

Coverage for IncomeShield

Benefits	IncomeShield (Payout includes MediShield Life (MSHL) payout)			
	Plan P	Plan A	Plan B	Plan C
Inpatient hospital treatment	Limits of compensation			
Daily ward and treatment charges (each day) ¹				
- Normal ward	\$2,000	\$1,200	\$1,000	\$700
- Intensive care unit ward	\$2,600	\$1,700	\$1,400	\$1,200
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 table:				
Table 1 (less complex procedures)	\$1,050	\$600	\$500	\$400
Table 2	\$2,275	\$1,300	\$1,100	\$750
Table 3	\$4,025	\$2,300	\$2,000	\$1,300
Table 4	\$5,425	\$3,100	\$3,000	\$2,000
Table 5	\$8,100	\$5,400	\$4,300	\$3,000
Table 6	\$10,800	\$7,200	\$5,400	\$4,200
Table 7 (more complex procedures)	\$14,100	\$9,400	\$8,200	\$6,800
Surgical implants ² (each admission)	\$14,000	\$11,000	\$9,000	\$7,000
Radiosurgery, including proton beam therapy – Category 4 (each treatment course) ³	\$15,600	\$12,600	\$9,600	
Pre-hospitalisation treatment and post-hospitalisation treatment ⁴ (up to 90 days before being admitted to or after being discharged from hospital, respectively)	Limited to unused balance amount of daily ward and treatment charges and community hospital.			
Community hospital (Rehabilitative) (each day, up to 45 days for each admission) ^{1.5}	\$2,000	\$1,200	\$1,000	\$550
Community hospital (Sub-acute) (each day, up to 45 days for each admission) ^{1.5}				

Benefits	Plan P	Plan A	Plan B	Plan C
Outpatient hospital treatment³	Limits of compensation			
Radiotherapy for cancer (each treatment)				
- External	\$600	\$400	\$300	\$250
- Brachytherapy	\$600	\$500	\$500	\$500
- Stereotactic	\$5,000	\$3,000	\$2,500	\$2,000
- Proton beam therapy – Category 1	\$600	\$400	\$300	\$250
- Proton beam therapy – Category 2	\$600	\$500	\$500	\$500
- Proton beam therapy – Category 3	\$5,000	\$3,000	\$2,500	\$2,000
Kidney dialysis (each month)	\$3,500	\$3,000	\$2,500	\$2,000
Erythropoietin for chronic kidney failure (each month)	\$1,000	\$700	\$600	\$400
Immunosuppressants for organ transplant (each month)	\$1,000	\$700	\$600	\$400
Cancer drug treatment (each month) ⁶	4x MSHL Limit	3x MSHL Limit	2x MSHL Limit	1x MSHL Limit
Cancer drug services (each policy year) ⁶	4x MSHL Limit	3x MSHL Limit	2x MSHL Limit	1x MSHL Limit
Special benefits	Limits on special benefits			
Congenital abnormalities benefit (each policy year, with 24 months' waiting period)	\$10,000	\$7,500	\$5,000	Covered up to MSHL benefits only
Pregnancy complications benefit (each policy year, with 10 months' waiting period) ⁷	\$7,000	\$5,000	\$3,500	
Inpatient psychiatric treatment benefit (each policy year)	\$7,000		\$5,000	
Prosthesis benefit (each policy year)	\$10,000	\$6,000		\$3,000
Final expenses benefit ⁸	\$5,000		\$3,000	\$1,500

Benefits	Plan P	Plan A	Plan B	Plan C
Deductible for each policy year for an insured aged 80 years or below at next birthday¹⁰				
Inpatient				
– Restructured hospital				
- Ward class C	\$1,500	\$1,500	\$1,500	\$1,500
- Ward class B2 or B2+	\$2,000	\$2,000	\$2,000	\$2,000
- Ward class B1	\$2,500	\$2,500	\$2,500	\$2,000
- Ward class A	\$3,500	\$3,500	\$2,500	\$2,000
– Private hospital or private medical institution or emergency overseas treatment⁹	\$3,500	\$3,500	\$2,500	\$2,000
– Community hospital				
- Ward class C	\$1,500	\$1,500	\$1,500	\$1,500
- Ward class B2 or B2+	\$2,000	\$2,000	\$2,000	\$2,000
- Ward class B1	\$2,500	\$2,500	\$2,500	\$2,000
- Ward class A	\$3,500	\$3,500	\$2,500	\$2,000
Day surgery or short-stay ward				
– Subsidised	\$2,000	\$2,000	\$2,000	\$2,000
– Non-subsidised	\$3,500	\$3,500	\$2,500	\$2,000
Deductible for each policy year for an insured aged over 80 years at next birthday¹⁰				
Inpatient				
– Restructured hospital				
- Ward class C	\$2,250	\$2,250	\$2,250	\$2,250
- Ward class B2 or B2+	\$3,000	\$3,000	\$3,000	\$3,000
- Ward class B1	\$3,750	\$3,750	\$3,750	\$3,000
- Ward class A	\$5,250	\$5,250	\$3,750	\$3,000
– Private hospital or private medical institution or emergency overseas treatment⁹	\$5,250	\$5,250	\$3,750	\$3,000
– Community hospital				
- Ward class C	\$2,250	\$2,250	\$2,250	\$2,250
- Ward class B2 or B2+	\$3,000	\$3,000	\$3,000	\$3,000
- Ward class B1	\$3,750	\$3,750	\$3,750	\$3,000
- Ward class A	\$5,250	\$5,250	\$3,750	\$3,000
Day surgery or short-stay ward				
– Subsidised	\$3,000	\$3,000	\$3,000	\$3,000
– Non-subsidised	\$5,250	\$5,250	\$3,750	\$3,000
Co-insurance	10%			
Limit in each policy year	\$300,000	\$200,000	\$150,000	\$100,000
Limit in each lifetime	Unlimited			
Last entry age (age next birthday)	75			
Maximum coverage age	Lifetime			

IMPORTANT NOTES

- 1 Includes meals, prescriptions, medical consultations, miscellaneous medical charges, specialist consultations, examinations, and laboratory tests. Daily ward and treatment charges include being admitted to a high-dependency ward or a short-stay ward.
- 2 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).
- 3 This benefit covers the following main outpatient hospital treatment received by the insured from a hospital or a licensed medical centre or clinic.
 - For proton beam therapy, we will only cover the proton beam therapy if it is administered for an Ministry of Health (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). MOH may update these from time to time.
 - For cancer drug treatment, only treatments listed on the Cancer Drug List (CDL) and used according to the indications on the CDL will be covered. If the insured is claiming for more than one cancer drug treatment, we will pay a total amount of up to the highest limit for the cancer drugs administered in that month, as long as they are used according to the indications on the CDL. If any of the cancer drug treatments provided are not used according to the indications on the CDL, we will not cover any of the cancer drug treatments used, even individual treatments that are listed on the CDL, except where a particular drug being removed from the indicated treatment, or replaced with another drug indicated 'for cancer treatment' on the CDL, is a necessary medical treatment due to intolerance or contraindications (for example, allergic reactions).
 - 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 drugs, 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.
- 4 Pre-hospitalisation and post-hospitalisation treatment are not covered for treatment given before or after inpatient psychiatric treatment benefit, accident inpatient dental treatment or emergency overseas treatment.
- 5 To claim for staying in a community hospital,
 - the insured must have first had inpatient hospital treatment in a restructured hospital or private hospital;
 - after the insured is discharged from the restructured hospital or private hospital, they must immediately be admitted to a community hospital for a continuous period of time;
 - the attending registered medical practitioner in the restructured or private hospital must have recommended in writing that the insured needs to be admitted to a community hospital for necessary medical treatment; and
 - the treatment must arise from the same injury, illness or disease that resulted in the inpatient hospital treatment.
- 6 The benefit limit is based on a multiple of the MSHL Limit for cancer drug treatment. Refer to the Cancer Drug List (CDL) published at go.gov.sg/moh-cancerdruglist for the applicable MSHL Limit. MOH may update this list from time to time. The cancer drug services benefit limit (if applicable) is based on a multiple of the MSHL Limit for cancer drug services. Refer to the MediShield Life Benefits published at go.gov.sg/mshlbenefits for the applicable MSHL Limit.
- 7 Pregnancy complications benefit pays for inpatient hospital treatment for the following:
 - ectopic pregnancy
 - pre-eclampsia or eclampsia
 - disseminated intravascular coagulation (DIC)
 - miscarriage where the foetus of the insured dies as a result of a sudden unexpected, non-malicious and involuntary event
 - ending a pregnancy if an obstetrician considers it necessary to save the life of the insured.
- 8 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.
- 9 MSHL does not cover emergency overseas treatment.
- 10 Deductible does not apply to outpatient hospital treatment.

IMPORTANT NOTES

There are certain conditions whereby the benefits under this plan will not be payable. You can refer to your policy contract for the precise terms, conditions and exclusions of the plan. The policy contract will be issued when your application is accepted.

IncomeShield is available as a MediSave-approved Integrated Shield Plan for 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), IncomeShield is not available as an Integrated Shield Plan.

This is for general information only. You can find the usual terms, conditions and exclusions of this plan at www.income.com.sg/incomeshield-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 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. If you find that this plan is not suitable after purchasing it, you may terminate it within the free-look period, and obtain a refund of premiums paid.

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 or visit the GIA/LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Information is correct as at 1 April 2023