AIA FLEXI VITAL CARE PLUS







^{*} AIA has a representative office in Myanmar.

THE LARGEST LISTED COMPANY ON THE HONG KONG STOCK EXCHANGE

NEW ZEALAND 1981

which is incorporated and headquartered in Hong Kong

LARGEST LIFE

CAMBODIA 2015

INSURER IN THE WORLD*

* Source: Bloomberg, 25 March 2019 100% FOCUSED ON ASIA-PACIFIC

#1 THE STANDARD OF EXCELLENCE IN THE LIFE INSURANCE BUSINESS

SERVING THE HOLDERS OF MORE THAN 33 MILLION INDIVIDUAL POLICIES AND OVER 16 MILLION MEMBERS OF GROUP INSURANCE SCHEME

OUR RECENT ACCOLADES:

• Best Employee Insurance Provider (GOLD) Award for the 13th Consecutive Year

Human Resources annual edition HR Vendor of the Year 2018

- Gold Award Reader's Digest Trusted Brand 2018
- Gold Award under the Best Campaign Incentives and Rewards category for AIA Vitality Weekly Challenge Campaign MOB-Ex Awards 2018
- Domestic Life Insurer of the Year Award for Singapore Insurance Asia Awards 2018
- Life Insurance Award
 International Business Awards 2018
- Innovator of the Year

 Business Management Excellence Awards 2018
- Insurance Company of the Year for Agents
 Asia Trusted Life Agents & Adviser Awards

ADDRESSING THE NEEDS OF EVERY EMPLOYER AND EMPLOYEE

As a market leader in employee benefits, AIA has been helping employers meet the expectations of their employees by offering innovative solutions that can address their needs and deliver a fulfilling customer experience.







A CHANGING WORKFORCE

Today's employees are looking for more than just a good salary. They value a comprehensive benefits programme, one that is an integral part of their remuneration package.

With the multi-generation employees prevalent in today's workforce, employers will have to continuously innovate to engage their employees.

What are some of the benefits and services that will add value to your employees? Please take a moment to tick the boxes that are applicable.



SERVICES & RESOURCES FOR ENHANCED CUSTOMER EXPERIENCE

AIA understands the importance of providing fast and seamless services to our clients. To this end, we have developed various services and resources to support them. We will continue to review the market and adopt best practices to improve our services.

24/7 HOTLINE

With our dedicated staff to attend to your employees round the clock, our Hotline will provide peace of mind for your employees especially during emergencies.

MEMBER SERVICES HOTLINE

General Policy & Claims Services Enquiries TEL: 6248 8329



CASHLESS CONSULTATIONS

Our cashless facility gives your employees peace of mind when visiting our panel clinics and specialists.



E-BENEFITS PORTAL

Our portal provides convenience to employees by easing their claims submission. It also empowers Human Resource staff to view and extract claims reports and employee lists.





INFORMATION



FILE CLAIM ONLINE



RETRIEVE ECARD FOR CLINICAL **CONSULTATIONS**



ACCESS CLAIMS REPORT (HR ONLY)

LETTER OF GUARANTEE (LOG) PLUS

In the unfortunate circumstance when an individual is hospitalised, one major concern is having to fork out a sizeable payment upon discharge. With LOG Plus, AIA will review the bill before it is incurred to provide employees with peace of mind.







ENJOY LETTER OF GUARANTEE UP TO POLICY COVERAGE

With the LOG Plus, member may not need to settle the full hospital bill upon discharge. AIA will settle the bill (up to the benefit limit) directly with the hospital.

CLAIM IS ASSESSED BEFORE BILL IS INCURRED

Member is aware of how much the policy will cover up-front and make the right choice of health care.

ENJOY COST EFFECTIVE HEALTHCARE

AIA helps to negotiate with the doctor if the cost charged is excessive.

WHICH ARE THE PARTICIPATING HOSPITALS?

S/N	RESTRUCTURED HOSPITALS	PRIVATE HOSPITALS
1	Alexandra Hospital	Farrer Park Hospital
2	Changi General Hospital	Gleneagles Hospital
3	Khoo Teck Puat Hospital	Mount Alvernia Hospital
4	KK Women's and Children's Hospital	Mount Elizabeth Hospital
5	National University Hospital	Mount Elizabeth Novena Hospital
6	Ng Teng Fong General Hospital	Parkway East Hospital
7	Sengkang General Hospital	Raffles Hospital
8	Singapore General Hospital	Thomson Medical Centre
9	Tan Tock Seng Hospital	

Insured members simply need to complete the Request for Letter of Guarantee (LOG) Plus form found in the eBenefits portal at eben.aia.com.sg under the section 'AIA Singapore/Information library'. Send the completed form to this email address sg.eb.logrequests@aia.com. The completed request form will need to reach AIA at least 3 working days prior to admission. For enquiries, you may call AIA hotline: 6248 8329

ENABLING EMPLOYEES TO LEAD HEALTHIER, LONGER AND BETTER LIVES

AIA is not just your typical corporate insurance provider. We aspire to be a proactive partner to you, in advocating health and wellness in your workplace.

Working in partnership with your organization, we can help your employees lead Healthier, Longer, Better Lives.

AIA VITALITY

AIA Vitality is a comprehensive, digital platform that sustainably engages employees by using a combination of gamification, team dynamics and powerful incentives to motivate employees towards better health outcomes. It has been an effective health intervention programme changing the lives of over 150,000 members by providing them with the right tools and platform to take crucial steps towards healthier, longer and better lives.



IMPROVE YOUR HEALTH

HEALTHY EATING • EXERCISE & FITNESS • FITNESS ASSESSMENT





FLEXI VITAL CARE PLUS IS THE RIGHT CHOICE FOR YOUR COMPANY















STEP BY STEP PROCESS



CORE PLANS DECIDE ON THE CORE PLAN

• GROUP TERM LIFE (GTL)

 GROUP HOSPITALISATION & SURGICAL (GHS) AND EXTENDED MAJOR MEDICAL (EMM)

• BOTH PLANS

RIDERS DO YOU NEED OPTIONAL RIDERS?

OPTIONAL RIDERS CORE PLANS	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	CLINICAL OUTPATIENT ONLY (GP)	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) NO COPAY	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) \$5 COPAY	GROUP DENTAL PPO-PLUS
GROUP TERM LIFE (GTL)	V	v	N.A	~	~	~
GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (GHS)	N.A	V	V	V	V	~



DECIDE ON THE BASIS OF COVERAGE EXAMPLE

CORE PLANS	OPTIONAL RIDERS	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	CLINICAL OUTPATIENT ONLY (GP)	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) NO COPAY	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) \$5 COPAY	GROUP DENTAL PPO-PLUS
GROUP TERM LIFE (GTL)	1/2/3/4/5/6	1/2/3/4/5/6	1/2/3/4/5/6	N.A	1/2/3/4	1/2/3/4	Yes/No
GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (GHS)	1/2/3/4/5	N.A	1/2/3/4/5/6	1/2	1/2/3/4	1/2/3/4	Yes/No



GROUP TERM LIFE (24-HOUR WORLDWIDE COVERAGE¹) – CORE PLAN

UNDERWRITING	Sum Assured above S\$180,000 is subjected to underwriting and AIA's approval.
DEATH	Provides coverage against death due to illness or accident and the sum assured is payable in a lump sum.
TOTAL & PERMANENT DISABILITY (TPD)	Provides coverage against TPD as a result of illness or accident prior to the insured's 70th birthday. (a). The disability must be total and permanent and that there is no work, occupation or profession that the insured can ever sufficiently do or follow to earn or obtain any wages, compensation or profit. (b). the total and irrecoverable loss of sight of both eyes or the loss by severance of 2 or more limbs at or above wrist or ankle.
TERMINAL ILLNESS (TI)	Provides coverage upon the diagnosis of a TI, a condition which is likely to lead to death within 12 months of the diagnosis. The sum assured is payable in a lump sum.
COMPASSIONATE DEATH/TPD ALLOWANCE.	Provides an additional coverage of 10% of the amount insured, against death and TPD. The additional coverage is paid together with the Death or TPD benefit.
EXCLUSIONS.	Pre-existing conditions that existed 12 months preceding the effective date of coverage (known or unknown) unless the member has been insured continuously for 12 months under the policy. Suicide, unless the member has been insured continuously for 12 months under the policy.

SUM ASSURED FOR EMPLOYEE (\$\$)							
GROUP TERM LIFE (GTL)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5*	PLAN 6*	
Death and Total Permanent Disability (TPD)	50,000	80,000	120,000	180,000	250,000	500,000	

	SUM ASSURED FOR DEPENDANT (S\$)									
GROUP TERM LIFE (GTL)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5*	PLAN 6*				
Death and Total Permanent Disability (TPD)	25,000	40,000	60,000	90,000	125,000	250,000				

	Pi	REMIUMS F	OR EMPLOY	EE - GTL (S	\$)	
AGE* BAND			PLAN 3	PLAN 4	PLAN 5	PLAN 6
Up to 29	51.00	81.50	122.00	183.00	254.50	508.50
30-34	53.50	85.50	128.00	192.00	266.50	532.50
35-39	61.00	98.00	146.50	220.00	305.00	610.00
40-44	94.50	151.00	226.50	339.50	471.50	942.50
45-49	127.50	204.00	306.00	459.00	637.50	1,275.00
50-54	196.50	314.50	472.00	707.50	982.50	1,965.00
55-59	356.50	570.50	856.00	1,283.50	1,782.50	3,565.00
60-64	622.50	996.00	1,493.50	2,240.50	3,111.50	6,222.50
65-69 ⁶	1,057.00	1,691.00	2,536.50	3,804.50	5,284.00	10,567.50
70-746	2,313.00	3,701.00	5,551.50	8,327.00	11,565.00	23,130.00

	PR	EMIUMS FO	R DEPENDA	ANT - GTL (S	\$)	
AGE* BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6
Up to 29	28.00	45.00	67.50	101.00	140.00	279.50
30-34	29.50	47.00	70.50	105.50	146.50	292.50
35-39	33.50	54.00	80.50	121.00	167.50	335.00
40-44	51.50	82.50	124.00	185.50	257.50	515.00
45-49	70.00	112.00	167.50	251.50	349.00	697.50
50-54	107.50	172.00	258.00	387.00	537.50	1,075.00
55-59	195.00	312.00	468.00	702.00	975.00	1,950.00
60-64	341.00	545.50	818.00	1,227.00	1,704.00	3,407.50
65-69 ⁶	579.00	926.00	1,389.00	2,083.50	2,894.00	5,787.50
70-746	1,267.00	2,027.00	3,040.50	4,560.50	6,334.00	12,667.50

^{*} Age Last Birthday.

 $^{^{\}ast}$ $\,$ Subjected to underwriting & AIA's approval.

^{*} All rates include the prevailing 7% GST in S\$, with exception to Group Term Life, Total and Permanent Disability and Group Accelerated Critical Illness. Premium rates are not guaranteed and may be increased at policy renewal at the full discretion of AIA.

UNDERWRITING

Sum Assured above \$\$90,000 is subjected to underwriting and AIA's approval.

ACCELERATED CRITICAL ILLNESS³ (ACI)

Upon the diagnosis of a CI, the plan provides:

- (a). an advance benefit payment of 10% of the sum assured up to a maximum of \$25,000 for Angioplasty & other invasive Treatment for Coronary Artery. The advance benefit is payable only once and the sum assured will be reduced accordingly. However, the premium will be charged for the full CI sum assured.
- (b). a lump sum payment of the full sum assured for the rest of the 36 critical illnesses.

 Once the full CI sum assured is paid, the CI cover will terminate. The GTL sum assured and premium will be reduced and adjusted accordingly.

EXCLUSIONS

Critical Illness due to a congenital defect which has manifested or was diagnosed before age 17.

Critical Illness "Coronary Artery Surgery and/or Other Serious Coronary Artery Disease" if diagnosis of "myocardial infarction" was made prior to the effective date of coverage.

Critical Illness which was diagnosed prior to the effective date of coverage.

Critical Illness for which the insured sought advice or treatment for symptoms which had contributed directly or indirectly to the Critical Illness prior to the effective date of coverage.

OPTIONAL RIDER

SUM ASSURED FOR EMPLOYEE (S\$) GROUP ACCELERATED PLAN **PLAN** PLAN PLAN **PLAN** PLAN **CRITICAL ILLNESS (GACI)** 37 Critical 25,000 90,000 125,000 250,000 40.000 60.000 Illnesses

SUM ASSURED FOR DEPENDANT (S\$)								
GROUP ACCELERATED CRITICAL ILLNESS (GACI)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5*	PLAN 6*		
37 Critical Illnesses	12,500	20,000	30,000	45,000	62,500	125,000		

	PREM	IIUMS FOR I	EMPLOYEE :	GTL + GAC	I (S\$)	
AGE* BAND			PLAN PLAN PLAN 2 3 4		PLAN 5	PLAN 6
Up to 29	73.50	117.50	176.00	263.50	366.50	732.00
30-34	97.00	155.00	232.50	348.50	483.50	966.50
35-39	128.00	205.00	306.50	460.00	638.50	1,276.50
40-44	218.50	349.50	524.00	785.50	1,091.00	2,181.50
45-49	341.00	545.00	817.50	1,226.50	1,703.50	3,406.50
50-54	499.00	798.00	1,197.50	1,795.50	2,493.50	4,986.50
55-59	840.50	1,345.00	2,018.00	3,026.00	4,202.50	8,405.00
60-64	1,390.50	2,224.50	3,336.00	5,004.00	6,950.00	13,899.00
65-69 ⁶	2,162.00	3,459.00	5,188.50	7,782.50	10,808.50	21,616.50
70-74	N/A	N/A	N/A	N/A	N/A	N/A

	PREM	IUMS FOR D	EPENDANT	- GTL + GAC	CI (S\$)	
AGE* BAND				PLAN 4	PLAN 5	PLAN 6
Up to 29	40.50	65.00	97.00	145.00	201.50	402.00
30-34	53.50	85.00	127.50	191.00	265.50	530.00
35-39	70.00	112.50	168.50	252.50	350.00	700.00
40-44	119.50	191.00	287.00	429.50	596.50	1,192.50
45-49	187.00	299.00	448.00	672.00	933.00	1,865.00
50-54	273.00	437.00	655.50	983.00	1,365.00	2,730.00
55-59	460.00	736.00	1,104.00	1,656.00	2,300.00	4,600.00
60-64	761.50	1,218.50	1,827.00	2,740.50	3,806.00	7,611.50
65-69 ⁶	1,184.50	1,894.50	2,841.50	4,262.00	5,920.00	11,839.00
70-74	N/A	N/A	N/A	N/A	N/A	N/A

- * Age Last Birthday.
- * Subjected to underwriting & AIA's approval.
- * All rates include the prevailing 7% GST in SS, with exception to Group Term Life, Total and Permanent Disability and Group Accelerated Critical Illness. Premium rates are not guaranteed and may be increased at policy renewal at the full discretion of AIA.

GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (24-HOUR WORLDWIDE COVERAGE¹) – CORE PLAN

GHS COVERAGE

Covers eligible expenses in connection with a hospital confinement or surgery, which results directly from a sickness or injury.

"Hospital Confinement" shall mean confinement in a Hospital for any duration as long as there is (a) a Room and Board charge or

(b) a surgery

EMM COVERAGE

Covers Room and Board expenses incurred subsequent to the maximum number of days covered by the Daily Room and Board Benefit under the basic Group Hospital & Surgical (GHS) Plan.

Covers in-hospital expenses which are in excess of the maximum amount payable under the basic Group Hospital & Surgical (GHS) plan.

COMMON EXCLUSIONS

Pre-existing conditions which have existed during the 12 months prior to the commencement of insurance coverage under this Policy (known or unknown).

For voluntary plan upgrade, pre-existing conditions which have existed during the 12 months prior to the plan upgrade, unless the member has been insured continuously for 12 months under the upgraded plan.

Investigation and treatment of psychological, emotional, mental and behavioral conditions; alcoholism or drug addiction or any abuse of drugs or alcohol; overdose of prescription drugs, whether intentional or accidental or otherwise, intentional self-inflicted injuries while sane or insane; injuries sustained as a result of a criminal act of the insured.

General medical check-up, health screening; immunization, vaccination or inoculation; non prescribed medication, vitamins and supplements.

Procurement and rental of/or use of special braces, any appliances, any equipment or prosthetic devices, wheel-chair, walking aids, hearing aids.

Acquired Immuno-Deficiency Syndrome (AIDS), AIDs related complexes and all illnesses or diseases associated with the Human Immuno-Deficiency Virus (HIV), unless acquired due to Medically Necessary blood transfusions or occupational related infections (where proof of which must be made available).

SOURCEAL (1995) PLAN 1 2 PLAN 4 PLAN 5 PLAN			BENEFITS APPLY ON A PER DISABILITY BASIS, UNLESS OTHERWISE STATED, FOR EACH INSURED MEMBER									
Actual accommodation charges during a hospital confirmment for the control of t												
COUNTRY CONTROL OF THE PROPERTY CONTROL OF THE PROPE	1a	Actual accomodation charges during a hospital confinement not exceeding the limit	4 Bed	2 Bed	1 Bed	1 Bed	Government & Restructured	4 Bed				
Expenses incurred during a hospital confinement excluding accomdation, surprise and inhospital doctor's consultation fee (including implants). 3 SURGEON'S FEE 3) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500. (b) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (c) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (e) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (e) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (e) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (e) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (e) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel specially in Private Hospital. (e) Surgical Schedule shall be waived for Surgeon's fee of more than SS 1,500 treated by panel special specia	1b	ICU charges incurred during a hospital confinement, up to maximum limit as stated in the policy contract or up to 30 days, whichever	\$10,000	\$10,000	\$10,000							
a) Surgical Schedule shall be waived for Surgeon fee below St. 15.00.0 b) Surgical Schedule shall be valued for Surgeon fee below St. 15.00.0 b) Surgical Schedule shall be valued for Surgeon fee for admission to Singapore Government and Restructured Hospital. c) Surgical Schedule shall be waived for Surgeon fee for more than \$51.500 treated by panel specialist in Private Hospital. d) Interpretation of the form of the special schedule shall be waived for Surgeon fee for more than \$51.500 treated by panel specialist in Private Hospital. d) Interpretation of the form of the special schedule shall be waived for Surgeon fee for more than \$51.500 treated by panel specialist in Private Hospital. d) Interpretation of the special schedule shall be waived for Surgeon fee for device shall be for fee for device shall be feet for feet feet feet feet feet feet feet fee	2	Expenses incurred during a hospital confinement excluding accomodation, surgeon's and inhospital doctor's consultation fee						\$6,000				
National Property Nati	3	 a) Surgical Schedule shall be waived for Surgeon's fee below \$\$1,500. b) Surgical Schedule shall be waived for Surgeon's fee for admission to Singapore Government and Restructured Hospital. c) Surgical Schedule shall be waived for Surgeon's fee of more than \$\$1,500 treated 					disability subject to 4 Bed Government & Restructured Ward Class (S-Pass and Work Permit	\$7,000				
5 PRE & POST-HOSPITALISATION SPECIALISTS' CONSULTATION, DIAGNOSTIC X-RAY & LABORATORY TEST BENEFIT; POST-HOSPITALISATION TRADITIONAL CHINESE MEDICINE (TCM) TREATMENT BENEFIT Expenses incurred 90 days prior to admission and 90 days after discharge. 6 MEREGRICHY ACCIDENT OUTPATIENT TREATMENT BENEFIT Expenses incurred within 31 days of accident, provided treatment is sought within 24 hours of accident (including Accidental Dental treatment). 7 ACCIDENTAL MISCARRIAGE BENEFIT Include ectopic pregnancy. 8 OVERSEAS HOSPITALISATION FOR ACCIDENT BENEFIT When the Insured Member or dependant sustains an accidental injury while travelling outside Singapore and requires hospitalisation overseas. This is only applicable for employees residing in Singapore and requires hospitalisation overseas. This is only applicable for employees residing in Singapore and and the overseas trip does not exceed more than 180 days. 9 NATURAL AND ACCIDENTAL DEATH If the Insured Member passes away due to a natural cause or an accident. 10 OUTPATIENT KIDNEY DIALYSIS / CANCER TREATMENT Up to maximum limit per Policy Year. 11 REHABILITATION BENEFIT Up to maximum limit per Policy Year. NA. NA. NA. NA. NA. NA. NA. NA.	4	CONSULTATION BENEFIT In-hospital doctor's visits during a hospital	\$15,000	\$20,000	\$25,000	per year (item 1b to 8,)					
TREATMENT BENEFIT Expenses incurred within 31 days of accident, provided treatment is sought within 24 hours of accident (including Accidental Dental treatment). 7 ACCIDENTAL MISCARRIAGE BENEFIT Include ectopic pregnancy. 8 OVERSEAS HOSPITALISATION FOR ACCIDENT BENEFIT When the Insured Member or dependant sustains an accidental injury while travelling outside Singapore and requires hospitalisation overseas. This is only applicable for employees residing in Singapore and the overseas trip does not exceed more than 180 days. 9 NATURAL AND ACCIDENTAL DEATH If the Insured Member passes away due to a natural cause or an accident. 10 OUTPATIENT KIDNEY DIALYSIS / CANCER TREATMENT Up to maximum limit per Policy Year. 11 REHABILITATION BENEFIT Up to maximum limit as stated in the policy S5,000 \$5,000 \$5,000 disability subject N.A. N.A.	5	CONSULTATION, DIAGNOSTIC X-RAY & LABORATORY TEST BENEFIT; POST-HOSPITALISATION TRADITIONAL CHINESE MEDICINE (TCM) TREATMENT BENEFIT (WITH REFERRAL) Expenses incurred 90 days prior to admission						\$1,000				
Include ectopic pregnancy. As per benefit limits (item 1 to 6) N.A.	6	TREATMENT BENEFIT Expenses incurred within 31 days of accident, provided treatment is sought within 24 hours of								N.A.	N.A.	
FOR ACCIDENT BENEFIT When the Insured Member or dependant sustains an accidental injury while travelling outside Singapore and requires hospitalisation overseas. This is only applicable for employees residing in Singapore and the overseas trip does not exceed more than 180 days. 9 NATURAL AND ACCIDENTAL DEATH If the Insured Member passes away due to a natural cause or an accident. 10 OUTPATIENT KIDNEY DIALYSIS / CANCER TREATMENT Up to maximum limit per Policy Year. 11 REHABILITATION BENEFIT Up to maximum limit as stated in the policy \$5,000	7		As per	benefit limits (item	1 to 6)		N.A.	N.A.				
If the Insured Member passes away due to a natural cause or an accident. 10 OUTPATIENT KIDNEY DIALYSIS / CANCER TREATMENT Up to maximum limit per Policy Year. 11 REHABILITATION BENEFIT Up to maximum limit as stated in the policy \$5,000 \$5	8	FOR ACCIDENT BENEFIT When the Insured Member or dependant sustains an accidental injury while travelling outside Singapore and requires hospitalisation overseas. This is only applicable for employees residing in Singapore and the overseas trip does	1509	150% of item 1, 2, 3, 4, 5 & 6			N.A.	N.A.				
/ CANCER TREATMENT Up to maximum limit per Policy Year. 11 REHABILITATION BENEFIT Up to maximum limit as stated in the policy \$5,000 \$5,000 \$5,000 \$5,000 \$5,000	9	If the Insured Member passes away due to a	\$5,000	\$5,000	\$5,000	subject to	\$3,000	\$3,000				
Up to maximum limit as stated in the policy \$5,000 \$5,000 disability subject N.A. N.A.	10	/ CANCER TREATMENT	\$15,000	\$15,000	\$15,000	year subject to	N.A.	N.A.				
	11	Up to maximum limit as stated in the policy	\$5,000	\$5,000	\$5,000	disability subject	N.A.	N.A.				
EXTENDED MAJOR MEDICAL - MAXIMUM PER DISABILITY	EXT	ENDED MAJOR MEDICAL - MAXIMUM PER DISABIL	ITY									
IN-HOSPITAL BENEFIT Eligible expenses per basic GHS provided 1) Hospitalization >= 20 days; or 2) Surgical Percentage >= 75% per incision N.A. N.A. N.A. N.A.	1.	Eligible expenses per basic GHS provided 1) Hospitalization >= 20 days; or	\$40,000	\$60,000	\$80,000	N.A.	N.A.	N.A.				
2. Deductible Basic GHS	2	Deductible		Basic GHS			N.A.					
	۷.		Basic GHS 10%									

^{*} Sub-limit per disability will apply if the insured goes to a ward higher than the plan entitlement or private hospitals for treatment.

70-746

2,180.00

2,770.00

3,571.00

6,951.00

PREMIUMS FOR DEPENDANT - GHS+EMM (S\$)								
AGE* BAND	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5			
Up to 29	356.00	452.00	583.00	1,134.00				
30-34	402.00	511.00	659.00	1,282.00				
35-39	402.00	511.00	659.00	1,282.00				
40-44	443.00	563.00	726.00	1,413.00				
45-49	567.00	720.00	928.00	1,806.00	N.A.			
50-54	710.00	902.00	1,162.00	2,263.00	N.A.			
55-59	934.00	1,187.00	1,530.00	2,979.00				
60-64	1,257.00	1,598.00	2,059.00	4,009.00				
65-69 ⁶	1,742.00	2,214.00	2,854.00	5,557.00				
70-746	2,387.00	3,034.00	3,910.00	7,613.00				

GROUP ACCIDENTAL DEATH & DISMEMBERMENT (24-HOUR WORLDWIDE COVERAGE¹) - OPTIONAL RIDER TO GTL, GHS

TOTAL AND PERMANENT **DISABILITY** (TPD)

DEATH

Provides 24-hours worldwide coverage against death due to accident. The sum assured is payable in a lump sum.

- Total & Permanent Disability Benefit Provides coverage against TPD as a result of accident prior to the insured's 65th birthday. TPD shall mean that the disability must be total and permanent and that there is no work, occupation or profession that the insured can ever sufficiently do or follow to earn or obtain any wages, compensation or profit. The sum assured is payable in a lump sum.
- Mobility Aid Extension Benefit In the event of TPD, this benefit provides for the (b). reimbursement of the cost of equipment necessary for mobility (e.g. wheelchair). The amount payable is 95% of the expenses up to a maximum of \$1,000.

MAJOR BURNS

Provides coverage against 3rd degree burns.

COMPASSIONATE **DEATH ALLOWANCE**

Pays a benefit of \$2,000 in addition to the above-mentioned Death benefit.

CHILDREN **EDUCATION FUND**

Pays a benefit of \$5,000 in addition to above-mentioned Death benefit if as a result of an accident the member leaves behind a dependant child.

Dependant child is an unmarried child below 25 years old and unemployed.

ACCIDENTAL DEATH DUE TO COMMON **CARRIER**

Pays a benefit of 10% of the sum assured up to a maximum of \$10,000, in addition to the abovementioned Death benefit, if as a result of an accident, whilst boarding, alighting or traveling in a duly licensed commercial aircraft as a fare-paying passenger, the member dies within 12 months of the date of accident.

COMATOSE STATE DUE TO COMMON **CARRIER**

Pays a benefit of 20% of the sum assured up to a maximum of \$20,000, if as a result of an accident, whilst boarding, alighting or traveling in a duly licensed commercial aircraft as a fare-paying passenger, the member is hospitalised and is in a comatose state within 30 days of the date of accident.

EXCLUSIONS

Self-destruction or any attempt thereat.

War, participation in a riot, violation or attempted violation of the law or resistance to arrest.

Traveling or flying in, ascending or descending from any aerial device or aircraft, unless the insured is traveling as a fare-paying passenger in a duly licensed commercial aircraft and the said aircraft was not engaged in any rescue, instructional or training purposes during such flight.

Racing on horse or wheels.

OPTIONAL RIDER

SUM ASSURED FOR EMPLOYEE (S\$)							
GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6	
Death and Total Permanent Disability (TPD)	50,000	80,000	120,000	180,000	250,000	500,000	

SUM ASSURED FOR DEPENDANT (S\$)							
GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6	
Death and Total Permanent Disability (TPD)	25,000	40,000	60,000	90,000	125,000	250,000	

PREMIUMS FOR EMPLOYEE - GADD (S\$)								
CLASS	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6		
I	27.00	44.00	65.00	98.00	135.00	270.00		
II	38.00	61.00	92.00	137.00	190.00	380.00		
Ш	52.00	82.00	123.00	185.00	257.00	513.00		

PREMIUMS FOR DEPENDANT - GADD (S\$)								
CLASS	PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6		
1	16.00	25.00	37.00	56.00	78.00	155.00		
II	28.00	45.00	67.00	101.00	140.00	280.00		
III	30.00	48.00	72.00	108.00	150.00	300.00		

GROUP CLINICAL OUTPATIENT – OPTIONAL RIDER TO GHS

COVERAGE	Covers GP consultation, medication, basic x-ray and laboratory tests at AIA Panel & non Panel GP (local & overseas), Government Polyclinics and A&E.
COMMON EXCLUSIONS	General medical check-up, health screening; immunization, vaccination or inoculation; non prescribed medication, vitamins and supplements.

GRO	DUP CLINICAL OUTPATIENT (GP)	PLAN 1	PLAN 2
1	Visit to AIA panel of GP clinics	Unlimited; Cashless	Unlimited; Copay \$5
2	Visit to AIA panel of Traditional Chinese Medicine (TCM) clinics (consultation only)	6 visits; Cashless	6 visits; Cashless
3	Visit to Government Polyclinics	Full Reimbursement	Full Reimbursement; Copay \$5
4	Visit to A&E Department of Singapore Hospitals	\$120 per visit	\$120 per visit; Copay \$5
5	Visit to GP clinics not appointed by AIA	\$30 per visit	\$30 per visit; Copay \$5
6	Visit to Overseas General Practitioners ⁵	\$100 per visit	\$100 per visit; Copay \$5

PREMIUMS FOR EMPLOYEE - GP (\$\$)					
AGE BAND*	PLAN 1	PLAN 2			
Up to 69 ⁶	252.00	246.00			
70 to 74 ⁶	277.00	270.00			

PREMIUMS FOR DEPENDANT - GP (\$\$)						
AGE BAND*	PLAN 1	PLAN 2				
Up to 69 ⁶	277.00	270.00				
70 to 74 ⁶	305.00	297.00				

GROUP CLINICAL OUTPATIENT & GROUP SPECIALIST OUTPATIENT - OPTIONAL RIDER TO GTL, GHS

prescribed medication, vitamins and supplements.

GROUP CLINICAL OUTPATIENT

COVERAGE	Covers GP consultation, medication, basic x-ray and laboratory tests at AIA Panel & non Panel GP (local & overseas), Government Polyclinics and A&E.
COMMON	General medical check-up, health screening; immunization, vaccination or inoculation; non

GROUP SPECIALIST OUTPATIENT

EXCLUSIONS

COVERAGE Covers Specialist consultation & medication at: AIA Panel Specialist clinics referred by AIA Panel GP (b) Singapore Government / Restructured Hospitals referred by any GP Covers basic and specialized tests referred by AIA Panel GP, AIA Panel Specialist, GP or Specialist at Government Restructured Hospitals or Singapore Polyclinics. Covers Physiotherapy, provided it is referred by AIA Panel GP, AIA Panel Specialist or Specialist at Government Restructured Hospitals or Singapore Polyclinics. COMMON General medical check-up, health screening; immunization, vaccination or inoculation; non **EXCLUSIONS** prescribed medication, vitamins and supplements. Any expenses incurred in relation to any type of therapy including but not limited to occupational therapy, or dialysis, except for physiotherapy. Cosmetic Treatment.

GROUP SPECIALIST OUTPATIENT (SP)		FACILITY	PLAN 1	PLAN 2	PLAN 3	PLAN 4
			S\$			
1	Visit to AIA panel of Specialists (with referral letter by panel GP)	Cashless				
2	Visit to SG Government/Restructured Hospitals (with referral letter by any GP)	On reimbursement	800 per Policy Year	1,000 per Policy Year	1,500 per Policy Year	2,000 per Policy Year
3	Physiotherapy (with referral letter by panel GP)	On rembursement				
4	Diagnostic X-Ray & Lab. Test (includes MRI and CT Scan) (with referral letter by any GP)	a) By panel Specialist - Cashless b) MRI and CT Scan - On reimbursement basis c) By Singapore Government/ Restructured Hospitals - On reimbursement basis	800 per Policy Year	1,000 per Policy Year	1,500 per Policy Year	2,000 per Policy Year

PREMIUMS FOR EMPLOYEE – GP COPAY \$0 + SP (S\$)							
AGE BAND*	PLAN 1	PLAN 2	PLAN 3	PLAN 4			
Up to 69 ⁶	470.00	510.00	609.00	664.00			
70 to 74 ⁶	517.00	560.00	670.00	731.00			

PREMIUMS FOR DEPENDANT – GP COPAY \$0 + SP (\$\$)								
AGE BAND*	PLAN 1	PLAN 3	PLAN 4					
Up to 69 ⁶	517.00	560.00	670.00	731.00				
70 to 746	569.00	617.00	737.00	804.00				

PREMIUMS FOR EMPLOYEE – GP COPAY \$5 + SP (S\$)								
AGE BAND*	PLAN 1	PLAN 3	PLAN 4					
Up to 696	464.00	504.00	603.00	658.00				
70 to 74 ⁶	510.00	553.00	663.00	724.00				

PREMIUMS FOR DEPENDANT – GP COPAY \$5 + SP (S\$)								
AGE BAND* PLAN PLAN PLAN PLAN PLAN PLAN PLAN PLAN								
Up to 69 ⁶	510.00	553.00	663.00	724.00				
70 to 74 ⁶	561.00	609.00	729.00	796.00				

GROUP DENTAL - OPTIONAL RIDER TO GTL, GHS

GROUP DENTAL (DENTAL PPO-PLUS) SCHEDULE OF ALLOWANCES	AIA PANEL OF DENTAL CLINICS	NON-AIA PANEL OF DENTAL CLINICS (S\$)
EXAMINATION Dental Checkup		15
MEDICINE & MISCELLANEOUS TREATMENT Analgesics, antibiotics, sterilization and disposables		15
X-RAY Intraoral Bitewing Panorex		12 12 32
TEST & LABORATORY Biopsy and examination of tissue		48
PROPHYLAXIS Routine Complex		40 60
FILLING (SILVER) – for posterior teeth only Amalgam – one surface Amalgam – two surfaces Amalgam – three or more surface Reinforced Pin		16 24 32 9
FILLING (TOOTH-COLOURED MATERIAL) – for anterior teeth and buccal (one surface) filling of premolars only One surface Two surfaces Three surfaces		30 40 50
PULPOTOMY Pulpotomy Pulp Cap		40 20
ROOT CANAL TREATMENT Single root canal filling Double root canal filling Three or more root canals (X-ray of the tooth involved with the diagnostic wire or wires in place must accompany claim for payment)	Cashless	150 220 350
EXTRACTIONS Routine (simple) – each tooth		30
SURGICAL EXTRACTIONS Erupted tooth or root Soft tissue impaction Part bony impaction Completely bony impaction		120 160 250 320
ALVEOPLASTY Per quadrant, in connection with extractions Per quadrant, not in connection with extractions For a complete Alveoplasty involving more than one quadrant		30 42 160
EXCISION OF TUMOUR Excision of tumour		76
FRACTURE OF JAW Simple Compound (X-ray of the fracture must accompany claim for payment)		500 600
REPAIR OF PROSTHETIC APPLIANCE Repair of broken, complete or partial denture Repair of denture and replace broken tooth Adding tooth to partial denture to replace extracted tooth Adding tooth to partial denture plus clasp		20 40 27 54
SPACE MAINTAINERS Fixed band type (uni or bilateral) Removal in acrylic (uni or bilateral)		135 67

PREMIUMS FOR EMPL	LOYEE - DENTAL (S\$)
AGE BAND*	PLAN 1
Up to 69 ⁶	388.00
70 to 74 ⁶	388.00

PREMIUMS FOR DEPEN	PREMIUMS FOR DEPENDANT - DENTAL (S\$)				
AGE BAND*	PLAN 1				
Up to 69 ⁶	485.00				
70 to 74 ⁶	485.00				

^{*} Age Last Birthday.

UNDERWRITING GUIDELINES

AGE LAST BIRTHDAY	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	ALL PRODUCTS EXCEPT GACI & DENTAL	DENTAL
Employees	16 – 64, renewable to 69	16 – 69, renewable to 74	16 – 69, renewable to 74
Legal Spouse	16 – 64, renewable to 69	16 – 69, renewable to 74	16 – 69, renewable to 74
Children (unmarried & unemployed)	2 week	3 - 25	

ELIGIBILITY

- 1. All full-time actively at-work employees, directors, partners and proprietors are eligible, subject to AIA's approval.
- 2. Companies with a minimum of 5 lives (minimum 2 employees & 3 dependants) and a maximum of 50 lives.
- 3. Occupational risks: Class 1 to 3 (only applicable to Group Accidental Death & Dismemberment)
 - **Class 1:** Clerical, administrative or other similar non-hazardous occupations.
 - Occupations where some degree of risk is involved, e.g. supervision of manual workers, totally administrative job in an industrial environment.
 - Class 3: Occupations involving regular light to medium manual work but no substantial hazard which may increase the risk of sickness or accident.
- 4. Only for companies with a minimum number of 25 Standard Life employees, the pre-existing exclusion will be waived for members who have been insured continuously for 12 months under this FVC Plus or under any group hospital and surgical policy issued in Singapore immediately prior to the commencement of insurance coverage under this Policy.

PARTICIPATION AND PLAN SELECTION

- The company must choose either a Life Core Plan, a Medical Core Plan or both. Company can further select any of the optional riders:
 - a) Group Term Life: Group Accelerated Critical Illness, Group Accidental Death & Dismemberment, Clinical & Specialist Outpatient, and/or Group Dental PPO-Plus
 - b) Group Hospitalisation & Surgical: Group Accidental Death & Dismemberment, Clinical/Clinical & Specialist Outpatient, and/or Group Dental PPO-Plus
- 2. A minimum of 5 total lives is required, subjected to a minimum of 2 employees; dependants can be added to make up the minimum total of 5 lives.
- 3. All members are allowed to upgrade their selected basic plan. No downgrade of selected basic plan is allowed.
- 4. If Group Accelerated Critical Illness is taken up as a rider, its plan selection must align to the plan selection for Group Term Life.
- 5. If Group Dental PPO-Plus is taken up as a rider, the participation must be on a compulsory basis for all employees, subjected to a minimum of 5 lives. Further coverage may be extended to spouse and child(ren) of employees.
- 6. Dependants' coverage must follow the same employee's core plan, plan selection and classification, either for basic or upgraded coverage.
- 7. All upgrades in plan selection and voluntary dependants' coverage will be subjected to underwriting.
- 8. Any upgrade in plan selection and voluntary dependants' coverage will be subjected to the following enrolment period:
 - a) Existing employees once a year and the request must be submitted to us within 1 month from the policy renewal anniversary date.
 - b) New employees within 1 month from the day following the completion of the required waiting period.
- 9. Dependants will be insured for 50% of the sum assured for Group Term Life/Group Accelerated Critical Illness and Group Accidental Death & Dismemberment.



AIA SINGAPORE PRIVATE LIMITED (REG. NO. 201106386R) APPLICATION FORM FOR AIA FLEXI VITAL CARE PLUS

(Group Size 5 - 50 Lives)

Please type/write clearly in CAPITAL letters and circle the Plan Number. Do refer to the terms and conditions for more information.

WARNING: In accordance with Section 25(5) of the Insurance Act, as may be amended from time to time, you are to fully and faithfully disclose in this Application Form all facts which you know, or ought to know, failing which you may receive nothing from the policy and/or the policy issued may be void.

SUBMISSION DOCUMENTS REQUIRED
ACRA / Bizfile (Latest copy of not more than 12 months old)
MAS 314 (Form) List of Authorised Signatories and Beneficial Owners*
Excel Template for Members Census Reporting*
* Forms can be downloaded from https://eben.aia.com.sg/en/my-aia/login/information-library.htn Click on Administration > MAS 314 List of Authorised Signatory and Beneficial Owner Click on Administration > Excel Template for Member Census Reportin
COMPANY PARTICULARS
Name of Company (herein the policyholder):
Nature of Business:
Mailing Address: Postal Code:
Authorised Person In Charge:
NRIC/FIN No:
Contact Details: Office / Fax No.:
Contact No.:
Email Address:
Total Number of Employees:
COMMENCEMENT OF INSURANCE COVERAGE
Effective Date:
(DD/MM/YYYY)
NEW EMPLOYEES ARE TO BE INSURED FROM:
Date of Employment or

Date of confirmation with a probationary period of: 3 months 6 months

CLASSIFICATION OF EMPLOYEE:

CORE PLANS	OPTIONAL RIDERS	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	CLINICAL OUTPATIENT ONLY (GP)	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) NO COPAY	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) \$5 COPAY	GROUP DENTAL PPO-PLUS
GROUP TERM LIFE (GTL)	1/2/3/4/5/6	1/2/3/4/5/6	1/2/3/4/5/6	N.A	1/2/3/4	1/2/3/4	Yes/No
GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (GHS)	1/2/3/4/5	N.A	1/2/3/4/5/6	1/2	1/2/3/4	1/2/3/4	Yes/No

CLASSIFICATION OF EMPLOYEE:

CORE PLANS	OPTIONAL RIDERS	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	CLINICAL OUTPATIENT ONLY (GP)	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) NO COPAY	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) \$5 COPAY	GROUP DENTAL PPO-PLUS
GROUP TERM LIFE (GTL)	1/2/3/4/5/6	1/2/3/4/5/6	1/2/3/4/5/6	N.A	1/2/3/4	1/2/3/4	Yes/No
GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (GHS)	1/2/3/4/5	N.A	1/2/3/4/5/6	1/2	1/2/3/4	1/2/3/4	Yes/No

CLASSIFICATION OF EMPLOYEE:

CORE PLANS	OPTIONAL RIDERS	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	CLINICAL OUTPATIENT ONLY (GP)	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) NO COPAY	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) \$5 COPAY	GROUP DENTAL PPO-PLUS
GROUP TERM LIFE (GTL)	1/2/3/4/5/6	1/2/3/4/5/6	1/2/3/4/5/6	N.A	1/2/3/4	1/2/3/4	Yes/No
GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (GHS)	1/2/3/4/5	N.A	1/2/3/4/5/6	1/2	1/2/3/4	1/2/3/4	Yes/No

CLASSIFICATION OF EMPLOYEE:

CORE PLANS	OPTIONAL RIDERS	GROUP ACCELERATED CRITICAL ILLNESS (GACI)	GROUP ACCIDENTAL DEATH & DISMEMBERMENT (GADD)	CLINICAL OUTPATIENT ONLY (GP)	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) NO COPAY	CLINICAL & SPECIALIST OUTPATIENT (GP/SP) \$5 COPAY	GROUP DENTAL PPO-PLUS
GROUP TERM LIFE (GTL)	1/2/3/4/5/6	1/2/3/4/5/6	1/2/3/4/5/6	N.A	1/2/3/4	1/2/3/4	Yes/No
GROUP HOSPITALISATION & SURGICAL AND EXTENDED MAJOR MEDICAL (GHS)	1/2/3/4/5	N.A	1/2/3/4/5/6	1/2	1/2/3/4	1/2/3/4	Yes/No

OPTIONAL BENEFITS TO AIA FLEXI VITAL CARE PLUS			
AIA Vitality Membership (S\$48 per year per insured Member)	Employee Only	Employee and Spouse	

	Basis of Co	verage		
☐ Employee Only	☐ Dependants cover (Spou	, and the second	☐ Compulsory	☐ Voluntary
_ Limpleyee only	_ Bopondanto covor (opod	so / omta/	_ compation,	_ votantary
	Cheque / Credit (Card Payment		
\square Cheque to be made payable to "AIA Sin	gapore Private Limited"	Bank / Cheque No:	Amou	ınt S\$:
☐ Payment by Credit Card		Type of Card: ☐ Visa ☐	☐ Mastercard ☐ Am	nex
Name of Cardholder (as printed on card	d)*:			
Credit Card Number:		Car	d Expiry Date: MM	YY
Note: 1. For Visa / Mastercard, the Cardholder must be a "Director" stated in the company's ACRA. 2. For AMEX card, only corporate cards starting with "3762" and "3769" are allowed.				
3. No 3rd party credit card is allowe	ed.			
	Cardholder's A	uthorisation		
1. I, the Cardholder identified on this form hereby authorise AIA Singapore Private Limited ("AIA Singapore") to charge the aforesaid card and the issuer of the said card to pay the premium due under this application, including any additional premiums payable after the submission of this application.				
2. I hereby authorise, agree and consent to AIA Singapore to use and/or disclose any information collected and/or held (whether contained in this form or otherwise obtained) to its associated individuals/organisations and/or independent third parties, within or outside Singapore, with regard to any matters pertaining to this form/aforesaid Policies. I hereby specifically waive any right to bring a claim of any nature against AIA Singapore, its associated individuals/organisations and/or independent third parties, within or outside Singapore, in respect of any above-mentioned disclosure and/or any disclosure in the nature described above.				
3. Should payment not be successfully effected pursuant to this authorisation for any reason, AIA Singapore shall under no circumstances be held responsible or liable in any manner whatsoever including any subsequent expiry of the policies due to late or non-payment of premiums.				
 This authorisation shall be binding and re accepted by AIA Singapore. A photocopy o 			whether or not this form	/aforesaid policies are
Cardholder's Signature (as per Credit Card)			Date (DD/	MM/YYYY)

Declaration & Authorisation

The Applicant hereby agrees and declares, on behalf of itself and any other person or persons, firm or corporation, who may have or claim any interest in any insurance on this Application:

- 1. No statement, information or agreement made by/to or given by/to the person soliciting/taking this Application or any other persons, shall be binding on AIA Singapore Private Limited ("AIA"), unless presented to AIA in writing and approved by an authorised officer of AIA.
- 2. The statements and answers contained in this Application, together with those contained in any required form including enrolment form, questionnaire or amendment of the Applicant, the statements and answers of the Applicant's employees and their dependants contained in any required form, or medical report, and any required supporting documents (collectively the "Information") are full, complete, true and correct and that no Information has been withheld. The Applicant further agrees that the Information shall form the basis of the contract between the parties hereto, and that the Information together with the group policy (including without limitation its riders, endorsements and any amendments thereto) shall constitute the entire contract between the parties. The Applicant understands that if any of the Information is not full or complete or true or correct, the group policy issued hereunder may be void and the Applicant/policyholder/employee/dependant as the case may be, may receive nothing from the group policy.
- 3. AIA shall assume no liability whatsoever and the group policy will only be effective after this Application and required forms, questionnaires or amendments have been completed by the Applicant, and its employees and their dependants, with the Application being accepted by AIA and the first premium fully paid for.
- 4. I/We hereby authorise, agree and consent to:
 - a) persons and organisations, whether within or outside Singapore, including but not limited to medical sources, hospitals, doctors, other healthcare professionals, laboratories, regulator, dispute resolution centres and insurers, their associated persons/organisations, my/our or the insured person's employers or financial service providers, or their third party service providers or representatives (collectively "Third Parties") disclosing and releasing to AIA, its associated persons/organisations, its and their third party service providers and its and their representatives, whether within or outside Singapore (collectively "AIA Persons"), any information concerning the policy owner and the insured person(s) at any time, including all personal data and information, medical information, medical history, consultation history and notes, prescriptions, treatments, descriptions of medical services rendered, and any employment and financial information, including the taking of copies of such records (collectively "Personal Data"), relevant for the Purpose (defined below):
 - b) the AIA Persons sharing the scope of sub-clause (a) above, along with any of the Personal Data, with any relevant Third Parties to procure their disclosure and release of additional relevant Personal Data for the Purpose;



- c) the AIA Persons, including their approved medical examiners or laboratories, performing any necessary medical assessments and examinations and tests to determine, assess and evaluate the health of the insured person(s);
- d) the AIA Persons collecting, using, disclosing, storing, retaining and/or processing (collectively, "Using"/"Use") the Personal Data for the Purpose; and
- e) waive any right (on my own behalf and on behalf of the insured person(s) where applicable, in respect of which I/we represent and warrant that the insured person(s) have granted me/us authority to so waive) to bring a claim of any nature against any of the AIA Persons in respect of any above-mentioned Use and/or any Use of any Personal Data for the Purpose.

Where I/we are not the insured person, I/we represent and warrant that I/we have obtained the consent of the insured person(s), except to the extent such consent is not required under relevant laws: (i) to collect their Personal Data; (ii) to disclose their Personal Data to the AIA Persons; and (iii) for the AIA Persons and Third Parties to Use any of their Personal Data in the manner and for the purposes described in this Clause. I/We hereby agree to indemnify AIA Persons for all losses and damages that AIA Persons may suffer in the event that I/we are in breach of any representation and warranty provided by me/us herein. In this Clause, "Purpose" means any of the purposes described in the AIA Personal Data Policy, including but not limited to processing of this form, to provide subsequent advice or services to me/us or the insured person in relation to any existing or future policy/policies/programmes that I/we may hold/participate with AIA. This authorisation shall bind my/our successors and assignees, and remains valid, notwithstanding death, irrespective of whether or not my/our Application/form is accepted by AIA. A photocopy of this authorisation shall be valid and effective as the original.

- 5. The Applicant is not insolvent, or is unable to pay its debts as they become due, or making any assignment or arrangement for the benefit of its creditors, or is ceasing or threatening to cease to carry on its business.
- 6. AIA is entitled not to accept or process this Application or accept an employee or dependant under the group policy should the Applicant or such employee or dependant be found to be a Prohibited Person, meaning a person/entity (including any director or direct/indirect shareholder or person having executive authority therein) subject to any laws, regulations and/or sanctions administered by any regulatory authorities in any country, which have the effect of prohibiting AIA from providing insurance coverage, transacting business with or otherwise offering any economic benefits to the Applicant/policy owner or such employee or dependant or any other beneficiary under the group policy, and the decision of AIA shall be final.
- 7. In the event AIA becomes aware subsequently that the Applicant/policy owner/insured employee/insured dependant has become a Prohibited Person, AIA may block and/or terminate the relevant policy, and/or remove such insured employee or insured dependant from coverage under the group policy with immediate effect, and shall not thereafter be required to transact any business with the Applicant/policy owner/insured employee/insured dependant or any other beneficiary in connection with the group policy, including but not limited to, making or receiving any payments under the group policy. The Applicant/policy owner, as an entity, also agrees as an ongoing obligation to notify AIA in writing as soon as possible of any change in its directors or direct/indirect shareholders or persons having executive authority therein.
- 8. By signing this Application, the Applicant confirms that the AIA Financial Services Consultant/Insurance Representative has solicited insurance business from the Applicant in the Republic of Singapore and that the signing of this Application has taken place in the Republic of Singapore.

WARNING: If a material fact is not disclosed in this Application, any insurance coverage issued to you may not be valid. If you are in doubt as to whether a fact is material, you are advised to disclose it. This includes any information that you may have provided to the AIA Financial Services Consultant(s)/Insurance Representative(s) but was not included in this Application. Please check to ensure you are fully satisfied with the information declared in this Application. Additionally and without prejudice to the parties' rights and obligations whether under law or otherwise, following the submission of this Application, you must continue to disclose any and all material facts that may arise or which have changed from the information you had provided.

Authorised Signatory & Company Stamp	NRIC/FIN No.	Date (DD/MM/YYYY)	Designation

AIA Financial Services Consultant's (FSC) / Insurance Representative's Details				
FSC's Details Name of FSC: Contact No.: FSC Code:	Insurance Representative's (Broker/Financial Advisor's) Details Name of Broker/Financial Advisor (FA):	For Official Use Policy Number:		
Name of Agency: SP-: Alexandra # Tampines #	Financial Institution: Contact No.:	Approval:		
Signature of FSC: Date: FSC Supervisor's Details Name of FSD/FSAD/FSM/AM: Agency & FSD/FSAD/FSM/AM Code:	Signature of Broker/FA: Date:			





AIA Singapore

Corporate Solutions 3 Tampines Grande AIA Tampines, #07-00 Singapore 528799 F: (65) 6538 5603 / 6538 4340

AIA.COM.SG

Real change to health begins at AIAVitality.com.sq

This form is to be completed by Pol	licyholders of Employee E	Benefits insurance polic	ies.	.com.sg
Date:				
Company / Policyholder Name:				
IMPORTANT: It is compulsory to with MAS Notice 314 - Prevention				
Please ensure that relevant docum	ents are attached and the	e sections below are du	ly completed.	
on its directors and share	eholders/owners.			r and showing information
 Information on beneficial Information on the author Information on natural pe 	rized signatories who sigr ersons having executive a	the application form / i		
INFORMATION ON AUTHORIZED	SIGNATORIES & NATU	IRAL PERSONS HAVI	NG EXECUTIVE A	UTHORITY
"Natural persons having executive refers to the partner and/or manage		nclude the Chairman an	d Chief Executive C	Officer; for a partnership it
Please provide the following details	::			
Full Name (including alias and/or former name, if any)	NRIC/Passport No.	Nationality	Date of Birth (DD/MM/YY)	Designation
, ,,				
I/We confirm that all information captured and when there are changes to the author directors.				
AIA is entitled not to accept or process employee or dependant be found to be a having executive authority therein) subje- have the effect of prohibiting AIA from p Applicant/policy owner or such employee	a Prohibited Person, meaning of to any laws, regulations an providing insurance coverage	g a person/entity (including d/or sanctions administered , transacting business with	any director or direct/i d by any regulatory aut or otherwise offering	ndirect shareholder or person horities in any country, which any economic benefits to the
In the event AIA becomes aware subsequence AIA may block and/or terminate the relevence with immediate effect, and shall not the dependant or any other beneficiary in corpolicy. The Applicant/policy owner, as an directors or direct/indirect shareholders of	ant policy, and/or remove suc ereafter be required to trans nnection with the group policy n entity, also agrees as an one	h insured employee or insu sact any business with th , including but not limited to going obligation to notify A	red dependant from co e Applicant/policy owi o, making or receiving a	overage under the group policy ner/insured employee/insured any payments under the group
Signature				
Name & NRIC No of Authorized Sig	gnatory	Company (F	olicyholder) Stamp	

1

*Not applicable to companies listed on a stock exchange.

Notes:

- Excluding Iran, North Korea, Libya, Liberia, Congo, Côte d'Ivoire (Ivory Coast), Sudan, Somalia, Eritrea, Cuba, Belarus, Syria, Lebanon, Iraq, Zimbabwe, Yemen and Western Balkans (Western Balkans include Albania and the former Yugoslavia, which is made up of Bosnia and Herzegovina, Croatia, Macedonia, Montenegro and Serbia). Please note that the list of countries is subject to change. Please contact your AIA Financial Services Consultant or Insurance Representative for the most updated list.
- Based on list of 37 critical illnesses. Refer to policy contract for more details
- All conditions covered under the Group Accelerated Critical Illness benefit are subject to a waiting period. The waiting period refers to the period whereby no benefit will be payable under the plan if the date of diagnosis of an illness or condition leading to the performance of the surgical procedure was made within 30 days from the date of issue or date of reinstatement, whichever is later. However, the following critical illnesses are subject to a 90-day waiting period:
 - Major Cancers;
 - Coronary Artery By-pass Surgery or Other Coronary Artery Disease;
 - Heart Attack; and
 - Angioplasty & Other Invasive Treatment for Coronary Artery
- GHS Plan 5 is only available to employees holding Singapore's Ministry of Manpower S-Pass or Work Permit. If the Insured Member stays in a Ward higher than the Room and Board entitlement, or in a private hospital, the Insured Member will be covered under GHS Plan 5A which has sublimits. GHS Plan 5 & 5A can only be taken up if there is a minimum take-up rate of 5 lives with at least 2 employees from GHS Plans 1 to 4.
- ⁵ Benefit payable up to S\$100 per visit, excluding clinics in Johor state. For non-panel clinics in Johor State, benefit payable is up to S\$30 per visit.
- All benefits, except Group Accelerated Critical Illness, are available to eligible employees and spouse of age 16 to 69, and renewal up to age 74, age last birthday. Eligible employees and spouse of age 64 to 69, age last birthday, will require underwriting during initial participation. Group Accelerated Critical Illness is available to eligible employees and spouse of age 16 to 64 (age last birthday), and renewal up to age 69. All benefits are also available to child(ren) aged from 2 weeks old to 19 years old and up to 25 years old if they are full-time students, unmarried and dependant on eligible employees. For Group Dental, it is available to child(ren) aged from 3 years old to 19 years old and up to 25 years old if they are full-time students, unmarried and dependant on eligible employees.

Important Notes:

This insurance plan is underwritten by AIA Singapore Private Limited (Reg. No. 201106386R) ("AIA"). All insurance applications are subject to AIA's underwriting and acceptance. This brochure is not a contract of insurance. The precise terms and conditions of this plan, including exclusions whereby the benefits under your policy may not be paid out, are specified in the policy contract. You are advised to read the policy contract.

Information is correct as of 1 July 2019. Protected up to specified limits by SDIC. This advertisement has not been reviewed by the Monetary Authority of Singapore.

AIA Singapore Private Limited (Reg. No. 201106386R)

CORPORATE SOLUTIONS

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