



Group Healthcare

Your Customised Employee Benefits Solution

Employees - Your company's best assets

In today's business environment, employers face the on-going challenge of competing to attract and retain good staff. A key consideration when designing an employee package is the provision of comprehensive healthcare and wellness benefits.

Comprehensive, Flexible and Customisable

Group Healthcare International, a comprehensive international medical and surgical insurance plan, is the ideal solution for discerning employers seeking premier protection for their employees. Designed specially for corporations, the benefits offered are flexible and highly customisable to meet your company's needs and budget.

You can tailor the cover according to your company's preferences. Employees and their covered dependents enjoy absolute freedom of choice for their treatment, doctors, surgeons and hospitals. Cover starts from as few as 5 employees, and can be extended to employees based abroad.

For large employee groups of 20 and more, the usual requirement of providing the medical histories of individual employees is waived and pre-existing conditions are covered 12 months after the policy commencement date or date of employee inclusion, subject to terms and conditions.

Find out more

Get a quote today and find out how Group Healthcare International can help you achieve your talent retention strategies and employee benefit objectives. Complete the enclosed Group Healthcare Fact Finding Form so your regular insurance representative can help plan and design the cover the way you want it or you can contact us for more information at:



Call 6827 7602

(Monday to Friday, 8.45 am - 5.30 pm) or call your usual insurance advisor



service@sg.msig-asia.com

Comprehensive & Customised

Key Benefits

Currency: Singapore dollars

Benefits	Coverage Limits
Hospital Related Services	From \$15,000 to \$1 million
Room & Board	Up to Standard Single Bed
Outpatient Cancer Treatment	Covered under Hospital Related Services
Outpatient Kidney Dialysis	Covered under Hospital Related Services
Organ Transplantation	Covered under Hospital Related Services
Increased International Cover	From \$300,000 to \$1 million
Emergency Medical Assistance and Evacuation Services	Up to \$1 million
Repatriation or Local Burial of Mortal Remains	Up to \$100,000

Refer to the back for more details on the coverage.

Optional Benefits

Outpatient Services	Coverage Limits
General Practitioner and Specialist consultations with prescribed treatment	Annual limit applies
Diagnostic services and prescription drugs	Annual limit applies
Dental Benefits*	Coverage Limits
Consultation & Oral Examination Tooth scaling & polishing Medically Necessary Dental Services: • X-Ray • Amalgamation/Composite/Resin Restoration - Fillings • Extraction • Oral Surgery • Periodontal Treatment Root Planning • Pulp/Root Canal Treatment • Crowning, Bridges	Annual limit applies
Maternity Benefits	Coverage Limits
Ante-natal, childbirth and post-natal treatment for the mother. Applicable to insured member who is covered for at least 12 months prior to the date of delivery. Normal Delivery Complicated Delivery as defined in the policy	Annual limit applies

^{*}Available for groups of 20 and more employees

Key Benefits

- In-Hospital treatment, facilities & services including accommodation
- Intensive Care Unit or High Dependency Unit or Coronary Care Unit
- Day Care Surgery
- Pre-Hospital Diagnostic Services (up to 90 days of hospital admission)
- Post-Hospital Follow-up Treatment (up to 120 days after discharge)
- Home Nursing (up to 26 weeks following discharge from hospital)
- Cost of family member sharing child's hospital room
- Casualty ward accident and emergency services
- Accident Dental Cover
- Local ambulance services to hospital
- Outpatient Cancer Treatment and Kidney Dialysis

Organ Transplantation

The cost of operations for the transplantation of kidneys, heart, liver, lung or bone marrow. The policy does not cover the costs of organ acquisitions or expenses incurred by the donor.

Increased International Cover

Automatic increase of Hospital and Related Services limit when an Insured Person travels outside of the country of residence and home country.

Overseas Emergency Medical Evacuation and Repatriation

The medically necessary expenses of air and/or surface transportation, medical care immediately before and during transportation, communications and all usual ancillary charges incurred in moving an Insured Person with a serious medical condition to the nearest Hospital where appropriate medical care is available.

Optional Benefits

Outpatient Services

Medically necessary treatments provided to an Insured Person who is not registered as an inpatient at a hospital:

- General Outpatient Services
- Specialist Outpatient Services
- Outpatient Laboratory and X-Ray Services
- Outpatient Prescription Drugs

Dental Benefits

Consultation and Oral Examination as well as medically necessary dental treatment such as x-rays, scaling and polishing, root planing, tooth fillings, extractions, oral surgery, root canal treatment, crowning and bridges.

Maternity Benefits

Ante-natal, childbirth and post-natal treatment for the mother, who is an insured member and covered for maternity benefit for at least 12 months prior to the date of delivery.

- Up to \$6,000 for normal delivery
- Increased coverage to \$15,000 for complicated delivery

Peace of Mind with 24-hour MSIG Assist

+65 6323 8388

MSIG Assist is a specialist medical assistance provider with an extensive worldwide network of Alarm Centres that your insured employees can rely on for help day or night, all year round.

When your employees are abroad, the local medical services may not be suitable or dauntingly expensive. You and your employee can tap on our professional assistance to select the nearest hospital where appropriate medical care is available.

Highly trained multi-lingual staff and coordinating doctors are always on hand to give advice in emergencies and to help your insured employees locate suitable medical services anywhere in the world. In a medical emergency, MSIG Assist can arrange air or surface evacuation to the nearest hospital or move the patient back home, as medically appropriate.

When in-hospital treatment is required, the hospital or doctors can obtain confirmation of insurance coverage and take advantage of our worldwide payment guarantee by contacting MSIG Assist 24-hour hotline. With the payment guarantee, your employees are relieved of the financial outlay associated with hospital admissions.

Check out the Medical and Travel Assistance services below.

MEDICAL ASSISTANCE

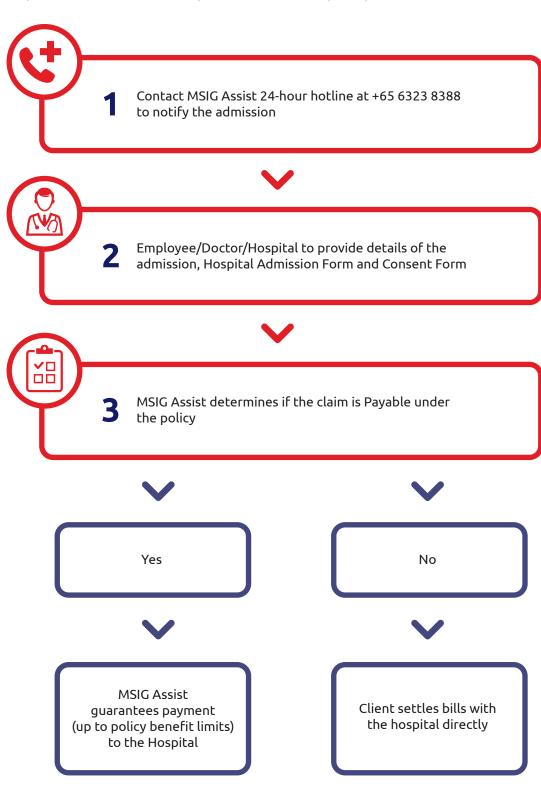
- Arrangement of Payment Guarantee for Inpatient Hospitalisation
- Medical Referral
- Emergency Medical Advice and Assistance
- Overseas Emergency Medical Evacuation and Repatriation
- Repatriation of Local Burial of Mortal Remains or Local Cremation

TRAVEL ASSISTANCE

- Visa Immunisation, Vaccination, Special Medication
- Weather Information
- Retrieval and Redirection of Lost Luggage
- Replacement and Delivery of Essential Lost Travel Documents
- Emergency Message Transmission and Interpreting Service

MSIG Worldwide Payment Guarantee Procedure

The Payment Guarantee relieves your insured employee from the financial outlay at the time of a hospital admission. The activation process takes a few simple steps.



Frequently Asked Questions

1. Who is eligible for the cover?

A minimum group size of 5 or more full-time permanent and active employees, aged between 18 and 64 years. Coverage is renewable annually up to age 70 years. Dependents of employees can be included, provided they are insured under the same policy as the employee subject to the following conditions:

- a) Spouse of your employees, who at the policy commencement date or at renewal, is aged between 18 and 64 years, and renewable annually up to age 65 years.
- b) Unmarried or unemployed child(ren) of your employees aged 15 days to 18 years and extended to 21 years if they are in full time formal education.

2. Does the policy provide worldwide coverage?

Yes. Group Healthcare International coverage are worldwide for your employees' short business trips or holiday travel outside of their usual country of residence, up to 90 days each trip. For employees who travel frequently, please contact us on the 'Increase International Cover' benefit which can be included as part of the healthcare plan.

3. Does the policy cover surgical implants?

Yes, prosthesis, corrective devices and medical appliances which are surgically required are covered.

4. I need to relocate my employees to another country, will they be covered?

Yes, please inform us in writing on such changes. A geographical loading may apply depending on the country where your employee(s) will be relocated to. Their coverage will remain effective.

5. What is a pre-existing condition?

This refers to any injury, illness, condition or symptom:

- Forwhichtreatment, or medication, or advice, or diagnosis has been sought or received or was foreseeable prior to the commencement of cover for the insured person under the Policy, or
- b) Which presented signs or symptoms of which the insured person was aware or should reasonably have been aware or which originated or existed, prior to the commencement of cover for the insured person concerned.

6. Can the exclusion on pre-existing conditions be waived?

For small groups of up to 20 employees, premium rates are made more affordable by excluding cover for pre-existing conditions. The exclusion may be removed for groups of more than 20 employees, subject to our assessment and agreement.

7. What is not covered?

Pre-existing conditions, routine medical examinations, self-inflicted injury, suicide, injuries sustained during military service and hazardous sports are some of the exceptions. Please refer to the policy for more details.

Frequently Asked Questions

8. Is there a Waiting Period?

There is no waiting period for medical services resulting from illness or accidental causes. However, there is a waiting period under the optional Maternity Benefit. An insured member must be covered for at least 12 months under the Maternity Benefit prior to the date of delivery for benefits to apply.

9. How does the Payment Guarantee work?

The 24-hour MSIG Assist must first be contacted to obtain advance approval for any inpatient treatment at a hospital and for overseas emergency medical evacuation services. Relevant information will be obtained from the insured person and the attending doctor. MSIG Assist will assess and issue the payment guarantee and arrange direct settlement to the hospitals, doctors or other service providers. In the event MSIG Assist is not able to approve payment guarantee in time or decline the guarantee issuance, your employee will be notified to make payment before leaving the hospital.

10. Who decides if an emergency evacuation is needed?

The co-ordinating doctor acting through the 24-hour MSIG Assist center will determine if an emergency evacuation is required including the method and destination. Decisions are made on medical grounds by experienced medical assistance personnel.

11. How much does the insurance cost?

There are no published rates. To obtain a quotation please complete and return the Group Healthcare Fact Find Form. Premiums will depend on the type and level of benefits required, age and geographical location of your employee and your company's past claim records (if presently insured) or self-funded medical expenses.

12. Are the annual premiums fixed?

The premiums are fixed for a 12-month period and may be adjusted according to claim experience and inflation as necessary.

13. How do I obtain a quotation?

As the benefits and limits are customisable to your needs, we require a completed Group Healthcare Fact Find form to provide you or your insurance representative a quotation, typically within 3 working days.

14. What are the documents needed to make a claim?

You need to submit the completed claim form with the original hospital bills, receipts, medical certificates or medical reports for claim assessment.

ABOUT MSIG INSURANCE

A leading general insurer with a local presence of over 100 years, MSIG Insurance offers an extensive range of insurance solutions for commercial and personal risk protection, enabling the security and safety of individuals and businesses. MSIG holds an A+/Stable financial rating by Standard & Poor's.

A testament to its growing strength and influence, MSIG has garnered numerous awards for delivering digitally innovative and customer-centric solutions. It was named Asia's Most Transformative Insurer (2019) by the IDC Financial Insights and The Digital Insurer of the Year (2018) by The Asset, an independent financial research publication in Asia.

MSIG is a subsidiary of Mitsui Sumitomo Insurance, and is a member of the MS&AD Insurance Group - one of the largest general insurance groups in the world with presence in over 40 countries and regions, 18 of which are in Asia and Oceania. Based in Japan, MS&AD is active in five business domains, namely domestic (Japanese) non-life insurance, domestic (Japanese) life insurance, overseas business, financial services business and risk-related business.

Please refer to <u>msig.com.sg</u> for current information and ratings.

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