



BENEFITS SCHEDULE

Intercultural Theatre Institute Ltd

Group Hospitalisation & Surgical Insurance

Benefits Schedule	Limits (SGD)
1a) Daily Room & Board	As charged in B2 wards (6-bedder) in Singapore Government / Singapore Government Restructured Hospitals up to the overall maximum limit per policy period
1b) Intensive Care Unit	
2) Hospital Miscellaneous Services	
3) Surgeon's Fee	
4) Anesthetist's Fee	
5) In-hospital Physician's Visit	
6) Pre-hospitalisation Specialist Consultation ¹ (up to 30 days before admission)	
7) Pre-hospitalisation Diagnostic Services ¹ (up to 30 days before admission)	
8) Post- hospitalisation Treatment (up to 90 days from discharge) ²	
9) Emergency Outpatient Treatment (due to accident only) ³	
10) Ambulance Fee	
11) Medical Report Fees	Government Restructured Class "A" - 65% Private (Capped at 2-bedder) - 50%
Pro-ration factor will apply if student is warded in a higher ward in Singapore Government / Restructured Hospitals or in private hospitals in Singapore	
Overall Maximum Limit Per Policy Period (Item 1 to 11)	20,000
Additional Benefit	
12) Hospital Confinement due to Mental Illness (with referral by General Practitioner or Specialist)	1,000
13) Death Benefit	3,000

¹ Must lead to hospitalisation and/or surgical procedure within 30 days

² For expenses incurred within 90 days from the date of discharge from hospital or day surgery.

³ Treatment must be sought in a hospital or clinic or from a registered *Traditional Chinese Medicine (TCM) practitioner* within 24 hours from time of accident; follow-up charges by same physician covered up to 30 days from date of accident and for TCM practitioner not exceeding \$300 per occurrence.



**AXA Insurance Singapore Pte Ltd
Group Hospital & Surgical Insurance
Product Summary – Group Smartcare Executive (Private Education Institution)**

Product Information

This is an expense reimbursement plan that helps to reduce your financial burden in event of you being hospitalised. We will reimburse the following eligible expenses incurred according to the limits set out in the Benefits Schedule.

Key Product Provisions

The following are some key provisions found in the policy contract of this plan. This is only a brief summary and you are advised to refer to the actual terms and conditions in the policy. Please consult AEGIS Insurance Services Pte Ltd or your Private Education Institution should you require further explanation.

Members' Eligibility for Coverage

The entry age of the Insured Member must not exceed 65 years at next birthday.

Non-Guaranteed Premium

Premiums payable for this coverage are not guaranteed and may be increased at policy renewal at the full discretion of the Insurance Company.

Deductibles

There are no deductibles for this plan.

Pro-Ration Factors/ Co-Insurance

A pro-ration factor is applied if you are hospitalised :

- a) in a ward higher than that specified in the Benefits Schedule in Singapore Government / Singapore Government Restructured Hospital or
- b) in a private hospital in Singapore

Overseas Hospitalisation

***Reasonable & Customary Charges** applies if you are hospitalized in a hospital outside Singapore.

*This is defined as the general level of charges applicable in Singapore when furnishing similar or comparable treatment, services or supplies to individuals of the same sex and comparable age, for similar disease or injury. The benefits payable under this plan shall be the lower of the Reasonable and Customary Charges in Singapore or those in the foreign country in which you seek similar medical treatment.

Cover does not apply : *1) when you travel expressly for treatment outside Singapore
2) when you are out of Singapore for a period exceeding ninety (90) consecutive days at a time*



Minimum Period of Confinement

For day surgery cases, there are no minimum hours to be eligible for claim. However, for non surgical admissions, when you are charged for a full day room and board, you can submit the claim for assessment.

Exclusions

There are certain conditions under which no benefits will be payable. These are stated as exclusions in the policy. You are advised to read the policy contract for the full list of exclusions.

This Policy shall not cover situations listed below and any medical conditions arising therefrom:

- All pre-existing conditions.
- Any period of hospital confinement unless the entire confinement and all the special hospital services so rendered and performed had been recommended and approved by a Physician and in accordance with the diagnosis and treatment of the condition for which the hospital confinement was required.
- Hospitalisation primarily for diagnosis, x-ray examinations, general physical or medical check-up, routine physical examinations, health check-ups or any other tests where there is no objective indication of impairment of normal health or any treatment of a preventive nature including vaccinations, acupuncture, or any treatment which is not medically necessary.
- Charges for telephone, television, radio, newspaper, guests' meals and other ineligible non-medical items whilst confined as an Inpatient or for Day Surgery.
- Outpatient treatment, dental care and its related treatment except as specifically Covered under this Policy.
- Pregnancy, childbirth, abortion, miscarriage, infertility and all complications arising therefrom except as specifically covered under this Policy.
- Investigations into and treatment of infertility, surgical, mechanical or chemical contraceptive methods of birth control, assisted reproduction, sterilisation (or its reversal) or any consequence of any treatment for them.
- Treatment of varicocele, impotence or any consequence of it.
- Sickness or disease directly or indirectly arising from sexually transmitted disease, Acquired Immune Deficiency Syndrome (AIDS), any AIDS related condition, or infection by Human Immune-Deficiency Virus (HIV).
- Treatment which arises from, or is in any way attributable to, sex change.
- Costs arising under any legislation or covered under any corresponding insurance relating to occupational death, injury, or illness.
- Treatment for congenital conditions and any physical birth defects arising out of or resulting therefrom.
- Non-hospital nursing care or ambulatory care, rest cures or sanatoria care, treatment arising from any geriatric, psycho geriatric or psychiatric condition, and treatment of alcohol dependence syndrome or substance abuse.
- Suicide or attempted suicide, self-inflicted injuries or any attempt thereat while sane or insane.
- Circumcision unless medically necessary, eye tests, refractive errors of the eyes, provision of implants, medical appliances and prosthetic devices, including spectacles, hearing aids, wheelchairs and lenses.



- Sickness or injury arising from racing of any kind (except on foot), professional sports, parachuting, skydiving, hang gliding, bungee jumping and violation or any attempt of violation of the law or resistance to lawful arrest.
- Flying or other aerial activity except as a fare-paying passenger in a fully licensed aircraft operated by a licensed commercial air carrier or recognised charter company.
- Treatment arising from any consequence (whether direct or indirect) of nuclear or chemical contamination, war, invasion, losses by terrorist acts using chemical/biological substances, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, direct participation in riot, strike and civil commotion, insurrection or military or usurped power, or active duty in any of the armed forces
- The use, or any treatment arising therefrom, of any drugs not licensed by an official governmental control agency of the country in which the drug is given, or drugs used in any circumstances other than in accordance with their licensed indications.
- Experimental medical treatment.
- Any treatment directed towards developmental delay and / or learning disabilities in children.
- Cosmetic (aesthetic) or plastic surgery or treatment, or any treatment which relates to or is needed because of previous cosmetic treatment, provided that this exclusion does not apply to reconstructive surgery if:
 - (a) it is carried out to restore function or appearance after an Accident or following Surgery for a medical condition, (provided that the Accident or Surgery occurred while the Insured Person was Covered under this Policy); and
 - (b) it is done at a medically appropriate stage after the Accident or Surgery; and
 - (c) the cost of the treatment is approved by us in writing before it is done.
- The removal of fat or surplus tissue from any part of the body whether or not it is needed for medical or psychological reasons, treatment of obesity, weight reduction or weight improvement.
- Sleep apnoea.

Termination of Insured Member's Cover

There are other circumstances whereby the cover of the Insured Member will terminate. The following is a list of some of these circumstances:

- Insured Member attains age 65 years;
- Insured Member ceases to be a student with the school;
- Insured Member dies;
- Insured Member's maximum policy limits have been exhausted.

Cover on the Insured Member automatically ceases once the master policy contract is terminated due to non-payment of premiums or other causes specified in the policy contract. No premium refund for early termination of Insured Member or Policy before the expiry date.