

**Integrated Shield Plans for Private Hospitals**

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**Integrated Shield Plans:** Integrated Shield Plans (IPs) comprise two components: (i) A MediShield Life component run by the Central Provident Fund Board (CPF Board) 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	Raffles Health Insurance Raffles Shield Private
<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	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	As Charged (up to 90 days for each admission)	As Charged	800/day	As Charged (up to 45 days)	As Charged (up to 45 days)	As Charged (up to 45 days)	
Confinement in Community Hospital	2,000/day (up to 45 days for each admission)							
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	8,000/yr (Includes post hospitalisation benefits)
<b>Outpatient Treatment:</b>								
Kidney Dialysis	3,500/mth	As Charged	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	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)  ** 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)	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)	As Charged (up to 180 days for treatment by Panel or Singapore Restructured Hospitals, 90 days otherwise)
Post-Hospitalisation Treatment (number of days indicate maximum number of days covered after discharge) (see Note (1))			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 (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 365 days)	As Charged (up to 365 days for treatment by Panel or Singapore Restructured Hospitals, 180 days otherwise)
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)	As Charged (for selected organs)

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<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	60,000 / transplant
Living Donor Organ Transplant (Non-insured donating an organ to Insured) (Note (4))	-			60,000 / transplant		-		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	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)	As Charged (with 24 mths waiting period)
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)	As Charged (limited to Singapore Private Hospital charges)
Planned overseas treatment	-	-	-	-	-	As Charged (pegged to costs of Mount Elizabeth Orchard Hospital) (Note (6))	-	-
Inpatient and Outpatient Proton Beam Therapy Treatment	-	-	-	-	-	25,000/yr	-	-

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<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	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	3,500	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	3,000 (day surgery) 2,000 (subsidised short stay ward) 3,500 (unsubsidised short stay ward)	3,000	2,000
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			3,000
<b>Co-insurance</b>	10%	10%	10%	10%	10%	10% (max \$25,500/yr)	10%	10%
<b>Policy Year Limit</b>	300,000	1,000,000	600,000  If admitted to / treated by AIA Preferred Providers: 2,000,000  [Notes (2) and (5)]	1,500,000	1,200,000	1,000,000 (Note (8))	1,000,000	Raffles Hospital or Government Restructured Hospital: 1,500,000 Other Private Hospitals: 600,000
<b>Lifetime Limit</b>	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Final Expense Benefit (Note (9))	5,000	5,000	5,000	7,000	5,000	10,000	-	5,000
Free new-born benefit (Note (10))	-	-	-	-	-	50,000/yr	-	-
Preventive treatment for cancer	-	-	-	-	-	As charged	-	-
Waiver of Premium upon Total Permanent Disability	-	-	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.
<b>Last Entry Age</b>	75	75	75	75	75	75	75	75
<b>Maximum Coverage Age</b>	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 private hospitals.**

Integrated Shield Plan Premiums for Singapore Citizen (SC) and Permanent Resident (PR) Policyholder (Rounded to nearest \$)								
Age Next Birthday:	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	Raffles Health Insurance Raffles Shield Private
	SC & PR							
1 to 20	261-309	335-382	300	294-321	293-320	322	278	324
21 to 30	358	450	369-416	417	370-400	427	368	413-416
31 to 40	542-553	685-702	596-609	570	600-610	719	593	649-652
41 to 50	762-817	1,083-1,201	1,153-1,210	894	1,011-1,035	1,149 - 1,359	919-1,035	972-1,067
51 to 60	1,113-1,142	1,518-1,792	1,691-1,985	1,382-1,508	1,500-1,789	1,796 - 2,113	1,448-1,628	1,578-1,687
61 to 65	1,637	2,347	2,649	1,874	2,265-2,275	2,712	2,068	2,292
66 to 70	2,109	3,065	3,487	2,639	2,940-3112	3,589	2,700	3,048
71 to 73	2,780	3,998	4,433	3,447	3,700-3,848	4,635	3,337	3,729
74 to 75	3,205	4,528	4,906	3,744	4,115-4,427	5,376	3,890	4,319
76 to 78	3,765	5,124	6,503	4,602	4,738-5,279	6,027	4,618	5,110
79 to 80	4,134	5,681	7,166	4,924	5,508-5,889	6,721	5,081	5,927
81 to 83	3,972	5,976	7,619	5,237	6,269-7107	7,780	5,627	6,535
84 to 85	4,566	6,700	7,863	6,176	7,564-7,825	8,579	6,329	7,938
86 to 90	5,152-5,482	7,390-7,955	7,997-8,062	6,848-7,139	8,086-9,018	9,236 - 9,495	6,989-7,648	8,566-9,029
Premiums above age 90	5,842-7,307	8,144-9,819	8,420-9,349	7,274-9,360	9,095-9,950	9,761 - 10,627	9,013-11,395	9,142-11,048

\* 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

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

(c) For Raffles Shield Private, the recipient of the organ must be a family

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

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

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 -

(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.

(f) For Raffles Shield Private, the deductibles applicable for Insureds with Age Next Birthday of 81 and above 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,

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