

# Enhanced IncomeShield

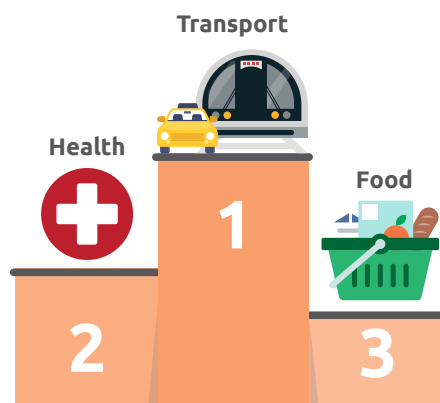
Your reliable healthcare partner that provides unlimited lifetime coverage for your medical and hospitalisation expenses.

HEALTH INSURANCE



# DID YOU KNOW?

In 2025, **Health emerged as one of the main contributors to the Consumer Price Index-All Items inflation rate<sup>1</sup>**. Without proper financial planning, rising medical costs could result in considerable stress and financial strain for you and your family.



**Cancer incidence increased most rapidly in individuals younger than 50 years, especially in those aged 30-39 years, since 2008-2012<sup>2</sup>, and with many cancers being treatable if detected early<sup>3</sup>**, having adequate coverage is important to help ease financial worries and provides one with the assurance to explore advanced treatments - such as proton beam therapy and cell, tissue and gene therapy, that may enhance one's survival rates.

Medical treatments can be very costly, depending on factors such as your medical condition, duration of treatment and hospital type. This can potentially lead to high out-of-pocket expenses and loss of future income.



## Examples of medical bills received by Income Insurance in 2025

Medical Condition	Age	Medical Bill Size	
		Percentile	
		75 <sup>th</sup>	90 <sup>th</sup>
Breast Cancer	30 - 60	\$235,863	\$361,696
Lung Cancer	30 - 60	\$319,655	\$346,306
Heart Disease	51 - 60	\$71,787	\$164,517

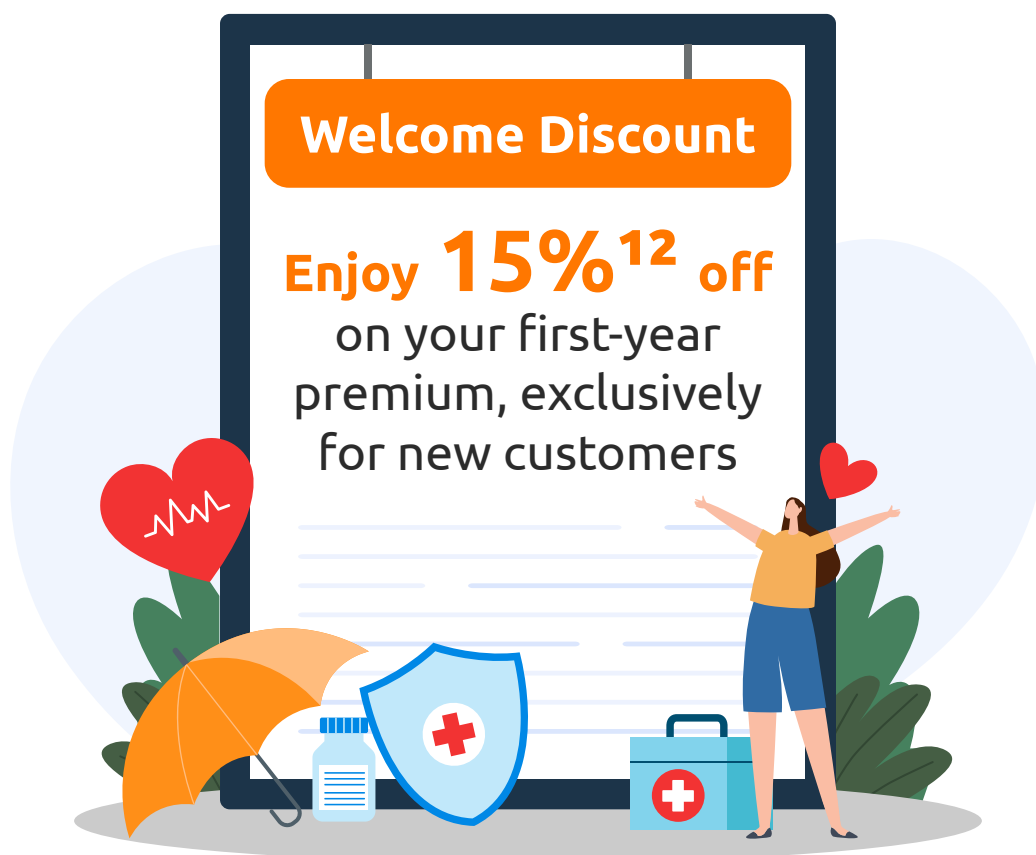
This table is based on specific medical diagnoses in relation to the stated category of medical conditions in a private hospital.

## Enhance your MediShield Life coverage with Enhanced IncomeShield

While MediShield Life (MSHL) is a national health insurance scheme that provides basic health coverage, unexpected medical costs can still add up. This is why you may need a more comprehensive protection plan to minimise your out-of-pocket expenses so you can focus on recovery.

Enhanced IncomeShield is a MediSave-approved Integrated Shield Plan (IP) that gives you the assurance that your hospital and surgical expenses<sup>4</sup> are well taken care of. Plus, you can add Optima Care or Essential Care rider to your Enhanced Preferred or Enhanced Advantage plan and enjoy one of the highest cancer coverage in Singapore with up to 23x<sup>5</sup> MSHL monthly claim limit for outpatient treatments<sup>6</sup> listed on the Cancer Drug List (CDL) for one primary cancer, up to \$250,000 for Cell, Tissue and Gene Therapy (CTGTP) listed on Ministry of Health's (MOH) CTGTP list for one treatment per indication per lifetime<sup>7</sup>, up to \$150,000 for CTGTP treatments not listed on MOH's CTGTP list for one treatment per indication per lifetime<sup>8</sup>, and up to \$100,000 for Proton Beam Therapy<sup>9</sup> for each policy year.

Furthermore, you can use MediSave to pay your premiums (up to the Additional Withdrawal Limits<sup>10</sup>, excluding riders), keeping them affordable. Rest assured, whether you have made numerous claims or none at all, your future premiums are unaffected by your claims history<sup>11</sup>.



## Key Benefits



**Up to \$1.5 million limit in each policy year** for medical treatment



**Coverage with no lifetime limit<sup>13</sup>**, so your loved ones are relieved of the financial burden if something unforeseen happens



**Reimbursement for all benefits**, including **pre- and post-hospitalisation coverage for up to 180 days and 365 days, respectively<sup>14</sup>**



**As charged coverage for selected benefits<sup>15</sup>** for treatments at the entitled ward



**High coverage for advanced treatments** – up to \$250,000 for Cell, Tissue and Gene Therapy listed on MOH's CTGTP list for one treatment per indication per lifetime<sup>7</sup> and up to \$100,000 for Proton Beam Therapy<sup>9</sup> for each policy year

One of the highest in SG<sup>16</sup>



**Get higher limits for the insured receiving treatment for multiple primary cancers** under the Cancer Drug Treatment Benefit<sup>6</sup> and Cancer Drug Services Benefit<sup>17</sup>



**Covers up to \$20,000 for Inpatient Psychiatric Treatment Benefit** for each policy year

One of the highest in SG



**Access to our panels<sup>18</sup> of over 600 specialists** across various specialties and sub-specialties in private practice island-wide, specially curated to meet your medical needs at quality clinical standards

The above benefits vary according to the plan type. For details, you may refer to the schedule of benefits.

## Choose your preferred healthcare plan based on your financial and medical needs

Our range of plans is built to fit diverse needs and budgets, including the Enhanced Basic plan, which is one of Income Insurance's most affordable health insurance plans.



### Enhanced Preferred

Standard room in a private hospital or private medical institution

Policy limit of up to \$1,500,000 each policy year

### Enhanced Advantage

Restructured hospital for ward class A and below

Policy limit of up to \$1,000,000 each policy year

### Enhanced Basic

Restructured hospital for ward class B1 and below

Policy limit of up to \$250,000 each policy year

## Supplement your Enhanced IncomeShield with a rider

Get added protection with our new Optima Care or Essential Care rider. These supplementary riders enhance your Enhanced IncomeShield plan, offering extra layers of protection and peace of mind.

### Key Benefits



**Tiered co-payment applies based on whether the treatment is provided by our panel<sup>18</sup>, extended panel<sup>18</sup> or others, with a co-payment limit of up to \$6,000 each policy year** if the treatment is provided by our panel<sup>18</sup> and extended panel<sup>18</sup>



**Get up to 18x MSHL claim limit monthly** for outpatient treatments<sup>6</sup> listed on the CDL for one primary cancer so you can focus on treatment and recovery

One of the highest in SG<sup>16</sup>



**Enhanced coverage for multiple primary cancers outpatient treatment claims**, up to the total of the highest limits among the covered cancer drug treatments<sup>6</sup> on the CDL that are administered for each primary cancer in that month and up to \$15,000 monthly on non-CDL treatments<sup>19</sup> for each primary cancer



**Get up to \$150,000 for Cell, Tissue and Gene Therapy treatments** not listed on MOH's CTGTP list for one treatment per indication per lifetime<sup>8</sup>

NEW



Get extended protection with **added pre- and post-hospitalisation coverage<sup>20,21</sup>** giving you greater peace of mind

NEW



**Enjoy a one-time Autism Testing Benefit<sup>21,22</sup> reimbursement of up to \$1,000** with a 10% co-payment if the insured child undergoes an autism test

Highest in SG (Enhanced Preferred plan)



**Receive a one-time Critical Care Benefit<sup>21,23</sup> of up to \$50,000** if the insured child requires an intensive care unit (ICU) or high dependency unit (HDU) stay of 4 days or more in one hospital admission, providing greater peace of mind

First in SG among IP plans

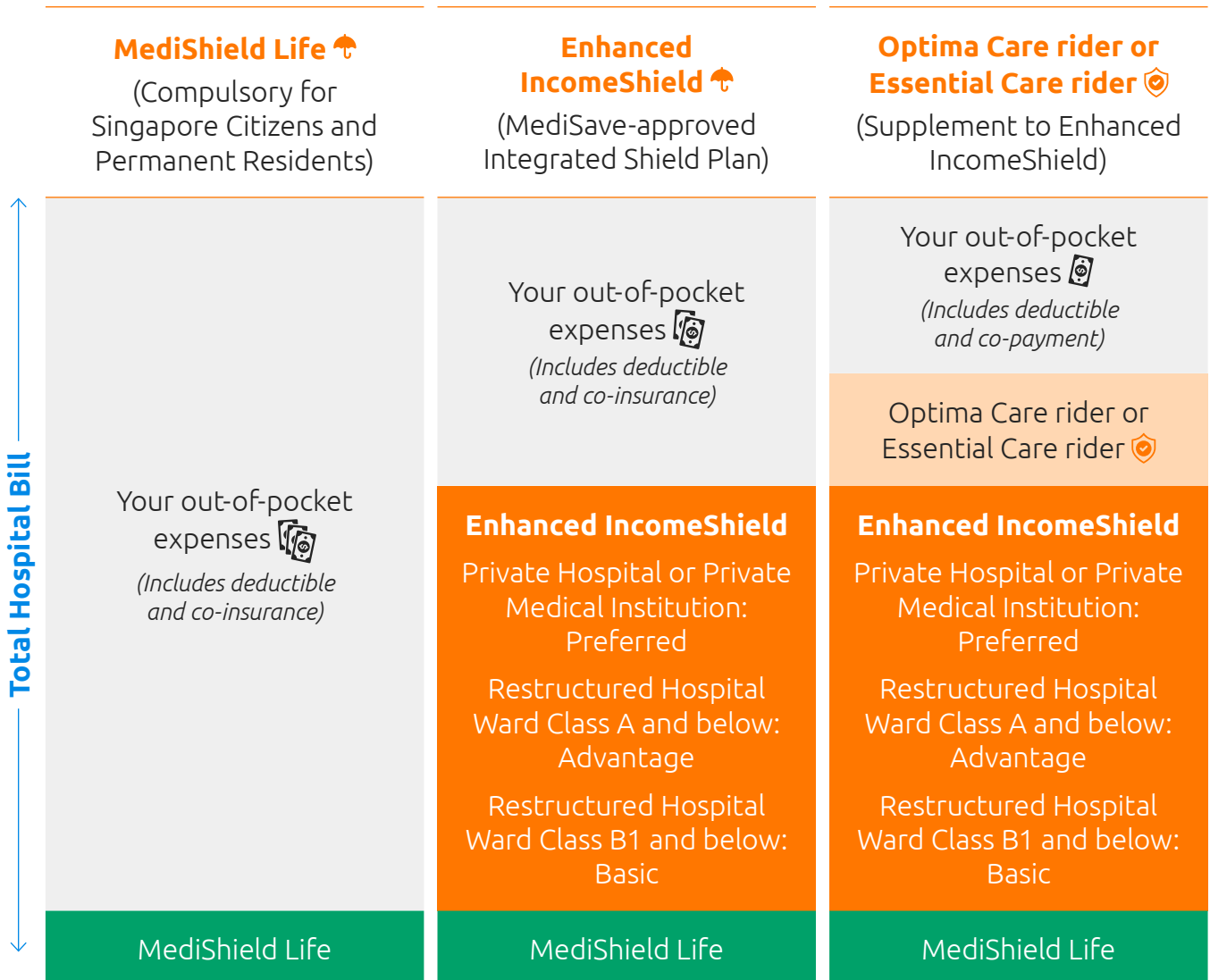


**Receive up to \$80 each day, for up to 10 days per hospital stay**, to cover the cost of an extra bed if the insured child<sup>24</sup> is hospitalised

The above riders' benefits vary according to the plan type. For details, you may refer to the schedule of benefits below.

## How can Enhanced IncomeShield and our supplementary riders help

MSHL alone may not be sufficient to cover your hospital bills. Our comprehensive coverage helps alleviate the burden of your medical and hospitalisation expenses<sup>4</sup> by further reducing your out-of-pocket expenses. Below is our solution for greater protection.



Deductible means the part of the benefit you are claiming that the insured must pay before Income Insurance will pay any benefit.

Co-insurance means the amount that you need to pay after the deductible. The co-insurance percentages for the benefits are shown in the schedule of benefits. Co-insurance applies to all claims made under your policy except for final expenses benefit.

For yearly premium rates, visit the following links:

- Enhanced IncomeShield: [income.com.sg/health-and-personal-accident/enhanced-incomeshield/premiums](https://income.com.sg/health-and-personal-accident/enhanced-incomeshield/premiums)
- Optima Care rider: [income.com.sg/health-and-personal-accident/enhanced-incomeshield/optima-care-rider-premiums](https://income.com.sg/health-and-personal-accident/enhanced-incomeshield/optima-care-rider-premiums)
- Essential Care rider: [income.com.sg/health-and-personal-accident/enhanced-incomeshield/essential-care-rider-premiums](https://income.com.sg/health-and-personal-accident/enhanced-incomeshield/essential-care-rider-premiums)

## How Enhanced IncomeShield and our riders work for you



Mr Lee, age 40, is covered under the Enhanced IncomeShield Preferred plan and was hospitalised in a private hospital for surgery to treat his lung cancer. His total bill was \$50,000.

With the coverage from the Enhanced IncomeShield Preferred plan, here is a comparison of Mr Lee's out-of-pocket expenses with and without the Optima Care or Essential Care rider for the treatment performed at a private hospital provided by our panel<sup>18</sup>:

Enhanced IncomeShield Plan <b>without</b> Rider		Enhanced IncomeShield Plan with <b>Optima Care Rider</b>		Enhanced IncomeShield Plan with <b>Essential Care Rider</b>	
<b>Total Hospital Bill: \$50,000</b>		<b>Total Hospital Bill: \$50,000</b>		<b>Total Hospital Bill: \$50,000</b>	
<b>Bill amount covered by insurance:</b>		<b>Bill amount covered by insurance:</b>		<b>Bill amount covered by insurance:</b>	
Enhanced IncomeShield Preferred Plan: (including MSHL)	\$41,850	Enhanced IncomeShield Preferred Plan: (including MSHL)	\$41,850	Enhanced IncomeShield Preferred Plan: (including MSHL)	\$41,850
		Optima Care Rider:	\$2,325	Essential Care Rider:	\$1,395
<b>Out-of-pocket expenses:</b>		<b>Out-of-pocket expenses:</b>		<b>Out-of-pocket expenses:</b>	
Deductible:	\$3,500	Deductible:	\$3,500	Deductible:	\$3,500
Co-insurance: (10% of the hospital bill in excess of Deductible)	\$4,650	Co-payment: (5% of the benefits due under the policy, up to \$6,000)	\$2,325	Co-payment: (7% of the benefits due under the policy, up to \$6,000)	\$3,255
Total amount paid by Mr Lee: <b>\$8,150</b>		Total amount paid by Mr Lee: <b>\$5,825</b>		Total amount paid by Mr Lee: <b>\$6,755</b>	



With coverage from the Enhanced IncomeShield Preferred plan and Optima Care rider or Essential Care rider, here is a comparison of Mr Lee’s out-of-pocket expenses if he chooses to have his treatment provided by a specialist in our extended panel<sup>18</sup> or other specialist in a private hospital:

Treatment provided by a <b>specialist in our extended panel<sup>18</sup></b>			
Enhanced IncomeShield Plan with <b>Optima Care Rider</b>		Enhanced IncomeShield Plan with <b>Essential Care Rider</b>	
<b>Total Hospital Bill: \$100,000</b>		<b>Total Hospital Bill: \$100,000</b>	
<b>Bill amount covered by insurance:</b>		<b>Bill amount covered by insurance:</b>	
Enhanced IncomeShield Preferred Plan: <i>(including MSHL)</i>	\$86,850	Enhanced IncomeShield Preferred Plan: <i>(including MSHL)</i>	\$86,850
Optima Care Rider:	\$3,650	Essential Care Rider:	\$3,650
<b>Out-of-pocket expenses:</b>		<b>Out-of-pocket expenses:</b>	
Deductible:	\$3,500	Deductible:	\$3,500
Co-payment: <i>(8% of the benefits due under the policy, up to \$6,000)</i>	\$6,000	Co-payment: <i>(10% of the benefits due under the policy, up to \$6,000)</i>	\$6,000
Total amount paid by Mr Lee: <b>\$9,500</b>		Total amount paid by Mr Lee: <b>\$9,500</b>	

Treatment provided by <b>other specialist</b>			
Enhanced IncomeShield Plan with <b>Optima Care Rider</b>		Enhanced IncomeShield Plan with <b>Essential Care Rider</b>	
<b>Total Hospital Bill: \$100,000</b>		<b>Total Hospital Bill: \$100,000</b>	
<b>Bill amount covered by insurance:</b>		<b>Bill amount covered by insurance:</b>	
Enhanced IncomeShield Preferred Plan: <i>(including MSHL)</i>	\$86,850	Enhanced IncomeShield Preferred Plan: <i>(including MSHL)</i>	\$86,850
Optima Care Rider:	\$1,930	Essential Care Rider:	\$0
<b>Out-of-pocket expenses:</b>		<b>Out-of-pocket expenses:</b>	
Deductible:	\$3,500	Deductible:	\$3,500
Co-payment: <i>(8% of the benefits due under the policy, no limit)</i>	\$7,720	Co-payment: <i>(10% of the benefits due under the policy, no limit)</i>	\$9,650
Total amount paid by Mr Lee: <b>\$11,220</b>		Total amount paid by Mr Lee: <b>\$13,150</b>	

Figures are illustrative only to facilitate understanding of the rider's benefits and assume that the bill is not limited or excluded by policy terms and conditions.

## IMPORTANT NOTES

<sup>^</sup>Based on a survey by Nielsen IQ between January 2023 to December 2025, with 11,040 health insurance policyholders between 21 and 65 years old, Income Insurance ranked first at 33% as a health insurance company that can be trusted in good and bad times.

- 1 Singapore Department of Statistics, [Singapore Consumer Price Index \(CPI\)](#).
- 2 National Registry of Diseases Office, [Singapore Cancer Registry Infographic 2022](#).
- 3 National Registry of Diseases Office, [Singapore Cancer Registry 50th Anniversary Monograph 1968-2017](#).
- 4 Subject to precise terms, conditions and exclusions specified in the policy conditions for Enhanced IncomeShield and riders.
- 5 Enhanced IncomeShield covers 5x MediShield Life (MSHL) Limit and 18x MSHL Limit for one primary cancer when you add an Optima Care or Essential Care rider to your Enhanced Preferred or Enhanced Advantage plan.
- 6 This benefit covers the main outpatient hospital treatment received by the insured from a hospital or a licensed medical centre or clinic. For cancer drug treatment, only cancer drug treatments listed on the Cancer Drug List (CDL) and used according to the indications for the cancer drugs, as specified in the CDL on Ministry of Health (MOH) website ([go.gov.sg/moh-cancerdruglist](http://go.gov.sg/moh-cancerdruglist)) will be covered. For each primary cancer, if the cancer drug treatment on the CDL involves more than one drug, we allow a particular drug to be removed from the treatment or replaced with another drug on the CDL that has the indication 'for cancer treatment', only if this is due to intolerance or contraindications (for example, allergic reactions). In such cases, the claim limit of the original cancer drug treatment on the CDL will apply.

For each primary cancer, if more than one cancer drug treatment is administered in a month, the following will apply.

- If any of the cancer drug treatments that are on the CDL has an indication that states 'monotherapy', only the treatments on the CDL that have the indication 'for cancer treatment' will be covered in that month.
- If none of the cancer drug treatments that are on the CDL has an indication that states 'monotherapy':
  - if more than one of the cancer drug treatments administered in a month has an indication other than 'for cancer treatment', only cancer drug treatments that are on the CDL and have the indication 'for cancer treatment' will be covered in that month; and
  - if one or none of the cancer drug treatments administered in a month has an indication other than 'for cancer treatment', all cancer drug treatments that are on the CDL will be covered in that month.

Cancer drug treatments not on the CDL will be considered as having an indication other than 'for cancer treatment'.

For insured receiving treatment for one primary cancer, we will pay up to the highest limit among the covered cancer drug treatments on the CDL that are administered in that month.

The cancer drug treatment on the CDL benefit limit is based on a multiple of the MSHL Limit for the specific cancer drug treatment. For the latest MSHL Limit, refer to the CDL on MOH's website under "MediShield Life Claim Limit per month" ([go.gov.sg/moh-cancerdruglist](http://go.gov.sg/moh-cancerdruglist)). MOH may update this from time to time. The revised list will be applicable to the cancer drug treatment which occurred on and from the effective date of the revised list.

You do not have to pay a deductible for outpatient hospital treatment benefit.

- 7 Cell, tissue and gene therapy benefit pays for cell, tissue and gene therapy provided to the insured which is on MOH's Cell, Tissue and Gene Therapy Product (CTGTP) list as long as the following conditions are met.
  - The cell, tissue and gene therapy is approved by MOH and Health Sciences Authority (HSA).
  - The registered medical practitioner recommends in writing that the insured needs the cell, tissue and gene therapy for necessary medical treatment, according to the relevant guidelines from MOH.
  - The cell, tissue and gene therapy is on MOH's CTGTP list, and is provided to the insured according to the indications on the CTGTP list, as shown on MOH's website ([go.gov.sg/ctgtp-list](http://go.gov.sg/ctgtp-list)). MOH may update this list from time to time. We will only cover the cell, tissue and gene therapies listed in the schedule of benefits.

We will not pay the cell, tissue and gene therapy benefit under any other benefit, regardless of whether the cell, tissue and gene therapy is provided as inpatient or outpatient hospital treatment.

## IMPORTANT NOTES

- 8 Cell, tissue and gene therapy benefit pays for all reasonable expenses for inpatient hospital treatment (including day surgery) and outpatient hospital treatment for cell, tissue and gene therapy (CTGTP) not on MOH's CTGTP list ([go.gov.sg/ctgtp-list](http://go.gov.sg/ctgtp-list)) provided to the insured, up to the limits shown in the policy conditions, as long as the cell, tissue and gene therapy is approved by the HSA. When we pay the cell, tissue and gene therapy benefit under this rider, we add together all reasonable expenses for the cell, tissue and gene therapy treatment (including inpatient hospital treatment and outpatient hospital treatment), and pay up to the limits shown in the policy conditions.  
 You may make a claim under this benefit as long as you have not fully used the benefit payable up to the benefit limit in the policy conditions. We will pay the claim amount based on the following:
  - If the claim amount after applying the co-payment is higher than the remaining benefit payable under this rider, we will pay up to the remaining benefit limit.
  - If the claim amount after applying the co-payment is lower than the remaining benefit payable under this rider, you will have to make a co-payment of the benefits due under your policy as shown in the policy conditions and we will only pay the amount of your claim which is more than the co-payment.
- 9 We will only cover the proton beam therapy if it is administered for an MOH-approved proton beam therapy indication (that is, MOH has approved the therapy for the insured's condition) and the insured meets the eligibility criteria for proton beam therapy under MSHL. The proton beam therapy indications and the eligibility criteria are set out on MOH's website ([go.gov.sg/pbt-approved-indications](http://go.gov.sg/pbt-approved-indications)). MOH may update these from time to time.
- 10 The Additional Withdrawal Limit (AWL) is the maximum MediSave limit that you can use for your Enhanced IncomeShield's additional private insurance coverage premiums. Please refer to [moh.gov.sg/healthcare-schemes-subsidies/medishield-life](http://moh.gov.sg/healthcare-schemes-subsidies/medishield-life) for the latest AWL.
- 11 The premiums of Enhanced IncomeShield are based on factors such as medical inflation and overall claims experience. There is no additional premium loading on individual policies that have made claim(s).
- 12 We offer 15% off ("Welcome Discount") on your first-year premium with the purchase of Enhanced IncomeShield Preferred, Advantage or Basic Plan (each a "Qualifying Policy") and/or Optima Care Rider or Essential Care Rider (each a "Rider"). The Welcome Discount is only applicable if no additional exclusion or premium loading is applied to the Qualifying Policy and applicable Riders upon policy issuance. The Welcome Discount is only applicable to a Rider if the Rider is taken up together with the Qualifying Policy. The Welcome Discount does not apply to the premium for the MediShield Life portion. Welcome Discount terms and conditions apply. Please refer to [income.com.sg/integrated-shield-plan/welcome-discount-tnc.pdf](http://income.com.sg/integrated-shield-plan/welcome-discount-tnc.pdf) for further details.
- 13 Subject to policy year limits and any benefit limits.
- 14 Pre-hospitalisation and post-hospitalisation treatment are not covered for treatment given before or after inpatient psychiatric treatment, accident inpatient dental treatment or emergency overseas treatment. We do not cover pre-hospitalisation and post-hospitalisation treatment if, under the policy, we do not pay for the inpatient hospital treatment received during the stay in the hospital. Post-hospitalisation treatment, such as medication bought during a period of post-hospitalisation treatment but not used during that period, is not covered.  
 If the inpatient hospital treatment is provided by our panel and paid for under the Enhanced IncomeShield Preferred plan, we will cover the cost of medical treatment the insured received in the policy year for up to 180 days before the date they went into the hospital and up to 365 days after the date they left the hospital.  
 Please refer to the policy conditions for further details.
- 15 We will reimburse you for the eligible hospitalisation cost you have incurred, subject to deductible, co-insurance, admission of ward class, benefit limits, and any other policy terms (including exclusions).
- 16 Applicable to Enhanced Preferred and Enhanced Advantage plans only.
- 17 For cancer drug services, it covers services that are part of any outpatient cancer drug treatment, such as consultations, scans, lab investigations, preparing and administering the cancer drug, supportive-care drugs and blood transfusions. It does not cover services provided before the insured is diagnosed with cancer or after the cancer drug treatment has ended.  
 The cancer drug services benefit limit is based on a multiple of the MSHL Limit for cancer drug services. For the latest MSHL Limit for cancer drug services, refer to "Cancer Drug Services" under the MSHL benefits on MOH's website ([go.gov.sg/mshlbenefits](http://go.gov.sg/mshlbenefits)). MOH may update this from time to time. The revised limit will be applicable to the cancer drug services incurred within the policy year of the revised limit.

## IMPORTANT NOTES

18 Panel or preferred partner means a registered medical practitioner, specialist, hospital or medical institution approved by us. Our list of approved panels also includes all restructured hospitals, community hospitals and voluntary welfare organisations (VWO) dialysis centres.

Extended panel means a registered medical practitioner or specialist approved by us to provide cover for the benefits under this rider. The registered medical practitioner or specialist must not also be on our lists of approved panels or preferred partners and must meet other criteria, including being on another Integrated Shield Plan provider's panel list.

The list of our approved panels, preferred partners, and extended panel can be found at [income.com.sg/specialist-panel](https://income.com.sg/specialist-panel). We may update this list from time to time.

19 For outpatient cancer drug treatments not on the CDL, we cover only treatments with drug classes A to E (according to the Life Insurance Association, Singapore's (LIA's) Non-CDL Classification Framework). Refer to [lia.org.sg/media/3553/non-cdl-classification-framework.pdf](https://lia.org.sg/media/3553/non-cdl-classification-framework.pdf) for more details. LIA may update the list from time to time.

20 Pre-hospitalisation and post-hospitalisation benefit is only applicable if your plan is either the Enhanced IncomeShield Preferred plan or the Enhanced IncomeShield Advantage plan. This benefit applies on top of the pre-hospitalisation treatment benefit and post-hospitalisation treatment benefit covered under your Enhanced IncomeShield Preferred plan or Enhanced IncomeShield Advantage plan (where applicable), up to the limits shown in the policy conditions. Please refer to the policy conditions for further details.

21 Applicable only when you add the Optima Care rider to your Enhanced Preferred or Enhanced Advantage plan.

22 Autism testing benefit is only payable for insured up to age 18 (next birthday) for the relevant plan. This benefit is payable if the insured undergoes an autism test, on a reimbursement basis, up to the limits for the relevant plan shown in the policy conditions. There must be a referral from a paediatrician for the autism test. This benefit is only payable once in the lifetime of your policy. You will have to make a 10% co-payment for each claim for this benefit due under your policy. Please refer to the policy conditions for further details on the co-payment limit.

23 Critical care benefit is only payable for insured up to age 18 (next birthday) for the relevant plan. If the insured requires a stay in an intensive care unit (ICU) or high dependency unit (HDU) for a total of 4 days or more in one hospital admission, we will pay the benefit as shown in the policy conditions. The stay in the ICU or HDU must be confirmed as necessary medical treatment. We will not consider a stay in ICU or HDU as necessary medical treatment if the insured can be safely and adequately treated in any other facility. This benefit is not payable for the following:

- the insured suffered symptoms of, had investigations for, or was diagnosed with illness any time before or within 90 days from the start date of this rider (except for accidents).
- claims for overseas treatment, including emergency overseas treatment.

This benefit is only payable once in the lifetime of your policy. Co-payment is not applicable for this benefit.

24 If, during the insured's stay in hospital, their parent or guardian stays in the same room as the insured, we will reimburse up to \$80 for each day the parent or guardian stays. We will only pay for the stay of one parent or guardian. This applies if the insured is a child aged 18 or younger during their stay in hospital. We will pay up to 10 days for each stay in hospital. If the insured is in hospital for only part of a day, we will pay half of this benefit for that day. Co-payment is not applicable for this benefit.

Enhanced IncomeShield is available as a MediSave-approved Integrated Shield Plan for the insured who is a Singapore Citizen or a Singapore Permanent Resident. This applies as long as the insured meets the eligibility conditions under MediShield Life. If the insured is a foreigner who has an eligible valid pass with a foreign identification number (FIN), Enhanced IncomeShield is not available as an Integrated Shield Plan.

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 policy at [income.com.sg/enhanced-incomeshield-policy-conditions.pdf](https://income.com.sg/enhanced-incomeshield-policy-conditions.pdf), [income.com.sg/optima-care-rider-policy-conditions.pdf](https://income.com.sg/optima-care-rider-policy-conditions.pdf) and [income.com.sg/essential-care-rider-policy-conditions.pdf](https://income.com.sg/essential-care-rider-policy-conditions.pdf). 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 product is suitable for you, we strongly encourage you to speak to a qualified insurance advisor. Otherwise, you may end up buying a product 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. If you find that this policy is not suitable after purchasing it, you may terminate it within the free-look period and obtain a refund of the premiums paid.

Protected up to specified limits by SDIC.

Information is correct as at 28 April 2026.

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# Schedule of benefits for Enhanced IncomeShield and each supplementary rider



## Coverage for Enhanced IncomeShield

Benefits	Enhanced IncomeShield (Includes MediShield Life (MSHL) payout)		
	Preferred	Advantage	Basic
<b>Ward entitlement</b>	Standard room in a private hospital or private medical institution	Restructured hospital for ward class A and below	Restructured hospital for ward class B1 and below
<b>Inpatient hospital treatment</b>	Limits of compensation		
Daily ward and treatment charges (each day) <sup>a</sup> - Normal ward (including MIC@Home) - Intensive care unit ward	As charged		
Surgical benefits (including day surgery) (each procedure)  Surgical limits table - limits for various categories of surgery, as classified by the Ministry of Health (MOH) in its latest surgical operation fees tables:  Table 1 (less complex procedures) Table 2 Table 3 Table 4 Table 5 Table 6 Table 7 (more complex procedures)			
Organ transplant benefit (including stem-cell transplant)			
Surgical implants <sup>b</sup>			
Radiosurgery			
Accident inpatient dental treatment			
Pre-hospitalisation treatment <sup>c,d</sup>			

Benefits	Preferred	Advantage	Basic
<b>Inpatient hospital treatment</b>	<b>Limits of compensation</b>		
Post-hospitalisation treatment <sup>c,d</sup>	As charged Not provided by our panel <sup>e</sup> : up to 100 days after discharge Provided by our panel <sup>e</sup> : up to 365 days after discharge	As charged Up to 100 days after discharge	
Community hospital (Rehabilitative) <sup>a,f</sup>	As charged (up to 90 days for each admission)		
Community hospital (Sub-acute) <sup>a,f</sup>			
Inpatient palliative care service (General)	As charged		
Inpatient palliative care service (Specialised)			
<b>Outpatient hospital treatment<sup>g</sup></b>	<b>Limits of compensation</b>		
Radiotherapy for cancer - External (except Hemi-body) - Brachytherapy - Hemi-body - Stereotactic	As charged		
Kidney dialysis			
Erythropoietin for chronic kidney failure			
Immunosuppressants for organ transplant			
Long-term parenteral nutrition			
Home Ventilation and Respiratory Support Service <sup>h</sup> (each month)	\$1,680	Covered up to MSHL benefits only	
Paediatric Home Care <sup>h</sup> (each month)	\$840		
Negative Pressure Wound Therapy <sup>h</sup> (each day)	\$240		
Repetitive Transcranial Magnetic Stimulation <sup>h</sup> (each treatment session)	\$240 (up to 39 treatments per lifetime)		
Pasteurised Donated Human Milk <sup>h</sup> (each day)	\$170		
Hyperbaric Oxygen Therapy <sup>h</sup> (each treatment session)	\$1,560		
Outpatient Parenteral Antibiotic Therapy <sup>h</sup> (each day)	\$180		
<b>Insured receiving treatment for one primary cancer</b>			
Cancer drug treatment (each month) <sup>i</sup>	5x MSHL Limit for one primary cancer		
Cancer drug services (each policy year) <sup>j</sup>			

Benefits	Preferred	Advantage	Basic
Outpatient hospital treatment <sup>9</sup>	Limits of compensation		
Insured receiving treatment for multiple primary cancers <sup>k</sup>			
Cancer drug treatment (each month) <sup>i</sup>	The total of the highest limits among the covered cancer drug treatments received for each primary cancer		
Cancer drug services (each policy year) <sup>j</sup>	5x MSHL Limit for multiple primary cancers		
<b>Special benefits</b>	<b>Limits on special benefits</b>		
Breast reconstruction after mastectomy <sup>l</sup>	As charged		
Congenital abnormalities benefit	As charged (with 12 months' waiting period)		
Pregnancy and delivery-related complications benefit <sup>m</sup>	As charged (with 10 months' waiting period)		
Living organ donor (insured) transplant benefit – insured as the living donor donating an organ	As charged, up to \$60,000 (each transplant with 24 months' waiting period for the person receiving the organ)	As charged, up to \$40,000 (each transplant with 24 months' waiting period for the person receiving the organ)	As charged, up to \$20,000 (each transplant with 24 months' waiting period for the person receiving the organ)
Living organ donor (non-insured) transplant benefit (each transplant) – insured as the recipient of organ	As charged, up to \$60,000	Covered up to MSHL benefits only	
Cell, tissue and gene therapy benefit <sup>n</sup> (one treatment per indication per lifetime) - Kymriah - Yescarta	As charged, up to \$250,000  As charged, up to \$250,000	As charged, up to \$150,000 As charged, up to \$150,000	
Proton beam therapy (each policy year) <sup>o</sup>	As charged, up to \$100,000		As charged, up to \$70,000
Continuation of autologous bone marrow transplant treatment for multiple myeloma (each policy year)	As charged, up to \$25,000		As charged, up to \$10,000
Inpatient psychiatric treatment benefit (each policy year)	As charged, up to \$20,000	As charged, up to \$10,000	As charged, up to \$7,000
Prosthesis benefit (each policy year)	As charged, up to \$10,000	As charged, up to \$6,000	As charged, up to \$6,000
Emergency overseas treatment	As charged but limited to costs of Singapore private hospitals	As charged but limited to costs of ward class A in Singapore restructured hospitals	As charged but limited to costs of ward class B1 in Singapore restructured hospitals

Benefits	Preferred	Advantage	Basic
<b>Special benefits</b>	<b>Limits on special benefits</b>		
Waiver of pro-ration factor for outpatient kidney dialysis	Does not apply	Waive pro-ration factor for applicable treatment provided by our preferred partner <sup>e</sup>	
Final expenses benefit (waiver of co-insurance and deductible) <sup>p</sup>	\$5,000		\$3,000
<b>Pro-ration factor<sup>a</sup></b>	<b>SG/PR/FR</b>	<b>SG/PR/FR</b>	<b>SG/PR/FR<sup>r</sup></b>
<b>Inpatient</b>			
<ul style="list-style-type: none"> <li>- Restructured hospital               <ul style="list-style-type: none"> <li>- Ward class C, B2 or B2+</li> <li>- Ward class B1</li> <li>- Ward class A</li> </ul> </li> <li>- Private hospital or private medical institution or emergency overseas treatment</li> <li>- Community hospital               <ul style="list-style-type: none"> <li>- Ward class C, B2 or B2+</li> <li>- Ward class B1</li> <li>- Ward class A</li> </ul> </li> </ul>	Does not apply	Does not apply Does not apply Does not apply  50%  Does not apply Does not apply Does not apply	Does not apply Does not apply 70%  35%  Does not apply Does not apply 70%
<b>Day surgery or short-stay ward</b>			
<ul style="list-style-type: none"> <li>- Restructured hospital subsidised</li> <li>- Restructured hospital non-subsidised</li> <li>- Private hospital or private medical institution or emergency overseas treatment</li> </ul>	Does not apply	Does not apply Does not apply  55%	Does not apply Does not apply  40%
<b>Outpatient hospital treatment excluding dialysis and erythropoietin</b>			
<ul style="list-style-type: none"> <li>- Restructured hospital subsidised</li> <li>- Restructured hospital non-subsidised</li> <li>- Private hospital or private medical institution</li> </ul>	Does not apply	Does not apply Does not apply  45%	Does not apply Does not apply  30%
<b>Outpatient hospital treatment for dialysis and erythropoietin</b>			
<ul style="list-style-type: none"> <li>- Restructured hospital subsidised</li> <li>- MOH-subvented Voluntary Welfare Organisations</li> <li>- Restructured hospital non-subsidised</li> <li>- Private hospital or private medical institution</li> </ul>	Does not apply	Does not apply Does not apply Does not apply  45%	Does not apply Does not apply Does not apply  30%

SG: Singapore Citizen | PR: Singapore Permanent Resident | FR: Foreigner

Benefits	Preferred	Advantage	Basic
<b>Deductible for each policy year for an insured aged 80 years or below at next birthday<sup>s</sup></b>			
<b>Inpatient</b>			
– Restructured hospital			
- Ward class C	\$1,500	\$1,500	\$1,500
- Ward class B2 or B2+	\$2,000	\$2,000	\$2,000
- Ward class B1	\$2,500	\$2,500	\$2,500
- Ward class A	\$3,500	\$3,500	\$2,500
– Private hospital or private medical institution or emergency overseas treatment	\$3,500	\$3,500	\$2,500
– Community hospital			
- Ward class C	\$1,500	\$1,500	\$1,500
- Ward class B2 or B2+	\$2,000	\$2,000	\$2,000
- Ward class B1	\$2,500	\$2,500	\$2,500
- Ward class A	\$3,500	\$3,500	\$2,500
<b>Day surgery or short-stay ward</b>			
– Subsidised	\$2,000	\$2,000	\$2,000
– Non-subsidised	\$3,500	\$3,500	\$2,500
<b>Deductible for each policy year for an insured aged over 80 years at next birthday<sup>s</sup></b>			
<b>Inpatient</b>			
– Restructured hospital			
- Ward class C	\$2,250	\$2,250	\$2,250
- Ward class B2 or B2+	\$3,000	\$3,000	\$3,000
- Ward class B1	\$3,750	\$3,750	\$3,750
- Ward class A	\$5,250	\$5,250	\$3,750
– Private hospital or private medical institution or emergency overseas treatment	\$5,250	\$5,250	\$3,750
– Community hospital			
- Ward class C	\$2,250	\$2,250	\$2,250
- Ward class B2 or B2+	\$3,000	\$3,000	\$3,000
- Ward class B1	\$3,750	\$3,750	\$3,750
- Ward class A	\$5,250	\$5,250	\$3,750
<b>Day surgery or short-stay ward</b>			
– Subsidised	\$3,000	\$3,000	\$3,000
– Non-subsidised	\$5,250	\$5,250	\$3,750
<b>Co-insurance</b>	10%		
<b>Limit in each policy year</b>	\$1,500,000	\$1,000,000	\$250,000
<b>Limit in each lifetime</b>	Unlimited		
<b>Last entry age (age next birthday)</b>	75		
<b>Maximum coverage age</b>	Lifetime		

## Coverage for Optima Care rider and Essential Care rider

Benefits	Optima Care Rider			Essential Care Rider		
	Panel <sup>e</sup>	Extended Panel <sup>e</sup>	Others	Panel <sup>e</sup>	Extended Panel <sup>e</sup>	Others
Covers co-insurance	Yes, up to benefit limits					
Co-payment of the benefits due under the policy	5%	8%	8%	7%	10%	10%
Co-payment limit <sup>t</sup> (each policy year)	Up to \$6,000 limit		No limit	Up to \$6,000 limit		No limit
<b>Outpatient Cancer Drug Treatment Benefit limit</b>						
Treatment on the CDL <sup>i</sup> (each month)	<p style="text-align: center;"><b>One Primary Cancer:</b>  <b>Enhanced Preferred (EP):</b> 18x MSHL Limit  <b>Enhanced Advantage (EA):</b> 18x MSHL Limit  <b>Enhanced Basic (EB):</b> 10x MSHL Limit</p> <p style="text-align: center;"><b>Multiple Primary Cancers:</b>                      The total of the highest limits among the covered cancer drug treatments received for each primary cancer</p>					
Non-CDL treatment <sup>u</sup> (each month)	<p style="text-align: center;"><b>One Primary Cancer:</b>  <b>EP:</b> \$15,000  <b>EA:</b> \$7,000  <b>EB:</b> \$6,000</p> <p style="text-align: center;"><b>Multiple Primary Cancers:</b>                      One primary cancer's benefit limit x number of primary cancers</p>					
<b>Co-payment for Cancer Drug Treatment and Cancer Drug Services<sup>v</sup></b>						
Treatment on the CDL	Co-payment of the benefits due under the policy	5%			10%	
	Co-payment limit (each policy year)	Up to \$6,000 limit	No limit	Up to \$6,000 limit	No limit	
Non-CDL treatment	Co-payment of the benefits due under the policy	10%			20%	
	Co-payment limit (each policy year)	No limit			No limit	
Cancer Drug Services	Co-payment of the benefits due under the policy	5%			10%	
	Co-payment limit (each policy year)	Up to \$6,000 limit	No limit	Up to \$6,000 limit	No limit	

Benefits		Optima Care Rider			Essential Care Rider		
		Panel <sup>e</sup>	Extended Panel <sup>e</sup>	Others	Panel <sup>e</sup>	Extended Panel <sup>e</sup>	Others
<b>Cell, Tissue and Gene Therapy Benefit<sup>w</sup> limit</b>							
Treatment not on MOH's CTGTP list (one treatment per indication per lifetime)							<b>EP:</b> \$150,000 <b>EA:</b> \$150,000 <b>EB:</b> \$100,000
<b>Co-payment for Cell, Tissue and Gene Therapy Benefit<sup>w</sup></b>							
Treatment not on MOH's CTGTP list	Co-payment of the benefits due under the policy		10%			20%	
	Co-payment limit (each policy year)		No limit			No limit	
<b>Other benefits</b>							
Pre-hospitalisation Benefit <sup>x</sup> (before admission)		<b>Rider coverage</b>					
		<b>EP:</b> Not applicable  <b>EA:</b> Up to 80 additional days  <b>EB:</b> Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	
		<b>Main plan and rider coverage (if applicable)</b>					
	<b>EP:</b> Up to 180 days  <b>EA:</b> Up to 180 days <sup>y</sup>  <b>EB:</b> Up to 100 days	<b>EP:</b> Up to 100 days <b>EA:</b> Up to 100 days <b>EB:</b> Up to 100 days	<b>EP:</b> Up to 180 days  <b>EA:</b> Up to 100 days  <b>EB:</b> Up to 100 days	<b>EP:</b> Up to 100 days <b>EA:</b> Up to 100 days <b>EB:</b> Up to 100 days			

Benefits	Optima Care Rider			Essential Care Rider		
	Panel <sup>e</sup>	Extended Panel <sup>e</sup>	Others	Panel <sup>e</sup>	Extended Panel <sup>e</sup>	Others
<b>Other benefits</b>						
Post-hospitalisation Benefit* (after discharge)	<b>Rider coverage</b>					
	<b>EP:</b> Not applicable  <b>EA:</b> Up to 80 additional days  <b>EB:</b> Not applicable	<b>EP:</b> Up to 80 additional days <b>EA:</b> Not applicable <b>EB:</b> Not applicable		Not applicable		Not applicable
	<b>Main plan and rider coverage (if applicable)</b>					
	<b>EP:</b> Up to 365 days  <b>EA:</b> Up to 180 days <sup>z</sup>  <b>EB:</b> Up to 100 days	<b>EP:</b> Up to 180 days <sup>z</sup> <b>EA:</b> Up to 100 days <b>EB:</b> Up to 100 days		<b>EP:</b> Up to 365 days  <b>EA:</b> Up to 100 days  <b>EB:</b> Up to 100 days	<b>EP:</b> Up to 100 days <b>EA:</b> Up to 100 days <b>EB:</b> Up to 100 days	
Extra Bed Benefit <sup>aa</sup>	Receive up to \$80 each day (up to a maximum of 10 days for each hospital stay) for the cost of an extra bed for you to sleep over if your insured child <sup>aa</sup> gets warded					
<b>The benefits below are only payable for insured up to age 18 (next birthday)</b>						
Autism Testing Benefit <sup>bb</sup> (once per lifetime)	<b>EP:</b> \$1,000 <b>EA:</b> \$500 <b>EB:</b> Not applicable			Not applicable		
Autism Testing Benefit <sup>bb</sup>	Co-payment of the benefits due under the policy	10%				
	Co-payment limit (each policy year)	No limit				
Critical Care Benefit <sup>cc</sup> (once per lifetime)	<b>EP:</b> \$50,000 <b>EA:</b> \$30,000 <b>EB:</b> Not applicable					
Critical Care Benefit <sup>cc</sup>	Co-payment of the benefits due under the policy	Not applicable				
	Co-payment limit (each policy year)					

## IMPORTANT NOTES

- a. Includes meals, prescriptions, medical consultations, miscellaneous medical charges, specialist consultations, examinations, and laboratory tests. You can refer to clause 1.1a, 1.1b and 1.1c in the policy conditions for Enhanced IncomeShield Plan for details.
- b. Includes charges for the following approved medical items:
  - Intravascular electrodes used for electrophysiological procedures
  - Percutaneous transluminal coronary angioplasty (PTCA) balloons
  - Intra-aortic balloons (or balloon catheters)
- c. Pre-hospitalisation and post-hospitalisation treatment are not covered for treatment given before or after inpatient psychiatric treatment, accident inpatient dental treatment or emergency overseas treatment. Pre-hospitalisation and post-hospitalisation treatment are also not payable if the inpatient hospital treatment received during the stay in hospital is not payable. Post-hospitalisation treatment such as medications bought during a period of post-hospitalisation treatment but not used during that period is not payable. To avoid doubt, pre-hospitalisation and post-hospitalisation treatment do not include inpatient hospital treatment or day surgery.
- d. If the inpatient hospital treatment is provided by our panel and paid for under the Enhanced IncomeShield Preferred Plan, we will cover the cost of medical treatment the insured received for up to 180 days before the stay in hospital starts and up to 365 days after the stay in hospital ends. To avoid doubt, if the insured is under the care of more than one registered medical practitioner or specialist for the insured's stay in hospital, we will cover up to 180 days of pre-hospitalisation treatment and up to 365 days of post-hospitalisation treatment only when the main treating registered medical practitioner or specialist (shown in the hospital records as the principal doctor) is part of our panel.
- e. Panel or preferred partner means a registered medical practitioner, specialist, hospital or medical institution approved by us. Our list of approved panels also includes all restructured hospitals, community hospitals and voluntary welfare organisations (VWO) dialysis centres.  
 Extended panel means a registered medical practitioner or specialist approved by us to provide cover for the benefits under this rider. The registered medical practitioner or specialist must not also be on our lists of approved panels or preferred partners and must meet other criteria, including being on another Integrated Shield Plan provider's panel list.  
 The list of our approved panels, preferred partners, and extended panel can be found at [income.com.sg/specialist-panel](http://income.com.sg/specialist-panel). We may update this list from time to time.
- f. To claim for staying in a community hospital, the conditions as set out in the policy conditions must be met. You can refer to clause 1.1k in the policy conditions for Enhanced IncomeShield Plan for details.
- g. This benefit covers the following main outpatient hospital treatment received by the insured from a hospital or a licensed medical centre or clinic. You can refer to clause 1.2a to 1.2n in the policy conditions for Enhanced IncomeShield Plan for details.
- h. This benefit covers treatments in Singapore restructured hospitals only.
- i. The cancer drug treatment on the Cancer Drug List (CDL) benefit limit is based on a multiple of the MSHL Limit for the specific cancer drug treatment. For the latest MSHL Limit, refer to the CDL on MOH's website under "MediShield Life Claim Limit per month" ([go.gov.sg/moh-cancerdruglist](http://go.gov.sg/moh-cancerdruglist)). MOH may update this from time to time. The revised list will be applicable to the cancer drug treatment which occurred on and from the effective date of the revised list.
- j. The cancer drug services benefit limit is based on a multiple of the MSHL Limit for cancer drug services. For the latest MSHL Limit for cancer drug services, refer to "Cancer Drug Services" under the MSHL benefits on MOH's website ([go.gov.sg/mshlbenefits](http://go.gov.sg/mshlbenefits)). MOH may update this from time to time. The revised limit will be applicable to the cancer drug services incurred within the policy year of the revised limit.
- k. Defined as two or more cancers arising from different sites and are of a different histology or morphology group. The claim limits for patients receiving treatment for multiple primary cancers are accorded on an application basis; doctors are to send the application form to MOH and Income Insurance for assessment of MSHL and Integrated Shield Plan coverage respectively.
- l. The breast reconstruction must be performed by a registered medical practitioner, during a stay in hospital, within 365 days after the date the insured leaves the hospital after the mastectomy was done.
- m. Pregnancy and delivery-related complications benefit pays for inpatient hospital treatment if conditions as set out in the policy conditions are met. You can refer to clause 1.3c in the policy conditions for Enhanced IncomeShield Plan for details.

## IMPORTANT NOTES

- n. The cell, tissue and gene therapy is on MOH's CTGTP list, and is provided to the insured according to the indications on the CTGTP list, as shown on MOH's website ([go.gov.sg/ctgtp-list](http://go.gov.sg/ctgtp-list)). MOH may update this list from time to time. We will only cover the cell, tissue and gene therapies listed above. This is subject to one treatment per indication per lifetime, subject to indication requirements as listed within the MOH CTGTP List.
- o. We will only cover the proton beam therapy if it is administered for an MOH-approved proton beam therapy indication (that is, MOH has approved the therapy for the insured's condition) and the insured meets the eligibility criteria for proton beam therapy under MSHL. The proton beam therapy indications and the eligibility criteria are set out on MOH's website ([go.gov.sg/pbt-approved-indications](http://go.gov.sg/pbt-approved-indications)). MOH may update these from time to time.
- p. We will waive (not enforce) the co-insurance and deductible due for a claim for the inpatient hospital treatment, pre-hospitalisation treatment and post-hospitalisation treatment if the insured dies (i) while in hospital; or (ii) within 30 days of leaving hospital. If the insured dies within 30 days of leaving the hospital, we will also waive the co-insurance due for a claim of outpatient hospital treatment if the treatment was received by the insured within 30 days of leaving hospital.
- q. If the insured is admitted into a ward and medical institution that is higher than what they are entitled to, we will only pay a percentage of the reasonable expenses for necessary medical treatment of the insured. The percentage will depend on the pro-ration factor which applies to the plan. If the insured receives outpatient hospital treatment from a private hospital or private medical institution, we will only pay the percentage of the reasonable expenses for the necessary medical treatment of the insured, depending on the pro-ration factor which applies to the plan.
- r. If the insured is not a Singapore citizen or Singapore permanent resident (is a foreigner) but is covered under a plan for a Singapore citizen, we will reduce the amount of each benefit we will pay to the percentages (citizenship factors) as specified in the policy conditions. The citizenship factor applies to any claim under the policy.
  - Enhanced Basic: 80% (for foreigner)
- s. Deductible does not apply to outpatient treatment.
- t. Subject to precise terms, conditions and exclusions specified in the policy conditions for Enhanced IncomeShield and riders.
- u. For outpatient cancer drug treatments not on the CDL, we cover only treatments with drug classes A to E (according to the Life Insurance Association, Singapore's (LIA's) Non-CDL Classification Framework). Refer to [lia.org.sg/media/3553/non-cdl-classification-framework.pdf](http://lia.org.sg/media/3553/non-cdl-classification-framework.pdf) for more details. LIA may update the list from time to time.
- v. For each outpatient cancer drug treatment claim under your policy (including this rider), you will have to make a co-payment of the benefits due under your policy as shown in the policy conditions. If the insured receives cancer drug treatment that is on the CDL and is provided by our panel or extended panel, the co-payment for that claim will count towards the co-payment limit of \$6,000 in the policy conditions. To avoid doubt, we will not apply the co-payment limit for all non-CDL treatments, even if they are provided by our panel or extended panel. For each cancer drug services claim under your policy, you will have to make a co-payment of the benefits due under your policy as shown in the policy conditions. If the insured receives cancer drug services provided by our panel or extended panel, the co-payment for that claim will count towards the co-payment limit of \$6,000 in the policy conditions.
- w. Cell, tissue and gene therapy benefit pays for all reasonable expenses for inpatient hospital treatment (including day surgery) and outpatient hospital treatment for cell, tissue and gene therapy (CTGTP) not on MOH's CTGTP list ([go.gov.sg/ctgtp-list](http://go.gov.sg/ctgtp-list)) provided to the insured, up to the limits shown in the policy conditions, as long as the cell, tissue and gene therapy is approved by the Health Sciences Authority (HSA). When we pay the cell, tissue and gene therapy benefit under this rider, we add together all reasonable expenses for the cell, tissue and gene therapy treatment (including inpatient hospital treatment and outpatient hospital treatment), and pay up to the limits shown in the policy conditions.

You may make a claim under this benefit as long as you have not fully used the benefit payable up to the benefit limit in the policy conditions. We will pay the claim amount based on the following:

- If the claim amount after applying the co-payment is higher than the remaining benefit payable under this rider, we will pay up to the remaining benefit limit.
- If the claim amount after applying the co-payment is lower than the remaining benefit payable under this rider, you will have to make a co-payment of the benefits due under your policy as shown in the policy conditions and we will only pay the amount of your claim which is more than the co-payment.

**IMPORTANT NOTES**

- x. Pre-hospitalisation and post-hospitalisation benefit is only applicable if your plan is either the Enhanced IncomeShield Preferred plan or the Enhanced IncomeShield Advantage plan. This benefit applies on top of the pre-hospitalisation treatment benefit and post-hospitalisation treatment benefit covered under your Enhanced IncomeShield Preferred plan or Enhanced IncomeShield Advantage plan (where applicable), up to the limits shown in the policy conditions. Please refer to the policy conditions for further details.
- y. Pre-hospitalisation benefit covers up to 100 days before admission under the Enhanced Advantage plan and an additional up to 80 days before admission when you add an Optima Care rider and seek treatment provided by our panel.
- z. Post-hospitalisation benefit covers:
  - up to 100 days after discharge under the Enhanced Preferred plan and an additional up to 80 days after discharge when you add an Optima Care rider and seek treatment not provided by our panel.
  - up to 100 days after discharge under the Enhanced Advantage plan and an additional up to 80 days after discharge when you add an Optima Care rider and seek treatment provided by our panel.
- aa. If, during the insured's stay in hospital, their parent or guardian stays in the same room as the insured, we will reimburse up to \$80 for each day the parent or guardian stays. We will only pay for the stay of one parent or guardian. This applies if the insured is a child aged 18 or younger during their stay in hospital. We will pay up to 10 days for each stay in hospital. If the insured is in hospital for only part of a day, we will pay half of this benefit for that day. Co-payment is not applicable for this benefit.
- bb. Autism testing benefit is only payable for insured up to age 18 (next birthday) for the relevant plan. This benefit is payable if the insured undergoes an autism test, on a reimbursement basis, up to the limits for the relevant plan shown in the policy conditions. There must be a referral from a paediatrician for the autism test. This benefit is only payable once in the lifetime of your policy. You will have to make a 10% co-payment for each claim for this benefit due under your policy. Please refer to the policy conditions for further details on the co-payment limit.
- cc. Critical care benefit is only payable for insured up to age 18 (next birthday) for the relevant plan. If the insured requires a stay in an intensive care unit (ICU) or high dependency unit (HDU) for a total of 4 days or more in one hospital admission, we will pay the benefit as shown in the policy conditions. The stay in the ICU or HDU must be confirmed as necessary medical treatment. We will not consider a stay in ICU or HDU as necessary medical treatment if the insured can be safely and adequately treated in any other facility. This benefit is not payable for the following:
  - the insured suffered symptoms of, had investigations for, or was diagnosed with illness any time before or within 90 days from the start date of this rider (except for accidents).
  - claims for overseas treatment, including emergency overseas treatment.This benefit is only payable once in the lifetime of your policy. Co-payment is not applicable for this benefit.

Enhanced IncomeShield is available as a MediSave-approved Integrated Shield Plan for the insured who is a Singapore Citizen or a Singapore Permanent Resident. This applies as long as the insured meets the eligibility conditions under MediShield Life. If the insured is a foreigner who has an eligible valid pass with a foreign identification number (FIN), Enhanced IncomeShield is not available as an Integrated Shield Plan.

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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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