

Policy Conditions Personal Accident

Your policy

This is a group personal accident insurance **policy** and it contains details of benefits, conditions and exclusions relating to each **insured person's** cover under this **policy**. The **policy** will form the basis on which **we** will settle all claims.

Any statement, information or declaration the **insured person** has given, or that has been made on their behalf, including any declaration made over the phone, or by fax, email or the internet at the time of application, will form the basis of the contract.

Eligibility

This **policy** is only available to **insured persons** who:

- hold 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;
- are living or working in Singapore;
- are between 60 days old and 65 years old; and
- have been nominated by the **policyholder** to be covered under this policy.

Things to remember

- **We** do not cover claims arising from **sickness** unless it is due to dengue fever covered under Section 1, or COVID-19 covered under Section 3. **We** also do not cover claims arising from **pre-existing medical conditions**.
- For COVID-19 coverage, **you** have to contract and be diagnosed with COVID-19 in Singapore for the benefits to be applicable.

Definitions

Accident or **accidental** means a sudden, unexpected event which happens during the **period of insurance** and which must be the only cause of **injury**.

Family member means the **insured person's** husband or wife, children, parents, brothers and sisters, parents-in-law, brothers-in-law, sisters-in-law, grandparents, grandparents-in-law, daughters-in-law, sons-in-law or grandchildren.

Hospital means an establishment which is registered under the relevant national laws and regulations to care for and treat sick and injured people as bed-paying patients and which:

- has organised facilities for diagnosis, treatment and major surgery;
- provides nursing services by registered nurses 24 hours a day;
- is under the supervision of one or more **medical practitioners**; and
- is not mainly a clinic, a secure place to care for alcoholics or drug addicts, a nursing or rest or convalescent home or a home for the elderly or similar establishment.

Injury means damage or harm caused to the body by an external force suffered during the **period of insurance** and which is caused only by an **accident**.

Insured person means the individual who is named as the insured person in the policy application form and nominated by the **policyholder** to be covered under this **policy**.

Lossing means permanent and total loss of use, or loss by having part of the body (as listed in the scale of compensation table) cut or torn off, as confirmed by **our medical practitioner**.

Lossing hearing means permanent and total loss of hearing, as confirmed by **our medical practitioner**.

Losing a limb means permanent and total loss of, or loss of use of, a hand at or above the wrist or a foot at or above the ankle. This must be confirmed by **our medical practitioner**.

Losing sight means total and permanent loss of use of an eye which means being absolutely blind in that eye and which is beyond cure either by surgical or other treatment. This must be confirmed by **our medical practitioner**.

Losing speech means permanent and total loss of the ability to speak and which is beyond cure either by surgical or other treatment, as confirmed by **our medical practitioner**.

Medical practitioner means any person registered and legally qualified as a doctor by a medical degree in western medicine and authorised by the medical licensing authority of that country to provide medical or surgical service within the scope of their licence and training. The **medical practitioner** should not be the **insured person**, the **insured person's family member**, partner, business partner, employer, employee or agent.

Overseas means anywhere outside Singapore.

Period of insurance means the period of cover as stated in the email confirmation sent by **us** to the email which the **insured person** or the **policyholder** has provided to **us** in the **policy** application form or in any other written form acceptable to **us**.

Permanently disabled or **permanent disability** means suffering from one of the items of disablement listed in the scale of compensation table in this **policy**, and which was caused only by an **accident**, as long as:

- the disability lasts for 12 months in a row from the date of **accident**; and
- **our medical practitioner** confirms that it is not going to improve after 12 months.

Permanent total disability means total disability caused only by an **accident** that:

- will in all probability entirely prevent the **insured person** from working in any job for a salary or wage or stops the **insured person** from carrying out any business whatsoever for the rest of the **insured person's** life; and
- lasts for 12 months in a row from the date of the **accident**; and
- **our medical practitioner** confirms that it is not

going to improve after 12 months.

Policy means this document of policy.

Policyholder means NTUC Income Insurance Co-operative Limited.

Pre-existing medical condition means any injury or **sickness**, including any complications which may arise:

- a which the **insured person** knew about before the start of the **insured person's period of insurance**;
- b which the **insured person** has received diagnosis, consultation, medical treatment or prescribed drugs for within 12 months before the start of the **insured person's period of insurance**; or
- c for which the **insured person** has been asked to get medical treatment or medical advice by a **medical practitioner** within 12 months before the start of the **insured person's period of insurance**.

Prohibited person means a person or entity who is subject to laws, regulations or sanctions administered by any governmental or regulatory authorities or law enforcement in any country, which will prohibit **us** from providing insurance cover or paying any benefit.

Relevant Person includes insured, trustee, assignee, beneficiary, beneficial owner or nominee and mortgagee or financier.

Sickness means worsening physical health not caused by an **accident**.

Table of cover means the table below showing the list of types of benefits and maximum benefit limit **we** will pay while this **policy** is in force. It will depend on the terms, conditions, limits and exclusions of this **policy**.

Benefits		Maximum benefit (S\$) per insured person
Section 1	Accidental death	25,000
Section 2	Permanent disability	25,000
Section 3	Diagnosis benefit for COVID-19	500

We, our, us, and Income means NTUC Income Insurance Co-operative Limited.

What the policy covers

This **policy** will protect the **insured person** financially when a death or **injury** happens during the **period of insurance**.

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**.

Benefits

Section 1 – Accidental death

If the **insured person** is involved in an **accident** or contracts dengue fever during the **period of insurance**, and due only to this **accident** dies within 90 days from the date of the **accident** or diagnosis of dengue fever, **we** will pay the **insured person's** legal personal representative up to the maximum limits as shown in section 1 of the **table of cover**.

What we do not pay under section 1

Besides the general exclusions listed in part 1 of the general conditions, **we** will also not pay any claim directly or indirectly caused by the following.

- 1 A disability or death that is caused by **sickness** (for example, a heart attack or stroke) and not by an **injury**. (This does not apply to dengue fever as described above); or
- 2 Any physical disability which existed before the start of the **period of insurance**.

Section 2 – Permanent disability

If the **insured person** is involved in an **accident** during the **period of insurance**, which causes an **injury** and due only to this **accident** the **insured person** becomes **permanently disabled** within 90 days from the date of the **accident**, **we** will pay the **insured person** up to the maximum limits as shown in section 2 of the **table of cover** using the scale of compensation table as shown below.

Scale of compensation table

Item	Description of disability	Percentage of sum insured as shown under section 2 in the table of cover
a.	Permanent total disability	100%
b.	Losing sight of both eyes	100%
c.	Losing two limbs	100%
d.	Losing sight of one eye, except perception of light	50%
e.	Losing one limb	50%
f.	Losing speech	50%
g.	Losing hearing in both ears	50%
h.	Losing four fingers and thumb of one hand	50%
Third Degree Burns		
i.	Head - Damage as a percentage of total body surface area	
	- equal to or greater than 8%;	100%
	- equal to or greater than 5% but less than 8%; or	75%
	- equal to or greater than 2% but less than 5%	50%
j.	Body - Damage as a percentage of total body surface area	
	- equal to or greater than 20%	100%
	- equal to or greater than 15% but less than 20%	75%
	- equal to or greater than 10% but less than 15%	50%
We will not pay any compensation if the disability is not listed in the scale of compensation.		
The total of all percentages of the sum insured due under this section will not be more than 100% during the period of insurance.		

We will reduce any compensation due for **accidental** death by any payment which **we** have already made under the scale of compensation within the **period of insurance**.

We will not pay extra compensation for any specific item which is part of a greater item due under this **policy**. For example, **we** will pay for **losing** an upper limb, but **we** will not pay again for **losing** a finger or thumb.

What we do not pay under section 2

Besides the general exclusions listed in part 1 of the general conditions, **we** will also not pay any claim directly or indirectly caused by the following:

- 1 A disability or death that is caused by **sickness** (for example, a heart attack or stroke) and not by an **injury**; or
- 2 Any physical disability which existed before the start of the **period of insurance**.

Section 3 – Diagnosis benefit for to COVID-19

If the **insured person** contracts and is diagnosed with COVID-19 in Singapore, **we** will pay the benefit amount in **table of cover**. For avoidance of doubt, we will consider COVID-19 to have been contracted **overseas** if it is diagnosed within 30 days of return from an **overseas** trip.

What we do not pay under section 3

Besides the general exclusions listed in part 1 of the general conditions, **we** will also not pay any claim directly or indirectly caused by the following:

- 1 COVID-19 contracted before the start of the **period of insurance**. This includes knowing or reasonably knowing that the **insured person** has COVID-19 or where the COVID-19 symptoms have already existed before the **period of insurance**.
- 2 COVID-19 diagnosed within 30 days of return from an **overseas** trip. This includes **overseas** trips before the **period of insurance**.

General conditions which apply to the whole policy

1. General Exclusions

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

- a the **insured person** deliberately injuring themselves, committing suicide or attempting suicide while sane or insane, the **insured person's** criminal act, provoked assault, deliberate acts or putting themselves in danger (unless the **insured person** is trying to save human life);
- b the effect or influence of alcohol or drugs;
- c pregnancy, childbirth, abortion, miscarriage or all complications or death arising from these conditions;
- d mental problems or insanity;
- e sexually transmitted infections, human immunodeficiency virus (HIV) or any HIV-related illness including acquired immunity deficiency syndrome (AIDS) or any mutant derivatives or variations of this however they are caused;
- f **pre-existing medical conditions** or physical problems which existed before the start of the **insured person's period of insurance**;
- g the **insured person** taking part in flying or other aerial activities except as a fare-paying passenger in a licensed passenger-carrying aircraft;
- h the **insured person** taking part in any professional sports or in any sports for which one would or could earn or receive any form of pay;
- i the **insured person** taking part in any kind of speed contest or racing (other than on foot);
- j an **accident** while driving or riding on a motor race track;
- k an **accident** while riding on a motorcycle (but not as a passenger);
- l taking part in any dangerous activities or sports including 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, bungee jumping, BASE (building, antenna, span, earth) jumping, paragliding, hang-gliding, parachuting;

- m 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;
- n the consequences of war, revolution or any similar event;
- o radioactivity or damage from any nuclear fuel, material or waste;
- p failing to take reasonable efforts to avoid **injury** or minimize claims under this **policy**;
- q any **accident** which arises in the course of occupation if it falls within the following categories or involves the following activities: professional divers, professional sportspeople, jockeys, marine salvage crew, oil riggers, stevedores, people directly involved in making or handling explosives; or
- r use of any ATV (all-terrain vehicle).

If **we** refuse to pay a claim as a result of any of the exclusions listed above and the **insured person** or **policyholder** disagrees with **our** decision, the **insured person** or **policyholder** is responsible for proving that **we** are legally responsible for the claim. If any part of any exclusion is found to be invalid or **we** cannot enforce it, it will not affect the rest of the exclusions.

2. Cover

This **policy** covers the **insured person** while in Singapore and outside Singapore, except for COVID-19 which is only covered if contracted and diagnosed in Singapore.

3. Paying benefits

We will pay the benefits listed in this **policy** only if **we** have been given satisfactory proof of the claim.

We will pay all benefits shown in the **table of cover** to

the **insured person** unless the **insured person** dies as described in section 1 – Accidental death, in which case **we** will pay the benefits to the **insured person's** legal personal representative.

When **we** pay the benefits as described above, **we** will have no further legal responsibility to the **insured person** under this **policy** for the claim.

Despite anything **we** have said to the contrary, **we** will not pay any claim if the laws of Singapore or of the **insured person's** home country prevent us from doing so.

4. Fraud

The **insured person** must not act in a fraudulent way. **We** will take the action shown below if the **insured person**, or anyone acting for them:

- a make a claim under the **policy** knowing the claim to be false or fraudulently exaggerated in any way;
- b make a statement to support a claim knowing the statement to be false in any way;
- c send **us** a document to support a claim knowing the document to be forged or false in any way; or
- d make a claim for any **loss** or damage caused by the **insured person's** deliberate act or with their knowledge.

We may do the following:

- a **We** will not pay the claim.
- b **We** will not pay any other claim which has been or will be made under the **policy**.
- c **We** may declare the **policy** invalid.
- d **We** can recover from the **insured person** the amount of any claim **we** have already paid under the **policy**.
- e **We** may not allow the party who has committed the fraud to buy other policies from **us**.
- f **We** may report the **insured person** to the police.

5. Reasonable care

The **insured person** must take all reasonable precautions to avoid an **injury** and take all practical steps to minimize claims.

6. Duplicate coverage

If the **insured person** has more than one cover under this **policy**, **we** will pay the benefit under only one cover for the same **accident** or **sickness** suffered.

7. Taking over the rights

We can take over any rights to defend or settle any claim and to take proceedings in the **insured person's** name to enforce their or **our** rights against any other person.

8. Claims conditions

- a The **insured person** must tell **us** as soon as possible, and in any case within 30 days, about any **accident** which may give rise to a claim under this **policy**.
- b **We** pay all claims in Singapore dollars. If **you** suffer 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 at the date of the loss.

9. What to provide when sending us a claim

The **insured person** or their legal representatives 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 any claim. **We** may refuse to refund any expense which are not supported by original receipts or invoices.

10. Ending the insurance

The insurance cover for the **insured person** will end immediately when:

- a **we** have paid 100% of the sum insured under section 1 – Accidental death or section 2 – Permanent disability; or
- b **we** cancel this policy under general conditions part 4; or
- c the **insured person** longer satisfy any of the eligibility requirements for this **policy**.

11. Excluding third party rights

A person or company who is not covered by this **policy** has no right under the Contracts (Rights of Third Parties) Act (Chapter 53B) to enforce this **policy**.

12. Currency and interest

All dollar amounts shown in the **policy** and **table of cover** are in Singapore dollars (S\$). **We** will not add interest to any amount **we** pay under this **policy**.

13. Prohibited persons

If the **insured person** or any **relevant person** is found to be a **prohibited person**, **we** may:

- a declare the **policy** or the cover of any **insured person** as invalid;
- b cancel the **policy** and any or all cover under the **policy**; and
- c refuse to pay any benefit to any **prohibited person**.

We must be informed of any changes to the identities, status / constitution / establishment, particulars and identification documents of the **relevant person(s)** as soon as reasonably practicable but no later than 30 days of any change.

14. Governing law

Singapore law will apply to this **policy**.

Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact Income or visit the GIA / LIA or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).