

LIFE INSURANCE CORPORATION OF INDIA
CENTRAL OFFICE

Dept.: Actuarial

“Yogakshema”,
 Jeevan Bima Marg,
 Mumbai – 400 021

Ref: CO/PD/315

Date: 12.10.2026

To
 All HODs of Central Office
 All Zonal Offices
 All Divisional Offices
 All P&GS Units
 All Branch Offices & Satellite Offices
 Audit & Inspection Depts, MDC, ZTCs, STCs

Re: INTRODUCTION OF LIC's NEW CANCER COVER (Plan No. 908)

1. INTRODUCTION:

It has been decided to introduce LIC's New Cancer Cover (Plan No. 908), Unique Identification Number (UIN512N370V01) with effect from 19th October, 2026.

The Unique Identification Number (UIN) for this LIC's New Cancer Cover is 512N370V01. This number has to be quoted in all relevant documents furnished to the Policyholders and other users (public, distribution channels etc.)

LIC's New Cancer Cover is a Non-Par, Non-Linked, Health, Individual, Pure Risk plan. It is a regular premium health insurance plan which provides fixed benefit in case the Life Assured is diagnosed with any of the specified Early and/or Major Stage Cancer during the policy term, subject to certain terms and conditions.

This plan can be purchased offline through Licensed Agents, Corporate Agents, Brokers, Insurance Marketing Firms (IMFs) as well as Online directly through website www.licindia.in. However, it shall not be available for sale through Common Public Service Centers – Special Purpose Vehicle (CPSC-SPV) and Point of Sales Persons – Life Insurance (POSP-LI).

The eligibility conditions, benefits and other details of the plan are as given below.

2. ELIGIBILITY CONDITIONS AND RESTRICTIONS:

- | | |
|---------------------------------|--|
| (a) Minimum age at entry: | 18 years (last birthday) |
| (b) Maximum age at entry: | 65 years (last birthday) |
| (c) Maximum cover ceasing age: | 75 years (last birthday) |
| (d) Policy Term: | 10 to 15 years |
| (e) Premium Paying Term: | Equal to Policy Term |
| (f) Minimum Basic Sum Assured: | Rs. 35,00,000 for ages 18 years to 34 years
Rs. 30,00,000 for ages 35 years to 40 years
Rs. 20,00,000 for ages 41 years to 50 years
Rs. 15,00,000 for ages 51 years to 65 years |
| (g) Maximum Basic Sum Assured: | Rs. 50,00,000/-
The maximum Basic Sum Assured shall not exceed an overall limit of Rs. 50 lakh taking into account current proposal(s) and all existing policies under this plan. |
| (h) Basic Sum Assured multiple: | Rs. 1,00,000/- |

The Age at entry for the Policyholder is to be taken as age last birthday for all ages.

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3. **BENEFIT OPTIONS:**

The proposer has to choose one of the following two benefit options at inception. Benefit Option once chosen cannot be changed later. The premium rates and benefits will vary depending on the option chosen.

Option I Level Sum Assured:

Basic Sum Assured shall remain unchanged throughout the policy term.

Option II Increasing Sum Assured:

The Sum Assured shall increase on each of the first five policy anniversaries by an amount equal to 10% of Basic Sum Assured. If any of the specified cancer (as mentioned in Para 4) is diagnosed, increase in the Sum Assured shall not be applicable from the subsequent policy anniversary.

The benefits payable under the plan shall be based on the **Applicable Sum Assured**, where the **Applicable Sum Assured** shall be equal to:–

- Under Option I: Basic Sum Assured.
- Under Option II: Basic Sum Assured during first policy year and Increased Sum Assured on or after first policy anniversary, determined in accordance with the provisions relating to Increasing Sum Assured mentioned above.

4. **BENEFITS:**

A. Cancer Illness Benefit:

Benefits payable under an in-force policy are as under:

i) Early Stage Cancer Benefit:

On first diagnosis, before the stipulated date of maturity, of any one of the specified Early Stage Cancers as defined below and if the same is admissible, the following benefits are payable subject to the Benefit Limits and Conditions mentioned in Para 5 and Exclusions mentioned in Para 6:

a. Lump Sum Benefit: 25% of Applicable Sum Assured shall be payable.

b. Premium Waiver Benefit: Premiums for next three policy years or balance policy term, whichever is lower, shall be waived from the policy anniversary following the date of diagnosis. After the completion of three policy years, premiums shall be payable for the remaining policy term, if any.

Premium(s) falling due, if any, from the date of diagnosis and before the next policy anniversary shall be deducted from the claim amount.

Definition of Early Stage Cancer:

The diagnosis of any of the listed below conditions must be established by histological evidence and be confirmed by a specialist in the relevant field.

- **Carcinoma-in-situ (CIS):**

Carcinoma-in-situ means the presence of malignant cancer cells that remain within the cell group from which they arose. It must involve the full thickness of the epithelium but does not cross basement membranes and it does not invade the surrounding tissue or organ. The diagnosis of which must be positively established by microscopic examination of fixed tissues.

- **Prostate Cancer – early stage:**

Early Prostate Cancer that is histologically described using the TNM classification as T1N0M0 with a Gleason Score 2 (two) to 6(six).

- **Thyroid Cancer – early stage:**
All thyroid cancers that are less than 2.0 cm and histologically classified as T1N0M0 according to TNM classification.
- **Bladder Cancer – early stage:**
All tumors of the urinary bladder histologically classified as TaN0M0 according to TNM classification.
- **Chronic Lymphocytic Leukaemia – early stage:**
Chronic Lymphocytic Leukaemia categorized as stage 0 (zero) to 2 (two) as per the Rai classification.
- **Cervical Intraepithelial Neoplasia:**
Severe Cervical Dysplasia reported as Cervical Intraepithelial Neoplasia 3 (CIN3) on cone biopsy.

The following are specifically excluded from all Early Stage Cancer benefits:

- All tumors which are histologically described as benign, borderline malignant, or low malignant potential
- Dysplasia, intra-epithelial neoplasia or squamous intra-epithelial lesions
- Carcinoma in-situ of skin and Melanoma in-situ.

ii) **Major Stage Cancer Benefit:**

On first diagnosis, before the stipulated date of maturity, of the specified Major Stage Cancers as defined below and if the same is admissible, the following benefits are payable subject to the Benefit Limits and Conditions mentioned in Para 5 and Exclusions mentioned in Para 6:

- Lump Sum Benefit:** 100% of Applicable Sum Assured shall be payable. This benefit shall be paid irrespective of any claim of Early Stage Cancer previously paid under the policy.
- Income Benefit:** In addition to above Lump Sum Benefit, Income Benefit of 1% of Applicable Sum Assured shall be payable on each policy month following the payment of Lump Sum Benefit, for a fixed period of next ten years irrespective of the survival of the Life Assured and even if this period of ten years goes beyond the policy term. In case of death of the Life Assured while receiving this Income Benefit, the remaining instalments, if any, will continue to be paid as and when due to his/her nominee. Further, all future premiums payments shall cease from the next policy anniversary following the date of diagnosis and the policy shall be free from all liabilities except to the extent of Income Benefit.

Premium(s) falling due, if any, from the date of diagnosis and before the next policy anniversary shall be deducted from the claim amount.

Definition of Major Stage Cancer:

A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded from Major Stage Cancer benefits:

- All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3
- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond
- Malignant melanoma that has not caused invasion beyond the epidermis

- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below
- Chronic lymphocytic leukaemia less than Rai stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification
- All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs.

The explanation of TNM and Rai classification is as given below:

TNM Classification:

“TNM classification referenced above is based on the latest edition of the American Joint Committee on Cancer (AJCC) Staging Manual. A brief explanation of the TNM classification is provided below.”

The TNM classification system is internationally recognized and is used to stage and measure a tumor. The “T” element measures the size and extent of the primary tumor, “N” element measures the degree of spread to regional lymph nodes and the “M” element measures the presence of distant metastasis (spread of cancer from one part of the body to another part of the body).

Rai Classification:

Any reference to ‘Rai classification’ will be in accordance to the table mentioned below:

Stage	Description
0	Lymphocyte count >15,000/mm ³ (15 x 10 ⁹ /L) No other abnormalities i.e. no lymph nodes, no hepatosplenomegaly, hemoglobin >11 g/dl, platelets >100,000/mm ³
I	Lymph nodes present
II	Enlarged liver or spleen
III	Anemia - hemoglobin <11 g/dl
IV	Thrombocytopenia - platelets <100,000/mm ³

B. Maturity Benefit:

No maturity benefit is payable under this plan.

C. Death Benefit:

No death benefit is payable under this plan.

5. BENEFIT LIMITS AND CONDITIONS:

(A) WAITING PERIOD:

A waiting period of 180 days will apply from the date of issuance of policy or date of revival, whichever is later, to the first diagnosis of “any stage” cancer. “Any stage” here means all stages of Cancer that occur during the waiting period. This would mean that nothing shall be paid under this policy and the policy shall terminate if any stage of Cancer occur:

- At any time on or after the date of issuance of the Policy but before the expiry of 180 days reckoned from that date; or
- Before the expiry of 180 days from the Date of Revival.

(B) SURVIVAL PERIOD:

No benefit shall be payable if the Life Assured dies within a period of 7 days from the date of diagnosis of any of the specified Early Stage Cancer or Major Stage Cancer. The 7 days survival period includes the date of diagnosis.

(C) OTHER CONDITIONS:

- a. Early Stage Cancer Benefit shall be payable only once for the first ever event and Life Assured shall not be entitled to make another claim for the Early Stage Cancer of same or any other cancer. However, the coverage for the Major Stage Cancer under the policy shall continue until the policy terminates.
- b. Early Stage Cancer needs to be diagnosed before Major Stage cancer for the claim under Early Stage Cancer to be admissible.
- c. Once a Major Stage Cancer Benefit is paid no payment for any future claims under Early Stage Cancer or Major Stage Cancer would be admissible.
- d. If the Early Stage Cancer was diagnosed before the Major Stage Cancer and the Life Assured claims for both Early Stage Cancer and Major Stage Cancer simultaneously, both claims shall be payable provided the Early Stage Cancer and Major Stage Cancer diagnoses satisfy all applicable policy definitions and conditions and both diagnoses are supported by separate histological and other relevant medical evidence.
- e. If there is more than one Cancer diagnosed simultaneously, the Corporation will only pay one benefit. That benefit will be the amount relating to the stage of Cancer which has the highest benefit amount.
- f. Total benefit (excluding Premium Waiver Benefit) under the Policy including Early Stage Cancer Benefit and Major Stage Cancer Benefit shall not exceed the maximum claim amount of 245% of Applicable Sum Assured.
- g. Benefit under this plan shall be payable subject to fulfilling all of the below criteria:
 - Signs and symptoms relevant to the cancer should have been present and documented before death of Life Assured
 - All investigations to confirm the diagnosis of cancer should have been done and documented before the death of the Life Assured
 - Satisfaction of the cancer definition as per the policy conditions.

6. EXCLUSIONS:

The Corporation shall not be liable to pay any of the benefit under this product, if the covered conditions resulting directly or indirectly from any of the following causes:

- (i) Any Pre-existing condition i.e. a cancer condition (primary or metastatic), precancerous condition or related condition(s)
 - a. That is/are diagnosed by a physician not more than 36 months prior to the date of issuance of policy or date of revival of the policy; or
 - b. For which medical advice or treatment was recommended by, or received from, a Physician not more than 36 months prior to the date of issuance of policy or date of revival of the policy.

Note: In case a policy lapses after availing Early Stage Cancer Benefit then such Early Stage Condition for which claim is admitted shall not be treated as Pre-Existing condition at the time of revival.
- (ii) For any medical conditions suffered by the Life Assured or any medical procedure undergone by the Life Assured, if that medical condition or that medical procedure was caused directly or indirectly by alcohol or drug (except under the direction of a registered medical practitioner).
- (iii) For any medical condition or any medical procedure arising from nuclear contamination, the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.

7. TERMINATION OF POLICY:

The policy shall be terminated upon the happening of the first of the following events.

- i) On the death of the Life Assured; or
- ii) On the date of maturity; or
- iii) On payment of the Major Stage Cancer, however, Income Benefit shall continue to be payable as and when due; or
- iv) On the diagnosis of any stage cancer during the waiting period; or
- v) On Free Look cancellation; or
- vi) In the event of the forfeiture as specified under Para 20; or
- vii) On expiry of revival period.

8. MODES OF PREMIUM PAYMENT:

Premiums can be paid regularly during the policy term in yearly or half-yearly installments.

The Premium Conversion Factors for different modes of Premium Payment are as under:

Mode of Premium Payment	Premium Conversion factor
Yearly	1.0000
Half-yearly	0.5090

For Half-yearly mode of premium payment, the applicable instalment premium shall be arrived at by multiplying the applicable Premium Conversion factor with yearly premium derived.

9. PREMIUM RATES:

The Tabular Annual Premium rates per Rs 1000 Basic Sum Assured for Option I and Option II (separately for male and female lives), as well as Class - I extra premium rates per thousand Basic Sum Assured, applicable at NB/Revival stage (separately for male and female lives) are enclosed as Annexures as mentioned below:

Annexure	Description
Annexure I	Tabular Annual Premium Rates per Rs. 1000 Basic Sum Assured
Annexure II	Class - I extra premium rates per thousand Basic Sum Assured, applicable at NB / Revival stage

10. GRACE PERIOD FOR PAYMENT OF PREMIUM:

A grace period of 30 days shall be allowed for payment of yearly or half-yearly premiums from the date of First Unpaid Premium. During this period, the policy will be considered as in-force with the risk cover without any interruption as per the terms and conditions of the policy. If the premium is not paid before the expiry of grace period, the Policy will lapse and all the benefits payable under the Policy will cease.

If the diagnosis of any Early Stage or Major Stage Cancer occurs within the grace period but before the payment of the premium then due, the policy will still be valid and the benefits shall be paid after deductions of the said unpaid premium as also the balance premium(s), if any, falling due from the date of diagnosis and before the next policy anniversary.

11. REBATES:

Rebates applicable are as under:

a) Rebate for High Sum Assured: Nil

b) Rebate under Online Sale:

Proposal to be completed under Online Sale shall be eligible for rebate on the tabular premium as mentioned below, provided the policy is not taken through any Agents, Corporate Agents, Brokers, and Insurance Marketing Firms:

Policy Term 10 to 14 years: 7.5% on tabular premium

Policy Term 15 years: 10% on tabular premium

c) Rebate under Corporation's Insurance Scheme (CIS):

Proposals completed under Corporation's Insurance Scheme (CIS) with regard to employees of the Corporation and its Subsidiaries/Step Down Subsidiaries/Associate Companies, as per the prevailing policy of the Corporation in this regard shall be eligible for the CIS rebate on tabular premium as mentioned below, provided policy is not taken through Online sale or any intermediary such as Agent/ Corporate Agent/ Broker and Insurance Marketing Firms (IMFs):

Policy Term 10 to 14 years: 7.5% on tabular premium

Policy Term 15 years: 10% on tabular premium

Rebate under CIS shall be allowed to the policies purchased either offline or online. However, in such cases of online purchase only rebate under CIS shall be allowed.

Instructions in this regard, as applicable from time to time, shall be issued by Actuarial Department, Central Office.

The order in which the above rebate shall be applicable as below:

- Only one of the Rebates i.e. either Rebate for Online Sale or Rebate under Corporation's Insurance Scheme (CIS) shall be allowed
- Rebate for Online Sale/Rebate under Corporation's Insurance Scheme (CIS) calculated as a percentage of Tabular Premium shall be applied first, if any
- Thereafter, the Premium Conversion factors shall be applicable, if any.

12. EXAMPLES- PREMIUM & BENEFIT CALCULATION:

1. Example 1 : Option I - Level Sum Assured

Policy Details: Date of Issuance of Policy: 25.10.2026, Male Life Aged 35 Years (LBD), Policy Term: 15 Years, Basic Sum Assured: Rs 50 Lakh, Premium Payment Mode: Half-yearly, Distribution Channel: Online

A. Premium Calculation:

Tabular Premium Per Rs 1000 Basic Sum Assured (Rs)	1.82
Less: Online Rebate (10% of Tabular Premium) (Rs)	0.182
Tabular Premium Per Rs 1000 Basic Sum Assured after online Rebate (Rs)	1.638
Yearly Premium for Rs 50,00,000 $(1.638/1,000 * 50,00,000)$ (Rs)	8,190
Premium Conversion Factor for Half-yearly mode	0.509
Instalment Premium for Half-yearly mode $(0.509 * 8190)$ (Rs)	4169

B. Benefits Payable:

(i) Early Stage Cancer Benefit

5 Half-yearly instalment Premium due are paid on the respective due dates (i.e. Premium due up to 10/2028) have been paid. In case of diagnosis of Early Stage Cancer on 22.12.2028, (Policy is in-force as on the date of diagnosis) the following benefits are payable:

Lump Sum Benefit (25% of Applicable Sum Assured) $(25% * 50,00,000)$ (Rs)	12,50,000
Less: The Half-yearly instalment Premium due on 04/2029 to be recovered (i.e. the Premium falling due from the date of diagnosis and before the next policy anniversary) (Rs)	4,169
(a) Lump sum Benefit payable (Rs)	12,45,831
(b) Premium Waiver Benefit Premium for the next 3 policy years shall be waived (i.e. Six Half-yearly instalment premium due on 10/2029, 04/2030, 10/2030, 04/2031, 10/2031 & 04/2032 shall be waived)	

Note: Premiums due from 10/2032 onwards are required to be paid by policyholder on the respective due dates. If these premiums are not paid, the policy will lapse.

(ii) Major Stage Cancer Benefit

After the premium waiver period of three years, further premium due up to 10/2033 have been paid. In case of diagnosis of Major Stage Cancer on 7.11.2033 (Policy is in-force as on the date of diagnosis) the following benefits are payable:

Lump Sum Benefit (100% of Applicable Sum Assured) (100% * 50,00,000) (Rs)	50,00,000
Less: The Half-yearly instalment Premium due on 04/2034 to be recovered (i.e. the Premium falling due from the date of diagnosis and before the next policy anniversary) (Rs)	4,169
(a) Lump sum Benefit payable (Rs)	49,95,831
(b) Income Benefit Rs 50,000 (1% of Applicable Sum Assured) is payable for 120 months from 25.11.2033 (i.e. the policy month following the payment of Lump Sum Benefit) assuming that the date of payment of Lump Sum Benefit is 22.11.2033.	

2. Example 2 : Option II - Increasing Sum Assured

Policy Details: Date of Issuance of Policy: 25.10.2026, Male Life Aged 35 Years (LBD), Policy Term: 15 Years, Basic Sum Assured: Rs 50 Lakh, Premium Payment Mode: Yearly, Distribution Channel: Offline

A. Premium Calculation:

Tabular Premium Per Rs 1000 Basic Sum Assured (Rs)	2.28
Yearly Premium for Rs 50,00,000 (2.28/1,000 * 50,00,000) (Rs)	11,400
Premium Conversion Factor for Yearly mode	1.000
Instalment Premium for Yearly mode (1.000 * 11,400) (Rs)	11,400

B. Benefits Payable:

(i) Early Stage Cancer Benefit

3 Yearly Instalment Premium due are paid on the respective due dates (i.e. Premium due up to 10/2028 have been paid). In case of diagnosis of Early Stage Cancer on 22.12.2028, (Policy is in-force as on the date of diagnosis):

Applicable Sum Assured on the date of diagnosis shall be Rs 60,00,000.

(Increase of Rs 5,00,000 (10% of Basic Sum Assured) applied on the first policy anniversary date of 25.10.2027 and Increase of Rs 5,00,000 (10% of Basic Sum Assured) applied on the second policy anniversary date of 25.10.2028).

As early stage cancer has been diagnosed on 22.12.2028, further increase in Basic Sum Assured shall not be applicable.

Early Stage Cancer benefits shall be as under:

(a) Lump Sum Benefit payable (25% of Applicable Sum Assured) (25% * 60,00,000) (Rs)	15,00,000
(b) Premium Waiver Benefit Premium for the next 3 policy years shall be waived (i.e. Three Yearly instalment premium due on 10/2029, 10/2030 & 10/2031 shall be waived)	

Note: Premiums due from 10/2032 onwards are required to be paid by policyholder on the respective due dates. If these premiums are not paid, the policy will lapse.

(ii) Major Stage Cancer Benefit

After the premium waiver period of three years, further premium due up to 10/2033 have been paid. In case of diagnosis of Major Stage Cancer on 7.11.2033. (Policy is in-force as on the date of diagnosis) the following benefits are payable:

(a) Lump Sum Benefit payable (100% of Applicable Sum Assured) (100% * 60,00,000)	60,00,000
(b) Income Benefit Rs 60,000 (1% of Applicable Sum Assured) is payable for 120 months from 25.11.2033 (i.e. the policy month following the payment of Lump Sum Benefit) assuming that the date of payment of Lump Sum Benefit is 22.11.2033.	

13. COMMISSION/ REMUNERATION PAYABLE TO THE AGENTS AND OTHER INSURANCE INTERMEDIARIES & CREDIT TO DEVELOPMENT OFFICERS:

A. Offline Sale:

- a) Commission rates as a percentage of premium net of taxes, if any, payable to Agents, Corporate Agents, Brokers and Insurance Marketing Firms (IMFs) during the Premium Paying Term are as under:

<u>Policy Term</u>	<u>1st Year</u>	<u>2nd to 6th Year</u>	<u>Subsequent Year</u>
10 to 14 years	15%	7.5%	5%
15 years	20%	7.5%	5%

Bonus Commission: 40% of 1st year's commission.

Note: No commission shall be payable on the premiums that are waived during the Policy Term.

- b) Development Officer's Credit:

<u>Policy Term</u>	<u>Credit</u> (as a % of the first year premium net of taxes)
10 to 14 years	60%
15 years	100%

B. Online Sale:

Agents / Insurance Intermediary shall not be involved and hence commission payment/ Development Officer's Credit is not applicable.

Instructions regarding claw back commission from Agents and other Insurance intermediaries shall be issued by Marketing Department, Central office.

14. PAID-UP VALUE AND SURRENDER VALUE:

The policy will not acquire any paid up value and no surrender value shall be available. All the benefits shall cease, if policy is in lapsed condition.

15. REVIVALS:

If the premium is not paid before the expiry of the days of grace, the policy lapses. The lapsed policy may be revived during the lifetime of the Life Assured, but within a period of five consecutive complete years from the date of the first unpaid premium and before the date of maturity, as the case may be. The revival shall be effected on payment of all the arrears of premium(s) together with interest (compounding half-yearly) at such rate as may be fixed by the Corporation from time to time and on satisfaction of Continued Insurability of the Life Assured on the basis of information, documents and reports that are already available and any additional information in this regard if and as may be required in accordance with the Underwriting Policy of the Corporation at the time of revival, being furnished by the Policyholder/Life Assured.

The Corporation however, reserves the right to accept at original terms, accept with modified terms or decline the revival of a discontinued policy. The revival of the discontinued policy shall take effect only after the same is approved, accepted and revival receipt is issued by the Corporation.

Waiting period as mentioned in Para 5 and Exclusions as mentioned in Para 6 will also apply on revival. The Date of Revival will be when all requirements for revival are met and approved by the Corporation at its sole discretion.

No benefit will be paid for an event that occurred during the lapse period till the Date of Revival when the Policy was in a discontinued state.

If the lapsed policy is not revived within the revival period but before the Date of Maturity, the policy will automatically terminate.

Instructions regarding the applicable interest rate shall be issued by Actuarial Department, Central Office.

Further instructions regarding revival shall be issued by CRM (PS) Department, Central Office, from time to time.

16. POLICY LOAN:

No loan shall be available under this plan.

17. ALTERATIONS:

Alteration for any change not involving change in premium rates and the corresponding benefit structure shall be allowed.

Condition regarding alteration shall be as per the instructions issued by CRM (PS) department, Central Office, from time to time.

18. UNDERWRITING, AGE PROOF AND MEDICAL REQUIREMENTS:

NB & R Department, Central office shall issue instructions in this regard.

19. ONLINE SALE OF POLICIES:

Instructions related to online sale of policies, if any, shall be issued by Digital Marketing Department, Central Office.

20. FORFEITURE IN CERTAIN EVENTS:

In case it is found that any untrue or incorrect statement is contained in the proposal, personal statement, declaration and connected documents or any material information is withheld, then and in every such case this policy shall be void and all claims to any benefit by virtue thereof shall be subject to the provisions of Section 45 of the Insurance Act, 1938 as amended from time to time.

21. TAXES:

Statutory Taxes, if any, imposed on such insurance plans by the Government of India or any other Constitutional Tax Authority of India shall be as per the Tax laws and the rate of tax as applicable from time to time.

The amount of applicable taxes, as per the prevailing rates, shall be payable by the policyholder on premiums including extra premiums, which shall be collected separately over and above in addition to the premiums payable by the policyholder. The amount of tax paid shall not be considered for the calculation of any benefits payable under the plan.

The instructions regarding issues related to taxes will be issued by Finance & Accounts Department, Central office, separately, as applicable from time to time.

22. NORMAL REQUIREMENTS FOR CLAIM:

On occurrence of the contingencies mentioned under definitions of Early Stage Cancer or Major Stage Cancer herein above, full particulars hereof must be notified in writing to the office of the Corporation where this Policy is serviced together with the then address and whereabouts of the Life Assured at the earliest possible time. Proof satisfactory to the Corporation of the contingency that has occurred, shall be furnished in the manner required as below:

1. Claim Form along with NEFT mandate from the Claimant for direct credit of the claim amount to the bank account.
2. Original Policy document.
3. Treating doctor certificate filled by the doctor treating the Life Assured for the diagnosed ailment. The treating doctor should be a Medical Practitioner registered in India/other country as approved by the Corporation. The treating Medical Practitioner should not be Life Assured himself, or the respective partner or spouse or relatives.
4. Hospital certificate/Discharge Summary duly filled by the hospital where Life Assured was admitted.
5. Confirmatory investigations including, but not limited to, clinical, radiological, histological & laboratory evidence.
6. The benefit under this policy shall be payable only on confirmation of the diagnosis by a registered Medical Practitioner appointed/approved by the Corporation.
7. Any other document or information as asked for by the Corporation depending on the facts & circumstances of each case; proof of title, proof of death, medical treatment prior to the death, school/ college/ employer's certificate, whichever is applicable.
8. If the age is not admitted under the Policy, the proof of age of the Life 'assured shall also be submitted.

In addition to the above, any requirement mandated under any statutory provision or as may be required as per law or any instructions issued by CRM (Claims) Department, Central Office, in this regard shall also be required to be submitted.

23. FREE LOOK PERIOD:

If a policyholder is not satisfied with the "Terms and Conditions" of the plan, he/she may return the policy to the Corporation stating the reasons for objections, within 30 days from the date of receipt of the electronic or physical mode of the Policy document, whichever earlier.

On receipt of the same, the Corporation shall cancel the policy and refund the premium. The refund of premium to the policyholder shall be subject to the following deductions:-

- a. Stamp duty on policy
- b. Proportionate risk premium for the "period on cover" i.e. for the exact number of days from the elapsation of waiting period to the date of receipt of returned policy bond from the policyholder for cancellation of this policy. The age-wise per day risk premium charges for Male and female lives are enclosed for standard life as **Annexure III**.

Though the above provision of deduction of risk premium for the period on cover has been made, it shall not be applicable during the waiting period of 180 days. Such deduction can only be made applicable after the waiting period is over.

24. BACK-DATING INTEREST:

Back dating will not be allowed under this plan.

25. POLICY STAMPING:

Policy stamping charges will be at the rate of 20 paisa per thousand of maximum Applicable Sum Assured. Where the maximum Applicable Sum Assured shall be equal to-

- The Basic Sum Assured for policies taken under Option I; or
- 150% of Basic Sum Assured for policies taken under Option II.

Any update in this regard shall be issued by Legal Department, Central Office.

26. REINSURANCE:

All the policies issued under this plan shall be reinsured as per applicable reinsurance treaty. The overall retention limit for this plan shall be Rs. 5 lakh under each policy.

For various benefits the retention limits shall be as follows:

Benefits	Retention Limit
Early stage Cancer	Rs. 1,25,000
Major Stage Cancer	
1. If Early Stage Cancer benefit has been paid under the policy	Rs. 3,75,000
2. If no Early Stage Cancer benefit has been paid under the policy	Rs. 5,00,000

27. ASSIGNMENTS/ NOMINATIONS:

a) **Assignments:** Assignment is allowed under this plan as per Section 38 of the Insurance Act, 1938, as amended from time to time. The notice of assignment should be submitted for registration to the office of the Corporation, where the policy is serviced.

b) **Nominations:** Nomination by the holder of a policy of life assurance is required as per Section 39 of the Insurance Act, 1938 as amended from time to time. The notice of nomination or change of nomination should be submitted for registration to the office of the Corporation, where the policy is serviced. In registering nomination the Corporation does not accept any responsibility or express any opinion as to its validity or legal effect.

28. ACCOUNTING OF INCOME AND OUTGO:

Instructions regarding the accounting procedure to be followed under the plan shall be issued separately by Finance and Accounts department, Central Office.

29. PROPOSAL FORM:

Proposal Form **URN: HPF-4 (2026)** as issued by NB&R department shall be applicable under this plan.

30. POLICY DOCUMENT, CUSTOMER INFORMATION SHEET AND SALES BROCHURE:

The specimen Policy Document, Customer Information Sheet and Sales Brochure will be sent by the Corporate Communications Department, Central Office.

This Circular has to be read in conjunction with the Policy Document and Sales Brochure.

31. ADDRESS OF OMBUDSMAN:

At the stage of issuance of policy the address and contact details of the nearest Insurance Ombudsman is to be mentioned in the Policy Document. In case of any change in address by policyholder, the address and contact details of the nearest Insurance Ombudsman from the transferring in branch has to be informed to the policyholder along with confirmation of change in address.

Further instructions in this regard to be issued by CRM/Claims Department, Central Office.

AJAY KUMAR Digitally signed by AJAY
KUMAR SRIVASTAVA
SRIVASTAVA Date: 2026.10.12 16:36:11
+05'30'

Executive Director (Actuarial)

Encl: Annexure I, II and III

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