



PRODUCT SUMMARY FOR GROUP PERSONAL ACCIDENT

DETAILS OF THE INSURER

Singapore Life Ltd (“Singlife”) is a registered insurer under the Insurance Act 1966 and an exempt financial adviser under the Singapore Financial Advisers Act 2001 (“FAA”). As a registered insurer, Singlife provides and sells insurance products such as life policies and accident and health policies. As an exempt financial adviser, Singlife provides financial advisory service in relation to life policies and collective investment schemes.

PRODUCT INFORMATION

The Group Personal Accident (the “Plan”) is a group personal accident insurance underwritten by Singlife (“We”, “Us”, “Our”) which covers the selected members (“Insured Members”, “You”, “Your”) of Doctor Anywhere (trading brand of Doctor Anywhere Operations Pte Ltd), the master policy owner, in the event of Accidental Injury.

ELIGIBILITY

Insurance coverage under this Plan is only available to you if:

- You are between 17 and 70 years old Age Next Birthday (both age inclusive),
- You are registered members of Doctor Anywhere Healthwise Plus Plan,
- You are Singaporean citizen, Singapore Permanent Resident or holders of valid Singapore employment pass or work permit (exclude foreign domestic helper or construction worker),
- You are a resident in Singapore (not having been out of Singapore for more than 90 continuous days at the date of application for cover under this Policy and throughout the Cover Period),
- You are not a prohibited person, and
- Your application for cover under this Plan has been approved by Singlife.

COVERAGE COMMENCEMENT

Cover under this Plan starts from the issuance of the Certificate of Insurance (“Coverage Start Date”) by Singlife.

SCOPE OF COVERAGE

This Plan covers:

- Accidental Death
- Total and Permanent Disability (“TPD”) due to Accident
- Extra Income Support upon TPD due to Accident
- Extra Fund for Mobility Aids upon TPD due to Accident
- Daily Hospital Income due to Accident

BENEFITS

Benefits	Sum Assured (S\$)
Accidental Death	8,000
TPD due to Accident	8,000
Extra Income Support upon TPD due to Accident	5,000

Extra Fund for Mobility Aids upon TPD due to Accident	5,000
Daily Hospital Income due to Accident (up to 30 days)	80 per day

i. Accidental Death

If an Insured Member sustains an Accidental Injury resulting in death, We will pay the Sum Assured upon receipt of due proof of death in Our prescribed form.

ii. TPD due to Accident

If an Insured Person sustains an Accidental Injury and suffers any of the permanent disabilities described in the Schedule of Indemnities, we will upon receipt of satisfactory proof, pay according to the percentage of Sum Assured as stated in the Schedule of Indemnities.

Except for the loss of the senses of taste and smell for which no benefits are payable, for any permanent disability not specified in the Schedule of Indemnities, We will at Our discretion, pay an amount of benefit determined by:

- comparing with the percentages shown in the Schedule of Indemnities; and
- in proportion to the degree of disability as assessed by Our approved Registered Medical Practitioner; but
- without reference to the Insured Member's profession and occupation.

If Insured Member:

- disappears as a result of the sinking or wrecking of a ship, airplane or vehicle in which he was travelling at the time of the Accident;
- his body is not found within 1 year from the date of his disappearance; and
- there is sufficient proof leading to the conclusion that the Insured Member sustained Accidental Injury which caused his death;

We will pay the Sum Assured provided that the person(s) to whom the benefit is paid shall sign an undertaking to refund this sum to Us if the Insured Person is subsequently found to be living.

iii. Extra Income Support upon TPD due to Accident

If an Insured Person sustains an Accidental Injury which directly and independently of all other causes, results in Total Permanent Disability, we will upon receipt of satisfactory proof, pay the additional Sum Assured as stated in the Benefit Schedule.

iv. Extra Fund for Mobility Aids upon TPD due to Accident

If an Insured Person sustains an Accidental Injury which directly and independently of all other causes, results in Total Permanent Disability, such that he needs to and can operate:

- a. A self-powered, climbing wheelchair; and/or
- b. His/her motor vehicle with the controls suitably adjusted,

We will reimburse 100% of the costs (excluding taxes) of such equipment and installation up to the amount specified in the Benefit Schedule. If You or the Insured Person becomes entitled to a refund of all or part of such expenses from any other source, We will only be liable for the excess of the amount recoverable from such other source.

Total and Permanent Disability means the Insured Member is permanently disabled to such an extent that he is totally unable to engage in any work, occupation, business or activity for income, remuneration or profit from the time the disability started. This TPD must, in the view of a Registered Medical Practitioner, be deemed permanent with no possibility of improvement in the foreseeable future. We will also accept any of the followings as TPD:

- a. The total and irrecoverable loss of use of the sight of both eyes,
- b. The total and irrecoverable loss by severance of, or total and permanent loss of use of, both hands at or above the wrists,
- c. The total and irrecoverable loss by severance of, or total and permanent loss of use of, both feet at or above the ankles,
- d. The total and irrecoverable loss by severance of, or total and permanent loss of use of, one hand at or above the wrist and one foot at or above the ankle, or

e. The total and irrecoverable loss of sight of one eye and loss by severance of, or total and permanent loss of use of, one hand at or above the wrist or one foot at or above the ankle.

v. Daily Hospital Income due to Accident

If Insured Member is necessarily confined as a resident patient in a Hospital for at least 24 hours on the recommendation of a Registered Medical Practitioner within sixty (60) days following an Accidental Injury, We will pay a daily hospital benefit up to the amount specified in the Benefit Schedule. Subsequent hospitalization resulting from the same injury will not be payable.

“Hospital” means any lawfully operating institution:

- (i) with twenty-four (24) hours a day nursing services provided by registered graduate nurses;
- (ii) with one or more Registered Medical Practitioner available at all times; and
- (iii) equipped with organised facilities for diagnosis and major surgery.

Hospital does not include that which is a clinic, a place for alcoholics or drug addicts, a hospice, nursing, rest or convalescent home or a home for the aged or for palliative care or any other similar establishments.

vi. Schedule of indemnities

Schedule of Indemnities		Percentage of Sum Assured (%)
1	Accidental Death	100
2	Total and Permanent Disability	100
3	a. Total and irrecoverable loss of sight of both eyes	100
	b. Total and irrecoverable loss of sight of one eye	100
	c. Irrecoverable loss of sight except for perception of light of one eye, each	50
	d. Total and irreplaceable loss of lens of one eye, each	50
4	Loss of two limbs	100
5	Loss of one limb	100
6	Loss of one limb and loss of sight of one eye	100

Our decision on the amount of benefit payable is final and conclusive and shall not be subject to review.

KEY PRODUCT PROVISIONS

1. Exclusions

This Policy does not cover any Accidental Injury caused directly or indirectly, wholly or partly, by any one of the following occurrences:

- suicide or attempted suicide or self-injury whether the Insured Member is sane or insane;
- war, acts of terrorism involving, directly or indirectly, the use of nuclear radiation and/or biological and/or chemical agents, hostilities or any warlike operations (whether war be declared or not) or civil war; military or naval or airforce service while under orders for warlike operations;
- participation in a riot; commission of an assault or criminal offence; or
- participation in competitive racing of any kind other than on foot; travelling in any type of aircraft other than as a fare-paying passenger on a regularly scheduled flight of a commercial airline.

Exclusions for Daily Hospital Income due to accident

We will not pay for liability arising directly or indirectly from, in respect of, or due to any of the followings:

- Any pre-existing condition which existed prior to the Insured Person becoming insured under this Policy;
- Routine general physical or any other examinations not directly related to admission, diagnosis, injury or treatment which is not medically necessary;
- Congenital anomalies and conditions arising out of or resulting therefrom;
- Results from suicide or attempted suicide or intentional self-injury or from deliberate exposure to exceptional danger (except in an attempt to save human life) or from an

- Insured Person's own criminal act, or is sustained whilst an Insured Person is in a state of insanity;
- If the hospital confinement is for the purpose of convalescent rest;
 - If the date of your first medical consultation or treatment is more than seven days from the date of the accident or
 - If the claim is made for any subsequent blocks of temporary disability when you have made a claim for the same accident.

2. Terms of Coverage

This Plan provides coverage to the members of Doctor Anywhere's Healthwise Plus Plan commencing from the Coverage Start Date as stated on the Certificate of Insurance issued to the Insured Member ("Coverage Period").

3. Ending the Insurance

Cover for an Insured Member ends when:

- the Insured Member is no longer eligible for cover,
 - We, You or Doctor Anywhere end this Policy according to its terms,
 - Insured Member cancels cover under this Policy by writing to us,
 - We pay the full Sum Assured, or
 - the Policy Period ends,
- whichever is the earliest.

The termination of coverage shall be without prejudice to payment of claims arising prior to the date of termination.

4. Waiting Period

Not applicable.

5. Misstatement

- a. If the age or date of birth or other relevant facts relating to any Insured Member is misstated and this affects the scale of benefits or other terms and conditions of this Policy, then Singlife will use the true age and facts to determine whether insurance coverage is in force and the benefits payable under this Policy and if, in Singlife opinion is necessary, an equitable adjustment of premiums will be made and notice of the adjustment will be given to Insured Member.
- b. Where a misstatement of age or other relevant facts has caused a person to be insured under this Policy when he/she is otherwise ineligible for any insurance, or where such statement has caused a person to remain insured when he/she would otherwise be disqualified in accordance with the provisions of this Policy, his/her entire insurance coverage shall be void and there shall be a refund of premiums paid. However, if there is a fraud on the part of the Insured Member, premiums paid shall not be refunded.

6. Cancellation

You may cancel your cover under this policy by writing to Us. The date of cancellation will depend on when We receive the notice of cancellation from You.

7. Free Look Period

You have 14 days from the date You receive this cover to decide whether You want to continue with it. If You do not want to continue, You may write to Us to cancel your cover. As long as no claims have been made under this cover, We will cancel this cover from the issue date.

8. Premiums

Not applicable.

PERSONAL DATA CONSENT

You consent to Singlife:

- a. collecting, processing and disclosing your personal data (whether obtained from Doctor Anywhere or obtained from other sources; existing to Singlife records; or to be collected in the future) for the following purposes (“Purposes”):
 - i. To issue and administer the GPA cover with Singlife and such other purposes ancillary or related to the administering of the policy cover, including the processing of personal data for underwriting and/or claim purposes;
 - ii. For statistical, research, compliance, audit and regulatory purposes; and
 - iii. To provide you with general information on product enhancements and services relevant to your needs as well as to provide financial advice or product recommendations to you, where applicable; and
- b. disclosing and/or transferring your personal data to Singlife related group of companies, third party service providers, reinsurers, suppliers and intermediaries (including your financial adviser, where applicable), whether located in Singapore or elsewhere, for the aforementioned Purposes.

You confirm that you have read, understood and agree to be bound by the terms of Singlife’s Data Protection Notice (which may be found on <https://singlife.com/en/pdpa>) as may be amended, supplemented and/or substituted by Singlife from time to time, and confirm that you are aware that the latest version of such terms (amended, supplemented and/or substituted version) will be posted on Singlife’s website and such version shall bind you upon posting and/or where you continue to use the relevant products and services offered by Singlife to which such terms relate to.

MAKING CLAIMS

We must be given written notice of any claim for Accidental Injury within 30 days of the date of Accident.

Any written notice given by or on behalf of the Insured Member containing sufficient particulars for Us to identify the Insured Member will be considered sufficient notice. If the notice is not given to Us within the requisite time, We still accept submission of a claim if it can be shown that it was not reasonably possible to give such notice and that notice was given to Us as soon as it was reasonably possible.

For processing of such claims for Accidental Injury, We may require any or all of the following at Your cost:

- Certificates, medical reports, information and evidence in such form and nature as We may prescribe;
- Evidence to establish the continuing health condition of the Insured Member and to show that he is not engaged in any form of employment;
- That the Insured Member be available for examination by our approved Registered Medical Practitioner when required and if the Insured Member is residing outside Singapore, We may still require him to come to Singapore for such medical examination;
- Proof of the Insured Member’s date of birth and if the date of birth and/or age given to Us is incorrect, then We will not be liable to pay more than the amount that We would have had to pay if the date of birth and/or age had been correctly stated to Us.

For processing of a claim for death as a result of Accidental Injury, We have the right to require an autopsy to be performed provided that such autopsy is not forbidden by law.

Claims forms and supporting documents should be sent to managed_care3@singlife.com. Please visit www.singlife.com to find out more about Claims Process.

PROHIBITED PERSON

Prohibited Person means a person or entity who is

- subject to laws, regulations or sanctions administered by any inter-government, government, regulator or law enforcement authorities of any country, which will prohibit or restrict us from providing insurance or carrying out any transaction under this policy, or

- who is involved in any terrorist or illegal activities or placed on sanctions listing or issued with freezing order.

POLICY OWNERS' PROTECTION SCHEME

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage 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 coverage, where applicable, please contact your insurer or visit the GIA/LIA or SDIC web-sites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

IMPORTANT NOTICE

This plan is underwritten by Singapore Life Ltd. This is product information provided by Singlife and is designed to serve as a guide only. The precise terms and conditions of the plan are set out in the certificate of insurance and policy terms & conditions with benefits summary. In the event of clarification or dispute, the prevailing terms and conditions of the Group Insurance policy contract with the master policy owner shall apply.

As this product has no savings or investment feature, there is no cash value if the policy ends or if the policy is terminated prematurely.

The benefits of a personal accident policy will only be payable upon an accident occurring. Before replacing an existing personal accident policy with a new one, you should consider whether the switch is detrimental as there may be potential disadvantages with switching. A penalty may be imposed for early termination and the new policy may cost more or have fewer benefits at the same costs.