



**PRODUCT SUMMARY  
 MEDICAL REFUND PROTECTOR**

**PRODUCT INFORMATION**

This insurance plan covers the **Insured Person** 24 hours worldwide and it

- pays daily **Hospitalisation** cash benefit for up to 365 days due to **Injury(ies)** and **Illness(es)**
- reimburses pre-**Hospitalisation** diagnostic services charges within 30 days prior to **Hospitalisation** and post-**Hospitalisation** follow-up treatment charges within 60 days after discharge for **Injury** or **Illness**
- pays a lump sum cash for **Major Cancer**

With the exception of pre-**Hospitalisation** diagnostic services charges and post-**Hospitalisation** follow-up treatment charges which are on reimbursement basis, all benefits are payable over and above any other insurance coverage that the **Insured Person** may already have.

Coverage	Plan 1	Plan 2
1. Daily <b>Hospitalisation</b> Cash Benefit (due to <b>Injury</b> including dengue fever )	\$50	\$100
2. Daily <b>Hospitalisation</b> Cash Benefit (due to <b>Illness</b> )	\$100	\$200
3. Daily <b>Hospitalisation</b> Cash Benefit (in Intensive Care Unit)	\$150	\$300
4. Pre- <b>Hospitalisation</b> Diagnostic Services	\$1,000 per Injury or Illness Max \$5,000 all Injury(ies) and Illness(es)	\$2,000 per Injury or Illness Max \$10,000 all Injury(ies) and Illness(es)
5. Post- <b>Hospitalisation</b> Follow-Up Treatment	\$2,000 per Injury or Illness Max \$10,000 all Injury(ies) and Illness(es)	\$4,000 per Injury or Illness Max \$20,000 all Injury(ies) and Illness(es)
6. <b>Major Cancer</b> Benefit	\$10,000	\$15,000

**MONTHLY PREMIUM in SGD (inclusive of 5% GST)**

Age	Plan 1	Plan 2
0 - 18	19.40	30.03
19 - 40	25.20	38.85
41 - 50	45.99	73.68
51 - 55	53.27	88.23
56 - 59 (renewal)	64.20	110.79
60 - 64 (renewal)	78.03	138.44

The premium is payable monthly and is debited from the **Insured's** Standard Chartered Bank Account or charged to a designated Credit Card Account. Premium is subject to prevailing GST rates. The monthly premium is based on the Insured Person's age last birthday and will increase when he/she enters into the next age band.

**NO CLAIM PREMIUM REFUND**

- (a) For each 5 consecutive **Policy Years** that **You** keep this Policy in force and stay claim(s)-free, **We** will refund **You** 50% of the premiums **You** have paid for the 5 consecutive **Policy Years**.
- (b) However, if **You** keep this Policy in force for more than the first 3 consecutive Policy Years and terminate it before the expiry of the 5<sup>th</sup> consecutive **Policy Year**, **We** will refund **You** 25% of the premiums **You** have paid before the termination.

The refund will be made within 60 (sixty) days after **You** renew the Policy in accordance with (a) or renew and terminate the Policy in accordance with (b) above, whichever may be the case.

Only one refund will be made under (a) or (b) above and only a one-time refund will be made under (b).

If a claim arises or a situation arises which has or may give rise to a claim under this Policy and/or there is a breach of any policy terms and conditions by the Insured and/or the Insured Person(s), this No Claim Premium Refund will be forfeited and no refund of premiums will be made.

### **Eligibility**

Eligibility is restricted to individuals whose **Usual Country of Residence** is Singapore and the maximum age for first enrolment in the Policy is 55 (fifty-five) years old. So long as renewals being invited by **Us** and required premiums are paid when due, an **Insured Person** will remain eligible for cover until the premium payment due date immediately following his or her 65<sup>th</sup> (sixty-fifth) birthday when all cover under the Policy shall cease.

Children shall only be eligible for insurance 15 (fifteen) days after the date of normal healthy birth or 15 (fifteen) days after discharge in a normal healthy condition from the hospital where the birth took place, whichever is later and is insured under the same plan as the parent.

### **Key Definitions**

#### **Accident**

means an event which happens suddenly and gives rise to a result which the **Insured Person(s)** did not intend or anticipate.

#### **Hospitalisation**

means an **Insured Person's** confinement in a **Hospital** for a continuous uninterrupted period of at least 24 (twenty-four) hours upon the advice of and under the regular care and attendance of a **Physician** for which the **Hospital** makes a charge for room and board.

#### **Illness**

means physical illness or disease, marked by a pathological deviation from the normal healthy state.

#### **Injury**

means all bodily injury suffered anywhere in the world caused solely by an **Accident** and not by sickness, disease or gradual physical or mental wear and tear.

#### **Insured/You**

means the policyholder named as **Insured** in the Schedule of this Policy.

#### **Insured Person**

means an individual named as **Insured Person** in the Schedule of this Policy.

#### **Major Cancer** means

a malignant tumour characterised by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. This diagnosis must be supported by histological evidence of malignancy and confirmed by an oncologist or pathologist.

The following are **excluded**:

- a) Tumours showing the malignant changes of carcinoma-in-situ and tumours which are histologically described as pre-malignant or non-invasive, including, but not limited to: Carcinoma-in-Situ of the Breasts, Cervical Dysplasia CIN-1, CIN-2 and CIN-3;
- b) Hyperkeratoses, basal cell and squamous skin cancers, and melanomas of less than 1.5mm Breslow thickness, or less than Clark Level 3, unless there is evidence of metastases;
- c) Prostate cancers histologically described as TNM Classification T1a or T1b or Prostate cancers of another equivalent or lesser classification, T<sub>1</sub>N<sub>0</sub>M<sub>0</sub> Papillary micro-carcinoma of the Thyroid less than 1 cm in diameter, Papillary micro-carcinoma of the Bladder, and Chronic Lymphocytic Leukaemia less than RAI Stage 3; and
- d) All tumours in the presence of HIV infection.

#### **Policy Year**

means a period of 12 (twelve) months starting from the original inception date of this Policy and each subsequent consecutive period of 12 (twelve) months, for which this Policy remains in force.

#### **Pre-existing Conditions**

means any **Injury, Illness**, condition or symptom:

- for which **Treatment** or medication or advice or diagnosis has been sought or received or was reasonably foreseeable prior to the commencement of the Policy for the **Insured Person(s)** concerned, or
- which originated or was known to exist by the **Insured** and/or **Insured Person(s)** (or anyone insured under the Policy) prior to the commencement of the Policy whether or not **Treatment** or medication or advice or diagnosis was sought or received.

#### **Survival Period**

means the period of 30 (thirty) days after the first diagnosis of a **Major Cancer** by a **Physician** for which an **Insured Person** must survive before a claim can be made.

**Waiting Period**

means the period of time specified in the Policy from the original inception date of the Policy during which a claim arising from any cause other than **Injury** is not covered.

**We / Us / Our**

means MSIG Insurance (Singapore) Pte. Ltd.

**Key Product Provisions**

The following are some provisions/conditions found in the policy contract of this plan. This is only a brief summary and **You** are advised to refer to the exact terms and conditions applicable to the policy contract. Please call **Our** Customer Service Hotline at 6827 7605 should **You** require further explanation.

1. A **Waiting Period** of 30 days applies to **Hospitalisation** due to **Illness**.
2. A **Waiting Period** of 90 days and a **Survival Period** of 30 days applies to **Major Cancer** Benefit.
3. The Policy will be renewed automatically each month unless either party terminates the contract with 30 days' written notice.
4. **We** may adjust premium rates periodically. **We** may also alter Policy terms and conditions by giving the **Insured** 30 days' written notice.
5. The cover for an **Insured Person** automatically terminates when he/she is overseas for more than 3 consecutive months or when he/she reaches the age of 65 years.
6. Key exclusions include **Pre-existing conditions**, self-inflicted injury, suicide, hazardous sport or activity, war and terrorism.
7. Excluded occupations include military / law enforcement / civil defence personnel; workers engaged in cleaning and maintenance, roofing or repair activities involving scaffoldings or gondolas; occupations dealing with poisonous or hazardous gases or substance; any off-shore occupations such as ship crew, diver, fisherman.
8. The **Insured** and **Insured Person** must provide **Us** with complete and accurate information when applying for this Plan or when making any claim, otherwise **Your** rights under the Plan may be reduced or lost.
9. Either the **Insured** or **We** may cancel this Policy by giving the other party 30 days notice in writing sent to the last known address. **We** will refund premium already paid for the period of insurance that is beyond the date of termination as follows so long as no claim has been made in relation to that period of insurance.
  - (a) If the **Insured** cancels the Policy, **We** will make a refund of premium based on **Our** usual short period rates except that no refund will be made if the unexpired period of insurance is less than 15 days.
  - (b) If **We** cancel the Policy as provided in this Clause, **We** will make a pro-rata refund of the premium paid.
10. **We** must be informed immediately in writing of any material information or change of circumstances which may increase the possibility of a claim under the Policy. **We** reserve the right to continue cover on terms and conditions **We** consider appropriate to such changes in material information or circumstances or to decline to continue cover under the Policy.
11. The **Insured** or **Insured Person(s)** must report in writing to **Us** within the **Notification Period**, full details of any **Injury** and/or **Illness** which may result in a claim under this Policy. In the event of death of an **Insured Person**, **We** shall require sight of the death certificate and may require a post-mortem examination at **Our** expense. In unforeseen situation where the report cannot be made within the **Notification Period**, it must be made as soon as reasonably possible.
12. The Policy will contain **Our** promise of service. **You** may contact **Us** if **You** have concerns about the terms of the Policy or any claim that may be made.

**Important Notes:**

**This Product Summary is not a contract of insurance. Full details of the terms, conditions and exceptions of this insurance are provided in the Policy and will be sent to the Insured upon acceptance by Us.**

**We will give the You "Free Look" period of 14 business days from the date You receive the full set of Policy documents. If within these 14 days You tell us that You do not want the Policy, We will cancel it from its start date and refund in full the premium You have paid so long as no claim has arisen.**