit ***	\$50,000

* On the death of the life assured, we pay 20% of PRUActive Protect sum assured as death benefit less any amounts you owe us.

** Protect Plus rider restores the PRUActive Protect sum assured to 100% after a Critical Illness benefit claim, subject to a maximum of 500% of the PRUActive Protect sum assured. For us to accept the next claim, the following must apply:

- (1) If it is not the same critical illness as the one before it, there must be a period of 12 months between the dates of diagnosis (**waiting period**).
- (2) If it is the same critical illness as the one before it, then there must be a waiting period of 24 months between the dates of diagnosis.

Note that the total amount payable depends on the number of claims made. The amount payable for each claim is subject to maximum per claim limit and is based on the terms and conditions listed in Product Summary.

*** Early Protect Plus rider restores the Early Protect sum assured to 100% after a pre-critical medical condition claim, subject to a maximum of 500% of the Early Protect sum assured. This 500% includes claims for any of the critical illness under the PRUActive Protect policy. For us to accept the next claim, the following must apply:

- (1) If it is not the same pre-critical medical condition as the one before it, there must be a waiting period of 12 months between the dates of diagnosis.
- (2) If it is the same pre-critical medical condition as the one before it, then there must be a waiting period of 24 months between the dates of diagnosis.

Note that the total amount payable depends on the number of claims made. The amount payable for each claim is subject to maximum per claim limit and is based on the terms and conditions listed in Product Summary.

2. Life Protect Plus rider pays an additional sum assured upon death and terminal illness of the life assured. Please refer to Product Summary for more information.
3. Severe Infections Protect rider pays an additional sum assured when the life assured is diagnosed with a serious infectious disease and is admitted to the Intensive Care Unit (ICU) as a result of the serious infectious disease for at least five continuous days. Please refer to Product Summary for more information.
4. Monthly Benefit rider pays an additional monthly payout for a period of time upon the first Critical Illness claim based on your chosen amount and duration. Please refer to Product Summary for more information.
5. The sum assured above may be reduced at the issuance stage due to issuance limits imposed on a per life basis and/or underwriting assessment at the discretion of Prudential Assurance Company Singapore (Pte) Limited ("Prudential Singapore"). In any case, Prudential Singapore will write to you to seek confirmation before incepting the policy.
6. The premium rates for this plan are not guaranteed and may be adjusted based on future experience.



POLICY ILLUSTRATION

Specially prepared for: **A**

End of Policy Year/ Age	Total Premiums Paid To-date	Guaranteed Death Benefit	Guaranteed Critical Illness Benefit	Guaranteed Surrender Value
	(\$)	(\$)	(\$)	(\$)
1/31	141	20,000	100,000	0
2/32	282	20,000	100,000	0
3/33	423	20,000	100,000	0
4/34	564	20,000	100,000	0
5/35	705	20,000	100,000	0
6/36	846	20,000	100,000	0
7/37	987	20,000	100,000	0
8/38	1,128	20,000	100,000	0
9/39	1,269	20,000	100,000	0
10/40	1,410	20,000	100,000	0



How much are you paying for the distribution cost?

This table shows the total costs of distribution that Prudential Singapore expects to incur in relation to your policy, including the cost of any financial advice provided to you.

TOTAL DISTRIBUTION COST		
End of Policy Year/ Age	Total Premiums Paid To-date (\$)	Total Distribution Cost To-date (\$)
1/31	141	88
2/32	282	118
3/33	423	134
4/34	564	135
5/35	705	136
6/36	846	137
7/37	987	137
8/38	1,128	137
9/39	1,269	137
10/40	1,410	137

What does the last column represent?

1. The Total Distribution Cost To-date is the sum of each year's expected distribution-related costs, without interest. Such costs include cash payments in the form of commission, costs of benefits and services paid to the distribution channel.
2. Please note that the Total Distribution Cost is not an additional cost to you; it has already been allowed for in calculating your premium.
3. You can obtain the Total Distribution Cost of each of the supplementary benefits (if applicable) from your representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore.



POLICY ILLUSTRATION (FOR RIDERS)

End of Policy Year/ Age	Total Premiums Paid To-date (\$)	Guaranteed Death Benefit (\$)
1/31	137	5,000
2/32	274	5,000
3/33	412	5,000
4/34	549	5,000
5/35	686	5,000
6/36	823	5,000
7/37	960	5,000
8/38	1,098	5,000
9/39	1,235	5,000
10/40	1,372	5,000



TOTAL DISTRIBUTION COST		
End of Policy Year/ Age	Total Premiums Paid To-date (\$)	Total Distribution Cost To-date (\$)
1/31	137	81
2/32	274	107
3/33	412	121
4/34	549	122
5/35	686	123
6/36	823	124
7/37	960	124
8/38	1,098	124
9/39	1,235	124
10/40	1,372	124

What does the last column represent?

1. The Total Distribution Cost To-date is the sum of each year's expected distribution-related costs, without interest. Such costs include cash payments in the form of commission, costs of benefits and services paid to the distribution channel.
2. Please note that the Total Distribution Cost is not an additional cost to you; it has already been allowed for in calculating your premium.
3. You can obtain the Total Distribution Cost of each of the supplementary benefits (if applicable) from your representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore.



Notes

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in proposal form fully and faithfully all the facts, which you know or ought to know, as otherwise the policy issued may be void.

Please note that premium rate(s) for the following product(s) is/are not guaranteed. The rate(s) may be adjusted in the future at the Company's discretion:

- PRUActive Protect
- Protect Plus
- Early Protect
- Early Protect Plus
- Life Protect Plus
- Severe Infections Protect
- Monthly Benefit
- Crisis Waiver III (PRUActive Protect)
- Early Crisis Waiver (PRUActive Protect)

**PRODUCT SUMMARY: PRUActive Protect**

The Product Summary and Policy Illustration are for illustrative purposes only and shall not constitute a contract. The following is a simplified description of the key product features. The exact terms can be found in your policy document.

Details of Plan Provider:

Prudential Assurance Company Singapore (Pte) Limited ("Prudential Singapore"), 30 Cecil Street, #30-01 Prudential Tower, Singapore 049712. Tel: 1800 - 333 0 333.

Prudential Singapore is responsible for the product features and contractual provisions and these will be explained to you by a representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore.

This policy and its Supplementary benefit(s) (if any) is/are protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

The Proposer acknowledges receipt of all the pages of the Product Summary for the Main plan and Supplementary benefits (where applicable). The contents have been explained to his/her satisfaction.

Nature and Objective of the Plan:

PRUActive Protect is a regular premium, non-participating term plan that provides financial protection for a specific term against critical illness and death. It also has a Crisis Care Accelerator benefit, an Additional benefit, a Child Cover benefit & Spouse Waiver benefit. It allows you to convert (replace) your policy with a new whole life or endowment policy without evidence of good health.



Benefits under the Plan:

What do we pay for Critical Illness Benefit?

If the life assured is diagnosed as having any one of the 36 critical illnesses listed below, before the cover end date, we pay 100% of the sum assured, less any amounts owing to us. The life assured must survive at least 7 days from the date of diagnosis.

We pay this benefit for one critical illness and up to 100% of the sum assured shown in your certificate of life assurance. Once we pay a successful claim for critical illness, the Critical Illness benefit ends.

The Critical Illness benefit sum assured includes claims for any pre-critical medical condition claim under the Early Protect benefit (if this benefit is included). Once 100% of the sum assured is paid out, the benefit ends.

The critical illness must be diagnosed by a registered medical practitioner.

We can ask for a medical examination to be carried out by a medical practitioner registered with the Singapore Medical Council if we decide the medical reports you give us are not enough for our purposes.

A "Registered Medical Practitioner" is any person properly qualified with a degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.

What Critical Illnesses* are covered?

- | | |
|--|---|
| 1. Alzheimer's Disease / Severe Dementia | 18. Major Cancer |
| 2. Benign Brain Tumour | 19. Major Head Trauma |
| 3. Blindness (Irreversible Loss of Sight) | 20. Major Organ / Bone Marrow Transplantation |
| 4. Coma | 21. Motor Neurone Disease |
| 5. Coronary Artery By-pass Surgery | 22. Multiple Sclerosis |
| 6. Deafness (Irreversible Loss of Hearing) | 23. Muscular Dystrophy |
| 7. End Stage Kidney Failure | 24. Open Chest Heart Valve Surgery |
| 8. End Stage Liver Failure | 25. Open Chest Surgery to Aorta |
| 9. End Stage Lung Disease | 26. Other Serious Coronary Artery Disease |
| 10. Fulminant Hepatitis | 27. Paralysis (Irreversible Loss of Use of Limbs) |
| 11. Heart Attack of Specified Severity | 28. Persistent Vegetative State (Apallic Syndrome) |
| 12. HIV Due to Blood Transfusion and Occupationally Acquired HIV | 29. Poliomyelitis |
| 13. Idiopathic Parkinson's Disease | 30. Primary Pulmonary Hypertension |
| 14. Irreversible Aplastic Anaemia | 31. Progressive Scleroderma |
| 15. Irreversible Loss of Speech | 32. Severe Bacterial Meningitis |
| 16. Loss of Independent Existence | 33. Severe Encephalitis |
| 17. Major Burns | 34. Stroke with Permanent Neurological Deficit |
| | 35. Systemic Lupus Erythematosus with Lupus Nephritis |
| | 36. Terminal Illness |

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**



What do we pay for Crisis Care Accelerator Benefit?

We pay 50% from your PRUActive Protect sum assured if the life assured:

- has surgery for any of the following vital organs as a result of illness or an accident - heart, lung, brain, kidney or liver, and
- Is admitted to the Intensive Care Unit (ICU) as a result of the surgery, for at least three continuous days,

A certified specialist must confirm that the surgery and hospitalisation is medically necessary.

Any condition must be first considered or claimed against the 36 critical illnesses before being considered under this benefit.

Surgery means any surgical operation listed in MOH's surgical operations fees table 1 to 7 (as at the date of the surgery).

Intensive Care Unit (ICU) refers to the intensive care unit of a hospital. The High Dependency Unit and other hospital wards are not considered intensive care unit.

Medically Necessary means a treatment which, in the opinion of a specialist doctor, is appropriate and consistent with the symptoms, findings, diagnosis and other relevant clinical circumstances of the related illness. The treatment must be provided in accordance with generally accepted medical practice in Singapore.

MOH stands for the Ministry of Health, Singapore.

We pay this benefit once only and up to \$100,000. The PRUActive Protect sum assured will be reduced by the claim amount paid out under this benefit. If there has already been a claim on the policy and the sum assured of PRUActive Protect has been reduced, the Crisis Care Accelerator Benefit would pay 50% from the remaining PRUActive Protect sum assured.

The Crisis Care Accelerator benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.



What is not covered under Crisis Care Accelerator Benefit?

We do not pay the Crisis Care Accelerator Benefit in any of the following circumstances:

- If the surgery is due to organ donation.
- If any critical illness is due directly or indirectly to a pre-existing condition.
- If the treatment is for investigation or research (for example, experimental or new physiotherapy, medical techniques or surgical techniques, medical devices not approved by the Institutional Review Board and the Health Sciences Authority, and medical trials for medicinal products, whether or not these trials have a clinical trial certificate issued by the Health Sciences Authority or similar bodies);
- If the treatment is for preventive purposes or for health screening or promoting good health (such as dietary replacement or supplement).
- If the treatment is for the convenience of the insured or registered medical practitioner or specialist (for example, treatment that can reasonably be provided out of a hospital, but is provided as an inpatient treatment)
- If the life assured suffered symptoms of or had investigations for or was diagnosed with a critical illness any time before or within 90 days from the cover start date.
- If the critical illness is due to deliberate acts such as self-inflicted injuries, illnesses or attempted suicide;
- If the treatment is for improving appearance, such as cosmetic surgery or any treatment relating to a previous cosmetic treatment;
- If it is for overseas medical treatment;
- If the treatment is for pregnancy, childbirth, miscarriage, abortion or termination of pregnancy, or any form of related stay in hospital or treatment;
- If treatment is for infertility, sub-fertility, assisted conception, erectile dysfunction, impotence or any contraceptive treatment;
- If treatment is for psychological disorders, personality disorders, mental conditions or behavioural disorders, including any addiction or dependence as a result of these disorders such as gambling or gaming addiction;
- If treatment is due to unlawful acts, provoked assault or deliberate exposure to danger;
- If the treatment is for sexually-transmitted diseases;
- If the life assured undergoes sex-change operations;
- If treatment is experimental or pioneering medical or surgical techniques and medical devices not approved by the Institutional Review Board and the Centre of Medical Device Regulation and medical trials for medicinal products whether or not these trials have a clinical trial certificate issued by the Health Sciences Authority of Singapore;
- If the life assured undergoes alternative or complementary treatments, including traditional Chinese medicine (TCM) or stays in any health-care establishment for social or non-medical reasons;
- If treatment is for injuries due to being directly involved in civil commotion, riot or strike;
- If the critical illness is due to radiation or contamination from radioactivity;
- If the critical illness is due to warlike operations (whether war is declared or not), war, invasion, riot or any similar event
- If the critical illness is due to the deliberate misuse of drugs or alcohol;
- If the critical illness is caused by acquired immunodeficiency syndrome (AIDS), AIDS-related complex or infection by human immunodeficiency virus (HIV), except as stated under HIV due to blood transfusion and occupationally acquired HIV

***What do we pay for Death Benefit?***

If the life assured dies, we pay the Death benefit which is 20% of your PRUActive Protect sum assured as shown on your certificate of life assurance, less any amounts you owe us.

All other claims under your PRUActive Protect policy and its riders will not reduce the Death benefit sum assured.

However, if you reduced your PRUActive Protect sum assured, your Death benefit will be revised to 20% of the reduced sum assured.

What is not covered under Death Benefit?

If the life assured dies directly or indirectly from an activity under special exclusion or special terms and conditions shown in your certificate of life assurance, we do not pay the death benefit but we will refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) and any claim we have had to pay for your policy.

If the life assured dies from suicide within 12 months from the cover start date or date of reinstatement (if any) of your policy, we will make your policy void. In this case, we cancel it and refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) and any claim we have had to pay for your policy.

The policy automatically terminates once we have paid a claim for this benefit.



What do we pay for Additional Benefit?

If the life assured is diagnosed with a medical condition that requires him to undergo Angioplasty and Other Invasive Treatment for Coronary Artery, we pay 10% of the PRUActive Protect sum assured up to \$25,000.

We pay this benefit once only.

The life assured must survive at least seven days from the date of diagnosis.

The medical condition must be diagnosed by a registered medical practitioner.

We can ask for a medical examination to be carried out by a medical practitioner registered with the Singapore Medical Council if we decide the medical reports you give us are not enough for our purposes

A claim under this benefit will not affect the sum assured of your policy.

Angioplasty and other invasive treatment for coronary artery involves having a balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of at least 60% stenosis of one or more major coronary arteries as shown by angiographic evidence. The revascularisation must be considered medically necessary by a consultant cardiologist.

Coronary arteries refer to the left main stem, left anterior descending, circumflex and right coronary artery.

Diagnostic angiography is excluded.

The Additional Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.



What do we pay for Child Cover Benefit?

When the life assured and spouse each buys a PRUActive Protect policy, their child or children will be provided with free child cover.

If the child is diagnosed as having any one of the 36 critical illnesses or 9 juvenile medical conditions, we pay:

- 25% of one of the parents' PRUActive Protect sum assured, whichever is higher
- only once for each child and up to \$25,000 for each child
- this benefit only after the second policy anniversary of the parent's policy.

If the claim is received when the covered condition is diagnosed:

- before the first policy anniversary of the parent's policy, we will not pay anything
- after the first but before the second policy anniversary of the parent's policy, we will pay 50% of the benefit. This means we pay 12.5% of the sum assured only.

The policy anniversary above is based on the cover start date of the parent's policy. We will base on the most recent cover start date if the dates are different. If either one or both parents' policy have been reinstated, we will base on the most recent reinstatement date.

For us to pay the claim, the following must apply:

- The child must survive at least 14 days from the date of diagnosis;
- The child is 17 years old and below, and
- Both parents' policies must still be effective and not ended at the time of the claim, unless one of the parents' policy ended because of a claim

Child or children refer to either the biological or adopted child of the life assured, including an unborn child or children.

To make a claim, the life assured has to submit the child's birth certificate or adoption papers as proof of relationship.

A pay out under this benefit will not reduce the parent's PRUActive Protect policy's sum assured.



What Critical Illnesses and Juvenile Medical Conditions are covered under Child Cover benefit?

We cover the 36 Critical Illnesses as listed in the ***What Critical Illnesses* are covered?*** section above.

We cover the following Juvenile Medical Conditions:

1. Glomerulonephritis with Nephrotic Syndrome
2. Haemophilia A and Haemophilia B
3. Insulin Dependent Diabetes Mellitus
4. Kawasaki Disease with heart complications
5. Osteogenesis Imperfecta
6. Rheumatic Fever with valvular impairment
7. Still's Disease
8. Wilson's Disease
9. Hand Foot Mouth Disease with serious complications

What is not covered under Child Cover Benefit?

We do not pay the Child Cover benefit in any of the following circumstances:

- If the child is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- If the child is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- If the child is diagnosed as having a critical illness
 - o within 12 months from the most recent cover start date or date of reinstatement (if any)
 - o before the child is 30 days old,
 - o and dies within 14 days from the date of diagnosis,
 - o when the child is 18 years old and above
- If the child is diagnosed as having a covered illness caused by:
 - o Acquired Immune Deficiency Syndrome (AIDS), AIDS-related complex or infection by Human Immunodeficiency Virus (HIV), except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o self-inflicted injuries while sane or insane;
 - o alcohol or drug abuse.
 - o taking part or attempting to take part in an unlawful act;

The cover start date above refers to the cover start date of the parent's policy. We will base on the most recent cover start date if the dates are different. If either one or both parents' policy have been reinstated, we will base on the most recent reinstatement date.



What do we pay for Spouse Waiver Benefit?

When the life assured's spouse is diagnosed as having any one of the 36 critical illnesses we will waive the premiums of the PRUActive Protect policy and its supplementary benefits (if any) for 12 months from the next premium due date.

You can only claim once under this benefit.

To make a claim, the life assured would have to submit their marriage certificate as proof of their relationship.

The Spouse Waiver benefit does not waive the premiums of any waiver supplementary benefits attached to your PRUActive Protect policy

If the Payer Security Plus benefit has already been included to this plan, this Spouse Waiver benefit will not apply.

The Spouse Waiver Benefit automatically terminates once the Critical Illness Benefit has been fully claimed or terminated.

What is not covered under Spouse Waiver Benefit?

We do not waive premiums under the Spouse Waiver benefit in any of the following circumstances, if the spouse:

- is suffering from any pre-existing disability, injury, illnesses, diseases, impairments or conditions before the cover start date or date of reinstatement (if any);
- is diagnosed with any critical illness that was due, directly or indirectly, to a congenital defect, disease or hereditary condition;
- is diagnosed with a Heart Attack of Specified Severity, Major Cancer, Other Serious Coronary Artery Disease or requiring Coronary Artery By-pass Surgery within 90 days from the cover start date or date of reinstatement (if any);
- is diagnosed with Angioplasty and Other Invasive Treatment for Coronary Artery;
- dies within 30 days from the date of diagnosis
- is diagnosed as having a covered illness caused by:
 - o self-inflicted injuries while sane or insane;
 - o AIDS, AIDS-related complex or infection by HIV except under circumstances specifically covered and defined in the definitions of covered critical illnesses provision, if any.
 - o using unprescribed drugs if the drugs are required by law to be prescribed by a registered medical practitioner;
 - o taking part or attempting to take part in an unlawful act; or
 - o alcohol or drug abuse.



Option to convert to another policy:

If you bought your policy on standard terms (in other words, you were not given our offer of conditional acceptance where the life assured was offered special terms and conditions for accepting the proposal for life assurance), you can convert your policy to a new policy.

Before the cover end date, you can choose to replace your PRUActive Protect policy and buy a new available regular premium whole life or endowment policy without showing evidence of good health.

We can change the types of policy you can buy.

You can only do this if:

- the life assured is under 65 years old;
- you have paid all the premiums due under your PRUActive Protect policy;
- you pay the premiums for your new policy; and
- we have not paid out any claim under your PRUActive Protect policy and all its supplementary benefits;

The new policy must:

- meet the stated minimum sum assured, minimum premium and policy terms; and
- have a sum assured that is:
 - o the same or less than the sum assured of your PRUActive Protect policy; and
 - o not more than \$500,000.

If you do a partial conversion, the balance sum assured of your current PRUActive Protect must be more than the minimum sum assured of the new regular premium whole life or endowment policy that you are converting to. You must also meet the minimum premium amount allowed for the new policy.

The premium charged will be based on the age of the life assured at the time you convert your policy.

If any of the benefits in your PRUActive Protect policy are offered with special terms and conditions that are not medical-related and we allowed the conversion, these same terms and conditions will continue to apply on the new policy.

To apply to convert your policy, you must use our appropriate application form and meet the conditions on it. We will let you know if we accept your application.

Does this policy have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for PRUActive Protect are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of premium payment term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

**Termination of benefits:**

The benefits under your policy will end:

- when the life assured dies;
- if you surrender the policy;
- if you fail to pay the premiums within 30 days of the date they are due; or
- on the cover end date of the policy as shown on your certificate of life assurance, whichever event occurs first.

Select additional benefits according to your need(s):

With additional premiums, you may add the following supplementary benefits to this plan:

- Protect Plus
- Early Protect
- Early Protect Plus
- Life Protect Plus
- Severe Infections Protect
- Monthly Benefit

All supplementary benefits are subject to product terms and conditions. Please consult a representative of either Prudential Singapore or a distributor duly appointed by Prudential Singapore for more information.

Exclusions:

The exclusions mentioned above are not exhaustive and there are other conditions including but not limited to death from suicide, Special Exclusions or Special Terms and Conditions shown on your Certificate of Life Assurance, or Pre-existing Conditions that existed before the Cover Start Date, or date of reinstatement (if any) under which no benefits will be payable. Please refer to the policy document for the complete list of exclusions.

Note:

Life insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

Free Look Period

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Protect Plus

Protect Plus is a supplementary benefit, which restores the PRUActive Protect sum assured to 100% after a Critical illness benefit claim.

What do we pay?

If the life assured is shown in your certificate of life assurance to be covered for this Protect Plus benefit, then this benefit will restore the sum assured to 100% after a Critical Illness benefit claim.

The life assured is able to claim up to a maximum of 500% of the PRUActive Protect sum assured (**total sum assured**).

This 500% of the sum assured includes claims for any pre-critical medical condition claim under the Early Protect benefit (if this benefit is included).

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out. Otherwise, we pay only the Death benefit.

For us to accept the next claim, the following must apply

- If it is not the same critical illness as the one before it, there must be a period of 12 months between the dates of diagnosis (**waiting period**)
- If it is the same critical illness as the one before it, then there must be a waiting period of 24 months between the dates of diagnosis.

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims. However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.

If there was a claim under the Crisis Care Accelerator benefit, the Critical Illness benefit will be restored to 100% after a waiting period of 12 months.

If the life assured is diagnosed with more than one critical illness at the same time, we will only pay for one critical illness that has the highest severity level.

What is a recurring critical illness condition under the same category?

Recurring critical illness conditions under the same category means the critical illness condition is a recurrence or metastasis of the same critical illness condition that you claimed previously.

To avoid any doubt, the recurring critical illness condition of the same category, must meet the criteria set out in the critical illness definitions covered in this policy, and will not apply to any illness which falls outside this definition. In addition, the medical evidence must clearly show that the initial or previous critical illness condition (which has been admitted) was already in complete remission before the recurring critical illness condition was diagnosed.

Complete Remission means complete absence of clinical and objective evidence of any previous critical illness claimed condition(s), verified by a registered specialist, evidenced by absence of any signs, symptoms and supported by clinical, radiological, histological and laboratory evidence in regular follow-ups.



What is a recurring critical illness condition under different categories?

Recurring critical illness conditions under a different category means any of the following conditions:

- The claimed condition is from a different critical illness category as the previous critical illness claim that has been admitted under this policy;
- The claimed condition is from a different pathological and histological type and occurs in a different organ* or site as all previous critical illness claims that has been admitted under this policy; or
- The claimed condition is newly diagnosed with a primary cause that is identified as not related or due to any previous critical illness claim that has been admitted under this policy.

* Paired organs such as breast, ear, eyes, kidneys, lungs, ovary & testicles are considered as same organ.

To avoid any doubt, the recurring critical illness condition of a different category, must meet the criteria set out in the critical illness definitions covered in this policy, and will not apply to any illness which falls outside this definition.

Once you have made a Critical Illness benefit or Early Protect benefit claim, you cannot end this benefit.

Once there has been a successful claim under the Critical Illness benefit, the total sum assured will be reduced by the amount paid out under this benefit. The total sum assured would be 500% of the basic sum assured for your PRUActive Protect policy.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Protect Plus are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits under your policy will end:

- when the Critical Illness benefit has been fully claimed or terminated
 - when the life assured dies;
 - if you surrender the policy;
 - if you fail to pay the premiums within 30 days of the date they are due; or
 - on the cover end date of the policy as shown on your certificate of life assurance,
- whichever event occurs first.

**Note:**

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Early Protect

Early Protect is a supplementary benefit, which offers financial protection against Pre-critical medical conditions. Any pre-critical medical conditions payout under Early Protect will reduce the sum assured of the PRUActive Protect policy. It also has a Special benefit.

Benefits under the Plan:

What do we pay for Early Protect Benefit?

If the life assured is diagnosed as having any one of the pre-critical medical conditions listed below, before the cover end date, we pay 100% of the Early Protect sum assured, less any amounts owing to us. The life assured must survive at least 7 days from the date of diagnosis.

We pay this benefit for one pre-critical medical condition and up to 100% of the Early Protect sum assured shown in your certificate of life assurance. This 100% of the sum assured includes claims for any of the 36 critical illness under PRUActive Protect's Critical Illness benefit.

If there is a claim under PRUActive Protect's Critical Illness benefit, this could result in the reduction of the sum assured of Early Protect or the termination of this supplementary benefit.

This benefit ends once we pay 100% of the Early Protect sum assured.

What pre-critical medical conditions are covered?

	Critical illness category	Pre-critical medical conditions
1	Alzheimer's Disease / Severe Dementia	Moderately severe Alzheimer's disease or dementia
2	Benign Brain Tumour	<ul style="list-style-type: none">- Surgical removal of pituitary tumour or surgery for subdural haematoma- Surgical removal of pituitary tumour (by open craniotomy)
3	Blindness (Irreversible Loss of Sight)	<ul style="list-style-type: none">- Loss of sight in one eye- Optic nerve atrophy with low vision
4	Coma	<ul style="list-style-type: none">- Coma for 48 hours- Severe epilepsy
5	Coronary Artery By-pass Surgery	<ul style="list-style-type: none">- Port access or keyhole cardiac surgery- Transmyocardial laser revascularisation or enhanced external counterpulsation device insertion
6	Deafness (Irreversible Loss of Hearing)	<ul style="list-style-type: none">- Partial loss of hearing or cavernous sinus thrombosis surgery- Cochlear implant surgery
7	End Stage Kidney Failure	<ul style="list-style-type: none">- Surgical removal of one kidney- Chronic kidney disease
8	End Stage Liver Failure	<ul style="list-style-type: none">- Liver surgery- Liver cirrhosis

Critical illness category	Pre-critical medical conditions
9 End Stage Lung Disease	<ul style="list-style-type: none"> - Severe asthma or insertion of a veno-cava filter - Surgical removal of one lung
10 Fulminant Hepatitis	<ul style="list-style-type: none"> - Biliary tract reconstruction surgery - Chronic primary sclerosing cholangitis
11 Heart Attack of Specified Severity	<ul style="list-style-type: none"> - Cardiac pacemaker insertion or pericardectomy - Cardiac defibrillator insertion or early cardiomyopathy
12 HIV due to Blood Transfusion and Occupationally Acquired HIV	HIV due to assault, organ transplant or occupationally acquired HIV
13 Idiopathic Parkinson's Disease	Early and moderately severe Parkinson's disease
14 Irreversible Aplastic Anaemia	<ul style="list-style-type: none"> - Reversible aplastic anaemia - Myelodysplastic syndrome or myelofibrosis
15 Irreversible Loss of Speech	<ul style="list-style-type: none"> - Loss of speech due to permanent or temporary tracheostomy - Loss of speech due to vocal cord paralysis
16 Loss of Independent Existence	<ul style="list-style-type: none"> - Loss of independent existence (early stage) - Loss of independent existence (intermediate stage)
17 Major Burns	<ul style="list-style-type: none"> - Mild severe burns - Moderately severe burns
18 Major Cancer	<ul style="list-style-type: none"> - Carcinoma in situ of specified organs <ul style="list-style-type: none"> - Early prostate cancer - Early thyroid cancer - Early bladder cancer - Early chronic lymphocytic leukaemia - Early melanoma - Gastro-intestinal stromal tumour (GIST) - Carcinoma in situ of specified organs treated with radical surgery
19 Major Head Trauma	<ul style="list-style-type: none"> - Facial reconstructive surgery - Intermediate stage major head trauma
20 Major Organ / Bone Marrow Transplantation	<ul style="list-style-type: none"> - Small bowel transplant or corneal transplant - Major organ/bone marrow transplant (on waitlist)
21 Motor Neurone Disease	<ul style="list-style-type: none"> - Early motor neurone disease
22 Multiple Sclerosis	<ul style="list-style-type: none"> - Early multiple sclerosis - Mild multiple sclerosis
23 Muscular Dystrophy	<ul style="list-style-type: none"> - Moderately severe Muscular dystrophy - Spinal-cord disease or injury resulting in bowel and bladder dysfunction
24 Open Chest Heart Valve Surgery	<ul style="list-style-type: none"> - Percutaneous valve surgery - Percutaneous valve replacement or device repair
25 Open Chest Surgery to Aorta	<ul style="list-style-type: none"> - Minimally invasive surgery to aorta or - Large asymptomatic aortic aneurysm

Critical illness category		Pre-critical medical conditions
26	Other Serious Coronary Artery Disease	<ul style="list-style-type: none"> - Early stage other serious coronary artery disease - Intermediate stage other serious coronary artery disease
27	Paralysis (Irreversible Loss of Use of Limbs)	<ul style="list-style-type: none"> - Loss of use of one limb - Loss of use of one limb needing a prosthesis
28	Persistent Vegetative State (Apallic Syndrome)	<ul style="list-style-type: none"> - Akinetic Mutism - Locked in syndrome
29	Poliomyelitis	<ul style="list-style-type: none"> - Peripheral Neuropathy - Poliomyelitis (intermediate stage)
30	Primary Pulmonary Hypertension	<ul style="list-style-type: none"> - Early pulmonary hypertension - Secondary pulmonary hypertension
31	Progressive Scleroderma	<ul style="list-style-type: none"> - Early progressive scleroderma - Progressive scleroderma with CREST syndrome
32	Severe Bacterial Meningitis	<ul style="list-style-type: none"> - Bacterial meningitis with full recovery - Bacterial meningitis with reversible neurological deficit
33	Severe Encephalitis	<ul style="list-style-type: none"> - Viral encephalitis with full recovery - Moderate viral encephalitis with full recovery
34	Stroke with Permanent Neurological Deficit	<ul style="list-style-type: none"> - Brain aneurysm surgery or cerebral shunt insertion - Carotid artery surgery
35	Systemic Lupus Erythematosus with Lupus Nephritis	<ul style="list-style-type: none"> - Mild systemic lupus erythematosus - Erythematosus - Moderately severe systemic lupus erythematosus with lupus nephritis (early stage)
36	Terminal Illness	-

The definitions of these pre-critical medical conditions can be found at the last section of the document.



What do we pay for Special Benefit?

If the life assured is diagnosed with any of the 12 listed medical conditions below, we pay 20% of the Early Protect benefit sum assured up to \$25,000 for each medical condition and up to a maximum of \$200,000 for each life assured.

A claim under this benefit will not affect the sum assured of your PRUActive Protect policy.

The life assured must survive at least seven days from the date of diagnosis.

The medical conditions must be diagnosed by a registered medical practitioner.

We can ask for a medical examination to be carried out by a medical practitioner registered with the Singapore Medical Council if we decide the medical reports you give us are not enough for our purposes

We pay this benefit once for each of the listed Special benefit medical conditions up to 10 different medical conditions.

We cover the following medical conditions:

1. Diabetic complications
2. Osteoporosis with fractures
3. Severe rheumatoid arthritis

These three medical conditions will cover a life assured up to the age of 84 years old only.

Juvenile medical conditions:

4. Glomerulonephritis with Nephrotic Syndrome
5. Haemophilia A and Haemophilia B
6. Insulin Dependent Diabetes Mellitus
7. Kawasaki Disease with heart complications
8. Osteogenesis Imperfecta
9. Rheumatic Fever with valvular impairment
10. Still's Disease
11. Wilson's Disease
12. Hand Foot Mouth Disease with serious complications

These Juvenile medical conditions will cover the life assured up to the age of 17 years old only.

Definitions of these 12 Special benefit medical conditions:

1. Diabetic complications

- Diabetic complications means diabetic retinopathy with the need to have laser treatment confirmed to be absolutely necessary by an ophthalmologist with the support of a fluorescent fundus angiography report, and vision is measured at 6/18 or worse in the better eye using a Snellen eye chart.
- A definite diagnosis of diabetic nephropathy by a nephrologist which is evident by eGFR less than 30 ml/min/1.73 m² with ongoing proteinuria greater than 300mg/24 hours.
- Having a leg, foot, toe, arm, hand or finger amputated to treat gangrene that has happened because of a complication of diabetes.



2. Osteoporosis with fractures

Osteoporosis is a degenerative bone disease that results in loss of bone. The diagnosis must be supported by a bone density reading which satisfies the World Health Organisation (WHO) definition of osteoporosis with a bone density reading T-score of less than -2.5 . There must also be a history of three or more osteoporotic fractures involving femur, wrist or vertebrae. These fractures must directly cause the life assured's inability to perform (whether aided or unaided) at least one of the following six "Activities of Daily Living" for a continuous period of at least six months.

Activities of Daily Living:

- (i) Washing – the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- (ii) Dressing – the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- (iii) Transferring – the ability to move from a bed to an upright chair or wheelchair and vice versa;
- (iv) Mobility – the ability to move indoors from room to room on level surfaces;
- (v) Toileting – the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- (vi) Feeding – the ability to feed oneself once food has been prepared and made available

For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.

3. Severe rheumatoid arthritis

Severe Rheumatoid Arthritis means widespread joint destruction with major clinical deformity of three (3) or more of the following joint areas: hands, wrists, elbows, spine, knees, ankles and/or feet. The diagnosis must be supported by all of the following:

- morning stiffness;
- symmetric arthritis;
- presence of rheumatoid nodules;
- elevated titres of rheumatoid factors; and
- radiographic evidence of severe involvement.

The diagnosis must be confirmed by a consultant rheumatologist.

4. Glomerulonephritis with Nephrotic Syndrome

A confirmed diagnosis of glomerulonephritis with nephrotic syndrome by a qualified paediatrician acceptable to the Company and who should confirm that a treatment regimen appropriate to the clinical presentation has been followed throughout the period to which syndrome relates. The syndrome must have continued for a period of at least 6 months with or without intervening periods of remission.

5. Haemophilia A and Haemophilia B

The Insured must be suffering from severe hemophilia A (VIII deficiency) or hemophilia B (IX deficiency) with factor VIII or factor IX activity levels less than one percent (1%). Diagnosis must be confirmed by a qualified haematologist acceptable to the Company.



6. Insulin Dependent Diabetes Mellitus

Insulin dependent diabetes mellitus as characterised by the continuous dependence on exogenous insulin for the preservation of life as diagnosed by a consultant paediatrician. Evidence of insulin dependence for a minimum of six (6) months will be required before a claim is considered.

7. Kawasaki Disease with heart complications

The diagnosis of Kawasaki disease by a consultant paediatrician or cardiologist. There must be echocardiographic evidence of cardiac involvement manifested by dilation or aneurysm formation in the coronary arteries present for at least six (6) months after the initial acute episode.

8. Osteogenesis Imperfecta

The Insured must be diagnosed as a type III Osteogenesis Imperfecta confirmed by the occurrence of all of the following conditions:

- (a) the result of physical examination of the Insured by a Doctor that the Insured suffers from growth retardation and hearing impairment;
- (b) the result of x-ray studies reveals multiple fracture of bones and progressive kyphoscoliosis; and
- (c) positive result of skin biopsy.

Diagnosis of Osteogenesis Imperfecta must be confirmed by a qualified physician.

9. Rheumatic Fever with valvular impairment

A confirmed diagnosis by a qualified paediatrician acceptable to the Company of acute rheumatic fever according to the Jones criteria for its diagnosis. There must be involvement of 1 or more heart valves and at least mild valve incompetence attributable to rheumatic fever as confirmed by quantitative investigations of the valve function by a qualified cardiologist acceptable to the Company.

Jones Criteria for Diagnosis of Rheumatic Fever:

A firm diagnosis requires that two major or one major and two minor criteria are satisfied, in addition to evidence of recent streptococcal infection.

Major Criteria:

- Carditis
- Polyarthritis
- Chorea
- Erythema marginatum
- Subcutaneous Nodules

Minor Criteria:

- Fever
- Arthralgia
- Previous rheumatic fever or rheumatic heart disease
- Acute phase reactions: ESR / CRP / Leukocytosis
- Prolonged PR interval

Evidence of preceding streptococcal infection – any one of the following is considered adequate evidence of infection:

- Increased antistreptolysin O or other streptococcal antibodies
- Positive throat culture for Group A beta-hemolytic streptococci
- Positive rapid direct Group A strep carbohydrate antigen test
- Recent scarlet fever.



10. Still's Disease

A form of juvenile chronic arthritis characterised by high fever and signs of systemic illness that can exist for months before the onset of arthritis. The condition must be characterised by cardinal manifestations which include high spiking, daily (quotidian) fevers, evanescent rash, arthritis, splenomegaly, lymphadenopathy, serositis, weight loss, neutrophilic leucocytosis, increased acute phase proteins and sero-negative tests for Antinuclear Antibodies (ANA) and Rheumatoid Factor (RF). A Claim for this benefit will be admitted only if the diagnosis is confirmed by a paediatric rheumatologist and the condition has to be documented for at least 6 months.

11. Wilson's Disease

A potentially fatal disorder of copper toxicity characterised by progressive liver disease and/or neurologic deterioration due to copper deposit. The diagnosis must be confirmed by a Specialist Medical Practitioner and the treatment with a chelating agent must be documented for at least 6 months.

12. Hand Foot Mouth Disease with serious complications

The unequivocal diagnosis of Hand, Foot and Mouth disease with evidence of infection by Coxsackie A17 and Enterovirus 71. For the purpose of this contract, only severe Hand, Foot and Mouth disease requiring the admission into an ICU and associated with either encephalitis and/ or myocarditis will be covered. Positive isolation of the causative virus to support the diagnosis has to be provided together with documented evidence of the presence of encephalitis and/ or myocarditis.

A claim for this benefit will only be made with evidence of neurological deficit at least 30 days after the event.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Early Protect are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits under your policy will end:

- when the Early Protect benefit has been fully claimed or terminated
- when the life assured dies;
- if you surrender the policy;
- if you fail to pay the premiums within 30 days of the date they are due; or
- on the cover end date of the policy as shown on your certificate of life assurance, whichever event occurs first.

Exclusions:

There are certain conditions under which no benefits will be payable. These are stated as exclusions in your policy document. You are advised to read your policy document for the full details of these exclusions.



Definitions of pre-critical medical conditions:

Critical illness category	Pre-critical medical conditions	Definition
1 - Alzheimer's Disease / Severe Dementia	Moderately severe Alzheimer's Disease or Dementia	<p>A definite diagnosis of Alzheimer's disease or dementia due to irreversible organic brain disorders by a consultant neurologist. The Mini-mental exam score must be less than 20 out of 30 or an equivalent of this score using other Alzheimer's tests. There must also be permanent clinical loss of the ability to do all the following:</p> <ul style="list-style-type: none"> - Remember; - Reason; and - Perceive, understand, express and give effect to ideas. <p>This diagnosis must be supported by the clinical confirmation of an appropriate consultant and supported by the Company's appointed doctor.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> - Non-organic diseases such as neurosis and psychiatric illnesses; and - Alcohol related brain damage
2 – Benign Brain Tumour	Surgical removal of pituitary tumour; or	The actual undergoing of surgical removal of pituitary tumour necessitated as a result of symptoms associated with increased intracranial pressure caused by the tumour. The presence of the underlying tumour must be confirmed by imaging studies such as CT scan or MRI. Partial removal of pituitary microadenoma is specifically excluded.
	Surgery removal of pituitary tumour (by open craniotomy)	<p>The actual undergoing of total surgical removal of a pituitary tumour by open craniotomy necessitated as a result of symptoms associated with increased intracranial pressure caused by the tumour or where surgical removal is considered necessary upon the advice of a consultant endocrinologist. The presence of the underlying tumour must be confirmed by imaging studies such as CT scan or MRI. Surgical removal of the pituitary by transphenoidal hypophysectomy is excluded.</p> <p>Removal of the following are excluded:</p> <ul style="list-style-type: none"> - Cysts; - Abscess; - Angioma; - Granulomas; - Vascular Malformations; - Haematomas; and - Tumours of the spinal cord and skull base
	Surgery for subdural haematoma	The actual undergoing of Burr Hole Surgery to the head to drain subdural haematoma as a result of an accident. The need for the Burr Hole Surgery must be certified to be

Critical illness category	Pre-critical medical conditions	Definition
		absolutely necessary by a specialist in the relevant field.
3 – Blindness (Irreversible Loss of Sight)	<p>Loss of sight in one eye</p> <p>Optic Nerve Atrophy with low vision</p>	<p>Permanent and irreversible loss of sight in one eye as a result of illness or accident to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in one eye using a Snellen eye chart or equivalent test, or visual field of 20 degrees or less in one eye.</p> <p>The blindness must be confirmed by an ophthalmologist. Blindness resulting from alcohol or drug misuse will be excluded.</p> <p>The unequivocal diagnosis of optic nerve atrophy affecting one or both eyes. There must also be permanent and irreversible loss of sight to both eyes to the extent that even when tested with the use of visual aids, vision is measured at 6/60 or worse in the better eye using a Snellen eye chart. The optic nerve atrophy and degree of visual loss of sight must be certified by an ophthalmologist. Optic nerve atrophy resulting from alcohol or drug misuse will be excluded.</p>
4 - Coma	<p>Coma for 48 hours</p> <p>Severe Epilepsy</p>	<p>Coma that persists for at least 48 hours. This diagnosis must be supported by evidence of all of the following:</p> <ul style="list-style-type: none"> (a) no response to external stimuli for at least 48 hours, (b) the use of life support measures to sustain life, and (c) Brain damage resulting in permanent neurological deficit which must be assessed at least 30 days after the onset of the coma. <p>Coma resulting directly from alcohol or drug abuse is excluded. Medically induced coma also does not fulfil this definition.</p> <p>Severe epilepsy confirmed by all of the following:</p> <ul style="list-style-type: none"> (a) Diagnosis made by a consultant neurologist by the use of electroencephalography (EEG), magnetic resonance imaging (MRI), position emission tomography (PET) or any other appropriate diagnostic test that is available, (b) There must be documentation of recurrent unprovoked tonic-clonic or grand mal seizures of more than 5 attacks per week, and be known to be resistant to optimal therapy as confirmed by drug serum-level testing, and (c) The Life Assured must have been taking at least 2 prescribed anti-epileptic (anti-convulsant) medications for at least 6 months on the recommendation of a consultant neurologist. <p>Febrile or absence (petit mal) seizures alone will not satisfy the requirement of this definition.</p>

Critical illness category	Pre-critical medical conditions	Definition
5 – Coronary Artery By-pass Surgery	Port Access or Key hole Cardiac Surgery	(i) The actual undergoing for the first time of Coronary Artery Bypass Grafting or Coronary arterectomy performed by port access procedures to correct the narrowing or blockage of one or more coronary arteries not amenable to other surgical or percutaneous techniques; or
	Laser Revascularisation or Enhanced External Counterpulsation Device Insertion	(ii) The actual undergoing for the first time of Transmyocardial Laser Revascularisation or Enhanced External Counterpulsation for the treatment of intractable angina not responsive to medical treatment.
		<p>For (i) and (ii) above: All other intravascular procedures or MIDCAB procedures are excluded. All percutaneous intravascular techniques are excluded.</p> <p>The diagnosis of significant coronary artery obstruction and the necessity of the above procedures must be certified by a Specialist and must also be supported by angiographic evidence.</p> <p>When Early Stage Other Serious Coronary Artery Disease or Intermediate Stage Other Serious Coronary Artery Disease has been claimed under the Early protector benefit of this policy, the benefit Port Access or Key hole Cardiac Surgery will no longer be payable.</p>
6 – Deafness (Irreversible Loss of Hearing)	Partial loss of hearing; or	Permanent binaural hearing loss with the loss of at least 60 decibels in all frequencies of hearing as a result of illness or accident. The hearing loss must be established by an Ear, Nose, Throat (ENT) specialist and supported by an objective diagnostic test to indicate the quantum loss of hearing.
	Cavernous sinus thrombosis surgery	The actual undergoing of a surgical drainage for Cavernous Sinus Thrombosis. The presence of Cavernous Sinus Thrombosis as well as the requirement for surgical intervention must be certified to be absolutely necessary by a specialist in the relevant field.
	Cochlear implant surgery	The actual undergoing of a surgical cochlear implant as a result of permanent damage to the cochlea or auditory nerve. The surgical procedure as well as the insertion of the implant must be certified to be absolutely necessary by an Ear, Nose, Throat (ENT) specialist.
7 – End Stage Kidney Failure	Surgical removal of one kidney; or	The complete surgical removal of one kidney necessitated by any illness or accident. The need for the surgical removal of the kidney must be certified to be absolutely necessary by a

Critical illness category	Pre-critical medical conditions	Definition
		nephrologist. Kidney donation is excluded.
	Chronic Kidney Disease	A nephrologist must make a diagnosis of chronic kidney disease with permanently impaired renal function. There must be laboratory evidence that shows that renal function is severely decreased with an eGFR less than 15 ml/min/1.73m ² body surface area, persisting for a period of 6 months or more.
8 – End Stage Liver Failure	Liver surgery	Partial hepatectomy of at least one entire lobe of the liver that has been found necessary as a result of illness or accident as suffered by the life assured. Liver disease secondary to alcohol and drug abuse are excluded.
	Liver Cirrhosis	Cirrhosis of Liver with a HAI-Knodell Score of 6 and above as evident by liver biopsy. The diagnosis liver cirrhosis must be unequivocally confirmed by a hepatologist and based on the histological findings of the liver biopsy. Liver disease secondary to alcohol and drug abuse are excluded.
9 – End Stage Lung Disease	Severe Asthma; or	Evidence of an acute attack of Severe Asthma with persistent status asthmaticus that requires hospitalisation and assisted ventilation with a mechanical ventilator for a continuous period of at least 4 hours on the advice of a respiratory physician;
	Insertion of a Veno-cava filter	The surgical insertion of a veno-cava filter after there has been documented proof of recurrent pulmonary emboli. The need for the insertion of a veno-cava filter must be certified to be absolutely necessary by a specialist in the relevant field.
	Surgical removal of one lung	Complete surgical removal of the entire right or left lung as a result of an illness or an accident of the Life Assured. Partial removal of a lung is not included in this benefit.
10 – Fulminant Hepatitis	Biliary Tract reconstruction surgery	Biliary tract reconstruction surgery involving choledochoenterostomy (choledochojejunostomy or choledochoduodenostomy) for the treatment of biliary tract disease that is not amenable to other surgical or endoscopic procedures. The procedure must be considered to be the most appropriate treatment by a specialist in hepatobiliary disease. This benefit is not payable if the procedure is done as a means to treat the consequences of gall stone disease or cholangitis.



Critical illness category	Pre-critical medical conditions	Definition
	Chronic Primary Sclerosing Cholangitis	<p>This benefit is payable for chronic primary sclerosing cholangitis confirmed on cholangiogram imaging confirming progressive obliteration of the bile ducts. The diagnosis must be made by a gastroenterologist and the condition must have progressed to the point where there is permanent jaundice.</p> <p>Biliary tract sclerosis or obstruction as a consequence of biliary surgery, gall stone disease, infection, cancer, inflammatory bowel disease or other secondary precipitants is excluded.</p>
11 – Heart Attack of Specified Severity	Cardiac pacemaker insertion; or	Insertion of a permanent cardiac pacemaker that is required as a result of serious cardiac arrhythmia which cannot be treated via other means. The insertion of the cardiac pacemaker must be certified as absolutely necessary by a consultant cardiologist.
	Pericardectomy	The undergoing of a pericardectomy or undergoing of any surgical procedure requiring keyhole cardiac surgery as a result of pericardial disease. Both these surgical procedures must be certified to be absolutely necessary by a consultant cardiologist.
	Cardiac defibrillator insertion; or	Insertion of a permanent cardiac defibrillator as a result of cardiac arrhythmia which cannot be treated via any other method. The surgical procedure must be certified to be absolutely necessary by a consultant cardiologist.
	Early Cardiomyopathy	<p>The unequivocal diagnosis of Cardiomyopathy which have resulted in the presence of permanent physical impairments of at least Class III of the New York Heart Association (NYHA) classification of Cardiac Impairment. The diagnosis must be confirmed by a consultant cardiologist. Cardiomyopathy that is directly related to alcohol misuse is excluded.</p> <p>The NYHA Classification of Cardiac Impairment:</p> <p>Class I: No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, dyspnea, or anginal pain.</p> <p>Class II: Slight limitation of physical activity. Ordinary physical activity results in symptoms.</p> <p>Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.</p> <p>Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.</p>

Critical illness category	Pre-critical medical conditions	Definition
12 – HIV Due to Blood Transfusion and Occupationally Acquired HIV	HIV due to Assault, Organ Transplant or Occupationally Acquired HIV	<p>A) Infection with the Human Immunodeficiency Virus (HIV) through an organ transplant, provided that all of the following conditions are met:</p> <ul style="list-style-type: none"> - The organ transplant was Medically Necessary or given as part of a medical treatment; - The organ transplant was received in Singapore after the Cover Start Date, date of endorsement or date of reinstatement of this supplementary contract, whichever is the later; and - The source of the infection is established to be from the Institution that provided the transplant and the Institution is able to trace the origin of the HIV to the infected transplanted organ. <p>B) Infection with the Human Immunodeficiency Virus (HIV) which resulted from a physical or sexual assault occurring after the Cover Start Date, date of endorsement or date of reinstatement of this Supplementary Contract, whichever is the later, provided that all the following conditions are met:</p> <ul style="list-style-type: none"> - The incident must be reported to the appropriate authority and that a criminal case must be opened; - Proof of the assault giving rise to the infection must be reported to the Company within 30 days of the assault taking place; - Proof that the assault involved a definite source of the HIV infected fluids; - Proof of sero-conversion from HIV negative to HIV positive occurring during the 180 days after the documented assault. This proof must include a negative HIV antibody test conducted within 5 days of the assault. <p>C) Infection with the Human Immunodeficiency Virus (HIV) which resulted from an accidental incident occurring after the Cover Start Date, date of endorsement or date of reinstatement of this supplementary contract, whichever is the later, whilst the Insured was carrying out the normal professional duties of his or her occupation in Singapore with the requirement that appropriate care is being exercised, provided that all the following conditions are met:</p> <ul style="list-style-type: none"> - Proof that the incident has been reported to the appropriate authority; - Proof of the accident giving rise to the infection must be reported to the Company within 30 days of the accident taking place; - Proof that the accident involved a definite source of the HIV infected fluids; - Proof of sero-conversion from HIV negative to HIV positive occurring during the 180 days after the



Critical illness category	Pre-critical medical conditions	Definition
		<p>documented accident. This proof must include a negative HIV antibody test conducted within 5 days of the accident.</p> <p>HIV infection resulting from any other means including consensual sexual activity or the use of intravenous drug is excluded.</p> <p>This benefit will not apply under either section A, B or C where a cure has become available prior to the infection. "Cure" means any treatment that renders the HIV inactive or non-infectious.</p>
13 – Idiopathic Parkinson's Disease	Early and moderately severe Parkinson's Disease	<p>The unequivocal diagnosis of idiopathic Parkinson's disease by a consultant neurologist.</p> <p>The diagnosis must be supported by all of the following conditions:</p> <ul style="list-style-type: none"> (a) The disease cannot be controlled with medication, (b) Signs of progressive impairment, and (c) Inability of the Life Assured to perform (whether aided or unaided) at least 2 of the 6 "Activities of Daily Living" for a continuous period of at least 6 months. <p>Activities of Daily Living:</p> <ul style="list-style-type: none"> (i) Washing - the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means; (ii) Dressing - the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances; (iii) Transferring - the ability to move from a bed to an upright chair or wheelchair and vice versa; (iv) Mobility - the ability to move indoors from room to room on level surfaces; (v) Toileting - the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene; (vi) Feeding - the ability to feed oneself once food has been prepared and made available. <p>Drug-induced or toxic causes of Parkinsonism are excluded.</p> <p>For the purpose of this definition, "aided" shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.</p>
14 – Irreversible Aplastic Anaemia	Reversible Aplastic Anaemia	<p>Acute reversible bone marrow failure, confirmed by biopsy, which results in anaemia, neutropenia and thrombocytopenia requiring treatment with any one of the following:</p>

Critical illness category	Pre-critical medical conditions	Definition
		<ul style="list-style-type: none"> - Blood product transfusion; - Marrow stimulating agents; - Immunosuppressive agents; or - Bone marrow transplantation. <p>The diagnosis must be confirmed by a haematologist.</p>
	Myelodysplastic Syndrome or Myelofibrosis	<p>Diagnosis of Myelodysplastic Syndrome (MDS) or Myelofibrosis must be confirmed by a haematologist as a result of marrow biopsy.</p> <p>Continuing and ongoing supportive care with blood transfusion and/or chemotherapy must be an indefinite requirement as certified by the haematologist.</p> <p>Myelofibrosis and MDS in the presence of HIV infection is excluded.</p>
15 – Irreversible Loss of Speech	Loss of Speech due to Permanent or Temporary Tracheostomy	<p>The actual undergoing of tracheostomy for the treatment of lung disease or airway disease or as a ventilatory support measure following major trauma or burns.</p> <p>The Life Insured must have been under the care of a medical specialist. The tracheostomy must have been performed for the purpose of saving life. The benefit is only payable if the tracheostomy is required to remain in place and functional for a period of three months.</p>
	Loss of Speech due to Vocal Cord Paralysis	<p>This benefit is payable on diagnosis of complete and irrecoverable paralysis of the vocal cords as a consequence of neurological disease or injury. The benefit is only payable where surgical intervention is required on the advice of an Ear, Nose, and Throat (ENT) surgeon to restore the loss of speech.</p> <p>All psychiatric-related causes are excluded.</p> <p>The inability to speak must be established for a continuous period of twelve (12) months. This diagnosis must be supported by an ENT specialist.</p>
16 – Loss of independent existence	Loss of independent existence (early stage)	<p>Total and irreversible physical loss of all fingers including thumb of the same hand due to accident. This condition must be confirmed by a registered medical practitioner. Loss of fingers due to self-inflicted injuries is excluded</p>
	Loss of independent existence (intermediate stage)	<p>A condition as a result of a disease, illness or injury whereby the life insured is unable to perform (whether aided or unaided) at least 2 of the following 6 "Activities of Daily Living", for a continuous period of 6 months.</p>



Critical illness category	Pre-critical medical conditions	Definition
		<p>Activities of Daily Living:</p> <ul style="list-style-type: none"> (i) Washing- the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means; (ii) Dressing- the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances; (iii) Transferring- the ability to move from a bed to an upright chair or wheelchair and vice versa; (iv) Mobility- the ability to move indoors from room to room on level surfaces; (v) Toileting- the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene; (vi) Feeding- the ability to feed oneself once food has been prepared and made available. This condition must be confirmed by our approved doctor. Non-organic diseases such as neurosis and psychiatric illnesses are excluded. <p>For the purpose of this definition, “aided” shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.</p>
17 – Major Burns	Mild severe burns	Second degree (partial thickness of the skin) burns covering at least 20% of the surface of the life assured’s body; or
	Moderately severe burns	Third degree (full thickness of the skin) burns covering at least 50% of the face of the Life Assured.
18 – Major Cancer	Carcinoma in situ of specified organs	<p>Carcinoma in situ of the following sites: Breast, uterus, ovary, fallopian tube, vulva, vagina, cervix uteri, colon, rectum, penis, testis, lung, liver, stomach, nasopharynx or bladder.</p> <p>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. 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. Clinical diagnosis does not meet this standard.</p> <p>Clinical diagnosis or Cervical Intraepithelial Neoplasia (CIN)</p>

Critical illness category	Pre-critical medical conditions	Definition
		classification which reports CIN I, CIN II, and CIN III (severe dysplasia without carcinoma in situ) does not meet the required definition and are specifically excluded. Carcinoma in situ of the biliary system is also specifically excluded.
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 that is less than 1cm in diameter.
Early Bladder Cancer		Bladder cancer histologically described using the TNM Classification as T1N0M0 (including Papillary microcarcinoma of bladder).
Early Chronic Lymphocytic Leukaemia		Chronic Lymphocytic Leukaemia (CLL) RAI Stage 1 or 2. CLL RAI stage 0 or lower is excluded.
Early Melanoma		Invasive melanomas of less than 1.5mm Breslow thickness, or less than Clark Level 3. Non-invasive melanoma histologically described as “in-situ” is excluded.
Gastro-intestinal Stromal Tumour (GIST)		All Gastro-intestinal Stromal Tumours histologically classifies as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs which are treated with surgery or chemotherapy as recommended by an oncologist.
Carcinoma in situ of specified organs treated with Radical Surgery		<p>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 of the following organs: breast (mastectomy), prostate (prostatectomy), corpus uteri (hysterectomy), ovary (oophorectomy), fallopian tube (salpingectomy), colon (colectomy) or stomach (gastrectomy). 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. Clinical diagnosis does not meet this standard.</p> <p>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. All grades of cervical intraepithelial neoplasia (CIN) and prostatic intraepithelial neoplasia (PIN) are specifically excluded.</p> <p>The actual undergoing of the surgeries listed above and the</p>

Critical illness category	Pre-critical medical conditions	Definition
		<p>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.</p> <p>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. 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. Clinical diagnosis does not meet this standard.</p>
19 – Major Head Trauma	Facial reconstructive surgery; or	<p>The actual undergoing of re-constructive surgery above the neck (restoration or re-construction of the shape of and appearance of facial structures which are defective, missing or damaged or misshapen) performed by a specialist in the relevant field to correct disfigurement as a direct result of an accident that occurred after the Cover Start Date of the policy. The need for surgery must be certified to be absolutely necessary by a specialist in the relevant field. Treatment relating to teeth and/or any other dental restoration alone and/or cosmetic nose surgery are all excluded.</p>
	Intermediate stage Major Head Trauma	<p>Undergoing an open craniotomy as a consequence of accidental major head trauma for the treatment of depressed skull fractures or intracranial injury. The operation must be supported by evidence of an operation report.</p> <p>Burr hole surgery is excluded from this benefit.</p> <p>Major head trauma due to self-inflicted injuries, participation or attempted participation in an unlawful act, alcohol or drug abuse are excluded.</p>
20 – Major Organ / Bone Marrow Transplantation	Small bowel transplant; or	The receipt of a transplant of at least one metre of small bowel with its own blood supply via a laparotomy resulting from intestinal failure;
	Corneal transplant	The receipt of a transplant of a whole cornea due to irreversible scarring with resulting reduced visual acuity, which cannot be corrected with other methods.
	Major Organ/Bone	This benefit covers those who are on an official organ

Critical illness category	Pre-critical medical conditions	Definition
	Marrow Transplant (on waitlist)	<p>transplant waiting list for the receipt of a transplant of:</p> <ul style="list-style-type: none"> (i) Human bone marrow using hematopoietic stem cells preceded by total bone marrow ablation; or (ii) One of the following human organs: heart, lung, liver, kidney or pancreas that resulted from irreversible end stage failure of the relevant organ. <p>Other stem cell transplants are excluded. This benefit is limited to those on the official waitlist for organ transplant on Ministry of Health Singapore list of hospitals only</p>
21 – Motor Neurone Disease	Early Motor Neurone Disease	<p>Refers to a progressive degeneration of the corticospinal tracts and anterior horn cells or bulbar efferent neurons. These include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis. A neurologist must make the definite diagnosis of a motor neurone disease and this diagnosis must be supported by appropriate investigations.</p>
22 – Multiple Sclerosis	Early Multiple Sclerosis	<p>There must be a definite diagnosis of Multiple Sclerosis confirmed by a neurologist. The diagnosis must be supported by all of the following:</p> <ul style="list-style-type: none"> a) Investigations that unequivocally confirm the diagnosis to be Multiple Sclerosis; and b) Well documented history of exacerbations and remissions of neurological signs. <p>Other causes of neurological damage such as SLE and HIV are excluded.</p>
	Mild Multiple Sclerosis	<p>There must be a definite diagnosis of Multiple Sclerosis confirmed by a neurologist. The diagnosis must be supported by all of the following:</p> <ul style="list-style-type: none"> a) Investigations that unequivocally confirm the diagnosis to be Multiple Sclerosis; b) Multiple neurological deficits which occurred over a continuous period of at least 3 months; and c) Well documented history of exacerbations and remissions of neurological signs. <p>Other causes of neurological damage such as SLE and HIV are excluded.</p>
23 – Muscular Dystrophy	Moderately severe Muscular Dystrophy;	<p>A group of hereditary degenerative diseases of muscle characterised by weakness and atrophy of muscle. The</p>



Critical illness category	Pre-critical medical conditions	Definition
		<p>diagnosis of muscular dystrophy must be unequivocal and made by a consultant neurologist. The condition must result in the inability of the Life Assured to perform (whether aided or unaided) at least 2 of the following 6 “Activities of Daily Living” for a continuous period of at least 6 months:</p> <p>Activities of Daily Living:</p> <ul style="list-style-type: none"> (i) Washing - the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means; (ii) Dressing - the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances; (iii) Transferring - the ability to move from a bed to an upright chair or wheelchair and vice versa; (iv) Mobility - the ability to move indoors from room to room on level surfaces; (v) Toileting - the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene; (vi) Feeding - the ability to feed oneself once food has been prepared and made available. <p>For the purpose of this definition, “aided” shall mean with the aid of special equipment, device and/or apparatus and not pertaining to human aid.</p>
	Spinal Cord Disease or Injury resulting in Bowel and Bladder Dysfunction	<p>Spinal cord disease or cauda equina injury resulting in permanent bowel dysfunction and bladder dysfunction requiring permanent regular self-catheterisation or a permanent urinary conduit. The diagnosis must be supported by a consultant neurologist. The bowel and bladder dysfunction requiring self-catheterisation or urinary conduit must be confirmed to be present for at least six (6) months to be eligible for a claim under this benefit.</p>
24 – Open Chest Heart Valve Surgery	Percutaneous Valve Surgery	<p>Percutaneous valve surgery refers to percutaneous valvuloplasty, percutaneous valvotomy and percutaneous valve replacement where the procedure is performed totally via intravascular catheter-based techniques. Any procedure on heart valves that involves opening or entering the chest by any thoracotomy incision is excluded.</p>
	Percutaneous Valve Replacement or Device Repair	<p>This benefit is payable where a heart valve is replaced or repaired by the deployment of a permanent device or prosthesis by percutaneous intravascular techniques not involving a thoracotomy. Percutaneous balloon valvuloplasty and other percutaneous repair procedures where no new valve or any percutaneous device or prosthesis is deployed are excluded.</p>

Critical illness category	Pre-critical medical conditions	Definition
25 – Open Chest Surgery to the Aorta	Minimally invasive surgery to Aorta; or	The actual undergoing of surgery via minimally invasive or intra-arterial techniques to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta, as evidenced by a cardiac echocardiogram or any other appropriate diagnostic test that is available and confirmed by a consultant cardiologist. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.
	Large asymptomatic aortic aneurysm	Large symptomatic abdominal or thoracic aortic aneurysm or aortic dissection as evidenced by appropriate imaging technique. The aorta must be enlarged greater than 55mm in diameter and the diagnosis must be confirmed by a consultant cardiologist.
26 – Other Serious Coronary Artery Disease	Early Stage Other Serious Coronary Artery Disease	The narrowing of the lumen of at least two (2) coronary arteries by a minimum of sixty percent (60%), as proven by a coronary arteriography regardless of whether or not any form of coronary artery surgery has been performed. Coronary arteries herein refer to the left main stem, left anterior descending, circumflex and right coronary artery. Any non-invasive methods of determining coronary artery stenosis are not acceptable.
	Intermediate Stage Other Serious Coronary Artery Disease	The narrowing of the lumen of at least three (3) coronary arteries by a minimum of sixty percent (60%), as proven by a coronary arteriography regardless of whether or not any form of coronary artery surgery has been performed. Coronary arteries herein refer to the left main stem, left anterior descending, circumflex and right coronary artery. Any non-invasive methods of determining coronary artery stenosis are not acceptable.
27 – Paralysis (Irreversible Loss of Use of Limbs)	Loss of Use of One Limb	Total and irreversible loss of use of one (1) entire limb (above elbow or above knee) due to illness or accident persisting for a period of at least 6 weeks. This condition must be confirmed by a specialist in the relevant field. Loss of use of limb due to self-inflicted injuries, alcohol or drug abuse are excluded.
	Loss of Use of One Limb requiring Prosthesis	Total and irreversible loss of use of one (1) entire limb (above elbow or above knee) which required the fitting and use of prosthesis due to illness or accident. This condition must be confirmed by specialist in the relevant field. Loss of use of limb due to self-inflicted injuries, alcohol or

Critical illness category	Pre-critical medical conditions	Definition
		drug abuse are excluded.
28 – Persistent vegetative state (Apallic syndrome)	Akinetic Mutism	Organic brain damage which results in a person being unable to talk or move despite the fact that they appear alert at times. This diagnosis must be supported by evidence showing organic brain damage and definitely confirmed by a consultant neurologist holding such an appointment at an approved hospital. This condition has to be medically documented for a continuous period of at least one 1 month.
		Akinetic mutism because of psychological reasons is excluded
	Locked in syndrome	Condition in which a person is aware but cannot move or communicate verbally due to complete paralysis of all voluntary muscles in the body except for vertical eye movements and blinking. There should be evidence of quadriplegia and inability to speak. This diagnosis must be supported by evidence of infarction of the ventral pons and EEG indicating that the person is not unconscious. The diagnosis must be definitely confirmed by a consultant neurologist holding such an appointment at an approved hospital. This condition has to be medically documented for a continuous period at least one 1 month.
29 – Poliomyelitis	Peripheral Neuropathy	This refers to severe peripheral motor neuropathy resulting in significant motor weakness, fasciculation and muscle wasting. The diagnosis must be confirmed by a consultant neurologist as a result of nerve conduction studies and result in a permanent need for the use walking aids or a wheelchair. Diabetic neuropathy and neuropathy due to alcohol is excluded.
	Poliomyelitis (Intermediate Stage)	The occurrence of Poliomyelitis where the following conditions are met: <ul style="list-style-type: none"> - Poliovirus is identified as the cause - Paralysis of the respiratory muscles supported by ventilator for a continuous period of minimum 96 hours
30 – Primary Pulmonary Hypertension	Early Pulmonary Hypertension	Primary or Secondary pulmonary hypertension with established right ventricular hypertrophy leading to the presence of permanent physical impairment of at least Class III of the New York Heart Association (NYHA) Classification of Cardiac Impairment.
		The NYHA Classification of Cardiac Impairment: Class I: No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, dyspnea, or anginal pain.

Critical illness category	Pre-critical medical conditions	Definition
		<p>Class II: Slight limitation of physical activity. Ordinary physical activity results in symptoms.</p> <p>Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.</p> <p>Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.</p> <p>The diagnosis must be established by cardiac catheterisation by a consultant cardiologist.</p>
	Secondary Pulmonary Hypertension	<p>Secondary pulmonary hypertension with established right ventricular hypertrophy leading to the presence of permanent physical impairment of at least Class IV of the New York Heart Association (NYHA) Classification of Cardiac Impairment. The diagnosis must be established by cardiac catheterisation by a consultant cardiologist.</p> <p>The NYHA Classification of Cardiac Impairment:</p> <p>Class I: No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, dyspnea, or anginal pain.</p> <p>Class II: Slight limitation of physical activity. Ordinary physical activity results in symptoms.</p> <p>Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.</p> <p>Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest</p>
31 – Progressive Scleroderma	Early Progressive Scleroderma	<p>A rheumatologist must make the definite diagnosis of progressive systemic scleroderma, based on clinically accepted criteria. This diagnosis must be unequivocally supported by biopsy and serological evidence.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> - Localised scleroderma (linear scleroderma or morphea); - Eosinophilic fasciitis; and - CREST syndrome
	Progressive Scleroderma with CREST syndrome	<p>A rheumatologist must make the definite diagnosis of systemic sclerosis with CREST syndrome, based on clinically accepted criteria. This diagnosis must be unequivocally supported by biopsy and serological evidence. The disease must involve the skin with deposits of calcium (calcinosis), skin thickening of the fingers or toes (sclerodactyly) and also involve the esophagus. There must also be telangiectasia (dilated capillaries) and Raynaud's Phenomenon causing</p>

Critical illness category	Pre-critical medical conditions	Definition
		<p>artery spasms in the extremities.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> - Localised scleroderma (linear scleroderma or morphea); and - Eosinophilic fasciitis.
32 – Severe Bacterial Meningitis	Bacterial Meningitis with full recovery	<p>Bacterial infection resulting in severe inflammation of the membranes of the brain or spinal cord which requires hospitalisation. This diagnosis must be confirmed by:</p> <ul style="list-style-type: none"> - The presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and - A consultant neurologist. <p>Bacterial Meningitis in the presence of HIV infection is excluded.</p>
	Bacterial meningitis with reversible neurological deficit	<p>The Infection resulting in inflammation of the membranes of the brain or spinal cord resulting in reversible neurological deficit.</p> <p>This diagnosis must be confirmed by:</p> <ol style="list-style-type: none"> (1) Proof of meningeal infection must be provided to us by the results of a lumbar puncture and the offending organism must be identified; and (2) A consultant neurologist. <p>Meningitis in the presence of HIV infection is excluded.</p>
33 – Severe Encephalitis	Viral Encephalitis with full recovery	<p>Severe inflammation of brain substance (cerebral hemisphere, brainstem or cerebellum) caused by viral infection requiring hospitalisation.</p> <p>The diagnosis must be confirmed by a consultant neurologist and supported with appropriate investigations proving acute viral infection of the brain.</p> <p>Encephalitis caused by HIV infection is excluded.</p>
	Moderate Viral Encephalitis with full recovery	<p>Inflammation of brain substance (cerebral hemisphere, brainstem or cerebellum) caused by viral infection resulting in significant but reversible neurological deficit and there must be evidence of hospitalisation for at least two (2) weeks. The neurological deficit must recover to its normal functional state prior to the viral infection within 6 weeks after first date of diagnosis of viral encephalitis. The diagnosis must be confirmed by a consultant neurologist and supported with appropriate investigations proving acute viral infection of the brain.</p>

Critical illness category	Pre-critical medical conditions	Definition
		Encephalitis caused by HIV infection is excluded.
34 – Stroke with Permanent Neurological Deficit	Brain aneurysm surgery; or	The actual undergoing of surgical craniotomy to repair either an intracranial aneurysm or to remove an arterio-venous malformation. The surgical intervention must be certified to be absolutely necessary by a consultant neurologist. Endovascular repair or procedures are not covered.
	Cerebral shunt insertion	The actual undergoing of surgical implantation of a shunt from the ventricles of the brain to relieve raised pressure in the cerebrospinal fluid. The need of a shunt must be certified to be absolutely necessary by a consultant neurologist.
	Carotid artery surgery	The actual undergoing of Endarterectomy of the carotid artery which has been necessitated as a result of at least 80% narrowing of the carotid artery as diagnosed by an arteriography or any other appropriate diagnostic test that is available. Endarterectomy of blood vessels other than the carotid artery are specifically excluded.
35 – Systemic Lupus Erythematosus with Lupus Nephritis	Mild Systemic Lupus Erythematosus	<p>A multisystem, multifactorial, autoimmune disorder which is characterised by the development of auto-antibodies directed against various self-antigens. All of the following criteria must be met to qualify for this benefit:</p> <ol style="list-style-type: none"> 1. Confirmation of the final diagnosis by a certified doctor specialising in Rheumatology and Immunology. 2. Medical evidence from the treating specialist that there has been involvement of at least three (3) of the following internal organs: kidneys, brain, heart (or pericardium), lungs (or pleura), and joints. Joint involvement is defined as the presence of polyarticular inflammatory arthritis. For the purpose of this benefit, skin involvement is not considered one of the specified organs. 3. The Insured is prescribed and is currently on systematic lupus immunosuppressive therapy for multiple organ involvement for at least 6 months under the direction of a specialist. <p>Other forms such as discoid lupus and those forms with haematological involvement alone are specifically excluded.</p>
	Moderately Severe Systemic Lupus Erythematosus (S.L.E) with Lupus Nephritis	<p>An autoimmune illness in which tissues and cells are damaged by deposition of pathogenic autoantibodies and immune complexes and damage of the kidney function.</p> <p>The diagnosis of S.L.E. with Lupus Nephritis will be based on the following conditions:</p> <p>(1) Clinically there must be at least 4 out of the following presentations suggested by The American College of</p>



Critical illness category	Pre-critical medical conditions	Definition
		<p>Rheumatology.</p> <ol style="list-style-type: none"> 1.1. Malar rash 1.2. Discoid rash 1.3. Photosensitivity 1.4. Oral ulcers 1.5. Arthritis 1.6. Serositis 1.7. Renal Disorder 1.8. Leukopenia (<4,000/mL), or Lymphopenia (<1,500/mL), or Haemolytic anaemia, or Thrombocytopenia (<100,000/mL) 1.9. Neurological disorder <p>and</p> <ol style="list-style-type: none"> (2) 2 or more of the following tests being positive <ol style="list-style-type: none"> 2.1. Anti-nuclear Antibodies 2.2. L.E. cells 2.3 Anti-DNA 2.4 Anti-Sm (Smith IgG Autoantibodies) <p>and</p> <ol style="list-style-type: none"> (3) There is lupus nephritis causing impaired renal function with a creatinine clearance rate of 50 ml per minute or less. <p>We reserve the right to change this definition from time to time to reflect the changes in qualitative or quantitative medical categorisation of this illness so as to give effect to the original intent of this definition.</p>

Within the above definitions, "**Accident**" means an event of violent, unexpected, external, involuntary and visible nature which is independent of any other cause.

**Note:**

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Early Protect Plus

Early Protect Plus is a supplementary benefit, which restores the Early Protect sum assured to 100% after a Pre-critical medical condition claim.

What do we pay?

If the life assured is shown in your certificate of life assurance to be covered for this Early Protect Plus benefit, then this benefit will restore the sum assured to 100% after a Pre-critical medical condition claim.

The life assured is able to claim up to a maximum of 500% of the Early Protect sum assured for a Pre-critical medical condition. This 500% includes claims for any of the critical illnesses under the PRUActive Protect policy.

The life assured must survive 7 days from the date of diagnosis before any benefit is paid out. Otherwise, we pay only the Death benefit.

For us to accept the next claim, the following must apply

- If it is not the same pre-critical medical condition as the one before it, there must be a period of 12 months between the dates of diagnosis (**waiting period**)
- If it is the same pre-critical medical condition as the one before it, then there must be a waiting period of 24 months between the dates of diagnosis.

If there was a successful claim previously under Early Protect for a pre-critical medical condition that progressed to a critical illness stage, no waiting period is required in between claims. However, we will pay 100% of the critical illness sum assured less the amount paid out under the Early Protect benefit claim.

If the life assured is diagnosed with more than one pre-critical medical condition or critical illness at the same time, we will only pay for one medical condition that has the highest severity level.

What is a recurring pre-critical medical condition under the same category?

Recurring pre-critical medical conditions under the same category means the pre-critical medical condition is a recurrence or metastasis of the same pre-critical medical condition that you claimed previously.

To avoid any doubt, the recurring pre-critical medical condition of the same category, must meet the criteria set out in the pre-critical medical definitions covered in this policy, and will not apply to any illness which falls outside this definition. In addition, the medical evidence must clearly show that the initial or previous pre-critical medical condition (which has been admitted) was already in complete remission before the recurring pre-critical medical condition was diagnosed.

Complete Remission means complete absence of clinical and objective evidence of any previous pre-critical medical claimed condition(s), verified by a registered specialist, evidenced by absence of any signs, symptoms and supported by clinical, radiological, histological and laboratory evidence in regular follow-ups.

What is a recurring pre-critical medical condition under different categories?

Recurring pre-critical medical conditions under a different category means any of the following conditions:

- The claimed condition is from a different pre-critical medical category as the previous pre-critical medical claim that has been admitted under this policy;



- The claimed condition is from a different pathological and histological type and occurs in a different organ* or site as all previous pre-critical medical claims that has been admitted under this policy; or
- The claimed condition is newly diagnosed with a primary cause that is identified as not related or due to any previous pre-critical medical claim that has been admitted under this policy.

* Paired organs such as breast, ear, eyes, kidneys, lungs, ovary & testicles are considered as same organ.

To avoid any doubt, the recurring pre-critical medical condition of a different category, must meet the criteria set out in the pre-critical medical definitions covered in this policy, and will not apply to any illness which falls outside this definition.

Once there has been a successful claim for a pre-critical medical condition, the total sum assured will be reduced by the amount paid out under this benefit. The total sum assured would be 500% of the basic sum assured for your PRUActive Protect policy.

Once you have made a Critical Illness benefit or Early Protect benefit claim, you cannot end this benefit.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Early Protect Plus are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits under your policy will end:

- when the Critical Illness benefit has been fully claimed or terminated
 - when the Early Protect benefit has been fully claimed or terminated
 - when the life assured dies;
 - if you surrender the policy;
 - if you fail to pay the premiums within 30 days of the date they are due; or
 - on the cover end date of the policy as shown on your certificate of life assurance,
- whichever event occurs first.



Note:

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Life Protect Plus

Life Protect Plus is a supplementary benefit, which offers financial protection against Death and Terminal Illness.

What do we pay?

What do we pay for Death Benefit?

If the life assured is shown on the certificate of life assurance to be covered for this benefit and dies, we pay the sum assured for death shown in your certificate of life assurance.

If the life assured dies directly or indirectly from an activity under special exclusion or special terms and conditions shown in your certificate of life assurance, we do not pay the sum assured but we will refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) we have had to pay for your policy.

If the life assured dies from suicide within 12 months from the cover start date or date of reinstatement (if any) of your policy, we will make your policy void. In this case, we cancel it and refund the total premiums, without interest, received from you less expenses (including administrative, sales-related and medical expenses) we have had to pay for your policy.

The whole policy automatically ends once we have paid a claim for this benefit.

What do we pay for Accelerated Terminal Illness Benefit?

If the life assured is shown on the certificate of life assurance to be covered for this benefit and is diagnosed as having a Terminal Illness during the policy term, we pay the Accelerated Terminal Illness Benefit shown in your certificate of life assurance.

We pay if the life assured is diagnosed as suffering from Terminal Illness. “**Terminal Illness**” is defined as a condition which, in the opinion of a registered medical practitioner, and our appointed doctor agrees, is highly likely to lead to death within 12 months.

A “**registered medical practitioner**” is any person properly qualified with a degree in western medicine to practise medicine, and is licensed by the appropriate medical authority of the country they live in to practise medicine within the scope of his licensing and training. This cannot be you, the life assured or a family member of either.

Once we pay an Accelerated Terminal Illness Benefit claim, the Accelerated Terminal Illness Benefit ends. The following will also apply:

- a) If the sum assured of the Death Benefit is the same as the sum assured of the Accelerated Terminal Illness Benefit, the policy and all its benefits will end.
- b) If the sum assured of the Death Benefit is more than the sum assured of the Accelerated Terminal Illness Benefit, we will reduce the sum assured of the Death Benefit to an amount equal to the difference between the sum assured of the Death Benefit and the sum assured of the Accelerated Terminal Illness Benefit. You can continue the policy for this Death Benefit and any other supplementary benefits (if applicable) by paying the necessary premiums.

Does this product have Surrender Value?

This product does not have a surrender value.

***What is the impact of early surrender?***

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

Premiums are payable for the period of protection and can be paid monthly, quarterly, half-yearly or yearly.

We guarantee that the premiums for your policy will remain unchanged throughout its premium term as long as you pay the premiums within 30 days of the date they are due.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits under your policy will end:

- when the life assured dies;
 - If the sum assured of the Death Benefit is the same as the sum assured of the Accelerated Terminal Illness Benefit and an Accelerated Terminal Illness Benefit claim is paid.
 - if you surrender the policy;
 - if you fail to pay the premiums within 30 days of the date they are due; or
 - on the cover end date of the policy as shown on your certificate of life assurance,
- whichever event occurs first.

Note:

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Severe Infections Protect

Severe Infections Protect is a supplementary benefit, which offers financial protection against serious infectious diseases.

What do we pay for Severe Infections Protect benefit?

If a life assured is shown on your certificate of life assurance to be covered for this benefit, we pay the Severe Infections Protect benefit sum assured as shown in your certificate of life assurance if the life assured is:

- is diagnosed with any one of the serious infectious diseases listed below and
- is admitted to the Intensive Care Unit (ICU) as a result of the serious infectious disease, for at least five continuous days.

The life assured must survive 30 days from the date of diagnosis.

We pay this benefit once only and up to a maximum of \$100,000 per life assured.

A claim under this benefit will not affect the sum assured of your PRUActive Protect policy.

What serious infectious disease are covered?

- 1 Avian Influenza
- 2 Nipah Virus Infection
- 3 Plague
- 4 Poliomyelitis
- 5 Rabies
- 6 Yellow Fever
- 7 Botulism
- 8 Dengue Fever
- 9 Dengue Haemorrhagic Fever
- 10 Diphtheria
- 11 Japanese Encephalitis
- 12 Malaria
- 13 Measles
- 14 Rubella
- 15 Zika Virus Infection
- 16 Cholera
- 17 Haemophilus Influenzae Type b Disease
- 18 Leptospirosis
- 19 Meningococcal Disease
- 20 Murine Typhus
- 21 Paratyphoid
- 22 Typhoid Fever
- 23 Tetanus
- 24 Tuberculosis
- 25 Campylobacteriosis
- 26 Hepatitis A, acute
- 27 Hepatitis B, acute
- 28 Hepatitis C, acute
- 29 Hepatitis E, acute
- 30 Legionellosis
- 31 Leprosy



- 32 Melioidosis
- 33 Pertussis
- 34 Pneumococcal Disease (Invasive)
- 35 Salmonellosis (non-typhoidal)

What is not covered under Severe Infections Protect benefit?

We do not pay if the life assured is diagnosed with an infectious disease that arises directly or indirectly out of one of the following:

- Any infectious disease that is not set out in list above
- Any pre-existing medical condition, except for any infectious disease which you were previously diagnosed with and had fully recovered from before the cover start date of the benefit.
- Any infectious disease diagnosed within 14 days from the cover start date of the benefit.
- Pandemics and communicable diseases requiring quarantine by law.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Severe Infections Protect are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits will end:

- when the Severe Infections Protect benefit has been fully claimed or terminated
- when the life assured dies;
- if you surrender the policy;
- if you fail to pay the premiums within 30 days of the date they are due; or
- on the cover end date of the policy as shown on your certificate of life assurance, whichever event occurs first.

**Note:**

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

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If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Monthly Benefit

Monthly benefit is a supplementary benefit, which offers financial protection in the form of a monthly benefit against critical illness.

What do we pay?

If a life assured is shown on your certificate of life assurance to be covered for this benefit and has made a successful claim on the Critical Illness benefit, we pay a Monthly benefit for a selected amount over a period of time. You would have chosen the amount & duration when you decided to include this benefit to your PRUActive Protect policy.

We pay this benefit once on the first Critical Illness benefit claim only. The Monthly benefit payments will start from the next month after the date we paid the critical illness claim.

We will not pay this benefit:

- On another Critical Illness claim under the Protect Plus benefit
- On a pre-critical medical condition claim under the Early Protect or Early Protect Plus benefits; or
- On a Crisis Care Accelerator claim.

If the life assured dies during the monthly payout period, we will pay the Death benefit instead. The Monthly benefit ends and the PRUActive Protect policy will also end.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Monthly Benefit are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits will end:

- when the Critical Illness benefit has been fully claimed or terminated
- when the life assured dies;
- if you surrender the policy;
- if you fail to pay the premiums within 30 days of the date they are due; or
- on the cover end date of the policy as shown on your certificate of life assurance, whichever event occurs first.

**Note:**

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Crisis Waiver III

Crisis Waiver III is a supplementary benefit that helps to waive premiums of the covered benefits when the life assured is diagnosed with a Critical Illness before the end of the premium term of the basic policy.

What do we waive?

If a life assured is covered for this benefit and is diagnosed as having any one of the 35 critical illnesses, we waive all future premiums for the covered benefits from the next premium due date after the critical illness is diagnosed until:

- the cover end date as shown on your certificate of life assurance
 - until the end of your premium payment term,
- whichever event happens first.

This will mean the life assured does not have to pay any more premiums but we will do so on the life assured's behalf to ensure the policy continues as if premiums never stopped.

If the life assured have made no claim on the Crisis Waiver III Benefit, it ends on the cover end date as shown on the certificate of life assurance. If the life assured make a claim for Crisis Waiver III Benefit, we waive future premiums until the end of your premium payment term.

The critical illness must be diagnosed by a registered medical practitioner.

A "Registered Medical Practitioner" is any person properly qualified by degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.

This Crisis Waiver III benefit expires when you reach the age of 75 years. As such, we waive your future premiums until you reach age 75 or until the end of your premium payment term, whichever event occurs first.

What Critical Illnesses* are covered?

- | | |
|--|---|
| 1. Alzheimer's Disease / Severe Dementia | 18. Major Cancer |
| 2. Benign Brain Tumour | 19. Major Head Trauma |
| 3. Blindness (Irreversible Loss of Sight) | 20. Major Organ / Bone Marrow Transplantation |
| 4. Coma | 21. Motor Neurone Disease |
| 5. Coronary Artery By-pass Surgery | 22. Multiple Sclerosis |
| 6. Deafness (Irreversible Loss of Hearing) | 23. Muscular Dystrophy |
| 7. End Stage Kidney Failure | 24. Open Chest Heart Valve Surgery |
| 8. End Stage Liver Failure | 25. Open Chest Surgery to Aorta |
| 9. End Stage Lung Disease | 26. Other Serious Coronary Artery Disease |
| 10. Fulminant Hepatitis | 27. Paralysis (Irreversible Loss of Use of Limbs) |
| 11. Heart Attack of Specified Severity | 28. Persistent Vegetative State (Apallic Syndrome) |
| 12. HIV Due to Blood Transfusion and Occupationally Acquired HIV | 29. Poliomyelitis |
| 13. Idiopathic Parkinson's Disease | 30. Primary Pulmonary Hypertension |
| 14. Irreversible Aplastic Anaemia | 31. Progressive Scleroderma |
| 15. Irreversible Loss of Speech | 32. Severe Bacterial Meningitis |
| 16. Loss of Independent Existence | 33. Severe Encephalitis |
| 17. Major Burns | 34. Stroke with Permanent Neurological Deficit |
| | 35. Systemic Lupus Erythematosus with Lupus Nephritis |

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These Critical Illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**



What is not covered?

We do not waive premiums in any of the following circumstances:

- the Critical Illness existed before the Cover Start Date or date of reinstatement (if any) of this benefit;
- any benefit for any Critical Illness that is due directly or indirectly to a Pre-existing Condition unless it was declared in the proposal and specifically accepted by us. A **“Pre-existing Condition”** is the existence of any signs or symptoms for which treatment, medication, consultation, advice or diagnosis has been sought or received by the life assured or would have caused an ordinary sensible person to seek treatment, diagnosis or cure, prior to the Cover Start Date or the date of reinstatement (if any) of this benefit;
- the life assured is diagnosed as having a Heart Attack of a Specified Severity, Major Cancer or Other Serious Coronary Artery Disease within 90 days of the Cover Start Date or the date of reinstatement (if any) of this benefit;
- a doctor has diagnosed coronary artery disease within 90 days of the Cover Start Date or the date of reinstatement (if any) of this benefit. This diagnosis has led to the performance of a Coronary Artery By-pass Surgery on the life assured;
- the life assured is diagnosed before age 6 as having a covered illness caused by a congenital or inherited disorder;
- the life assured is diagnosed before age 2 as having deafness
- the life assured needs angioplasty and other invasive treatment for coronary artery.
- the life assured is diagnosed as having a Critical Illness caused by:
 - self-inflicted injuries while sane or insane;
 - Acquired Immunodeficiency Syndrome (**“AIDS”**), AIDS related complex or infection by Human Immunodeficiency Virus (**“HIV”**) except HIV Due to Blood Transfusion and Occupationally Acquired HIV;
 - the use of unprescribed drugs where such drugs are required by law to be prescribed by a Registered Medical Practitioner;
 - an activity under Special Exclusion and/or Special Terms and Conditions shown on the Certificate of Life Assurance; or
 - participation or attempted participation in an unlawful act.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Crisis Waiver III are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits

The benefits under the Crisis Waiver III Benefit will terminate upon:

- the death of the life assured;
 - non-payment of premiums within 30 days of the date they are due;
 - the cover end date as shown on your certificate of life assurance;
 - the approval of a claim for this benefit;
 - the termination of the main policy that it is attached to;
- whichever event occurs first.



Note:

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



PRODUCT SUMMARY FOR SUPPLEMENTARY BENEFITS

This Product Summary is a simplified description of the key product features. The exact terms can be found in the policy document.

Early Crisis Waiver

Early Crisis Waiver is a supplementary benefit that waives the future premiums for the covered benefits as shown in your certificate of life assurance, upon the diagnosis of any one of the Pre-critical medical conditions.

What do we waive?

If the life assured is shown on your certificate of life assurance to be covered for the Early Crisis Waiver benefit and is diagnosed as having any one of the Pre-Critical Medical Conditions, we will waive the future premiums of the covered benefits from the next premium due date following the date of diagnosis of the Pre-Critical Medical Condition for 5 years or until you reach age 75 or until the end of your premium payment term, whichever event happens first.

After the end of the Premium Waiver Period, premium payment for the covered benefits will resume.

What Pre-critical medical conditions* are covered?

	<u>Critical Illness</u>	<u>Pre-Critical Medical Condition</u>
1	Alzheimer's Disease / Severe Dementia	Moderately severe Alzheimer's Disease or Dementia
2	Benign Brain Tumour	<ul style="list-style-type: none"> • Surgical removal of pituitary tumour or Surgery for subdural haematoma • Surgical Removal of Pituitary Tumour (by Open Craniotomy)
3	Blindness (Irreversible Loss of Sight)	<ul style="list-style-type: none"> • Loss of sight in one eye • Optic Nerve Atrophy with low vision
4	Coma	<ul style="list-style-type: none"> • Coma for 48 hours • Severe Epilepsy
5	Coronary Artery By-pass Surgery	<ul style="list-style-type: none"> • Transmyocardial Laser Revascularisation or Enhanced External Counterpulsation Device Insertion • Port Access or Key hole Cardiac Surgery
6	Deafness (Irreversible Loss of Hearing)	<ul style="list-style-type: none"> • Partial loss of hearing or Cavernous sinus thrombosis surgery • Cochlear implant surgery
7	End Stage Kidney Failure	<ul style="list-style-type: none"> • Surgical removal of one kidney • Chronic Kidney Disease
8	End Stage Liver Failure	<ul style="list-style-type: none"> • Liver surgery • Liver Cirrhosis
9	End Stage Lung Disease	<ul style="list-style-type: none"> • Severe Asthma or Insertion of a Veno-cava filter • Surgical removal of one lung
10	Fulminant Hepatitis	<ul style="list-style-type: none"> • Biliary Tract Reconstruction Surgery • Chronic Primary Sclerosing Cholangitis
11	Heart Attack of Specified Severity	<ul style="list-style-type: none"> • Cardiac pacemaker insertion or Pericardectomy • Cardiac defibrillator insertion or Early Cardiomyopathy
12	HIV Due to Blood Transfusion and Occupationally Acquired HIV	<ul style="list-style-type: none"> • HIV due to <ul style="list-style-type: none"> ◦ Assault, ◦ Organ Transplant • Occupationally Acquired HIV
13	Idiopathic Parkinson's Disease	• Early and Moderately severe Parkinson's Disease
14	Irreversible Aplastic Anaemia	<ul style="list-style-type: none"> • Reversible Aplastic Anaemia • Myelodysplastic Syndrome or Myelofibrosis
15	Irreversible Loss of Speech	<ul style="list-style-type: none"> • Loss of Speech due Permanent or Temporary Tracheostomy • Loss of Speech due to Vocal Cord Paralysis
16	Loss of Independent Existence	<ul style="list-style-type: none"> • Loss of Independent Existence (Early Stage) • Loss of Independent Existence (Intermediate Stage)
17	Major Burns	<ul style="list-style-type: none"> • Mild Severe Burns • Moderately severe burns

	Critical Illness	Pre-Critical Medical Condition
18	Major Cancer	<ul style="list-style-type: none"> • Carcinoma in situ of specified organs • Carcinoma in situ of specified organs treated with Radical Surgery • Early Prostate Cancer • Early Thyroid Cancer • Early Bladder Cancer • Early Chronic Lymphocytic Leukaemia • Early Melanoma • Gastro-intestinal Stromal Tumour (GIST)
19	Major Head Trauma	<ul style="list-style-type: none"> • Facial reconstructive surgery • Intermediate Stage Major Head Trauma
20	Major Organ / Bone Marrow Transplantation	<ul style="list-style-type: none"> • Small bowel transplant; or Corneal transplant • Major Organ/Bone Marrow Transplant (on waitlist)
21	Motor Neurone Disease	<ul style="list-style-type: none"> • Early Motor Neurone Disease
22	Multiple Sclerosis	<ul style="list-style-type: none"> • Early Multiple Sclerosis • Mild Multiple Sclerosis
23	Muscular Dystrophy	<ul style="list-style-type: none"> • Moderately severe Muscular Dystrophy or • Spinal-cord disease or injury resulting in Bowel and Bladder Dysfunction
24	Open Chest Heart Valve Surgery	<ul style="list-style-type: none"> • Percutaneous Valve Surgery • Percutaneous Valve Replacement or Device Repair
25	Open Surgery to the Aorta	<ul style="list-style-type: none"> • Minimally invasive surgery to Aorta or • Large asymptomatic aortic aneurysm
26	Other Serious Coronary Artery Disease	<ul style="list-style-type: none"> • Early Stage and Intermediate stage other serious Coronary Artery Disease
27	Paralysis (Irreversible Loss of Use of Limbs)	<ul style="list-style-type: none"> • Loss of Use of One Limb • Loss of Use of One Limb requiring Prosthesis
28	Persistent Vegetative State (Apallic Syndrome)	<ul style="list-style-type: none"> • Akinetic Mutism • Locked in syndrome
29	Poliomyelitis	<ul style="list-style-type: none"> • Peripheral Neuropathy • Poliomyelitis (Intermediate Stage)
30	Primary Pulmonary Hypertension	<ul style="list-style-type: none"> • Early Pulmonary Hypertension • Secondary Pulmonary Hypertension
31	Progressive Scleroderma	<ul style="list-style-type: none"> • Early Progressive Scleroderma • Progressive Scleroderma with CREST syndrome
32	Severe Bacterial Meningitis	<ul style="list-style-type: none"> • Bacterial Meningitis with <ul style="list-style-type: none"> ◦ full recovery ◦ Reversible Neurological Deficit
33	Severe Encephalitis	<ul style="list-style-type: none"> • Viral Encephalitis with full recovery • Moderate Viral Encephalitis with Full Recovery
34	Stroke with Permanent Neurological Deficit	<ul style="list-style-type: none"> • Brain aneurysm surgery or Cerebral shunt insertion <ul style="list-style-type: none"> ◦ Carotid artery surgery
35	Systemic Lupus Erythematosus with Lupus Nephritis	<ul style="list-style-type: none"> • Mild Systemic Lupus Erythematosus • Erythematosus • Moderately Severe Systemic Lupus Erythematosus (S.L.E) with Lupus Nephritis (Early Stage)

***The Life Insurance Association Singapore (LIA) has standard Definitions for 37 severe-stage Critical Illnesses (Version 2019). These medical conditions do not fall under Version 2019. For medical conditions that do not fall under Version 2019, the definitions are determined by the insurance company. You may refer to www.lia.org.sg for the standard Definitions (Version 2019).**



You can find the definitions of these pre-critical medical conditions in the policy document.

The medical conditions must be diagnosed by a registered medical practitioner.

A "Registered Medical Practitioner" is any person properly qualified by degree in western medicine to practice medicine, and is licensed by the appropriate medical authority of his country of residence to practice medicine within the scope of his licensing and training and excludes the policyowner, the life assured or a family member of either.

What is not covered?

We do not waive premiums in any of the following circumstances:

- the critical illness existed before the cover start date or date of reinstatement (if any) of this benefit;-
- any benefit for any covered illness that is due directly or indirectly to a pre-existing condition unless it was declared in the proposal and specifically accepted by us;
- the life assured is diagnosed as having a heart attack of specified severity or major cancer (including carcinoma in situ) or other serious coronary artery disease at all severity levels within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- a doctor has diagnosed coronary artery disease within 90 days of the cover start date or date of reinstatement (if any) of this benefit. This diagnosis of the coronary artery disease has led to the carrying out of a coronary artery by-pass surgery at all severity levels, or angioplasty and other invasive treatment for coronary artery on the life assured;
- the life assured is diagnosed before age 6 as having a covered illness caused by a congenital or inherited disorder;
- if the life assured is diagnosed before age 2 as having deafness and all claims at all severity levels for deafness (irreversible loss of hearing) is not payable.
- the life assured is diagnosed as having a claim for diabetic complications within 90 days of the cover start date or date of reinstatement (if any) of this benefit;
- the life assured is diagnosed as having an covered illness caused by:
 - self-inflicted injuries while sane or insane;
 - AIDS, AIDS-related complex or infection by HIV except as otherwise defined;
 - the use of unprescribed drugs where such drugs are required by law to be prescribed by a registered medical practitioner;
 - an activity under special exclusion and special terms and conditions shown on your certificate of life assurance;
 - participation or attempted participation in an unlawful act; or
 - alcohol or drug abuse.

Does this product have Surrender Value?

This product does not have a surrender value.

What is the impact of early surrender?

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

Premiums:

The premiums for Early Crisis Waiver are not guaranteed. We reserve the right to vary the premiums at any time in the future during the premium payment period. However, we will give you 30 days' written notice before doing so.

Premiums are payable for the period of policy term.

This product is not a Medisave-approved product and you may not use Medisave to pay the premium for this product.

Termination of benefits:

The benefits under the Crisis Waiver Benefit will end:

- the life assured dies;
 - if you fail to pay the premiums within 30 days of the date they are due;
 - on the cover end date of the policy as shown on your certificate of life assurance,
 - termination of main plan;
 - termination of the Crisis Waiver III Benefit;
 - a claim under the Crisis Waiver III Benefit;
 - a claim under the Early Crisis Waiver Benefit;
- whichever event occurs first.

**Note:**

Life Insurance is a contract of utmost good faith and a proposer is required to disclose in the proposal form fully and faithfully all the facts, which he knows or ought to know, as otherwise the policy issued may be void.

The terms and conditions of your policy are contained in the policy documents. There are certain conditions whereby the benefits under this plan will not be payable. These are stated as exclusions in the policy documents. You are advised to read the policy documents for the full list of exclusions.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs.

This Supplementary benefit is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy and its Supplementary benefit(s) (if any) is/are 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 your insurer or visit the General Insurance Association (GIA) /Life Insurance Association (LIA) or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Free Look Period:

After purchasing a life insurance policy, you have a 14-day free-look period - starting from the day you receive your policy documents to review the documents carefully. During this time, if you choose to cancel your policy, we will refund you the premiums you have paid (without interest), less any medical fees and other expenses, such as payments for medical check-ups and medical reports, incurred by us.

If we make your policy document and all other documents from us available electronically via PRUaccess, we consider they have been delivered and received when you receive the relevant SMS or email telling you that the documents are accessible on PRUaccess. Otherwise, we consider your policy and all other documents from us as delivered and received seven days from the date of posting to the last-known address you gave us.

If you decide this policy is not suitable for your needs, simply write to us within the 14-day free-look period.



Acknowledgement

I confirm that my Prudential Financial Consultant has explained to my satisfaction the values, information, benefits and limitations stated in the Cover Page, Policy Illustration, Product Summary and Bundled Product Disclosure Document (where applicable) of the plan that I am buying. I confirm that I have seen, taken note of and understood the explanation presented to me by my Prudential Financial Consultant.

I acknowledge and confirm that I have read through the **69-page** document in its totality and I understand the conditions under which the benefits of this plan will be payable.

The Cover Page, Policy Illustration, Product Summary and Bundled Product Disclosure Document (where applicable) are for illustrative purposes only and shall not constitute a contract.

Financial Consultant's Signature

Proposer's Signature

Prepared by Koh @A@ Keng (Xu Yiqing) on 03 Sep 2020

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MAS issued Rep. No: DKT200213269

SQS V9.5.0 B1.100 E E. & O.E 0

Underwritten by Prudential Assurance Company Singapore (Pte) Limited (Reg. No 199002477Z)

Offer of Acceptance

PruCustomer Line: 1800 333 0 333



UAT



Bill Summary	
Premium payable*	\$443.33
Balance To Paid	\$443.33
Please Pay	\$443.33
by	22 Sep 2020

*Inclusive of first year premium discount

8 September 2020

Scan Me Now To Pay



Dear

Proposal Number :
Type of Plan : PRUActive Protect
Life to be Assured :

Thank you for choosing to insure with Prudential. We are pleased to confirm acceptance of your proposal for life assurance in the details shown below:

Terms*

Basic Benefits	Sum Assured	Premium	Premium Term
PRUActive Protect	\$54,000.00	\$72.04	50
Death	\$10,800.00	-	-
Protect Plus	-	\$28.92	50
Early Protect	\$54,000.00	\$64.17	50
Early Protect Plus	-	\$19.83	50
Life Protect Plus	\$54,000.00	\$19.11	50
Accelerated Terminal Illness	\$54,000.00	-	-
Severe Infections Protect	\$54,000.00	\$26.99	50
Monthly Benefit - 2 Years	\$5,000.00	\$130.69	50
Death Waiver Plus**	Future Premiums*	\$96.94	42
Disability Waiver Plus**	Future Premiums*	-	-
Critical Illness Waiver Plus**	Future Premiums*	-	-
Early Payer Security**	Future Premiums*	\$33.89	42

Total premium: \$492.58 payable quarterly

Our offer will be withdrawn if the outstanding amount is not received by 22 Sep 2020.

** Payer / Proposer

* Please refer to the Product Summary for the terms and conditions of the above benefits.

Important information:

- Interim Accidental Death cover, if granted to you, stops immediately and you are not covered for your proposal until we receive the full premium due.
- You must inform us if there has been any change in the state of health, occupation or activity of the Life to be Assured between the date of your proposal or medical examination and the issue of your policy. We will review the information and the acceptance of the offer may be subject to change. If such information is not disclosed, your policy may be made void.

You can pay your premiums by credit card via iPay (<https://ipay.prudential.com.sg>) or via NETS at any AXS Station (www.axs.com.sg) island-wide. Terms and conditions apply.

[REDACTED]

If you have any queries, please contact your Financial Consultant or our PruCustomer Line at 1800 333 0 333.

Life Operations (New Business)

cc: [REDACTED]

This letter requires no signature.

UAT

Offer of Acceptance

ADVISER'S COPY

PruCustomer Line: 1800 333 0 333



Bill Summary	
Premium payable*	\$443.33
Balance To Paid	\$443.33
Please Pay	\$443.33
by	22 Sep 2020
*Inclusive of first year premium discount	

8 September 2020

Dear

Proposal Number :
Type of Plan : PRUActive Protect
Life to be Assured :

Thank you for choosing to insure with Prudential. We are pleased to confirm acceptance of your proposal for life assurance in the details shown below:

Terms*

Basic Benefits	Sum Assured	Premium	Premium Term
PRUActive Protect	\$54,000.00	\$72.04	50
Death	\$10,800.00	-	-
Protect Plus	-	\$28.92	50
Early Protect	\$54,000.00	\$64.17	50
Early Protect Plus	-	\$19.83	50
Life Protect Plus	\$54,000.00	\$19.11	50
Accelerated Terminal Illness	\$54,000.00	-	-
Severe Infections Protect	\$54,000.00	\$26.99	50
Monthly Benefit - 2 Years	\$5,000.00	\$130.69	50
Death Waiver Plus**	Future Premiums*	\$96.94	42
Disability Waiver Plus**	Future Premiums*	-	-
Critical Illness Waiver Plus**	Future Premiums*	-	-
Early Payer Security**	Future Premiums*	\$33.89	42

Total premium: \$492.58 payable quarterly

Our offer will be withdrawn if the outstanding amount is not received by 22 Sep 2020.

** Payer / Proposer

* Please refer to the Product Summary for the terms and conditions of the above benefits.

Important information:

- Interim Accidental Death cover, if granted to you, stops immediately and you are not covered for your proposal until we receive the full premium due.
- You must inform us if there has been any change in the state of health, occupation or activity of the Life to be Assured between the date of your proposal or medical examination and the issue of your policy. We will review the information and the acceptance of the offer may be subject to change. If such information is not disclosed, your policy may be made void.

You can pay your premiums by credit card via iPay (<https://ipay.prudential.com.sg>) or via NETS at any AXS Station (www.axs.com.sg) island-wide. Terms and conditions apply.

[REDACTED]

If you have any queries, please contact your Financial Consultant or our PruCustomer Line at 1800 333 0 333.

Life Operations (New Business)

cc: [REDACTED]

This letter requires no signature.

UAT

Offer of Conditional Acceptance

PruCustomer Line: 1800 - 333 0 333

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED] ([REDACTED])

Bill Summary	
Premium payable*	\$356.56
Balance to be Paid	\$356.56
Please Pay	\$356.56
by	22 Sep 2020
*Inclusive of first year premium discount	

8 September 2020

Scan Me Now To Pay



Dear [REDACTED]

Proposal Number : [REDACTED]
Type of Plan : PRUActive Protect
Life to be Assured : [REDACTED]

Thank you for choosing to insure with Prudential. We are offering you special terms and conditions for acceptance of your proposal for life assurance in the details shown below:

Special Terms*

Basic Benefits	Sum Assured	Premium	Extra Premium	Premium Term
PRUActive Protect	\$100,000.00	\$27.29	-	99
PRUActive Protect	-	-	\$13.64	99
Death	\$20,000.00	-	-	-
Protect Plus	-	\$5.27	-	99
Protect Plus	-	-	\$2.64	99
Early Protect	\$100,000.00	\$23.89	-	99
Early Protect	-	-	\$11.94	99
Early Protect Plus	-	\$5.27	-	99
Early Protect Plus	-	-	\$2.64	99
Severe Infections Protect	\$100,000.00	\$13.09	-	99
Severe Infections Protect	-	-	\$6.55	99
Monthly Benefit - 2 Years	\$1,000.00	\$6.42	-	99
Monthly Benefit - 2 Years	-	-	\$3.21	99
Death Waiver Plus**	Future Premiums*	\$39.58	-	24
Death Waiver Plus**	-	-	\$5.93	24
Disability Waiver Plus**	Future Premiums*	-	-	-
Disability Waiver Plus**	-	-	\$0.98	4
Critical Illness Waiver Plus**	Future Premiums*	-	-	-
Critical Illness Waiver Plus**	-	-	\$12.87	24
Early Payer Security**	Future Premiums*	\$23.77	-	24
Early Payer Security**	-	-	\$11.89	24
Death Waiver Plus***	Future Premiums*	\$68.19	-	24
Death Waiver Plus***	-	-	\$10.23	24
Disability Waiver Plus***	Future Premiums*	-	-	-
Disability Waiver Plus***	-	-	\$1.69	4
Critical Illness Waiver Plus***	Future Premiums*	-	-	-
Critical Illness Waiver Plus***	-	-	\$22.16	24
Early Payer Security***	Future Premiums*	\$48.76	-	24
Early Payer Security***	-	-	\$24.39	24

Premium : \$261.53
 Extra premium : \$130.76
 Total premium : \$392.29 payable monthly

Please pay the outstanding amount if any, sign and return a copy of this letter to indicate your acceptance of the special terms by 22 Sep 2020. For monthly frequency, your acceptance of the offer must be accompanied by a successful GIRO (DBS/POSB)/credit card enrolment via iPay (<https://ipay.prudential.com.sg>), or a duly completed and signed GIRO application form for other banks, before the policy can be issued. Otherwise, our offer will be withdrawn.

****Payer / Proposer**
*****2nd Adult Life Assured**

*Please refer to the Product Summary for the terms and conditions of the above benefits.

Important information:

- Interim Accidental Death cover, if granted to you, stops immediately and you are not covered for your proposal until we receive the full premium due.
- You must inform us if there has been any change in the state of health, occupation or activity of the Life to be Assured between the date of your proposal or medical examination and the issue of your policy. We will review the information and the acceptance of the offer may be subject to change. If such information is not disclosed, your policy may be made void.

You can pay your premiums by credit card via iPay (<https://ipay.prudential.com.sg>) or via NETS at any AXS Station (www.axs.com.sg) island-wide. Terms and conditions apply.

If you have any queries, please contact your Financial Consultant or our PruCustomer Line at 1800 333 0333.



Additional Special Terms

All disease and disorders of the eyes and visual impairment.
Conjunctivitis.

Life Operations (New Business)

cc: )

This letter requires no signature.

My Agreement

I/We agree that my/our policy will be issued subject to the special terms and conditions.

Signature of 1st Proposer and Date

Signature of 2nd Proposer (if applicable) and Date