PRODUCT INFORMATION

Woman's Care is an insurance policy that provides cover for specified Female Cancer and other Major Cancer. This Policy is underwritten by MSIG Insurance (Singapore) Pte. Ltd. ("MSIG") and distributed by DBS Bank Ltd.

The Policy will pay the benefit described below upon the first diagnosis of any of the Cancer listed below suffered by the Insured during the period of insurance.

PREMIUM RATES

The premium payable is based on the Insured’s current age and will increase when the Insured enters the next age band at each policy renewal. The premium must be paid and received by Us on or before each premium due date.

<table>
<thead>
<tr>
<th>Age Band</th>
<th>Premier Plan</th>
<th>Classic Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-30</td>
<td>$99.10</td>
<td>$77.60</td>
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<td>31-35</td>
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<td>36-40</td>
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<td>41-45</td>
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<td>46-50</td>
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<tr>
<td>61-65 *</td>
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<td>$483.35</td>
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</table>

* For renewals only

The premium is inclusive of 7% GST. If the GST rate changes, the premium will change accordingly.

LIST OF CANCERS COVERED

1. FEMALE CANCER

a) Breast Cancer

A malignant tumour arising in epithelial or supporting breast tissue and spreading locally to surrounding tissue or distantly to involve lymph nodes or other remote organs.

b) Cervical Cancer

A malignant tumour which arises within the cervical epithelium but has extended into and beyond the underlying stroma and demonstrates the potential to (or at the time of diagnosis, had) spread to adjacent and/or distant tissues and organs.

c) Uterine Cancer

A malignant tumour arising in the lining or wall of the uterus and demonstrates the potential to spread to local and/or distant tissues and organs.

d) Cancer of the Fallopian Tube

Malignant tumour arising in the Fallopian Tubes.

e) Cancer of the Vulva and Vagina

Malignant tumour arising in the epithelium and spreading to involve the underlying supporting tissues and /or distant tissues or organs.

f) Ovarian Cancer

Malignant tumour arising in the ovary which demonstrates the potential to, or has spread to local and/or distant tissues or organs.

Any of the above cancers must be confirmed by histological evidence of malignancy by an oncologist or pathologist and excludes any of the following:

- Tumours showing the malignant changes of carcinoma-in-situ and tumours which are histologically described as pre-malignant or non-invasive, including, but not limited to: Carcinoma-in-Situ of the Breasts, Cervical Dysplasia CIN-1, CIN-2 and CIN-3; and
- All tumours in the presence of HIV infection.

2. MAJOR CANCER

A malignant tumour characterised by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. This Diagnosis must be supported by histological evidence of malignancy and confirmed by an oncologist or pathologist.

The following are excluded:

- (a) Tumours showing the malignant changes of carcinoma-in-situ and tumours which are histologically described as pre-malignant or non-invasive, including, but not limited to: Carcinoma-in-Situ of the Breasts, Cervical Dysplasia CIN-1, CIN-2 and CIN-3;
- (b) Hyperkeratoses, basal cell and squamous skin cancers, and melanomas of less than 1.5mm Breslow thickness, or less than Clark Level 3, unless there is evidence of metastases;
- (c) T-NM0, Papillary micro-carcinoma of the Thyroid less than 1 cm in diameter, Papillary micro-carcinoma of the Bladder, and Chronic Lymphocytic Leukaemia less than RAI Stage 3; and
- (d) All tumours in the presence of HIV infection.

KEY PRODUCT PROVISIONS

The following are some key provisions found in the Policy. This is only a brief summary and You are advised to refer to the actual terms and conditions in the Policy.

SOME DEFINITIONS

- “Diagnosis” means the definite diagnosis made by a Doctor resitting and practicing in Singapore and based upon such specific evidence, as referred to in the definition of the particular Cancer concerned, or, in the absence of such specific evidence, based upon radiological, clinical, histological or laboratory evidence acceptable to Us.

- “Doctor” means a properly qualified medical practitioner (other than an Insured or a member of the Insured’s immediate family) licensed by the Ministry of Health in Singapore or its equivalent in the country of in which treatment is provided, and who in rendering such treatment is practising within the scope of his or her licensing and training.
“Pre-Existing Conditions” means any illness, condition or symptom:
(a) for which treatment, or medication, or advice, or diagnosis has been sought or received or was foreseeable, or
(b) which presented signs, symptoms of which the Insured was aware or should reasonably have been aware or which originated or existed, or
(c) would cause an ordinarily prudent person to seek diagnosis, care or test, prior to the Commencement Date.

ELIGIBILITY
Unless We agree in writing otherwise any person You wish to insure under this Policy must be named as an Insured in the Schedule and must at the Commencement Date be the following:
(i) Yourself aged between 18 years and below 60 years old, and
(ii) residing in Singapore.

SURVIVAL PERIOD
A claim can only be made under this Policy if the Insured concerned survives for a period of at least 30 days from the time of the first Diagnosis of the Female Cancer or Major Cancer which is the subject matter of the claim.

WAITING PERIOD
No claim for the Cancer benefit can be made if the Cancer was first Diagnosed within 90 days of the Commencement Date, or the reinstatement date, whichever is later, for that Insured.

BENEFIT AMOUNT
The amount of Benefit payable by the Company will be the Sum Insured specified in the Schedule less any premiums in respect of the entire Policy Year which have not been paid.

LIMITS OF LIABILITY
The Benefit (Sum Insured stated in the Schedule) for an Insured will be paid once only and in respect of the first Diagnosis of either Female Cancer or Major Cancer suffered by the Insured after the Commencement Date. The cover in respect of an Insured will cease immediately upon payment of the Benefit regardless of how many times the Policy has been renewed.

EXCEPTIONS
There are certain situations where no benefit will be payable. These are stated as General Exceptions in the Policy. You are advised to read the Policy for the full list of exceptions.
• Pre-existing Conditions, as defined in the Policy.
• Unreasonable failure to seek or follow medical advice.
• Mental illness, psychiatric disorders; self-inflicted injury, suicide; any sexually transmitted diseases, infection with Human Immuno-deficiency Virus (HIV) or conditions due to any sexually transmitted diseases, infection with Human Immuno-deficiency Syndrome (AIDS); alcohol or solvent abuse or the taking of drugs except under the direction of a registered medical practitioner
• War and terrorism.

DUPLICATION OF COVER
An Insured can only be covered under one Woman’s Care Insurance Policy with the Company. If any Insured is covered under more than one such policy, the Company will consider the Insured to be insured under the policy first issued only and the cover of the Insured under any other such policy(ies) will be cancelled. We will refund, without interest, any duplicated premium.

AUTOMATIC RENEWAL OF COVERAGE
Unless the Policy is cancelled or terminated in accordance with the policy terms and conditions, the Policy will be renewed automatically from year to year in respect of the Insured who has made no claim, so long as premium is paid when due.

ALTERATIONS
(a) At each renewal of this Policy, We have the right to vary the premium payable and all other terms, conditions and exceptions of the Policy. We will notify You of any such change at least 30 days before the renewal date. Your continued payment of premium after We give such notice will mean that You accept the change.
(b) If the date of birth of the Insured has been incorrectly stated, the benefits will be amended by Us having regard to the true date of birth. If the true date of birth is such that, had it been known to Us at the time of the Policy was proposed for, We would not have issued the Policy, then We may cancel the Policy and no benefits will be payable.
(c) Any misrepresentation of or failure to disclose material facts by the Insured or Insured, will entitle the Company to alter, amend or cancel the Policy having regard to the true facts and all benefits under the Policy shall be forfeited. A material fact is any information that could influence the Company in its assessment of Your application.

CANCELLATION
Either the Insured or the Company may cancel this Policy by giving the other party 30 days notice in writing sent to the last known address. Refunds of premium in respect of a period of insurance will be made as follows:
(a) If the Insured cancels the Policy, the Company will make a refund of premium that the Insured has paid on pro-rated basis from the date of cancellation provided no claim has arisen and the amount refundable is more than S$10.00.
(b) If the Company cancels the Policy, the Company will make a pro-rata refund of the premium paid.

TERMINATION
(a) The entire Policy will terminate and Your cover under it will cease immediately upon:
   i)  non-payment of premium by the due date as described in Payment Before Cover Warranty of this Policy; or
   ii)  the cancellation of this Policy as described in General Condition 8.
(b) Unless We have agreed otherwise in writing, Your cover under this Policy will terminate immediately in any of the following circumstances, whichever first occurs:
   i)  a single payment of the Cancer Benefit to You; or
   ii)  where on the expiry of the Policy Year in which You attain sixty-five (65) years old; or
   iii)  at the time of your death.

FREE LOOK
You have 14 business days from the date You receive the Policy to review the Policy. If dissatisfied, You may cancel the Policy within these 14 days with no questions asked. Any premiums paid will be refunded, provided no claim has arisen.

CLAIMS CONDITIONS
• You must give written notice to the Company of any event giving rise or likely to give rise to a claim under this Policy as soon as possible but in any case within 30 days of the happening of such an event.
• You must complete a claim form and provide at your expense information, evidence or supporting document or reports which We may require.
Please refer to the Policy for full details of the Claims Conditions.