

AIA PROTECTPLUS COVER 2026
POLICY SCHEDULE AND POLICY CONTRACT

POLICY SCHEDULE

Group Policyholder : Citibank Singapore Limited ("Citibank")

Group Policy Number : 87405

Effective Date of Coverage : Coverage will begin for customer on the date stipulated in the enrolment confirmation email from AIA

Expiry Date of Coverage : 31 January 2027

Table of Benefits

Benefits	Amount Covered (S\$)
1. Hospitalisation Income for Hospitalisation due to Accident	100
2. Outpatient Medical Reimbursement (for treatment of injuries caused by Accident)	Up to 30 per visit, capped at 2 visits
3. Accidental Death Benefit	5,000

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POLICY TERMS AND CONDITIONS

DEFINITIONS

- Accident** shall mean an unforeseen event, which is caused solely and directly by external, violent, sudden accidental means.
- Amount Covered** refers to the insured amount for the Benefit specified in the Table of Benefits in the Policy Schedule.
- Applicant** or **Insured Person** refers to the person covered under the Policy, as described under the Eligibility section.
- Benefits** refer to the benefits set out in the BENEFITS PROVISIONS and any subsequent endorsements where applicable and **Benefit** is construed accordingly.
- Hospital** shall refer exclusively to an institution duly licensed as such and operated pursuant to law for the care and treatment of sick and injured persons as registered bed patients, with facilities for diagnosis and major surgery, which is under the supervision of one or more Registered Medical Practitioners, and which has 24 hours a day professional nursing service. "Hospital" does not include any institution or that portion of any institution which is operated as a convalescent or nursing home, rest home, home for the aged, a place for alcoholics or drug addicts, or for any similar purpose.
- Hospital Confinement or Confined** refers to a continuous period of hospitalisation for at least twenty-four (24) hours, due to Injury, as an in-patient in a Hospital as recommended by a Registered Medical Practitioner and for which room and board charges are imposed (excluding day surgery).
- Injury** shall mean bodily injury which is sustained by an Insured Person during the Period of Insurance and is caused by an Accident solely and independently of any other causes, within 90 days from the date of such Accident.
- Medical Expenses** means expenses incurred within coverage period of sustaining Injury and paid by the Insured Person to a Registered Medical Practitioner, Specialist, Hospital and/or ambulance service for medical, surgical, x-ray, hospital or nursing treatment including the cost of medical supplies and

ambulance hire and including the cost of dental treatment done at Hospital where such treatment is necessarily incurred to restore sound and natural teeth and is caused by an Accident.

9. **Medically Necessary** shall mean a medical treatment, services and/or supply provided by a Registered Medical Practitioner and/or Specialist covered under this Policy which are:
- (i) consistent with the diagnosis and customary medical treatment, service and/or supply for Injury;
 - (ii) in accordance with standards of good medical practice; consistent with the current standard of professional medical care and with proven medical benefits;
 - (iii) not for the convenience of the insured, Registered Medical Practitioner or the Specialist, and unable to be reasonably rendered out of Hospital (if admitted for confinement); and
 - (iv) not of an experimental, investigational or research nature, preventing or screening nature.
10. **Period of Insurance** refers to the period during which the coverage under this Policy is effective, as stated in the Policy Schedule or endorsement (if any).
11. **Policy** refers to:
- a. this document including the Policy Schedule;
 - b. the application for this Policy;
 - c. declarations of this Policy; and
 - d. the endorsements (if any).
12. **Pre-existing Condition** shall mean any condition for which a Registered Medical Practitioner was consulted, for which treatment or medication was prescribed, or for which manifestations of symptoms would have caused a prudent person to seek medical advice at any time prior to the Effective Date of Coverage.
13. **Prohibited Person** refers to a person or entity (including any director or any direct or indirect shareholder of, or any person having executive authority in such entity) subject to any laws, regulations and/or sanctions administered by any regulatory authorities in any country, which has the effect of prohibiting AIA from providing insurance coverage, transacting business with or otherwise offering any economic benefits to such person or entity under the Policy.
14. **Registered Medical Practitioner** shall mean only a person qualified by degree in western medicine and legally authorized in the geographical area of his practice to render medical or surgical services, and who is not (i) the Insured Person, or (ii) a member of his immediate family, or (iii) other relative of the Insured Person.
15. **Sickness** shall mean a physical condition marked by a pathological deviation from the normal healthy state.
16. **Singapore Resident**
- (i) is a citizen of Singapore, unless he has resided outside Singapore continuously for 5 or more years preceding the application date of the policy and is not currently residing in Singapore; or
 - (ii) is a permanent resident, unless he has resided in Singapore for less than a total of 183 days in the 12 months preceding the application date of the policy; or
 - (iii) has a work pass or permit required under the Employment of Foreign Manpower Act 1990, unless he has resided in Singapore for less than a total of 183 days in the 12 months preceding the application date of the policy; or
 - (iv) has a pass or permit required under the Immigration Act 1959 that has a duration longer than 90 days and has resided in Singapore continuously for at least 90 days in the 12 months preceding the application date of the policy.
17. **We, us or our** refers to AIA Singapore Private Limited, its assigns and successors in title.
18. **You or your** refers to the Applicant or Insured Person.

Where the **context** requires, the masculine form shall apply to the feminine and the singular term shall include the plural and vice versa.

Any examples set out in the Policy are purely for illustrative purposes only and shall not affect the

construction and interpretation of the Policy.

ELIGIBILITY AND TERMINATION

Section A: Eligibility

To be eligible for cover under this Policy, an Insured Person must:

(A) at the time of the Effective Date of Coverage:

- (i) be a Singapore Resident and hold a valid NRIC/ FIN; and
- (ii) be aged between 21 years old and 65 years old (age last birthday); and
- (iii) not be an individual residing in certain countries/jurisdictions. For the comprehensive list of these countries/jurisdictions, please refer to the Privacy Disclosure Statement Clause under the "Privacy at Citi" tab of the Privacy page located at the footer of the Citibank Singapore Limited website; and
- (iv) not be a citizen of a sanctioned country, and is not a Prohibited Person;

and

(B) at the time of Policy application:

- (i) hold at least one valid (i.e. not suspended, cancelled and/ or terminated) primary credit card issued by Citibank in Singapore (excluding corporate credit cards and S\$500 clear cards).

For clarity, the above criteria do not affect the operation of the provisions of **General Provisions Section D. No Cover** below.

Section B: Termination

The Policy shall automatically terminate on the earliest occurrence of the following:

- (i) The Expiry Date of Coverage as specified in the Policy Schedule; or
- (ii) Upon the admission of a claim for payment of Amount Covered for the Accidental Death Benefit; or
- (iii) When the Insured Person(s) ceases to be eligible under the Eligibility Section; or
- (iv) The date on which the Policy is terminated; or
- (v) The date communicated to the Policyholder and the Insured Person by us as the date the Policy ceases on account of war, or an act of war, such date being determined at our discretion.

BENEFIT PROVISIONS AND EXCLUSIONS

Section A - BENEFITS

1. Hospitalisation Income for Hospitalisation due to Accident

We shall pay the relevant benefit amount specified in the Table of Benefits if you have undergone Hospital Confinement in Singapore as a result of an Injury.

This benefit shall only be payable once per Insured Person regardless of the number of occurrences.

2. Outpatient Medical Reimbursement (for treatment of injuries caused by Accident)

We shall pay up to the Amount Covered for the relevant benefit amount as specified in the Table of Benefits for Medical Expenses incurred in Singapore for treatment provided as a result of an Injury.

Notwithstanding any provision to the contrary under this Policy, this benefit shall not apply if the Insured Person is not a Singapore Resident on the date of the Accident, or the Medical Expenses are incurred outside Singapore.

3. Accidental Death Benefit

We shall pay the Amount Covered if the Insured Person dies in Singapore as a result of an Injury occurring during the Period of Insurance.

We will pay the Accidental Death Benefit only once per Insured Person.

Policy Extensions

Coverage for the respective benefits described above shall extend to the following while this Policy is in force and subject to the terms and conditions of the respective benefits and this Policy:

1. Food Poisoning

We will cover death or Injury of the Insured Person resulting from food poisoning that was an Accident, provided that the food poisoning was not caused or contributed to by the Insured Person's wilful and/or intentional act or omission.

Section B - GENERAL EXCLUSIONS

We shall not pay under this Policy for loss or liability directly or indirectly arising as a result of:

- (i) Death due to any cause other than Injury;
- (ii) General physical or medical check-up or health screening or tests not incidental to treatment or diagnosis of an actual Sickness or Injury; treatment which is not Medically Necessary or treatment of an optional nature or for preventive purposes, even if recommended by the attending doctor;
- (iii) Self-destruction or any attempt thereof, while sane or insane;
- (iv) War, declared or undeclared, revolution or any warlike operations;
- (v) Participation in a riot, violation or attempted violation of the law or resistance to arrest;
- (vi) Travelling or flying in, ascending or descending from any aerial device or aircraft, unless the Insured Person is travelling as a fare-paying passenger in a duly licensed commercial aircraft and the said aircraft was not engaged in any rescue, instructional or training purposes during such flights; or

(vii) Racing on horse or wheels;

(viii) Any Pre-Existing Condition.

CLAIMS PAYMENT AND PROCEDURES

We must be notified through the submission of a completed claim form and other proof of loss documents as may be determined by us to our satisfaction. Such claim submission and proof of loss must be filed with us within 90 days after the date of such loss and there must be sufficient particulars to enable us to identify the Insured Person, the occurrence, nature and extent of the loss.

The occurrence of a covered event must be proven to our satisfaction; all medical reports, information and evidence required shall be furnished at your expense.

Benefits for the loss of life of the Insured Person are payable to the estate of the Insured Person. All other benefits of this Policy are payable to the Insured Person.

GENERAL PROVISIONS

Section A: Applicant

Insured Person, as the Applicant, can exercise all the rights, privileges and options under the Policy during the Period of Insurance. This would be subject, where applicable, to the rights of any assignee or trustee.

Section B: Assignment

Neither the benefits nor this Policy may be assigned, pledged or used as security by you in any transaction.

Section C: Modifications

The Policy's provisions cannot be changed or varied by any of our employees, independent contractors or agents unless such change is contained in an endorsement signed by our duly authorised officer.

The clauses in the Policy are subject to the provisions of the Insurance Act 1966 and other relevant laws, including subsequent changes or replacements of such provisions from time to time. In response to regulatory requirements or changes beyond our control required by law, we may amend the terms and conditions of the Policy by informing you of the relevant changes and such changes will become effective from a date specified.

Section D: No Cover

Notwithstanding anything to the contrary, this Policy shall not cover or provide for the payment of claims or benefits to specific persons or entities where the application of or compliance with certain laws and regulations (as may be applicable to us, our parent companies and/or our ultimate controlling entities, our reinsurers, their parent company and/or ultimate controlling entity) prohibit performance under the Policy based on:

- (i) the identity, domicile, residence, place of incorporation, establishment (whether incorporated or unincorporated), or citizenship, of you, or claimant or the parent company and ultimate controlling entity of you, or claimant; or
- (ii) the country where the claim arises.

Should any person or entity be found to have been erroneously enrolled under this Policy, insurance coverage for such person or entity shall cease with immediate effect and any unearned premiums paid in respect of such person or entity shall, subject to compliance with laws and regulations, be refunded without interest to you. Should any claim for payment of any nature be found to have been made under this Policy by a person or entity excluded by this provision, no such payment will be made.

Section E: Currency

The amounts to be paid by us shall be in the currency shown on the Policy Schedule.

Section F: Cancellation

We have the right to cancel this Policy at any time in the event that we decide, at our sole discretion, to cancel:

- (i) the entire portfolio of this insurance;
- (ii) a particular plan type of this insurance; and/or
- (iii) this insurance for a particular group of insured persons

by giving 30 days' notice in writing to Insured Persons at their last known address.

Section G: Proper Discharge

Payment made in accordance with this Section shall release us of all liabilities under this Policy.

We will make payment under the Policy to such person who can give us proper discharge to our satisfaction and subject to our discretion. These persons may include:

- (a) the Insured Person; or
- (b) the estate of the Insured Person.

Section H: No Nomination

The Insured Person is not allowed to nominate any person as a beneficiary of any benefit under the Insurance Act 1966, Singapore.

Section I: Burden of Proof

In any action, suit or proceeding where we allege that any loss is not covered by the Policy due to any applicable exclusion, the burden of proving that such loss is covered by the Policy shall be upon you, or such other claimant.

Section J: Applicable Law

This Policy, and all rights, obligations and liabilities arising hereunder, shall be construed and determined and may be enforced in accordance with the law of Singapore.

Section K: Legal Proceedings

No action in law or in equity shall be brought to recover on this Policy prior to the expiration of 60 days after proof of claim has been filed in accordance with the requirements of this Policy, nor shall such action be brought at all unless brought within two (2) years from the expiration of time within which such proof of claim is required by the Policy, unless we agree to otherwise in writing.

Section L: Policy Non-Participating

This Policy shall not participate in any surplus distribution by us.

Section M: Policy Owners' Protection Scheme

This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA/LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Section N: Contracts (Rights of Third Parties) Act 2001

Save and except where contrary to Singapore law governing any of the benefits granted under this Policy, or where expressly provided otherwise, a person who is not a party to this Policy has no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any term of this Policy.

Notwithstanding anything in this Policy, the consent of any third party (including the Insured Person) is not required for any variation (including any release or compromise of any liability) or termination of this Policy.

Section O: Personal Data

You agree to the terms and conditions with regard to your personal data and information contained in your application.

Section P: Subcontractors and Delegates

Notwithstanding any other agreement to the contrary, we may in our sole and absolute discretion subcontract or delegate any of our services in the administration of the Policy or the performance of its other obligations under this Policy to a third party appointed by us at our own cost and expense, subject that we will remain responsible and liable to Insured Persons for the work and activities of each subcontractor or delegated person for our obligations under this Policy.

Date : 1 October 2026



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Registrar

A black ink signature, likely of the Chief Executive Officer, consisting of a stylized 'J' and 'H'.

Chief Executive Officer

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