

PA Assurance Product Summary

Premium Rates Table

The premium rates for this plan are as set out below. Please note that the premium rates are not guaranteed and may be reviewed from time to time depending on our claims experience.

Premium rates without Infectious Disease Cover

Yearly Premium				
Basic	Classic	Superior	Premium	Prestige
\$233.26	\$361.88	\$479.60	\$817.50	\$1,045.31

Monthly Premium				
Basic	Classic	Superior	Premium	Prestige
\$20.71	\$31.61	\$41.42	\$70.85	\$91.56

Premium rates with Infectious Disease Cover

Yearly Premium				
Basic	Classic	Superior	Premium	Prestige
\$255.06	\$409.84	\$552.63	\$941.76	\$1,201.18

Monthly Premium				
Basic	Classic	Superior	Premium	Prestige
\$21.80	\$35.97	\$47.96	\$81.75	\$104.64

Premium rates are inclusive of 9% GST, non-guaranteed and may be reviewed from time to time.

The Total Distribution Cost of this product is between 18.5% - 23.5% of the premium. Such costs include cash payments in the form of commission, costs of benefits and services paid to the distribution channel. Please note that the Total Distribution Cost is not an additional cost to the policyholder; it has already been allowed for in calculating the premium.

Product Information

This is a yearly renewable personal accident policy and will protect the insured person and his/her family financially when there is a death or an injury caused by an accident which happens during the policy period. The amount we will pay depends on the conditions and maximum benefit limits of the insured person's plan as set out in the Table of Cover below.

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

Table of cover¹

Benefits		Maximum benefit (S\$) per insured person				
		Basic	Classic	Superior	Premium	Prestige
Section 1	Accidental death	\$100,000	\$200,000	\$300,000	\$500,000	\$1,000,000
Section 2	Double indemnity for accidental death on public transport	\$100,000	\$200,000	\$300,000	\$500,000	\$1,000,000
Section 3	Permanent disability (per policy year)	\$150,000	\$300,000	\$450,000	\$750,000	\$1,500,000
Section 4	Medical expenses for injury due to an accident					
	Overall section limit (per accident)	\$3,000	\$6,000	\$10,000	\$15,000	\$25,000
	Sub-limit for hospitalisation and day surgery (per accident)	\$3,000	\$6,000	\$10,000	\$15,000	\$25,000
	Sub-limit for outpatient treatment (per accident)	\$2,000	\$3,000	\$5,000	\$10,000	\$20,000
	Sub-limit for physiotherapy (per policy year)	\$1,000	\$1,500	\$2,500	\$4,000	\$6,500
Section 5	Treatment by a Chinese medicine practitioner or a chiropractor (per accident)					
	Overall section limit	\$500	\$750	\$1,000	\$1,250	\$1,500
	Sub-limit for treatment by a Chinese medicine practitioner or a chiropractor	\$50 per visit	\$75 per visit	\$100 per visit	\$125 per visit	\$150 per visit
Section 6	Mobility aids (per accident)	\$2,000	\$3,000	\$4,000	\$5,000	\$6,000
Section 7	Daily hospital income (per day; up to 365 days per policy year)	\$100	\$150	\$200	\$300	\$400
Section 8	ICU triple cover (per day; up to 30 days per accident)	\$300	\$450	\$600	\$900	\$1,200
Section 9	Weekly cash (per week; up to 104 weeks in a row)	\$100	\$150	\$200	\$300	\$500
Section 10	Emergency medical evacuation and sending you home (per policy year)	\$50,000				
Section 11	Trauma counseling expenses (per policy year)	\$5,000				
Section 12	Family support fund	\$5,000	\$10,000	\$15,000	\$25,000	\$35,000
Section 13	Modifying your home (per lifetime)	\$5,000	\$8,000	\$10,000	\$15,000	\$25,000
Section 14	Ambulance fee (per accident)					
	Overall section limit	\$200	\$400	\$600	\$800	\$1,000
	Sub-limit for transport home after hospitalisation	\$50	\$50	\$50	\$50	\$50
Section 15	Extra physiotherapy due to serious permanent disability (per policy year)	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000
Section 16	Diagnostic procedures and tests due to broken bones or fractures (per accident)	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000
Optional Benefits - Infectious disease cover						
Section 17	Death benefit for infectious disease cover	\$100,000	\$200,000	\$250,000	\$300,000	\$500,000

Section 18	Permanent disability for infectious disease cover (per policy year)	\$100,000	\$200,000	\$250,000	\$300,000	\$500,000
Section 19	Medical expenses for infectious disease cover					
	Overall section limit (per infectious disease)	\$3,000	\$6,000	\$10,000	\$15,000	\$25,000
	Sub-limit for hospitalisation and day surgery (per infectious disease)	\$3,000	\$6,000	\$10,000	\$15,000	\$25,000
	Sub-limit for outpatient treatment (per infectious disease)	\$2,000	\$3,000	\$5,000	\$10,000	\$20,000
	Sub-limit for physiotherapy (per policy year)	\$1,000	\$1,500	\$2,500	\$4,000	\$6,500
Section 20	Treatment by a Chinese medicine practitioner for infectious disease cover (per infectious disease)					
	Overall section limit	\$500	\$750	\$1,000	\$1,250	\$1,500
	Sub-limit for treatment by a Chinese medicine practitioner or a chiropractor	\$50 per visit	\$75 per visit	\$100 per visit	\$125 per visit	\$150 per visit
Section 21	Mobility aids for infectious disease cover (per infectious disease)	\$2,000	\$3,000	\$4,000	\$5,000	\$6,000
Section 22	Daily hospital income for infectious disease cover (per day; up to 365 days per policy year)	\$100	\$150	\$200	\$300	\$400
Section 23	ICU triple cover for infectious disease cover (per day; up to 30 days per infectious disease)	\$300	\$450	\$600	\$900	\$1,200
Section 24	Weekly cash for infectious disease cover (per week; up to 104 weeks in a row)	\$100	\$150	\$200	\$300	\$500
Section 25	Emergency medical evacuation and sending you home for infectious disease cover (per policy year)	\$50,000				
Section 26	Trauma counseling expenses for infectious disease cover (per policy year)	\$5,000				
Section 27	Family support fund for infectious disease cover	\$5,000	\$10,000	\$15,000	\$25,000	\$35,000
Section 28	Modifying your home for infectious disease cover (per lifetime)	\$5,000	\$8,000	\$10,000	\$15,000	\$25,000
Section 29	Ambulance fee for infectious disease cover (per infectious disease)					
	Overall section limit	\$200	\$400	\$600	\$800	\$1,000
	Sub-limit for transport home after hospitalisation	\$50	\$50	\$50	\$50	\$50
Section 30	Extra physiotherapy due to serious permanent disability for infectious disease cover (per policy year)	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000
Section 31	Diagnostic procedures and tests for infectious disease cover (per infectious disease)	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000

¹Note: Please refer to the Policy Conditions on details of policy coverage

Key Product Provisions

The following are some key provisions found in the policy contract of this plan. This is only a brief summary and the policyholder is advised to refer to the actual terms and conditions in the contract. Please consult a qualified adviser should you require further explanation.

1. Eligibility

This policy is only available to the insured person if he/she:

- holds a valid Singapore identification document such as a Singapore National Registration Identification Card (NRIC), Employment Pass, Work Permit, Long Term Visit Pass or Student Pass;
- is living or working in Singapore, or away from Singapore for no more than 180 days at any one time;
- is between 15 days old and 70 years old (we may continue cover for him/her up to 80 years old at a reduced sum insured and we may apply new terms; depending on our decision and if he/she pays an extra premium); and
- has fully paid his/her premium.

2. Free-Look Period

We will give the policyholder 14 days from the time they receive this policy to decide whether to continue with it. If the policyholder does not want to continue and there is no claim made under this policy, he/she may call or write to us to cancel this policy. The policyholder will get a full refund of the premium paid. We consider that this policy has been delivered (and received) on the same day we email it, or seven days after we post it. This condition does not apply to policy renewals.

3. Cancellation Clause

- a For policy cancellation, we will not refund any premium if a claim has been made under this policy.
- b If we cancel the policy
 - i) We can cancel this policy by giving the policyholder seven days' written notice. We will consider that they have received this cancellation notice on the same day if we deliver the notice by hand, mail, fax or email.
 - ii) We will cancel this policy on the date the premium is due if we do not receive the premium due or we are not successful in taking the premium from the credit card or GIRO account the policyholder has chosen.

If we cancel this policy because the premium has not been paid, the insured person may apply for a new policy. However, the insured person's application will depend on us accepting it based on his/her latest physical or medical conditions.

- c If there is no claim under this policy and the policyholder wishes to cancel the policy
 - i) Monthly recurring payment arrangement
 - The policyholder may cancel this policy by calling us or writing to us and cancellation will be effective from the date we receive the notice of cancellation.

- For cancellation after the 14-day free-look period, we must receive the notice of cancellation no later than 21 days before the next monthly premium due date. The policy will then be cancelled on the day the monthly premium is due.
- But, if we receive the notice of cancellation less than 21 days before the next monthly premium due date, the policy will be cancelled on the following month when the premium is due.

Cancellation of policy with monthly premium – For example	
Period of insurance	22 Sep 2019 to 21 Sep 2020
Monthly premium due date	22 (Sep, Oct, Nov, Dec, Jan, Feb and so on)
If we receive the notice of cancellation:	
On 1 Oct 2019	cancellation will take effect on 22 Oct 2019.
On 20 Oct 2019	cancellation will take effect on 22 Nov 2019.

ii) Yearly payment arrangement

- The policyholder may cancel this policy by calling us or writing to us and the cancellation will apply from the date we receive the notice of cancellation.
- For cancellation after the 14-day free-look period and:
 - Before the start date of the policy; premium less \$10.90 (after GST).
 - After the start date of the policy, we will work out the premium as follows.

$\frac{\text{Period of insurance (in days) still left to run}}{\text{Original period of insurance of the policy}} \times 85\% \text{ of the premium paid}$
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- We will not refund any premium below \$38.15 (after GST).

If we refund premiums, we will do so to the policyholder.

4. Terms of Renewal

This is a short-term accident and health policy and the insurer is required not to renew this policy. The insurer may terminate this policy by giving you seven days' notice in writing.

If you have any existing medical condition at the policy renewal date, you may not be covered under the renewed policy for such a medical condition. If such a medical condition is covered under the renewed policy, you may need to pay additional premiums.

If this policy is renewed, we will provide the new terms and conditions (if applicable) for the next policy year before the start date of the next policy year.

If we did not receive any request to cancel the policy, we will collect the premium using the last recurring payment arrangement chosen by the policyholder.

This policy will apply for as long as we can successfully take the premium before the premium due date.

5. Non-Guaranteed Premium

The premium that the policyholder pays for this policy is non-guaranteed and can change.

If we change the premium for this policy, we will write to the policyholder at their last known address or email address, at least 30 days before the change is to take place, to tell the policyholder what the new premium is.

6. Claims Conditions

- a The insured person must tell us as soon as possible, and in any case within 30 days, about any event which may give rise to a claim under this policy.
- b The insured person or anyone acting for the insured person must not:
 - i) misrepresent or misdescribe any circumstance which affects the insured person's health condition, occupation, country of residence or pursuits or any information which may affect our decision to accept the insured person's application;
 - ii) make a claim under this policy knowing the claim to be false or fraudulently exaggerated in any way;
 - iii) make a statement to support a claim knowing the statement to be false in any way;
 - iv) send us a document to support a claim knowing the document to be forged or false in any way; or
 - v) make a claim for any loss or damage caused by the insured person's deliberate act or with the insured person's knowledge.
- c If all or part of any medical expenses from other sources can be recovered, we will only pay the amount that cannot be recovered.
- d We pay all claims in Singapore dollars. If the insured person suffers a loss which is in a foreign currency, we will convert the amount into Singapore dollars at the exchange rate which we will decide on the date of the loss.
- e The insured person or his/her legal personal representative must supply all information, reports, original invoices and receipts, evidence, medical certificates, documents (such as translation of a foreign-language document into the English language), confirmed by oath if necessary, we may need before we assess the insured person's claim. We may refuse to refund any expense which the insured person cannot provide original receipts or invoices for.

For further information, you can visit or contact Income Insurance via any of the following channels:

- (i) <http://income.com.sg/claims/personal-accident-insurance/personal-accident-infectious-diseases-claim>
- (ii) pcc@income.com.sg
- (iii) 6788 1777

7. Exclusions

There are certain conditions whereby we will not pay any benefits under this plan. These are shown as exclusions in the policy conditions. Some of the exclusions for this plan include, but are not limited to the following listed below. You should read the policy conditions which can be found at www.income.com.sg/gpf-pa-assurance-policy-conditions.pdf for the full list of exclusions.

This policy does not cover claims directly or indirectly caused by or arising from:

- a illness, disease (except for infectious disease if applicable), bacterial or viral infections even if contracted accidentally;
- b pregnancy, childbirth, abortion, miscarriage (except as provided in the Miscarriage due to an accident or infectious disease benefit extension of the policy) or all complications or death arising from these conditions;
- c pre-existing medical conditions or infectious disease or physical problems which existed before the start of the insured person's policy;
- d the insured person taking part in any dangerous activity or sports such as caving, potholing, rock climbing (except on man-made walls) or mountaineering which involves using ropes, any underwater activities involving underwater breathing apparatus (except scuba diving for leisure purpose with a diving buddy or instructor and no deeper than 30 meters below sea level), sky diving, cliff diving, BASE (building, antenna, span, earth) jumping, paragliding, hang-gliding, parachuting;
- e any recreational activity where the following conditions are not met:
 - the insured person must comply with all safety procedures, such as wearing safety equipment and following rules and regulations; whether specifically advised or generally expected of a reasonable person, and
 - where guidance and supervision of licensed guides or instructors are available, the recreational activity must be carried out under the guidance and supervision of licensed guides or instructors of the tour operator or activity provider.
- f any accident which arises in the course of the insured person's occupation if it falls within the following categories or involves the following activities: vessel workers, ship or navy crew, marine salvage crew, offshore oil rig workers, professional divers, professional sportspeople, cheer leaders, jockeys, stevedores, people directly involved in making or handling explosives, people who are working outdoor at heights above 15 meters, unless we have agreed in writing;
- g cover for infectious diseases unless the insured person has opted for the cover and in any case any infectious disease which has been announced as:
 - an epidemic by the health authority in Singapore or the Government of the Republic of Singapore; or
 - a pandemic by the World Health Organisation (WHO);
 in the affected countries, from the date of announcement until the epidemic or pandemic ends

8. Waiting period

For infectious disease cover, this policy does not cover claims directly or indirectly caused by or arising from any infectious disease diagnosed within 14 days from the start date of this policy.

9. Change of Occupation or in circumstance

If there is any change in circumstances affecting the insured person's risk, he/she must give us immediate written notice and pay any extra premium that we may ask for. In particular, he/she must tell us about any change in his/her health condition, occupation or the country where he/she is living in.

We can choose not to pay the claim if the insured person has failed to inform us of any change in circumstances affecting his/her risk.

10. Misrepresentation and non-disclosure

We will end this policy if the policyholder or the insured person misrepresents or misdescribe any circumstance which affects the insured person's health condition, occupation, country of residence or pursuits or any information which may affect our decision to accept the insured person's application.

This policy will also end immediately when before entering into the policy, the policyholder or the insured person fails to reveal all facts the policyholder or the insured person knows or ought to know which may affect this policy.

11. Dealing with disputes

If the policyholder is not satisfied with our final decision on the insured person's claim, the policyholder shall refer the case to the Financial Industry Disputes Resolution Centre Ltd (FIDREC), an independent and impartial institution specializing in solving disputes between financial institutions and consumers. Their website address is: www.fidrec.com.sg

If the dispute cannot be referred to or dealt with by FIDREC, the dispute must be referred to and decided using arbitration in Singapore in line with the Arbitration Rules of the Singapore International Arbitration Centre which apply at that point of time. We will not be legally responsible under your policy unless you have first received an award under arbitration.

Disclaimer

This product summary does not form a part of the contract of insurance. It is only meant to be a simplified description of the product features which apply to this plan and does not explain the whole contract. The contents of this product summary may be different from the terms of cover we eventually issue. Please read the policy contract for the precise terms, conditions and exclusions. Only the terms, conditions and exclusions in the policy contract will be enforceable by you and us.

It is usually detrimental to replace an existing accident and health plan with a new one. A penalty may be imposed for early plan termination and the new plan may cost more or have less benefit at the same cost.

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).