

Enjoy a fulfilling Retirement life with NPS Annuity.



SBI Life -
Smart
Annuity Income
UIN 111N149V02



Securing a regular stream of income for your future is important to maintain your lifestyle post retirement, ensuring long-term financial well-being and peace of mind.

We at SBI Life Insurance understand your concerns the best, we present to you, **SBI Life – Smart Annuity Income**, an Individual, Non-Linked, Non-Participating, General Annuity product. With payment of one-time premium, you receive fixed annuity payments throughout your life, irrespective of future market conditions safeguarding your financial future post retirement.

The product will only be offered to the subscribers of the National Pension Scheme (NPS) regulated by the Pension Fund Regulatory and Development Authority (PFRDA).

Key Features

- Pay One Time and Financially Secure your Future
- Guaranteed Lifelong Regular Income
- Flexibility to choose from Five Annuity Options based on your Needs.
- Incentive for High Purchase Price.
- Flexibility to choose Frequency of Annuity Payouts as per your Requirement.

Eligibility Criteria

- **Entry Age:** This product is available for sales for NPS subscribers in case of “Joint Life Annuity” annuity options, the maximum age difference allowed between primary and secondary annuitant is 30 years subject to the minimum and maximum entry age of both annuitants.
- **Premium/ Purchase Price:** Minimum premium/ purchase price for any type of annuity will be such that the annuitant(s) can be paid minimum annuity as per the annuity payment mode and as per Pension Fund Regulatory and Development

Authority (PFRDA) guidelines for National Pension Scheme (NPS) subscribers. There is no limit for maximum premium/purchase price under the product.

Premium/ Purchase Price refers to the lumpsum amount used to purchase annuity, it does not include applicable taxes and other statutory levies. The amount in respect of applicable taxes and other statutory levies is charged in addition to the purchase price/premium, at the rate notified by the Government from time to time.

- **Minimum Annuity:** Minimum annuities payable will be as prescribed by the Pension Fund Regulatory and Development Authority (PFRDA)
- **Maximum Annuity:** There is no limit on maximum annuities payable and will be shall be subject to Board Approved Underwriting Policy.
- **Annuity Frequencies:** Annuity payout frequencies available are - Yearly, Half-Yearly, Quarterly and Monthly.
- **Annuity Options:** Choice of Single Life and Joint Life annuities available. For Joint Life annuity options, second annuitant could be spouse, children, parents, parents-in-laws or siblings as per extant of PFRDA guidelines, who will be entitled to receive the Annuity Payout in the event of death of the Primary Annuitant. The Secondary Annuitant has to have an insurable interest with the Primary Annuitant.

Plan Benefits

Benefits available under the product vary based on Annuity Options and Annuity option once selected cannot be changed.

1. **Single Life Annuity:** Annuity is payable at a constant rate till the annuitant is alive. On death of Annuitant, no death benefit is payable, annuity payments cease and the policy contract terminates.

2. **Single Life Annuity with Return of Purchase Price:** Annuity is payable at a constant rate till the annuitant is alive. On death of Annuitant, the purchase price is payable to the nominee, annuity payments cease and the contract terminates.
3. **Joint Life Annuity:** Annuity is payable at a constant rate till one of the annuitants is alive. On death of Primary Annuitant, 100% of the annuity payments will continue at a constant rate till the secondary annuitant is alive. If the secondary annuitant pre-deceases the primary annuitant, annuity payments cease on the death of the primary annuitant. On death of both Annuitants, no death benefit is payable, annuity payments cease and the policy contract terminates.
4. **Joint Life Annuity with Return of Purchase Price:** On survival of Annuitants, Annuity is payable at a constant rate till one of the annuitants is alive. On death of the Primary Annuitant, 100% of the annuity payment will continue throughout the life of the surviving secondary annuitant. If the secondary annuitant pre-deceases the primary annuitant, annuity payments cease on the death of the primary annuitant. On the death of last survivor, purchase price is refunded to the nominee, all future annuity payouts cease immediately and the contract terminates.
5. **Family Income:** The annuity benefits will be payable for life of the Annuitant (Subscriber under the NPS) and his/her spouse as per the annuity option "Single Life Annuity with Return of Purchase Price" or "Joint Life Annuity with Return of Purchase Price" as the case may be. In case the subscriber does not have a spouse, the annuity benefits will be payable for life of the subscriber as per the annuity option "Single Life Annuity with Return of Purchase Price".

In case the Subscriber has a spouse, and demise of the subscriber before the vesting of annuity, the annuity benefits will be payable for life of the spouse as per the annuity option "Joint Life Annuity with Return of Purchase Price".

On death of the annuitant(s), the annuity payment would cease and the refund of purchase price shall be utilized to purchase an annuity contract afresh for living dependent parents (if any) as per the order specified below:

- a) Living dependent mother of the deceased subscriber;
- b) Living dependent father of the deceased subscriber.

However, the annuity amount would be revised and determined as per the annuity

option “Single Life Annuity with Return of Purchase Price” on a Single Life basis using the annuity rate, applicable for the age of that member, prevalent at the time of purchase of such annuity by utilizing the premiums required to be refunded to the nominee under the annuity contract.

The annuity would continue until all such family members in the order specified above are covered. After the coverage of all the family members, the purchase price shall be refunded to the surviving children of the subscriber and in the absence of children, the legal heirs of the subscriber, as may be applicable.

In case no such family member exists upon the death of the last survivor, there would be a refund of purchase price to the nominee.

Sample Illustration

Monthly Annuity Payouts @ Age 60 Years for Purchase Price of ₹10 Lakh

Option No.	Annuity Option	Monthly Annuity Amount (₹)	Death Benefit (death of single or both annuitants, as applicable)
1.	Single Life Annuity	6,637	-
2.	Single Life Annuity with Return of Purchase Price	5,678	10,00,000
3.	Joint Life Annuity	6,105	-
4.	Joint Life Annuity with Return of Purchase Price	5,665	10,00,000
5.	Family Income – Single Life	5,678	10,00,000
	Family Income – Joint Life	5,665	10,00,000

**For Joint life Option considering both annuitants of same age*

Surrender Benefit

Surrender Benefit is not available under the product.

However, the policy can be surrendered any time after six months from the date of commencement, if the annuitant/ primary annuitant/ secondary annuitant, or spouse or any of the children of the annuitant is diagnosed as suffering from any of the critical illnesses as allowed under the product, based on the documents produced to the satisfaction of the medical examiner of the Company and is available only under Single Life Annuity with Return of Purchase Price and Joint Life Annuity with Return of Purchase Price.

On approval of the surrender, the applicable surrender value is payable on the date of surrender which is equal to 95% of the Purchase Price, subject to deduction of any outstanding loan amount and loan interest, if any. On payment of the surrender value, the policy shall terminate and all other benefits shall cease. For the purpose of surrender value calculation, the Purchase Price excludes taxes, if any. Any change in surrender value calculation method shall be made subject to prior approval of the Competent Authority.

Policy Loan

Policy Loan is only available for Single Life Annuity with Return of Purchase Price and Joint Life Annuity with Return of Purchase Price.

Loan can be availed any time after six months from the date of commencement of the policy. Maximum amount of loan that can be granted under the policy shall be such that the effective annual interest amount payable on loan does not exceed 50% of the annual annuity amount payable under the policy at the time of availing the loan. Under joint life option, the loan can be availed by the primary annuitant and on death of the primary

annuitant, it can be availed by the secondary annuitant.

The interest on loan shall be at 10-year G-Sec rate as at 1st April of the relevant financial year, plus not more than 200 bps and shall be applicable for all loans granted during the period of twelve months, beginning 1st May of the relevant financial year. The interest rate would be rounded to nearest multiple of 25 basis points and interest amount would be rounded nearest to ₹1. The current interest rate applicable for policy loan for the financial year 2024-2025 is 9.00% compounded half-yearly.

The loan interest will be recovered from the annuity amount payable under the policy. The loan interest will accrue as per the frequency of annuity payment under the policy and it will be due on the date of annuity. The loan outstanding shall be recovered from the claim proceeds under the policy. However, the annuitant has the flexibility to repay the loan principal at any time during the currency of the annuity payments.

Any change in the basis for determining interest rate for policy loan shall be made subject to prior approval of the Authority.

Incentive for Higher Purchase Price

For higher purchase price the incentive will be in the form of additional annuity
The additional annualized annuity rates per ₹1,00,000 purchase price would be as follows:

Purchase Price Range (₹)	All other options
10,00,000 – 24,99,999	1.50
25,00,000 – 49,99,999	2.10
50,00,000 – 99,99,999	2.35
1,00,00,000 and above	2.50

Annuity Payment Modes

You will have an option to avail Annuity payments as Monthly, Quarterly, Half-yearly or Yearly payments. Payments shall be in arrears only, which means that the first annuity payment will start after the modal duration. You can choose any one of the Annuity Payments Modes at the inception of the policy.

The modal factors depending on the annuity payment modes are as follows:

Annuity Pay Mode	Modal Factor
Monthly	1.0000
Quarterly	1.0050
Half-Yearly	1.0125
Annual	1.2750

Lapse: Not Applicable.

Paid –up Value: Not Applicable

Free Look Period

The policyholder, has a free look period of 30 days beginning from the date of receipt of policy document, whether received electronically or otherwise, to review the terms and conditions of the policy. In the event a policyholder disagrees to any of the policy terms or conditions, or otherwise and has not made any claim, the policyholder has the option to return the policy to the company for cancellation, stating the reasons for the same.

Irrespective of the reasons mentioned, the policyholder shall be entitled to a refund of the premium paid subject only to a deduction of a stamp duty paid and annuity instalments paid, if any. Also the proceeds from cancellation shall only be transferred back to the CRA (Central Record Keeping Agency) account from where the money was received.

General Terms and Conditions

Applicable taxes: Any applicable taxes and/ or any other statutory levy/ duty/ surcharge on your premiums, as notified by the Central and/or State Government will be applicable from time to time as per the provisions of the prevalent tax laws.

Nomination shall be as per Section 39 of the Insurance Act, 1938 as amended from time to time. For NPS -Family Income option, dependents' nomination would be as per the rules governed by PFRDA.

Assignment shall be as per provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.

Grievance Redressal

To deliver excellence in customer service, we have put in place a prompt, accessible and responsive mechanism for addressing your grievances and suggestions. You can approach us through below touch points.

- Toll-free number: 1800 267 9090 (24 X 7).
- By sending email on info@sbilife.co.in.
- Submit your grievance through digital form available on website / Customer Service App (Smart Care)
- You may approach any of our offices.

Critical Illnesses

The following critical illnesses are allowed under this product:

1. Cancer of Specified Severity

- I. 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.
- II. The following are excluded –
 - i. 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.
 - ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;

- iii. Malignant melanoma that has not caused invasion beyond the epidermis;
- iv. 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
- v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- vi. Chronic lymphocytic leukaemia less than Rai stage 3
- vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- viii. 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;

2. Myocardial Infarction (First Heart Attack of Specific Severity)

- I. The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:
 - i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
 - ii. New characteristic electrocardiogram changes
 - iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.
- II. The following are excluded:
 - i. Other acute Coronary Syndromes
 - ii. Any type of angina pectoris
 - iii. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

3. Open Chest CABG

- I. The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.
- II. The following are excluded:
 - i. Angioplasty and/or any other intra-arterial procedures

4. Open Heart Replacement Or Repair of Heart Valves

- I. The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease-affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty are excluded.

5. Coma of Specified Severity

- I. A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:
 - i. no response to external stimuli continuously for at least 96 hours;
 - ii. life support measures are necessary to sustain life; and
 - iii. permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.
- II. The condition has to be confirmed by a specialist medical practitioner. Coma resulting directly from alcohol or drug abuse is excluded.

6. Kidney Failure Requiring Regular Dialysis

- I. End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

7. Stroke Resulting in Permanent Symptoms

- I. Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.
- II. The following are excluded:
 - i. Transient ischemic attacks (TIA)
 - ii. Traumatic injury of the brain
 - iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

8. Major Organ / Bone Marrow Transplant

- I. The actual undergoing of a transplant of:
 - i. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
 - ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.
- II. The following are excluded:
 - i. Other stem-cell transplants
 - ii. Where only islets of langerhans are transplanted

9. Permanent Paralysis of Limbs

- I. Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

10. Motor Neuron Disease with Permanent Symptoms

- I. Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

11. Multiple Sclerosis with Persisting Symptoms

- I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
 - i. investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
 - ii. there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.
- II. Neurological damage due to SLE is excluded.

12. Benign Brain Tumor

- I. Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.
- II. This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.

- i. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
 - ii. Undergone surgical resection or radiation therapy to treat the brain tumor.
- III. The following conditions are excluded:
- i. Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

13. Blindness

- I. Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.
- II. The Blindness is evidenced by:
 - i. i. corrected visual acuity being 3/60 or less in both eyes or;
 - ii. the field of vision being less than 10 degrees in both eyes.
- III. The diagnosis of blindness must be confirmed and must not be correctable by aids or surgical procedure.

14. End Stage Lung Failure

- I. End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:
- II. The Blindness is evidenced by:
 - i. FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
 - ii. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
 - iii. Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less ($\text{PaO}_2 < 55\text{mmHg}$); and
 - iv. Dyspnea at rest.

15. End Stage Liver Failure

- I. Permanent and irreversible failure of liver function that has resulted in all three of the following:
- II. Permanent jaundice; and
Ascites; and
Hepatic encephalopathy.
- III. Liver failure secondary to drug or alcohol abuse is excluded.

16. Loss of Speech

- I. Total and irrecoverable loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist.

17. Loss of Limbs

- I. The physical separation of two or more limbs, at or above the wrist or ankle level limbs as a result of injury or disease. This will include medically necessary amputation necessitated by injury or disease. The separation has to be permanent without any chance of surgical correction. Loss of Limbs resulting directly or indirectly from self-inflicted injury, alcohol or drug abuse is excluded.

18. Major Head Trauma

- I. Accidental head injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes.
- II. The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living either with or without the use of

mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word “permanent” shall mean beyond the scope of recovery with current medical knowledge and technology.

III. The Activities of Daily Living are:

- i. Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- iii. Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
- iv. Mobility: the ability to move indoors from room to room on level surfaces;
- v. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- vi. Feeding: the ability to feed oneself once food has been prepared and made available.

IV. The following are excluded:

- i. Spinal cord injury;

19. Primary (Idiopathic) Pulmonary Hypertension

- I. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.
- II. The NYHA Classification of Cardiac Impairment are as follows:

- i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
 - ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.
- III. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

20. Third Degree Burns

- I. There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

Any change in the above-mentioned Critical Illnesses shall be made subject to prior approval of the Authority

Prohibition of Rebate

Section 41 of Insurance Act, 1938, as amended from time to time, states:

- a) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
- b) Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

Non-Disclosures

Extract of Section 45 of Insurance Act, 1938, as amended from time to time, states:

- a) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy. A policy of life insurance may be called in question at any time within three years from the date of the policy, on the ground of fraud or on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued. The insurer shall have to communicate in writing to the insured or the legal representatives or claimants or assignees of the insured, the grounds and materials on which such decision is based.
- b) No insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement or suppression are within the knowledge of the insurer. In case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.
- c) In case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the grounds of fraud, the premiums collected on the policy till the date of repudiation shall be paid.
- d) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

For complete details of the section and the definition of 'date of policy', please refer Section 45 of the Insurance Act, 1938, as amended from time to time.



Apne liye. Apno ke liye.

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