



## AIA SINGAPORE PRIVATE LIMITED

### PRODUCT SUMMARY

### GROUP HOSPITAL & SURGICAL (GHS) INSURANCE

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<b>Policyholder</b>	<b>:</b>	<b>NANYANG TECHONLOGICAL UNIVERSITY (NTU)</b> <b>NATIONAL INSTITUTE OF EDUCATION (NIE) Undergraduates</b> <b>NATIONAL INSTITUTE OF EDUCATION (NIE) Postgraduates</b> <b>NIE INTERNATIONAL PRIVATE LIMITED (NIEI)</b>
<b>Policy No.</b>	<b>:</b>	<b>0000086208</b>
<b>Policy Period</b>	<b>:</b>	<b>01 Jan 2026 to 30 Jun 2027 (18 Months)</b>

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#### **A. PRODUCT INFORMATION**

Group Hospital & Surgical (GHS) Plan is a medical expense insurance plan that seeks to reimburse the expenses incurred as a result of hospitalisation or surgery. Through this insurance scheme, the member would be able to protect himself against exorbitant and escalating hospital bills.

The insurance is to provide 24-hour worldwide coverage in the event of hospitalisation or surgery. There is no minimum duration as long as (a) the Hospital makes a charge for room and board or (b) there is a surgery performed.

#### **B. ELIGIBILITY**

All matriculated or registered students over 16 and below 70 years of age, renewable up to age 84 last birthday who comprises of the following:

- Full-time and Part-time matriculated or registered Local undergraduate students (except for students from Lee Kong Chian School of Medicine)

#### **C. DESCRIPTION OF BENEFITS (GHS)**

##### **1a. Daily Room and Board Benefit**

A Daily Room & Board Benefit shall be paid when, upon recommendation of a Registered Medical Practitioner, you are registered as a bed patient in a Hospital or Community Hospital. The amount of the said benefit shall be equal to the actual charges made by the Hospital during the Insured Member's confinement, but in no event shall the benefit under this paragraph exceed for any one day the rate of Daily Room & Board Benefit set forth in the Schedule of Benefits or exceed the number of days as specified in the same schedule.

##### **1b. Intensive Care Unit Benefit**

This benefit shall be paid when, upon recommendation of a Registered Medical Practitioner or Specialist, an insured is registered as a bed patient in a Hospital and incurs charges in connection with an Intensive Care Unit (ICU), Intermediate Care Area (ICA) and High Dependency Ward (HDW) in the Hospital, but in no event shall the benefit under this paragraph exceed the number of days as specified in the same schedule.

## **2. Other Hospital Services**

This benefit shall be paid when an insured incurs charges for the following supplies and services rendered during such Hospital Confinement which are customarily supplied by the Hospital or Community Hospital.

- Administration of Blood Plasma, but not the cost of Blood or Blood Plasma;
- Ambulance Services to and/or from the Hospital not to exceed for any trip the rate of the Daily Room & Board benefit;
- Anesthesia and Oxygen and their administration including anesthetist's fee;
- Basal Metabolism Tests;
- Dressing Ordinary Splints and Plaster Casts;
- Drugs and Medicine consumed on premises;
- Electrocardiograms;
- Intravenous Infusion;
- Laboratory Examinations;
- Physical Therapy;
- Use of Operation Room;
- X-ray Examinations;
- Implants

## **3. Surgical Fee**

A surgical benefit shall be paid in an amount equal to the actual charges made for such operation performed by one or more Registered Medical Practitioners, including any assistant surgeons, provided however that the maximum benefit for all surgical operations shall not exceed the maximum Surgical Fee shown in the Schedule of Benefits. Surgical benefit shall not be subject to Surgical Schedule of Fees for surgical operation performed in a Singapore Government Hospital or Singapore Government Restructured Hospital or Private Hospital.

## **4. In-Hospital Doctor's Consultation**

This benefit shall be paid when an insured incurs charges for consultation by Registered Medical Practitioners and/or Specialists while he is hospitalised. For this benefit only one visit per day shall be covered, but in no event shall the benefit under this paragraph exceed the number of days as specified in the same schedule.

## **5. (a) Pre-Hospitalization Specialist Consultation, Diagnostic X-ray and Laboratory Test**

This benefit shall be paid when the insured incurs charges for Specialist consultations, diagnostic x-ray and laboratory examinations in the period commencing one hundred and twenty (120) days before hospitalisation or surgery.

## **(b) Post Hospitalisation Specialist Consultation, Diagnostic X-ray and Laboratory Test and TCM consultations**

This benefit shall be paid when the insured incurs charges for Specialist consultations, TCM consultations, diagnostic x-ray and laboratory examinations and physiotherapy which are recommended by a Registered Medical Practitioner or Specialist in the period ending one hundred and twenty (120) days after hospitalisation or surgery.

## **6. Inpatient Mental Care**

Where Mental Care is a benefit expressly included in the Schedule of Benefits, the sum of inpatient and out-patient charges shall be paid subject to the Mental Care limit shown in the Schedule of Benefits, subject to the following conditions:

- (a) in the case of in-patient charges incurred, the in-patient charges are for the insured's hospitalization in Singapore Institute of Mental Health or any Hospital, for psychiatric care and treatment by a Registered Medical Practitioner only on the recommendation of a Registered Medical Practitioner or a psychiatrist for such hospitalization;
- (b) the insured will not be reimbursed for the same charges under any benefits other than Mental Care if the limit shown in the Schedule of Benefits is a lump sum benefit; and
- (c) in the case of out-patient charges, which include charges for tests and out-patient consultations with psychiatrists or psychologists, such charges are incurred 120 days before hospitalization and 120 days after discharge.

## D. SCHEDULE OF BENEFITS

BENEFITS PER POLICY YEAR IN S\$ FOR EACH INSURED MEMBER	<u>Plan 2</u>
<b>1a. Daily Room &amp; Board (maximum 120 days)</b> <i>- Accommodation charges during a Hospital confinement</i>	5 Bedded Govt / Restr in Singapore only
<b>1b. Intensive Care Unit (maximum 30 days)</b> <i>- ICU charges during a Hospital confinement</i>	<p>S\$1,000 per policy year (S\$1,500 for full 18 months)</p> <p>No cover if student is admitted to a ward higher than 5 Bedded Singapore Govt / Restr.</p> <p>No cover for private and overseas hospital admission/surgery</p>
<b>1c. High Dependency Ward (maximum 30 days)</b> <i>- HDW charges during a Hospital confinement</i>	
<b>2. Hospital Miscellaneous Services (including implants)</b> <i>- Expenses incurred during a Hospital confinement excluding accommodation, surgeon's &amp; in hospital doctor's attendance fee</i>	
<b>3. Surgical Fee</b>	
<b>4. Daily In-Hospital Doctors' Visit (maximum of 120 days)</b> <i>- Doctor's attendance fee during Hospital confinement</i>	
<b>5. Pre &amp; Post - Hospitalisation Specialists' Consultation, Diagnostic X-ray &amp; Lab. Fees</b> <i>- Expenses incurred 120 days prior to admission &amp; 120 days after discharge.</i>	
<b>6. Inpatient Mental Care</b>	Covered
<b>GST Reimbursement</b>	
<b>Pre-existing Medical condition (Excluding Congenital Conditions)</b>	Covered from day 1

## E. KEY PRODUCT PROVISIONS

### 1) EXCLUSIONS

No benefit shall be payable under this Policy for any one of the following occurrences:

- Investigation, diagnosis and treatment of; alcoholism , drug addiction, overdoses of drugs (whether intentional or accidental), intentional self-inflicted injuries while sane or insane.
- Treatment of injuries sustained as a result of a criminal act of the Insured Member.
- Injuries arising from direct participation in a strike, riot, insurrection or war, declared or undeclared.
- General physical or medical check-up or health screening or tests not incidental to treatment or diagnosis of an actual Sickness or Injury; treatment which is not Medically Necessary or treatment of an optional nature or for preventive purposes; immunization, vaccination or inoculation; non-prescribed medication, over-the-counter items such as but not limited to vitamins, supplements, shampoos and moisturizers even if recommended by the attending doctor.
- Treatment of xanthelasma, skin tags, vitiligo, acne, alopecia, weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition otherwise admissible under the Policy.
- Investigation for sleep apnea except if the Insured Member subsequently undergoes a surgical procedure as recommended by a Specialist.
- Procurement and rental of/or use of special braces, any appliances, any equipment or prosthetic devices, wheelchair, walking aids, hearing aids or the fitting of the same and non-medical services such as government taxes, television, telephone and the like.
- Any eye examination, treatment or surgical procedure for the correction of eye refraction; procurement of contact lenses and eyeglasses, surgical procedure for correction of squint or other eye misalignment for ages 8 years old and above.
- Cosmetic procedure or plastic surgery except to the extent that such surgery is necessary for the repair or damage caused solely by accidental bodily injuries covered under the Policy.

- j) Dental or oral treatment except when payable under the Emergency Out-Patient Treatment (Accident) as a result of an injury sustained in an Accident.
- k) Any investigation, treatment or surgical operation for congenital anomalies or complications arising from such congenital anomalies, or physical defects present at and existing from the time of birth regardless of the time of discovery or the time of such treatment or surgical treatment.
- l) Treatment relating to birth control; investigation or treatment occasioned by or resulting from pregnancy, childbirth, abortion, except ectopic pregnancy and non-elective miscarriage; all consultations and treatments including surgical procedures required or recommended subsequent to consultations for the purpose of treating subfertility, infertility or at in-vitro fertilization clinics, reproductive assistance clinics or centres, clinics or centres for reproductive medicine and the like.
- m) Treatment by Physiotherapist and Traditional Chinese Medical Practitioner; except if treatment is within 120 days of discharge from the Hospital.
- n) Acupuncture, acupressure, bonesetting, herbalist treatment, hypnotism, massage therapy, aroma therapy and other forms of alternative treatments such as but not limited to podiatry, osteopathy and chiropractic treatment.
- o) Educational treatments such as speech therapy, diabetic classes and nutritional treatments or group support treatments.
- p) Special or private duty nursing care; clinical home care; custodial care in any setting; day care; hospice; respite care.
- q) 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 to the Company).
- r) Any treatment to prevent illness, promote health or improve bodily function or appearance including but not limited to vitamins, supplements, scar creams, soaps, shampoos and moisturizers.
- s) The costs and expenses incurred in acquiring an organ for organ transplant or the costs and expenses incurred by the donor of such organ.
- t) Hospital Confinement if the treatment, according to the general opinion of Specialists, could have been provided on an out-patient basis.
- u) Costs arising out of any litigation or dispute between the Insured Member and any medical person or establishment from whom treatment has been sought or given, or any other costs not directly or specifically related to the payment of the medical expenses covered by the policy.

## **2) LIMITATIONS**

When an insured is entitled to benefits under any government or public programme of medical benefits, or other group or individual insurance, the benefits payable under this Policy shall be limited to the balance of expenses not covered by benefits payable under such legislation, programme or other insurance, or that computed in accordance with the Schedule of Benefits of this Policy, whichever is lesser.

## **3) TERMINATION**

Your coverage shall automatically cease on the earliest of the following dates:

- i. The date on which the Policy is terminated
- ii. The date of the expiration of the period for which the last premium payment is made; or
- iii. The end of the Policy Period during which member attains the Maximum Age of Coverage as stated in the Policy Schedule; or
- iv. The date on which the student's course is terminated
- v. The date AIA communicates to you as the date the Policy ceases on account of war, or an act of war, such date being determined at the AIA's discretion.

## **4) NOTICE AND PROOF OF CLAIM**

- a) Written notice of claim must be given to the Company within ninety (90) days of the date of discharge from the Hospital.
- b) Written notice given by or on behalf of the insured to the Company with particulars sufficient to identify the insured shall be deemed to be notice to the Company. Failure to furnish notice within the time provided in the Policy shall not invalidate any claim if it is proven by or on behalf of the claimant that it was not reasonably possible to give such notice within the prescribed period, and that such notice was given as soon as it was reasonably possible to do so.
- c) All certificates, medical reports, information, and evidence required by the Company shall be furnished at the expense of the Policyholder or the Policyholder's legal representative and shall be in such form and of such nature as the Company may prescribe, within thirty (30) days from the date of discharge from Hospital or date of death.

## **5) CURRENCY AND PAYMENT OF CLAIM**

Payment of all benefits will be made in the currency in which this Policy is effected. Charges incurred in any other currency shall be payable in Singapore Dollars, or currency of the Policy on the basis of the prevailing rate used by the Company on the date the claims were processed.

## **6) ADMISSION IN A DIFFERENT WARD TYPE FROM ENTITLEMENT**

In the event the Insured Person is warded in a higher class of ward from that which he/she is entitled under this Policy, AIA shall only reimburse the charges that would have been incurred if the Insured Member had been warded in accordance with the plan under which he/she is covered as specified in the Schedule of Benefits. In the event the insured is warded in a lower class of ward, AIA shall only reimburse the charges incurred in accordance to the class of ward that the insured was actually warded in.

## **7) MISSTATEMENT**

- a) If the age or date of birth or other relevant facts relating to an insured shall be found to have been misstated and if such misstatement affects the scale of benefits or has anything to do with the policy terms and conditions, the true age and facts shall be used in determining whether insurance is in force under the policy terms and the benefits payable therefrom, and an equitable adjustment of premiums shall be made.
- b) Where a misstatement of age or other relevant facts have caused a member to be insured where he is otherwise ineligible for any insurance, or where such statement has caused an insured to remain insured when he would otherwise be disqualified in accordance with the policy terms and limitations, we may in our absolute discretion declare the insurance of the insured to be void and annul such insurance, and there shall be a return of premiums paid in respect of the member, provided always that where there is fraud on the part of the policyholder or insured, no premiums paid will be returned. If any claim has been admitted and benefits paid before AIA was made aware of the misstatement, the Policyholder will on demand by AIA reimburse AIA all benefits paid or the monetary equivalent of such benefits (as may be reasonably determined by us) if they were not paid in cash.

## **F. IMPORTANT NOTICE**

This product summary does not form a part of any contract of insurance. It is intended only to be a simplified description of the product features applicable to this plan and is not exhaustive. The contents of this product summary may vary from the terms of cover eventually issued. For the avoidance of doubt, only the terms and conditions as set out in policy contract with your employer will bind the parties.

## **G. FOR CLAIMS ENQUIRIES**

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Enquiries (Student only): [ASK ONE STOP](#)

### **NIE Student Services Centre (SSC)**

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