



## **PRODUCT SUMMARY FOR GROUP OUTPATIENT CLINICAL BENEFIT**

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Policyholder : Singapore University of Social Science – Student Medical Program  
Policy No. : 80000176  
Period of Insurance : 1<sup>st</sup> July 2018 to 30<sup>th</sup> June 2019

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### **PRODUCT INFORMATION**

The Group Outpatient Clinical Benefit Supplementary Contract is a medical expense insurance policy designed to reimburse outpatient expenses incurred by a student for medically necessary treatment in respect of any illness, injury or disease subject to the limits as stated in the Benefits Schedule.

The Maximum Entry Age for this insurance is 65 age last birthday with Maximum Expiry Age at 70 age last birthday.

### **DEFINITIONS**

**“Emergency”** refers to a sudden or unexpected onset of an Illness or urgent medical condition which, as determined by the attending Medical Practitioner, could result in serious disability or death if it is not treated immediately.

**“General Practitioner”** refers to any Medical Practitioner who does not possess a specialist qualification recognised by the Singapore Medical Council.

**“Panel General Practitioner”** refers to a General Practitioner who has been appointed by Us to treat Insured Members.

**“Non-Panel General Practitioner”** refers to any General Practitioner other than Panel General Practitioner or General Practitioner in a government polyclinic.

**“Specialist”** refers to a Medical Practitioner who

- A. possesses a basic medical degree from a recognised university; and
- B. possesses a specialist qualification recognised by the Singapore Medical Council; and
- C. is a member of the Academy of Medicine; and
- D. is registered with the Singapore Medical Council.

### **DESCRIPTION OF BENEFITS**

#### **1. OUTPATIENT CLINICAL BENEFIT**

If any Insured Member visits a General Practitioner for consultation and treatment (including medicine), We will reimburse the Eligible Expenses, subject to the limits and Co-payment/Co-insurance shown in the Benefit Schedule.

#### **2. EMERGENCY OUTPATIENT TREATMENT**

If an Insured Member visits the Accident & Emergency Department of a Hospital for outpatient treatment due to Emergency, We will reimburse the Eligible Expenses, subject to the limits and Co-payment/ Co-insurance shown in the Benefit Schedule.

#### **3. OVERSEAS OUTPATIENT TREATMENT**

If any Insured Member visits a Medical Practitioner for consultation and treatment (including medicine) while the Insured Member is overseas, We will reimburse the Eligible Expenses, subject to the limits and Co-payment/Co-insurance shown in the Benefit Schedule.

#### **4. OUTPATIENT DIAGNOSTIC X-RAY AND LABORATORY TEST(S)**

If outpatient diagnostic X-ray and laboratory test(s) is recommended by a General Practitioner, We will reimburse the Eligible Expenses, subject to the limits and Co-payment/Co-insurance shown in the Benefit Schedule.

#### **5. TRADITIONAL CHINESE PHYSICIAN BENEFIT**

If any Insured Member visits a traditional Chinese physician registered with the Ministry of Health's TCM Practitioners Board, We will reimburse the Eligible Expense incurred for consultation and treatment (including medicine), subject to the limits and Co-payment/Co-insurance shown in the Benefit Schedule.

### **GENERAL LIMITATION AND EXCLUSIONS**

#### **1. LIMITATION**

When an Insured Member is entitled to benefits payable under Work Injury Compensation Act or similar legislation, government or public programme of medical benefits, other group or individual insurance, the benefits payable under this Policy are limited to the balance of charges not covered by benefits payable under such law, legislation, programme or other insurances, or that calculated in accordance with the Benefit Schedule, whichever is lesser.

#### **2. EXCLUSIONS**

No benefit is payable for treatment related to or complications arising from any of the following occurrences:

- A. Care and treatment performed by a Specialist;
- B. Specialised investigation including but not limited to Computed Tomography (CT) scan, Magnetic Resonance Imaging (MRI) scan, Barium Test and Positron Emission Tomography (PET) scan;
- C. Treatment of cancer and chronic renal failure, including but not limited to kidney dialysis; Any type of therapy including but not limited to physiotherapy;
- D. Psychological or psychiatric condition and Illness; drug addiction or alcoholism;
- E. Wilful participation by You, the Insured Member or a party who has interest in this insurance coverage in any acts that are illegal and/or unlawful in the country they are in;
- F. Rest cure, sanatoria care or special nursing care;
- G. Acquired Immunodeficiency Syndrome (AIDS), AIDS related complex, HIV infection or any type of sexually transmitted disease;
- H. Speech therapy;
- I. Procedures not generally recognised as standard medical practice such as hydrotherapy, all forms of traditional Chinese medicine, acupuncture, acupressure, herbal medication, chiropractic, foot reflexology, podiatry, osteopathic, experimental treatment and procedures under investigation;
- J. Any dental work or treatment, dental surgery, orthodontics and orthognathic surgery; temporo-mandibular joint disorder;
- K. Pregnancy, childbirth, abortion; treatment relating to fertility, sterilisation and contraception;
- L. Treatment for alopecia, acne, xanthelasma, syringoma;



- M. Eye examination, surgical procedure for correction of eye refraction, procurement or use of contact lenses or eye glasses;
- N. Prostheses, procurement or use of dialysis machines and any other hospital-type equipment, any appliances including hearing aids, special braces, wheelchairs, crutches;
- O. Congenital anomalies or genetic defects of the Insured Member present at, or existing from the time of his birth regardless of the time of discovery of such anomalies or defects and the time of such treatment or surgical procedure for the same;
- P. Obesity, weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition or whether treatment is medically necessary;
- Q. Sleep disorders;
- R. Injuries or Illness arising directly or indirectly from insurrection, war or act of war (whether declared or undeclared), direct participation in strikes, riots or civil commotion, or full-time service in any of the armed forces including National Service under Section 10 of the Enlistment Act, Cap. 93 of the Republic of Singapore except National Service reservist duty or training under Section 14 of the Enlistment Act, Cap. 93 of the Republic of Singapore.

## **KEY PRODUCT PROVISIONS**

### **1. NON GUARANTEED PREMIUM**

Premiums payable for this Policy are not guaranteed and may be increased at Policy Renewal Date at Our full discretion.

### **2. TERMINATION**

We reserves the right to terminate coverage by giving the You 30 days' notice in writing. Whenever such termination occurs, We will return the unearned portion of the premiums paid. The termination of coverage will be without prejudice to payment of claims arising prior to the date of termination.

### **3. AMENDMENT**

We shall have the right at any time to change the provisions of the scheme. Any changes to this policy will be binding on all Insured Members whether insured under this policy before or on or after the effective date of the change.

### **4. CHANGES IN CIRCUMSTANCES**

If there is any change in circumstances affecting the risk, You must give Us immediate written notice. In particular, You must notify Us of any changes in occupation/business or health affecting You or any Insured Member.

### **5. MISSTATEMENT**

If any relevant fact of an Insured Member has been misstated, the true facts will be used to assess if insurance is in force under this Policy and which benefits are payable.

### **6. FREE LOOK PERIOD**

Not applicable.



## **7. 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 the 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, while applicable, please contact Us or visit the GIA/LIA or SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

**Benefit Schedule**

<b>Benefits</b>	<b>Plan 1</b>
	<b>S\$</b>
<b>1. Outpatient Clinical Benefit</b>	
<b>Consultation and treatment by:</b>	
(a) Panel General Practitioner - Co-Payment (Per visit)	As Charged
(b) General Practitioner in a Polyclinic (inclusive of medicine) - on reimbursement basis - Co-Payment (Per visit)	As Charged
(c) Non-Panel General Practitioner (inclusive of medicine) - on reimbursement basis - Co-Payment (Per visit)	N.A.
<b>2. Emergency Outpatient Treatment at A&amp;E Department</b>	
Per visit - reimbursement basis	100
<b>3. Overseas Outpatient Treatment</b>	
Per visit - reimbursement basis	100
<b>4. Outpatient Diagnostic X-Ray &amp; Laboratory Tests</b>	
- Recommended by General Practitioner	Refer to item 1.
<b>5. Traditional Chinese Physician Benefit</b>	50
(per visit per day, inclusive of medicine)	
Maximum Number of Visits per Period of Insurance	6

**HOTLINE: 7000 274 2273**

**IMPORTANT NOTICE**

This is only product information provided by Us and is designed to serve as a guide only. In the event of clarification or dispute, the prevailing terms and conditions of the Group Insurance contract with your university shall apply.