

Employees FlexCare

Comprehensive coverage with flexible options for
Small and Medium Enterprise (SME)

CORPORATE INSURANCE



Take care of your employees' well-being and they will take care of your business. As a business owner, your employees are your most valuable assets. Keep them healthy, happy and loyal by protecting them with Employees FlexCare, a flexible and comprehensive group employee benefits insurance that can be customised to suit your budget and employees' needs.

Why is it good for me?	
1	24-hour worldwide¹ protection with various benefits
2	Customisable plans to suit your budget and employees' needs
3	Hassle-free application and claims
4	Cashless² cover at Income Insurance's panel of General Practitioner or Specialist clinics
5	Premiums are based on portfolio underwriting

Comprehensive coverage with various benefits

Enjoy comprehensive coverage with various benefits for maximum protection, with flexible options even for Small and Medium Enterprise (SME).

Customisable plans to suit your budget and employees' needs

Choose from a range of plans and affordable options to suit your budget and employees' needs, even with just 2 employees.

Hassle-free application and claims made easy

Application for Employees FlexCare is hassle-free through our online application portal, with no medical underwriting required for Group Hospitalisation & Surgical and Group Personal Accident. Outpatient claims are made easy through digital submission via mobile app or online portal.

Cashless² cover at Income Insurance's panel of General Practitioner or Specialist clinics

Enjoy cashless² outpatient consultation at Income's extensive network of panel of General Practitioner (GP) and Specialist clinics (with referral letter from panel GP or Specialist).

Premiums are based on portfolio underwriting

Premium rates are determined by the entire Employees FlexCare portfolio. With portfolio underwriting, your premiums will not be directly impacted by increased claims made by your employees.

OVERVIEW OF EMPLOYEES FLEXCARE

Main Plan Can be purchased on standalone basis	Group Hospital and Surgical Covers eligible medical expenses incurred as a result of hospitalisation, surgery or accident.	Group Term Life Covers death or total and permanent disability (TPD before age 65).	Group Personal Accident Covers accidental death, permanent disablement due to accident and accidental medical expenses.
Rider Must be purchased with Main Plan	Group Outpatient Primary Care	Group Critical Illness – Accelerated Provides lump sum payout upon diagnosis of any of the 37 specified Critical Illnesses.	Not Applicable
	Group Outpatient Specialist Care		
	Group Dental		

MAIN PLAN: GROUP HOSPITAL AND SURGICAL (GHS)

The plan covers eligible medical expenses incurred as a result of hospitalisation, surgery or accident.

Benefit Schedule	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Type of Hospital	Private	Private	Restructured	Private	Restructured
Overall Annual Limit (including all benefits)	\$200,000	Not Applicable			
Room and Board (up to 120 days)	1 Bed	1 Bed	1 Bed	4 Bed	4 Bed
Intensive Care Unit High Dependency Ward (per disability)	As charged up to Annual Limit	\$15,000	\$10,000	\$10,000	\$10,000
Other Hospital Services		\$25,000 per disability	\$20,000 per disability	\$15,000 per disability	\$15,000 per disability
Surgical Expenses - Waiver of Surgical Table if insured member is admitted to restructured hospital. - Surgeon's fee of more than \$1,500 is subject to Surgical Table if insured member is admitted to a private hospital.					
Daily In-Hospital Physician's Consultation (up to 120 days)					
Ambulance Services					
Pre-Hospitalisation Specialist Consultation (up to 120 days before hospitalisation or surgery)		\$3,000	\$2,000	\$1,500	\$1,500
Pre-Hospitalisation Diagnostic X-Ray and Laboratory Fees (up to 120 days before hospitalisation or surgery)					
Post-Hospitalisation Treatment (up to 120 days from the insured member's last discharge date from hospital)					
Medical Report Fees		\$150	\$150	\$150	\$150
Overseas Hospitalisation Due to Accidental Causes		150% of Inpatient Benefits including Pre- and Post-Hospitalisation Treatment (Accidental only)			
Miscarriage Benefit	\$3,000	\$2,000	\$1,500	\$1,000	\$1,000
Emergency Accidental Out-patient Treatment	\$3,000	\$2,000	\$2,000	\$1,000	\$1,000

Benefit Schedule	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Outpatient Dental Treatment (due to Accident)	\$3,000	\$2,000	\$2,000	\$1,000	\$1,000
Surgical Implants	\$5,000	\$3,000	\$2,000	\$1,500	\$1,000
Inpatient Psychiatric Treatment	\$8,000	\$5,000	\$5,000	\$2,000	\$2,000
Outpatient Kidney Dialysis (per policy year)	\$25,000	\$20,000	\$20,000	\$10,000	\$10,000
Outpatient Cancer Treatment (per policy year)	\$25,000	\$20,000	\$20,000	\$10,000	\$10,000
Death Benefit	\$5,000	\$5,000	\$5,000	\$5,000	\$5,000
Rehabilitation Benefits (up to maximum benefit limit or up to 31 days, whichever is earlier)	\$10,000	\$8,000	\$8,000	\$5,000	\$5,000
Home Nursing Care (per policy year) (up to the maximum benefit limit or up to 30 days, whichever is earlier)	\$10,000	\$6,000	\$6,000	\$3,000	\$3,000
Group Extended Major Medical					
Eligible medical expenses payable for:	Not Applicable	Maximum limit per disability			
- Hospitalisation of more than 20 days; or		\$100,000	\$100,000	\$60,000	\$40,000
- Surgical expenses of at least 75% of the benefit payable under the surgical table.					
Type of Hospital		Private	Restructured	Private	Restructured
Room and Board (Standard)		1 Bed	1 Bed	4 Bed	4 Bed
- Payable from 121 days onwards					
Intensive Care Unit		Payable in excess of the Basic Hospital and Surgical Benefits plan up to the maximum limit shown above.			
High Dependency Ward					
Other Hospital Services					
Surgical Expenses					
Daily In-Hospital Physician's Consultation		Pays from 121 days onwards			
Surgical Implants		\$5,000	\$5,000	\$2,000	\$2,000
Co-insurance		10%	10%	10%	10%

Benefit Schedule	Plan 6	Plan 7
	For Work permit or S Pass holders only	
Type of Hospital	Restructured	
Overall Annual Limit	\$60,000	\$60,000
Room and Board (Standard) (up to 120 days)	4 Bed	4 Bed
Intensive Care Unit High Dependency Ward (up to 30 days)	As charged up to Annual Limit	As charged up to Annual Limit
Other Hospital Services		
Surgical Expenses		
Daily In-Hospital Physician's Consultation (up to 120 days)		
Ambulance Services		
Pre-Hospitalisation Specialist Consultation (up to 90 days before hospitalisation or surgery)		
Pre-Hospitalisation Diagnostic X-Ray and Laboratory Fees (up to 90 days before hospitalisation or surgery)		
Post-Hospitalisation Treatment (up to 90 days from the insured member's last discharge date from hospital)		
Medical Report Fees		
Rehabilitation Benefits in a Community Hospital (up to maximum benefit limit or up to 31 days, whichever is earlier)		
Co-insurance	Policyholder pays - 25% Income Insurance pays - 75% Apply after \$15,000 annual limit (accumulative per year)	0%
Outpatient Dental Treatment (due to Accident) Provided treatment is sought within 24-hours following the accident	\$200	\$200
Outpatient Kidney Dialysis / Cancer Treatment (per policy year)	\$5,000	\$5,000
Repatriation of Mortal Remains	\$2,000	\$2,000
Overseas Hospitalisation Benefit due to emergency (per year)	\$3,000	\$3,000
Accidental Death (not due to work related causes)	\$10,000	\$10,000
Death Benefit	\$3,000	\$3,000
Pro-ration Factors Admitted into a higher ward or hospital Private Hospitals A1 Class in Restructured Hospitals	Income Insurance pays: 45% 65%	

Annual Premium Rates (Premium inclusive of 9% GST)

Age last birthday	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
0 to 30	\$857.83	\$427.28	\$317.19	\$222.36	\$178.76
31 to 35	\$974.90	\$482.87	\$364.06	\$253.97	\$198.38
36 to 40	\$985.03	\$500.31	\$381.50	\$268.14	\$216.91
41 to 45	\$1,129.24	\$535.19	\$405.48	\$300.84	\$237.62
46 to 50	\$1,437.17	\$745.56	\$542.82	\$413.11	\$319.37
51 to 55	\$1,843.19	\$947.21	\$675.80	\$516.66	\$407.66
56 to 60	\$2,284.97	\$1,172.84	\$891.62	\$651.82	\$547.18
61 to 65	\$3,272.02	\$1,650.26	\$1,245.87	\$857.83	\$717.22
66 to 69	\$4,560.84	\$2,153.84	\$1,686.23	\$1,149.95	\$974.46
70 to 72^	\$6,473.29	\$3,008.40	\$2,429.61	\$1,582.68	\$1,395.20
73 to 75^	\$6,473.29	\$3,525.06	\$2,845.99	\$1,854.09	\$1,635.00

^renewal premium

Annual Premium Rates (Premium inclusive of 9% GST)

Age last birthday	Plan 6	Plan 7
16 to 50	\$185.30	\$273.59
51 to 69	\$412.02	\$572.25
70 to 72^	\$412.02	\$572.25
73 to 75^	\$412.02	\$572.25

^renewal premium

OPTIONAL RIDER: GROUP OUTPATIENT PRIMARY CARE (GP)

This rider can be attached to the Group Hospital and Surgical plan. This rider reimburses outpatient medical expenses incurred in GP clinics and the respective X-Ray or Laboratory Test.

Benefit Schedule	Plan 1	Plan 2
Visit to Panel General Practitioner (GP) clinics	As charged	As charged
Visit to Polyclinics (on reimbursement basis)	As charged	As charged
Panel X-Ray and laboratory test (referred by Panel GP clinics or Polyclinics)	As charged	As charged
Visit to Non-panel GP clinics (on reimbursement basis)	\$35 per visit	\$35 per visit
Panel Telemedicine (up to 3 visits per year)	As charged	As charged

Benefit Schedule	Plan 1	Plan 2
Visit to Accidental & Emergency department of Singapore hospitals (on reimbursement basis, up to 3 visits per year)	\$100 per visit	\$80 per visit
Overseas outpatient treatment (on reimbursement basis)	\$35 per visit	\$35 per visit
Visit to Traditional Chinese Physician (TCM) (By registered TCM in Singapore) (on reimbursement basis, up to 5 visits per year)	\$35	\$35
Co-payment (applicable to all benefits)	Not Applicable	\$10
Annual Premium inclusive of 9% GST	\$313.92	\$252.88

OPTIONAL RIDER: GROUP OUTPATIENT SPECIALIST CARE

Group Outpatient Specialist Care rider can be purchased only when Group Outpatient Primary Care (GP) is taken up. This rider reimburses outpatient medical expenses incurred in Specialist clinics and the respective X-Ray or Laboratory Test.

Benefit Schedule	Plan 1	Plan 2
Referral letter from a Registered Medical Practitioner is required for all benefits		
Specialist Consultation & Medication - By Panel Specialist (on cashless basis) - By Specialist Outpatient Clinics in Restructured Hospitals (on reimbursement basis)	\$1,500 per year	\$1,000 per year
Non-Panel Specialist Consultation & Medication (on reimbursement basis)	\$300 per year	\$200 per year
Specialist X-Ray and Laboratory Test - Panel Specialist (on cashless basis) - Specialist Outpatient Clinics in Restructured Hospitals (on reimbursement basis) - Non-Panel Specialist (on reimbursement basis) Diagnostic Test (including MRI or CT scan) (on reimbursement basis)	\$1,000 per year	\$800 per year
Occupational therapy or Physiotherapy or Chiropractor* (on reimbursement basis) *Waiver of referral letter for Chiropractor	\$500 per year	\$500 per year
Outpatient Psychiatric Treatment (on reimbursement basis)	\$500 per year	Not Applicable
Annual Premium inclusive of 9% GST	\$222.36	\$144.97

OPTIONAL RIDER: GROUP DENTAL

This rider can be attached to the Group Hospital and Surgical plan.

Benefit Schedule	Plan 1	Plan 2
Maximum benefit per member per year	\$600	\$300
This section offers wide range of treatments such as: <ul style="list-style-type: none"> - Consultation and Oral Examination - Medication including administration of Local Anesthesia - X-Rays - Dental Prophylaxis Amalgam / Composite Fillings Tooth-Colored Restorations Extractions - Sedative Dressings - Retention pins - restoration of tooth - Oral Surgery (surgical root removal or removal of wisdom tooth) - Pulp / Root Canal Treatment Periodontal Treatment Root Planning - Crowning (due to accidental cause) - Bridges (due to accident cause) - Tooth replantation (insured member's own natural tooth) 	As charged	As charged
Co-insurance (per claim)	20%	20%
Annual Premium inclusive of 9% GST	\$211.46	\$158.05

MAIN PLAN: GROUP TERM LIFE (GTL)

This plan provides coverage for death and total and permanent disability (TPD before age 65).

Group Term Life (GTL)	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Sum assured	\$500,000	\$300,000	\$200,000	\$100,000	\$50,000

Annual Premium Rates

Age last birthday	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
0 to 30	\$375	\$225	\$150	\$75	\$38
31 to 35	\$400	\$240	\$160	\$80	\$40
36 to 40	\$475	\$285	\$190	\$95	\$48
41 to 45	\$750	\$450	\$300	\$150	\$75
46 to 50	\$1,100	\$660	\$440	\$220	\$110
51 to 55	\$2,000	\$1,200	\$800	\$400	\$200
56 to 60	\$3,575	\$2,145	\$1,430	\$715	\$358
61 to 65	\$6,000	\$3,600	\$2,400	\$1,200	\$600
66 to 69	\$9,100	\$5,460	\$3,640	\$1,820	\$910

OPTIONAL RIDER: GROUP CRITICAL ILLNESS (Accelerated)

With this rider, your employees can receive a lump sum pay out upon diagnosis of any of the 37 specified Critical Illnesses.

Group Critical Illness (Accelerated)	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Sum assured	\$250,000	\$150,000	\$100,000	\$80,000	\$50,000

Annual Premium Rates

Age last birthday	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
0 to 30	\$163	\$98	\$65	\$52	\$33
31 to 35	\$214	\$128	\$85	\$68	\$43
36 to 40	\$362	\$217	\$145	\$116	\$72
41 to 45	\$576	\$346	\$230	\$184	\$115
46 to 50	\$1,063	\$638	\$425	\$340	\$213
51 to 55	\$1,988	\$1,193	\$795	\$636	\$398
56 to 60	\$2,750	\$1,650	\$1,100	\$880	\$550
61 to 65	\$4,625	\$2,775	\$1,850	\$1,480	\$925
66 to 69	\$7,521	\$4,513	\$3,009	\$2,407	\$1,504

Note: Premium rates for all main plans and riders are not guaranteed and may be reviewed from time to time. The premiums that you pay are based on the insured's age last birthday. Premium rates will change when the insured enters a higher age band.

MAIN PLAN: GROUP PERSONAL ACCIDENT (GPA)

This plan covers accidental death, permanent disablement due to accident and accidental medical expenses.

Group Personal Accident (GPA)	Plan 1	Plan 2	Plan 3
Accidental Death	\$500,000	\$300,000	\$100,000
Permanent Disablement	\$500,000	\$300,000	\$100,000
Accidental Medical Expenses	\$5,000	\$4,000	\$2,000

Annual Premium Rates (Premium inclusive of 9% GST)

Occupational Class	Plan 1	Plan 2	Plan 3
Class 1	\$231.08	\$138.43	\$45.78
Class 2	\$299.75	\$179.85	\$59.95
Class 3	\$446.90	\$268.14	\$89.38

Note: Premium rates for all main plans and riders are not guaranteed and may be reviewed from time to time.

UNDERWRITING GUIDELINES

Eligibility Age for Cover

Product	Full Time Employee	Spouse	Child
Group Hospital and Surgical	69 years old and below, renewable up to 75 years old (age last birthday)		15 days to 24 years old, provided that the child is unmarried and unemployed, and not enlisted in full time National Service.
Group Outpatient Primary Care Rider			
Group Outpatient Specialist Care Rider			
Group Dental Rider			
Group Personal Accident			
Group Term Life	69 years old (age last birthday) and below		
Group Critical Illness (Accelerated) Rider			

- For Group Term Life plan, plan type (sum assured) of more than \$150,000 (for full time employee) and \$100,000 (for spouse and child(ren)) will be subject to underwriting.
- For Group Critical Illness (Accelerated) plan, plan type (sum assured) of more than \$100,000 (for full time employee) and \$50,000 (for spouse and child(ren)) will be subject to underwriting.
- For Group Term Life and Group Critical Illness (Accelerated) plans, employees and their spouse who are 65 to 69 years old are required to complete the Group Health Declaration Form and their application will be subject to underwriting.
- The plan type for the dependants should be the same as employee. If you allow the dependants to take up the plan, it will be compulsory to all eligible employees under the same occupation category or basis of coverage.

Period of Insurance

- Duration of policy coverage is for 12 months and renewable yearly.

Participation Requirement

- A minimum of 2 employees is required under each product plan type.
- Group Hospital and Surgical Plan - Plan 6 and Plan 7 are applicable to employee who is holding a Work Permit or S Pass issued by Ministry of Manpower only.

Pro-ration Factor – Group Hospital and Surgical Plan

a) Applicable to Plan 1, 2, 3, 4 and 5:

- Private and Overseas Hospital – All Bed Type. We shall pay 60% of the payable hospital bills.
- Restructured Hospital – Single Bed. We shall pay 75% of the payable hospital bills.

b) Applicable to Plan 6 & 7:

- Private Hospitals - All Bed Type. We shall pay 45% of the payable hospital bills.
- Restructured Hospitals – A1 Class or Single Bed. We shall pay 65% of the payable hospital bills.

Product Plan Type Selection Guidelines

a) Group Term Life and Group Critical Illness (Accelerated) plan type selected must be the same.

b) Group Term Life or Group Personal Accident plan type selected must be the same for all employees under the same occupation category or same basis of coverage.

c) Plan type selected must be the same as basis of category.

d) Plan upgrading is allowed upon renewal anniversary date. Claim for pre-existing conditions will be assessed based on prior upgraded plan, unless the insured member has been continuously covered for 12 months under the upgraded plan.

e) Cross Plan selection is allowed.

For example, employees covered under Plan 1 of Group Hospital and Surgical can purchase:

- Plan 3 of Group Term Life.
- Plan 2 of Group Outpatient Primary Care and Plan 1 of Group Outpatient Specialist Care – all employees and dependants must be covered under the same plan type.
- Plan 2 of Group Personal Accident.

Occupational Class

All Occupational Class listed below is applicable to Group Personal Accident plan only.

Occupational Class	Description
Class 1	Clerical, administrative or other similar non-hazardous occupations such as accountant, lawyer, banker, doctor, teacher, nurse, secretary, etc.
Class 2	Occupations where some degree of risk is involved, such as supervision of manual workers, totally administrative job in an industrial environment, professions of an outdoor nature, work involving overseas travel or work involving the occasional use of tools or machinery, such as foreman, grocer, hairdresser, salesman, tailor, surveyor, tourist guide, etc.
Class 3	Occupations involving regular light to medium manual work with no substantial hazard which may increase the risk of sickness or accident. Examples are professions involving the use of tools or machinery, such as a carpenter, builder, painter, driver, technician, hawker, unarmed security guard, etc.

Annual Premium Rates

- Premium rates are based on insured's age last birthday for Group Hospital & Surgical plan, Group Term Life and Group Critical Illness (Accelerated).
- Premium rates will change when the insured enters a higher age band (except for Group Personal Accident).
- Premium rates include prevailing GST except for Group Term Life and Group Critical Illness (Accelerated) plans.
- Premium rates are not guaranteed and are subject to change without prior notice.

Exclusions

There are certain conditions under which no benefits will be payable. These are stated as exclusions in the policy contract. You are advised to read the policy contract for the full list of exclusions. Please see below for a list of some exclusions for the following plans:

- Group Hospital and Surgical
 - Pre-existing conditions are excluded for the first 12 months of continuous coverage for all plans
 - Pre-existing cancer or kidney treatment will be permanently excluded
 - Birth defects; congenital illness or abnormalities

Applicable to insured member(s) who is/are holding S Pass or Work permit issued by Ministry of Manpower (MOM)

- Pre-existing conditions are excluded for the first 12 months of continuous coverage
- Treatment for or in respect of any illness or injury suffered by the insured member arising from any malicious, unlawful or wilful act of the employer
- Treatment for or in respect of any illness or injury suffered by the insured member arising from any criminal act of the insured member
- First treatment from the hospital for each of the following categories will be covered under this policy. The second and subsequent occasion of the treatment will not be covered:
 - i) Treatment for or in respect of any illness or injury suffered by the insured member arising from the insured member's addiction to alcohol, or to a drug that is not a controlled drug
 - ii) Treatment of illness or injuries arising from insured member's voluntary participation in any strike, riot or civil commotion
 - iii) Treatment for or in respect of any illness or injuries suffered by the insured member arising from any attempted suicide by the insured member
 - iv) Treatment of illness or injury arising from any inflicted injuries, or any attempt to cause self-inflicted injury or attempted self-inflicted injury by the insured member
 - v) Treatment for or in respect of any psychiatric or nervous or mental disorder suffered by the insured member

b) Group Term Life

- Pre-existing conditions which existed before the effective date or commencement date of this policy
 - Self-inflicted injury, or any attempt threat, while sane or insane
- Unless the insured member has been insured continuously for 12 months under this plan.

c) Group Critical Illness (Accelerated)

- Self-inflicted injury or illness
- The influence or deliberate misuse of drugs or alcohol
- An episode of coronary artery or ischaemic heart disease that happens before the effective date of the insured member's cover

- Any pre-existing condition relating directly or indirectly to the critical illness or where the insured member received medical treatment or asked for medical advice (which related directly or indirectly to the critical illness) before the effective date of the insured member's cover; or
- Acquired immunodeficiency syndrome (AIDS), AIDS-related complex or infection by human immunodeficiency virus (HIV) except HIV due to blood transfusion and occupationally acquired HIV as shown in the list of critical illness

d) Group Personal Accident

- Self-inflicted injuries, any attempt threat while sane or insane or attempted suicide
- Insurrection, declared or undeclared war or any warlike operations, military or naval service in time of declared or undeclared war or while under orders for warlike operations or restoration of public order
- Participation in competitive racing on wheels
- Occupational Class which is not Class 1, 2 or 3 as set out in this policy
- Pre-existing condition which existed before the effective date or commencement date of this policy

e) Group Outpatient Primary Care and Group Outpatient Specialist Care

- Health screening related examinations including multiphasic health screening, laboratory tests and X-rays, screening mammograms; services (irrespective of whether there is hospital confinement) for the primary purpose of diagnosis, medical check-up, genetic screening; pap smear; cytology test; allergy test, any treatment of a preventive nature including but not limited to immunisation / vaccinations
- Hormone Replacement Therapy, health supplements or vitamins, toiletries including but not limited to moisturiser, cream, gel, lotion
- Any surcharge incurred after the normal operating hours of the panel clinic
- Treatment by Specialist without referral letter from Registered Medical Practitioner
- Second opinion by a Specialist

f) Group Dental Rider

- Any treatment for corrective purposes including but not limited to crowning, bridges, or tooth replantation except as a result of an accident
- Prosthetic appliances
- Procedures with respect to congenital malformations, orthodontic treatment, surgery for cosmetic/reconstructive reason except as a result of an accident

g) Change of terms and conditions

We may vary the premiums, benefits and/or cover, or amend the terms and conditions of your policy due to circumstances including but not limited to updates to legislation, regulatory requirements or government guidance, by giving you 30 days' prior written notice at your last known address. If you do not agree with the changes to your policy, you may choose not to renew your policy.

h) Cancellation

You may cancel this policy by giving 30 days' written notice subject to short period rates charges. We may also cancel the cover on any insured member for failing to comply with the terms and conditions of the policy. If your policy is cancelled by us, there shall be a pro-rated refund of premiums to you for the unexpired part of the period of insurance under your policy.

i) Pre-Contract Disclosure Form for Group Hospital and Surgical Plan 6 and 7 (applicable to Work Permit or S Pass holders).

This product provides coverage for the following features that comply with the Ministry of Manpower's (MOM) enhanced Medical Insurance requirements.

Description	Yes / No
Annual claim limit of at least \$60,000, inclusive of a first-dollar cover of \$15,000.	Yes
For portion of bill above \$15,000, the employer must co-pay up to 25% (to the hospital).	Yes*
Exclusions are in line with MOM's list of allowable exclusions.	Yes
Age-differentiated premiums are in 2 age bands: (1) aged 50 and below and (2) aged above 50.	Yes
We will reimburse our portion of the hospital bill to hospitals directly upon admissibility of the medical claim.	Yes

*For Plan 6 only

j) Claims Submission

The insured member has to notify us, within 30 days from the hospital latest discharge date, of any possible claim. For death claim, notice must be given within 3 months from the death of the insured member.

Please refer to the policy contract for the full details of the claims conditions.

k) The Total Distribution Cost

The total distribution cost of this product is between 10% to 15% of the premium. Such costs include cash payments in the form of commission, costs of benefits, and services paid to the distribution channel. We assure you that the Total Distribution Cost is not an additional cost to you, as it was already accounted in the calculation of your premium.

This policy is not a Medisave-approved policy, and you may not use Medisave to pay the premium for this policy.

Documents Required

Apply for Employees FlexCare through online via BIX with the following documents:

- a) Group Health Declaration Form is required under Group Term Life & Group Critical Illness (Accelerated) for the following:
 - i) Employees with sum assured exceeded \$150,000 for Group Term Life and \$100,000 for Group Critical Illness (Accelerated).
 - ii) Spouse or children with sum assured exceeded \$100,000 for Group Term Life and \$50,000 for Group Critical Illness (Accelerated).
 - iii) Employees and their spouse age between 65 to 69 years old.
- b) Accounting and Corporate Regulatory Authority (ACRA) Business Profile (within 6 months' validity) and a list of directors with executive authority in the company.
- c) Customer Due Diligence Form (CDD) for plan with Group Term Life with a list of names, identification numbers and signatory of authorised personnel appointed to act for and on behalf of the company. Each authorised personnel is to provide a clear copy (front and back) of the National Registration Identity Card (NRIC) or work pass.
- d) GST registered form.

Frequently asked questions

1) What is the minimum group size to be eligible for Employees FlexCare (“this plan”)?

You will need a minimum of 2 employees to be eligible for this plan. This is also applicable for the rider chosen.

2) What is the eligible age for cover for my employees?

Product	Full Time Employee
Group Hospital and Surgical	69 years old and below, renewable up to 75 years old (age last birthday)
Group Personal Accident	
Group Outpatient Rider	
Group Dental Rider	
Group Term Life	69 years old (age last birthday) and below
Group Critical Illness (Accelerated) Rider	

3) Can I upgrade the employee plan midway to the Policy?

No, plan upgrading is allowed only upon renewal anniversary date.

Claim for pre-existing conditions will be assessed based on prior upgraded plan, unless the insured member has been continuously covered for 12 months under the upgraded plan.

4) Can I extend Employees FlexCare, Group Hospital and Surgical plan to my employee(s) who is/are holding S Pass or Work Permit?

Yes, you may select Plan 6 or 7 to cover this group of employees subject to minimum headcount of 2 employees.

5) Can I extend Employees FlexCare to my employees' dependants?

Yes, if you allow the dependants to take up this plan, it will be compulsory to all eligible employees under the same occupation category or basis of coverage. The plan type for the dependants should not be higher than the employees' plan type.

For Group Outpatient Primary Care and Group Outpatient Specialist Care, dependants must take up these riders if they are purchased for the employees.

6) Can I choose the plan type according to my employees' occupation category?

Yes, the same selected plan type will apply to all employees under the same category.

7) Does Employees FlexCare cover my employees and their dependants for any pre-existing conditions?

For Group Hospital and Surgical plan, pre-existing conditions are excluded for the first 12 months of continuous coverage except for pre-existing cancer or kidney treatment for which the condition will be permanently excluded.

For Group Term Life plan, pre-existing conditions are excluded for the first 12 months of coverage.

For Group Critical Illness (Accelerated) plan, pre-existing conditions are permanently excluded.

8) Can I choose Group Outpatient Primary Care and Group Outpatient Specialist Care plan type for different occupation categories of my employees?

No, employees in all occupation categories must be covered under the same plan type.

9) Is referral letter required for visitation to Income Insurance's panel Specialist or Specialist Outpatient Clinics in Restructured Hospital?

Yes, referral letter is required from the Registered Medical Practitioner. Please make a copy of the referral letter and present it to the panel Specialist or Specialist Outpatient Clinics in Restructured Hospital upon visitation. Visit to Specialist without referral letter is not payable.

10) What should my employees do if they visit Income Insurance's panel GP or Specialist clinic?

Please present his/her Outpatient e-Medical Card and NRIC or work pass upon registration.

Please note that if your employee fails to present these documents, the clinic will collect cash from your employee and we will reimburse the claim based on non-panel benefit limit.

11) Does my employee have to pay for the surcharge levied by the panel clinics after their operating hours?

Yes, your employee will have to pay for the surcharge as Group Outpatient Primary Care and Group Outpatient Specialist Care do not cover for the surcharge levy by the panel clinics.

12) Will my renewal premium be affected if my employee made a large claim in the previous year?

The premiums are based on portfolio underwriting. It will be reviewed based on the entire portfolio's total premium and total claims. Any change in premium rates will apply to all policyholders of Employees FlexCare policies and will apply upon renewal.

13) How do I apply for Employees FlexCare?

You can apply for Employees FlexCare through online via BIX. Please prepare the following documents together with the **Required Documents** stated in the brochure:

1. Your company's ACRA Business Profile (within 6 months validity).
2. A list of directors with executive authority in the company: their names, identification numbers and signatory of authorised personnel appointed to act for and on behalf of the company. Each authorised personnel is to provide a clear copy (front and back) of the NRIC or work pass.

Alternatively, should you face any issue with the online submission, please email bix@income.com.sg for assistance.

14) How do I make a claim?

Please notify us within 30 days of any possible claims and submit the original hospital bills, medical receipt and discharge summary with the completed and signed claim form to us within 60 days from the date of occurrence. For death claim, please submit the Death Certificate with the completed and signed claim form to us within 3 months after the insured's death. Please refer to the policy contract for the full details of the claims conditions.

IMPORTANT NOTES

- 1 Cover will cease if insured member resides outside Singapore and/or Johor Bahru for more than 180 days per trip.
- 2 Upon presentation of outpatient e-medical card at the respective panel General Practitioner and Specialist clinics.

This is for general information only and does not constitute an offer, recommendation, solicitation or advice to buy or sell any product(s). You can find the usual terms, conditions and exclusions of this plan in the policy contract. All our products are developed to benefit our customers but not all may be suitable for your specific needs. If you are unsure if this plan is suitable for you, we strongly encourage you to speak to a qualified insurance advisor. Otherwise, you may end up buying a plan that does not meet your expectations or needs. As a result, you may not be able to afford the premiums or get the insurance protection you want. This plan does not have any cash value.

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 Income Insurance or visit the GIA/LIA or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

This advertisement has not been reviewed by the Monetary Authority of Singapore.

Information is correct as at 1 February 2026.

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Financial planning, made for the moments that matter to you.

About Income Insurance

Income Insurance Limited (Income Insurance) is one of the leading composite insurers in Singapore, offering life, health and general insurance. Established in Singapore to plug a social need for insurance in 1970, Income Insurance continues to put people first by serving the protection, savings and investment needs of individuals, families and businesses today. Its lifestyle-centric and data-driven approach to insurance and financial planning puts the company at the forefront of innovative solutions that empowers the people it serves with better financial well-being.

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