



# CANCER COVER

## Policy Wording

Together, all the way.



## Cancer Cover Insurance Policy Wording

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**CIGNA CANCER COVER INSURANCE**

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0800 900 047



[www.cigna.co.nz](http://www.cigna.co.nz)



[contactus.nz@cigna.com](mailto:contactus.nz@cigna.com)



## 1. Introducing your Policy

This booklet contains the terms and conditions that apply to your Cigna Cancer Cover Insurance Policy.

Together with your original application and the Policy Summary it forms the basis of the contract between you (as the insured person) and the insurer, Cigna Life Insurance New Zealand Limited (Cigna).

Please make sure that the Policy meets your requirements, and if you have any questions or want further information please contact Cigna directly.

We rely on the information you provide to issue your Policy and pay any claims. If you're not absolutely truthful or if you fail to disclose all Material Information to us, we may cancel your Policy.

**Please note this Policy does not cover Pre-existing Conditions as defined in this Policy Wording.**

### Free look period

If you decide that you do not wish to continue with the Policy, you must notify Cigna within 30 days of receiving it.

Any premiums that you have paid will be refunded and Cigna will confirm in writing to you that the Policy has been cancelled.

If you cancel outside this 30 day period there will be no refund of premiums.

## 2. What is Cancer Cover Insurance?

Cancer Cover Insurance pays a full or partial lump sum benefit if you are diagnosed with a Severe Cancer or Less Severe Cancer as defined in this Policy Wording.

Cancer can cause unforeseen expenses for you and your family. The payment provided by your Policy may be used to help cover some of those expenses such as medical treatment or rehabilitation, or to replace lost income or pay off debt. This will allow you to concentrate on your recovery with financial peace of mind.

Cigna's Cancer Cover Insurance provides cover for Severe Cancer that has a major impact on your life.

Occurrence of a Less Severe Cancer may result in a partial payment of 10% of the current Sum Insured, after which the Policy would continue with the remainder of the Sum Insured.

### 3. About your Policy

This Policy is designed to pay you one or more benefits if you suffer a Covered Cancer, up to the maximum of the Sum Insured as defined in this document.

Providing the premium payments are up to date, your Policy will continue until the Anniversary Date after your 60th birthday. Upon this anniversary date being reached the Policy will cease.

The Policy is underwritten by Cigna Life Insurance New Zealand Limited (Cigna) who will be responsible for all claims and other matters relating to your Policy. Cigna's contact details are on the back page of this booklet.

All correspondence to you will be sent using the most recent contact details that Cigna holds on record for you. If you change your contact details it is your responsibility to notify Cigna.

Meanings of important and frequently used words and terms are set out in Section 4.

### 4. Some Terms Defined

Definitions of medical terms are included in sections 5 and 7. Other words and terms appearing in your Policy Summary and in this Policy Wording are defined below.

**Anniversary Date** means the date 12 months after the Cover Start Date and the same date every year after that.

**Covered Cancer** means Severe Cancer or Less Severe Cancer, as defined in section 5. Please note that a benefit will only be paid for a Covered Cancer if all terms and conditions of this Policy are met.

**Cover Start Date** is shown on your Policy Summary and means the date that your cover began.

**Expiry Date** is shown on your Policy Summary and means the date that cover under your Policy will automatically end.

**Material Information** means all relevant information that Cigna needed when it

- determined your eligibility for cover under this Policy
- calculated the premiums payable under this Policy
- assessed any claim under this Policy

It includes, but is not limited to, your age, sex and smoking status, and information about your health and medical history.

**Policy** means the insurance provided to you by Cigna, and the terms and conditions applying to this insurance as described in this Policy Wording and the Policy Summary.

**Premium Start Date** is shown on your Policy Summary and means the date that your first premium is due.

**Sum Insured** means the amount of your cover for a Severe Cancer. Your original Sum Insured will be shown on your Policy Summary. Over time your Sum Insured will increase by any indexation increases that are accepted (and any Policy increases that are made), and will reduce by the amount of any Less Severe Cancer Benefit payments that are made.

**Survival Period** means that you survive at least 14 days after the diagnosis of the Covered Cancer. If you are on a life support system for more than 3 days during these 14 days, the period that you must survive will extend by one day for each day (beyond 3 days) that you remain on life support.

## 5. What you are covered for

Providing the terms and conditions of your Policy are met and the Policy is in force at the date of diagnosis, Cigna will pay you a benefit for a Covered Cancer as detailed below, provided that:

- medical specialists as approved by Cigna agree that the condition or event for which you are claiming meets the Policy definition of a Covered Cancer; and
- the signs, symptoms and diagnosis of the Covered Cancer occurred at least 90 days (180 days for melanoma) after the Cover Start Date; and
- the Survival Period is reached.

### Severe Cancer Benefit

This pays a one-off benefit following the first diagnosis of a Severe Cancer, as defined below.

The amount we will pay under the Severe Cancer Benefit will be the current Sum Insured.

On payment of a Severe Cancer Benefit, this Policy will cease.

### Less Severe Cancer Benefit

This pays a benefit following the diagnosis of a Less Severe Cancer as defined below:

The Less Severe Cancer Benefit is the lesser of 10% of the current Sum Insured or \$10,000.

Payment of the Less Severe Cancer Benefit will reduce the Sum Insured by the amount paid. Ongoing premiums will be adjusted to reflect the new Sum Insured.

**Severe Cancer** means the uncontrolled growth and spread of malignant cells, including leukaemia, malignant bone marrow disorders and malignant lymphomas, characterised by:

- the invasion and destruction of normal tissue for which major interventionist therapy including surgery, radiotherapy, chemotherapy, biological response modifiers or any other major treatment is considered medically necessary; or
- the malignant cancer is sufficiently advanced such that major interventionist therapy is no longer recommended.

Severe Cancer also includes a Benign Brain Tumour. **The following cancers are specifically excluded:**

- all cancers which are histologically described as premalignant or Carcinoma in Situ or cervical intraepithelial neoplasia, unless it results directly in the removal of the entire organ, including the breast, (any such procedure must be performed specifically to arrest the spread of malignancy and be medically considered to be the necessary and appropriate treatment).
- all skin cancers unless:
  - there is evidence of metastasis; or
  - the tumour is a malignant melanoma of Clark Level 3 and above; or
  - the tumour is a malignant melanoma with invasion greater than 1.5mm maximum thickness as determined by histological examination using the Breslow method; or
  - the tumour is a malignant melanoma showing signs of ulceration as determined by histological examination
- prostate cancers diagnosed as TNM classification T1 with a Gleason score of 5 or less, unless major interventionist therapy (including but not limited to surgery, radiotherapy, brachytherapy or chemotherapy) is performed
- chronic lymphocytic leukaemia less than Rai Stage 1.

**Benign Brain Tumour** is defined as a non-cancerous tumour in the brain, cranial nerves or meninges which in the opinion of an appropriate medical specialist:

- has produced permanent neurological damage and functional impairment; or
- requires removal or reduction, by surgery or radiotherapy, for medical reasons; or
- is life threatening.

**Less Severe Cancer** means:

- Carcinoma in Situ
- Early Stage Chronic Lymphocytic Leukaemia
- Early Stage Prostate Cancer

**Carcinoma in Situ** means a carcinoma in situ (including in the breast) characterised by a focal autonomous new growth of carcinomatous cells, which has not yet resulted in the invasion of normal tissues. 'Invasion' means an infiltration and/or active destruction of normal tissues beyond the basement membrane. The tumour must be confirmed by a tissue biopsy and classified as Tis according to the TNM staging method or FIGO stage 0. Carcinoma in situ of the cervix uteri of Cervical Intraepithelial Neoplasia (CIN) classifications CIN1 and CIN2 are not covered.

**Early Stage Chronic Lymphocytic Leukaemia** means the presence of chronic lymphocytic leukaemia diagnosed as Rai stage 0, which is defined to be in the blood and bone marrow only.

**Early Stage Prostate Cancer** means prostate cancers which are histologically described as TNM classification T1 or a Gleason score of 5 or less.

The following cancers are specifically excluded:

- papillary micro-carcinoma
- non-invasive papillary carcinoma
- flat, non-invasive Carcinoma in Situ of the bladder or thyroid
- follicular thyroid carcinoma less than 10 mm
- all forms of skin cancers that are not malignant melanoma.

### **Can I claim more than once?**

If you have made a claim for which the Severe Cancer Benefit was paid then your Policy will end and no further claims will be payable. You will then become ineligible to purchase any further Cancer Cover (or similar) policies that are underwritten by Cigna.

If you have made a claim for which the Less Severe Cancer Benefit was paid, then you can make a subsequent claim for all or part of the remaining Sum Insured upon the occurrence of another Covered Cancer.

Please note that you are only allowed cover under one Cancer Cover (or similar) policy underwritten by Cigna. Any additional policy cannot be claimed upon, and in such instance Cigna will refund any excess premiums paid.

## 6. Other terms and conditions

### Policy increases

Subject to Cigna's then current rules and eligibility conditions, you may be able to apply to increase your cover under your Cancer Cover Policy.

If you increase the Sum Insured of your Policy and then, within 90 days of the date of the increase, you suffer from or develop symptoms of a Covered Cancer for the first time, Cigna will only pay the Sum Insured that applied prior to the increase.

If Cigna pays a Less Severe Cancer Benefit for a Covered Cancer and the Sum Insured under this Policy is subsequently increased, any remaining payment for that Covered Cancer or related condition will be based on the Sum Insured that applied prior to the increase.

### Indexation

To keep your cover up to date with inflation, Cigna may offer you a yearly increase of between 2.5% and 10% on each Anniversary Date.

You can decline an increase but further increases will not be offered once:

- you have declined three consecutive indexation offers or
- you have made a claim; or
- you have reached the age of 55.

### Your premiums

The initial premium payable is shown on your original Policy Summary. We will recalculate the premium on each Anniversary Date based on:

- Cigna's then current premium rates
- the then current Sum Insured
- your sex and smoking status and
- your then current age.

Cigna will write to you each year, prior to the Anniversary Date, to advise you of the premium and the Sum Insured that will apply to your Policy for the following year.

You can apply at any time to change the method and frequency of your premium payments.

### Premium changes

Cigna may review and adjust the premium rates at any time. If the rates are changed they will apply to all policies, not just yours, and Cigna will write to you at least 30 days before the new rates apply to advise you of your new premium.

### When your Policy stops

Your Policy will stop when any one of the following happens:

- if your premiums remain unpaid for three months, in which case cover will end on the date the last premium was paid up to
- you request Cigna to cancel your Policy
- a Severe Cancer Benefit has been paid to you
- the Anniversary Date after your 60th birthday is reached.

## Changes to the Policy

Cigna can change the insured events and exclusions of this Policy if it is reasonably necessary to protect Cigna's legitimate business interests. For example (but not limited to):

- if changes in the law or its interpretation occur after the Cover Start Date and we reasonably believe that those changes will affect Cigna's tax liability, or how the Policy works, or the amount of benefit payable
- if claims experience across all Cigna Cancer Cover insurance policies becomes significantly adverse.

In such case Cigna can change the provisions of the Policy or benefits in whatever way it reasonably decides is necessary to protect its legitimate business interests. You will be given at least thirty days written notice in advance of any such change.

## Surrender value

Your Policy does not have any surrender or cash value.

There will be no refund of premiums unless you advise Cigna within the free look period that you wish to cancel your Policy.

## Policy ownership

You, as the insured person, are the Policy owner and ownership cannot be transferred to any other person, entity or organisation.

## 7. What you are not covered for

**Please note there are also exclusions within the definitions of Severe Cancer and Less Severe Cancer. Refer to section 5 for more detail.**

- A. We will not pay a claim arising directly or indirectly from a Pre-Existing Condition.

**Pre-existing Condition** means any illness, signs or symptoms, bodily injury or condition, whether existing, diagnosed or in remission that:

- you sought or received medical advice, treatment, hospitalization or monitoring for before the Cover Start Date
- you could reasonably have been expected to have sought or received medical advice, treatment, hospitalization or monitoring for before the Cover Start Date.

The references in this definition to advice, treatment, or monitoring includes both conventional or alternative advice, treatment or monitoring.

- B. The following cancers are specifically excluded if you have been diagnosed at any age with the corresponding condition, or have received at any age the corresponding test result, before the Cover Start Date:
- Primary liver cancer where you had previously been diagnosed with either hepatitis B or C, or cirrhosis of the liver
  - Stomach cancer where you had previously been diagnosed with chronic gastritis or pernicious anemia
  - Multiple myeloma where you had previously been diagnosed with MGUS (Monoclonal Gammopathy of Undetermined Significance)
  - Oesophageal Cancer where you have previously been diagnosed with Barrett's Oesophagus

- Breast cancer and ovarian cancer where you had pre-existing BRCA1/2 genetic test abnormalities or you have previously been diagnosed with atypical hyperplasia
  - Bowel/colon cancer where you had been diagnosed with either ulcerative colitis, Crohn's disease, serrated adenoma or moderate to highly dysplastic polyp
  - Cervical cancer where you had experienced a history of abnormal cervical smears categorised as CIN 3 and above. CIN 1 & CIN 2 is covered
  - Prostate cancer where you had experienced a PSA test result of more than 4ng/ml at any time prior to the Cover Start Date, or where your PSA test result has increased by more than 0.75 ng/ml in the 12 months prior to the Cover Start Date
  - Cancer relating to the specific organ where a polyp was diagnosed and the histology was considered to be pre-malignant.
- C. We will not pay a claim for any cancer type for which there was a Strong Family History prior to the Cover Start Date.

**Strong Family History** of a given cancer type means:

- three or more Close Relatives on the Same Side Of Your Family have had that cancer type, or any other cancer that can be caused by a gene fault associated with that cancer type; and
- the cancers developed when the Close Relatives were under the age of 50.

**Close Relatives** means your biological:

- brothers and sisters
- parents
- parents' (biological) brothers and sisters
- grandparents.

**The Same Side Of Your Family** means either

- your biological father's relatives; or
  - your biological mother's relatives
- D. We will not pay a claim for any Covered Cancer if, prior to the Cover Start Date, you had been diagnosed with
- any cancer in the same site as the Covered Cancer; or
  - any cancer which subsequently metastasised into the Covered Cancer
- E. Other Exclusions

Cigna may not pay any benefit if:

- you did not completely and truthfully answer the questions asked of you when your Policy was issued or upgraded. In this event Cigna reserves the right to cancel your Policy immediately and to keep any of the premiums you have paid
- you failed to provide Cigna with any Material Information before your Policy was issued or upgraded. In this event Cigna reserves the right to cancel your Policy immediately and to keep any of the premiums you have paid.

Additionally, Cigna will not pay any benefit if the claim condition or event is as a direct or indirect result of any of the following circumstances:

- any intentional self-inflicted injury
- alcohol abuse, or drugs taken by you (unless prescribed and taken as prescribed by a registered medical practitioner).

## 8. How to make a claim

If you need to make a claim against your Policy, you should contact Cigna as soon as possible to request a claim form. The claim form will be sent out to you within 24 hours of your request.

You will need to complete the claim form and return it to Cigna together with any supporting documents that Cigna may reasonably require.

Any medical information required to support your claim must be:

- provided by appropriately qualified medical practitioners registered in New Zealand or Australia (or any other country approved by Cigna); and
- paid for by you.

If Cigna requires you to undergo any further examination or tests then these costs will be met by Cigna.

## 9. If you need to register a complaint

If you have a complaint, in the first instance you should contact Cigna to discuss it. This will initiate Cigna's internal complaints resolution process. Refer to section 12 for Cigna's contact details..

Cigna is a member of the Insurance and Financial Services Ombudsman (IFSO) scheme, a free, independent service which can help settle any dispute you are unable to resolve with us.

Any dispute or action relating to this Policy will be determined in accordance with New Zealand law..

### IFSO contact details

Post **P O Box 10 845, Wellington 6143**

Phone **0800 888 202**

Email **info@ifso.nz**

Website **www.ifso.nz**

## 10. About us

Cigna New Zealand is a leading specialist provider of insurance products and services including travel insurance, life insurance, funeral insurance, income protection insurance, accidental death insurance and serious illness insurance.

We've been operating in New Zealand for nearly a century, and protect more than 295,000 New Zealanders with our insurance policies.

Cigna New Zealand is part of Cigna Corporation, a Fortune 500 insurance company and one of the world's largest publicly owned companies.

A copy of Cigna's latest financial statements is available on request.

### Statutory Fund

Like all NZ life insurers we are required under the Insurance (Prudential Supervision) Act 2010 to establish a statutory fund.

The statutory fund relevant to your Policy is Cigna's Statutory Fund Number One.

## 11. Our Financial Strength

Cigna Life Insurance New Zealand Limited has an A- (Excellent) financial strength rating which was given by A.M. Best Company Inc.

The rating scale is:

| Secure |    |           | Vulnerable |    |                              |
|--------|----|-----------|------------|----|------------------------------|
| A++    | A+ | Superior  | B          | B- | Fair                         |
| A      | A- | Excellent | C++        | C+ | Marginal                     |
| B++    | B+ | Good      | C          | C- | Weak                         |
|        |    |           | D          |    | Poor                         |
|        |    |           | E          |    | Under regulatory Supervision |
|        |    |           | F          |    | In Liquidation               |
|        |    |           | S          |    | Suspended                    |

For more rating information visit

[www.ambest.com/ratings/guide.pdf](http://www.ambest.com/ratings/guide.pdf)

## 12. Contact us

For general information about your Policy such as premiums and address changes.

By phone **0800 900 047**

By email **contactus.nz@cigna.com** for general information about your Policy such as premiums and address changes

**complaintsandquality.nz@cigna.com** to register a complaint

**claims.nz@cigna.com** to request a claim form or ask any questions related to a claim

By letter **Cigna Life Insurance**

**P O Box 24031**

**Manners Street**

**Wellington 6142**

By fax **04 470 9152**



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