
EMPLOYEE MEDICARE INSURANCE POLICY

Here is your Employee MediCare insurance policy. Please examine it, together with the **schedule**, to make sure that you have the cover you need.

It is important that the policy, the **schedule** and any amendments are read together to avoid any misunderstanding.

IMPORTANT NOTICE

The insurance cover provided to you under this policy is based on the information you have given us. You must tell us all facts that you know or ought to know, or you may not be covered under the policy.

HOW YOUR INSURANCE OPERATES

Your policy is a contract between us, the **company**, and you, our **insured** named in the **schedule**. The application form, declaration and information you gave us when applying for the policy are the basis of this contract. The **schedule** and any endorsement made altering the terms of this policy, form part of this policy.

In consideration of your paying us the required premium, we agree to indemnify you in the manner and to the extent described in the policy and in the **schedule** during the **Period of Insurance**, or any subsequent period for which you pay and we accept the required premium.

Any endorsement made altering the **schedule** or policy terms and conditions form part of this policy.

OUR PROMISE OF SERVICE

We want to provide you with a high standard of service and to meet any claims covered by this policy honestly, fairly and promptly. If you have any reason to believe that we have not done so, please contact your agent or broker. If you do not use the services of a professional intermediary, please contact us directly. We are ready to help you with your concerns.

A GUIDE TO YOUR POLICY

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DEFINITION OF WORDS

(Applicable to the whole policy)

Certain words are defined below. These have the same meaning wherever they are used in the policy, pre-contract disclosure or the **schedule** and are highlighted in bold print, e.g. **worker**, **accident** etc.

TERM	DEFINITION
Accident	An event which happens suddenly, solely and directly caused by violent, external and visible means and gives rise to a result the worker and/or the insured did not intend or anticipate.
Co-insurance	The proportion of covered medical expenses claims which you must co-pay.
Dentist	A properly qualified dentist, dental surgeon or dental practitioner (other than the insured's or worker's immediate family) licensed by the competent authorities of the country in which treatment is provided, and who in rendering such treatment is practicing within the scope of his/her licensing and training.
Doctor	A properly qualified medical practitioner (other than the Insured or a member of the insured's or worker's immediate family) licensed by the Ministry of Health in Singapore, and who in rendering such treatment is practicing within the scope of his licensing and training.
Enrolment date	The date which a worker is accepted by the company to be insured under this policy or any reinstatement of this policy.
Home country	The country of which the worker holds a passport. If the worker holds more than one passport, the home country will be taken to mean the country declared on the application form or enrolment form under the heading.

TERM	DEFINITION
Hospital	An institution in Singapore which is legally licensed as a medical or surgical hospital in Singapore in which it must provide service primarily for reception, care and treatment of injured or sick persons as inpatient under the constant supervision of a doctor . These include community hospitals and exclude nursing, rest homes or convalescent homes, institutions for treatment of substance abuse, mental institutions or geriatric wards and places for drug addicts or alcoholics or for any purpose.
Illness	Any sudden and unforeseen sickness, illness or disease first manifested whilst in Singapore and occurring during the Period of Insurance .
Injury	All bodily injury suffered anywhere in Singapore, caused solely by accident and not by sickness, disease or gradual physical or mental wear and tear.
Inpatient	An in-patient stay in the hospital by the worker where the treatment is being received for which room and board charges are made by the hospital , and this excludes in-patient stay by the worker under observation in a ward.
Notification period	The period of thirty (30) days from the date of diagnosis of Injury or Illness or death.
Permanent disablement	Injury which, having lasted for a continuous period of twelve (12) consecutive months from the date of the accident, with no hope of improvement at the end of that period, totally disables and prevents a worker from performing any business or occupation of any kind.
Pre-existing conditions	Any injury, illness , condition or symptom: a) for which treatment, or medication, or advice or diagnosis has been sought or received or was foreseeable prior to the enrolment date of cover for the worker concerned, or b) which presented signs or symptoms of which the worker or the insured concerned was aware or should reasonably have been aware or which originated or existed, prior to the commencement of cover for the worker concerned.
Physiotherapist	A person, (other than the insured or a worker or a member of worker's immediate family), qualified by a duly accredited degree in physiotherapy and legally licensed and duly qualified to perform physiotherapy, and who in rendering such treatment is practicing within the scope of his licensing and training.
Reasonable and customary charges	Charges for medical care which shall be considered by the company or its medical advisers to be reasonable and customary to the extent that they do not exceed the general level of charges being made by others of similar standing in the locality where the charges are incurred when giving like or comparable treatment, services or supplies to individuals of the same sex and of comparable age for a similar disease or injury or illness . Any scale of charges which may be agreed from time to time between the company and hospitals and doctor shall also be indicative of reasonable and customary charges .
Schedule	The schedule containing the details of the policy, benefits, endorsements (if any), worker(s) , type of cover selected and Period of Insurance and this includes the Renewal Certificate issued by the company . The schedule is part of the policy.
Specialist	A doctor (other than the insured or a member of the insured's or worker's immediate family) who is licensed as a specialist by the Ministry of Health in Singapore, or its equivalent in the country in which treatment is provided, whose practice is based on special expertise in a selected medical specialty to treat the type of illness or injury for which a claim may be made, which is relevant to the treatment provided to the worker .

TERM	DEFINITION
Worker	Your foreign worker in your direct employment with a valid work permit or special pass issued by the Ministry of Manpower in Singapore, and named as insured person in the schedule , unless otherwise agreed by the company in writing, and who meets the eligibility criteria set out in General Condition 1 of the policy and must be employed by the employer identified as the insured in the schedule .
We, us, our, the company	MSIG Insurance (Singapore) Pte. Ltd.
You, your, insured	The employer of the worker and is the policyholder named as the insured in the schedule .

In this policy, where the context admits and is applicable, words imputing the masculine gender shall include the feminine gender and words imputing the singular number shall include the plural number and vice versa.

THE BENEFITS

SECTION 1 – MEDICAL EXPENSES

The policy meets the requirement of Ministry of Manpower.

We will pay you the **reasonable and customary charges** for medical expenses under Section 1 which are necessarily incurred as a result of an **injury** or **illness** sustained by the **worker**, not under Work Injury Compensation Insurance coverage, commencing or occurring in Singapore during the **Period of Insurance** provided such expenses are incurred in Singapore.

Eligible medical expenses (applicable to Items 1.1 to 1.4 under Section 1) that exceed S\$15,000 per year shall be subjected to a 25% **co-insurance**, unless stated otherwise in the **schedule**.

The maximum total sum payable under Section 1 in respect of the **worker** is the sum insured as stated in the **schedule** on an annual limit basis.

1.1 Room & Board

We will pay for the charges for **hospital** accommodation inclusive of meals and general nursing services for each day of confinement as an Inpatient in a **hospital** (subject to the limits stated in the **schedule**).

1.2 Hospital and related services

All medically necessary treatment and services provided by or on the order of a **Doctor** to the **worker** when admitted for a treatment of a covered **Illness** or **Injury** as a registered **Inpatient** to a **Hospital** in Singapore. Cover includes:

- a) Intensive Care unit or High Dependency Unit (HDU) or Coronary Care Unit (CCU) charges,
- b) **Doctor's/physiotherapist's fees, specialist** consultations and visits,
- c) Diagnostic, laboratory or other medically necessary facilities and services, operating theatre charges,
- d) All dressings or medications prescribed by the treating doctor for in-hospital use.

The cover extends to include day care surgery. Day care surgery means all medically necessary surgical procedures and related treatment provided by or on the order of a **doctor** to the **worker** at a **hospital** where **inpatient** stay is not required. Day care surgery cover excludes all non-surgical procedures and related treatment and is subject otherwise to the terms, conditions and exclusions of this policy.

The costs of non-medically necessary goods or services including such items as telephone, television and newspaper are not covered.

1.3 Pre-hospital specialist and diagnostic services

Consultation by the **specialist**, and laboratory, x-ray or other medically necessary diagnostic procedures ordered by a **doctor** and which within ninety (90) days of being carried out, result in the **worker** being admitted as a registered **inpatient** and/or day care surgery to a **hospital** in Singapore for the treatment of the specific medical condition diagnosed, provided that such medical condition is covered by the policy.

1.4 Post-hospital follow-up treatment

The medically necessary follow up treatment by a **doctor** to be rendered for up to ninety (90) days from the **worker's** discharge from a **hospital** in Singapore. Cover is restricted to follow up treatment of the specific medical condition for which the **worker** received in-hospital treatment and/or day care surgery covered by the policy.

1.5 Outpatient emergency dental cover following an accident

The medically necessary outpatient emergency treatment provided to the **worker** due to injuries or damage to the natural teeth and/or gums by a **dentist** within 24 (twenty-four) hours following the **accident**.

Pro-ration Factor

In the event the **worker** is admitted to a higher ward than the plan entitlement, the payable hospital medical expenses (including covered claims resulting from day care surgery) under the Policy will be pro-rated using the percentages stated below.

Type of Hospital	Pro-ration Percentage
Private hospitals in Singapore	50%
Upgrade to higher wards in Singapore Government/ Restructured Hospital	75%

SECTION 2 – REPATRIATION EXPENSES

If this benefit has been selected by the insured and endorsed in the **schedule**, we will reimburse you for actual repatriation expenses you incurred up to the sum insured as stated in Section 2 in respect of:

- Conveyance of the **worker** to his/her **home country** following an **accident** or **illness** resulting in his/her permanent disablement; or
- Burial or cremation of the **worker** and/or conveyance of body or ashes to his/her **home country**.

We will only pay under this section if a detailed account with supporting original bills is submitted to and approved by us.

Special conditions to Sections 1 and 2

- The policy will not provide compensation other than on a proportionate basis if the **insured** or a **worker** has any other insurance in force or is entitled to indemnity from any other source in respect of the same **accident, illness, injury**, death or expense.
- Benefit payable under Sections 1 and 2 is up to the sum insured and limits stated in the **schedule**, including the applicable Goods and Services Tax (GST), where applicable.

SECTION 3 – SPECIAL GRANT

The policy will pay up to the sum insured as stated in Section 3 of the **schedule** if a **worker** dies from

- a) an **injury**; or
- b) an **illness**

as a registered inpatient during the treatment for such **injury** or **illness** at a **hospital** in Singapore or within ninety (90) days after discharge from the **hospital** in Singapore.

SECTION 4 – PERSONAL ACCIDENT

We will pay to the **worker** or his/her legal personal representatives the benefit under Section 4 of the **schedule** if during the **Period of Insurance** the **worker** named in the **schedule** sustains an **injury** which within twelve (12) calendar months from the **accident** results directly and independently of any other cause in death or **permanent disablement**.

Benefit A – Death

Where the **worker** dies in Singapore, the sum insured as stated in Section 4A of the **schedule**.

Benefit B – Permanent disablement

Where the **worker** suffers in Singapore any **permanent disablement**, the sum insured as stated in Section 4B of the **schedule**.

Special conditions to Section 4

1. A valid claim made for Benefit A or for Benefit B, will, with effect from the date of the **accident** resulting in such claim, discharge **us** from liability for any further claim under Section 4.
2. No benefit shall be payable if the **worker** dies or suffers **permanent disablement** directly as a result of an **accident** outside Singapore.

CLAIM CONDITIONS

(Applicable to the whole policy)

We will act in good faith in all our dealings with you. Equally, the payment of claims is dependent on due observation of the following.

If the **insured** or **worker** fail(s) to observe any of these conditions, the benefits under the policy will not be paid and there will be no refund of any premium paid. Satisfactory proof of claim must be submitted in all cases, and the **company** may appoint independent administrators to manage and settle claims on its behalf.

On the happening of any **accident** or **illness** which may give rise to a claim under this policy you or save for Clause (f) the **worker** must:

- a) give notice in writing to Us within the **notification period** stating the circumstances of the death, **injury** or **illness**.
- b) deliver to us as soon as reasonably practicable a claim in writing with such detailed particulars and proofs as may be reasonably required.
- c) give us all reports, certificates and information required by us which shall be furnished at your or your **worker's** expense and shall be in such form as we shall prescribe.



- d) provide evidence of the Singapore Ministry of Manpower's approval of the work permit or special pass and the work permit or special pass for the **worker**.
- e) ensure that the worker shall from time to time submit himself to medical examination at the expense of us as may be required in connection with any claim.
- f) ensure that in the case of death where any reasonable doubt exists as to the cause of it, a qualified medical practitioner appointed by us is allowed to make a post-mortem examination of the body of the **worker** at Our expense.

Under Section 1 – Medical Expenses, we will pay to the **hospital** all eligible claims, less the **co-insurance** required of you. In the event you have made full payment to the hospital and submit a claim to us, we will reimburse all eligible claims, less the **co-insurance** required of you.

Condition precedent

The validity of this policy is subject to the condition precedent that:

- a) for the risk insured, the **insured** has never had any insurance terminated in the last twelve (12) months due solely or in part to a breach of any premium payment condition; or
- b) if the **insured** has declared that it has breached any premium payment condition in respect of a previous policy taken up with another insurer in the last twelve (12) months;
 - i) the **insured** has fully paid all outstanding premium for time on risk calculated by the previous insurer based on the customary short period rate in respect of the previous policy; and
 - ii) a copy of the written confirmation from the previous insurer to this effect is first provided by the **insured** to the **company** before cover incepts.

GENERAL CONDITIONS

(Applicable to the whole policy and to be observed by the insured and all persons insured under the policy)

It is important part of our contract that you observe the following general conditions and they are, where their nature permit, condition precedents to the right to recover from us:

1. Eligibility

Unless we agree in writing, otherwise any person you wish to insure under the policy must be named as a **worker** in the **schedule** and must at the **enrolment date**, be between eighteen (18) to sixty-four (64) years old and residing in Singapore.

You must inform us on the enrolment of any eligible **worker** within thirty (30) days from the date they are employed by you, otherwise, there is no coverage for the **worker**. No cover is in force until confirmed by the issue of a policy or a **schedule** by the **company**.

2. Co-operation

As a condition precedent to the **company's** liability, the insured, the **worker** or his representatives shall co-operate fully with the **company** and its medical advisers and will fully and faithfully disclose all material facts and matters which the **insured** or **worker** knows or ought to know and will upon request as the **company** may reasonably make execute any document to empower the **company** to obtain relevant information, at the **insured** or **worker's** expense, from any **doctor** or **hospital** or other source.

3. Co-ordination of benefits

The policy will not provide compensation other than on a proportionate basis if the **insured** or **worker** has any other insurance in force or is entitled to indemnity from any other source in respect of the same **accident, injury, illness**, death or expense.

Company has full rights of subrogation and may take proceedings in the **insured's** or **worker's** name, but at the **company's** expense, to recover for the **company's** benefit the amount of any payment made under the policy and/or to secure an indemnity from a third party.

4. Reasonable precautions and material changes

The **insured** and **worker** shall take all reasonable precautions to prevent and minimise any **accident, injury** or **illness** or death or expense and the **company** must be informed immediately in writing as soon as you are aware of any material information or change of circumstances whether relating to a change in job occupation, duties, sporting activity or pursuits of any **worker**, or any other change which may increase the possibility of a claim under this policy. The **company** reserves the right to continue cover on terms and conditions it considers appropriate to such changes in material information or circumstances or to decline to continue cover under the policy.

5. Period of Insurance

Period of Insurance means the period specified in the **schedule** during which you declare to us the particulars of the **workers** to be insured under this policy.

If during the **Period of Insurance**, the **worker** returns to his **home country**,

- a) cover ceases from the time he leaves Singapore following cancellation or expiry of his work permit or special pass.
- b) cover resumes upon his return to Singapore or upon the renewal of his work permit or special pass whichever is the later, and

You must inform us within thirty (30) days.

6. Observance

The due observance and fulfillment of the terms, provisions and conditions of this policy in so far as they relate to anything to be done or not to be done by you and/or the **worker** and the truth of the statements and answers in the proposal, any claims documents and notices of change in circumstances shall be conditions precedent to any liability on our part to make any payment under this policy.

7. Alteration

- a) At each renewal of this policy, we have the right to vary the premium payable and all other terms, conditions and exceptions of the policy. We will notify you in writing of any such change at least thirty (30) days before the renewal date. For avoidance of doubt, the **company** may change the policy terms and conditions at its discretion at any renewal. Your continued payment of premium after we give such notice will mean you accept the change.
- b) Any misrepresentation of or failure to disclose material facts by the **insured** or **worker**, will entitle the **company** to alter, amend or cancel the policy having regard to the true facts and all benefits under the policy shall be forfeited. A material fact is any information that could influence the **company** in its assessment of the proposal.

8. Cancellation

The **insured** or the **company** may cancel this policy by giving other party thirty (30) days' written notice sent to the last known address.

In the event of the cover provided by this policy being cancelled by the **insured**, the **company** shall retain a premium, subject to a minimum of S\$200 plus the applicable Goods & Services Taxes, and in accordance with the following scale for the time this policy has been in force:

For 1 month	20% of the annual premium
For 2 months	30% of the annual premium
For 3 months	40% of the annual premium
For 4 months	50% of the annual premium
For 5 months	60% of the annual premium
For 6 months	70% of the annual premium
For 7 months	80% of the annual premium
For 8 months	90% of the annual premium
In excess of 8 months	100% of the annual premium

If the **company** cancels the policy, the **company** will make a pro-rata refund of the premium paid. In the event of a claim, the **company** reserves the right to retain 100% of the annual premium for the whole policy.

9. Termination of cover

- a) The entire policy will terminate and cover for all **workers'** will cease immediately upon:
 - i) non-payment of premium by the due date as described in the premium payment warranty of this policy; or
 - ii) the cancellation of this policy as described in General Condition 8, whichever is the earlier.
- b) Unless we have agreed otherwise in writing, the cover of a **worker** under this policy will terminate immediately in any of the following circumstances, whichever first occurs:
 - i) when the **worker** ceases to be eligible, or
 - ii) when the **worker** ceases to be in Singapore, or
 - iii) where the **worker**, on the expiry of the **Period of Insurance** in which the **worker** has attained age 70, or
 - iv) at the time of death of the **worker**.

In respect of 9(b)(i)(ii)(iii), the **company** will refund premium to the **insured** for the insurance terminated from the date of termination to the expiry of this policy, on a pro-rated basis provided the **company** had not incurred or paid claim for the **worker** and the refund premium is above the minimum premium of S\$200 plus the applicable Goods & Services Taxes. In the event of any claim, the **company** reserves the right to retain 100% of the annual premium for the whole policy.

10. Acceptance of instructions

Any instruction, request or notice will not be accepted by the company until such documents, information and consents as the company may reasonably require are received at the company's office address stated in the policy.

11. Legal proceedings

No action in law or equity shall be brought to recover under the policy until after the expiration of sixty (60) days from the date proof of claim has been furnished in accordance with the policy conditions. The parties submit themselves to the exclusive venue and jurisdiction of the Courts of Singapore for the resolution of any such conflict or dispute save where the circumstances are governed by the Arbitration clause of the policy.

12. Arbitration

Where we have accepted a claim but the amount to be paid is in dispute, the matter shall be referred to arbitration in Singapore and Singapore law will apply. The arbitration shall be heard by a single arbitrator to be agreed by the parties with fourteen (14) days from the commencement of arbitration. In default of agreement, the arbitrator shall be appointed in accordance with and subject to the provisions of the Arbitration Act (Cap 10) or any statutory re-enactment thereof. Arbitration proceedings shall be conducted in accordance with the Arbitration Rules of the Singapore International Arbitration Centre. Where any dispute is by this condition to be referred to arbitration, the making of an award shall be a condition precedent to any right of action against the **company**.

13. In the event of fraud

If the **insured** and/or the **worker** or anyone acting on their behalf make any claim under this policy knowing the claim to be false or fraudulent or if fraudulent means or devices are used by the **insured** and/or the **worker**, the policy shall become void and all benefits forfeited.

14. Commencement of arbitration or court action

If the company offers an amount in settlement or disclaims liability altogether for a claim, and such a claim is not within twelve (12) calendar months from the date of such an offer or disclaimer referred to arbitration as required under General Condition 12 or been made subject to pending court action, the claim shall be deemed to be abandoned and the **company** shall have no liability in respect of it.

15. Difference in opinion

In the event of any difference in opinions between our medical advisers and your **doctor**, our medical adviser's opinion shall prevail.

16. Consent

It is hereby declared that as a condition precedent to the liability of the **company**, the **insured** and the **worker** have agreed that any personal information in relation to the **worker** provided by or on behalf of the **worker** to the **company** may be held, used and disclosed to enable the **company** or individuals/organisation associated with the **company** or any independent third party (within or outside of Singapore) to:

- a) process and assess the Insured's application or any matter arising from the policy and any other application for insurance cover and/or
- b) provide all services related to the policy.

17. No trust

The **company** will not recognise or be affected by any notice of trust, charge or assignment relating to this policy and the receipt of the **insured** or **worker** or his legal personal representative or any person to whom any benefit is expressed to be payable, shall in all cases effectively discharge our liability.

18. Legal personal representatives

The terms, exceptions and conditions of this policy also apply to the legal personal representatives of the **insured** or the **worker**.

19. Governing law

The policy is to be construed according to the laws of the Republic of Singapore.

20. Subrogation

In the event of a claim, we are entitled to undertake in the name and on behalf of you and/or the **worker** the absolute conduct control and settlement of any proceedings and to take proceedings at own expense and for own benefit in your name and/or the **worker** to recover compensation or secure indemnity from any third party in respect of anything covered by this policy.

21. Exclusion of rights under the Contracts (Rights of Third Parties) Act

A person who is not a party to this policy contract shall have no right under the Contracts (Rights of Third Parties) Act to enforce any of its terms. For the avoidance of doubt, it is declared and agreed that the **worker** is not a party to this policy contract.

22. Discharge

Your receipt or that of the **worker** or of your or his legal personal representatives as the case may be shall in all cases be a valid discharge of the **company's** liability to pay in respect thereof.

GENERAL EXCEPTIONS

(Applicable to the whole policy)

The following treatments, items, conditions, activities and their related consequential expenses are excluded from the policy and the **company** shall not be liable for:

1. **Pre-existing conditions** within the first twelve (12 months) of employment under the same **insured**.
2. Routine medical examinations or check-ups, routine eye or ear examinations, or any form where there is no objective indication of impairment of normal health or any treatment or investigation of a preventive nature, or any treatment which is not medically necessary, vaccinations, cosmetic surgery or plastic surgery.
3. All birth defects, congenital abnormalities and/or hereditary conditions.
4. Tests or treatment related to infertility, sub-fertility, assisted conception or any contraceptive operation, sex change operations, including their related complications.
5. Sexually transmitted diseases, Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC).

6. Instrument examinations and laboratory tests not ordered by a **doctor** or not resulting in a diagnosis of a condition leading to hospitalisation or surgery or treatment for a covered condition in this policy.
7. Maternity related charges including abortion or miscarriage, childbirth, and their related complications.
8. All dental treatment (except due to **accident**).
9. Any expenses in respect of any **hospital** confinement, surgical operation, treatment or services which have not been previously recommended by a **doctor**.
10. Corrective devices and medical appliances; implants that are not deemed as medically necessary; hearing aids.
11. Costs arising under any legislation which seeks to increase the cost of medical treatment and services actually received above charge levels which would be considered **reasonable and customary charges** in the absence of such legislation.
12. **Hospital inpatient** treatment for conditions in respect of which the **worker** can be properly treated as an outpatient; ambulance fees and private nursing charges.
13. Treatment provided to a **worker** by the **insured** or a family member of the **insured**, or self-treatment by the **worker**, including the prescription of drugs.
14. Outpatient rehabilitation such as physiotherapy, occupational therapy and speech therapy, unless recommended by **doctor** during **inpatient** and/or part of **post-hospital follow-up treatment**.
15. Traditional Chinese medicine or any forms of alternative treatment.
16. Treatment of medical condition or injury arising from addiction to a controlled drug.
17. The second and subsequent occasion of treatment of:
 - a) Medical condition or injury arising from addiction to alcohol, or to a drug that is not a controlled drug;
 - b) Medical condition or injury arising from voluntary participation in any strike, riot or civil commotion;
 - c) Medical condition or injury arising from self-inflicted injuries and attempted suicide;
 - d) Any psychiatric or nervous or mental disorder
18. Any willful act or willful negligence of the **insured** and/or the **worker** or of his representatives; any unlawful act of the **insured** and/or **worker** or willful exposure to danger (other than in an attempt to save human life).
19. Unreasonable failure to seek or follow medical advice.
20. **Illness** or **injury** arising from the **worker's** voluntary participation in any hazardous sports, including any winter sports (such as skiing or snowboarding), underwater activity (such as snorkeling or scuba diving), aerial activity (such as taking a helicopter tour or para-gliding) or motor sport (such as motorcycle racing or motor car racing).
21. **Illness** or **injury** or death or any **permanent disablement** occurring when the **worker** is living outside Singapore.
22. Any damage, loss, liability and/or expenses in respect of any **accident** or **illness** or **injury** arising out of and/or in the course of employment regardless of whether it constitutes a valid claim under the Work Injury Compensation Act 2019 or similar or subsequent Act or legislation, is excluded.
23. Any action for compensation under this policy brought in any jurisdiction outside Singapore.

24. The costs of medical reports; Hotel or non-hospital accommodation costs.

Additionally, the following apply:

25. Institute radioactive contamination, chemical, biological, biochemical and electromagnetic weapons exclusion clause.

In no case shall this insurance cover loss, damage, liability or expense directly or indirectly caused by or contributed to by or arising from:

- a) ionising radiations from or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel
- b) the radioactive, toxic, explosive or other hazardous or contaminating properties of any nuclear installation, reactor or other nuclear assembly or nuclear component thereof
- c) any weapon or device employing atomic or nuclear fission and/ or fusion or other like reaction or radioactive force or matter
- d) the radioactive, toxic, explosive or other hazardous or contaminating properties of any radioactive matter. The exclusion in this sub-clause does not extend to radioactive isotopes, other than nuclear fuel, when such isotopes are being prepared, carried, stored, or used for commercial, agricultural, medical, scientific or other similar peaceful purposes
- e) any chemical, biological, bio-chemical or electromagnetic weapon.

26. War & terrorism exclusion

Notwithstanding any provision to the contrary within this policy or any endorsement thereto it is agreed that this insurance excludes: death, disability, loss, damage, destruction, any legal liabilities, cost or expense including consequential loss of whatsoever nature, directly or indirectly caused by, resulting from or in connection with any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the loss;

- a) war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, or
- b) any act of terrorism including but not limited to
 - i) the use or threat of force, violence and/or
 - ii) harm or damage to life or to property (or the threat of such harm or damage) including, but not limited to, nuclear radiation and/or contamination by chemical and/ or biological agents,

by any person(s) or group(s) of persons, committed for political, religious, ideological or similar purposes, express or otherwise, and/or to put the public or any section of the public in fear, or
- c) any action taken in controlling, preventing, suppressing or in any way relating to (a) or (b) above.

If the **company** says that any loss, damage, cost or expense are not covered by this insurance by reason of any of these general exceptions, then the burden of proving that such loss is covered shall be upon you and/or the **worker**.

PREMIUM PAYMENT WARRANTY

1. Notwithstanding anything herein contained but subject to clause 2 hereof, it is hereby agreed and declared that if the **Period of Insurance** is sixty (60) days or more, any premium due must be paid and actually received in full by the **company** (or the intermediary through whom this policy was effected) within sixty (60) days of the inception date of the coverage under the policy, renewal certificate or cover note.
2. In the event that any premium due is not paid and actually received in full by the **company** (or the intermediary through whom this policy was effected) within the sixty (60)-day period referred to above, then:
 - a) the cover under the policy, renewal certificate or cover note is automatically terminated immediately after the expiry of the said sixty (60)-day period;
 - b) the automatic termination of the cover shall be without prejudice to any liability incurred within the said sixty (60)-day period; and
 - c) the **company** shall be entitled to a pro-rata time on risk premium subject to a minimum of S\$25.
3. If the **Period of Insurance** is less than sixty (60) days, any premium due must be paid and actually received in full by the **company** (or the intermediary through whom this policy was effected) within the **Period of Insurance**.

SANCTION LIMITATION AND EXCLUSION CLAUSE

No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under applicable national laws, United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

USEFUL PROCEDURES

1. Making a claim

Report your claim to us and send us a completed claim form together with all supporting documents. Information requested on the claim form includes the claimant's personal particulars, contact details and policy number. You should also include a brief description of the claim and particulars of other persons or witnesses involved, if applicable. Refer to our website for details.

2. Your feedback channels

If you have any feedback or comments on our service, tell us about it. Our service quality team will acknowledge receipt of your feedback within one working day and give you a final reply within seven working days. Refer to our website for details.

**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 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).

IMPORTANT - The insured is requested to read this policy. If any error or misdescription be found, the policy should be returned to the issuing office for correction.