

FWD Vibrant Critical Illness Plan

Complete health protection from wellness to recovery

Health Protection

Critical Illness

Supplement Benefit



- Health Screening Benefit every 2 years up to 10th policy year
- Up to 6x Major Critical Illness Benefit: 3x maximum claims for cancer and 3x for non-cancer
- Health Supplement Benefit for extra help with treatment and recovery \bigcirc

 \bigcirc Coverage up to age 100

Ready to be a healthier you?

Does your idea of perfect health include exercise, a balanced diet, and being able to eat three square meals a day? These are great - but there's a lot more! Good health includes having positive mental strength, emotional wellness, and healthy social connections the perfect ingredients for a fun, balanced, and productive life.

When you properly care for your mind, body, and spirit you can truly conquer and squeeze every ounce of juice from this game called life. This is the essence of the Vibrant Critical Illness Plan. A plan that 100% cares for you and your finances, and covers your health until you're 100 years old - so you can achieve a healthy lifestyle, build career momentum, and make time for people and activities that bring you heartfelt joy.



Benefits at a Glance

Vibrant Critical Illness Plan is your complete life and health insurance from wellness to recovery. Its unique features and benefits help you take better care of your health with proper health screening and maintenance, coverage from unexpected critical illnesses, and a supplement benefit for your treatment and recovery.

Be on top of your health and wellbeing while staying focused on what matters most!





Health Screening Benefit

Get extra help to monitor your health through check-ups and physical exams, which can even be used for fitness (see our sample scenarios of LISA and MARK)! Our Health Screening Benefit gives an automatic and guaranteed 0.2% of your Benefit Amount starting on your 2nd policy anniversary, payable every 2 years up to your 10th policy anniversary as long as you haven't made any major critical illness claims. It's a great way for you to stay on top of your health and address potential concerns early on.



Up to 6x Major Critical Illness Benefit

Get 100% of the Benefit Amount every time you're diagnosed with a major critical illness: with 3x maximum claims for cancer; and 3x maximum claims for non-cancer (including 3x for heart attack and stroke). The eligibility of the claim is based on the date of diagnosis.

For cancer:

- Succeeding claims for continuous or recurring cancer have to be at least three years from the initial diagnosis of a preceding cancer
- For a new cancer (not recurring or a continuation of the previous), you can make another claim one year after the date of the preceding cancer diagnosis

For non-cancer:

- Each critical illness benefit under the non-cancer group may only be claimed once, except for heart attack and stroke which you can claim up to 3 times
- Succeeding claims for non-cancer have to be at least one year after the date of the preceding non-cancer claim diagnosis



Health Supplement Benefit

We want to help you with treatment and recovery! So upon your first major critical illness diagnosis, you will get a one-time Health Supplement Benefit that gives you 2% of your Benefit Amount every month for six months.



Minor Critical Illness Benefit

You are entitled to claim one Minor Critical Illness Benefit equivalent to 25% of your Benefit Amount (up to Php 1M maximum) if you are diagnosed with any of our covered minor critical illnesses, regardless if it may be related to a succeeding major critical illness.



Waiver of Premium

We'll pay your premiums once you're diagnosed with a major critical illness. This covers those insured from 15 days of age to 65 years old upon availing Vibrant.

If you become totally and permanently disabled due to sickness or accident before the age of 70, your payments will also be waived until the end of the premium-paying period.



Maturity or Death Benefit

When you reach age 100 without making any major critical illness claims, you will receive 100% of the Benefit Amount to celebrate the milestone on your policy anniversary. Should you pass away before then without making any major critical illness claims, your beneficiary will receive 100% of the Benefit Amount.

If the insured is below 4 years old and passes away, we will pay a percentage of the Benefit Amount based on this computation table.

Attained Age	Percentage of Benefit Amount Paid Upon Death
0 to ⊲year old	20%
1to <2 year old	40%
2 to <3 year old	60%
3 to <4 year old	80%

Customize with protection boosters

Ê	RecoveryPro Hospital Cash Benefit Add-on	Gives a cash benefit for every day you are hospitalized to help with your bills. Receive 2x of the Benefit Amount if you are admitted to the Intensive Care Unit.
	LifePro Life Insurance Add-on	 Provides lump sum cash benefit (100% of coverage) upon death or terminal illness Gives an additional 20% of the Benefit Amount should you pass away anywhere else in the world Gives an additional 100% of the Benefit Amount should you or your spouse pass away in the same accident, and leave behind a child who is still a minor
	SafetyPro Accident Insurance Add-on	Provides additional cash benefit upon death due to an accident. Receive 3x the accidental death benefit if the accident happens on a covered Philippine holiday.



How do you stay healthy and happy with FWD Vibrant Critical Illness Plan?





Lisa is a true fighter. It's been two years since her stage 3 ovarian cancer Age 51 diagnosis and she is quickly regaining her strength. Her husband handles work and her two daughters have started as junior programmers. Lisa is thrilled. One night while having dinner, Lisa has a stroke. Her family responds quickly and rushes her to the hospital in time for proper treatment. Stroke is thankfully covered by her policy, so FWD provides her with a new lump sum amount of Php 5M to help pay off her medical expenses. This becomes her second Major Critical Illness Benefit claim. It's a breakthrough year. Lisa has made a complete physical recovery from her Age 54 stroke. Not only that but her cancer has gone into remission. Lisa gratefully reflects on her health journey and decides to donate to a cancer charity, supporting other patients undergoing the same challenge. She also resumes her active lifestyle, leading online yoga classes for her local fitness community - a true inspiration! It's been 10 years since her first cancer diagnosis, and Lisa feels she made the Age 57 right choice purchasing FWD Vibrant Critical Illness Plan. Despite her costly treatments, she has been able to help her children progress in their tech careers. However, she encounters another setback with a diagnosis of late-stage lung cancer. Her laboratory tests reveal it to be independent of her previous ovarian cancer diagnosis.

Age 64

Lisa has faced several major health concerns, and with the help of FWD and the love of her family, she has always come out on top. More importantly, she witnessed her kids not only pursue, but flourish in their professions - her ultimate dream. Prioritizing her health and family has led to a prosperous, vibrant life - and although she passed away at age 64, she'll always be remembered for the impact she made in the lives of others.



Mark's Story: The Golden Go-Getter



A happy and healthy life awaits!

Staying protected with Vibrant Critical Illness Plan is all about embracing your health and wellbeing.

Now is the perfect time to stand up against any health challenge that may come your way - from wellness to treatment and recovery.



1. What am I covered for?

FWD Vibrant Critical Illness Plan provides the insured with health protection until they're age 100, and coverage for 42 major and 15 minor critical illnesses including cancer, stroke, and heart attack. You may see the complete list of illnesses in the Sales Illustration and your Policy Contract documents.

This plan also has a Health Screening Benefit to help monitor your health and wellbeing, a Health Supplement Benefit that helps you with medical expenses when you're diagnosed with your first major critical illness, and a Maturity Benefit or Death Benefit if no Major Critical Illness Benefit has been claimed.

2. How often can I claim for major critical illness?

When claiming a Major Critical Illness Benefit, a 90-day no claim period will be observed.

For cancers, this can be claimed up to 3x on the following conditions:

- If the cancer is recurring or continuous in nature, subsequent claims may be made after 3 years from the date of the initial diagnosis of preceding cancer.
- If the cancer is new and not a recurrence or continuous cancer of the previous cancer claim, a claim may be made after 1year from the date of the initial diagnosis of preceding cancer.

For non-cancer illnesses, this can also be claimed up to 3x. Each illness under the non-cancer group cannot be claimed more than once, except for heart attack and stroke, which may be claimed up to 3x. Subsequent claims can be made after 1 year from the initial diagnosis of the preceding non-cancer major critical illness.

3. Are the Minor Critical Illness, Health Screening, and Health Supplement Benefits deducted from the Major or Minor Critical Illness Benefits?

No. These benefits are additional benefits and will not reduce the coverage amount of Major or Minor Critical Illness Benefits.

4. How do I receive the Health Screening Benefit? Can I use the benefit only with partner medical institutions?

The Health Screening Benefit will be given automatically when it's due, as long as no Major Critical Illness Benefit claims have been made. Just make sure your settlement account is enrolled because the benefit amount will be credited directly to it.

We give our clients the liberty to choose their preferred medical institution for health screening. Similarly, if the client feels that they want to spend the health screening benefit for something else, they may opt to do so but we highly encourage our clients to take charge of their health and wellbeing through check-ups with this benefit.

5. How do I avail the Health Supplement Benefit?

The Health Supplement Benefit is paid automatically once the first Major CI claim is approved. The first payout will be credited together with the Major CI claim benefit through your preferred bank/settlement account. The succeeding payouts will be credited to your settlement account on the same date of each subsequent month for another 5 months.

6. Does this plan have a Death Benefit?

Yes, and it's equivalent to 100% of the Benefit Amount if the insured dies before age 100. But if the insured person dies with an attained age of less than 4 years old, we only pay a percentage of the Benefit Amount.

This benefit is payable to your beneficiaries if no Major CI claims have been made.

7. What will I receive if I don't make a major nor a minor critical illness claim?

We will pay 100% of the Benefit Amount if there is no major or minor critical illness claim upon reaching age 100. Think of it as a reward for staying healthy!

8. Will an insured juvenile get 100% of the Benefit Amount?

Yes. However, juveniles are only limited to apply up to Php 5M Benefit Amount.

Frequently Asked Questions

9. How long do I need to pay for this product? What support will I get if I am diagnosed with Major Critical Illness while still paying for my FWD Vibrant Critical Illness Plan policy?

You can choose a paying period of either 5-year or 10-year. The premium amount varies on which premium payment term you choose.

When you are diagnosed with a major critical illness during your premium-paying years, you don't have to worry. We will waive all your succeeding premiums through the Waiver of Premium attached to your policy.

And if you are totally and permanently disabled before the age of 70 due to sickness (not CI related) or accident, your payments will be waived until the end of your premium payment period.

10. What are the covered major critical illnesses?

List of covered major critical illnesses:

Cancer group

Non-cancer group

Cancer Late-stage cancers • This can be defined as a malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue

• The late-stage cancer must be confirmed by histological evidence of malignancy (histological examination or study of tissue made from a biopsy specimen in a biopsy report or a surgical specimen as in an operative pathology report)

① Non-melanoma skin cancer and all carcinoma in-site of the skin or earlier stages do not meet the definition of Late-Stage Cancers

Major organ failure Aplastic anemia Chronic liver disease Chronic lung disease Chronic recurrent pancreatitis Crohn's disease Fulminant viral hepatitis Loss of hearing (deafness) Loss of sight (blindness) Major organ and bone marrow transplant Medullary cystic Progressive disease scleroderma Renal failure Terminal illness Ulcerative colitis

Heart and blood

vessels Cardiomyopathy Coronary artery disease Heart attack (myocardial infarction) Heart valve surgery Primary pulmonary arterial hypertension Surgery to aorta

Neuro-muscular related Alzheimer's disease

Apallic syndrome Benign brain tumor Cerebral aneurysm requiring surgery Coma Loss of independent existence Motor neuron disease Multiple sclerosis Muscular dystrophy Paralysis Parkinson's disease Stroke

Others

Bacterial meningitis Encephalitis HIV/AIDS due to blood transfusion Loss of limbs Loss of speech Major burns Major head trauma with severe brain damage Occupationally-acquired HIV/AIDS Severe rheumatoid arthritis

Frequently Asked Questions

11. What are the covered minor critical illnesses?

List of covered minor critical illnesses:

Accidental fracture of spinal column
Angioplasty and other invasive treatments for coronary artery disease
Diabetic retinopathy
Early-stage cancer

Early bladder cancer or papillary carcinoma of bladder
Early chronic lymphocytic leukemia (Stage 1or 2)
Early prostate cancer histologically classified as Ta or T1b using the TNM classification, or described using other equivalent classifications
Early thyroid cancer histologically classified as T1NOMO, including papillary micro-carcinoma of thyroid where the tumor is less than 1cm in diameter

- Early invasive melanomas less than 1.5mm Breslow thickness or less than Clark level three.
- ⁽¹⁾Non-melanoma skin cancer and all carcinoma in-situ of skin or earlier stages are not included

Loss of one limb Loss of one lung Removal of one kidney Severe osteoporosis Surgical removal of pituitary tumor

Juvenile Diseases

Hemophilia A and Hemophilia B Insulin Dependent Diabetes Mellitus Kawasaki Disease Osteogenesis Imperfecta - Type III Severe Asthma Systemic Juvenile Idiopathic Arthritis

12. What are the payment methods I can use?

You can pay your initial premium through:

- a. POS terminal
- b. Online/mobile/over-the-counter banking with SBC, BPI, BDO, Metrobank
- c. Mobile wallets with GCash, PayMaya
- d. Payment gateway via Dragonpay

If you want to renew your plan, you can pay your renewal premium through:

a. Omne by FWD

- b. POS terminal
- c. Online/mobile/over-the-counter banking with SBC, BPI, BDO, Metrobank
- d. Auto Debit Arrangement
- e. Auto Credit Arrangement

13. How do I make a claim?

There are two ways to file for a claim:

- Contact us via 24/7 Customer Connect at +632 8888 8388, <u>CustomerConnect.ph@fwd.com</u>, or Live Chat, available at fwd.com.ph.
- File a claim through our easy-to-use supercharged 2-in-1app, Omne by FWD. A Claims Ambassador will be assigned to personally assist you. Claimants should tell us immediately if they want to file for a claim

14. What are the basic requirements to file for a claim?

To apply for a Major Critical Illness Benefit, a Minor Critical Illness Benefit, or a Health Supplement Benefit, the following needs to be submitted:

- Claimant's Statement
- Attending Physician's Statement(s)
- Medical Certificate and Medical Records
- Any medical requirements as proof of the diagnosis and all related medical tests or evidence requested by the Attending Physician
- Evidence of Accident, if applicable
- Any additional relevant information that we believe is necessary to confirm that a benefit is payable

15. When will claims not be paid?

There will be situations where the benefit cannot be given. Major and Minor Critical Illness Benefits can't be claimed if the condition or symptom arises during the 90-day no-claim period, or if the critical illness is due to: • Unlawful acts of the insured person or policy owner

- Suicide or self-inflicted acts
- War
- Drugs or alcohol abuse
- Cancer or encephalitis in the presence of HIV
- Loss of independent existence due to psychiatric causes
- Pre-existing conditions

A claim also can't be made if death is due to suicide or deliberate self-harm of the insured person while sane within 2 years after the cover starts, is reinstated, or is increased (for the increased amount). In this case, we will return all paid premiums to the beneficiaries.

16. What is a pre-existing condition?

It's a condition that presents signs or symptoms before the policy is issued. The insured person may or may not know the presence of such a condition.

17. I have more questions. Who can I ask?

You can reach out to your financial advisor, or contact us through:

- 24/7 Customer Connect at +632 8888 8388
- or CustomerConnect.ph@fwd.com
- Live Chat, available in fwd.com.ph
- Our supercharged 2-in-1app, Omne by FWD

About FWD Philippines

FWD Life Insurance Corporation (FWD Philippines) launched its commercial operations in September 2014. Currently, FWD Philippines is number one in customer experience among insurers in the country¹. In just 10 years, FWD Philippines now ranks 3rd and 4th in terms of new business annual premium equivalent² and premium income³, respectively.

FWD Philippines is part of FWD Group, a pan-Asian life insurance business with more than 13 million customers across 10 markets, including some of the fastest-growing insurance markets in the world. FWD Group was established in 2013 and is focused on changing the way people feel about insurance. FWD's customer-led and digitally enabled approach aims to deliver innovative propositions, easy-to-understand products, and a simpler insurance experience.

FWD Philippines is regulated by the Insurance Commission of the Philippines and is legally permitted to provide insurance products and services within the country.

For more information, please visit <u>fwd.com.ph.</u>

Premium Equivalent ³<u>www.insurance.gov.ph</u> > Data > Statistics > Life Insurance Companies > 2023 > Based on Premium Income

We're here for you, 24/7.

For concerns and inquiries, you can reach us any time:



Chat: fwd.com.ph



Email: customerconnect.ph@fwd.com





Learn more about FWD's consumer protection commitment:

Insurance Commission | insurance.gov.ph

Email: publicassistance@insurance.gov.ph Call: (02) 8-523-8461 local 103/127

1071 United Nations Avenue,

Ermita, Manila, 1000



FWD Life Insurance Corporation 19/F W Fifth Avenue Building, 5th Avenue corner 32nd Street, Bonifacio Global City, Taguig City, 1634 Philippines





