



# PRODUCT SUMMARY

Date:  /  /  (DD/MM/YY)

Presented to:  Name of Financial Adviser Representative:   
 (Name of Proposer)

Signature of Proposer:  Signature of Financial Adviser Representative:

'You/ Your' means the owner of the policy who is named as the assured in the policy schedule. 'Life assured' means the person named as the life assured in the policy schedule. 'We/ Us/ Our' means Aviva Ltd.

**Warning:**  
 Anyone who pays for, or is insured under MyHealthPlus is not eligible for Additional Premium Support (APS) from the Government.\*  
 If you are currently receiving APS to pay for your MediShield Life and/or CareShield Life premiums, and you choose to be insured under this MyHealthPlus policy, you will stop receiving APS. This applies even if you are not the person paying for this MyHealthPlus policy.  
 In addition, if you choose to be insured under this MyHealthPlus policy, the person paying for MyHealthPlus will stop receiving APS, if he or she is currently receiving APS.  
 \* APS is for families who need assistance with MediShield Life and/or CareShield Life premiums, even after receiving premium subsidies and making use of MediSave to pay for these premiums.

## PRODUCT INFORMATION

MyHealthPlus is a rider to MyShield that provides complementary protection on top of what MyShield covers, specifically to meet your needs to reduce the uncertainty of out-of-pocket expenses in your MyShield policy.

All benefits only pay reimbursement for reasonable expenses for necessary medical treatment received by the life assured due to illness or injury and depend on the terms and conditions in your policy, the limits shown in the benefits schedule and the exclusions in your policy. Treatment must be provided by a hospital or licensed medical centre or clinic.

MyHealthPlus Benefits Schedule in SG Dollars				
	Attached to MyShield Plan 1	Attached to MyShield Plan 2	Attached to MyShield Plan 3	
Hospital ward type	Any standard ward of a private hospital	Any standard ward of a restructured hospital	Any 4-bed (B1) standard ward of a restructured hospital	
<b>MyHealthPlus Option A-II Benefits</b>				
MyHealthPlus Option A-II	(a) Co-insurance benefit	Covers 50% of MyShield co-insurance		
	(b) Maximum co-insurance (payable by policyholder)	S\$3,000 per policy year <sup>1</sup> (Panel specialist in a private hospital with certificate of pre-authorization, restructured hospital, community hospital, subsidised centre for kidney dialysis, panel private dialysis centres or panel overseas hospital)		
	(c) Critical illness-related benefits			
	(i) Critical illness benefit <sup>2</sup>	S\$10,000 per lifetime (only applies if the life assured has crossed his first birthday and is not older than 65 years old age next birthday)		
	(ii) Additional critical illness benefit for kidney failure <sup>3</sup> if kidney dialysis is received at:			
	Panel private dialysis centre <sup>4</sup>	S\$1,000 per lifetime	N.A.	
	Restructured hospital	S\$3,000 per lifetime	S\$2,000 per lifetime	
Subsidised centre <sup>4</sup>				

**MyHealthPlus Benefits Schedule in SG Dollars (continued)**

		Attached to MyShield Plan 1	Attached to MyShield Plan 2	Attached to MyShield Plan 3
Hospital ward type		Any standard ward of a private hospital	Any standard ward of a restructured hospital	Any 4-bed (B1) standard ward of a restructured hospital
<b>MyHealthPlus Option A-II Benefits (continued)</b>				
<b>MyHealthPlus Option A-II</b>	(d) Hospital-related benefits			
	(i) Ward downgrade benefit	Covers 50% of MyShield annual deductible		
	(ii) Ambulance fees or transport to hospital <sup>5</sup>	S\$80 per injury or illness		
	(iii) Accommodation charges for parent / guardian of child life assured <sup>6</sup>	S\$80 per day up to 10 days	S\$65 per day up to 10 days	S\$50 per day up to 5 days
	(iv) Post-hospital follow-up TCM treatment <sup>7</sup>	S\$50 per visit up to 180 days after discharge (for inpatient admission due to an accident)		
	(e) Free cover for child(ren) <sup>8</sup>	Yes		N.A.
	(f) Accidental cover for child benefit <sup>9</sup>	S\$1,000 per lifetime		
	(g) Global treatment for six covered illnesses and medical procedures <sup>10</sup> : – cancer treatment – coronary artery by-pass surgery – heart valve replacement or repair – inter-cranial and specific spinal cord surgery – live-donor organ transplant – bone marrow transplant	S\$1,250,000 per policy year and S\$2,500,000 per lifetime (Panel overseas hospital with certificate of pre-authorisation)  MyShield annual deductible and MyShield co-insurance applies	N.A.	
<b>MyHealthPlus Option C-II Benefits</b>				
<b>MyHealthPlus Option C-II</b>	(a) All benefits under MyHealthPlus Option A-II according to the life assured's plan excluding free cover for child(ren) and ward downgrade benefit	Covered		
	(b) Preferred rate for child(ren) <sup>11</sup>	Yes		N.A.
	(c) Deductible benefit	Covers MyShield annual deductible after policyholder pays MyHealthPlus annual deductible		
<b>MyHealthPlus annual deductible</b>				
<b>Inpatient</b>				
Class C ward		S\$120		
Class B2 / B2+ ward		S\$150		
Class B1 ward		S\$200		
Class A ward		S\$300		
Subsidised short stay ward		S\$150		
Unsubsidised short stay ward		S\$300		
Hospital outside Singapore				
Non-panel specialist in a private hospital		S\$1,000	S\$500	
Panel specialist in a private hospital / panel overseas hospital	with certificate of pre-authorisation	S\$500	S\$300	
	<i>without</i> certificate of pre-authorisation	S\$1,000	S\$500	
<b>Day Surgery</b>	Restructured hospital / Community hospital		S\$250	
	Hospital outside Singapore		S\$500	
	Non-panel specialist in a private hospital		S\$500	
	Panel specialist in a private hospital / panel overseas hospital	with certificate of pre-authorisation	S\$250	
		<i>without</i> certificate of pre-authorisation	S\$500	

**Footnotes**

- 1 The maximum co-insurance is accumulated across panel specialist in a private hospital with certificate of pre-authorisation, panel private dialysis centre, subsidised centre for kidney dialysis, panel overseas hospital, restructured hospital and community hospital and does not include the co-insurance accumulated under panel specialist in a private hospital without certificate of pre-authorisation.
- 2 If the critical illness diagnosed is Major Cancer, Coronary Artery By-pass Surgery, Angioplasty & Other Invasive Treatment for Coronary Artery, Other Serious Coronary Artery Disease and/or Heart Attack of Specified Severity, the critical illness benefit is payable only if diagnosis is made after a waiting period of 90 days from the cover start date or last reinstatement date, whichever is later.
- 3 Additional critical illness benefit for kidney failure will be covered based on the type of centre or hospital at which the life assured receives the dialysis.
- 4 The approved list of panel private kidney dialysis centres and subsidised centres can be found at [www.aviva.com.sg](http://www.aviva.com.sg).
- 5 We pay this benefit as long as the life assured is admitted as an inpatient within 24 hours of arrival at the hospital, for treatment of an illness or injury covered under MyShield.
- 6 Child life assured refers to the life assured who is below 19 years old at age next birthday.
- 7 TCM treatment includes the cost of consultation, acupuncture, scrapping, cupping and tui na, but not the cost of medication. The inpatient admission before the post-hospital follow-up TCM treatment must be the result of an accident. We will not pay for any post-hospital follow-up TCM treatment following an inpatient treatment in community hospital.
- 8 Based on benefits under Option A-II Plan 2, up to 20 years old at age next birthday, provided both parents are covered under either MyShield Plan 1 or Plan 2 and covered under either MyHealthPlus Option A or Option C or Option A-II or Option C-II, whichever is applicable.
- 9 We will pay this benefit in cash if the life assured (below 19 years old at the time of the accident) sustains a fracture to the skull, spine, pelvis, femur or hip as a result of an accident. We will only pay this benefit once during the lifetime of the life assured no matter how many fractures are sustained.
- 10 The 'Additional Terms and Conditions for Global Treatment Benefit' can be found at [www.aviva.com.sg](http://www.aviva.com.sg).
- 11 Child(ren) covered under Option C-II benefits will pay a preferred rate under Option C-II plan 2, up to 20 years old at age next birthday, provided both parents are covered under either MyShield plan 1 or plan 2 and covered under either MyHealthPlus Option A or Option C or Option A-II or Option C-II, whichever is applicable.

**PREMIUM RATES**

This policy is not a Medisave-approved policy and you may not use Medisave to pay the premium for this policy.

The premium payable is based on the life assured's age next birthday at the cover start date and will increase when he/she enters into the next age band. The plan chosen must be the same as MyShield and premium must be paid by cash. In the event that the life assured's plan is wrongly selected and found to be different from his MyShield plan, and the premium paid is insufficient, we will collect any shortfall in premium in cash or deduct the shortfall from any claim amount payable under your policy. Premium rates are not guaranteed and may increase at policy renewal at our full discretion.

**MyHealthPlus Option A-II – ANNUAL PREMIUM**

Annual Premium per person in Singapore Dollars (inclusive of 7% GST)							
Age Next Birthday	Plan 1	Plan 2	Plan 3	Age Next Birthday	Plan 1	Plan 2	Plan 3
1 to 20	84.00	46.00	31.00	76 to 78*	1,021.00	770.00	598.00
21 to 30	136.00	48.00	37.00	79 to 80*	1,055.00	786.00	610.00
31 to 40	155.00	61.00	43.00	81 to 83*	1,073.00	802.00	628.00
41 to 45	164.00	108.00	86.00	84 to 85*	1,090.00	810.00	641.00
46 to 50	179.00	123.00	106.00	86 to 88*	1,108.00	825.00	653.00
51 to 55	254.00	165.00	139.00	89 to 90*	1,177.00	848.00	659.00
56 to 60	410.00	275.00	236.00	91 to 93*	1,274.00	959.00	688.00
61 to 65	661.00	491.00	428.00	94 to 95*	1,511.00	1,186.00	786.00
66 to 70	891.00	670.00	521.00	96 to 98*	1,685.00	1,329.00	859.00
71 to 73	972.00	739.00	586.00	99 and up*	1,946.00	1,422.00	919.00
74 to 75	1,004.00	747.00	598.00				

\* for renewal only

**MyHealthPlus Option C-II – ANNUAL PREMIUM**

Annual Premium per person in Singapore Dollars (inclusive of 7% GST)							
Age Next Birthday	Plan 1	Plan 2	Plan 3	Age Next Birthday	Plan 1	Plan 2	Plan 3
Preferred Rates for Child(ren) 1 to 20	N.A.	168.00	N.A.	76 to 78*	3,481.00	1,751.00	1,338.00
1 to 20	584.00	214.00	176.00	79 to 80*	3,534.00	1,768.00	1,366.00
21 to 30	669.00	248.00	196.00	81 to 83*	3,725.00	1,785.00	1,393.00
31 to 40	765.00	264.00	211.00	84 to 85*	3,852.00	1,819.00	1,406.00
41 to 45	919.00	350.00	271.00	86 to 88*	3,980.00	1,846.00	1,433.00
46 to 50	980.00	382.00	313.00	89 to 90*	4,195.00	1,872.00	1,447.00
51 to 55	1,233.00	434.00	348.00	91 to 93*	4,476.00	2,038.00	1,623.00
56 to 60	1,796.00	581.00	450.00	94 to 95*	4,928.00	2,365.00	1,884.00
61 to 65	2,445.00	925.00	728.00	96 to 98*	5,299.00	2,689.00	2,143.00
66 to 70	3,005.00	1,376.00	1,105.00	99 and up*	5,808.00	2,885.00	2,299.00
71 to 73	3,344.00	1,585.00	1,297.00				
74 to 75	3,440.00	1,725.00	1,325.00				

\* for renewal only

**MyHealthPlus Option A-II – MONTHLY PREMIUM**

Monthly Premium per person in Singapore Dollars (inclusive of 7% GST)							
Age Next Birthday	Plan 1	Plan 2	Plan 3	Age Next Birthday	Plan 1	Plan 2	Plan 3
1 to 20	7.17	3.93	2.64	76 to 78*	87.09	65.68	51.01
21 to 30	11.60	4.10	3.16	79 to 80*	89.99	67.05	52.03
31 to 40	13.23	5.20	3.67	81 to 83*	91.53	68.41	53.56
41 to 45	13.98	9.21	7.34	84 to 85*	92.97	69.09	54.68
46 to 50	15.27	10.50	9.04	86 to 88*	94.51	70.37	55.70
51 to 55	21.67	14.07	11.86	89 to 90*	100.40	72.33	56.22
56 to 60	34.98	23.45	20.13	91 to 93*	108.67	81.80	58.69
61 to 65	56.38	41.88	36.51	94 to 95*	128.89	101.17	67.05
66 to 70	76.00	57.15	44.44	96 to 98*	143.73	113.37	73.27
71 to 73	82.91	63.03	49.99	99 and up*	165.99	121.30	78.39
74 to 75	85.64	63.72	51.01				

\* for renewal only

**MyHealthPlus Option C-II – MONTHLY PREMIUM**

Monthly Premium per person in Singapore Dollars (inclusive of 7% GST)							
Age Next Birthday	Plan 1	Plan 2	Plan 3	Age Next Birthday	Plan 1	Plan 2	Plan 3
Preferred Rates for Child(ren) 1 to 20	N.A.	14.33	N.A.	76 to 78*	296.93	149.36	114.14
1 to 20	49.82	18.25	15.01	79 to 80*	301.45	150.81	116.52
21 to 30	57.06	21.15	16.72	81 to 83*	317.75	152.26	118.82
31 to 40	65.26	22.52	18.00	84 to 85*	328.58	155.16	119.94
41 to 45	78.39	29.85	23.11	86 to 88*	339.49	157.46	122.24
46 to 50	83.60	32.58	26.70	89 to 90*	357.83	159.68	123.42
51 to 55	105.17	37.02	29.68	91 to 93*	381.81	173.84	138.44
56 to 60	153.20	49.56	38.38	94 to 95*	420.36	201.74	160.70
61 to 65	208.55	78.90	62.10	96 to 98*	452.00	229.38	182.80
66 to 70	256.33	117.37	94.26	99 and up*	495.42	246.09	196.11
71 to 73	285.24	135.21	110.64				
74 to 75	293.44	147.15	113.02				

\* for renewal only

The total distribution cost of this product is 20% to 41% of premiums for the first year and 2.5% to 5% of premiums for renewal years.

## ELIGIBILITY

To be eligible for MyHealthPlus, the life assured must be:

- 75 years old or below at age next birthday at the cover start date; and
- the life assured of a MyShield policy.

A new-born is eligible for cover 15 days after birth or after discharge from hospital, whichever is later.

## COVERAGE OPTIONS

Besides choosing the appropriate MyHealthPlus Plan based on the desired hospital/ ward type (the plan chosen **must be the same** as MyShield), you may also choose one of the following benefits for the life assured:

- (a) Option A-II only; or
- (b) Option C-II only

## KEY PRODUCT PROVISIONS

The following are some key provisions found in the policy contract of this plan. This is only a brief summary and you are advised to refer to the actual terms and conditions in the policy contract. Please consult your Financial Adviser Representative should you require further explanation.

### 1. Covered Benefits

Our liability is limited to the coverage as provided for in the policy contract.

#### Option A-II Benefits

##### (i) Co-insurance Benefit

We cover the co-insurance benefit which you have to pay in respect of a claim under your MyShield policy as long as:

- the claim is first payable under MyShield. We will not pay the co-insurance benefit if your claim is not payable under MyShield even if it is payable under Medishield Life; and
- the claim is less than or up to the maximum claim limits shown in the benefits schedule of your MyShield policy.

We will not pay the co-insurance amount on any excess above the maximum claim limits shown in the benefits schedule of your MyShield policy.

##### (ii) Maximum Co-insurance

The maximum co-insurance you have to pay is up to the maximum aggregate sum per policy year as shown in the benefits schedule.

##### (iii) Critical Illness-Related Benefits

###### (a) Critical Illness Benefit

To be eligible for the Critical Illness Benefit under this policy, the life assured must be aged between one year old and 65 years old at age next birthday. Any life assured below one year old will only be eligible for Critical Illness Benefit when he attains the age of one.

A lump sum benefit will be paid upon your first diagnosis of any one of the following 37 Critical Illnesses. The list of 37 Critical Illnesses includes:

- Major Cancer
- Heart Attack of Specified Severity
- Stroke with Permanent Neurological Deficit
- Coronary Artery By-pass Surgery
- End Stage Kidney Failure
- Irreversible Aplastic Anaemia
- End Stage Lung Disease
- End Stage Liver Failure
- Coma
- Deafness (Irreversible Loss of Hearing)
- Open Chest Heart Valve Surgery
- Irreversible Loss of Speech
- Major Burns
- Major Organ/Bone Marrow Transplantation
- Multiple Sclerosis
- Muscular Dystrophy
- Idiopathic Parkinson's Disease
- Open Chest Surgery to Aorta
- Alzheimer's Disease/Severe Dementia
- Fulminant Hepatitis
- Motor Neurone Disease
- Primary Pulmonary Hypertension
- HIV Due to Blood Transfusion and Occupationally Acquired HIV
- Benign Brain Tumour
- Severe Encephalitis
- Severe Bacterial Meningitis
- Angioplasty & Other Invasive Treatment For Coronary Artery\*
- Blindness (Irreversible Loss of Sight)
- Major Head Trauma
- Paralysis (Irreversible Loss of Use of Limbs)
- Terminal Illness
- Progressive Scleroderma
- Persistent Vegetative State (Apallic Syndrome)
- Systemic Lupus Erythematosus With Lupus Nephritis
- Other Serious Coronary Artery Disease
- Poliomyelitis
- Loss of Independent Existence

\* Benefit for Angioplasty & Other Invasive Treatment for Coronary Artery is limited to 10% of the amount for Critical Illness Benefit shown in the benefits schedule. This benefit is payable once only and shall be deducted from the Critical Illness Benefit, thereby reducing the remaining amount of the Critical Illness Benefit which may be payable herein.

If the critical illness diagnosed is:

- Major Cancer;
- Coronary Artery By-pass Surgery;
- Angioplasty & Other Invasive Treatment for Coronary Artery;
- Other Serious Coronary Artery Disease; and/or
- Heart Attack of Specified Severity;

the Critical Illness Benefit is payable only if diagnosis is made after a waiting period of 90 days from the cover start date or last reinstatement date, whichever is later.

The Critical Illness Benefit will be payable after the end of the period of 30 days from the date on which the life assured is diagnosed as suffering from a critical illness.

**(iii) Critical Illness-Related Benefits****(b) Additional Critical Illness Benefit for Kidney Failure**

If the life assured is diagnosed with kidney failure and requires kidney dialysis, we pay this benefit as shown in the benefits schedule as long as:

- the dialysis is ordered by the attending doctor;
- the life assured receives dialysis at a panel private dialysis centre, subsidised centre or restructured hospital; and
- we admit the outpatient kidney dialysis claim under MyHealthPlus.

This benefit will not be paid again if you have made a claim on this benefit and we have paid according to your plan as shown in the benefits schedule before your change of plan.

To avoid doubt, if you upgrade your plan, we will pay this benefit according to your plan before the upgrade.

**(iv) Hospital-Related Benefits**

We will pay the following hospital-related benefits up to the limits shown in the benefits schedule:

**(a) Ward Downgrade Benefit**

If the life assured is an inpatient at a Singapore restructured hospital, we pay this benefit as shown in the benefits schedule as long as:

- the admission as an inpatient is recommended by a doctor as necessary medical treatment; and
- the life assured stays in the following wards lower than his/her chosen plan:
  - For plan 1, any standard ward of a restructured hospital;
  - For plan 2, a 4 bed (B1) standard ward or below of a restructured hospital; or
  - For plan 3, a 6-bed (B2) standard ward or below of a restructured hospital.

We do not pay the ward downgrade benefit for day surgery, admission as an inpatient in a community hospital, admission as an inpatient in a private hospital, or if there is no hospital stay involved.

**(b) Ambulance Fees or Transport to Hospital**

One-way land transport for the life assured by either ambulance, taxi or private hire car to a hospital within Singapore. We pay this benefit as long as the life assured is admitted as an inpatient within 24 hours of arrival at the hospital, for treatment of an illness or injury covered under MyShield.

**(c) Accommodation Charges for Parent/Guardian of Child Life Assured**

If one parent or guardian is sharing the hospital room of a life assured who is below 19 years old at age next birthday, we will pay for the accommodation charges incurred by the parent or guardian provided the life assured is hospitalised for treatment of an illness or injury covered under the MyShield policy.

**(d) Post-Hospital Follow-up TCM Treatment**

As result of an accident, if the life assured is referred by the attending doctor from the hospital where the life assured received inpatient treatment, we will pay for the post-hospital follow-up TCM treatment by a registered TCM practitioner up to 180 days after hospital discharge. The TCM treatment must be for the same injury or illness for which the life assured was hospitalised and the injury or illness must be covered by your policy.

We will not pay for any post-hospital follow-up TCM treatment following an inpatient treatment in community hospital.

TCM treatment includes the cost of consultation, acupuncture, scrapping, cupping and tui na, but not the cost of medication.

TCM Practitioner means a person who is legally qualified to provide the prescribed practice of traditional Chinese medicine by the TCM Practitioners Board of Singapore.

**(v) Free Cover for Child(ren)**

Your dependant child who is eligible for family discount for child(ren) or free cover for child(ren) under MyShield, is also eligible for free cover under Option A-II plan 2 of MyHealthPlus until he reaches 20 years old at age next birthday if both parents are covered under either MyShield plan 1 or plan 2 and also covered under either MyHealthPlus:

- Option A or Option C; or
  - Option A-II or Option C-II;
- whichever is applicable.

The child enjoys the same benefits as provided for under Option A-II plan 2 of the benefits schedule.

If the child life assured ceases to enjoy family discount for child(ren) or free cover for child(ren) under MyShield, this benefit will also cease for the child life assured under your policy.

This benefit will continue even if one or both parents of the child life assured dies before this benefit ceases.

**(vi) Accidental Cover for Child Benefit**

If the life assured sustains a fracture to the skull, spine, pelvis, femur or hip as a result of an accident, we will pay this benefit in cash as long as:

- the life assured is below 19 years old at the time of the accident;
- the life assured is hospitalised due to the accident; and
- no prior claim under this benefit has been made.

We will only pay this benefit once during the lifetime of the life assured no matter how many fractures are sustained by the life assured.



**(vii) Global treatment for six covered illnesses and medical procedures**

We pay medical expenses for treatment at a panel overseas hospital up to limits shown in the benefits schedule if the life assured has obtained a certificate of pre-authorisation issued by us and requires treatment, that has been pre-approved by us, for any of the following six covered illnesses and medical procedures:

- Cancer treatment
- Coronary artery by-pass surgery
- Heart valve replacement or repair
- Inter-cranial and specific spinal cord surgery
- Live-donor organ Transplant
- Bone Marrow Transplant

Subject to your eligibility, we will arrange and pay for the following non-medical expenses during treatment abroad in accordance with our prevailing terms and conditions, and the details shown in the benefits schedule:

- expenses for travel and accommodation arranged and made by us for the life assured, the living donor (in the case of transplant) and the travelling companion (up to two companions when the child life assured is receiving treatment), if such expenses have been pre-approved by us and the life assured has obtained a certificate of pre-authorisation issued by us; and
- expenses for repatriation approved, arranged and made by us for the life assured and the living donor (in the case of transplant).

A daily payment of S\$125 to cover daily expenses incurred abroad will be payable for each day of hospitalisation up to 60 days per claim for treatment arranged by us.

The life assured will be entitled to request once, for a second medical opinion service to confirm the diagnosis of a covered illness and medical procedure and the assessment of the optimal treatment plan under this benefit.

We pay for pre-hospital treatment and post-hospital treatment in Singapore under your MyShield policy before and after inpatient global treatment respectively, and any associated consultation fees, examinations and laboratory tests under your MyShield policy before outpatient global treatment, if we pay your claim for global treatment.

We will apply MyShield annual deductible and MyShield co-insurance to the global treatment benefit. The deductible benefit and co-insurance benefit payable will be aggregated to the global treatment benefit limits shown in the benefits schedule.

We will pay this benefit only if residency of the life assured is Singapore on the date of the life assured's admission.

Details on this benefit and treatment arrangements can be found at [www.aviva.com.sg](http://www.aviva.com.sg). You are advised to download and keep a copy for your reference. We may update the details on the website from time to time, you should check the website regularly for the prevailing details.

**Option C-II Benefits**

Option C-II benefits include the following:

**(i) Option A-II Benefits (excluding free cover for child(ren) and ward downgrade benefit)**

All benefits under Option A-II according to the life assured's plan excluding free cover for child(ren) and ward downgrade benefit.

**(ii) Preferred Rate for Child(ren)**

Your dependant child who is eligible for family discount for child(ren) or free cover for child(ren) under MyShield, is also eligible for Preferred Rate for Child(ren) under Option C-II plan 2 of MyHealthPlus until he reaches 20 years old at age next birthday if both parents are covered under either MyShield plan 1 or plan 2 and also covered under either MyHealthPlus:

- Option A or Option C; or
  - Option A-II or Option C-II;
- whichever is applicable.

If the child life assured ceases to enjoy family discount for child(ren) or free cover for child(ren) under MyShield, this benefit will also cease for the child life assured under your policy.

This benefit will continue even if one or both parents of the child life assured dies before this benefit ceases.

**(iii) Deductible Benefit**

We will cover your MyShield annual deductible which you have to pay in respect of a covered claim under your MyShield policy, after you pay MyHealthPlus annual deductible.

**2. Renewal**

MyHealthPlus is guaranteed renewable for a further period of 12 months by payment of the renewal premium before the renewal date.

**3. Change of Policy Terms or Conditions**

We may change the benefits, cover, premiums or terms and conditions of your policy (as long as the changes apply to all policies of the same class). We will give you at least 30 days' written notice before we do so. However, such notice shall be waived and we may change the benefits, cover, premiums or terms and conditions of the policy with immediate effect without giving you notice if such changes are required by any law, regulation, governmental notices, policies or other statutory requirements.

**4. When Your Policy Ends**

Your policy automatically ends on the date:

- the life assured dies;
  - we receive your written notice requesting cancellation of your policy;
  - we do not receive your premium after the grace period;
  - you fail or refuse to refund any amount you owe us, of which the date will be determined by us;
  - fraud takes place;
  - you do not reveal information or misrepresent to us;
  - you or the life assured does not fulfil the eligibility requirements; or
  - when your MyShield plan ends;
- whichever is earlier.

The Critical Illness Benefit for a life assured will automatically end on the date:

- you make a valid critical illness benefit claim for the life assured and we have paid 100% of the limits shown in the benefits schedule; or
  - the policy year in which the life assured reaches 65 years old;
- whichever is earlier.

## KEY PRODUCT PROVISIONS (continued)

### 5. Cancel Your Policy

You may cancel MyHealthPlus by giving us 30 days' notice in writing. If you cancel MyHealthPlus only, your cancellation of this policy will not affect the validity of MyShield.

Where premium is charged on an annual basis, we will refund you the pro-rated premium based on the number of unused days in the policy year. However, if a claim has been made in that policy year, no premium will be refunded.

Where premium is charged on a non-annual basis, we are entitled to the balance of premium payable for the entire policy year if you make a claim. We will deduct the balance of premium from any claim payable under your policy.

### 6. Underwriting Method

The same method of underwriting MyShield will apply to your MyHealthPlus unless there is new medical declaration which will be subjected to full medical underwriting.

### 7. Claims

Any benefits payable under the policy are made to you, your legal representative, the hospital or such other authorised parties (as the case may be). We will not make any payment in respect of any claim incurred unless full premium has been received by us.

Please contact your Financial Adviser Representative or visit the FAQs section in [www.aviva.com.sg/myshield](http://www.aviva.com.sg/myshield) for claim procedures.

### 8. Other Insurance

If you or the life assured have other medical insurance policies (including medical benefits under any employment contract) which allows you or them to claim a refund for medical expenses, you or the life assured, must advise us of the details of such other policies.

### 9. What Your Policy Does Not Cover

There are certain conditions under which no benefit will be payable. In addition to the exclusions defined under MyShield policy, the following are not covered under MyHealthPlus. The list is not exhaustive. You are advised to read the MyShield and MyHealthPlus policy contracts for the precise terms and conditions of the exclusions.

- a all pre-existing conditions unless:
  - (i) you have declared the pre-existing condition and it has been accepted by us in writing; or
  - (ii) your policy is under the moratorium underwriting option, during the moratorium of 5 years from the cover start date; the date of upgrade; or the last reinstatement date; whichever is later, the life assured is continuously covered under your policy and has not, in relation to a pre-existing condition:
    - experienced any symptom;
    - sought advice, tests or check-ups from a doctor, specialist or alternative medicine provider;
    - required any treatment or medication; or
    - received any treatment or medication.We will then cover such pre-existing condition after the moratorium. We will exclude the pre-existing condition permanently from your policy if the life assured does not meet any of the above requirements during the moratorium; and
- b all costs arising from admission to a hospital before the cover start date.

### Note

The above is merely a summary of the plan offered. The precise terms and conditions of the plan are set out in the policy contract.

You may wish to seek advice from a Financial Adviser Representative before making a commitment to purchase the plan. In the event that you choose not to seek advice from a Financial Adviser Representative, You should consider whether the plan in question is suitable for you. Buying a health insurance policy that is not suitable for you may impact your ability to finance your future healthcare needs.

### Policy Owners' Protection Scheme

Your policy is protected under the Policy Owners' Protection Scheme, and is administered by the Singapore Deposit Insurance Corporation (SDIC). Cover for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of cover, where applicable, please contact us or visit the LIA or SDIC websites ([www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

**Note: This is only product information provided by us. Full details of the terms, conditions and exceptions of this insurance are provided in the MyHealthPlus policy contract and will be sent to you upon acceptance by Aviva Ltd. You have a "Free Look" period of 21 days from the date you received your policy to decide if you want to continue with your policy. If you do not want to continue with your policy, you may write to us to cancel it. As long as you have not made any claim under your policy, we will cancel your policy from its cover start date and refund all premiums paid, without interest. You are assumed to have received the policy within seven days after we have sent it by post.**

**MyHealthPlus is governed by and interpreted according to the law of Singapore. The Singapore courts have non-exclusive jurisdiction.**