

AIA Singapore Pte Ltd – AIA Your Happiness Cover

POLICY SCHEDULE AND POLICY CONTRACT

POLICY SCHEDULE

Group Policy Number : 79518
Effective Date of Coverage : Date of Application
Expiry Date of Coverage : 31 January 2022

Table of Benefits	Amount Covered (SGD)
1. Basic Health Screening <i>(Limited to first 1,000 redemptions by Insured Persons under the plan)</i>	Cost of 1 screening per person
2. Teleconsultation Benefit - Consultation only (Excluding medication & delivery costs of medication)	As Charged, up to 3 visits
3. Post-health Screening Report Teleconsultation Review - Consultation only (Excluding medication & delivery costs of medication)	As Charged, up to 1 visit
4. 15-min Teleconsultation with a Certified Psychologist for Mental Wellness <i>(Limited to first 1,000 redemptions by Insured Persons under the plan)</i>	As Charged, up to 1 visit
Overall maximum number of visits for benefit 2, 3 and 4 for each Insured Person	3 visits

POLICY TERMS AND CONDITIONS

DEFINITIONS

- 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 BENEFIT PROVISIONS and any subsequent endorsements where applicable and **Benefit** is construed accordingly.
- Diagnosis or Diagnosed** refers to the definitive diagnosis made by a Registered Medical Practitioner or appropriate Specialist Physician, based upon specific evidence of the particular condition concerned or in the absence of such specific evidence, based upon radiological, clinical, histological or laboratory evidence acceptable to us. Such diagnosis must be supported by our medical director who may base his opinion on the medical evidence submitted by, the Insured and/or any additional evidence that he may require.
- 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:
 - consistent with the diagnosis and customary medical treatment, service and/or supply for Sickness or Injury;
 - in accordance with standards of good medical practice; consistent with the current standard of professional medical care and with proven medical benefits;
 - 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
 - not of an experimental, investigational or research nature, preventing or screening nature.
- 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).
- Policy** refers to the application, your declarations, these terms and conditions and the Policy Schedule.
- Policy Date** refers to the date stated in the Policy Schedule or endorsement (whichever is later) and refers to the date when coverage under this Policy takes effect. The date from which policy years, policy months, policy anniversaries and Premium Due Dates are determined shall be derived from the date stated in the Policy Schedule.

9. **Policy Schedule** refers to the document which sets out the relevant information concerning the details of the benefits and coverage under this Policy.
10. **Registered Medical Practitioner** refers to a person qualified by degree in western medicine who has full registration with the Singapore Medical Council to render medical or surgical services, and who is not the Applicant, a member of his immediate family or other relative.
11. **Sickness** refers to a physical condition marked by a pathological deviation from the normal healthy state.
12. **Singapore Resident**
- (a) is a citizen of Singapore, unless he has resided outside Singapore continuously for 5 or more years preceding the purchase date of the Policy and is not currently residing in Singapore; or
 - (b) is a permanent resident, unless he has resided in Singapore for less than a total of 183 days in the 12 months preceding the purchase date of the Policy; or
 - (c) has a work pass or permit required under the Employment of Foreign Manpower Act (Cap. 91A), unless he has resided in Singapore for less than a total of 183 days in the 12 months preceding the commencement of coverage; or (iv) has a pass or permit required under the Immigration Act (Cap. 133) 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 commencement of coverage under the Policy.
13. **Specialist** refers to a Registered Medical Practitioner who possesses a specialist qualification and accredited by the Specialists Accreditation Board established under the Medical Registration Act, chapter 174, Singapore, who is also registered under the relevant specialty by the Singapore Medical Council.
14. **We, us or our** refers to AIA Singapore Private Limited (Reg. No.201106386R).
15. **You or your** refers to the Applicant.

Where the context requires, unless specified otherwise, words importing the singular shall include the plural and vice versa; and words importing a specific gender shall include all other genders.

ELIGIBILITY

To be eligible for cover under this Policy, an Insured Person at the time of the Effective Date of Coverage:

- (i) must be a Singapore Resident; and
- (ii) must be aged between 18 to 65 years old (age last birthday).

BENEFITS PROVISIONS

1. Basic Health Screening

We shall pay the Amount Covered if the Insured Person undergoes the basic health screening with our appointed telemedicine provider within the Period of Insurance.

This is applicable to the first 1,000 insured persons who have successfully registered for this benefit and received the confirmation email from our appointed telemedicine provider.

2. Teleconsultation Benefit

We shall pay the Amount Covered if the Insured Person undergoes teleconsultation for medical treatment or a prescription directly with our appointed telemedicine provider within the Period of Insurance.

3. Post-health Screening Report Teleconsultation Review

We shall pay the Amount Covered if the Insured Person undergoes teleconsultation for the post-health screening report review with our appointed telemedicine provider within the Period of Insurance.

The utilisation of this benefit will constitute 1 visit under the Teleconsultation Benefit.

4. 15-min Teleconsultation with a Certified Psychologist for Mental Wellness

We shall pay the Amount Covered for the first 15 mins if the Insured Person undergoes a teleconsultation with a certified psychologist at our appointed telemedicine provider within the Period of Insurance.

The utilisation of this benefit will constitute 1 visit under the Teleconsultation Benefit.

This is limited to 1 session per Insured Person and only applicable to the first 1,000 Insured Persons who have utilised this benefit within the Period of Insurance.

BENEFITS EXCLUSIONS

No benefit shall be payable under this Policy for any one of the following occurrences:

- (a) 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 or preventive nature; immunization, vaccination or inoculation; non-prescribed medication, over the-counter items such as but not limited to vitamins, supplements, shampoos and moisturizers even if recommended by the attending doctor.
- (b) Care and treatment performed by a Specialist.
- (c) Specialised investigations such as but not limited to MRI, CT Scan, Barium Test.
- (d) Any expenses incurred in relation to any type of therapy including but not limited to physiotherapy or dialysis.
- (e) Treatment of injuries sustained as a result of a criminal act of the insured.
- (f) Treatment relating to birth control; investigation or treatment occasioned by or resulting from pregnancy, infertility, childbirth, abortion, except ectopic pregnancy and non-elective miscarriage.
- (g) Treatment of xanthelasma, skin tags, vitiligo, acne, alopecia, weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition otherwise admissible under the Policy.
- (h) Cosmetic procedure or plastic surgery except to the extent that such surgery is necessary for the repair or damage caused solely by accidental bodily injuries covered under the Policy.
- (i) Any investigation or treatment for congenital anomalies or complications arising from such congenital anomalies, or physical defects present at and existing from the time of birth regardless of the time or discovery or the time of such treatment or surgical treatment.
- (j) Acquired Immuno-Deficiency Syndrome (AIDS), AIDS related complexes and all illnesses or diseases associated with the Human Immuno-Deficiency Virus (HIV), unless acquired due to Medically Necessary blood transfusions or occupational related infections (where proof of which must be made available to the Company.)
- (k) Any eye examination or treatment for the correction of eye refraction; procurement of contact lenses and eyeglasses. Procurement and rental of/or use of special braces, any appliances, any equipment or prosthetic devices, wheelchair, walking aids, hearing aids or the fitting of the same.
- (l) Any expenses, including investigations, incurred in relation to Sickness and Injury during or in the course of employment which constitutes a valid claim under the Work Injury Compensation Act.
- (m) Any surcharge incurred due to teleconsultation visits outside the normal operating hours of the clinic.
- (n) Medications purchased and delivery cost for medications.

TERMINATION PROVISIONS

The cover of an Insured Person shall automatically terminate on the earliest occurrence of the following:

- (a) The Expiry Date of Coverage as specified in the Policy Schedule; or
- (b) When the Insured Person ceases to be eligible under the Eligibility Section; or
- (c) The date communicated to 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.

GENERAL PROVISIONS

1. Policy limits

The Insured Person may only be covered under one such Policy during the Period of Insurance.

2. Applicant

You can exercise all the rights, privileges and options under the Policy during the period of coverage. This would be subject, where applicable, to the rights of any assignee or trustee.

3. Assignment

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

4. 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 (Cap.142) 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.

5. 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:

- (a) 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
- (b) 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. 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.

6. Currency

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

7. Cancellation

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

- (a) the entire portfolio of this insurance;
- (b) a particular plan type of this insurance; and/or
- (c) this insurance for a particular group of insured persons,

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

8. Proper Discharge

Payment made in accordance with this Section shall release us of all liabilities under this Policy. This person may include you as the Insured Person.

9. Beneficiaries

Benefits of this Policy will be payable to the Insured Person or the Applicant

10. 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.

11. 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 the Place of Issue.

12. Policy Non-Participating

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

13. 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).

14. Contracts (Rights of Third Parties) Act, Chapter 53B

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, Chapter 53B, Singapore, to enforce any term of this Policy.

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

15. Personal Data

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

16. 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 : 18 October 2021



A handwritten signature in black ink, appearing to be 'M. S. S.', positioned above the Registrar's title.

Registrar

A handwritten signature in black ink, appearing to be 'J. H. S.', positioned above the Chief Executive Officer's title.

Chief Executive Officer

IMPORTANT NOTE: 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 more 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)

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