



AIA SINGAPORE PRIVATE LIMITED
PRODUCT SUMMARY
GROUP OUTPATIENT SPECIALIST (GSOP) INSURANCE

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| Policyholder | : | SINGAPORE UNIVERSITY OF SOCIAL SCIENCES |
| Policy No. | : | 0000078050 |
| Period of Insurance | : | 1 JANUARY 2022 to 31 DECEMBER 2022 |

PRODUCT INFORMATION

Group Outpatient Specialist Benefit (GSOP) is supplementary to the Group Hospital & Surgical Plan.

GSOP insurance seeks to reimburse outpatient specialist consultation expenses with a valid referral letter by a Registered Medical Practitioner (other than the specialist himself) and diagnostic x-ray and laboratory examinations upon the recommendation by a Registered Medical Practitioner in Singapore.

ELIGIBILITY

All Full-Time Students over 16 and below 70 years of age. The coverage can be renewed up to age 74 last birthday.

DESCRIPTION OF BENEFITS

1. Outpatient Specialist Consultation

If an insured shall receive care and treatment from a Specialist as recommended by a Registered Medical Practitioner or recommended by the treating Specialist if the condition is in an area of a different medical field, the Company shall:

- (a) pay the expenses incurred at Panel Specialist clinics directly to the clinics.
- (b) reimburse the member for expenses incurred at non Panel clinics.

Except for insured aged 7 years old and below visiting a paediatrician, all visits to Specialists must be recommended by a Registered Medical Practitioner or recommended by the treating Specialist if the condition is in an area of a different medical field.

2. Outpatient Diagnostic X-Ray, Laboratory test and specialized test

This benefit shall be paid if the insured incurs expenses for X-Ray, laboratory and specialized tests as recommended by a Registered Medical Practitioner or Specialist.

3. Outpatient Physiotherapy

This benefit shall be paid if the insured incurs expenses for physiotherapy as recommended by a Registered Medical Practitioner.

4. Traditional Chinese Medicine (TCM)

Where TCM is a benefit expressly included in the Benefit Schedule below, this benefit shall be paid if the insured incurs expenses for care and treatment by a TCM practitioner.

5. Mental Care

Where Mental Care is a benefit expressly included in the Benefit Schedule below, this benefit shall be paid, up to the Mental Care limit stated, when an insured incurs out-patient expenses for care and treatment by a psychiatrist or psychologist. The insured will not be reimbursed for the same charges under any benefits other than Mental Care.

Treatment by a psychiatrist must be upon the recommendation of a Registered Medical Practitioner or psychologist.

BASIS OF COVERAGE

| Plan | Classification |
|--------|--|
| Plan 1 | All Full-Time Students (Including International Students) and *Part-time International Postgraduate Students (Residing in Singapore) |

BENEFITS SCHEDULE

| Benefits (Referral Letter Required) (Reimbursement Per Policy Year) | | Plan 1 (S\$) |
|--|--|-------------------------------------|
| 1 | Specialist Consultation (Including Physiotherapy and Chiropractor) | Up to \$1,000 Per Policy Year |
| 2 | Diagnostic X-ray & Laboratory Test (includes MRI/CT Scan) | |
| 3 | Mental Care | |
| 4 | TCM Direct Access \$30 per visit (Limited to 10 visits per policy year) | |
| 5 | Specialist's Consultation without referral letter \$30 per visit | |

KEY PRODUCT PROVISIONS

1) 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) Treatment by general practitioners.
- c) Specialist consultation, x-ray or laboratory test not recommended by a Registered Medical Practitioner for the diagnosis of Sickness or Injury.
- d) Treatment of injuries sustained as a result of a criminal act of the insured.
- e) Hypnotism, massage therapy, aroma therapy and other forms of alternative treatments; treatments by podiatrist and chiropractors.
- f) Educational treatments such as speech therapy, diabetic classes and nutritional treatments or group support treatments;
- g) Any expenses incurred in relation to any type of therapy including but not limited to occupational therapy, or dialysis, except for physiotherapy.
- h) Investigation and treatment of psychological, emotional, mental and behavioral conditions; alcoholism or drug addiction, intentional self-inflicted injuries while sane or insane, unless the policy has a "Mental Care" benefit expressly stated in the Policy Schedule.
- i) Treatment of injuries sustained as a result of a criminal act.
- j) Treatment relating to birth control; investigation or treatment occasioned by or resulting from pregnancy, infertility, childbirth, abortion, except ectopic pregnancy and non-elective miscarriage.
- k) Treatment of xanthelasma, skin tags, 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.

- l) 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.
- m) 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 of discovery or the time of such treatment or surgical treatment.
- n) 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).
- o) Any eye examination or treatment for the correction of eye refraction; procurement of contact lenses and eye glasses. Procurement and rental of/or use of special braces, any appliances, any equipment or prosthetic devices, wheel-chair, walking aids, hearing aids or the fitting of the same.
- p) 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 Workmen's Compensation Act, Singapore.
- q) Any surcharge incurred due to visits outside the normal operating hours of the clinic.
- r) Drugs purchased without a doctor's prescription

2) NON GUARANTEED PREMIUM

Premiums payable for this plan are not guaranteed and may be increased at Policy Renewal Date at the full discretion of the Company.

We shall have the rights to change the premium rate applicable for the policy:

- On any Policy Anniversary; or
- On any Premium Due Date provided that the rate charged has been in effect for at least 12 months; or
- When the risks insured against under the Policy have substantially increased, and we have given the Policyholder at least 31 days' notice before the Premium Due Date.

3) TERMS OF RENEWAL

The group policy contract may be renewed on the Policy Anniversary Date on such terms agreed by the Policyholder (employer). We can vary the premium and any other terms and conditions by giving written notice of such change to the Policyholder.

4) CANCELLATION CLAUSE

We may terminate the group policy on any Policy Anniversary Date by giving the Policyholder (employer) at least 31 days prior written notice of termination. Whenever such cancellation occurs, AIA shall return the unearned portion of premiums to the Policyholder (employer). The termination of coverage shall be without prejudice to the payment of claims arising prior to the date of termination.

5) TERMINATION

The coverage of a member shall automatically cease on the earliest of the following dates:

- (i) On the day the Policy is terminated; or
- (ii) On the expiry of the coverage for which the last premium payment was made on his account; or
- (iii) At the end of the Policy Year during which he attains the Maximum Age of Coverage as stated in the Policy Schedule; or
- (iv) On such date as may be communicated to him by reason of war or an act of war – such date to be determined at the insurer's discretion; or
- (v) On the date the Insured Member resigns, retires or terminates his employment with the Policyholder, or ceases to be covered under the Policy for any other reason; or
- (vi) On the expiry of 12 months from the start of the Insured Member being continuously:
 - (a) on temporary leave of absence; or
 - (b) on vacation without pay; or
 - (c) sick or injured (with or without continued uninterrupted absence from work).
- (vii) The date the Dependant ceases to fulfil the conditions that has permitted him to become insured as a Dependant.

6) MISSTATEMENT

- (a) If the age or date of birth or other relevant facts relating to an insured shall be found to have been misstated and if such misstatement affects the scale of benefits or has anything to do with the policy terms and conditions, the true age and facts shall be used in determining whether insurance is in force under the policy terms and the benefits payable therefrom, and an equitable adjustment of premiums shall be made.
- (b) Where a misstatement of age or other relevant facts have caused a member to be insured where he is otherwise ineligible for any insurance, or where such statement has caused an insured to remain insured when he would otherwise be disqualified in accordance with the policy terms and limitations, we may in our absolute discretion declare the insurance of the insured to be void and annul such insurance, and there shall be a return of premiums paid in respect of the member, provided always that where there is fraud on the part of the policyholder or insured, no premiums paid will be returned. If any claim has been admitted and benefits paid before AIA was made aware of the misstatement, the Policyholder will on demand by AIA reimburse AIA all benefits paid or the monetary equivalent of such benefits (as may be reasonably determined by us) if they were not paid in cash.

IMPORTANT NOTICE

This is only product information provided by AIA 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 employer shall apply.