

GENERAL PROVISIONS

1. Basis of the Contract

The proposal form, declaration form, enrolment form, statement to the medical officer (if any), declaration and such other forms/documents as NTUC Income may from time to time reasonably require, duly signed and/or submitted by the Policyholder or Member shall form the basis of this contract.

The Policyholder shall provide NTUC Income with the Name, Date of Birth and NRIC or passport number of every Member and such other information as NTUC Income may from time to time reasonably require.

Particulars of the Members to be covered under this Policy and of Members ceasing to be covered are to be furnished to NTUC Income within 30 days from the date they are eligible for insurance or cease to be covered.

2. Alteration of the Contract

This Policy shall form the entire contract between the parties.

No variation in the terms of this Policy shall bind NTUC Income unless this is endorsed on or appended to this Policy and signed by a Director or any other duly authorized officer of NTUC Income. Any amendment to this contract as shall be agreed between NTUC Income and the Policyholder and endorsed or appended to this Policy shall be binding on all Members insured under this Policy.

3. Eligibility and Commencement of Members' Insurance

3.1 A Member shall mean a person between the ages of 6 years and 25 years who is:

- a. a full time student registered with the Policyholder;
- b. engaged in any co-curricular activities authorized by the Policyholder; and
- c. accepted for insurance under this Policy by NTUC Income.

3.2 A Member shall be covered under this Policy upon the acceptance of the Proposal, the application and declaration form by NTUC Income and the premium paid by the Policyholder or Member.

4. Termination of Members' Insurance

The insurance under this Policy in respect of a Member shall automatically terminate if any one of the following events occur:

- 4.1** the Member ceases to be a student with the Policyholder for any reason whatsoever, or, at the end of the policy year during which the Member attains the age of 25 years;
- 4.2** the maximum compensation for all the Benefits according to the plan type covering the Member under the Policy has been paid to that Member in respect of Any One Accident for that policy year;
- 4.3** non-payment of Premium for more than 60 days from the date on which the premium becomes due;
- 4.4** the date on which this Policy is terminated; or
- 4.5** the death of the Member.

5. Premium Payment Warranty

5.1. Subject to clause 5.2 below, it is agreed and declared that if the period of insurance is 60 days or more, any premium due must be paid and actually received in full by NTUC Income (or the intermediary through whom this Policy was effected) within 60 days of the:

- (a) inception date of the coverage under the Policy, Renewal Certificate or Cover Note; or

(b) effective date of each Endorsement, if any, issued under the Policy, Renewal Certificate or Cover Note.

5.2 In the event that any premium due is not paid and actually received in full by NTUC Income (or the intermediary through whom this Policy was effected) within the 60-day period referred to above, then:

- (a) the cover under this Policy is automatically terminated immediately after the expiry of the said 60-day period;
- (b) the automatic termination of the cover shall be without prejudice to any liability incurred within the said 60-day period; and
- (c) NTUC Income shall be entitled to a pro-rata time on risk premium subject to a minimum of S\$25.00.

5.3 If the period of insurance is less than 60 days, any premium due must be paid and actually received in full by NTUC Income (or the intermediary through whom this Policy was effected) within the period of insurance.

6. Premium Modification

NTUC Income shall be entitled to modify the premium rates listed in the Schedule:

6.1 on any Renewal Date; or

6.2 by giving at least three (3) month's notice to the Policyholder.

The modified premium rates shall apply in respect of all Members covered under this Policy either from the Renewal Date or upon expiry of the period of notice.

7. Premium Administration

This Policy is administered on a per Member basis. Any billing due to a change in the number of Members covered will be done at the end of the policy year.

The Policyholder will be charged only if the revision in the number of Members covered results in an increase of premium of more than S\$30.

No refund of premium shall be payable by NTUC Income in the event of termination of this Policy or any Member's insurance unless the refund in the premium is more than S\$30.

8. Termination of the Policy

The Policyholder and/or NTUC Income may terminate this Policy by giving three (3) month's notice to the other party. Upon expiry of the period of notice, all insurance granted under this Policy shall cease immediately and no new Members shall be accepted under this Policy.

9. Renewal

This Policy is issued for a term of one (1) year and, upon expiry of the term, may be renewed each year thereafter for a further term of one year subject to the consent of NTUC Income, the payment of the premium applicable at the time of renewal, and any further terms and conditions as determined by NTUC Income at that time.

10. Arbitration

Any dispute as to any matter arising under, out of or in connection with this Policy shall be referred to and finally resolved by arbitration in Singapore in accordance with the Arbitration Rules of the Singapore International Arbitration Centre for the time being in force, which rules are deemed to be incorporated by reference in this Clause 10. The obtaining of an arbitral award by the Policyholder shall be a condition precedent to NTUC Income's liability under this Policy.

11. Exclusion of Third Party Rights

A person who is not party to this agreement shall have no right under the Contracts (Rights of Third Parties) Act (Chapter 53B) to enforce any of its terms.

12. Notices

Any notice under this Policy shall be in writing shall be sufficiently served on the Policyholder if addressed to the Policyholder's last known address in Singapore.

SPECIAL PROVISIONS

1. Definitions

- 1.1** "Accident" means an incident caused by accidental, violent, external and visible means.
- 1.2** "Any One Accident" means all Accidents arising from the same cause including any disease, injury or loss arising from that cause.
- 1.3** "Basic Plan" means NTUC Income Student Protection Plan and/or other similar plans, subject to the approval of NTUC Income.
- 1.4** "Deductible" means the amount per policy year as specified in the Schedule of Deductibles of a Member's Reasonable and Customary medical expenses incurred for Any One Accident and claimable under this Policy which must be borne by the Member before any Benefit is payable.
- 1.5** "Hospital" means any of the following:
 - (a) a Restructured Hospital;
 - (b) a licensed private hospital in Singapore;
 - (c) a Community Hospital; or
 - (d) any other hospital acceptable to Us.
- 1.6** "Hospitalisation" means that a person is registered as a bed patient in a Hospital and incurs a daily room and board charge or, is attending day care surgery at a Hospital at the order of a Registered Medical Practitioner.
- 1.7** "Injury" means any bodily injury caused solely and directly by an Accident independently of any other cause.
- 1.8** "Physiotherapy" means the treatment of physical dysfunction or injury by the use of therapeutic exercise and the application of modalities, intended to restore or facilitate normal function or development.
- 1.9** "Reasonable and Customary" shall be deemed to refer to a charge for medical care which shall be considered reasonable and customary to the extent that it does not exceed the general level of charges being made by others of similar standing in the locality.
- 1.10** "Registered Medical Practitioner" means a person qualified by a degree in western medicine to practice medicine other than the Member or a member of the Member's immediate family. Additionally, the person must be legally authorized in the geographical area of his practice to render medical or surgical services.
- 1.11** "Restructured Hospital" means a hospital in Singapore that is run as a private company wholly-owned by the Singapore government and subject to broad policy guidance by the Singapore government through Ministry Of Health, and that receives an annual government subsidy for the provision of subsidized medical services to its patients.

2. Benefits

We will pay the applicable Benefits specified in the Schedule of Benefits in accordance with the plan type covering the Member for all Reasonable and Customary expenses incurred by the Member as a result of an Injury caused by an Accident subject to the following:

- (a) the Injury must be suffered by the Member while the insurance in respect of the Member is in force and:
 - (i) while the Member is engaging in any co-curricular activities authorized and supervised by the Policyholder; or

- (ii) while the Member is travelling between the Member's place of residence and the venue of such any co-curricular activities authorized and supervised by the Policyholder.
- (b) the treatment must be prescribed or provided by a Registered Medical Practitioner of a Restructured Hospital and the said expenses must be incurred within 365 days after the date of the Accident.
- (c) any payment made shall less:
 - (i) any unpaid premium or any other sums due or owing to NTUC Income under this Policy;and
 - (ii) the amount paid or payable under the Student Protection Plan; or
 - (iii) the deductible amount specified in the Schedule of Benefits if the Member is not covered under any Basic Plan; and

Provided always that where the said charges are incurred at a Hospital other than a Restructured Hospital or incurred outside Singapore, we will only pay up to 50% of the Reasonable and Customary expenses incurred at that Hospital if the treatment is prescribed or provided by a Registered Medical Practitioner.

Our maximum liability in respect of a Member as a result of Any One Accident shall not exceed:

- a. the amount or rates stated; and/or
- b. the maximum number of days claimable

against each Benefit in the Schedule of Benefits, and, shall not in the aggregate exceed the limits of Compensation stated in the Schedule of Benefits in accordance with the plan type covering the Member,for that policy year.

Our maximum aggregate liability under this Policy shall not exceed the Per Event Limit stated in clause 9 of the Special Provisions.

2.1 Daily Room and Board Benefit

We will pay an amount equal to the Reasonable and Customary charges of the Hospital for daily room and board or up to an amount not exceeding the rate of daily benefit and the maximum number of days provided in the Schedule of Benefits, whichever is lesser.

We will only pay if the Member's Hospitalisation is recommended by a Registered Medical Practitioner, and the charges are incurred by the Member during the Member's Hospitalisation.

2.2 Intensive Care Unit Benefit

We will pay an amount equal to the Reasonable and Customary charges of the Hospital for intensive care or up to an amount not exceeding the rate of daily benefit and the maximum number of days provided in the Schedule of Benefits, whichever is lesser.

We will only pay if the Member's confinement to the Intensive Care Unit (ICU) of the Hospital is recommended by a Registered Medical Practitioner, and the charges are incurred during the Member's confinement to ICU.

2.3 Other Hospital Charges

We will pay an amount equal to the Reasonable and Customary charges of the Hospital for any of the following services rendered during the Member's Hospitalisation or up to the

amount shown in the Schedule of Benefits, whichever is lesser:

- a) Use of Operating Room;
- b) Drugs and Medicines consumed on premises;
- c) Dressings, Ordinary Splints and Plaster Casts;
- d) Laboratory Examinations;
- e) Electrocardiograms;
- f) Basal Metabolism Tests;
- g) Physical Therapy;
- h) Anaesthesia and Oxygen and their administration;
- i) X-ray Examinations;
- j) Intravenous Infusion;
- k) Administration of Blood or Blood Plasma, but not the cost of Blood or Blood Plasma.

2.4 Surgical Benefit

We will pay an amount equal to the Reasonable and Customary charges incurred for surgeries performed by a Registered Medical Practitioner or up to the amount shown in the Schedule of Benefits, whichever is lesser.

2.5 Daily In-Hospital Consultation Benefit

We will pay an amount equal to the Reasonable and Customary charges for the in-hospital consultation services provided by a Registered Medical Practitioner or up to the amount shown in the Schedule of Benefits, whichever is lesser.

2.6 Post-Hospitalisation Treatment Benefit

We will pay an amount equal to the Reasonable and Customary charges incurred for all medical treatment following the Member's discharge from Hospital or up to the amount shown in the Schedule of Benefits, whichever is lesser.

We will only pay if the medical treatment is for the same medical condition for which the Member was hospitalised, and provided by the same Registered Medical Practitioner who recommended the Member for Hospitalisation.

2.7 Emergency Outpatient Treatment Benefit

We will pay an amount equal to the Reasonable and Customary charges incurred for ambulance fees and the treatment of an Injury or up to the amount shown in the Schedule of Benefits, whichever is lesser.

We will only pay if:

- a) the Member seeks treatment from a Registered Medical Practitioner at medical clinics, polyclinics or specialist outpatient clinics (SOC) at any Restructured Hospital in Singapore; and
- b) the initial treatment was received by the Member as an out-patient within twenty four hours of the Accident and the eligible expenses for follow-up treatment was incurred within 365 days from the date of the Accident.

2.8 Physiotherapy

We will pay an amount equal to the Reasonable and Customary charges for Physiotherapy or up to the amount shown in the Schedule of Benefits, whichever is lesser. This Benefit is also limited to the number of visits specified in the Schedule of Benefits.

2.9 Traditional Chinese Medicine

We will pay an amount equal to the Reasonable and Customary charges incurred for the treatment administered by a person registered under the Traditional Chinese Medicine (TCM) Practitioners Act (Cap. 333A) as a TCM Practitioner at the time of such treatment or up to the amount specified in the Schedule of Benefits, whichever is lesser. This Benefit is also limited to the number of visits specified in the Schedule of Benefits.

3. Geographical Limits

The coverage under this Policy is 24 hours worldwide unless otherwise endorsed or specified in the Schedule.

4. Extensions

This Policy is extended to cover any Member in respect of any loss covered under this Policy if the Member suffers an Injury arising from any of the following events:

- 4.1** Rock climbing on a rock wall as an authorized and supervised co-curricular activity of the Policyholder;
- 4.2** Horse riding as an authorized and supervised co-curricular activity of the Policyholder;
- 4.3** Lightning;
- 4.4** Dog bites, bee, wasp & hornet stings;
- 4.5** Sailing, canoeing & other authorized and supervised co-curricular activity water activities of the Policyholder; or
- 4.6** Riding as a pillion on motorcycle to and from school with the parent or guardian.

5. Exclusions

We will not pay for any loss or liability suffered by the Member if caused directly or indirectly, wholly or partly by the following:

- 5.1** Member's wilful exposure to needless perils (except in an attempt to save human life) or the Member's criminal act.
- 5.2** self-inflicted injuries or other attempt while sane or insane, under the influence of alcohol or drugs.
- 5.3** being in or on entering into or descending from any aircraft other than a fully licensed passenger-carrying aircraft in which the Member is travelling as a passenger (and not as a member of the crew or for the purpose of undertaking any trade or technical operation on or in the aircraft).
- 5.4** climbing or mountaineering necessitating ropes or guides, except whilst taking part in rock climbing (rock wall) under the direct supervision of the Policyholder.
- 5.5** participating in professional football competitions, horse riding (except while taking part in horse riding under the direct supervision of the Policyholder), hunting, scuba or skin diving or any under-water activities involving the use of under-water breathing apparatus, racing other than on foot, and other hazardous adventure.
- 5.6** motor cycling as rider.
- 5.7** engaging in or taking part in peacetime naval, military or air forces services or operations or participating in operations of an offensive nature planned or conducted by the civil or military authorities.
- 5.8** ionising radiations or contamination by radioactivity from any nuclear fuel or any nuclear waste from the combustion of nuclear fuel. Solely for the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission.
- 5.9** nuclear weapons material.
- 5.10** any consequence of war invasion, act of foreign enemies, hostility or warlike operations

(whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, martial law or terrorism.

5.11 participating in a riot, committing an assault or felony.

5.12 special nursing care, general dental care and treatment except as necessitated by accidental injuries to sound natural teeth occurring during the period of insurance.

5.13 routine physical examinations, health check-ups or tests not incident to treatment or diagnosis of an actual injury or any treatment which is not medically necessary.

5.14 injuries due to insanity or conditions related to functional disorders of the mind, rest care or sanitarium care.

5.15 treatment of an optional nature, for example, plastic surgery or cosmetic surgery for purposes of beautification; non-medical personal services such as radio, telephone and the like.

5.16 procurement of use of special braces, appliances, equipment or other prosthetic devices.

6. Notice of Claim

Notice of any loss on which a claim may be based must be submitted to NTUC Income within 30 days from the happening of the loss.

Notice given by or on behalf of the Member to NTUC Income with particulars sufficient to identify the Member shall be deemed to be notice to NTUC Income. Failure to furnish notice within the time provided in the Policy shall not invalidate any claim if it shall be shown not to have been reasonably possible to furnish such notice and that such notice was furnished as soon as was reasonably possible.

7. Proof of Loss

All documents including certification by a Registered Medical Practitioner, for which claim may be made together with a fully completed claim form supplied by NTUC Income must be furnished by the Policyholder to NTUC Income within 30 days after the termination of the period for which claim is made.

The Member, when and as often as may be required, shall submit to medical examination by a Registered Medical Practitioner appointed by NTUC Income in respect of any condition or injury for which the claim is based.

8. Payment of Claim

Compensation shall be payable only when the claim shall have been proved to the satisfaction of NTUC Income.

If the claim shall be in any respect fraudulent; or if any false declaration be made or used in support of such a claim; or if any fraudulent means or devices are used by the Policyholder and/or Member or any one acting on the Policyholder's or Members' behalf to obtain any compensation under this Policy, all compensation shall be forfeited.

All benefits that are payable to the Member shall be paid by cheque or by internet GIRO to the order of the Policyholder, or, with the written approval of the Policyholder to the Member or the Member's parent or guardian if the Member is below the age of majority.

9. Per Event Limit

Our maximum aggregate liability payable to all Members due to any one event in respect of this Policy and the Student Protection Plan is limited to S\$40,000,000.

If, in our view, the total amount claimed under this Policy and the Student Protection Plan is likely to exceed our maximum aggregate liability due to any one event, we will not pay any claim under this Policy until we can reasonably determine the total amount of all claims under this Policy and the Student Protection Plan. All claims made under the Student Protection Plan shall be paid in priority over this Policy if our maximum aggregate liability of \$40,000,000 is exceeded. If our maximum aggregate liability is exceeded in respect of this Policy and the Student Protection Plan, we will pay the \$40,000,000 to the Policyholder unless otherwise agreed between the Policyholder and NTUC Income. The Policyholder will then decide on the distribution of the Benefits to the Members under the Student Protection Plan followed by this Policy.

10. Other Medical Reimbursements

If the Member has recourse to another medical insurance policy for reimbursement of medical expenses at the time of claim, reimbursement must first be sought from that insurance policy before any claim under this Policy shall be made. If We have first paid for a claim under this Policy before the Member obtains reimbursement or payment of the claim under any other medical insurance policy, the Member shall assist Us in the recovery of any other medical insurer's share of such claim paid by Us. The Member shall provide Us all the information We require about such other medical insurance policies, including the necessary evidence, to make a claim.

11. Confinement In Community Hospital

If the Member has undergone In-patient Hospital Treatment in a Hospital, and

- a. is discharged from the Hospital and is immediately admitted to a Community Hospital after such discharge; and
- b. the attending Registered Medical Practitioner in the Hospital has recommended in writing that the Member needs to be admitted to a Community Hospital for necessary medical treatment; and
- c. such necessary medical treatment arises from the same injury, illness or disease that resulted in the Member's In-patient Hospital Treatment in the Hospital,

We will pay an amount equal to the Reasonable and Customary charges of the Community Hospital for daily room and board or up to an amount not exceeding the rate of daily benefit and the maximum number of days provided in the Schedule of Benefits, whichever is lesser. The said charges must be incurred during the Member's confinement as a bed-paying patient in the Community Hospital.

SCHEDULE B

Policy No:

SCHEDULE OF BENEFITS

Maximum Benefits Payable for Any One Accident

<u>OUTPATIENT BENEFITS</u>		
	Plan 1	Plan 2
Emergency Outpatient Treatment Benefit	Up to S\$ 2,000	Up to S\$1,000
Physiotherapy	Up to S\$25 per visit (Max of 6 visits)	Up to S\$25 per visit (Max of 6 visits)
Traditional Chinese Medicine	Up to S\$25 per visit (Max of 3 visits)	Up to S\$25 per visit (Max of 3 visits)

<u>INPATIENT BENEFITS</u>		
	Plan 1	Plan 2
Daily Room & Board Benefit (including ICU)	S\$250 daily	S\$150 daily
Daily In-Hospital Consultation Benefit	As Charged	As Charged
Surgical Benefit	As Charged	As Charged
Other Hospital Charges	As Charged	As Charged
Post-Hospitalisation Treatment	As Charged	As Charged

<u>LIMIT OF COMPENSATION</u>		
	Plan 1	Plan 2
Per Any One Accident	S\$25,000	S\$10,000

SCHEDULE C

Policy No:

SCHEDULE OF DEDUCTIBLES**Deductible Amount to be borne by the Member**

<u>OUTPATIENT BENEFITS</u>	
Accidental Emergency Outpatient & follow-up Treatments at GPs/A&E/Polyclinics/SOC: - includes Ambulance Fees - includes Physiotherapy at SOC and Singapore Sports Council	S\$250
Traditional Chinese Medicine	S\$150

<u>INPATIENT BENEFITS</u>	
Daily Room & Board Benefit (including ICU)	S\$100 daily up to 50 days
Daily In-Hospital Consultation Benefit/ Surgical Benefit	S\$300
Other Hospital Charges	S\$800
Post-Hospitalisation Treatment (within 1 year from accident)	S\$300