

**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.

Financial Consultant's Signature

Proposer's Signature



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?

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| 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-Heart Heart Valve Surgery |
| 8. End Stage Liver Failure | 25. 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 2024). These Critical Illnesses fall under Version 2024. You may refer to www.lia.org.sg for the standard Definitions (Version 2024).**



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 means the actual undergoing of balloon angioplasty or similar intra-arterial catheter procedure to correct a narrowing of minimum 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 herein refer to 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.

Version 07/2025