# MyShield / MyHealthPlus

The plan that gives you extra care and covers your hospital bills – as charged

AVIVA

# Getting the right healthcare **should be easy.**

Thankfully, in Singapore you can access a wide range of world-class healthcare options with cutting-edge medical technology, skilled professionals and excellent service. And the government's mandatory MediShield Life insurance plan helps to ensure that you won't be denied medical attention when you need it.

| Facts about MediShield Life |
|---|
| Helps pay for large hospital bills and certain high-cost outpatient treatments, such as dialysis and chemotherapy for cancer |
| Covers all Singapore Citizens and Permanent Residents, from birth, even those with pre-existing conditions |
| Coverage is sized for subsidised treatment in public hospitals and pegged at Class B2 or C wards |
| Limits are imposed on the claims amount for various benefits |

## Would MediShield Life cover all your needs **if you were hospitalised?**

# Medical bills **can be huge.**

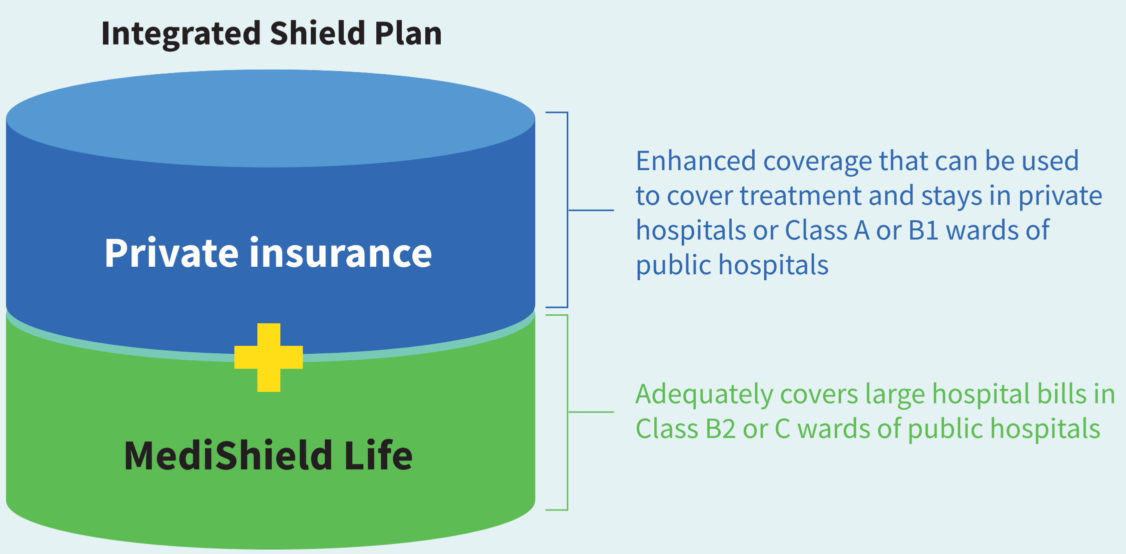
Here are examples of large claims paid by Aviva from 2018 to 2020 that show how hospital and medical bills can rack up for patients.

| Illness / Condition | Age | Hospital Type | Length of Stay | Amount Incurred | Amount Paid by Aviva^ |
|---|---|---|---|---|---|
| Breast cancer | 54 | Private hospital | 397 days | S$985,840 | **S$982,224** |
| Heart failure | 54 | Private hospital | 17 days | S$664,817 | **S$639,660** |
| Acute leukaemia | 31 | Private hospital | 124 days | S$627,825 | **S$627,825** |

^ The amount paid by Aviva includes the amount paid from MyHealthPlus and from MediShield Life.

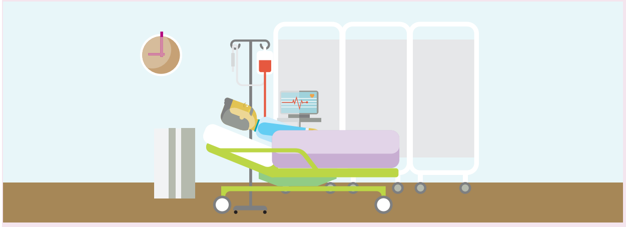
**Build a more robust safety net that lets you choose the medical care you want.**

Here's how your MediShield Life coverage can transform into an Integrated Shield Plan (IP) that gives you more comprehensive protection, with no overlapping coverage – in one single payment.



# When it comes to medical coverage for you and your family, **what would you prefer?**

## Option 1



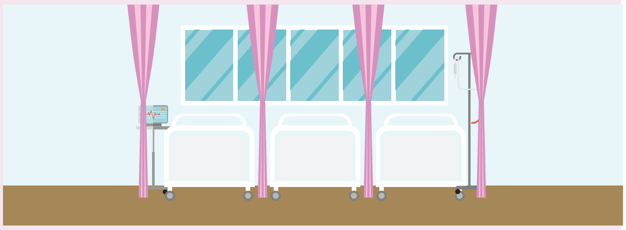
**Air-conditioned** wards for **one patient or shared with up to 3 others** (private hospital, or Class A or B1 ward in a restructured hospital)


Medical plan with **as charged** coverage (i.e. pays for all expenses approved by your insurer, other than mandatory costs that you have to bear)

**Freedom to choose a doctor** for your treatment


Pre- and post-hospital treatment expenses **covered**

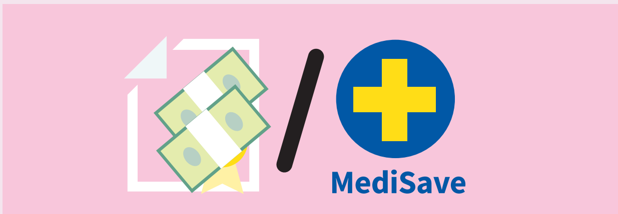
## Option 2



**Non air-conditioned** wards **shared by more than 4** patients (Class B2 or C ward in a restructured hospital)


Medical plan **with limits** on your coverage amount, so you may have to fork out more of your own money

**Any doctor** can be assigned to treat you




Pre- and post-hospital treatment expenses **not covered**, so you have to top up cash or use MediSave to pay some of your bills

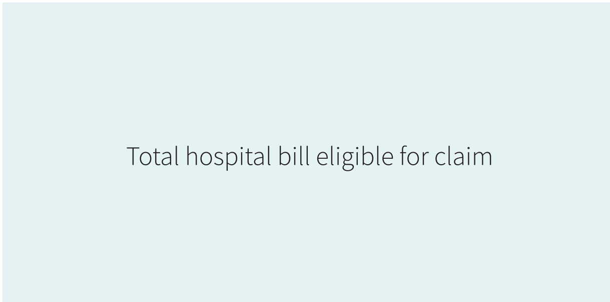
If you'd want a hospital stay with greater privacy and comfort, or the freedom to choose your medical specialist, complement your MediShield Life with an IP.

# Decided on **getting an IP?**

Aside from getting an IP, you can consider getting a **rider** for **more healthcare benefits** and **less worries about out-of-pocket expenses**.

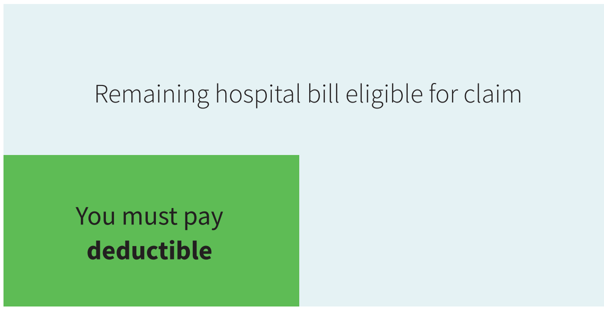
Here's how it works.

**1** Let's say this is your entire hospital bill that is eligible for claim under the policy terms and conditions.



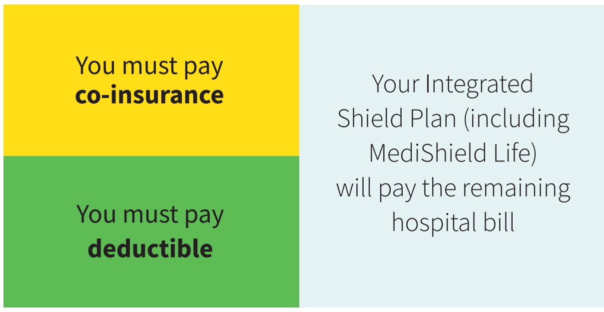

**2** First, you'll need to pay a sum called "deductible".

This is the sum you have to pay for your hospital bill(s), before the insurer makes any payout. It's capped at a certain amount each policy year.

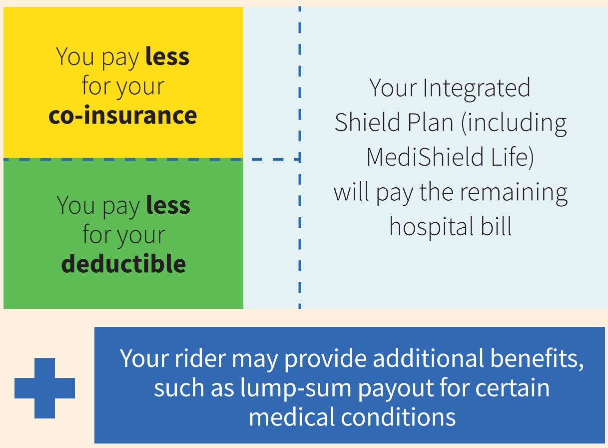



**3** Next, you'll have to co-share the remaining bill with the insurer.

"Co-insurance" is expressed as a percentage. A 10% co-insurance means you need to pay 10% of the bill (after the deductible) while the insurer takes care of the other 90%.




A rider can **reduce the amount of deductible and co-insurance** you'll need to pay for your hospital bill, as well as provide additional benefits.




Diagrams are for illustrative purposes only to show the portions payable by the policyholder, the Integrated Shield Plan and the rider. They are not drawn to scale.

# Aviva's **MyShield** and **MyHealthPlus**: 4 ways our IP **takes better care of you**

Aviva's **MyShield** plan is an IP approved by the Ministry of Health while **MyHealthPlus** is a rider that gives additional benefits when added on to a MyShield coverage.

Here's how they can help put your health first.

## 1. You can focus on recovery with our **extensive coverage**.

- High annual policy limit of up to S$2 million per year[1]
- Pays for pre-hospital treatment (up to 180 days[2]) and post-hospital treatment (up to 365 days[2])
- Co-insurance capped at S$25,500 per policy year, reducing your worries about large medical bills

## 2. You'll get **priority care** when you need it the most.

- Priority access to more than 300 experienced medical specialists across various fields within three working days
- Preferred rates for outpatient consultation
- Certainty of claims outcome through pre-approval process for treatments by Aviva's panel of medical specialists
- Exclusive Patient Support Programme to guide you on your recovery journey

Find out more about our services at www.aviva.com.sg/medicalspecialists

## 3. Your children can enjoy **MyShield coverage for free (for child up to 6 months old)**[3] or at **discounted premium rates (for child up to 20 Age Next Birthday)**[4], giving you peace of mind.

## 4. You get **additional perks** when you opt for our rider, **MyHealthPlus**

(details on page 8).

- Extra cash to tide you through your recovery should you be diagnosed with any of the covered critical illnesses[5]
- Get your children covered under MyHealthPlus for free[6] or at preferred rates[7], up to 20 Age Next Birthday
- Option to get second medical opinion and the best possible care overseas[8]

# Key features of **MyShield**

## Choice of ward type with different policy year limits

- As charged[9] coverage for hospital stays depending on the plan you choose

| MyShield | Plan 1 | Plan 2 | Plan 3 |
|---|---|---|---|
| Hospital ward type | Any standard ward of a private hospital | Any standard ward of a restructured hospital | Any 4-bed (B1) standard ward of a restructured hospital |

- Up to S$2 million policy year limit for MyShield Plan 1 when you get a certificate of pre-authorisation via Aviva's panel of medical specialists

## Pre- and post-hospitalisation coverage

- Extensive coverage to take care of your medical bills

| Pre-hospital treatment | Post-hospital treatment |
|---|---|
| Up to 180 days before admission[2] | Up to 365 days after discharge[2] |

For pre- and post-hospital treatment in private hospitals, you must have received a certificate of pre-authorisation via Aviva's panel of medical specialists for your hospital stay

- Coverage for treatment received in the Accident and Emergency department within 24 hours prior to your hospital admission

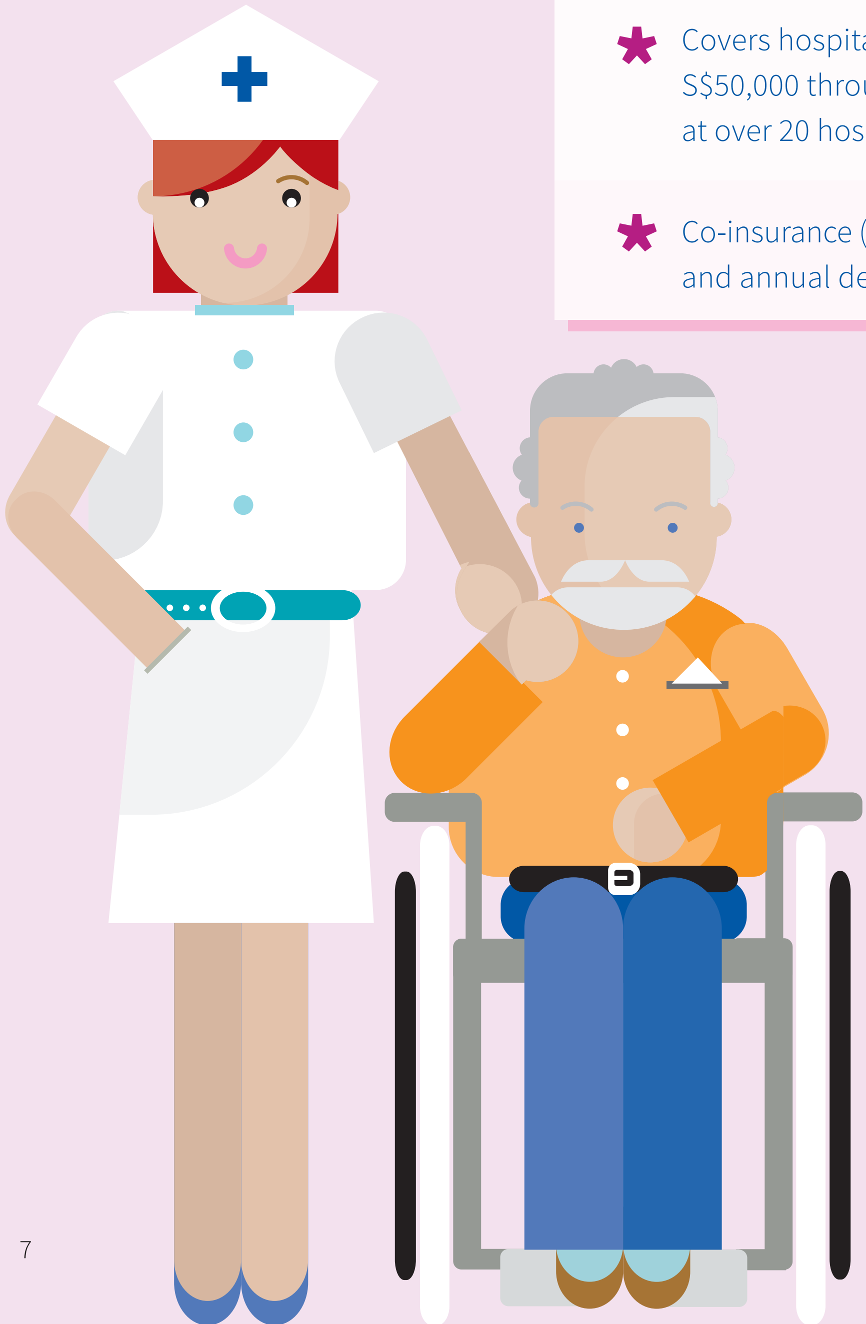
## Inpatient and Outpatient treatments covered

- Planned[10] and Emergency overseas inpatient treatment
- Major outpatient treatments[11] including chemotherapy and kidney dialysis
- Extra inpatient benefit for 5 critical illnesses –
  - Heart attack of specified severity
  - Major Cancer[12]
  - Stroke with Permanent Neurological Deficit
  - End-Stage Lung Disease
  - End-Stage Liver Failure
- Preventive treatment for cancer[13]

## Newborn and children benefits

- Free cover of up to S$50,000 for newborns up to 6 months old[3]
- Discounted premium rates for children[4] (up to 20 Age Next Birthday) if both parents are covered under MyShield Plan 1 or Plan 2

* Your yearly renewable coverage is guaranteed for life as long as your policy is inforce
* Covers hospital admission deposit of up to S$50,000 through Letter of Guarantee (LoG)[14] at over 20 hospitals including private hospitals
* Co-insurance (capped at S$25,500 per policy year) and annual deductibles will apply



# Key features of **MyHealthPlus**

**Add on MyHealthPlus for extra protection**

You can add on MyHealthPlus to your MyShield plan so you'll have less out-of-pocket expenses for your hospital bill. You'll also enjoy more benefits for your medical coverage.

There are two options of MyHealthPlus to suit your needs.

| Key Benefits | Option A-II | Option C-II |
|---|---|---|
| **Co-insurance benefit** | Covers 50% of the co-insurance amount incurred under MyShield. Maximum co-insurance[15] payable by policyholder is S$3,000 per policy year | |
| **Lump-sum payout for Critical Illness benefit** | a) S$10,000 per lifetime if diagnosed with any of the listed Critical Illnesses[5]<br>b) An additional lump sum payout of up to S$3,000 per lifetime for kidney dialysis as a result of kidney failure[16] | |
| **Ambulance fees or transport to hospital** | S$80 per injury or illness | |
| **Global Treatment** | Coverage of up to S$1,250,000 per policy year and up to S$2,500,000 per lifetime with certificate of pre-authorisation obtained from panel overseas hospital for six covered illnesses and medical procedures. More details on page 9 | |
| **Cover for child(ren)** | Free cover for child(ren)[6] | Preferred rate for child(ren)[7] |
| **Ward downgrade benefit**[17] | Covers 50% of MyShield annual deductible when you stay in a lower ward class than what's covered under your chosen plan | N.A. |
| **Deductible benefit** | N.A. | Covers MyShield annual deductible after policyholder pays MyHealthPlus annual deductible |

**Premium discount coming in 2022!**

To give our policyholders more value, we're extending a 15% premium discount on your MyHealthPlus premiums if your claim amount is S$1,000 or less for a consecutive 2-year period. Please refer to **www.aviva.com.sg/myshield-updates** to get more information on the discount.

For complete details on MyShield and MyHealthPlus, please refer to the Benefits Schedule on Page 16 and Page 22 respectively. For details on the Terms and Conditions, please refer to the Policy Contracts.

# Get the best possible care **without geographical and financial roadblocks**

We believe you deserve the best options when it comes to healthcare.

Our Global Treatment benefit gives you the freedom to seek a second medical opinion from our network of **50,000 international medical experts**. They have all been voted by other medical specialists as the best in their field and are from top-class medical institutions.

Here's what the MyHealthPlus Global Treatment benefit covers:

**Overseas hospitalisation and medical expenses**[8]
for six illnesses and medical procedures
- Cancer treatment
- Inter-cranial and specific spinal cord surgery
- Coronary artery by-pass surgery
- Live-donor organ transplant
- Heart valve replacement or repair
- Bone marrow transplant


**Travel and accommodation expenses** for you and your companion. Where the Life Assured is a child, we'll pay for up to two travel companions.

**Cash payout of S$125 per day** for daily expenses incurred abroad per overnight stay at the hospital, for up to 60 days.

**Additional policy limit** (on top of MyShield policy year limit) when you use our Global Treatment benefit:
- S$1,250,000 per policy year
- S$2,500,000 per lifetime

Please note that MyShield annual deductible and co-insurance will apply[18].

# Access to the world's best, minus the hassle
# – only with Aviva's Global Treatment

With our Global Treatment benefit, you just have to make one call and we'll make all the arrangements to help you receive the best possible treatment and care.

## Step 1

Call **1800 8800 880 (24/7 Hotline)** to apply for Global Treatment benefit.

## Step 2

We'll gather your medical reports on your behalf. An expert will review your case and produce a full report confirming or changing your diagnosis and/or treatment plan.

Rest assured they'll ensure that the proposed treatments are medically necessary and the most appropriate for you.

## Step 3

Based on the report, we'll recommend a list of medical centres for you to choose from.

## Step 4

Within 10 working days, we'll make all the necessary medical treatment, travel and accommodation arrangements for you and your travel companion. Just pack your bags and you're all set to receive the best possible treatment and care for your condition.

# Total health protection for you

Here's how **MyShield** and **MyHealthPlus** work with MediShield Life to help you with your medical expenses.

Janice is a 39-year-old sales manager. She's diagnosed with **breast cancer** during a routine check-up.

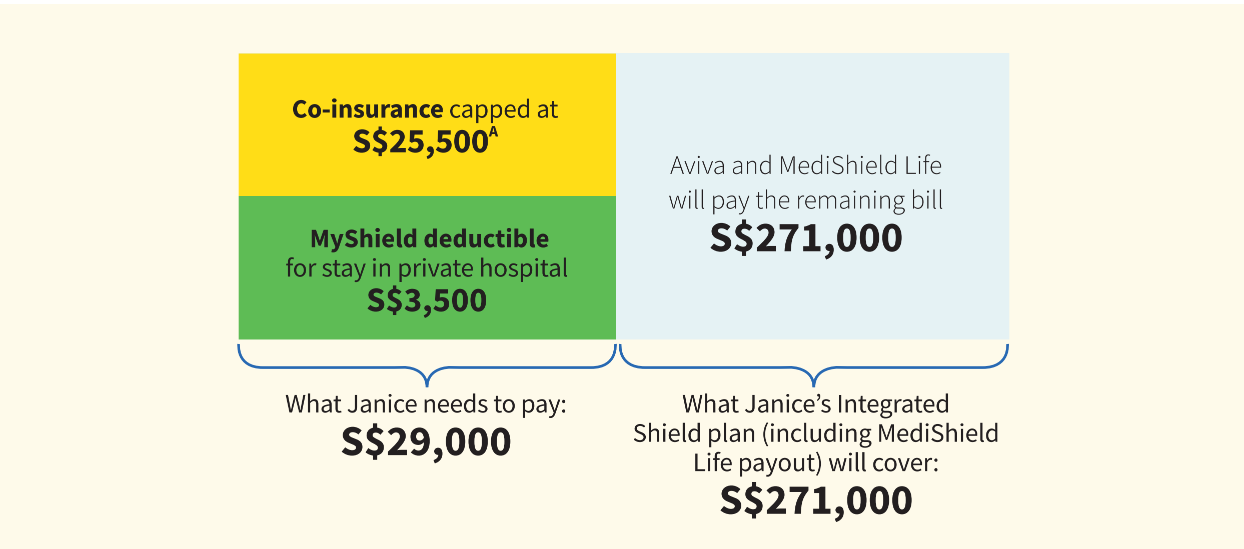
She chooses a doctor on **Aviva's panel of specialists** and is advised to undergo a mastectomy of her left breast to remove the cancerous tissue, as well as a mastectomy of her right breast to prevent further breast cancer.

She obtained a **certificate of pre-authorisation** prior to her hospital admission so that she can have peace of mind of her claims payout.

| No. of days warded | Hospital type | Ward type | Total hospitalisation cost |
|---|---|---|---|
| 27 | Private | 1-bed | S$300,000 |

Here's how Janice's insurance cover works depending on the plan and rider she has bought.

**Scenario 1:** Janice has **MyShield Plan 1** (no rider).

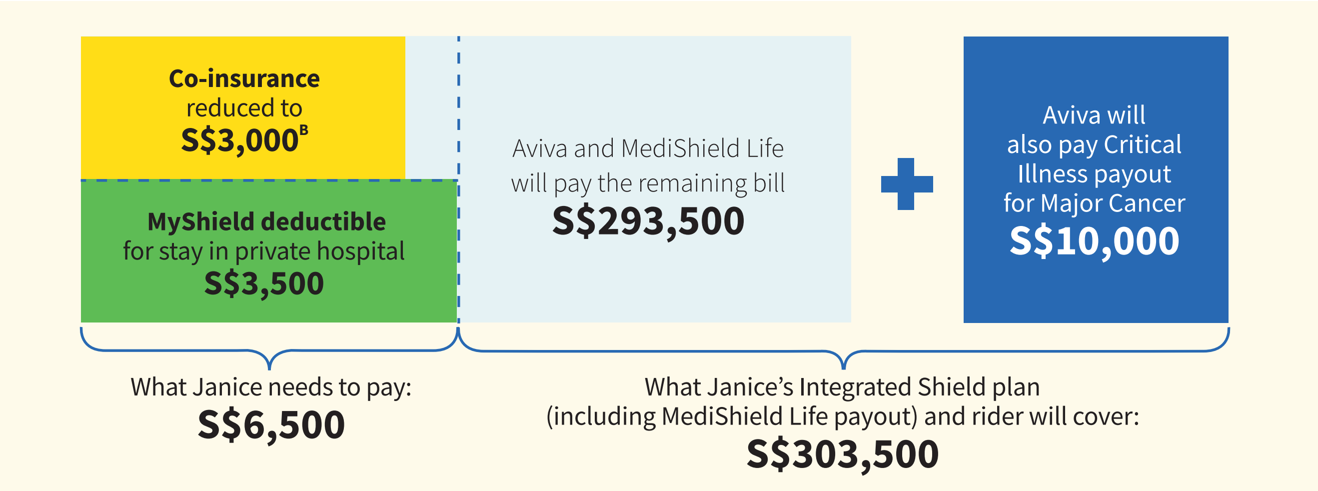



**Notes:**

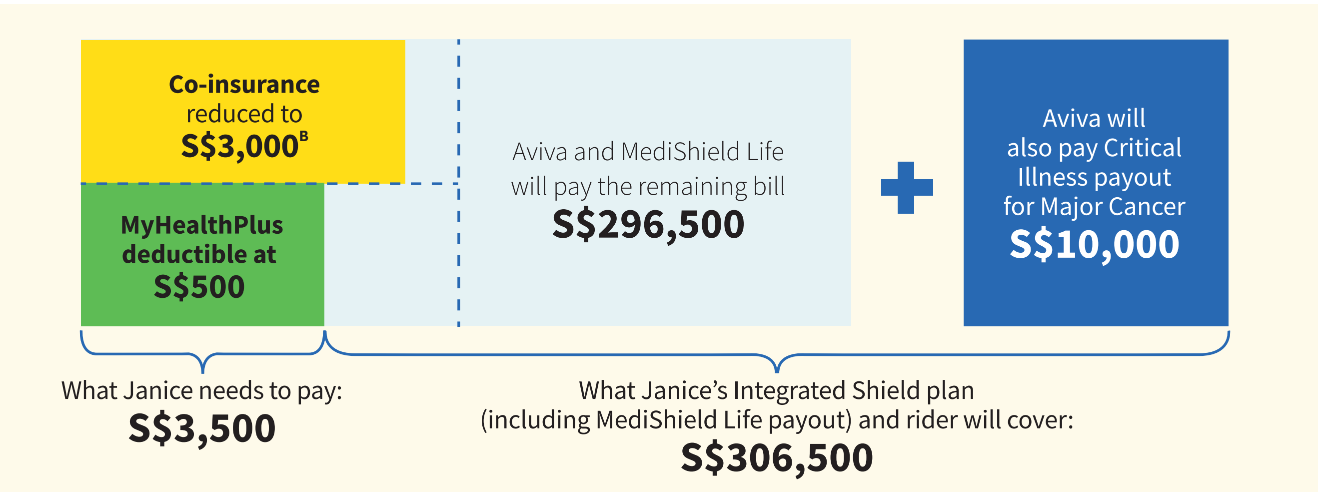
A. MyShield co-insurance amount is calculated as 10% of the claimable amount, after subtracting the deductible, and is capped at S$25,500 each policy year.

Diagrams are for illustrative purposes only to show the portions payable by the policyholder and the Integrated Shield Plan. They are not drawn to scale.

**Scenario 2:**
Janice has **MyShield Plan 1** and **MyHealthPlus Plan 1 Option A-II rider**.




**Scenario 3:**
Janice has **MyShield Plan 1** and **MyHealthPlus Plan 1 Option C-II rider**.




## With MyHealthPlus and getting pre-authorisation, Janice's **payable amount that's not covered by insurance is significantly lower!**

**Notes:**

B. MyHealthPlus Option A-II and C-II rider will pay 50% of MyShield co-insurance amount, and the maximum co-insurance payable by Janice is capped at S$3,000 per policy year as certificate of pre-authorisation was obtained.

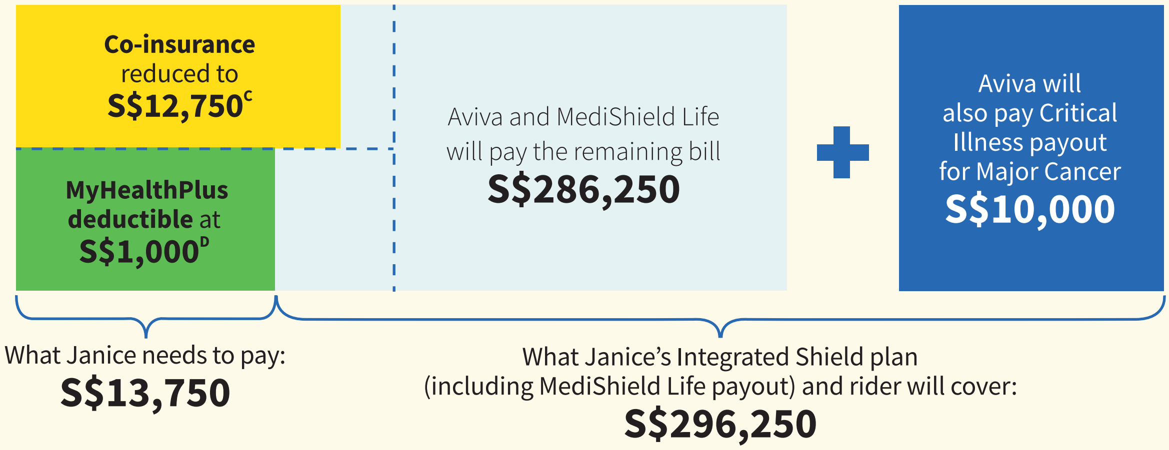
Diagrams are for illustrative purposes only to show the portions payable by the policyholder, the Integrated Shield Plan and the rider. They are not drawn to scale.

# Here's why pre-authorisation matters

Pre-authorisation gives you peace of mind on the certainty of your claims outcome. It also helps to reduce your out-of-pocket expenses.

For instance, if Janice had purchased MyHealthPlus Option C-II rider, but **did not obtain a certificate of pre-authorisation via Aviva's panel of specialists** prior to her hospital admission, her co-insurance payment will not be capped at S$3,000 per year. She would also be paying a higher deductible amount.

Here's how Janice's insurance cover works if she has MyHealthPlus Option C-II **but did not obtain a certificate of pre-authorisation** from Aviva's panel of medical specialists:




**Notes:**

C. Without pre-authorisation, the co-insurance cap of S$3,000 under MyHealthPlus will not apply. However, as MyShield co-insurance is capped at S$25,500 each policy year and MyHealthPlus covers 50% of MyShield co-insurance amount, Janice's co-insurance is capped at S$12,750.

D. Without pre-authorisation, the annual deductible under MyHealthPlus is also higher at S$1,000.

Diagrams are for illustrative purposes only to show the portions payable by the policyholder, the Integrated Shield Plan and the rider. They are not drawn to scale.

1. The policy year limit of S$2,000,000 is for MyShield Plan 1 and assumes that all treatment(s) in the policy year are made through a panel specialist in a private hospital with a certificate of pre-authorisation, or done at a restructured hospital or community hospital.

2. Pre-hospital treatment benefit refers to the eligible expenses incurred up to 180 days before admission for Plan 1, Plan 2 and Plan 3 at restructured/community hospitals. Post-hospital treatment benefit refers to the eligible expenses incurred up to 365 days after discharge for Plan 1, Plan 2 and Plan 3 at restructured/ community hospitals. For pre- and post-hospital treatment at private hospitals, you must have received a certificate of pre-authorisation via Aviva's panel of medical specialists for your hospital stay.

3. Free coverage for newborn starts from the date a newborn child(ren) is 15 days old or the date of discharge from hospital after birth, whichever is later. The free coverage ends on the date the newborn is 6 months old or takes up a MediSave-approved Integrated Shield Plan, whichever is earlier. Both parents must be covered under MyShield Plan 1 or Plan 2 continuously for at least 10 months from the cover start date of their respective policies on the newborn's date of birth. Pre-hospital treatment received before and post-hospital treatment received after the free coverage period are excluded.

4. Discounted premium rates for child(ren) refers to the Family Discount for Child(ren) under Plan 2 coverage for up to 4 children, applicable till the child is 20 Age Next Birthday (ANB), if both parents are covered under MyShield Plan 1 or 2. Please refer to the Product Summary for more details.

5. Only applies if the Life Assured has crossed his/her first birthday and is not older than 65 ANB. If the critical illness diagnosed is Major Cancer, Coronary Artery By-pass Surgery, Angioplasty & Other Invasive Treatment for Coronary Artery, Other Serious Coronary Artery Disease and/or Heart Attack of Specified Severity, the critical illness benefit is payable only if diagnosis is made after a waiting period of 90 days from the cover start date or last reinstatement date, whichever is later. Please refer to the Policy Contract for details.

6. Your dependant child who is covered under MyShield's family discount for child(ren) is also eligible for free cover under Option A-II, Plan 2 of MyHealthPlus for up to 20 ANB, if both parents are covered under Plan 1 or 2 of MyShield as well as Plan 1 or 2 of MyHealthPlus Option A or C or Option A-II or C-II. The child shall enjoy the same benefits provided under Option A-II, Plan 2 of the Benefits Schedule.

7. Your dependant child who is covered under MyShield's family discount for child(ren) is also eligible for the Preferred Rate for Children under Option C-II, Plan 2 of MyHealthPlus for up to 20 ANB, if both parents are covered under Plan 1 or 2 of MyShield as well as Plan 1 or 2 of MyHealthPlus Option A or C or Option A-II or C-II. The child shall enjoy the same benefits provided under Option C-II, Plan 2 of the Benefits Schedule.

8. Medical expenses under the Global Treatment benefit are subject to co-insurance and deductibles. The Global Treatment benefit is applicable for MyHealthPlus Option A-II and C-II, Plan 1 only. For details, please refer to the Product Summary and Policy Contract.

9. As charged refers to the eligible expenses incurred by the Life Assured which is subject to pro-ration, deductible, co-insurance, policy year limit, admission of ward class and other policy terms.

10. We will pay for planned inpatient treatment or day surgery at any overseas hospital that has an approved working arrangement with a MediSave-accredited institution/referral centre in Singapore. Pre-hospital treatment received before and post-hospital treatment received after emergency overseas treatment are not covered. We will pay this benefit only if the residency of the Life Assured is Singapore on the date of the Life Assured's admission.

11. Please refer to the Policy Contract for details of major outpatient treatment coverage.

12. Proton Beam Therapy is excluded from this benefit.

13. Preventive treatment for cancer covers surgery to prevent further cancer if the Life Assured already had treatment for cancer and we have paid for the treatment.

14. Letter of Guarantee (LoG) covers the hospital deposit for up to S$50,000. LoG will be issued to hospitals for a Life Assured who is hospitalised as an inpatient at participating hospitals, provided that the estimated total bill amount exceeds the plan's deductible amount (if applicable). Please refer to www.aviva.com.sg/myshield for the list of participating hospitals for LoG.

15. The maximum co-insurance is accumulated across panel specialists in a private hospital with a certificate of pre-authorisation, panel private dialysis centre, subsidised centre for kidney dialysis, panel overseas hospital, restructured hospital and community hospital and does not include the co-insurance accumulated under panel specialist in a private hospital without a certificate of pre-authorisation.

16. Additional critical illness benefit for kidney failure will be covered based on the type of centre or hospital at which the Life Assured receives the dialysis.

17. Ward Downgrade Benefit:
If the Life Assured is an inpatient at a Singapore restructured hospital, we pay this benefit as shown in the benefits schedule as long as:
    - the admission as an inpatient is recommended by a doctor as necessary medical treatment; and
    - the Life Assured stays in the following wards lower than his/her chosen plan:
        - For Plan 1, any standard ward of a restructured hospital;
        - For Plan 2, a 4-bed (B1) standard ward or below of a restructured hospital; or
        - For Plan 3, a 6-bed (B2) standard ward or below of a restructured hospital.

    We will not pay the ward downgrade benefit for day surgery, admission as an inpatient in a community hospital, admission as an inpatient in a private hospital, or if there is no hospital stay involved.

18. For deductibles and co-insurance, please refer to the Product Summary and Policy Contract for details.

# Benefits Schedule for **MyShield**

| Benefits Schedule in SG Dollars | | | | | | |
|---|---|---|---|---|---|---|
| **Benefit Parameters** | **MyShield** (payout includes MediShield Life payout) | | | **MediShield Life** | | |
| | **Plan 1** | **Plan 2** | **Plan 3** | | | |
| Hospital ward type | Any standard ward of a private hospital | Any standard ward of a restructured hospital | Any 4-bed (B1) standard ward of a restructured hospital | Any 6-bed (B2) standard ward of a restructured hospital | | |
| **Inpatient hospital treatment** | | | | | | |
| Daily room, board and medical related services[1] | As charged | | | S$800 per day (S$1,000 per day for first 2 days) | | |
| Intensive care unit (ICU)[1] | As charged | | | S$2,200 per day (S$2,400 per day for first 2 days) | | |
| **Surgical benefit[2] (per surgery)** | As charged | | | **A** | **B** | **C** |
| Table 1 A/B/C (less complex procedures) | As charged | | | S$240 | S$340 | S$340 |
| Table 2 A/B/C | As charged | | | S$580 | S$760 | S$760 |
| Table 3 A/B/C | As charged | | | S$1,060 | S$1,160 | S$1,280 |
| Table 4 A/B/C | As charged | | | S$1,540 | S$1,580 | S$1,640 |
| Table 5 A/B/C | As charged | | | S$1,800 | S$2,180 | S$2,180 |
| Table 6 A/B/C | As charged | | | S$2,360 | S$2,360 | S$2,360 |
| Table 7 A/B/C (more complex procedures) | As charged | | | S$2,600 | S$2,600 | S$2,600 |
| Surgical implants[3] | As charged | | | S$7,000 per treatment | | |
| Radiosurgery[4, 5] | As charged | | | S$10,000 per treatment course | | |
| Major organ transplant benefit[6] | As charged | | | Covered under inpatient hospital treatment | | |
| Stem cell transplant benefit[5] | As charged | | | Covered under inpatient hospital treatment (S$6,000 per treatment for continuation of autologous bone marrow transplant treatment of multiple myeloma) | | |
| Accident inpatient dental treatment[7] | As charged | | | Covered under inpatient hospital treatment | | |
| Pre-hospital treatment[8] (Accident and Emergency (A&E) treatment within 24 hours prior to an inpatient treatment for the same injury or illness is covered) | As charged up to 90 days prior to admission **OR** As charged up to 180 days prior to admission (Panel specialist in a private hospital with certificate of pre-authorisation, restructured hospital or community hospital) | | | N.A. | | |
| Post-hospital treatment[8] | As charged up to 180 days after discharge **OR** As charged up to 365 days after discharge (Panel specialist[8] in a private hospital with certificate of pre-authorisation, restructured hospital or community hospital) | | | N.A. | | |
| Stay in a community hospital[9] (Rehab) | As charged | | | S$350 per day | | |
| Stay in a community hospital[9] (Sub-Acute) | As charged | | | S$430 per day | | |
| Inpatient congenital anomalies (first diagnosed **after** a waiting period of 12 months) | As charged | | | Covered under inpatient hospital treatment | | |
| Inpatient congenital anomalies (first diagnosed **within** a waiting period of 12 months) | N.A. | | | Covered under inpatient hospital treatment | | |
| Inpatient pregnancy complications[10] (**after** a waiting period of 10 months) | As charged | | | Covered under inpatient hospital treatment | | |
| Living donor organ transplant[11] (**after** a waiting period of 24 months) | S$50,000 per lifetime | S$30,000 per lifetime | S$20,000 per lifetime | Covered under inpatient hospital treatment | | |

# Benefits Schedule for **MyShield** *(cont'd)*

| Benefits Schedule in SG Dollars | | | | |
|---|---|---|---|---|
| **Benefit Parameters** | **MyShield** (payout includes MediShield Life payout) | | | **MediShield Life** |
| | **Plan 1** | **Plan 2** | **Plan 3** | |
| **Major outpatient treatment** | | | | |
| Outpatient kidney dialysis | As charged | | | S$1,100 per month |
| Outpatient erythropoietin | | | | S$200 per month |
| Outpatient cancer treatment[5] which includes: | | | | |
| - Chemotherapy | As charged | | | S$3,000 per month |
| - External or superficial radiotherapy (hemi-body radiotherapy) | | | | S$900 per treatment |
| - External or superficial radiotherapy (except hemi-body radiotherapy) | | | | S$300 per treatment |
| - Brachytherapy, with or without external radiotherapy | | | | S$500 per treatment |
| - Immunotherapy | | | | N.A. |
| - Stereotactic radiotherapy | | | | S$1,800 per treatment |
| Major organ transplant-approved Immunosuppressant drugs | | | | S$550 per month |
| **Special benefits** | | | | |
| Extra inpatient benefit for 5 critical illnesses – heart attack of specified severity, major cancer[5], stroke with permanent neurological deficit, end stage lung disease and end stage liver disease | S$150,000 per policy year | S$100,000 per policy year | S$50,000 per policy year | N.A. |
| Inpatient psychiatric treatment[12] (**after** 10 months of continuous cover) | As charged up to 60 days per policy year | As charged up to 45 days per policy year | S$500 per day up to 35 days per policy year | S$160 per day up to 60 days per policy year |
| Inpatient psychiatric treatment[12] (**within** 10 months of continuous cover) | S$500 per day up to 35 days per policy year | | | |
| Family discount for child(ren) | Yes | Yes | N.A. | N.A. |
| Free newborn benefit[13] | S$50,000 per policy year | | N.A. | N.A. |
| Emergency overseas treatment[14] | As charged (pegged to costs of private hospitals in Singapore) | As charged (pegged to costs of restructured hospitals in Singapore) | As charged (pegged to costs of restructured hospitals in Singapore) | N.A. |
| Planned overseas treatment[14] | As charged (pegged to costs of private hospitals in Singapore) | As charged (pegged to costs of restructured hospitals in Singapore) | As charged (pegged to costs of restructured hospitals in Singapore) | N.A. |
| Inpatient and outpatient Proton Beam Therapy treatment[15] | S$25,000 per policy year | S$15,000 per policy year | S$10,000 per policy year | N.A. |
| Inpatient and outpatient Cell, Tissue and Gene Therapy[15] | S$70,000 per policy year | S$45,000 per policy year | S$30,000 per policy year | N.A. |
| Waiver of pro-ration for factor benefit for outpatient kidney dialysis | N.A. | As charged (if kidney dialysis is received at a panel private dialysis centre[16]) | | N.A. |
| Preventive treatment for cancer[17] | As charged | | | N.A. |
| Final Expenses Benefit[18] | S$10,000 | | | N.A. |

# Benefits Schedule for **MyShield** *(cont'd)*

<table>
<tr><th colspan="7">Benefits Schedule in SG Dollars</th></tr>
<tr><th colspan="2" rowspan="2">Benefit Parameters</th><th colspan="3">MyShield<br>(payout includes MediShield Life payout)</th><th colspan="2" rowspan="2">MediShield Life</th></tr>
<tr><th>Plan 1</th><th>Plan 2</th><th>Plan 3</th></tr>
<tr><th colspan="7">Pro-ration factor</th></tr>
<tr><td colspan="2"></td><td colspan="3">Singapore Citizen (SC) /<br>Singapore Permanent Resident (SPR) / Foreigner</td><td>SC</td><td>SPR</td></tr>
<tr><td rowspan="9">Restructured hospital</td><td>Class C ward</td><td rowspan="14">100%</td><td rowspan="9">100%</td><td rowspan="4">100%</td><td>100%</td><td>44%</td></tr>
<tr><td>Class B2 ward /<br>Subsidised short stay ward</td><td>100%</td><td>58%</td></tr>
<tr><td>Class B2+ ward</td><td>70%</td><td>47%</td></tr>
<tr><td>Class B1 ward</td><td>43%</td><td>38%</td></tr>
<tr><td>Class A ward /<br>Unsubsidised short stay ward</td><td>85%[19]</td><td>35%</td><td>35%</td></tr>
<tr><td>Subsidised day surgery</td><td rowspan="4">100%</td><td>100%</td><td>58%</td></tr>
<tr><td>Unsubsidised day surgery</td><td>35%</td><td>35%</td></tr>
<tr><td>Subsidised major<br>outpatient treatment</td><td>100%</td><td>67%</td></tr>
<tr><td>Unsubsidised major<br>outpatient treatment</td><td>50%*</td><td>50%*</td></tr>
<tr><td rowspan="2">Private hospital</td><td>Inpatient (including day surgery)</td><td rowspan="2">50%[19]</td><td rowspan="2">35%[19]</td><td>25%</td><td>25%</td></tr>
<tr><td>Major outpatient treatment</td><td>50%*</td><td>50%*</td></tr>
<tr><td rowspan="2">Community hospital</td><td>Subsidised ward</td><td rowspan="2">100%</td><td>100%</td><td>100%</td><td>50%</td></tr>
<tr><td>Unsubsidised ward</td><td>85%[20]</td><td>50%</td><td>50%</td></tr>
<tr><td colspan="2">Hospital outside Singapore</td><td>50%[19]</td><td>35%[19]</td><td colspan="2">N.A.</td></tr>
<tr><th colspan="7">MyShield annual deductible[21] for Life Assured age 80 years and below next birthday</th></tr>
<tr><th colspan="7">Inpatient</th></tr>
<tr><td colspan="2">Class C ward</td><td colspan="3">S$1,500</td><td colspan="2">S$1,500</td></tr>
<tr><td colspan="2">Class B2 / B2+ ward</td><td colspan="3">S$2,000</td><td colspan="2" rowspan="3">S$2,000</td></tr>
<tr><td colspan="2">Class B1 ward</td><td colspan="3">S$2,500</td></tr>
<tr><td colspan="2">Class A ward / Private hospital</td><td colspan="3" rowspan="2">S$3,500</td></tr>
<tr><td colspan="2">Hospital outside Singapore</td><td colspan="2">N.A.</td></tr>
<tr><td colspan="2">Subsidised short stay ward</td><td colspan="3">S$2,000</td><td colspan="2" rowspan="3">S$1,500</td></tr>
<tr><td colspan="2">Unsubsidised short stay ward</td><td colspan="3">S$3,500</td></tr>
<tr><td colspan="2">Day surgery</td><td>S$3,000</td><td>S$3,000</td><td>S$2,000</td></tr>
</table>

# Benefits Schedule for **MyShield** *(cont'd)*

| Benefits Schedule in SG Dollars | | | | |
|---|---|---|---|---|
| **Benefit Parameters** | **MyShield** (payout includes MediShield Life payout) | | | **MediShield Life** |
| | **Plan 1** | **Plan 2** | **Plan 3** | |
| **MyShield annual deductible[21] for Life Assured age 81 years and above next birthday** | | | | |
| **Inpatient** | | | | |
| Class C ward | S$2,250 | | | S$2,000 |
| Class B2 / B2+ ward | S$3,000 | | | S$3,000 |
| Class B1 ward | S$3,750 | | | |
| Class A ward / Private hospital | S$5,250 | | | |
| Hospital outside Singapore | | | | N.A. |
| Subsidised short stay ward | S$3,000 | | | S$2,000 |
| Unsubsidised short stay ward | S$5,250 | | | |
| Day surgery | S$4,500 | S$4,500 | S$3,000 | |
| **Co-insurance** | | | | |
| All ward classes and day surgery claimable amount[22] | | | | |
| Inpatient (including day surgery): S$0 – S$5,000 | 10% (applicable to claimable amount after MyShield deductible) Maximum S$25,500 per policy year | | | 10% |
| Inpatient (including day surgery): S$5,001 – S$10,000 | | | | 5% |
| Inpatient (including day surgery): > S$10,000 | | | | 3% |
| Major outpatient treatment[23] | | | | 10% |
| **Maximum Claim Limits** | | | | |
| Policy year limit | S$1,000,000 or S$2,000,000[24] (Panel specialist in a private hospital with certificate of pre-authorisation, restructured hospital or community hospital) | S$1,000,000 | S$500,000 | S$150,000 |
| Lifetime limit | Unlimited | | | Unlimited |
| **Age Limits ( age next birthday)** | | | | |
| Last entry age | 75 years old | | | None |
| Maximum cover age | Lifetime | | | Lifetime |

1. Includes treatment fees, meals, prescriptions, medical consumables, doctor's attendance fees, medical examinations, laboratory tests and miscellaneous medical charges.

2. Classified according to their level of complexity, which increases from Table 1 to Table 7.

3. Includes:
   - Intravascular electrodes used for electrophysiological procedures
   - Percutaneous Transluminal Coronary Angioplasty (PTCA) Balloons
   - Intra-aortic balloons (or Balloon Catheters)
   - Intraocular lens for cataracts

4. Radiosurgery includes Novalis radiosurgery and Gamma Knife treatments which can be performed as an inpatient or day surgery procedure. The applicable MyShield annual deductible and pro-ration factor for radiosurgery will depend on its classification as an inpatient or day surgery procedure.

5. Proton Beam Therapy and Cell, Tissue and Gene Therapy are excluded from this benefit.

6. Major organ transplant benefit covers charges for transplant of cornea, kidney, heart, liver, lung, skin or musculoskeletal tissue and includes costs of acquiring the organ from a donor.

7. Treatment must be received within 31 days following the accident.

8. This benefit will be covered based on the type of specialist and hospital on the date of the Life Assured's admission. The approved list of panel specialists can be found at www.aviva.com.sg/medicalspecialists.

9. Upon referral from the attending doctor in a restructured hospital / private hospital for immediate admission to a community hospital for continuous stay. The treatment in the community hospital must arise from the same injury or illness that resulted in the Life Assured's inpatient treatment in the restructured hospital or private hospital.

   Rehabilitative care refers to therapy to improve the Life Assured's post-illness disability and functional impairment. Sub-acute care is for complicated medical conditions that require additional medical and nursing care at a lower intensity compared to that provided at the acute hospitals.

10. Inpatient pregnancy complications benefit covers charges the Life Assured has to pay for the following complications in pregnancy:
    - ectopic pregnancy;
    - pre-eclampsia or eclampsia;
    - disseminated intravascular coagulation; or
    - miscarriage after 13 weeks of pregnancy which must not be due to a voluntary or malicious act.

    Pre-hospital treatment received before and post-hospital treatment received after inpatient pregnancy complications treatment are not covered.

11. Living donor organ transplant benefit covers charges for major organ transplants of the kidney or liver where the Life Assured is a living donor. Pre-hospital treatment received before and post-hospital treatment received after living donor organ transplant are not covered.

12. Pre-hospital treatment received before and post-hospital treatment received after inpatient psychiatric treatment are not covered.

13. Free coverage for newborn starts from the date a newborn child(ren) is 15 days old or the date of discharge from hospital after birth, whichever is later. The free coverage ends on the date the newborn is 6 months old or takes up a MediSave-approved Integrated Shield Plan, whichever is earlier. Both parents must be covered under MyShield Plan 1 or Plan 2 continuously for at least 10 months from the cover start date of their respective policies on the newborn's date of birth. Pre-hospital treatment received before and post-hospital treatment received after the free coverage period are excluded.

14. Planned overseas treatment applies to an overseas hospital that has an approved working arrangement with a MediSave-accredited institution/referral centre in Singapore or emergency overseas treatment. Pre-hospital treatment received before and post-hospital treatment received after emergency overseas treatment is not covered. We will pay this benefit only if the residency of the Life Assured is Singapore on the date of the Life Assured's admission.

15. Proton Beam Therapy benefit or Cell, Tissue and Gene Therapy benefit apply if the Proton Beam Therapy treatment or Cell, Tissue and Gene Therapy are received as an inpatient, outpatient or day surgery procedure.

16. The approved list of panel private kidney dialysis centres and subsidised centres can be found at www.aviva.com.sg/medicalspecialists.

17. Preventive treatment for cancer covers surgery to prevent further cancer if the Life Assured already had treatment for cancer and we have paid for the treatment.

18. Final expenses benefit is a waiver of MyShield annual deductible and co-insurance amounts, up to the limits stated, upon death taking place during hospitalisation or within 30 days of discharge from hospitalisation and provided death takes place as a result of the cause of the hospitalisation.

19. Pro-ration factor is applied to reduce bills for overseas/higher ward classes/private hospitals to:
    a) Singapore restructured hospital equivalent in the claims computation of plan 2; or
    b) Singapore restructured hospital 4-bed ward equivalent in the claims computation of plan 3.

    This is not applicable to expenses incurred for major outpatient treatment and day surgery at a restructured hospital in Singapore and for major outpatient treatment at a subsidised dialysis or cancer centre in Singapore.

20. Pro-ration factor is applied to reduce the unsubsidised hospital charges to equivalent subsidised charges in a community hospital.

21. MyShield annual deductible is waived for major outpatient treatments.

22. Claimable amount is the lower of (i) the claim limit in the table or (ii) the amount after adjusting the charges for pro-ration, if needed.

23. Co-insurance for major outpatient treatments is 10% of a percentage of the charges incurred.

24. The policy year limit of S$2,000,000 assumes that all treatment(s) in the policy year are made through panel specialist in a private hospital with certificate of pre-authorisation, restructured hospital or community hospital.

*Note: Pro-ration for unsubsidised outpatient cancer treatments will be applicable from 1 November 2016 onwards. Dialysis-related treatment and immunosuppressants will not be pro-rated.

# Benefits Schedule for **MyHealthPlus**

| Benefits Schedule in SG Dollars | | | |
|---|---|---|---|
| **Benefit Parameters** | **Attached to MyShield Plan 1** | **Attached to MyShield Plan 2** | **Attached to MyShield Plan 3** |
| Hospital ward type | Any standard ward of a private hospital | Any standard ward of a restructured hospital | Any 4-bed (B1) standard ward of a restructured hospital |
| **MyHealthPlus Option A-II Benefits** | | | |
| (a) Co-insurance benefit | Covers 50% of MyShield co-insurance | | |
| (b) Maximum co-insurance (payable by policyholder) | S$3,000 per policy year[1] (Panel specialist in a private hospital with certificate of pre-authorisation, restructured hospital, community hospital, subsidised centre for kidney dialysis, panel private dialysis centres or panel overseas hospital) | | |
| (c) Critical illness-related benefits | | | |
| (i) Critical illness benefit[2] | S$10,000 per lifetime (only applies if the Life Assured has crossed his/her first birthday and is not older than 65 Age Next Birthday) | | |
| (ii) Additional critical illness benefit for kidney failure[3] if kidney dialysis is received at: | | | |
| Panel private dialysis centre[4] | S$1,000 per lifetime | N.A. | |
| Restructured hospital | S$3,000 per lifetime | S$2,000 per lifetime | |
| Subsidised centre[4] | | | |
| (d) Hospital-related benefits | | | |
| (i) Ward downgrade benefit | Covers 50% of MyShield annual deductible | | |
| (ii) Ambulance fees or transport to hospital[5] | S$80 per injury or illness | | |
| (iii) Accommodation charges for parent / guardian of child Life Assured[6] | S$80 per day up to 10 days | S$65 per day up to 10 days | S$50 per day up to 5 days |
| (iv) Post-hospital follow-up TCM treatment[7] | S$50 per visit up to 180 days after discharge (for inpatient admission due to an accident) | | |
| (e) Free cover for child(ren)[8] | Yes | | N.A. |
| (f) Accidental cover for child benefit[9] | S$1,000 per lifetime | | |

# Benefits Schedule for **MyHealthPlus** *(cont'd)*

| Benefits Schedule in SG Dollars | | | |
|---|---|---|---|
| **Benefit Parameters** | **Attached to MyShield Plan 1** | **Attached to MyShield Plan 2** | **Attached to MyShield Plan 3** |
| Hospital ward type | Any standard ward of a private hospital | Any standard ward of a restructured hospital | Any 4-bed (B1) standard ward of a restructured hospital |
| | | | |
| (g) Global treatment for six covered illnesses and medical procedures[10]:<br>– cancer treatment<br>– coronary artery by-pass surgery<br>– heart valve replacement or repair<br>– inter-cranial and specific spinal cord surgery<br>– live-donor organ transplant<br>– bone marrow transplant | S$1,250,000 per policy year and S$2,500,000 per lifetime (Panel overseas hospital with certificate of pre-authorisation)<br><br>MyShield annual deductible and MyShield co-insurance applies | N.A. | |
| **MyHealthPlus Option C-II Benefits** | | | |
| (a) All benefits under Option A-II according to the Life Assured's plan excluding free cover for child(ren) and ward downgrade benefit | Covered | | |
| (b) Preferred rate for child(ren)[11] | Yes | | N.A. |
| (c) Deductible benefit | Covers MyShield annual deductible after policyholder pays MyHealthPlus annual deductible | | |

# Benefits Schedule for **MyHealthPlus** *(cont'd)*

<table>
<tr><th colspan="6">Benefits Schedule in SG Dollars</th></tr>
<tr><th colspan="3">Benefit Parameters</th><th>Attached to MyShield Plan 1</th><th>Attached to MyShield Plan 2</th><th>Attached to MyShield Plan 3</th></tr>
<tr><th colspan="6">MyHealthPlus Annual Deductible</th></tr>
<tr><td colspan="3">Inpatient</td><td colspan="3"></td></tr>
<tr><td colspan="3">Class C ward</td><td colspan="3">S$120</td></tr>
<tr><td colspan="3">Class B2 / B2+ ward</td><td colspan="3">S$150</td></tr>
<tr><td colspan="3">Class B1 ward</td><td colspan="3">S$200</td></tr>
<tr><td colspan="3">Class A ward</td><td colspan="3">S$300</td></tr>
<tr><td colspan="3">Subsidised short stay ward</td><td colspan="3">S$150</td></tr>
<tr><td colspan="3">Unsubsidised short stay ward</td><td colspan="3">S$300</td></tr>
<tr><td colspan="3">Hospital outside Singapore</td><td rowspan="2">S$1,000</td><td colspan="2" rowspan="2">S$500</td></tr>
<tr><td colspan="3">Non-panel specialist in a private hospital</td></tr>
<tr><td colspan="2" rowspan="2">Panel specialist in a private hospital / panel overseas hospital</td><td>with certificate of pre-authorisation )</td><td>S$500</td><td colspan="2">S$300</td></tr>
<tr><td>without certificate of pre-authorisation )</td><td>S$1,000</td><td colspan="2">S$500</td></tr>
<tr><td rowspan="5">Day Surgery</td><td colspan="2">Restructured hospital/ Community hospital</td><td colspan="3">S$250</td></tr>
<tr><td colspan="2">Hospital outside Singapore</td><td colspan="3" rowspan="2">S$500</td></tr>
<tr><td colspan="2">Non-panel specialist in a private hospital</td></tr>
<tr><td rowspan="2">Panel specialist in a private hospital/ panel overseas hospital</td><td>with certificate of pre-authorisation )</td><td colspan="3">S$250</td></tr>
<tr><td>without certificate of pre-authorisation )</td><td colspan="3">S$500</td></tr>
</table>

1. The maximum co-insurance is accumulated across panel specialists in a private hospital with a certificate of pre-authorisation, panel private dialysis centre, subsidised centre for kidney dialysis, panel overseas hospital, restructured hospital and community hospital and does not include the co-insurance accumulated under panel specialist in a private hospital without a certificate of pre-authorisation.

2. If the critical illness diagnosed is Major Cancer, Coronary Artery By-pass Surgery, Angioplasty & Other Invasive Treatment for Coronary Artery, Other Serious Coronary Artery Disease and/or Heart Attack of Specified Severity, the critical illness benefit is payable only if diagnosis is made after a waiting period of 90 days from the cover start date or last reinstatement date, whichever is later.

3. Additional critical illness benefit for kidney failure will be covered based on the type of centre or hospital at which the Life Assured receives the dialysis.

4. The approved list of panel private kidney dialysis centres and subsidised centres can be found at www.aviva.com.sg/medicalspecialists.

5. We pay this benefit as long as the Life Assured is admitted as an inpatient within 24 hours of arrival at the hospital, for treatment of an illness or injury covered under MyShield.

6. Child Life Assured refers to the Life Assured who is below 19 Age Next Birthday.

7. TCM treatment includes the cost of consultation, acupuncture, scrapping, cupping and tui na, but not the cost of medication. The inpatient admission before the post-hospital follow-up TCM treatment must be the result of an accident. We will not pay for any post-hospital follow-up TCM treatment following an inpatient treatment in community hospital.

8. Your dependant child who is covered under MyShield's family discount for child(ren) is also eligible for free cover under Option A-II Plan 2, of MyHealthPlus up to 20 ANB, if both parents are covered under Plan 1 or Plan 2 of MyShield as well as Plan 1 or 2 of MyHealthPlus Option A or C or Option A-II or Option C-II. The child shall enjoy the same benefits provided under Option A-II, Plan 2 of the Benefits Schedule.

9. We will pay this benefit in cash if the Life Assured (below 19 years old at the time of the accident) sustains a fracture to the skull, spine, pelvis, femur or hip as a result of an accident. We will only pay this benefit once during the lifetime of the Life Assured no matter how many fractures are sustained.

10. The 'Additional Terms and Conditions for Global Treatment Benefit' can be found at www.aviva.com.sg.

11. Your dependant child who is covered under MyShield's family discount for child(ren) is also eligible for the Preferred Rate for Children under Option C-II, Plan 2 of MyHealthPlus for up to 20 ANB, if both parents are covered under Plan 1 or 2 of MyShield and also covered under Plan 1 or 2 of MyHealthPlus Option A or C or Option A-II or Option C-II. The child shall enjoy the same benefits provided under Option C-II, Plan 2 of the Benefits Schedule.

# Premium Rates for **MyShield**

The table below shows the breakdown of premiums for a standard life^ under your plan type.

**For Singapore Citizens / Singapore Permanent Residents**
(For foreigners, please refer to www.aviva.com.sg for the premiums and MediSave Withdrawal Limits)

**MyShield Plan 1**

Annual premium per person in SG Dollars (inclusive of 7% GST). Premium rates are non-guaranteed.

| Age Next Birthday | MediShield Life Premiums (Fully payable by MediSave*) | Additional Private Insurance Coverage | | |
|---|---|---|---|---|
| | | Premiums | Additional Withdrawal Limits | Cash Outlay |
| 1 to 20 | 145.00 | 192.00 | 300.00 | 0 |
| 21 to 30 | 250.00 | 232.00 | 300.00 | 0 |
| 31 to 40 | 390.00 | 409.00 | 300.00 | 109.00 |
| 41 to 45 | 525.00 | 714.00 | 600.00 | 114.00 |
| 46 to 50 | 525.00 | 924.00 | 600.00 | 324.00 |
| 51 to 55 | 800.00 | 1,166.00 | 600.00 | 566.00 |
| 56 to 60 | 800.00 | 1,483.00 | 600.00 | 883.00 |
| 61 to 65 | 1,020.00 | 1,957.00 | 600.00 | 1,357.00 |
| 66 to 70 | 1,100.00 | 2,774.00 | 600.00 | 2,174.00 |
| 71 to 73 | 1,195.00 | 3,750.00 | 900.00 | 2,850.00 |
| 74 to 75 | 1,320.00 | 4,401.00 | 900.00 | 3,501.00 |
| 76 to 78# | 1,530.00 | 4,897.00 | 900.00 | 3,997.00 |
| 79 to 80# | 1,590.00 | 5,546.00 | 900.00 | 4,646.00 |
| 81 to 83# | 1,675.00 | 6,530.00 | 900.00 | 5,630.00 |
| 84 to 85# | 1,935.00 | 7,149.00 | 900.00 | 6,249.00 |
| 86 to 88# | 2,025.00 | 7,736.00 | 900.00 | 6,836.00 |
| 89 to 90# | 2,025.00 | 7,995.00 | 900.00 | 7,095.00 |
| 91 to 93# | 2,055.00 | 8,231.00 | 900.00 | 7,331.00 |
| 94 to 95# | 2,055.00 | 8,425.00 | 900.00 | 7,525.00 |
| 96 to 98# | 2,055.00 | 8,721.00 | 900.00 | 7,821.00 |
| 99 and above# | 2,055.00 | 9,097.00 | 900.00 | 8,197.00 |

^ *A standard life is a Life Assured who, at point of proposal, does not have any pre-existing conditions.*

* *Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave.*

# *For renewal only.*

# Premium Rates for **MyShield** *(cont'd)*

The table below shows the breakdown of premiums for a standard life^ under your plan type.

**For Singapore Citizens / Singapore Permanent Residents**
(For foreigners, please refer to www.aviva.com.sg for the premiums and MediSave Withdrawal Limits)

**MyShield Plan 2**

Annual premium per person in SG Dollars (inclusive of 7% GST). Premium rates are non-guaranteed.

| Age Next Birthday | MediShield Life Premiums (Fully payable by MediSave*) | Additional Private Insurance Coverage | | |
|---|---|---|---|---|
| | | Premiums | Additional Withdrawal Limits | Cash Outlay |
| Family discount for child(ren) 1 to 20 | 145.00 | 0 | 300.00 | 0 |
| 1 to 20 | 145.00 | 86.00 | 300.00 | 0 |
| 21 to 30 | 250.00 | 99.00 | 300.00 | 0 |
| 31 to 40 | 390.00 | 168.00 | 300.00 | 0 |
| 41 to 45 | 525.00 | 312.00 | 600.00 | 0 |
| 46 to 50 | 525.00 | 340.00 | 600.00 | 0 |
| 51 to 55 | 800.00 | 468.00 | 600.00 | 0 |
| 56 to 60 | 800.00 | 494.00 | 600.00 | 0 |
| 61 to 65 | 1,020.00 | 773.00 | 600.00 | 173.00 |
| 66 to 70 | 1,100.00 | 1,219.00 | 600.00 | 619.00 |
| 71 to 73 | 1,195.00 | 1,806.00 | 900.00 | 906.00 |
| 74 to 75 | 1,320.00 | 2,107.00 | 900.00 | 1,207.00 |
| 76 to 78# | 1,530.00 | 2,736.00 | 900.00 | 1,836.00 |
| 79 to 80# | 1,590.00 | 2,968.00 | 900.00 | 2,068.00 |
| 81 to 83# | 1,675.00 | 3,724.00 | 900.00 | 2,824.00 |
| 84 to 85# | 1,935.00 | 3,786.00 | 900.00 | 2,886.00 |
| 86 to 88# | 2,025.00 | 4,505.00 | 900.00 | 3,605.00 |
| 89 to 90# | 2,025.00 | 4,614.00 | 900.00 | 3,714.00 |
| 91 to 93# | 2,055.00 | 4,657.00 | 900.00 | 3,757.00 |
| 94 to 95# | 2,055.00 | 4,773.00 | 900.00 | 3,873.00 |
| 96 to 98# | 2,055.00 | 4,894.00 | 900.00 | 3,994.00 |
| 99 and above# | 2,055.00 | 5,018.00 | 900.00 | 4,118.00 |

^ *A standard life is a Life Assured who, at point of proposal, does not have any pre-existing conditions.*

* *Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave.*

# *For renewal only.*

# Premium Rates for **MyShield** *(cont'd)*

The table below shows the breakdown of premiums for a standard life^ under your plan type.

**For Singapore Citizens / Singapore Permanent Residents**
(For foreigners, please refer to www.aviva.com.sg for the premiums and MediSave Withdrawal Limits)

**MyShield Plan 3**

Annual premium per person in SG Dollars (inclusive of 7% GST). Premium rates are non-guaranteed.

| Age Next Birthday | MediShield Life Premiums (Fully payable by MediSave*) | Additional Private Insurance Coverage | | |
|---|---|---|---|---|
| | | Premiums | Additional Withdrawal Limits | Cash Outlay |
| 1 to 20 | 145.00 | 70.00 | 300.00 | 0 |
| 21 to 30 | 250.00 | 73.00 | 300.00 | 0 |
| 31 to 40 | 390.00 | 100.00 | 300.00 | 0 |
| 41 to 45 | 525.00 | 180.00 | 600.00 | 0 |
| 46 to 50 | 525.00 | 196.00 | 600.00 | 0 |
| 51 to 55 | 800.00 | 278.00 | 600.00 | 0 |
| 56 to 60 | 800.00 | 286.00 | 600.00 | 0 |
| 61 to 65 | 1,020.00 | 480.00 | 600.00 | 0 |
| 66 to 70 | 1,100.00 | 719.00 | 600.00 | 119.00 |
| 71 to 73 | 1,195.00 | 1,151.00 | 900.00 | 251.00 |
| 74 to 75 | 1,320.00 | 1,341.00 | 900.00 | 441.00 |
| 76 to 78# | 1,530.00 | 1,912.00 | 900.00 | 1,012.00 |
| 79 to 80# | 1,590.00 | 1,924.00 | 900.00 | 1,024.00 |
| 81 to 83# | 1,675.00 | 2,550.00 | 900.00 | 1,650.00 |
| 84 to 85# | 1,935.00 | 2,571.00 | 900.00 | 1,671.00 |
| 86 to 88# | 2,025.00 | 3,020.00 | 900.00 | 2,120.00 |
| 89 to 90# | 2,025.00 | 3,147.00 | 900.00 | 2,247.00 |
| 91 to 93# | 2,055.00 | 3,407.00 | 900.00 | 2,507.00 |
| 94 to 95# | 2,055.00 | 3,547.00 | 900.00 | 2,647.00 |
| 96 to 98# | 2,055.00 | 3,689.00 | 900.00 | 2,789.00 |
| 99 and above# | 2,055.00 | 3,835.00 | 900.00 | 2,935.00 |

^ *A standard life is a Life Assured who, at point of proposal, does not have any pre-existing conditions.*

* *Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave.*

\# *For renewal only.*

# Premium Rates for **MyHealthPlus**

The table below shows the breakdown of premiums under your plan type.

**For Singapore Citizens / Singapore Permanent Residents and Foreigners.**

| **MyHealthPlus – Option A-II** | | | |
|---|---|---|---|
| Annual premium per person in SG Dollars (inclusive of 7% GST). Premium rates are non-guaranteed. | | | |
| **Age Next Birthday** | **Plan 1** | **Plan 2** | **Plan 3** |
| 1 to 20 | 84.00 | 46.00 | 31.00 |
| 21 to 30 | 136.00 | 48.00 | 37.00 |
| 31 to 40 | 155.00 | 61.00 | 43.00 |
| 41 to 45 | 164.00 | 108.00 | 86.00 |
| 46 to 50 | 179.00 | 123.00 | 106.00 |
| 51 to 55 | 254.00 | 165.00 | 139.00 |
| 56 to 60 | 410.00 | 275.00 | 236.00 |
| 61 to 65 | 661.00 | 491.00 | 428.00 |
| 66 to 70 | 891.00 | 670.00 | 521.00 |
| 71 to 73 | 972.00 | 739.00 | 586.00 |
| 74 to 75 | 1,004.00 | 747.00 | 598.00 |
| 76 to 78* | 1,021.00 | 770.00 | 598.00 |
| 79 to 80* | 1,055.00 | 786.00 | 610.00 |
| 81 to 83* | 1,073.00 | 802.00 | 628.00 |
| 84 to 85* | 1,090.00 | 810.00 | 641.00 |
| 86 to 88* | 1,108.00 | 825.00 | 653.00 |
| 89 to 90* | 1,177.00 | 848.00 | 659.00 |
| 91 to 93* | 1,274.00 | 959.00 | 688.00 |
| 94 to 95* | 1,511.00 | 1,186.00 | 786.00 |
| 96 to 98* | 1,685.00 | 1,329.00 | 859.00 |
| 99 and above* | 1,946.00 | 1,422.00 | 919.00 |

** For renewal only*

# Premium Rates for **MyHealthPlus** *(cont'd)*

The table below shows the breakdown of premiums under your plan type.

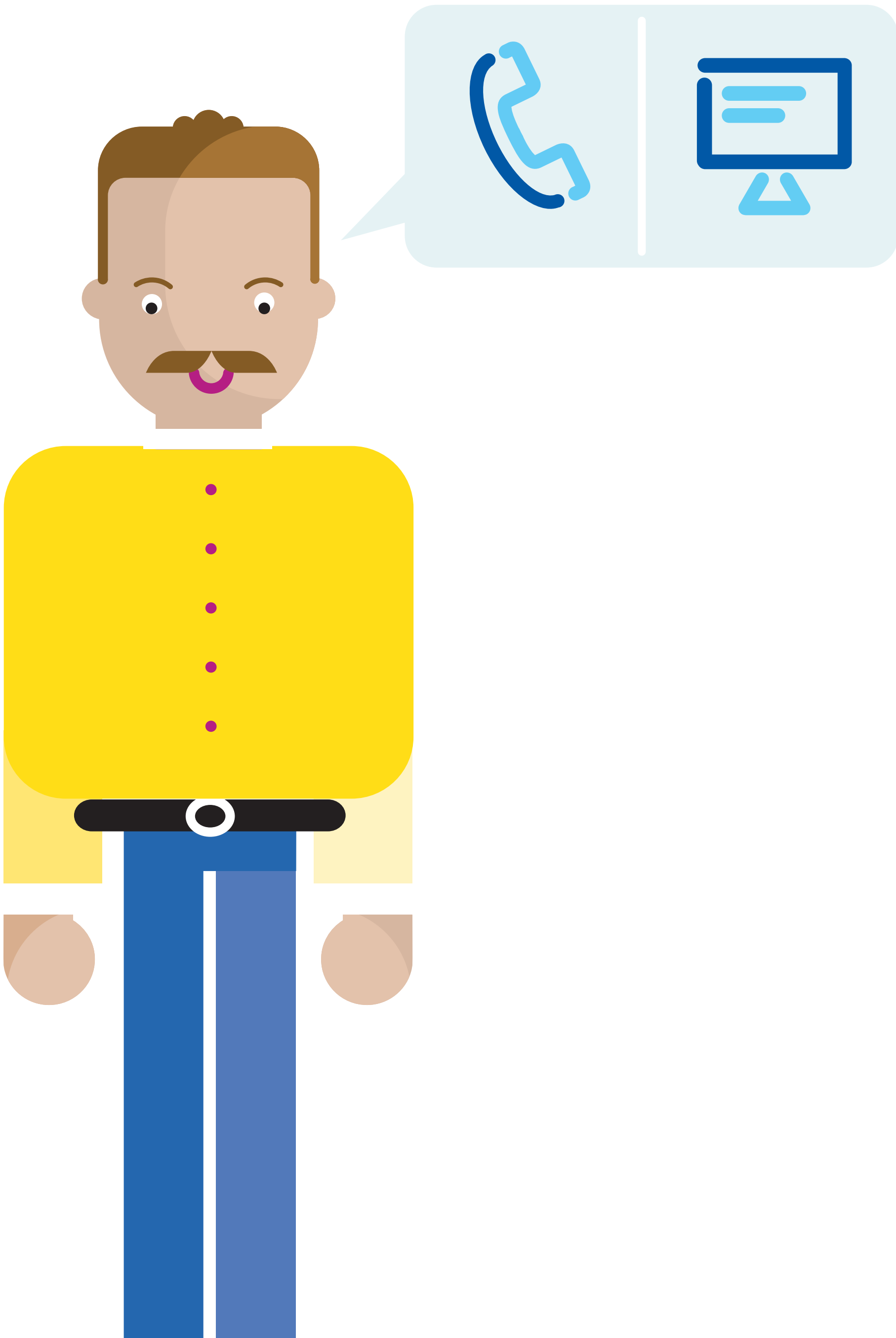
**For Singapore Citizens / Singapore Permanent Residents and Foreigners.**

| **MyHealthPlus – Option C-II** | | | |
|---|---|---|---|
| Annual premium per person in SG Dollars (inclusive of 7% GST). Premium rates are non-guaranteed. | | | |
| **Age Next Birthday** | **Plan 1** | **Plan 2** | **Plan 3** |
| Preferred Rates for Child(ren) 1 to 20 | N.A | 168.00 | N.A. |
| 1 to 20 | 584.00 | 214.00 | 176.00 |
| 21 to 30 | 669.00 | 248.00 | 196.00 |
| 31 to 40 | 765.00 | 264.00 | 211.00 |
| 41 to 45 | 919.00 | 350.00 | 271.00 |
| 46 to 50 | 980.00 | 382.00 | 313.00 |
| 51 to 55 | 1,233.00 | 434.00 | 348.00 |
| 56 to 60 | 1,796.00 | 581.00 | 450.00 |
| 61 to 65 | 2,445.00 | 925.00 | 728.00 |
| 66 to 70 | 3,005.00 | 1,376.00 | 1,105.00 |
| 71 to 73 | 3,344.00 | 1,585.00 | 1,297.00 |
| 74 to 75 | 3,440.00 | 1,725.00 | 1,325.00 |
| 76 to 78* | 3,481.00 | 1,751.00 | 1,338.00 |
| 79 to 80* | 3,534.00 | 1,768.00 | 1,366.00 |
| 81 to 83* | 3,725.00 | 1,785.00 | 1,393.00 |
| 84 to 85* | 3,852.00 | 1,819.00 | 1,406.00 |
| 86 to 88* | 3,980.00 | 1,846.00 | 1,433.00 |
| 89 to 90* | 4,195.00 | 1,872.00 | 1,447.00 |
| 91 to 93* | 4,476.00 | 2,038.00 | 1,623.00 |
| 94 to 95* | 4,928.00 | 2,365.00 | 1,884.00 |
| 96 to 98* | 5,299.00 | 2,689.00 | 2,143.00 |
| 99 and above* | 5,808.00 | 2,885.00 | 2,299.00 |

** For renewal only*

# **Need** more help?

Speak to your preferred financial adviser representative or visit **www.aviva.com.sg** for more details.



**Important notes:**

The policy is underwritten by Aviva Ltd.

This brochure is published for general information only and does not have regard to the specific investment objectives, financial situation and needs of any particular person. A copy of the Product Summary may be obtained from Aviva Ltd and the participating distributors' offices. You should read the Product Summary before deciding whether to purchase the product. You may wish to seek advice from a financial adviser representative before making a commitment to purchase the product. In the event that you choose not to seek advice from a financial adviser representative, you should consider whether the product in question is suitable for you.

Buying a health insurance policy that is not suitable for you may impact your ability to finance your future healthcare needs. This is not a contract of insurance. Full details of the standard terms and conditions of this policy can be found in the relevant policy contract.

Information is correct as at 15 March 2021.

This advertisement has not been reviewed by the Monetary Authority of Singapore.

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 Aviva Ltd or visit the Life Insurance Association or SDIC websites (**www.lia.org.sg** or **www.sdic.org.sg**).

**Aviva Ltd**
4 Shenton Way, #01-01, SGX Centre 2  Singapore 068807
Tel: (65) 6827 9933
Website: **www.aviva.com.sg**
Company Reg. No.: 196900499K
GST Reg. No.: MR-8500166-8

MyShield-MyHealth_Plus_A5_COMP/2021/03/PPM/210