

**Integrated Shield Plans for Ward Class A in Public 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. The listed features are also non-exhaustive, you are strongly advised to refer to the policy document for the full list of features.

**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 Class A wards in public hospitals.** A dash for IPs indicates that there is no private insurance coverage for the particular benefit and patient will only be covered by MediShield Life where applicable. If the IP claim limit is lower than the MediShield Life claim limit, the MediShield Life claim limit will apply.

**Comparison of Private Integrated Shield Plans for Class A in Public Hospitals**

Benefits	[Income] IncomeShield Plan A*	[Income] Enhanced IncomeShield Advantage	[AIA] HealthShield Gold Max B	[Great Eastern] GREAT SupremeHealth A PLUS	[Prudential] PRUShield A*	[Prudential] PRUShield Plus	[Singlife] Singlife Shield Plan 2	[HSBC Life] HSBC Life Shield Plan B	[Raffles Health Insurance] Raffles Shield A
<b>Inpatient and Day Surgery:</b>									
Daily Ward and Treatment Charges									
- Normal Ward	1,200/day	As Charged	As Charged	As Charged	900/day	As Charged	As Charged	As Charged	As Charged
- Intensive Care Unit Ward	1,700/day				1,400/day				
- Psychiatric	7,000/yr	7,000/yr	4,000/yr (Additional post-hospitalisation psychiatric treatment of 2,500/yr within 200 days after Confinement)	22,000/yr (Including pre & post hospitalisation benefits)	-	7,000/yr (including pre & post hospitalisation benefits)	(i) As Charged (up to 45 days) [with 10 mth waiting period] (ii) \$500/day (up to 35 days) [without waiting period]	Up to \$4,000, capped at 60 days per policy year (Additional Post-Hospitalisation Psychiatric Treatment of \$2,500 per policy year, within 200 days after Hospital discharge)	6,000/yr (Includes post hospitalisation psychiatric treatment up to 90 days)
- Community Hospital	1,200/day (up to 45 days for each admission)	As Charged (up to 90 days for each admission)	As Charged	Sub-acute Care: 1,100/day Rehabilitation Care: 780/day	900/day	As Charged	As Charged	As Charged (up to 45 days)	As Charged (up to 45 days)
- Inpatient Palliative Care	-	As Charged	As Charged	780/day	-	-	As Charged	As Charged	-
Surgical Procedures	600 - 9,400	As Charged	As Charged	As Charged	800 - 10,000	As Charged	As Charged	As Charged	As Charged
Implants	11,000/admission				10,000/treatment				
Radiosurgery	12,600/treatment course				16,000/treatment				
Continuation of Autologous Bone Marrow Transplant Treatment for Multiple Myeloma [Note (13)]	-	25,000/yr	As Charged	25,000/yr	-	25,000/yr	As Charged	As Charged	-
<b>Outpatient Treatment:</b>									
Chemotherapy for Cancer	3,500/mth	As Charged	As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 36,000/yr. Pro-ration only apply for charges above 36,000 /yr.	As Charged	42,000/year	As Charged	As Charged	As Charged	As Charged
<b>Radiotherapy for Cancer</b>									
- External (Except Hemi-Body)	400/session	As Charged	As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 500/session. Pro-ration only apply for charges above 500/session.	As Charged	600/day	As Charged	As Charged	As Charged	As Charged
- Brachytherapy	500/session				600/day				
- Hemi-Body	-				-				
- Stereotactic	3,000/session		As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 4,000/session. Pro-ration only apply for charges above 4,000 /session.		3,500/treatment				
Immunotherapy	1,000/mth	As Charged	As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 24,000/yr. Pro-ration only apply for charges above 24,000 /yr.	As Charged	15,000/year	As Charged	As Charged	As Charged	As Charged
Kidney Dialysis	3,000/mth	As Charged (Pro-ration factor waived for applicable treatment by preferred partners) (Note (11))	As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 36,000/yr. Pro-ration only apply for charges above 36,000 /yr.	As Charged	36,000/yr	As Charged	As Charged	As Charged	As Charged
Immunosuppressants for Organ Transplants	700/mth	As Charged	As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 7,200/year. Pro-ration only apply for charges above 7,200/year.	As Charged	7,200/year	As Charged	As Charged	As Charged	As Charged
Erythropoietin for Chronic Kidney Failure	700/mth	As Charged	As Charged in Restructured Hospitals. For charges incurred in private hospital, as-charged up to 7,200/year. Pro-ration only apply for charges above 7,200/year.	As Charged	7,200/year	As Charged	As Charged	As Charged	As Charged
Long-Term Parenteral Nutrition	-	As Charged	As Charged	As Charged	-	As Charged	As Charged	As Charged	-

**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 Class A wards in public hospitals.** A dash for IPs indicates that there is no private insurance coverage for the particular benefit and patient will only be covered by MediShield Life where applicable. If the IP claim limit is lower than the MediShield Life claim limit, the MediShield Life claim limit will apply.

**Comparison of Private Integrated Shield Plans for Class A in Public Hospitals**

Benefits	[Income] IncomeShield Plan A*	[Income] Enhanced IncomeShield Advantage	[AIA] HealthShield Gold Max B	[Great Eastern] GREAT SupremeHealth A PLUS	[Prudential] PRUShield A*	[Prudential] PRUShield Plus	[Singlife] Singlife Shield Plan 2	[HSBC Life] HSBC Life Shield Plan B	[Raffles Health Insurance] Raffles Shield A
<b>Additional Benefits Limits:</b>									
Pre-Hospitalisation Treatment (number of days indicate maximum number of days covered prior admission) (Note (1))	Limited to unused balance amount** of daily ward and treatment charges and 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 100 days)	As Charged (Up to 180 days)	As Charged (Up to 120 days)	-	As Charged (Up to 180 days)	(i) As Charged (Up to 90 days) [for Panel specialist in a private hospital (without certificate of pre-authorisation), Extended Panel specialist in a private hospital, or non-panel specialist in a private hospital]  (ii) As Charged (Up to 180 days) [for Panel specialist in a private hospital (with certificate of pre-authorisation), restructured hospital, community hospital, MOH-approved Inpatient Hospice Palliative Care Service provider, A&E]	As Charged (Up to 180 days)	As Charged (up to 180 days for treatment by Panel, Extended Panel specialist or Singapore Restructured Hospitals, 90 days otherwise)
Post-Hospitalisation Treatment (number of days indicate maximum number of days covered after discharge) (Note (1))		As Charged (Up to 100 days)	As Charged (Up to 180 days, with additional 100 days for 30 critical illnesses)	(i) As Charged Up to 180 days for non-Panel Specialists  (ii) As Charged Up to 365 days for Panel Specialists (both Extended & Main Panel) or Restructured Hospital	-	As Charged (Up to 365 days)	(i) As Charged (Up to 180 days) [for Panel specialist in a private hospital (without certificate of pre-authorisation), Extended Panel specialist in a private hospital, or non-panel specialist in a private hospital]  (ii) As Charged (Up to 365 days) [for Panel specialist in a private hospital (with certificate of pre-authorisation), restructured hospital, community hospital, MOH-approved Inpatient Hospice Palliative Care Service provider, A&E]	As Charged (Up to 365 days)	As Charged (up to 365 days for treatment by Panel, Extended Panel specialist or Singapore Restructured Hospitals, 180 days otherwise)
Other Post-Hospitalization Treatment (number of days indicate maximum number of days covered after discharge)	-	-	-	Speech Therapy, Occupational Therapy, Physical Therapy: 1800/yr; 120/session (Up to 180 days)	-	Hyperbaric Oxygen Therapy: 5000/yr (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)	As Charged
Living Donor Organ Transplant, coverage for insured donor (after 24 mths waiting period) (Note (2))	-	40,000/transplant	40,000/transplant	40,000 / transplant	-	40,000/yr	30,000/lifetime	\$40,000/transplant	40,000/transplant
Living Donor Organ Transplant, coverage for non-insured donor	-	-	40,000/transplant (Note (3))	40,000 / transplant	-	40,000/yr (Note (3))	-		40,000/transplant (Note (3))
Pregnancy and Delivery-Related Complications Benefit (after 10 months waiting period) (for selected conditions only - please check with your insurer for further details)	5,000/yr	As Charged	As Charged	As Charged	-	As Charged	As Charged	As Charged	As Charged
Congenital Abnormalities Benefit of Insured	7,500/yr (with 24 mths waiting period)	As Charged (with 12 mths waiting period)		(i) 15,000/yr (Within 730 days of last policy effective date) (ii) As Charged (After 730 days from last policy effective date)	-	15,000/yr (If diagnosed or symptoms first appear within 24 months)  As Charged (If diagnosed or symptoms first appear after 24 months)	As Charged (with 12 mths waiting period)	As Charged (after a waiting period of 365 days)	As Charged (with 24 mths waiting period)
Congenital Abnormalities Benefit of Insured's Biological Child	-	-	[Only for insured female] 16,000 / lifetime Limited to 4,000/child [with 10 month waiting period]	16,000 / lifetime Limited to 4,000 / child [with 300 days waiting period]	-	[Only for insured female] 16,000 / lifetime Limited to 4,000 / child [with 10 months waiting period]	-	-	-
Prosthesis Benefit	6,000/yr	6,000/yr	-	-	-	-	-	-	-
Critical Illnesses	-	-	Additional 75,000 policy yr limit (for 30 Critical Illnesses) (Note (4))	-	-	-	Additional 100,000/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 A in Singapore restructured hospitals	Reimburse the Eligible Expenses incurred for overseas medical or surgical treatment subject to the Hospitalisation and Surgical Benefits Limits of Compensation applicable under AIA HealthShield Gold Max B. Benefit payable shall be limited to the level of Reasonable and Customary charges in a Singapore Private Hospital	As Charged (But limited to Singapore Restructured Hospitals, Class A Ward charges)	Reimburse the lower of Hospital expenses incurred up to the limits covered by PRUShield A or the actual Reasonable and Customary Expenses	As Charged (paying the lower of: - the overseas charges; or - in accordance with a Singapore Restructured Hospital's charges)	As Charged (pegged to costs of restructured hospitals in Singapore)	As Charged (pegged to Reasonable and Customary charges of Singapore Restructured Hospitals)	As Charged (limited to Singapore Restructured Hospital Class A Ward charges)
Planned overseas treatment	-	-	As Charged (pegged to costs of restructured hospitals in Singapore) (Note (5))	-	-	-	As Charged (pegged to costs of restructured hospitals in Singapore) (Note (5))	-	-
Proton Beam Therapy Treatment	-	100,000/yr	100,000/yr	40,000/yr	-	50,000/yr	70,000/yr	50,000/yr	-
Cell, Tissue and Gene Therapy	-	250,000/yr	250,000/yr	150,000/yr	-	75,000/yr	150,000/yr	100,000/yr	-
Final Expense Benefit (Note (9))	5,000	5,000	3,500	6,000	5,000	3,000	10,000	-	4,000
Free new-born benefit (Note (10))	-	-	-	-	-	-	50,000 / yr	-	-
Waiver of Premium upon Total Permanent Disability	-	-	Waives 1 year premium for insured	-	-	-	-	-	In the event of Death/TPD of the parent (payor), premium will be waived for the Insured until he/she reaches age 21.

**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 Class A wards in public hospitals.** A dash for IPs indicates that there is no private insurance coverage for the particular benefit and patient will only be covered by MediShield Life where applicable. If the IP claim limit is lower than the MediShield Life claim limit, the MediShield Life claim limit will apply.

**Comparison of Private Integrated Shield Plans for Class A in Public Hospitals**

Benefits	[Income] IncomeShield Plan A*	[Income] Enhanced IncomeShield Advantage	[AIA] HealthShield Gold Max B	[Great Eastern] GREAT SupremeHealth A PLUS	[Prudential] PRUShield A*	[Prudential] PRUShield Plus	[Singlife] Singlife Shield Plan 2	[HSBC Life] HSBC Life Shield Plan B	[Raffles Health Insurance] Raffles Shield A
<b>Other Policy Features</b>									
Proration factors (Pls check with your insurer for more information on other applicable factors)	-	Private Hospitals - 65%	Private Hospitals - 70%	Private Hospitals - 70%	-	Private Hospitals - 65%	Private hospitals/ Hospitals outside Singapore - 50%	Private Hospitals - 70%	Raffles Hospital - 70% Private Hospitals (except Raffles Hospital) - 60%
Proration factors for Private Outpatient Clinics (Note (6))	-	65%	70% (Note (7))	70%	-	65%	50%	70%	
<b>Deductibles (Per Policy Year) (Note (8))</b>									
Class C	1,500	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	2,000
Class B1	2,500	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	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	1,500	1,500	3,000	2,000
Unsubsidised Day Surgery/ Short Stay Wards	3,500	3,500	2,000	Restructured hospital: 2,000 (short stay) 2,500 (day surgery) Private Hospital: 3,500 (short stay and day surgery)	2,000	2,000	2,000		3,000
<b>Co-insurance</b>	10%	10%	10%	10%	10%	10%	10% (max \$25,500/yr)	10%	10%
<b>Policy Year Limit</b>	200,000	500,000	1,000,000	1,000,000	150,000	600,000 (Note (12))	1,000,000	550,000	600,000
<b>Lifetime Limit</b>	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
<b>Last Entry Age</b>	75	75	75	75	75	75	75	75	75
<b>Maximum Coverage Age</b>	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 A in public hospitals.**

Integrated Shield Plan Premiums for Singapore Citizen (SC) and Permanent Resident (PR) Policyholder (Rounded to nearest \$, inclusive of 8% GST)										
	[Income] IncomeShield Plan A*	[Income] Enhanced IncomeShield Advantage	[AIA] HealthShield Gold Max B	[Great Eastern] GREAT SupremeHealth A PLUS	[Prudential] PRUShield A*	[Prudential] PRUShield Plus	[Singlife] Singlife Shield Plan 2	[HSBC Life] HSBC Life Shield Plan B	[Raffles Health Insurance] Raffles Shield A	
Age Next Birthday:	SC & PR									
1 to 20	197 - 214	176 - 191	249	217 - 230	214	214 - 221	233	225	220 - 225	
21 to 30	302	297	362	336 - 355	320	311	352	343	342	
31 to 40	468 - 474	477 - 501	563	501 - 530	485	480 - 507	563	551	507 - 521	
41 to 50	686 - 698	733 - 744	861	727 - 774	699	678 - 713	845 - 873	761 - 845	749 - 753	
51 to 60	1,041 - 1,058	1,144 - 1,180	1,272 - 1,313	1,097 - 1,330	1,060 - 1,074	1,035 - 1,066	1,280 - 1,306	1,222 - 1,280	1,160 - 1,186	
61 to 65	1,434	1,624	1,766	1,590 - 1,836	1,506	1,374 - 1,459	1,810	1,703	1,640	
66 to 70	1,759	2,021	2,487	2,010 - 2,436	1,910	1,806 - 1,892	2,341	2,066	2,065	
71 to 73	2,130	2,504	3,110	2,655 - 2,851	2,499	2,301	3,029	2,496	2,608	
74 to 75	2,436	2,876	3,390	3,086 - 3,202	2,850	2,595 - 2,763	3,459	2,907	3,013	
76 to 78	2,900	3,424	4,473	3,537 - 3,807	3,780	3,263 - 3,551	4,306	3,308	3,488	
79 to 80	3,158	3,784	4,546	4,018 - 4,183	3,754	3,640	4,601	3,580	3,979	
81 to 83	3,113	3,944	4,687	4,358 - 4,548	3,588	3,938	5,449	3,904	4,282	
84 to 85	3,666	4,526	5,026	4,909 - 5,012	4,149	4,561	5,774	4,430	4,830	
86 to 90	4,156 - 4,435	4,906 - 5,211	5,219 - 5,392	5,210 - 5,676	4,429	4,842	6,591 - 6,701	4,819 - 5,151	5,312 - 5,527	
Premiums above age 90	4,787 - 5,846	5,579 - 7,086	5,706 - 6,791	5,833 - 7,192	6,128 - 6,790	4,967 - 5,865	6,775 - 7,139	6,561 - 6,962	5,829 - 6,738	

\* 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 treatment and free new-born benefit. Please check with you insurer for more information.

Note (2):

- (a) For Great Eastern 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 Singlife 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 A, 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 if 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 (4): AIA's and Singlife'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): The pro-ration will only apply after the specified amount for each outpatient treatment is exceeded.

Note (8):

- (a) For Great Eastern's SupremeHealth A Plus plan, the deductible applicable for policyholders after the age of 85 will be raised by \$1,000 of the above listed deductible.
- (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 Private hospital - \$4,500, Day Surgery and Short-Stay Ward - \$3,000
- (c) For Prudential PRUShield Plus, the deductible applicable for policyholders after the age of 85 will be 150% of the above listed deductible.
- (d) For Income's IncomeShield Plan A and Enhanced IncomeShield Advantage, 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
- (e) For HSBC Life's HSBC Life Shield Plan, the deductible applicable for policyholders after the age of 80 will be 150% of the listed deductibles.
- (f) For Singlife's Singlife Shield Plan 2, the deductible applicable for policyholders after the age of 80 will be 150% of the listed deductibles, except for Short-stay Ward or Day Surgery. The deductible applicable for policyholders after the age of 80 will be \$3,000 for Subsidised Short-stay Ward or Day Surgery and \$4,500 for Unsubsidised Short-stay Ward or Day Surgery respectively.
- (g) For Raffles Shield A, 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.

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.

Note (11): Panel or preferred partner means a registered medical practitioner, specialist, hospital or medical institution approved by us. The lists of approved panels and preferred partners, which we may update from time to time, can be found at [www.income.com.sg/specialist-panel](http://www.income.com.sg/specialist-panel). Our list of approved panels also includes all restructured hospitals, community hospitals and voluntary welfare organisations (VWO) dialysis centres.

Note (12): If life assured has exceeded the Policy Year Limit and is hospitalised subsequently for a different medical condition within the same Policy Year, the Policy Year Limit and any inpatient benefit sub-limits (if applicable) will be refreshed for that Policy Year. The Policy Year Limit will be refreshed only once in the same Policy Year.

Note (13): For the avoidance of doubt, *Continuation of Autologous Bone Marrow Transplant Treatment for Multiple Myeloma* will only be claimable for treatment received in the outpatient setting. Treatment received in the inpatient setting will be covered under the prevailing inpatient limits. For Great Eastern plans, all other costs arising from or in relation or incidental to the outpatient autologous marrow transplant including costs of harvesting and laboratory tests, investigations, storage, transportation and cell culture will not be covered.

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