

Integrated Shield Plans for Ward Class B1 in Public Hospitals

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Benefits	Income IncomeShield Plan B*	Income Enhanced IncomeShield Basic	AIA HealthShield Gold Max C*	AIA HealthShield Gold Max B Lite	Great Eastern Supreme Health B*	Great Eastern Supreme Health B Plus	Prudential PruShield B*	Aviva MyShield Plan 3	Raffles Health Insurance Raffles Shield B
Inpatient and Day Surgery:									
Daily ward and treatment charges	1,000/day	As Charged	700/day	As Charged	1,750/day	As Charged	750/day	As Charged	As Charged
Daily ward and treatment charges in ICU	1,400/day		1,200/day		2,950/day		1,250/day		
Surgery	500 - 8,200		As Charged in Government/Restructured Hospitals, else subject to pro-ration factor		600 - 16,800		600 - 8,500		
Surgical Implants and approved medical consumables	9,000/admission		7,000/treatment		10,000/treatment		8,000/treatment		
Gamma Knife	9,600/procedure		9,600/procedure	10,000/procedure	10,000/procedure				
Confinement in Community Hospital	1,000/day (up to 45 days for each admission)	As Charged (up to 90 days for each admission)	450/day		-	700/day	550/day	As Charged (up to 45 days)	As Charged (up to 45 days)
Inpatient Psychiatric Treatment	5,000/yr	As Charged, up to 5,000/yr	3,500/yr (Additional post-hospitalisation psychiatric treatment of 500/yr within 200 days after Confinement)	3,500/year	-	20,000/yr (Including pre & post hospitalisation benefits)	-	500/day (up to 35 days/yr)	5,000/yr (Includes post hospitalisation benefits)
Outpatient Treatment:									
Kidney Dialysis	2,500/mth	As Charged	24,000/yr	As Charged	36,000/yr	As Charged	24,000/yr	As Charged	As Charged
Cancer treatment:									
Radiotherapy (i) External or Superficial (ii) Brachytherapy	(i) External or Superficial: 300/session (ii) Brachytherapy: 500/session	As Charged	(i) External or Superficial: 280/session (ii) Brachytherapy: 500/session	As Charged	(i) External or Superficial: 600/session (ii) Brachytherapy: 1,200/session	As Charged	550/day	As Charged	As Charged
Chemotherapy	3,000/mth		3,000/mth		25,000/year		36,500/year		
Immunotherapy	700/mth		700/mth		8,500/year		8,500/year		
Stereotactic Radiotherapy	2,500/session		2,000/session		2,000/course		2,000/treatment		
Immunosuppressants for organ transplants	600/mth		5,000/yr		10,000/yr		5,000/year		
Erythropoietin	600/mth		5,000/yr		5,500/yr		5,000/year		

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Additional Benefits Limits:									
Pre-Hospitalisation Treatment (number of days indicate maximum number of days covered prior admission) (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)		500/confinement (Up to 100 days)	As Charged (Up to 100 days)	Pre-hospital specialist's consultation is limited to unused balance amount of room, board and medical-related services benefit.	As Charged (Up to 120 days)	-	As Charged (Up to 90 days)	As Charged (Up to 90 days)
Post-Hospitalisation Treatment (number of days indicate maximum number of days covered after discharge) (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 90 days)	1,000/confinement (Up to 100 days). Additional 1,000 for an additional 100 days for 30 critical illnesses)	As Charged (Up to 100 days)	Post-hospitalisation treatment is limited to unused balance amount of room, board and medical-related services benefit.	As Charged (Up to 180 days)	-	(i) As Charged (Up to 90 days) [for non-panel specialist in a private hospital (without certificate of pre-authorisation)] (ii) As Charged (Up to 180 days) [for Panel specialist in a private hospital (with certificate of pre-authorisation), restructured hospital or community hospital]	As Charged (Up to 90 days)
Major Organ Transplant	Covered under Inpatient and Day surgery limits	As Charged	As Charged in Governmen/Restructured Hospitals, else subject to pro-ration factor	As Charged	-	As Charged	-	As Charged (for selected organs only)	As Charged (for selected organs only)
Living Donor Organ Transplant, coverage for insured donor (after 24 mths waiting period)	Covered up to MediShield Life benefits only	As Charged, up to 20,000/transplant	20,000/transplant	20,000/transplant	-	20,000/transplant (Note (2))	-	20,000/lifetime (Note (2))	20,000/transplant
Living Donor Organ Transplant, coverage for non-insured donor (after 24 mths waiting period) (Note (3))	-	-	20,000/transplant	20,000/transplant	-	20,000 / transplant (Note (2))	-	-	20,000/transplant
Pregnancy Complications Benefit (after 10 months waiting period) (for selected conditions only - please check with your insurer for further details)	3,500/yr	As Charged	-	As Charged	-	As Charged	-	As Charged	As Charged
Congenital Abnormalities Benefit	5,000/yr (with 24 mths waiting period)	As Charged (with 12 mths waiting period)	Covered up to benefit limits of the plan	Covered up to benefit limits of the plan	-	(i) 10,000/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)
Congenital Abnormalities Benefit of Insured's biological child from birth [only for insured females]	-	-	-	12,000 per lifetime Limited to 3,000 per child	-	[For both female and male insureds] 12,000 / lifetime Limited to 3,000 / child [with 300 days waiting period]	-	-	-
Prosthesis Benefit	\$6,000/yr	As Charged, up to 6,000/yr	-	-	-	-	-	-	-
Critical Illnesses	-	-	Addtl 30,000 policy yr limit (for 30 Critical Illnesses) (Note (4))	Addtl 50,000 policy yr limit (for 30 Critical Illnesses) (Note (4))	-	-	-	Additional 50,000/yr (for 5 Critical Illnesses) (Note (4))	-
Emergency overseas treatment	Covered under Inpatient and Day surgery limits	As Charged but limited to costs of ward class B1 in Singapore restructured hospitals	Reimburse Eligible Expenses incurred for overseas medical or surgical treatment subject to the applicable claim limits under AIA HealthShield Gold Max C. Benefit payable under Emergency Overseas (Outside Singapore) Medical Treatment Benefit limited to the level of reasonable and customary charges in a Singapore Private Hospital.	Reimburse Eligible Expenses incurred for overseas medical or surgical treatment subject to the applicable claim limits under AIA HealthShield Gold Max B Lite. Benefit payable under Emergency Overseas (Outside Singapore) Medical Treatment Benefit limited to the level of reasonable and customary charges in a Singapore Private Hospital.	Reimburse the actual Expenses incurred overseas or the Reasonable and Customary Charges applicable in a Class B1 ward of a Restructured Hospital, whichever is the lower, subject to the benefit limits of Supreme Health B.	As Charged (But limited to Singapore Restructured Hospitals, Class B1 Ward charges)	Reimburse the lower of Hospital expenses incurred up to the limits covered by PruShield B or the actual Reasonable and Customary Expenses	As Charged (pegged to costs of B1 ward of Singapore General Hospital)	As Charged (limited to Singapore Restructured Hospital Class B1 Ward charges)
Planned overseas treatment	-	-	-	-	-	-	-	As Charged (pegged to costs of B1 ward of Singapore General Hospital) (Note (5))	-
Inpatient and Outpatient Proton Beam Therapy Treatment	-	-	-	-	-	-	-	10,000 / yr	-

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Other Policy Features									
Proration factors for Private Hospital & Private Outpatient Clinics (Note (6)) (Please check with your insurer for more information on other applicable factors)	-	50%	-	Private Hospital - 50% Private Outpatient - 65% Private Day Surgery - 65%	80% (Note (7))	50% (Note (7))	-	35%	Raffles Hospital - 60% Private Hospitals (except Raffles Hospital) - 50%
Proration factors for Class A Wards	-	85%	-	80% (Note (7))	80% (Note (7))	80% (Note (7))	-	85%	80%
Proration factors for Non-Subsidised Short-Stay Ward / Day Surgery / Outpatient Treatment	-	-	-	-	80% (Note (7))	80% (Note (7))	-	85%	-
Deductibles (Per Policy Year) (Note (8))									
Class C	1,500	1,500	1,500	1,500	2,500	1,500	1,500	1,500	1,500
Class B2	2,000	2,000	2,000	2,000		2,000	2,000	2,000	2,000
Class B1	2,500	2,500	2,500	2,500		2,500	2,500	2,500	2,500
Class A and Private Hospital	2,500	2,500	2,500	3,500		3,500	3,500	3,500	3,500
Subsidised Day Surgery/ Short Stay Wards	2,000	2,000	2,000	2,000	2,500	Restructured hospital 1,500 (short stay) 2,000 (day surgery)	1,500	2,000 (day surgery) 2,000 (subsidised short stay ward) 3,500 (unsubsidised short stay ward)	2,000
Unsubsidised Day Surgery/ Short Stay Wards	2,500	2,500	2,000	2,000		Restructured hospital: 2,000 (short stay) 2,500 (day surgery) Private Hospital: 3,500 (short stay & day surgery)	2,000		3,000
Co-insurance	10%	10%	10%	10%	10%	10%	10%	10% (max \$25,500/yr)	10%
Policy Year Limit	150,000	250,000	150,000	300,000	180,000	500,000	120,000	300,000	300,000
Lifetime Limit	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Final Expense Benefit (Note (9))	3,000	3,000	2,500	2,500	3,600	3,600	3,000	10,000	3,000
Preventive treatment for cancer	-	-	-	-	-	-	-	As charged	-
Waiver of Premium upon Total Permanent Disability	-	-	Waives 1 yr premium for insured	Waives 1 yr premium for insured	-	-	-	-	In the event of Death/TPD of the parent (payor), premium will be waived for the Insured Child reaches until he/she reaches age 21.
Last Entry Age	75	75	75	75	75	75	75	75	75
Maximum Coverage Age	Lifetime	Lifetime	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 Class B1 wards in public hospitals.**

Age Next Birthday:	Income IncomeShield Plan B*		Income Enhanced IncomeShield Basic		AIA HealthShield Gold Max C*	AIA HealthShield Gold Max B Lite	Great Eastern Supreme Health B*	Great Eastern Supreme Health B Plus	Prudential PruShield B*	Aviva MyShield Plan 3	Raffles Health Insurance Raffles Shield B
	SC	PR	SC	PR	SC & PR	SC & PR	SC & PR	SC & PR	SC & PR	SC & PR	SC & PR
1 to 20	158-184	164-192	179-203	186-208	190	198	163-171	184-197	169	200	186
21 to 30	233	241	252	257	265	265	236	262	234	268	254
31 to 40	363-372	374-384	381-391	391-409	412	412	368	380	362	410	393
41 to 50	522-547	542-568	558-575	586-605	560	597-634	542	550	512	615 - 631	561
51 to 60	715-725	733-743	784-796	815-828	785-818	845-868	780	857	710-720	908 - 916	854-863
61 to 65	940	974	1,063	1,122	1,023	1,115	1,030	1,138	931	1,235	1,133
66 to 70	1,195	1,265	1,292	1,393	1,200	1,395	1,293	1,428	1,163	1,534	1,427
71 to 73	1,414	1,516	1,610	1,756	1,544	1,745	1,651	1,798	1,519	2,036	1,795
74 to 75	1,578	1,696	1,834	2,006	1,743	1,985	1,869	2,043	1,711	2,316	2,038
76 to 78	1,855	2,004	2,156	2,368	2,040	2,499	2,298	2,679	2,265	3,042	2,353
79 to 80	1,911	2,067	2,337	2,573	2,178	2,544	2,321	2,699	2,240	3,099	2,582
81 to 83	1,748	1,910	2,525	2,758	2,286	2,668	2,321	2,699	2,063	3,800	2,692
84 to 85	2,134	2,261	2,932	3,205	2,470	2,897	2,690	3,246	2,277	4,001	3,238
86 to 90	2,282	2,637-2,798	3,156-3,429	3,669-3,991	2,594	3,130-3,395	3,243-3,310	4,069-4,162	2,424	4,520 - 4,647	3,526-3,836
Premiums above age 90	2,645-3,447	3,060-4,006	3,838-4,925	4,469-5751	2,624-2,975	3,601-4,292	3,321-4,013	4,216-4,956	3,480-3,892	4,937 - 5,365	4,208-4,629

* 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 and emergency overseas treatment. Please check with your insurer for more information.

Note (2): (a) For GE plans, the living donor organ transplant applies for kidney, liver and pancreas transplants only. When 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.

(c) For Raffles Shield B, the recipient of the organ must be a family member (parents, siblings, spouse and children) of the Life Insured.

Note (3): Expenses incurred by the non-insured living donor shall only be reimbursed under the Living Donor Organ Transplant (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-

Note (4): Aviva and AIA's Critical Illness Benefit is provided over and above the Overall Policy Year Limit and the Overall Lifetime Limit.

Note (5): 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 (6): Treatment in the following private dialysis centres will not be pro-rated: National Kidney Foundation, Kidney Dialysis Foundation and People's Dialysis Centre.

Note (7): Pro-ration factor of 90% will apply to Singapore Permanent Residents for expenses incurred.

Note (8): (a) For GE's Supreme Health plan, the deductible applicable for policyholders after the age of 85 will be raised by \$1,000 of the above listed deductible.

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

(c) For Income's IncomeShield Plan B and Enhanced IncomeShield Basic, the deductible applicable for policyholders after the age of 80 is as follows: Class C - \$2,250, Class B2/B2+ - \$3,000, Class B1/A/pte hospital - \$3,750,

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

(e) For AIA HSG Max B Lite, the deductible applicable for Insured ages of 81 is as follows: Class C - \$1,500, Class B2 - \$2,250, Class B1 - \$3,000, Class A / Private - \$4,500

(f) For Raffles Shield B, the deductibles applicable for Insureds with Age Next Birthday of 81 and above will be 150% of the listed deductibles.

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.

The premiums payable are based on your age next birthday and may increase as you enter into the next age band

The annual Additional Withdrawal Limits for the Additional Private Insurance Premiums of Medisave-approved Integrated Shield Plan policies are:

(a) \$300 per policy year, where the insured person is aged 40 or less at his/her next birthday on date of policy commencement/renewal

(b) \$600 per policy year, where the insured person is aged between 41 to 70 years at his/her next birthday on date of policy commencement/renewal

(c) \$900 per policy year, where the insured person is aged 71 or more years at his/her next birthday on date of policy commencement/renewal