

**Integrated Shield Plans for Private Hospitals**

**Disclaimer:** All material included in our web site is of a general nature. It is intended for education and informational purposes only. The information provided is based on what was provided to us at the date of Publication. We are not responsible for the correctness of the information, or any third party contents which can be accessed through the web site. You are strongly advised to seek the professional advice of insurance professionals before making any decision on any of the medical insurance schemes.

**Integrated Shield Plans:** Integrated Shield Plans (IPs) comprise two components: (i) A MediShield Life component run by the Central Provident Fund Board (CPF) and (ii) additional private insurance coverage run by the private insurer. The MediShield Life component provides coverage targeted at B2/C-wards in public hospitals, while the additional private insurance coverage provides additional coverage beyond MediShield Life coverage. IPs therefore do not provide duplicate coverage with MediShield Life. **This table provides a comparison between IPs for private hospitals.**

**Table: Comparison of Private Integrated Shield Plans for Private Hospitals**

Benefits	Income IncomeShield Plan P*	Income Enhanced IncomeShield Preferred	AIA HealthShield Gold Max A	Great Eastern Supreme Health P Plus	Prudential PruShield A Premier	Aviva MyShield Plan 1	AXA Shield Plan A
<b>Inpatient and Day Surgery:</b>							
Daily ward and treatment charges	2,000/day	As Charged	As Charged	As Charged	As Charged	As Charged	As Charged
Daily ward and treatment charges in ICU	2,600/day						
Surgery	1,050 - 14,100						
Surgical Implants and approved medical consumables	14000/admission						
Gamma Knife	15,600/procedure						
Confinement in Community Hospital	2,000/day (up to 45 days for each admission)	As Charged (up to 90 days for each admission)		800/day		As Charged (up to 45 days)	As Charged (up to 45 days)
Inpatient Psychiatric Treatment	7,000/yr	As Charged up to 7,000/yr	5,000/yr (Additional post-hospitalisation psychiatric treatment of 5,000/yr within 200 days after Confinement)	25,000/yr (Including pre & post hospitalisation benefits)	4,000/yr	(i) As Charged (up to 60 days) [with 10 mth waiting period] (ii) \$500/day (up to 35 days) [without waiting period]	Up to \$5,000, capped at 35 days per policy year
<b>Outpatient Treatment:</b>							
Kidney Dialysis	3,500/mth	As Charged	As Charged	As Charged	As Charged	As Charged	As Charged
<b>Cancer treatment:</b>							
Radiotherapy (i) External or Superficial (ii) Brachytherapy	600/session	As Charged	As Charged	As Charged	As Charged	As Charged	As Charged
Chemotherapy	4,000/mth						
Immunotherapy	2,000/mth						
Stereotactic Radiotherapy	5,000/session						
Immunosuppressants for organ transplants	1,000/mth						
Erythropoietin	1,000/mth						
<b>Additional Benefits Limits:</b>							
Pre-Hospitalisation Treatment (number of days indicate maximum number of days covered prior admission) (see Note (1))	Limited to unused balance amount** of room, board and medical-related services, intensive care unit (ICU) and medical-related services benefits and staying in a community hospital (Up to 90 days)	As Charged (Up to 90 days)	As Charged  Up to 100 days  <u>If admitted to / treated by AIA Preferred Providers:</u> Up to 13 months  [Note (2)]	As Charged (Up to 120 days)	As Charged (Up to 180 days)	As Charged (Up to 90 days)	As Charged (Up to 180 days)
Post-Hospitalisation Treatment (number of days indicate maximum number of days covered after discharge) (see Note (1))	** If the inpatient claim is made under a third party plan, Income will calculate the unused balance amount after assessing the inpatient bill based on Income's IP limits and deductibles. For more information, please check with your financial advisor or Income.		As Charged (Up to 100 days, with additional 100 days for 30 critical illnesses)  <u>If admitted to / treated by AIA Preferred Providers:</u> Up to 13 months (the additional 100 days for 30 Critical Illnesses is not applicable)  [Note (2)]	As Charged (Up to 180 days)	As Charged (Up to 365 days)	(i) As Charged (Up to 90 days) [for non-panel specialist in a private hospital] (ii) As Charged (Up to 180 days) [for panel specialist in a private hospital, restructured hospital and community hospital]	As Charged (Up to 365 days)

Major Organ Transplant	Covered under Inpatient and Day surgery limits	As Charged	As Charged	As Charged	As Charged (for selected organs)	As Charged (for selected organs)	As Charged (for selected organs)
------------------------	--	------------	------------	------------	-------------------------------------	-------------------------------------	-------------------------------------

**Integrated Shield Plans:** Integrated Shield Plans (IPs) comprise two components: (i) A MediShield Life component run by the Central Provident Fund Board (CPF) and (ii) additional private insurance coverage run by the private insurer. The MediShield Life component provides coverage targeted at B2/C-wards in public hospitals, while the additional private insurance coverage provides additional coverage beyond MediShield Life coverage. IPs therefore do not provide duplicate coverage with MediShield Life. **This table provides a comparison between IPs for private hospitals**

**Table: Comparison of Private Integrated Shield Plans for Private Hospitals**

Benefits	Income IncomeShield Plan P*	Income Enhanced IncomeShield Preferred	AIA HealthShield Gold Max A	Great Eastern Supreme Health P Plus	Prudential PruShield A Premier	Aviva MyShield Plan 1	AXA Shield Plan A
<b>Additional Benefits Limits (Cont'd)</b>							
Living Donor Organ Transplant (Insured as the Living Donor donating an organ) (after 24 mths waiting period) (Note (3))	-	As Charged up to 60,000/transplant	60,000/transplant	60,000 / transplant	60,000/yr	50,000/ lifetime	\$60,000 per transplant
Living Donor Organ Transplant (Non-insured donating an organ to Insured) (Note (4))	-			60,000 / transplant		-	
Pregnancy Complications Benefit (after 10 months waiting period) (for selected conditions only - please check with your insurer for further details)	7,000/yr	As Charged	As Charged	As Charged	As Charged	As Charged	As Charged
Congenital Abnormalities Benefit for Insured's Biological Child [only for insured females]	-	-	20,000/ lifetime Limited to 5,000/child [with 10 month waiting period]	[For both female and male insureds] 20,000 / lifetime Limited to 5,000 / child [with 300 days waiting period]	-	-	-
Congenital Abnormalities Benefit for Insured	10,000/yr [with 24 mths waiting period]	As Charged [with 12 mths waiting period]	As Charged	(i) 20,000/yr (Within 730 days of last policy effective date) (ii) As Charged (After 730 days from last policy effective date)	As Charged [with 24 mths waiting period]	As Charged (with 24 mths waiting period)	As Charged (after a waiting period of 365 days)
Prosthesis Benefit	10,000/yr	As charged , up to 10,000/yr	-	-	-	-	-
Critical Illnesses	-	-	Additional 100,000 policy yr limit (for 30 Critical Illnesses) (Note (5))	-	-	Additional 150,000/yr (for 5 Critical Illnesses) (See Note (5))	-
Emergency overseas treatment	Covered under Inpatient and Day surgery limits	As charged but limited to costs of Singapore private hospitals	Reimburse the Eligible Expenses incurred for overseas medical or surgical treatment subject to the applicable claim limits of AIA HealthShield Gold Max A. Benefit payable under Emergency Overseas (Outside Singapore) Medical Treatment Benefit shall be limited to the level of Reasonable and Customary charges in a Singapore Private Hospital	As Charged (But limited to Singapore Private Hospital charges)	As Charged (paying the lower of: - the overseas charges; or - in accordance with a Singapore Private Hospital's charges)	As Charged (pegged to costs of Mount Elizabeth Orchard Hospital)	As Charged (pegged to costs of Singapore private hospital)
Planned overseas treatment	-	-	-	-	-	As Charged (pegged to costs of Mount Elizabeth Orchard Hospital) (Note (6))	-

**Integrated Shield Plans:** Integrated Shield Plans (IPs) comprise two components: (i) A MediShield Life component run by the Central Provident Fund Board (CPF) and (ii) additional private insurance coverage run by the private insurer. The MediShield Life component provides coverage targeted at B2/C-wards in public hospitals, while the additional private insurance coverage provides additional coverage beyond MediShield Life coverage. IPs therefore do not provide duplicate coverage with MediShield Life. **This table provides a comparison between IPs for private hospitals**

**Table: Comparison of Private Integrated Shield Plans for Private Hospitals**

Benefits	Income IncomeShield Plan P*	Income Enhanced IncomeShield Preferred	AIA HealthShield Gold Max A	Great Eastern Supreme Health P Plus	Prudential PruShield A Premier	Aviva MyShield Plan 1	AXA Shield Plan A
<b>Other Policy Features</b>							
Proration factors (Pls check with your insurer for more information on other applicable factors)	-	-	-	-	-	-	-
<b>Deductibles (Per Policy Year) (Note (7))</b>							
Class C	1,500	1,500	1,500	1,500	1,500	1,500	1,500
Class B2	2,000	2,000	2,000	2,000	2,000	2,000	2,000
Class B1	2,500	2,500	2,500	2,500	2,500	2,500	2,500
Class A and Private Hospital	3,500	3,500	3,500	3,500	3,500	3,500	3,500
Subsidised Day Surgery/ Short Stay Wards	2,000	2,000	2,000	Restructured hospital 1,500 (short stay) 2,000 (day surgery)	1,500	2,000 (subsidised short stay ward) 3,500 (unsubsidised short stay ward)	3,000
Unsubsidised Day Surgery/ Short Stay Wards	3,500	3,500		Restructured hospital: 2,000 (short stay) 2,500 (day surgery) Private Hospital: 3,500 (short stay & day surgery)	2,000		
<b>Co-insurance</b>	10%	10%	10%	10%	10%	10% (max \$25,500/yr)	10%
<b>Policy Year Limit</b>	300,000	1,000,000	600,000  <u>If admitted to / treated by AIA Preferred Providers:</u> 2,000,000  [Notes (2) and (5)]	1,500,000	1,200,000	1,000,000 (Note (8))	1,000,000
<b>Lifetime Limit</b>	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
<b>Final Expense Benefit (Note (9))</b>	5,000	5,000	5,000	7,000	5,000	10,000	-
<b>Free new-born benefit (Note (10))</b>	-	-	-	-	-	50,000/yr	-
<b>Preventive treatment for cancer</b>	-	-	-	-	-	As charged	-
<b>Waiver of Premium upon Total Permanent Disability</b>	-	-	Waives 1 yr premium	-	-	-	-
<b>Last Entry Age</b>	75	75	75	75	75	75	75
<b>Maximum Coverage Age</b>	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime	Lifetime

**Information on Premiums:** Integrated Shield Plans (IPs) comprise two components: (i) A MediShield Life component run by the Central Provident Fund Board (CPF) and (ii) additional private insurance coverage run by the private insurer. The MediShield Life component provides coverage targeted at B2/C-wards in public hospitals, while the additional private insurance coverage provides additional coverage beyond MediShield Life coverage. **Premiums for IPs shown below is the total premiums comprising both premiums for MediShield Life and the additional private insurance coverage component for IPs for private hospitals**

Integrated Shield Plan Premiums for Singapore Citizen (SC) and Permanent Resident (PR) Policyholder (Rounded to nearest \$)							
	Income IncomeShield Plan P*	Income Enhanced IncomeShield Preferred	AIA HealthShield Gold Max A	Great Eastern Supreme Health P Plus	Prudential PruShield Premier	Aviva MyShield Plan 1	AXA Shield Plan A
<b>Age Next Birthday:</b>	<b>SC &amp; PR</b>						
1 to 20	261-309	335-382	285	294-321	293-320	311	278
21 to 30	358	450	361-391	417	370-400	410	368
31 to 40	542-553	685-702	570-581	570	600-610	690	593
41 to 50	762-817	1,083-1,201	1,005	894	1,011-1,035	1,077-1,225	919-1,035
51 to 60	1,113-1,142	1,518-1,792	1,514-1,673	1,382-1,508	1,500-1,789	1,627-1,865	1,448-1,628
61 to 65	1,637	2,347	2,270	1,874	2,265-2,275	2,386	2,068
66 to 70	2,109	3,065	2,953	2,639	2,940-3112	3,127	2,700
71 to 73	2,780	3,998	3,724	3,447	3,700-3,848	4,063	3,337
74 to 75	3,205	4,528	4,120	3,744	4,115-4,427	4,705	3,890
76 to 78	3,765	5,124	5,429	4,602	4,738-5,279	5,582	4,618
79 to 80	4,134	5,681	5,968	4,924	5,508-5,889	6,217	5,081
81 to 83	3,972	5,976	6,285	5,237	6,269-7107	7,780	5,627
84 to 85	4,566	6,700	6,938	6,176	7,564-7,825	8,239	6,329
86 to 90	5,152-5,482	7,390-7,955	7,438-7,740	6,848-7,139	8,086-9,018	8,868-9,042	6,989-7,648
Premiums above age 90	5,842-7,307	8,144-9,819	8,330-9,260	7,274-9,360	9,095-9,950	9,151 - 9,953	9,013-11,395

\* This plan is no longer offered to new members. Existing members may continue to renew their policies.

Note (1): Pre & Post hospital treatment may not be available for: accident inpatient dental treatment, inpatient congenital anomalies, inpatient pregnancy complications, living donor organ transplant, inpatient psychiatric treatment, emergency overseas

Note (2): AIA Preferred Providers refer to all government / restructured hospitals and to all listed medical service providers in Singapore, such list as approved and may be amended by AIA from time to time.

Note (3): (a) For GE plans, the living donor organ transplant applies for kidney, liver and pancreas transplants only. When the Life Insured is the donor, the recipient must be a family member (parents, siblings, children or spouse) of the Life Insured.

(b) For Aviva plans, the living donor organ transplant applies for kidney and liver transplants only, where the recipient must be a family member (parents, siblings, children or spouse) of the Life Insured.

Note (4): Expenses incurred by the non-insured living donor shall only be reimbursed under the Living Organ Donor Benefit (coverage for non-insured donor) if the organ recipient is the Life Assured and the living donor is not eligible to be reimbursed under MediShield Life, Medisave-approved Integrated Shield Plans or any other insurance plans for the organ donation.

Note (5): AIA and Aviva's Critical Illnesses Benefit is provided over and above the Overall Policy Year Limit and the Overall Lifetime Limit. For AIA, the Critical Illness Benefit is not applicable if the maximum claim limit of \$2,000,000 Policy Year Limit has been paid.

Note (6): Expenses incurred under Planned overseas treatment shall only be reimbursed if the inpatient treatment or day surgery was received at an overseas hospital that has an approved working arrangement with a Medisave-accredited institution/referral centre in Singapore

Note (7): (a) For GE's Supreme Health Plus plan, the deductible applicable for policyholders after the age of 85 will be 150% of the listed deductibles.

(b) For AIA Plans, the deductible applicable for policyholders after the age of 82 are: Class C-1,500, Class B2-2,250, Class B1-3,000, Class A and pte hospital-4,500, day surgery & short-stay ward-3,000

(c) For Prudential PruShield A Premier, the deductible applicable for policyholders after the age of 85 will be 150% of the above listed deductible.

(d) For IncomeShield Plan P and Enhanced IncomeShield Preferred, the deductible applicable for policyholders after the age of 80 is as follows: Class C - \$2,250, Class B2/B2+ - \$3,000, Class B1 - \$3,750, Class A and pte hosp - \$5,250, Subsidised Day Surgery and Short-stay Ward - \$3,000, Non-subsidised Day Surgery and Short-stay Ward - \$5,250, Day Surgery and Short-stay Ward - \$3,000, Non-subsidised Day Surgery and Short-stay Ward - \$5,250

(e) For Aviva's MyShield Plan and AXA's AXA Shield Plan, the deductible applicable for policyholders after the age of 80 will be 150% of the listed deductibles.

Note (8): The policy year limit will be adjusted to reflect a reduction of 80% of the approved claim for treatment covered under the panel specialist in a private hospital, restructured hospital or community hospital. The total approved claim amount will not be affected by the reduction. 100% of the claim amount will be payable. 80% of the claims amount is used purely to calculate the reduction in policy year limit after the approved claim have been paid out.

Note (9): Final Expense Benefit refers to the waiver of the deductible and co-insurance up to the stipulated amounts in the event of the insured's death during hospitalisation or within a stipulated period after discharge from hospital subject to the conditions as stipulated by the insurer.

Note (10): Applicable to new-born child(ren) from 15 days old or the date of discharge from hospital after birth, whichever is later. The benefit ends on the date the new-born is 6 months old or takes up a Medisave-approved integrated shield plan, whichever is earlier. Both parents must be covered under plan 1 or plan 2 continuously for at least 10 months from the cover start date of their respective policies on the new-born's date of birth.