

AIA HEALTHSHIELD GOLD MAX  
AIA MAX VITALHEALTH

# ALL YOUR HEALTHCARE NEEDS IN ONE KIT

Complete your protection with holistic solutions  
that take you from diagnosis to recovery.

— INCLUDES —  
**ADDITIONAL  
CANCER  
COVERAGE  
OPTION!**



HEALTHIER, LONGER,  
BETTER LIVES

# Holistic healthcare solutions for every stage of recovery

## PRIMARY CARE

### GP Medical Consultations

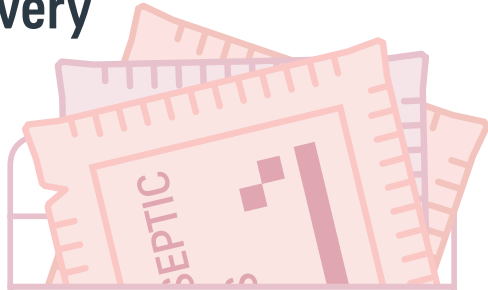


Receive on-demand video consultation in the comfort of your own home with **WhiteCoat**, our exclusive telemedicine partner, and have your medication delivered to you in as quickly as 90 minutes for a flat consultation fee of S\$12.<sup>^</sup>

WhiteCoat doctors can also seamlessly connect you to our medical concierge service to book a consultation with our AIA Quality Healthcare Partner (AQHP) specialists if necessary.

<sup>^</sup> excludes GST, medication or delivery charges (where applicable).

## EMERGENCY MANUAL



## PRE-HOSPITALISATION / PRE-SURGERY

### AIA HealthShield Pre-authorisation

Get your hospital/surgical bill at a private specialist pre-authorised in 3 simple steps.

1. Activate your pre-authorisation request before your non-emergency admission / day surgery via AIA customer portal, AIA website or calling the HealthShield hotline at **1800 248 8000**.
2. Your doctor will complete the pre-authorisation e-form and submit it to us directly.
3. We will assess the application and reply within 3 working days after your doctor submits the completed form.

Upon approval, you will receive a Certificate of Pre-authorisation which you can present at the hospital during admission, and we will settle the pre-approved bill on your behalf, subject to hospital policy.

## HOSPITALISATION / SURGERY

### Boost Your Medical Coverage

Focus on recovery while we take care of your healthcare costs. With AIA HealthShield Gold Max and AIA Max VitalHealth, you can rest assured that your out-of-pocket medical expenses are kept to a minimum. AIA Max VitalHealth covers the deductible and co-insurance incurred under AIA HealthShield Gold Max, subject to a co-payment and cap per policy year if the admission/treatment is by AIA Preferred Providers<sup>1</sup> or non-AIA Preferred Providers with pre-authorisation.

### Your Choice of Healthcare Partners

Connect with your preferred doctor from over **380 of our AQHP specialists**. Each of them has at least 5 years of specialist experience and a clean professional track record.

As an AIA HealthShield Gold Max customer, you can also enjoy pre-negotiated consultation rates when you seek specialist treatment with any of our AQHP specialists.



## PRE- TO POST-HOSPITALISATION

### Global Support for Your Medical Needs

Leverage on the best medical expertise worldwide by our partner, **Teladoc Health**, which provides Personal Case Management service for serious medical conditions.

- Access to a **dedicated physician case manager**
- Receive medical advice on your diagnosis and treatment from **over 50,000** leading global specialists
- Service is available daily from **0900 - 2100 hrs** (except public holidays) in **English and Mandarin**
- Complimentary for **AIA Max VitalHealth A, AIA Max VitalHealth A Value, AIA Max VitalHealth B, AIA Max VitalCare, AIA Max Essential A and A Saver** customers

# Why choose AIA HealthShield Gold Max?

## Key Benefits



Up to S\$2 million limit per policy year



Up to 13 months pre- and post-hospitalisation benefits **Longest in market!**



Guaranteed lifetime coverage and unlimited lifetime claim amount<sup>2</sup>



Extra coverage of up to S\$100,000 for 30 critical illnesses per policy year



Covers congenital abnormalities for the Insured with no waiting time



Covers Inpatient Hospice Palliative Care

### DID YOU KNOW?



- No minimum hospital stay period is necessary for surgical benefit claims
- Day surgeries<sup>3</sup> performed in approved medical institutions (e.g. specialist clinics) are also covered under AIA HealthShield Gold Max
- Admission to community hospitals is claimable upon referral from a public hospital's A&E department

# Enhance your coverage with AIA Max VitalHealth

- First-in-market early detection screening benefit<sup>4</sup> from age 40 onwards
- Keep your out-of-pocket expenses cap at S\$3,000 / S\$6,000 per policy year<sup>5</sup> regardless of the doctor you consult, including non-AQHP (with pre-authorization), or emergency admission via Accident & Emergency Department of a hospital
- Immediate family members' accommodation benefit<sup>6</sup>
- Post-hospitalisation home nursing benefit<sup>6</sup>
- Post-hospitalisation alternative medicine for cancer and stroke benefit<sup>6</sup>
- Emergency and Outpatient Care Booster optional add-on for AIA Max VitalHealth A and AIA Max VitalHealth A Value

## DEDUCTIBLE WAIVER PASS FOR AIA MAX VITALHEALTH A

Enjoy zero deductible\* on your first private hospital claim regardless of the doctor you consult. The Deductible Waiver Pass will reset if you have not made any private hospital claims over 3 consecutive policy years.

Private hospital claims without the Deductible Waiver Pass will be subject to a S\$2,000 deductible.

\* Coverage on deductible is subject to 5% co-payment.

## Supplement your cancer protection with AIA Max A Cancer Care Booster

From 1 April 2023, only cancer drug treatments under the MOH-approved Cancer Drug List (CDL) can be claimed from your Integrated Shield Plans.

With AIA Max A Cancer Care Booster, you can enjoy additional coverage – even for selected non-CDL drug treatments!



### Cancer drug treatments (CDL)

**16x** MediShield Life monthly limit<sup>7</sup>

### Cancer drug treatments (non-CDL)

**S\$200K** /policy year<sup>9</sup>

### Cancer drug services

**10x** MediShield Life policy year limit<sup>8</sup>

### Co-insurance cap benefit

Reimburses any co-insurance excess past the

**S\$50,000** /policy year cap<sup>10</sup>

Note: The above coverage will be automatically included in AIA Max VitalHealth B / AIA Max VitalHealth B Lite. Different coverage limits apply.

POWERED BY **AIA Vitality**



### **Better Choice, Better Health**

Make the choice towards better health than before with AIA Vitality, one of the most comprehensive wellness programmes in Singapore. Through a wide spectrum of tools and benefits that target different aspects of your health, AIA Vitality supports you to make positive behavioural changes that improve your overall wellness.

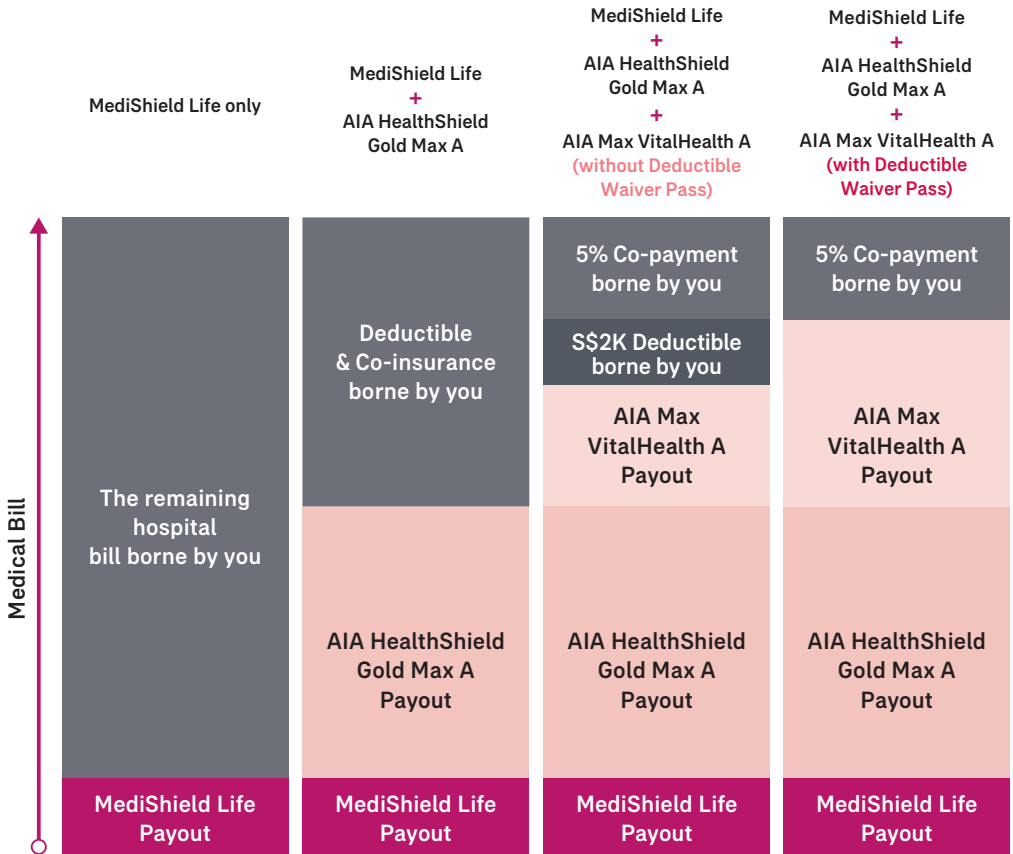
Besides physical health, AIA Vitality also takes care of your financial health with exclusive insurance benefits that you can enjoy on selected AIA plans and riders. Enjoy additional insurance coverage (also known as PowerUp Dollar) or premium discounts on a range of AIA protection and long-term savings plans. The higher your Vitality status, the more you'll have to look forward to – so boost your insurance needs with AIA Vitality today!

### **How AIA Vitality works with your plan**

Take charge of your financial health with a Vitality-integrated AIA Max VitalHealth and enjoy premium discounts<sup>11</sup> for the plan. As you get healthier and improve your AIA Vitality status, you will enjoy greater discounts of up to 15% – which means coverage for you at lower costs! So, the higher your AIA Vitality status, the more you save!

# How can AIA HealthShield Gold Max and AIA Max VitalHealth help?

We can always count on MediShield Life for our hospitalisation needs. But when the unexpected happens, you may need a more holistic healthcare solution for greater protection, while keeping your out-of-pocket medical expenses to the minimum.



Note: The above diagram is for illustrative purposes only. Please note that pro-ration will apply for private hospital bill or public hospital class A/B1 ward bill under MediShield Life, which is sized for class B2/C bills.

# Further your safety net

Tom has an **AIA HealthShield Gold Max A** plan with **AIA Max VitalHealth A**. He is diagnosed with heart attack, and his total medical bill in a private hospital comes up to S\$200,000.

**AIA HealthShield Gold Max A** covers the majority of his medical bill, and Tom incurs a total deductible and co-insurance of S\$23,150.

- Deductible = S\$3,500
- Co-insurance = S\$19,650  
[10% x (S\$200,000 - S\$3,500)]



If Tom is treated by an AQHP / non-AQHP private specialist



With pre-authorization

Eligible for Deductible Waiver Pass benefit

With AIA Max VitalHealth A, the deductible and co-insurance will be covered with a 5% co-payment of S\$10,000. As there is a co-payment cap, Tom only needs to pay S\$3,000.

Amount Tom needs to pay from his own pocket:

5% co-payment =  
**S\$3,000**

(cap at S\$3,000 per policy year)

AIA Max VitalHealth A will cover the remaining **S\$20,150**.

Not eligible for Deductible Waiver Pass benefit

AIA Max VitalHealth A will only cover the deductible in excess of S\$2,000 and co-insurance, subject to a 5% co-payment. As there is a co-payment cap of S\$3,000, Tom needs to pay a total of S\$5,000.

Amount Tom needs to pay from his own pocket:

Deductible =  
**S\$2,000**

5% co-payment =  
**S\$3,000**

(cap at S\$3,000 per policy year)

AIA Max VitalHealth A will cover the remaining **S\$18,150**.





If Tom is treated by  
a non-AQHP private specialist



Without  
pre-authorization

Eligible for Deductible Waiver  
Pass benefit

Tom did not activate pre-authorization before treatment. AIA Max VitalHealth A will cover the deductible and co-insurance, subject to a 5% co-payment. Tom will need to pay a total of S\$10,000.

Amount Tom needs to pay from his own pocket:

5% co-payment =  
**S\$10,000**  
(5% x S\$200,000)

AIA Max VitalHealth A will cover the remaining **S\$13,150**.

Not eligible for Deductible Waiver  
Pass benefit

Tom did not activate pre-authorization before treatment. AIA Max VitalHealth A will only cover the deductible in excess of S\$2,000 and co-insurance, subject to a 5% co-payment. Tom needs to pay a total of S\$11,900.

Amount Tom needs to pay from his own pocket:

Deductible = **S\$2,000** | 5% co-payment = **S\$9,900**  
[[(S\$200,000 - S\$2,000  
Deductible borne by  
Tom) x 5% co-payment]

AIA Max VitalHealth A will cover the remaining **S\$11,250**.

# Benefits of AIA HealthShield Gold Max

(S\$ and includes GST)

Plan Type	A	B	B Lite
Hospital Ward Entitlement	Private Hospital (Standard Room and below)	Public Hospital (A Class ward and below)	Public Hospital (B1 Class ward and below)
<b>1. Hospitalisation and Surgical Benefits</b> Daily Room and Board Benefit Daily ICU Benefit Community Hospital Benefit <b>Surgical Benefit</b> <i>(includes Organ Transplant Benefit                      and Stem Cell Transplant Benefit)</i> • Surgical Procedures • Surgical Implants and Approved Medical Consumables • Stereotactic Radiosurgery <b>Inpatient Hospice Palliative                      Care Service Benefit</b>	As Charged <sup>12</sup>		
<b>2. Pre-Hospitalisation Benefit</b>	As Charged <sup>12</sup> <i>(within 100 days before                      confinement)</i>  <i>(within 13 months before                      confinement if treated by                      AIA Preferred Providers<sup>1</sup>)</i>	As Charged <sup>12</sup> <i>(within 180 days before                      confinement)</i>	As Charged <sup>12</sup> <i>(within 100 days before                      confinement)</i>
<b>3. Post-Hospitalisation Benefits</b> Post-Hospitalisation Treatment   Extended Post-Hospitalisation Treatment for 30 Critical Illnesses	As Charged <sup>12</sup> <i>(within 100 days after                      confinement)</i>  <i>(within 13 months after                      confinement if treated by                      AIA Preferred Providers<sup>1</sup>)</i>	As Charged <sup>12</sup> <i>(within 180 days after                      confinement)</i>	As Charged <sup>12</sup> <i>(within 100 days after                      confinement)</i>
	As Charged <sup>12</sup> <i>(within 100 days after the expiry of Post-Hospitalisation Treatment<sup>13</sup>)</i>		
<b>4. Accidental Inpatient Dental                      Treatment Benefit</b>	Subject to the respective limits from points (1) to (3)		
<b>5. Pregnancy Complications Benefit<sup>14</sup></b>	As Charged <sup>12</sup>		
<b>6. Congenital Abnormalities Benefits</b> For female Insured's biological child from birth <sup>14</sup>  For the Insured	20,000 per lifetime, limited to 5,000 per child	16,000 per lifetime, limited to 4,000 per child	12,000 per lifetime, limited to 3,000 per child
	Subject to the respective limits from points (1) to (3)		
<b>7. Living Donor Organ Transplant Benefits</b> Insured donating an organ <sup>14</sup>  Non-insured donating an organ to the Insured	60,000 per transplant	40,000 per transplant	20,000 per transplant
<b>8. Medical Treatment Outside Singapore                      Benefits</b> Emergency Medical Treatment Outside Singapore Benefit	Subject to the respective limits for points (1) and (3) <sup>15</sup>		
Planned Medical Treatment Outside Singapore Benefit <sup>16</sup>	Subject to the respective limits for (1) to (3) Pegged to Singapore Private Hospital	Subject to the respective limits for (1) to (3) Pegged to Singapore Public Hospital	N/A
<b>9. Psychiatric Treatment Benefits</b> In-Hospital Psychiatric Treatment	5,000 per policy year	4,000 per policy year	3,500 per policy year
Post-Hospitalisation Psychiatric Treatment <i>(within 200 days after confinement)</i>	5,000 per policy year	2,500 per policy year	1,000 per policy year

Plan Type	A	B		B Lite
Hospital Ward Entitlement	Private Hospital (Standard Room and below)	Public Hospital (A Class ward and below)		Public Hospital (B1 Class ward and below)
<b>10. Outpatient Benefit<sup>17</sup></b>				
<b>Type of Hospital</b>	<b>Private Hospital</b>	<b>Private Hospital</b>	<b>Public Hospital</b>	<b>Public Hospital</b>
Radiotherapy for Cancer	As Charged <sup>12</sup>	500 per treatment session <sup>18</sup>	As Charged <sup>12</sup>	As Charged <sup>12</sup>
Stereotactic Radiotherapy for Cancer		4,000 per treatment session <sup>18</sup>		
Cancer Drug Treatments (CDL) <sup>7</sup>	Up to 5x MediShield (MSHL) limit per month	Up to 5x MSHL limit per month <sup>12</sup>	Up to 5x MSHL limit per month	Up to 5x MSHL limit per month
Cancer Drug Services <sup>8</sup>	Up to 5x MSHL limit per policy year	Up to 5x MSHL limit per policy year <sup>12</sup>	Up to 5x MSHL limit per policy year	Up to 5x MSHL limit per policy year
Renal Dialysis	As Charged <sup>12</sup>	36,000 per policy year <sup>18</sup>	As Charged <sup>12</sup>	As Charged <sup>12</sup>
Erythropoietin		7,200 per policy year <sup>18</sup>		
Approved Immunosuppressants prescribed for Organ Transplant		7,200 per policy year <sup>18</sup>		
Long-Term Parenteral Nutrition		As Charged <sup>12</sup>		
<b>11. Final Expense Benefit<sup>19</sup></b>	5,000 per policy	3,500 per policy		2,500 per policy
<b>12. Waiver of Premium for 1-Year Benefit<sup>19,20</sup></b> <i>(upon Total and Permanent Disability)</i>	Waiver of one year's premium			
<b>13. Extra Cover for 30 Critical Illnesses Benefit</b>	100,000 per policy year <sup>21</sup>	75,000 per policy year	50,000 per policy year	
Maximum Limit per Lifetime	Unlimited			
<b>14. Cell, Tissue, and Gene Therapy</b>	250,000 per policy year			
<b>15. Proton Beam Therapy</b>	100,000 per policy year			
Maximum Limit per Policy Year	1,000,000 2,000,000 <i>(If admitted/treated by AIA Preferred Providers<sup>1</sup>)</i>	1,000,000		300,000
Maximum Limit per Lifetime	Unlimited			
<b>Pro-ration Factor</b>	100%	70% <i>(for inpatient, outpatient, and day surgery / short stay ward charges incurred in private hospitals)</i>		Class B1 ward – 90% (PR) Class A ward – 80% Private Hospital – 50% Private Outpatient Benefit Treatment – 65% Day Surgery in Private Hospital – 65%
<b>Deductible (per policy year)</b> Below age 82 next birthday <sup>22</sup>				
C Class ward	1,500			
B2/B2+ Class ward	2,000			
B1 Class ward	2,500			
A Class ward	3,500			
Private Hospital (All ward types, except Day Surgery and Short Stay Ward)	3,500			
Unsubsidised Day Surgery / Short Stay Ward	2,000			
Subsidised Day Surgery/Short Stay Ward	2,000			
<b>Co-insurance</b>	10%			
<b>Last Entry Age (next birthday)</b>	75			
<b>Maximum Coverage Period</b>	Lifetime			

# Benefits of AIA HealthShield Gold Max Standard Plan

(S\$ and includes GST)

Plan Type	Standard Plan																																													
<b>Hospital Ward Entitlement</b>	<b>Public Hospitals (B1 Class ward and below)</b>																																													
<b>(A) Inpatient/Day Surgery Benefits</b>																																														
<b>(i) Normal Ward Benefit</b>	2,250 per day <sup>^</sup>																																													
<b>(ii) Intensive Care Unit (ICU) Ward Benefit</b>	6,850 per day <sup>^</sup>																																													
<b>(iii) Community Hospital Benefit</b>																																														
• Community Hospital (Rehabilitative care)	760 per day																																													
• Community Hospital (Sub-acute care)	960 per day																																													
<b>(iv) Surgical Benefit</b>																																														
	<table border="1"> <thead> <tr> <th>Surgery</th> <th>Claim Limit</th> </tr> </thead> <tbody> <tr><td>Table 1A</td><td>590</td></tr> <tr><td>Table 1B</td><td>1,050</td></tr> <tr><td>Table 1C</td><td>1,050</td></tr> <tr><td>Table 2A</td><td>1,800</td></tr> <tr><td>Table 2B</td><td>2,300</td></tr> <tr><td>Table 2C</td><td>2,370</td></tr> <tr><td>Table 3A</td><td>3,290</td></tr> <tr><td>Table 3B</td><td>4,240</td></tr> <tr><td>Table 3C</td><td>4,760</td></tr> <tr><td>Table 4A</td><td>5,970</td></tr> <tr><td>Table 4B</td><td>8,220</td></tr> <tr><td>Table 4C</td><td>8,220</td></tr> <tr><td>Table 5A</td><td>8,920</td></tr> <tr><td>Table 5B</td><td>9,750</td></tr> <tr><td>Table 5C</td><td>11,030</td></tr> <tr><td>Table 6A</td><td>15,910</td></tr> <tr><td>Table 6B</td><td>15,910</td></tr> <tr><td>Table 6C</td><td>17,300</td></tr> <tr><td>Table 7A</td><td>21,840</td></tr> <tr><td>Table 7B</td><td>21,840</td></tr> <tr><td>Table 7C</td><td>21,840</td></tr> </tbody> </table>		Surgery	Claim Limit	Table 1A	590	Table 1B	1,050	Table 1C	1,050	Table 2A	1,800	Table 2B	2,300	Table 2C	2,370	Table 3A	3,290	Table 3B	4,240	Table 3C	4,760	Table 4A	5,970	Table 4B	8,220	Table 4C	8,220	Table 5A	8,920	Table 5B	9,750	Table 5C	11,030	Table 6A	15,910	Table 6B	15,910	Table 6C	17,300	Table 7A	21,840	Table 7B	21,840	Table 7C	21,840
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• Surgical Procedures <sup>3</sup>																																														
• Surgical Implants and Approved Medical Consumables	9,800 per admission																																													
• Radiosurgery, including Proton Beam Therapy – Category 4 <sup>23</sup>	31,300 per treatment course																																													
<b>(v) Inpatient Palliative Care Service Benefit</b>																																														
• Inpatient Palliative Care Service (General)	560 per day																																													
• Inpatient Palliative Care Service (Specialised)	760 per day																																													
<b>(vi) Continuation of Autologous Bone Marrow Transplant for Multiple Myeloma</b>	14,040 per treatment																																													
<b>(vii) Serious Pregnancy and Delivery-Related Complications Benefit</b>	Subject to the respective limits from points (i) to (iv)																																													
<b>(viii) Psychiatric Treatment Benefit</b>	680 per day (up to 60 days per policy year)																																													

Plan Type	Standard Plan		
Hospital Ward Entitlement	Public Hospitals (B1 Class ward and below)		
<b>(B) Outpatient Benefits<sup>17</sup></b>			
<b>(i) Cancer Drug Treatments (CDL)<sup>7</sup></b>	Treatment for one primary cancer	Treatment for multiple primary cancers <sup>24, 25</sup>	
	3x MediShield Life (MSHL) limit for one primary cancer per month	Sum of the highest cancer drug treatment limit amongst the claimable treatments received for each primary cancer per month	
<b>(ii) Cancer Drugs Services<sup>8</sup></b>	2x MSHL limit for one primary cancer per policy year	2x MSHL limit for multiple primary cancers per policy year	
<b>(iii) Radiotherapy for cancer:</b>			
(a) External (except Hemi Body)	880 per treatment		
(b) Brachytherapy	1,100 per treatment		
(c) Hemi Body	2,510 per treatment		
(d) Stereotactic	6,210 per treatment		
(e) Proton Beam Therapy: • Category 1 • Category 2 • Category 3	880 per treatment		
	1,100 per treatment		
	6,210 per treatment		
<b>(iv) Kidney Dialysis</b>	3,740 per month		
<b>(v) Erythropoietin</b>	450 per month		
<b>(vi) Immunosuppressants for organ transplant</b>	1,480 per month		
<b>(vii) Long-term Parenteral Nutrition</b>	3,980 per month		
<b>Maximum Claim Limit</b>			
Maximum Limit Per Policy Year	200,000		
Maximum Limit Per Lifetime	Unlimited		
<b>Pro-ration Factor</b>		Singapore Citizen	Singapore Permanent Resident
	C Class ward	Not Applicable	Not Applicable
	B2/B2+ Class ward	Not Applicable	Not Applicable
	B1 Class ward	Not Applicable	90%
	A Class ward	80%	80%
	Private Hospital	50%	50%
	Outpatient Treatment in Public Hospital	Not Applicable	Not Applicable
	Outpatient Treatment in Private Hospital or Private Medical Institution	65%	65%
	Day Surgery in Public Hospital	Not Applicable	Not Applicable
	Day Surgery in Private Hospital or Private Medical Institution	65%	65%
	Subsidised/Unsubsidised Short Stay Ward in Public Hospital	Not Applicable	Not Applicable
<b>Deductible (per policy year)</b>		Below age 81 next birthday <sup>22</sup>	
	C Class ward	1,500	
	B2/B2+ Class ward	2,000	
	B1 Class ward	2,500	
	A Class ward	2,500	
	Private Hospital	2,500	
	Subsidised Day Surgery / Short Stay Ward	1,500	
	Unsubsidised Day Surgery / Short Stay Ward	2,000	
<b>Co-insurance</b>	10%		
<b>Maximum Coverage Period</b>	Lifetime		

<sup>^</sup> The limits are higher by S\$300 for the first two (2) days of inpatient stay.

# Benefits of AIA Max VitalHealth A / A Value (\$\$ and includes GST)

Plan Type	AIA Max VitalHealth A	AIA Max VitalHealth A Value
<b>Private Hospital (Standard Room and below)</b>		
<b>If admitted to and/or treated in private hospitals</b>		
<b>Deductible</b>	<b><u>With Deductible Waiver Pass</u></b>  <b>For the first private hospital claim (including subsequent claims occurring in the same policy year as the first private hospital claim) or when there is no private hospital claim (admission or day surgery) in the last 3 consecutive policy years:</b>  Covers: (a) the Deductible and Co-insurance as incurred under AIA HealthShield Gold Max, and/or (b) the Co-insurance incurred under AIA Max A Cancer Care Booster's (i) Cancer Drug Treatment on CDL and (ii) Cancer Drug Services, subject to 5% co-payment.	Covers: (a) the Co-insurance incurred under AIA HealthShield Gold Max, and/or (b) the Co-insurance incurred under AIA Max A Cancer Care Booster's (i) Cancer Drug Treatment on CDL and (ii) Cancer Drug Services, subject to 10% co-payment.  The 10% co-payment per claim on the eligible medical bill will be capped at 6,000 per policy year if treatment is by AIA Preferred Providers <sup>1</sup> / non-AIA Preferred Providers with pre-authorisation / for Emergency Confinement.
	<b><u>Without Deductible Waiver Pass</u></b>  <b>Other than the above:</b>  Covers: (a) the Deductible in excess of 2,000 and Co-insurance incurred under AIA HealthShield Gold Max, and/or (b) the Co-insurance incurred under AIA Max A Cancer Care Booster's (i) Cancer Drug Treatment on CDL and (ii) Cancer Drug Services, subject to 5% co-payment.  The 5% co-payment per claim on the eligible medical bill will be capped at 3,000 per policy year if the admission / treatment is by AIA Preferred Providers <sup>1</sup> / non-AIA Preferred Providers with pre-authorisation / for Emergency Confinement.	
<b>Co-insurance</b>		
<b>If admitted to and/or treated in public hospitals</b>		
<b>Deductible</b>	Covers: (a) the Deductible and Co-insurance incurred under AIA HealthShield Gold Max, and/or (b) the Co-insurance incurred under AIA Max A Cancer Care Booster's (i) Cancer Drug Treatment on CDL and (ii) Cancer Drug Services, subject to 5% co-payment per claim, cap at 3,000 per policy year.	
<b>Co-insurance</b>		
<b>Extended Benefits</b>		
<b>Immediate Family Member Accommodation Benefit<sup>6</sup></b> <i>(upon physician's or specialist's advice in writing)</i>	Standard charges for an additional bed	Standard charges incurred for an additional bed up to 70 per day
<b>Post-Hospitalisation Alternative Medicine Benefit for Cancer and Stroke<sup>6</sup></b> <i>(within 100 days after confinement)</i>	5,000 per policy year	3,000 per policy year
<b>Post-Hospitalisation Home Nursing Benefit<sup>6</sup></b> <i>(within 26 weeks after confinement)</i>	500 per day (5,000 per policy year)	300 per day (3,000 per policy year)
<b>Home Palliative Benefit</b> <i>[(Service is carried out by our appointed providers* and the claim must be accompanied by an oncologist's referral) for Terminal Cancer]</i>	15,000 per month (45,000 per lifetime)	15,000 per month (45,000 per lifetime)
<b>Early Detection Screening Benefit<sup>4</sup></b>	Colonoscopy for age 50 and above <i>(once every 10 years)</i> Mammogram for women aged 40 - 69 <i>(once every 2 years)</i>	N/A
<b>Personal Medical Case Management (Teladoc)</b>	Yes	

Plan Type	AIA Max VitalHealth A	AIA Max VitalHealth A Value
<b>Private Hospital (Standard Room and below)</b>		
<b>Optional: Emergency and Outpatient Care Booster</b>		
<b>Emergency Outpatient Treatment due to Accident Benefit</b>	2,000 per policy year <i>(less 5% of the charges incurred per claim)</i>	
<b>Post A&amp;E Treatment</b> <i>(within 30 days from Emergency Outpatient Treatment due to Accident)</i>		
<b>Ambulance Service Benefit<sup>6,26</sup></b> <i>(due to an emergency condition)</i>	250 per confinement / per emergency outpatient treatment	
<b>Outpatient Treatment for Hand, Foot, and Mouth Disease (HFMD) &amp; Dengue Fever</b>	300 per policy year <i>(less 5% of the charges incurred per claim)</i>	
<b>Emergency Medical Evacuation &amp; Repatriation<sup>6</sup></b>	50,000 per policy year <i>(less 5% of the charges incurred per claim)</i>	
<b>Emergency International Medical Assistance</b>	Call (65) 6338 6200 for assistance	

\* As listed in our website: [www.aia.com.sg/qualityhealthcare-faq](http://www.aia.com.sg/qualityhealthcare-faq)

## Benefits of AIA Max A Cancer Care Booster (S\$ and includes GST)

Hospital Ward Entitlement	Standard Room in Private Hospital and below
<b>Outpatient Cancer Care Benefits:</b>	
<b>(i) Cancer Drug Treatments (CDL)</b>	16x MediShield Life limit per month <sup>7</sup> on top of the limit provided under AIA HealthShield Gold Max Series (Less 10% Co-insurance for every claim)
<b>(ii) Cancer Drug Services</b>	10x MediShield Life limit per policy year <sup>8</sup> on top of the limit provided under AIA HealthShield Gold Max Series (Less 10% Co-insurance for every claim)
<b>(iii) Cancer Drug Treatments (non-CDL)<sup>9</sup></b>	200,000 per policy year (Less 10% Co-insurance for every claim)
<b>Co-insurance Cap Benefit</b>	Reimburses the Co-insurance incurred under AIA HealthShield Gold Max Series policy; and/or AIA Max A Cancer Care Booster's (i) Cancer Drug Treatments (CDL) and (ii) Cancer Drug Services, after you have paid the Co-insurance of 50,000 per policy year, provided: <ul style="list-style-type: none"> <li>(a) if such expenses are incurred for treatments by AIA Preferred Providers<sup>1</sup>; or</li> <li>(b) if Certificate of Pre-authorisation is obtained prior to the Confinement; or</li> <li>(c) for Emergency Confinement that is referred by an Accident &amp; Emergency Unit in Singapore.</li> </ul>

# Benefits of AIA Max VitalHealth B / B Lite (SS and includes GST)

Plan Type	B	B Lite
<b>Hospital Ward Entitlement</b>	<b>Public Hospital (A Class ward and below)</b>	<b>Public Hospital (B1 Class ward and below)</b>
<b>If admitted to and/or treated by AIA Preferred Providers<sup>1</sup></b>		
<b>Deductible</b>	Covers: (a) the Deductible and Co-insurance as incurred under AIA HealthShield Gold Max, and/or (b) the Co-insurance incurred under (i) Cancer Drug Treatment on CDL and (ii) Cancer Drug Services, subject to 5% co-payment per claim on the eligible medical bill, cap at 3,000 per policy year.	
<b>Co-insurance</b>		
<b>If admitted to and/or treated by non-AIA Preferred Providers</b>		
<b>Deductible</b>	Covers: (a) the Deductible and Co-insurance as incurred under AIA HealthShield Gold Max, and/or (b) the Co-insurance incurred under (i) Cancer Drug Treatment on CDL and (ii) Cancer Drug Services, subject to 5% co-payment per claim on eligible medical bill. The 5% co-payment per claim on eligible medical bills will be capped at 3,000 per policy year if the treatment is pre-authorised by us or for Emergency Confinement.	
<b>Co-insurance</b>		
<b>Extended Benefits</b>		
<b>Immediate Family Member Accommodation Benefit<sup>6</sup></b> <i>(Upon physician's or specialist's advice in writing)</i>	Standard charges for an additional bed <i>(up to 70 per day)</i>	Standard charges for an additional bed <i>(up to 50 per day)</i>
<b>Post-Hospitalisation Alternative Medicine Benefit<sup>6</sup></b> <i>[for Cancer and Stroke (within 100 days after confinement)]</i>	3,000 per policy year	1,000 per policy year
<b>Post-Hospitalisation Home Nursing Benefit<sup>6</sup></b> <i>(within 26 weeks after confinement)</i>	300 per day 3,000 per policy year	200 per day 2,000 per policy year
<b>Emergency Outpatient Treatment due to Accident Benefit</b>	1,000 per policy year <i>(less 5% of the charges incurred per claim)</i>	800 per policy year <i>(less 5% of the charges incurred per claim)</i>
<b>Ambulance Service Benefit<sup>6,26</sup></b> <i>(due to an emergency condition)</i>	150 per confinement / per emergency outpatient treatment	100 per confinement / per emergency outpatient treatment
<b>Personal Medical Case Management (Teladoc)</b>	Yes	N/A
<b>Outpatient Cancer Cover Benefits</b>		
<b>(i) Cancer Drug Treatments (CDL)<sup>27</sup></b>	10x MediShield Life limit per month <sup>7</sup> on top of the limit provided under AIA HealthShield Gold Max Series (Less 10% Co-insurance for every claim)	
<b>(ii) Cancer Drug Services<sup>27</sup></b>	8x MediShield Life limit per policy year <sup>8</sup> on top of the limit provided under AIA HealthShield Gold Max Series (Less 10% Co-insurance for every claim)	
<b>(iii) Cancer Drug Treatments (non-CDL)<sup>9</sup></b>	50,000 per policy year <sup>10</sup> (Less 10% Co-insurance for every claim)	



## Terms and Conditions:

There are certain conditions such as pre-existing conditions, whereby no benefits will be payable. You are advised to read the policy contracts for the full list of exclusions. Some of these exclusions may be covered under MediShield Life.

- <sup>1</sup> AIA Preferred Providers refer to all public hospitals and our AIA Quality Healthcare Partner private specialists in Singapore which may be introduced or amended by us from time to time at our discretion.
- <sup>2</sup> Subject to policy year limit and any overall benefit limits.
- <sup>3</sup> Refers to the types of surgical operations listed in the “Table of Surgical Procedures” under the MediSave Scheme operated by the Ministry of Health of Singapore excluding all surgical operations stated in the General Exclusions and any other surgical operations that are not specified in the “Table of Surgical Procedures”. The costs of any surgical implants, approved medical consumables, and/or stereotactic radiosurgery procedures are not included in this portion of the benefit.
- <sup>4</sup> AIA Max VitalHealth A must be in-force for a minimum of 2 years. The types of screening may be revised from time to time. Terms and conditions apply.
- <sup>5</sup> Refer to the respective AIA Max VitalHealth benefit tables for information.
- <sup>6</sup> These benefits are not payable if the Insured is diagnosed and hospitalised due to a psychiatric condition.
- <sup>7</sup> Refer to the Cancer Drug List on the Ministry of Health of Singapore’s website for the limits under applicable claim limit.
- <sup>8</sup> Refer to MediShield Life’s Cancer Drug Services limit on the Ministry of Health of Singapore’s website.
- <sup>9</sup> Refer to Scope of Non-CDL coverage for drugs under Classes A, B, C, D1 to D3 and E1 to E3. For details on each Class, please refer to the Life Insurance Association’s website – <https://www.lia.org.sg/media/3553/non-cdl-classification-framework.pdf>
- <sup>10</sup> Any charges payable will first be reduced by multiplying such charges with the pro-ration factor (if any) under the respective plan type of the AIA HealthShield Gold Max it is attached to.
- <sup>11</sup> Premium discount is only applicable to premiums based on a standard life. It is not applicable to any extra premiums due to loading. Discount applicable from the second policy year onwards will depend on the AIA Vitality status attained. The discount is capped at 15%.
- <sup>12</sup> We shall pay the eligible expenses incurred, subject to any pro-ration factor, deductible and/ or co-insurance, any other benefit limits as stated in the benefit table and the terms and conditions of the policy contract.
- <sup>13</sup> For AIA HealthShield Gold Max A, this benefit is not payable if you have made a post-hospitalisation treatment claim for a period of 200 or more days.

- <sup>14</sup> Waiting period applies for the following benefits. It starts from the policy date, the last reinstatement date or the start date of plan upgrade, whichever is the latest.
- 10 months waiting period for Pregnancy Complications Benefit. Please refer to the product summary for the full list of 28 pregnancy complications covered.
  - 10 months waiting period for Congenital Abnormalities Benefit. Eligible expenses incurred during the first 24 months from date of birth of the child will be reimbursed.
  - 24 months waiting period for Living Donor Organ Transplant Benefit. The date the recipient of the organ is first diagnosed with organ failure must be after the waiting period.
- <sup>15</sup> Provided the post-hospitalisation treatment and tests are done in Singapore and within such period as stated in the benefit table.
- <sup>16</sup> The overseas hospital must have an approved working arrangement with the MediSave-accredited institution/referral centre in Singapore. Covers pre- and post-hospitalisation treatments and tests done in Singapore and within such period as stated in the benefit table.
- <sup>17</sup> Eligible expenses incurred under the outpatient benefit are not subject to the deductible but are subject to co-insurance.
- <sup>18</sup> If the eligible expenses incurred in a private hospital or any other private medical institution exceeds the benefit limits for each outpatient treatment, the excess amount will be subject to the pro-ration factor.
- <sup>19</sup> The final expense benefit and waiver of premium for 1-year benefit (upon Total and Permanent Disability) are not subject to deductible and co-insurance.
- <sup>20</sup> The benefit expires on the policy anniversary occurring on or after the Insured's 70th birthday. Please refer to the policy contract for the definition of Total and Permanent Disability.
- <sup>21</sup> For AIA HealthShield Gold Max A, this benefit is included in the maximum limit per policy year of S\$2 million.
- <sup>22</sup> For ages 81 or 82 and above next birthday, please refer to the product summary.
- <sup>23</sup> Refers to the gamma knife treatment or the Novalis shaped beam treatment of neurosurgical or neurological disorders, or proton beam therapy (Category 4) as approved and listed on the Ministry of Health of Singapore's website (<https://go.gov.sg/pbt-approved-indications>).
- <sup>24</sup> Please refer to the policy contract for the definition of multiple primary cancers.
- <sup>25</sup> The claim limits for multiple primary cancers are accorded on an application basis. Doctors are to submit the application form to Ministry of Health of Singapore and AIA for assessment of claim limits under MediShield Life and AIA HealthShield Gold Max Standard Plan claims respectively.
- <sup>26</sup> This benefit is payable only when incurred within 24 hours from the occurrence of an emergency condition arising from an illness / accidental injury that requires confinement, or an accidental injury that requires emergency outpatient treatment.
- <sup>27</sup> The limit is in addition to the limit under the AIA HealthShield Gold Max, excluding the amount not payable under the AIA HealthShield Gold Max due to the pro-ration factor, if any.

## **Important Notes:**

Teladoc Health's Personal Case Management service is not a contractual benefit. Teladoc Health is an independent third-party company. AIA Singapore Private Limited ("AIA") shall not be responsible or liable for any medical service, product, and solicitation effort provided by Teladoc Health, which is not sold or marketed by AIA. All Teladoc Health related statistics and service information stated have been verified by Teladoc Health only. Eligibility for the service is subject to evaluation by AIA and Teladoc Health and the services provided are subject to the terms and conditions of Teladoc Health. Please contact Teladoc Health for full details of the scope of the service.

These insurance plans are underwritten by AIA Singapore Private Limited (Reg. No. 201106386R) ("AIA"). All insurance applications are subject to AIA's underwriting and acceptance. This brochure is not a contract of insurance. The precise terms and conditions of these plans, including exclusions whereby the benefits under these plans may not be paid out, are specified in the relevant policy contracts. You are advised to read the relevant policy contracts.

Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs. You are discouraged from switching from an existing accident and/or health insurance policy to a new one without considering whether the switch is detrimental, as there may be potential disadvantages with switching. A penalty may be imposed for early policy termination and the new policy may cost more or have fewer benefits at the same cost. You are recommended to read the product summary and seek advice from a qualified AIA Financial Services Consultant for a financial analysis before purchasing a policy suitable to meet your needs.

AIA HealthShield Gold Max is a MediSave-approved Integrated Shield Plan that comprises MediShield Life administered by the Central Provident Fund Board and an additional private insurance coverage portion administered by AIA. When making a claim, the higher of the benefits computed under both plans will be paid. Please note that you can use your CPF MediSave account to purchase only one MediSave-approved medical insurance scheme per Insured at any one time.

Protected up to specified limits by SDIC. This advertisement has not been reviewed by the Monetary Authority of Singapore. The information is correct as at 1 April 2024.

**AIA Singapore Private Limited**  
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