



Hitachi Vantara Pte Limited

Employee Benefits Insurance Communication

Policy Period: 1 April 2023 to 31 March 2024

These slides are for reference and meant as guides only. Insurance covers are subject to the insurer's acceptance as per the policy terms, conditions and exclusions. We recommend you refer to the policy wording for specific questions.



AGENDA

1. INTRODUCING ROLES
2. SUMMARY OF KEY COVERS
3. WHATS COVERED AND KEY EXCLUSIONS
4. AON CARE & NAVIGATING TECHNOLOGY
5. HOW TO MAKE A CLAIM
6. CONTACT POINTS
7. QUESTIONS
8. APPENDICES

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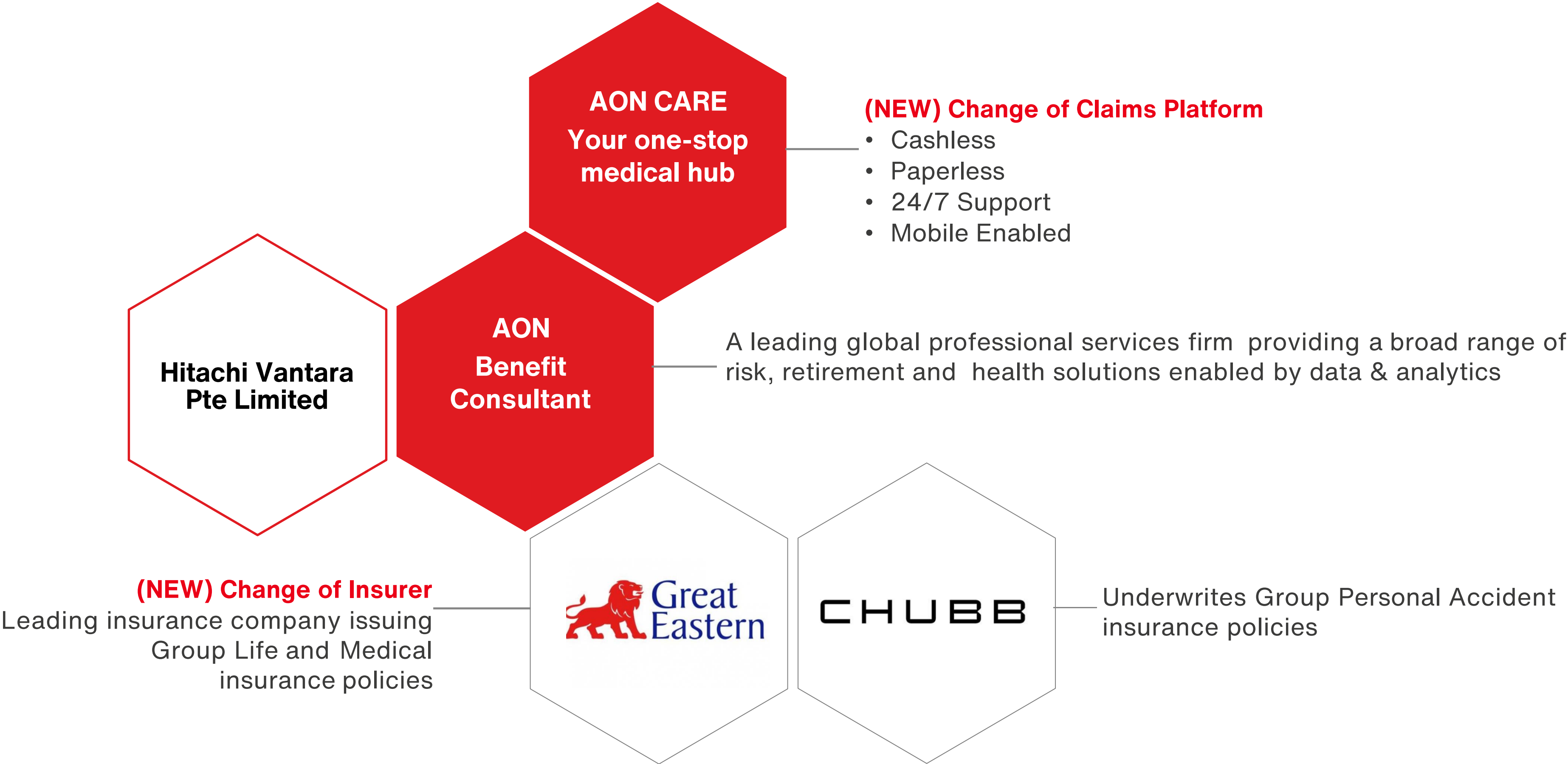
1

INTRODUCING ROLES

AON



Introducing Roles



2

SUMMARY OF KEY COVERS

AON



Summary Of Key Covers

Group
Term Life

Group
Personal
Accident

Group
Medical

Non-Medical Benefits			Hospital & Surgical	Group Major Medical	Outpatient General Practitioner	Outpatient Specialist	Dental
Insurers	▪ Great Eastern (NEW)	▪ Chubb Insurance	▪ Great Eastern (NEW)				
Eligibility	▪ All Employees	▪ All Employees	▪ All Employees & their Eligible Dependents	▪ All Employees & their Eligible Dependents	▪ All Employees & their Eligible Dependents	▪ All Employees & their Eligible Dependents	▪ All Employees and Spouse on Compulsory basis), Eligible Child on Voluntary Basis
Basis of Coverage	▪ 36x last drawn Basic Monthly Salary (BMS) up to \$3,000,000	▪ 36x last drawn Basic Monthly Salary (BMS) up to \$1,000,000	▪ Room & Board Up to 1-Bed Private	▪ Up to S\$80,000 per Disability	▪ Panel Clinic – As Charged ▪ Non-Panel Clinic – Up to \$80 per visit	▪ Panel Specialist – Cashless ▪ Non-panel Specialist – up to \$1,500 per Policy Year	▪ Panel – Cashless ▪ Non-Panel – As per limits stated in schedule

Note: Currency used is in Singapore dollars unless otherwise advised

Important Note

For claims incurred between 01 April 2022 to 31 March 2023;

- Please note that access to AIA e-ben account will be terminated with effect from 01 April 2023.
- As such, the last day to submit claims via AIA e-ben will be 31 March 2023.
- Beyond that, members will have to submit claims physically via snail mail to AIA and the grace period for this will be 30 days from 31 March 2023.

No claims incurred in 2022/ 2023 will be entertained by AIA if submitted after this grace period.

Key Changes effective 1 April 2023 – Claims Submission

Please be informed that the insurer will need some time to process and setup the policy for the new policy year 2023. Thus, before the setup is completed on the **07 April 2023**, there will be a transition period; as indicated in this table.

Key Changes	1 March 2022 – 31 March 2023	1 April - 06 April 2023	Effective 07 April 2023
Medical Claims Submission Process	AIA e-Benefits Portal	Aon Care Mobile App / Web portal still in midst of set up	Aon Care Mobile App / Web Portal
Issuance of Letter of Guarantee (LOG)	AIA e-Benefits Portal	LOG facilities will not be available during this period	24/7 Aon Care Contact Centre
Panel Clinic Network	Alliance Healthcare Network	Fullerton HealthCare Group	
Panel GP visits	- Please refer to the AIA Panel GP listing. ✓ Employees & eligible dependants: can produce the following at the panel clinics for cashless visits - AIA e-card - Identification card	- Please refer to the Aon Care Panel GP listing ✓ Please produce the following at the panel clinics. - Identification card - Note: Visit will not be cashless. ✓ All members to pay first and submit for claims assessment later after the Aon Care access is ready. ✓ To include under Remarks: Panel visit while pending Aon Care account to be ready	- Please refer to the Aon Care Panel GP listing within the mobile app/ web portal ✓ Employees & eligible dependants can produce the following at the panel clinics for cashless visits - Aon Care e-card - Identification card
Teleconsultation	WhiteCoat Mobile App	Aon Care Teleconsultation facility will not be available. Member may use WhiteCoat for reimbursement later but subject to Non-Panel limits (\$80 per visit)	Aon Care app
Standard User ID for Aon Care Log In	-	-	HIT followed by digits of NRIC/FIN number e.g HIT1234567
Aon Care Welcome Email	-	-	All Employee will receive separate Welcome Email for theirs and enrolled dependants upon Aon Care go-live on 07 April 2023
Medical e-card	AIA e-card	-	Aon Care e-card



- Under Aon Care, each dependent will be provided with their own log in details to retrieve their individual e-card. Member can take a screenshot of the medical e-card to present at Panel clinics. In the (unlikely) event that a clinic insists on to see the “live” card, caregiver accompanying the child can either log in on the spot or request clinic to contact Aon Care for verification.

3

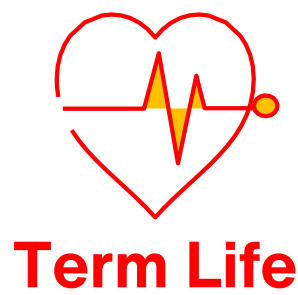
WHAT'S COVERED

AON



Life Insurances

What's Covered



Coverage	
▪ Death, Total Permanent Disability (TPD), Terminal Illness Benefit	▪ Death, Total and Permanent Disablement (TPD), Total and Partial Disablement due to accident only.
Eligibility	
▪ All Full Time and Active Employees ▪ Age Limit: Up to age 75 next birthday ▪ Free Cover Limit: \$750,000 ▪ Underwriting Requirements: Above age 65 next birthday OR Sum Assured Exceeding \$750,000	▪ All Full Time and Active Employees ▪ Age Limit: Above 16, no maximum renewable age
Key Terms	
▪ Death – The sum assured is payable in one lump sum ▪ Total Permanent Disablement (TPD) – Pays in a lump sum prior to 70 next birthday provided that such TPD has existed continuously for at least 90 days ▪ Terminal Illness (TI) – Upon diagnosis of a terminal illness from which death is highly probable within the next 12 months, a lump sum will be payable Note: Employees aged 71 next birthday and above will be covered for Death benefit only	▪ Death – Pays 100% in one lump sum ▪ Total Permanent Disablement (TPD) – Pays 150% in one lump sum ▪ Partial & Permanent Disablement – Pays % of sum assured according to severity, as per Personal Accident Benefits Schedule

Hospital & Surgical

What's Covered



Coverage

- **Hospitalization** must be with Room & Board charge
- **A surgery**, includes **day surgery**
- **Per disability**
Break of 30 calendar days from latest date of discharged for same medical condition
- **Hospital outside Singapore**
 - ✓ Hospitalization shall be considered as admission in Singapore Private Hospital
 - ✓ Documents submitted must be in English

Eligibility

- **All Full-Time, Active Employees & Eligible Dependents**
- **Age Limit:** Up to age 70 next birthday and renewable up to age 75
- **Definition of Dependent :**
 - (a) the legal spouse of an Insured Member who is not divorced or separated, and who has not attained the age of 70 age next birthday; or
 - (b) unmarried and unemployed natural or stepchild(ren) from a legal marriage or legally adopted child(ren) of an Insured Member, between the age of 15 days and 25 years old

Key Notes

- **Pre-existing conditions:** excluded for first 12 months unless covered under previous employer's GHS policy (for at least 12 months) and lapse of not more than 31 calendar days from the termination date and commencement date (*Certification Letter from previous employer is required at the point of claim submission*)

Hospital & Surgical

What's Covered



Benefits (Maximum per Disability)	Benefit Limit
1a. Daily Room & Board Benefits (Max 120 days)	1 Bed Private
1b. Intensive Care Unit (Max 30 days)	\$1,560
2. Other Hospital Services <i>includes surgical implants</i>	\$6,000
3. Surgical Benefit (Minor Surgical Benefit Maximum Limit of S\$1,500)	\$9,000
4. In Hospital Doctor Consultation (Max 120 days)	\$180
5. Pre & Post Hospitalization Specialist Consultation, Diagnostic X Ray & Laboratory Tests <i>Within 90 days before/after discharge from hospital/surgery</i>	\$1,800
6. Emergency Outpatient Treatment due to Accident <i>Treatment sought within 24 hours, follow up treatment up to 31 days</i>	\$3,500
7. Overseas hospitalization due to Accident <i>Maximum per disability</i> <i>Applicable to item 1 to 6</i>	150% of GHS Benefits
8. Outpatient Kidney Dialysis/Cancer Treatment <i>Maximum per policy year</i>	\$20,000
9. Death Benefit	\$3,000
10. Miscarriage Benefit (Non-elective miscarriage and ectopic pregnancy)	As per disability
11. Rehabilitation Benefit <i>Maximum of 31 Days</i>	\$5,000
Overall Maximum Limit Per Disability if admitted to Singapore Government or Restructured Hospitals (Items 2 to 6)	\$21,000

Note: Currency used is in Singapore dollars unless otherwise advised



Important Notes:
GST is not payable.

Major Medical

What's Covered



Benefits (Maximum per Disability)	Benefit Limit
1a. Daily Room & Board Benefits (from 121 st Day Onwards)	1 Bed Private
2. Deductible	As per Basic GHS
3. Parental Accommodation Benefit (Max 120 Days per Disability)	\$100
4. Home Nursing Benefit (Max 30 days)	\$100
5. Treatment for HIV Infection / AIDS Benefit • <i>Maximum per policy year</i>	\$10,000
Co-insurance by insured member	20%
Overall Benefit per Disability	\$80,000

Note: Currency used is in Singapore dollars unless otherwise advised

Important Note:
GST is not payable.

List of Hospitals In **Singapore**

Government Restructured Hospitals

- 1.Alexandra Hospital
- 2.Changi General Hospital
- 3.KK Women's and Children's Hospital
- 4.Khoo Teck Puat Hospital
- 5.National University Hospital
- 6.Ng Teng Fong Hospital
- 7.Singapore General Hospital
- 8.Sengkang General Hospital
- 9.Tan Tock Seng Hospital

Private Hospitals

- 1.Gleneagles Hospital
- 2.Concord International Hospital
- 3.Farrer Park Hospital
- 4.Parkway East Hospital
- 5.Raffles Hospital
- 6.Mount Alvernia Hospital
- 7.Mount Elizabeth Hospital
- 8.Mount Elizabeth Novena Hospital
- 9.Thomson Medical Centre

Outpatient General Practitioner

What's Covered



Eligibility

- **All Full-Time, Active Employees & Eligible Dependents**
- **Age Limit:** Up to age 70 next birthday and renewable up to age 75
- **Definition of Dependent :**
 - (a) the legal spouse of an Insured Member who is not divorced or separated, and who has not attained the age of 70 age next birthday; or
 - (b) unmarried and unemployed natural or stepchild(ren) from a legal marriage or legally adopted child(ren) of an Insured Member, between the age of 15 days and 25 years old

Coverage	
Eligible Expenses <i>*You are required to pay first and submit for reimbursement with receipts</i>	Benefit Limits
1. Panel General Practitioner Important: • Presentation of Aon Care's E-card and NRIC/EP/Passport are required	As charged
2. Government Polyclinics*	As charged
3. Non-Panel Clinics*	\$80 per Visit
4. Overseas Outpatient Treatment (Johor)*	\$80 per Visit
5. Overseas Outpatient Treatment (excluding Johor)*	\$100 per Visit, with \$5 co-payment per Visit
6. Emergency Outpatient Treatment*	\$100 per Visit
7. Outpatient Treatment at Panel TCM Practitioner Clinics (consultation only)	As charged, capped at 6 visits per policy year
8. Telemedicine via Aon Care	As charged, capped at 6 visits per policy year

Note: Currency used is in Singapore dollars unless otherwise advised

Important Note:
GST is not payable.

Outpatient Specialist

What's Covered



Eligibility	
▪ All Full-Time, Active Employees & Eligible Dependents ▪ Age Limit: Up to age 70 next birthday and renewable up to age 75 ▪ Definition of Dependent : (a) the legal spouse of an Insured Member who is not divorced or separated, and who has not attained the age of 70 age next birthday; or (b) unmarried and unemployed natural or stepchild(ren) from a legal marriage or legally adopted child(ren) of an Insured Member, between the age of 15 days and 25 years old	
Coverage	
Eligible Expenses <i>*You are required to pay first and submit for reimbursement with receipts</i>	Benefit Limits
1. Panel Specialist Consultation (with referral) Important: • Presentation of Aon Care's E-card and NRIC/EP/Passport are required	As charged
2. Non-panel Specialist Consultation (with referral)* • Includes Physiotherapy • Subject to Overall Annual Limit	As charged
3. Outpatient Treatment at TCM Practitioner Clinics*	\$80 per Visit
4. Diagnostic X-Ray & Lab Test (with referral)* • Includes MRI/CT Scans • Subject to Overall Annual Limit	As charged
5. Pediatric Teleconsultation via any PD teleconsultation platform*	As charged, up to 6 Visits per Policy
Overall Limit (Item 2 and 3) – Per Policy Year	\$1,500
Overall Limit (Item 4) – Per Policy Year	\$1,000

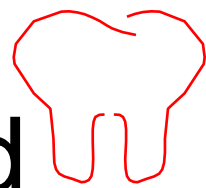
Note: Currency used is in Singapore dollars unless otherwise advised

Important Notes:

- A. Referral letter is required for all claims submitted under Outpatient Specialist. Member to make a copy of the referral letter before presentation of letter to the Specialist clinic.
- B. Referral letter is waived for pediatric consultation for children aged 7 years old and below.
- C. Validity of referral letter is 1 year. For repeat/ongoing visit to SP, please obtain a copy of memo from the doctor to prove that treatment is ongoing.
- D. GST is not payable.

Dental

What's Covered



Eligibility		
▪ All Full-Time Active Employees and Eligible Spouse on Compulsory basis; Eligible Child on Voluntary Basis ▪ Maximum Age of Coverage: Up to age 70 next birthday and renewable up to age 75 ▪ Definition of Dependent : (a) the legal spouse of an Insured Member who is not divorced or separated, and who has not attained the age of 70 age next birthday; or (b) unmarried and unemployed natural or stepchild(ren) from a legal marriage or legally adopted child(ren) of an Insured Member, between the age of 3 years and 25 years old		
Coverage		
Eligible Expenses	Panel	Non-Panel S(\$)
Examination Dental Checkup (up to maximum of 2 visits per policy year)	As Charged	15
Medicine & Miscellaneous Treatment Analgesics, antibiotics, sterilization and disposables		15
X-Ray Intraoral Bitewing Panorex		12 12 32
Test & Laboratory Biopsy & Examination		48
Prophylaxis Routine (Scaling & Polishing) Complex (Scaling, Polishing & Floride)		40 60
Pulpotomy Pulpotomy Pulp Cap		40 20
Filling (Tooth – Coloured Material or Amalgam) for Prosterior Teeth Only One surface Two surfaces Three or more surface Reinforced Pin		16 24 32 9

Dental

What's Covered

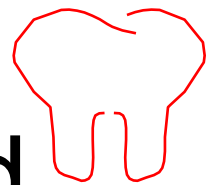
Coverage (cont'd)		
Eligible Expenses	Panel	Non Panel S(\$)
Filling (Tooth – Coloured Material) – for Anterior Teeth and Buccal (one surface) filling of Premolars only One surface Two surface Three or more surface	As Charged	30 40 50
Pulpotomy Pulpotomy Pulp Cap		40 20
Root Canal Treatment Single root canal filling Double root canal filling Three or more canals (x-ray of the tooth involved with the diagnostic wire or wires in place must accompany claim for payment)		150 220 350
Extractions Routine (Simple) – each tooth		30
Surgical Extractions Erupted tooth or root Soft tissue impaction Part bony impaction Completely bony impaction		120 160 250 320

Note: Currency used is in Singapore dollars unless otherwise advised

Important Note:
GST is not payable.

Dental

What's Covered



Coverage (cont'd)		
Eligible Expenses	Panel	Non Panel S(\$)
Alveoplasty Per quadrant, in connection with extractions Per quadrant, not in connection with extractions For a complete Alveoplasty involving more than one quadrant	As Charged	30 42 160
Excision of Tumor		76
Fracture of Jaw Simple Compound (x-ray of the fracture must accompany claim for payment)		500 600
Repair of prosthetic appliance Repair of broken complete or partial denture Repair of denture and replace broken tooth Adding tooth to partial denture to replace extracted tooth Add tooth to partial denture plus clasp		20 40 27 54
Space Maintainers Fixed band type (uni or bilateral) Removal in acrylic (uni or biltaeral)		135 67

Note: Currency used is in Singapore dollars unless otherwise advised

Important Note:
 GST is not payable.

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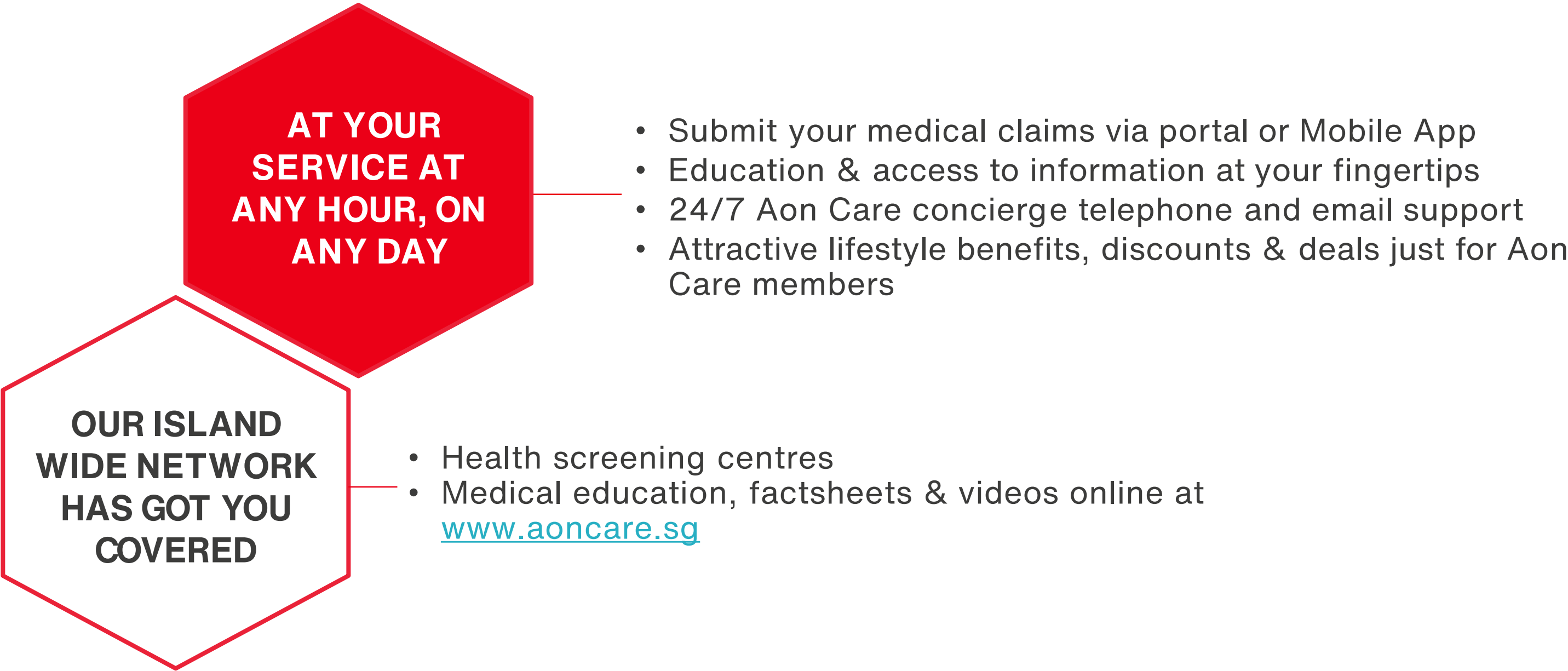
AON CARE

AON



What is Aon Care

AON CARE IS A COMPREHENSIVE ONE-STOP MEDICAL & LIFESTYLE HUB WHICH PROVIDES YOU AND YOUR FAMILY WITH EXCELLENT HEALTH CARE AND EXCITING WELLBEING BENEFITS.



ACCESS AON CARE TO SUBMIT CLAIMS ON:



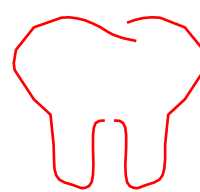
Hospital & Surgical



Outpatient GP

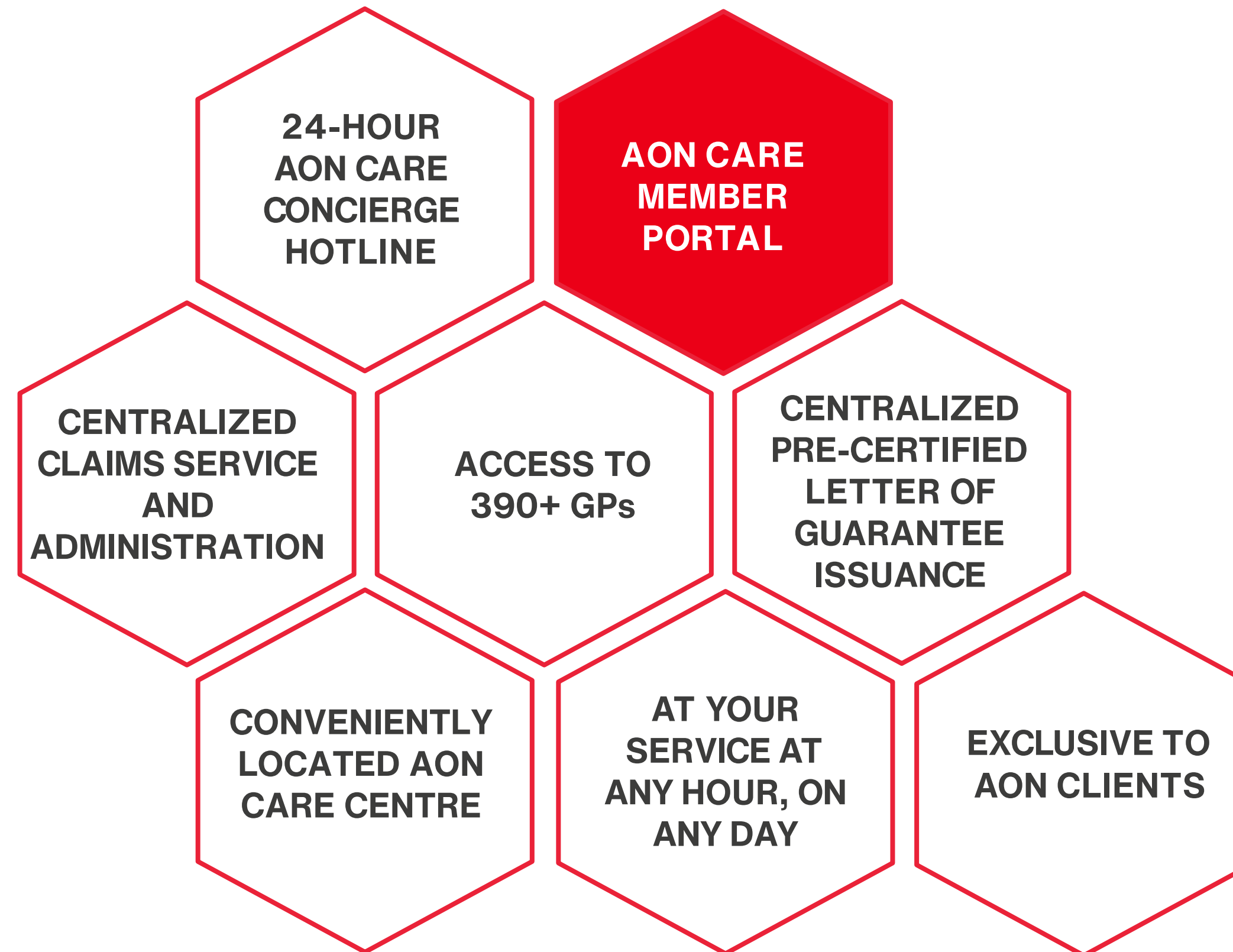


Outpatient SP



Dental

What is Aon Care



INSURANCE COVERS UNDER AON CARE

- Group Hospital & Surgical (GHS)
- Group Outpatient General Practitioner (GP)
- Group Outpatient Specialist (SP)
- Group Dental (GD)

Exclusive **LIFESTYLE BENEFITS** just for you

Details can be found on www.aoncare.sg



Member Portal & Mobile App



A SMARTER, FASTER,
AND SIMPLER
SOLUTION FOR
EVERYONE, AON
CARE MOBILE APP
INCLUDES **MEMBER
E-CARD** AND **ONLINE
CLAIMS SUBMISSION**

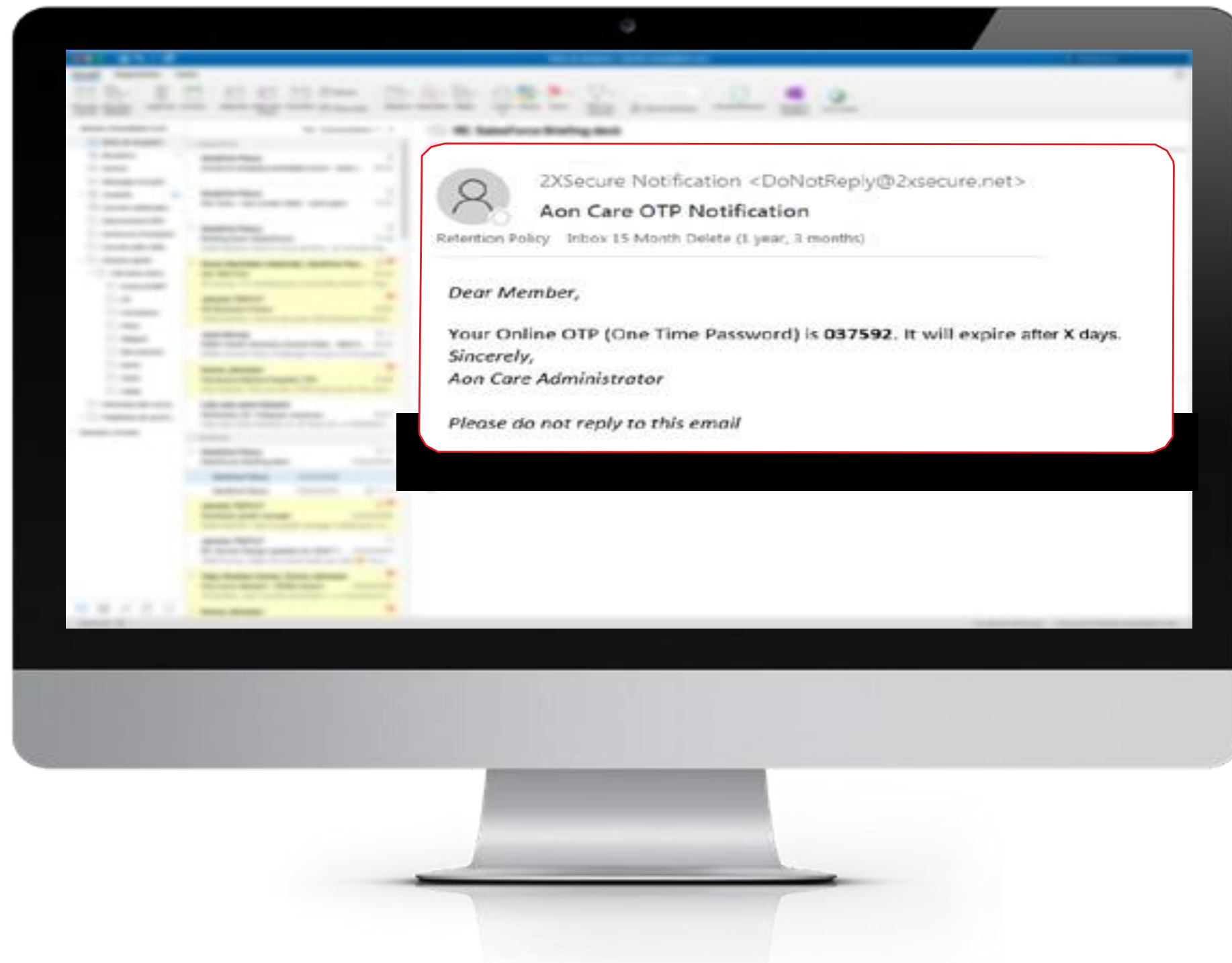


Aon Care Login (www.aoncare.sg)

NEW MEMBERS

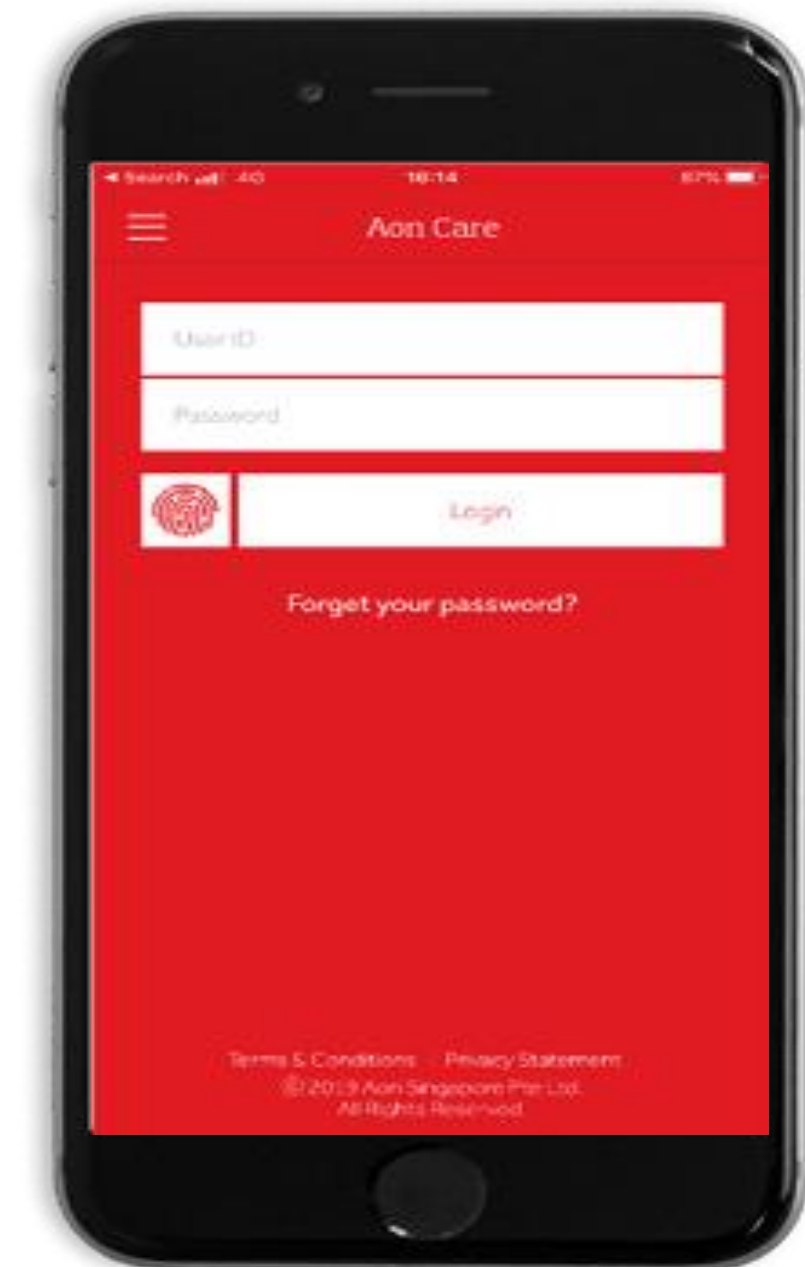
There will be a welcome email sent with the User ID and Password

Note: Please remember to login to change your password.



EMPLOYEES & DEPENDENTS

- User ID: First 3 letters of company name + digits of NRIC/FIN
Eg. Company = FirstClass NRIC = S1234567 User ID = FIR1234567
- Password: Self-Defined Password
Min. 8 alphanumeric characters with at least 1 upper and 1 lower case alphabet Eg. Welcome1



Important Notes:

Aon Care portal/mobile app will be live on **07 April 2023**.

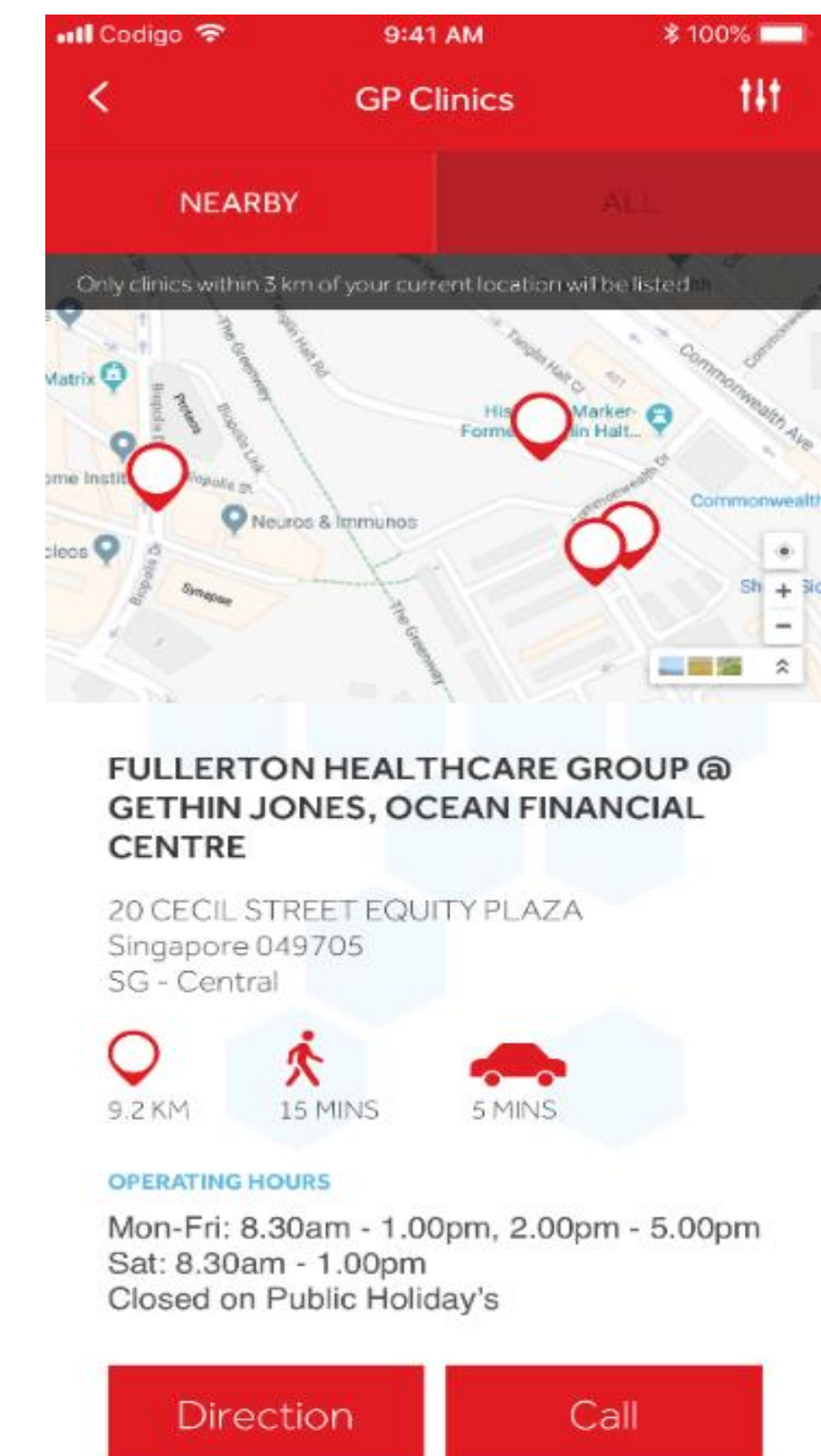
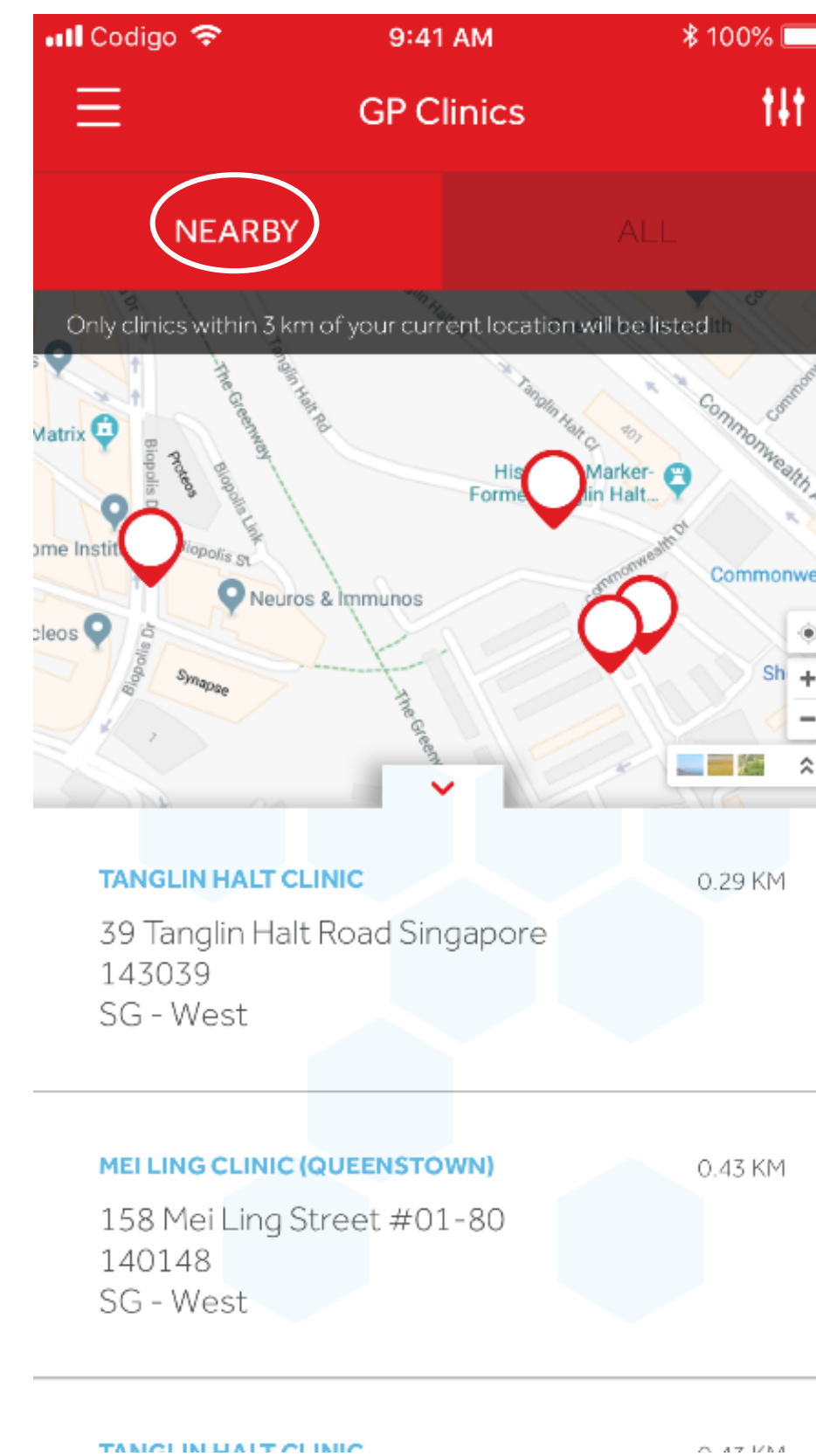
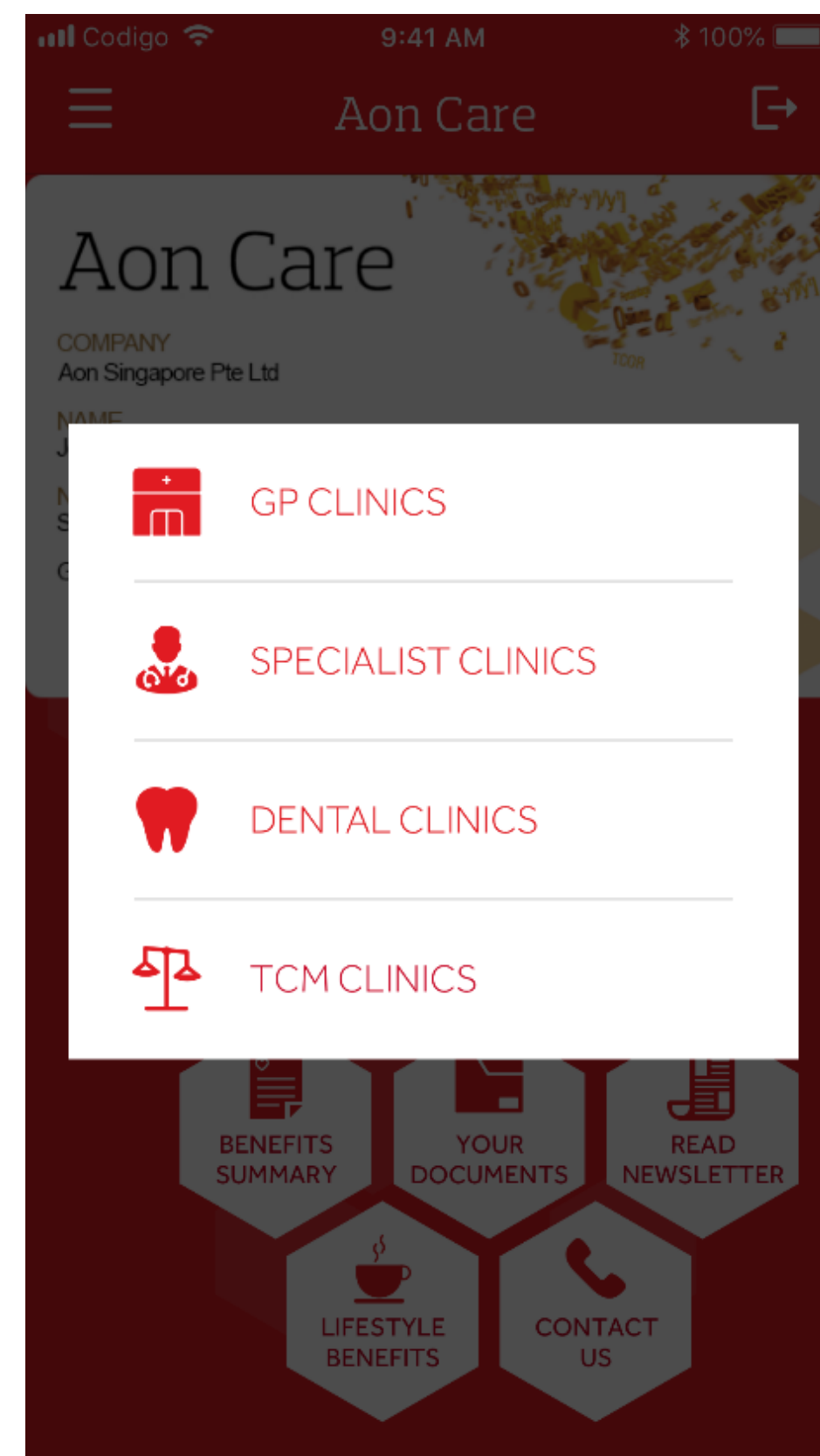
From 1 April 2023 to 06 April 2023

- Members will not be able to access their eCards for cashless visits.
- Members will not be able to file claims incurred for PY 2023/2024.
- Members who wish to file claims for PY 2023/2024, will have to hold on to the claims until 11 April 2023.
- Letter of Guarantee (LOG) will only be issued from 12 April 2023.

Aon Care Mobile App - Clinics & Locator

Clinic Locator

- Users should enable GPS and location services on their mobile to view the nearby clinics.
- Click on “View Clinics” and select the type of clinics – GP, Specialist, Dental or TCM will appear depending on your benefits entitlement.
- Users can then click on the clinic, after which full details will be reflected, including route guide to clinic.



Aon Care Member Portal



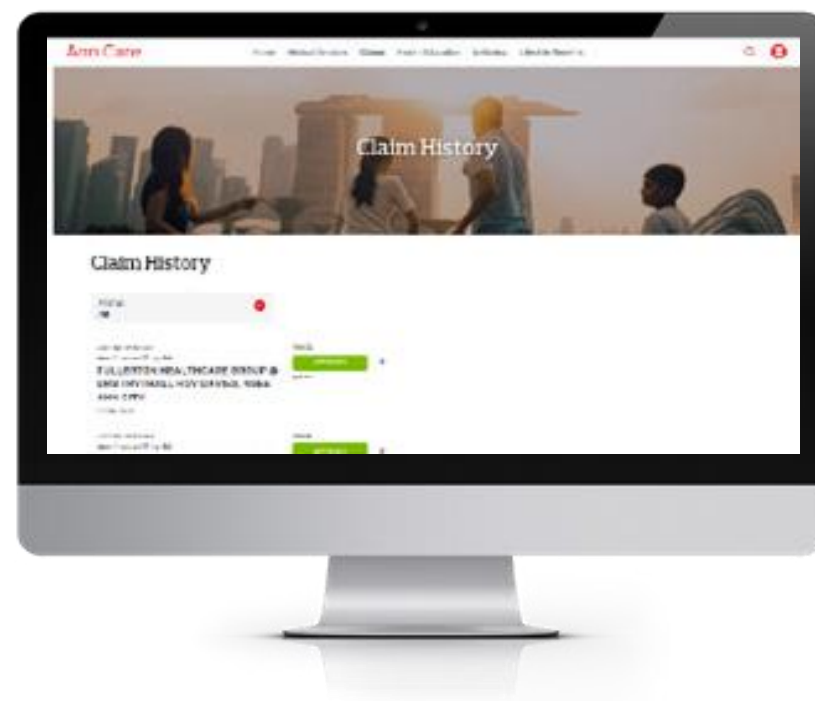
MY PROFILE

- Under **My Profile**, you can view your profile information (if any)
- Please **CHECK** your personal details, especially your **BANK ACCOUNT** number as the claims reimbursement will be credited into the account as stated in the portal
- For any changes to the particulars appearing on this page, please reach out to the Human Resources team



SUBMIT CLAIM

- Under **Submit Claim**, you can submit your inpatient and outpatient claims
- You are required to complete all compulsory fields and provide a detailed breakdown of your claims to avoid delay for reimbursement
- You can attach softcopy of your claims under **File Attachment**
- Click **Submit** button, when you complete your claims submission.



CLAIM HISTORY

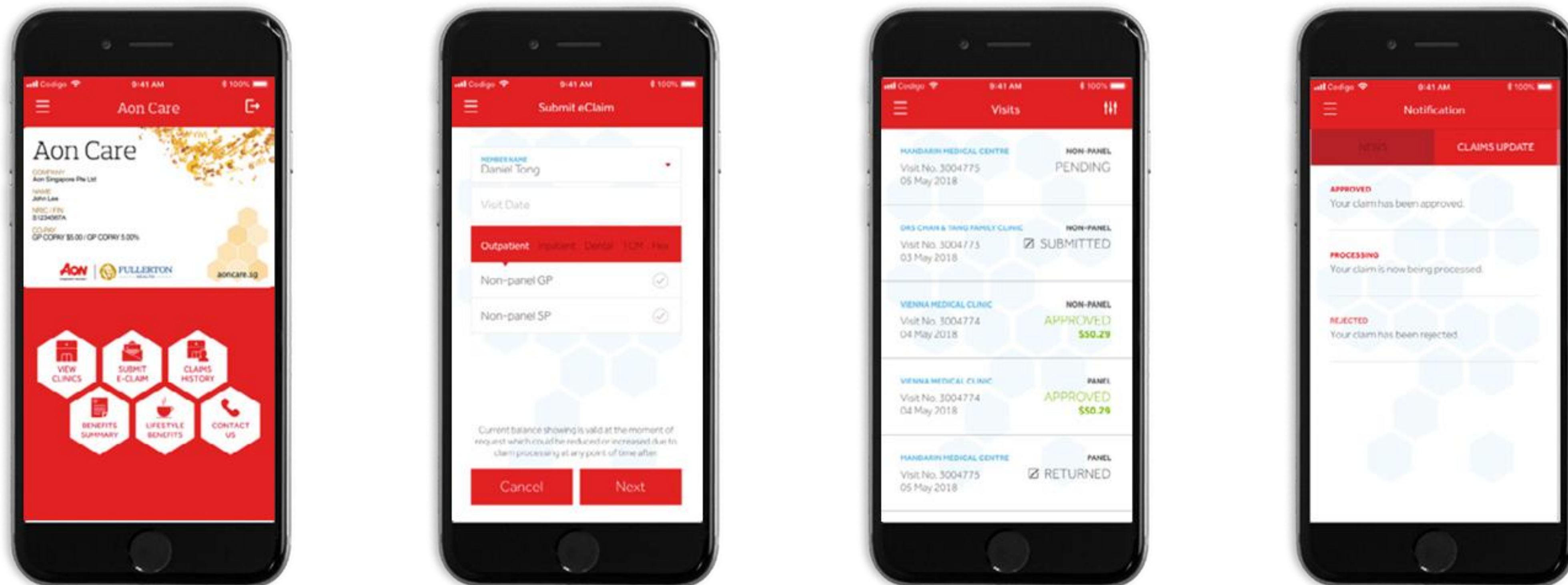
- Under **Visits**, you can view your visits records
- You can view your claims submission status – Submitted, Approved, Rejected or Voided
- You can sort your claims by **Record Status** – Submitted, Approved, Rejected or Voided

Aon Care Mobile App – E Claim Submission

E-CLAIM SUBMISSION

- Paperless claims submission
- View status of claims
- Push Notifications on claims and payment status

Attention: Please retain the original receipt for a period of 12 months from the incurred date as the insurers reserve the right to request for the original receipts for audit purpose.



Aon Care Member Portal

The following documents can be downloaded from the portal:

1. Group Hospital and Surgical Claims
2. Pre-Certification forms.
3. Employee Communication Deck which contains information on your insurance coverage and benefits
4. Aon Care User Guide

Aon's
Aon Care
Account

Profile

Documents

Claims History

Notifications

Change Password

Log Out

We are here to help, any
time, any day.

24 Hour Aon Care Concierge
Hotline

+65 6225 2333

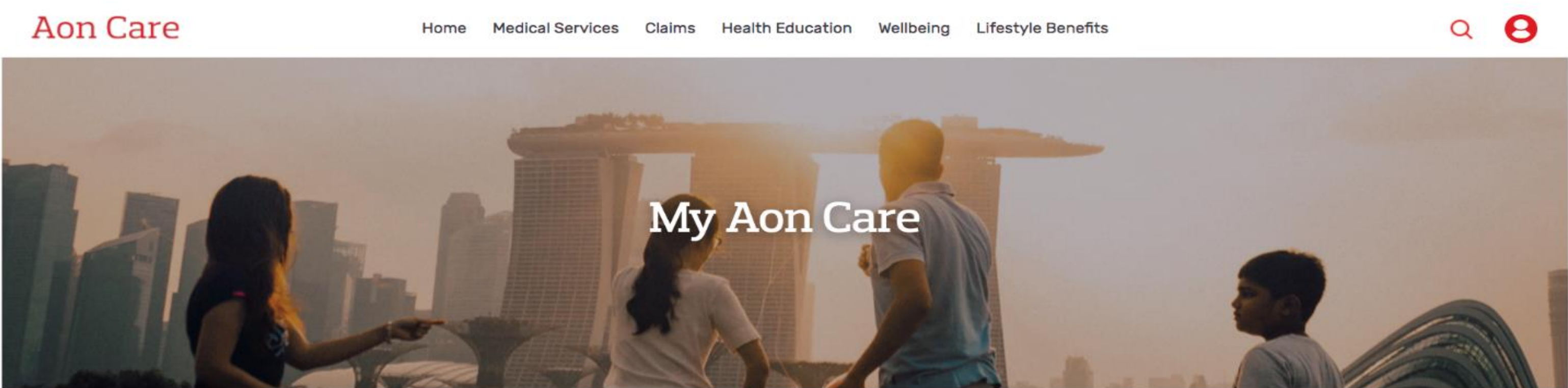
Email Aon Care at

aoncare@fullertonhealth.com

Aon Care,
now on mobile.

Download on the
App Store

GET IT ON
Google play



Listing of Documents

Aon Care Common Diagnosis Table

[Download](#)

Aon Care Group Hospital and Surgery claim form

[Download](#)

Pre-Certification Form

[Download](#)

5

HOW TO MAKE A CLAIM

AON



Inpatient / Day Surgery

Letter Of Guarantee

SCHEDULED ADMISSION/SURGERY

The Pre-Certification Form will determine if the claim is payable or not by the Aon Care centre and for them to issue the LOG if the claim is payable under the policy. LOG will not be provided if the condition is not covered. Please download a copy of the Pre-certification form from www.aoncare.sg -> Member Portal - Documents Folder.

For planned admission/surgery, please provide the Pre-Certification requirements to Aon Care at least **5 working days** before the procedure date

PRE-ADMISSION

Government/Restructured Hospital

Member and Specialist complete

- Page 1 of Pre-Certification Form
- Financial Counselling Form
- Admission Form indicating the diagnosis and email to aoncare@fullertonhealth.com

For Private Hospital

- Panel Specialist - the Pre- certification form to be completed by the clinic
- Non-panel Specialist - the Pre- certification form to be completed by both member & attending physician. Email to aoncare@fullertonhealth.com

UPON DISCHARGE

Settle any amount due to the Hospital after deduction from Medisave account, for any non-claimable expenses

Aon Care Centre reviews Pre- Certification Form, and sends the LOG to Hospital

POST DISCHARGE

Aon care will process all post hospitalisation bills together with the LOG Bills.

The hospital will send the bill directly to Aon Care/ Insurers.

Aon Care Centre will reimburse to Member.

- Any cash portion payable via GIRO
- Claimant Medisave Account
- Claimant Medishield Account

Aon Care Centre will send Explanation of Benefits to Member via email. Reimbursement will be credited directly to your bank account within the next **3-5 working days**

Note: Check Notifications in Mobile App on the status of your claims

Note: Claims are typically processed within 6 to 8 weeks of full documentation being submitted. Claims are reimbursed according to the policy limits and associated terms and conditions.

Pre-Certification Form

Aon Care



PRE-CERTIFICATION FORM

All details in this form are to be duly completed and signed by both the doctor and the Insured member.
For admission to Private Hospital, Page 2 of this form is to be completed by the Attending Physician.
For admission to Government/Restructured Hospital, please provide relevant documents such as Hospital Financial Counselling/Admission Forms.
Please submit this form prior to the surgery or procedure, together with any full medical report(s) or laboratory test result(s) to:

- Fax: 6672 5687 or
- Email: aoncare@fullertonhealth.com

Particulars of Insured Member

Insured Name: _____ NRIC / FIN No: _____
Claimant Name: _____ NRIC / FIN No: _____ Relationship: _____
Company Name: _____ Policy No: _____ Contact No: _____

Declaration of Insured Member

1. Is your condition / injury arising from workplace or during course of work? ☐ NO ☐ YES
2. Are you claiming from Work Injury Compensation Insurance for this surgery / admission? ☐ NO ☐ YES

Consent & Authorisation of Insured Member

1. I hereby authorise, agree and consent to:
- a) Insurer and Fullerton Healthcare Group to request from any hospital, physician, person or organisation, all information with respect to any illness, injury, medical history, and copies of all hospital or medical records concerning myself or dependents at any time and authorise the prior mentioned organisations to disclose all such information to Insurer and Fullerton Healthcare Group.
- b) Insurer and Fullerton Healthcare Group collecting, using, and/or disclosing my personal data for the processing of pre-certification and such other purposes ancillary or related to the administering of my insurance coverage and claims adjudication.
2. I agree that Insurer and Fullerton Healthcare Group and my Employer reserve the right to recover any outstanding amount should my total medical expenses exceed the policy coverage and/or is not covered under the policy.
3. I hereby declare that all the information, above statements and answers including any attachments related to it are true and complete. I have not withheld any material fact from Insurer, Fullerton and my Employer.
4. I agree that a photocopy of this authorisation shall be considered as effective and valid as the original.

Insured Member's Signature: _____ Date: _____

Disclaimer

Aon Care is a medical network administering insurance policies arranged by Aon Singapore Pte. Ltd ("Aon") acting as an insurance broker. Aon is not an insurer and does not guarantee the acceptance, application or availability of insurance. The content of this form has been compiled by Fullerton Healthcare Group Pte Ltd and is subject to the terms, conditions and exclusions of the regulated insurer's policy wording which may change from time to time. Refer to the relevant policy document for complete and most up to date details. Neither Aon, nor any Aon Group entity, will be held liable for the contents of this form, its existence or any representations made in its connection. For further information on Aon Care or related insurance products, please contact a representative of Aon.

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Tel: +65.6225.2333 | Fax: +65.6672.5687

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To be completed by Attending Doctor/Surgeon

For admission to Private Hospital, claimant must arrange to have this section completed by the Attending Physician.
For admission to Government/Restructured Hospital, please provide relevant documents such as Hospital Financial Counselling/Admission Forms.

1. Particulars of Attending Doctor/Surgeon

Doctor/Surgeon: _____ Referring Doctor: _____
Clinic Name: _____ Clinic Address: _____

2. Details of Surgery/Procedure

Hospital Name: _____ Admission Date: _____
Date of Surgery: _____ Surgical Code: _____
Surgical Procedure: _____ Estimated Length of Stay: _____

3. Condition Requiring Treatment

Symptoms: _____ Symptoms Apparent from: _____
Diagnosis: _____ Diagnosis Date: _____
ICD 10 Code: _____ First Consultation Date: _____

- a) Has this or any similar condition existed previously? ☐ NO ☐ YES
If yes, please attach details and proceed to next question
- b) Has the patient had any prior treatment for this condition? ☐ NO ☐ YES
If yes, please state date of treatment, name and address of doctor who treated the patient

4. Is the condition of patient due to or related to:

- Congenital anomaly? ☐ NO ☐ YES
- Psychological, mental or emotional disorder? ☐ NO ☐ YES
- Dental/gum treatment or oral mucosal? ☐ NO ☐ YES
- Pregnancy, childbirth, sub-fertility or infertility? (Date of last menstruation _____) ☐ NO ☐ YES

5. Is patient's condition/injury is due to an accidental event; please advise whether it is work-related? ☐ NO ☐ YES

6. Admit as: ☐ IN-PATIENT ☐ DAY-SURGERY

7. Is the patient currently taking any medication? ☐ NO ☐ YES

If yes, please indicate the medication below

8. Cost Estimation

(A) Surgeon's Fee : SGD _____ (D) Room & Board: SGD _____ /day X _____ = _____
(B) Anesthetists Fee : SGD _____ (E) Ward Class: _____
(C) Doctor's Attendance Fee : SGD _____ /visit X _____ = _____ (F) Hospital Charges (approx): _____
Total Estimated Bill (A + B + C + D + F) : SGD _____

Doctor/ Surgeon's Signature : _____ Date : _____

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ACPCF_v2_01 July 2017

Page 2 To be completed by Attending Doctor/ Surgeon

1. For admission to **Private Hospital**, this section must be completed by attending physician
2. For admission to **Govt/ Restructured Hospital**, please provide relevant documents such as Hospital Admission Form or the Hospital Financial Counselling Form

Inpatient / Day Surgery Emergency Letter Of Guarantee

EMERGENCY ADMISSIONS WHERE PRE-CERTIFICATION IS NOT CONDUCTED BY AON CARE

- Admission via the A&E Dept and
- Same day admission following specialist visit

EMERGENCY ADMISSION

Member calls Aon Care Centre 24/7 Hotline at **+65 6225 2333** for Emergency LOG

UPON DISCHARGE

Settle any amount due to the Hospital after deduction from Medisave account, for any non-claimable expenses

UPON ADMISSION

Sign the Medisave Form and/or Shield Authorisation Form upon admission (for PR & S'porean)

POST DISCHARGE

LOG process in previous page

Aon Care Centre will reimburse to Member.

- Any cash portion payable via GIRO
- Claimant Medisave Account
- Claimant Medishield Account

Aon Care Centre will send Explanation of Benefits to Member via email.

Reimbursement will be credited directly to your bank account within the next **3-5 working days**

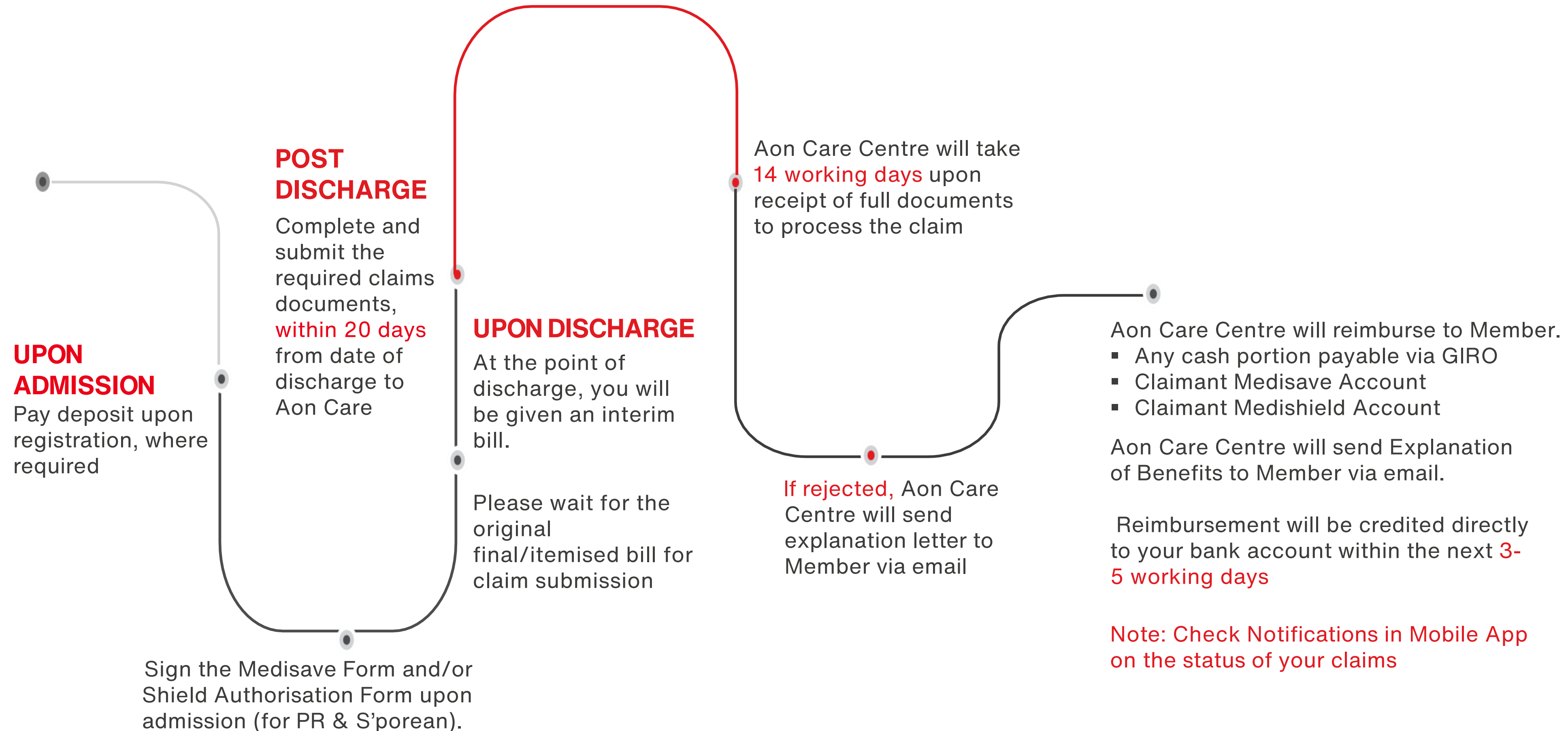
Note: Check Notifications in Mobile App on the status of your claims

Aon Care Centre checks for member eligibility, then issue LOG directly to Hospital, up to S\$10,000

Note: Claims are typically processed within 6 to 8 weeks of full documentation being submitted. Claims are reimbursed according to the policy limits and associated terms and conditions.

Inpatient / Day Surgery

Reimbursement Method



Inpatient / Day Surgery

Documents Required for Claim Submission

Aon Care will require the following claims documents for assessment, submission via Aon Care mobile app/portal:

Documents	Singapore Restructured Hospital	Singapore Private/Overseas Hospital
▪ Duly completed Aon Care Group Hospital & Surgical Claim Form	✓	✓
▪ Original part 3 of claim form duly completed by attending physician	✗	✓
▪ Copy of Inpatient Discharged Summary / Ambulatory Form / Pre-Admission Form	✓	✗
▪ Original Hospital Final Detailed Bills (Hospital will only sent to your residential address approx. 4 to 6 weeks after date of discharge)	✓	✓
▪ Original pre & post-hospital bills	✓	✓

IMPORTANT NOTES:

1. Please make sure that the documents submitted are in full view.
2. Insurer reserves the rights to obtain additional information/documents (whenever required).

Sample Of Hospital Final Detailed Bill



Sengkang Health

SingHealth

ALEXANDRA HOSPITAL

GST REG NO. : M90368910N

Page: 1

TAX INVOICE

Final Bill

Duplicate not accepted, should always show as Final Bill

EXTERNAL ID/NRIC :
CASE NUMBER :
CUSTOMER NUMBER :
ADMISSION DATE : 31.08.2017
DISCHARGE DATE : 27.09.2017
LOCATION :
BILLING DATE : 06.10.2017

DESCRIPTION	TOTAL CHARGES BEFORE GOVT GRANT(S\$)	TOTAL AMT PAYABLE AFTER GOVT GRANT(S\$)
WARD (CLASS B2) (27.0 day(s))	6,642.00	1,944.00
DAILY TREATMENT FEE (CLASS B2) (27.0 day(s))	3,132.00	837.00
LABORATORY INVESTIGATIONS	1,639.30	445.00
X-RAY INVESTIGATIONS	124.20	43.47
SPECIALISED INVESTIGATIONS	43.40	15.19
RENAL DIALYSIS	4,291.10	2,145.55
REHABILITATIVE SERVICES	1,699.80	849.90
DRUGS / PRESCRIPTIONS / INJECTIONS	459.45	323.83
WARD PROCEDURES	278.40	112.00
CONSUMABLES	55.03	55.03
OTHER PROCEDURES	235.90	117.95
TOTAL CHARGES	18,600.58	
GOVERNMENT GRANT	11,711.66-	
AMOUNT PAYABLE BEFORE TAX		6,888.92
ADD : 7% GST		482.23
AMOUNT PAYABLE AFTER TAX		7,371.15
LESS : GST ABSORBED BY THE GOVERNMENT		482.23-
NET AMOUNT PAYABLE		6,888.92
PAYMENTS		
MEDISHIELD LIFE		6,682.25-
MEDISAVE		206.67-
		0.00
TOTAL DUE AFTER PAYMENTS		
AMOUNT DUE : MEDISHIELD LIFE		0.00
AMOUNT DUE : MEDISAVE		0.00
AMOUNT DUE :		0.00
FOR INFORMATION		Amount due should always show as "0"
MEDISAVE A/C HOLDER	CPF No	APPROVED AMOUNT
		206.67
PATIENT IS COVERED UNDER MEDISHIELD LIFE		
FOR BILLING MATTERS, PLEASE CONTACT ANGELA TAN AT 6379 4324 FOR PAYMENT AND REFUND, PLEASE CALL 6379 4322		

PAYMENT - Please pay immediately on receipt of the bill. Cheque payments should be crossed and made payable to Sengkang Health Pte Ltd. Please write the Case / Invoice Number, Payer Name and Contact Number behind the cheque and mail to Singapore Health Services Pte Ltd, Bukit Merah Central Post Office, PO Box 650, Singapore 911632. Payment can also be made at Admissions Office and Business Centre.

View Your Medisave and/or MediShield Life Claim Details Online: Login to mycpf online services with your SingPass at <http://www.cpf.gov.sg> and proceed to My Statement>>Section B>>Medisave /MediShield Life/Integrated Shield Plan Claims and Reimbursements. For more information, please visit <http://www.cpf.gov.sg>

>>FAQ>>Healthcare.

Reimbursement Information For Employers And Insurers: Reimbursement should be made to cash outlay first, followed by Medisave, then MediShield Life OR the Integrated Shield Plan. To make reimbursement to Medisave and MediShield Life, submit through internet at <http://www.cpf.gov.sg> and proceed to Employers>>Services>>Medisave/MediShield Life Reimbursement. To reimburse to an Integrated Shield Plan, please pay directly to the private insurer offering the Integrated Shield Plan.

M

Sengkang Health Pte Ltd

c/o Alexandra Hospital 378 Alexandra Road Singapore 159964

<http://www.ah.com.sg> Reg. No. 201220357K

The words 'Final Bill' must be indicated at the top of the bill.

There must not be any outstanding amount due.

6

CONTACT POINTS

AON



Contact Points

Aon Care



24/7 Hotline
+65 6225 2333



Concierge Email
aoncare@fullertonhealth.com



Online Portal

Dedicated Website:
www.aoncare.sg

Non-Medical (GTL/ GPA) Claims Enquiry



Ms. Felicia Poh
+65 6239 7526
Email : felicia.poh@aon.com

AON

QUESTIONS?



7

APPENDICES



Policy Exclusions

Applicable to GTL - Repatriation Benefit:

No benefit shall be payable under any of the following circumstances:

1. Services rendered without the authorization and/or intervention of the Appointed Service Provider.
2. Services rendered by any other party apart from the Appointed Service Provider for which no charge is usually made.
3. Medical treatment administered by the Insured Member's immediate family members or relatives, whether being a qualified medical practitioner or not.
4. Where the Insured Member has already been undergoing medical treatment at the time before the Insured Member commences his journey and the costs and expenses concerned relates to that treatment, or if the said journey was undertaken against the order or advice of a medical practitioner.
5. The Insured Member was traveling with the intention of obtaining medical treatment overseas.

Policy Exclusions

Applicable to GPA

This Policy does not cover, and We will not pay in respect of, any loss which is, directly or indirectly, caused by, a consequence of, arises in connection with or is contributed to by any of the following:

1. Declared or undeclared War or any act of War, foreign invasion, civil War, rebellion, revolution, insurrection, any military or usurped power.
2. Any illegal, willful or intentional acts, of the Policyholder or the Insured Person while sane or insane.
3. Participation in Riot, committing an assault or illegal acts

Policy Exclusions

Applicable to GHS, GMM and Outpatient Specialist

An Insured Member shall not be eligible for any benefits in respect of any fees and charges incurred for any of the following service provided to the Insured Member:

1. Pre-existing conditions that have existed at any time prior to the commencement of insurance coverage will not be payable, unless the insured person has been insured continuously for 12 months under this policy or under any other group hospital & surgical insurance issued in Singapore immediately prior to the start of the insurance coverage under this policy. A break of not more than 31 calendar days between the termination date under the Policyholder's previous insurer for Group Hospital and Surgical Insurance Policy / Self Insured Program and the Commencement Date under this Policy shall not constitute a lapse in coverage as stated in the above paragraph (not applicable to Outpatient Specialist).
2. All treatments relating to congenital anomalies and congenital sickness or anomalies or genetic defects present at or existing from the time of is birth regardless of the time of discovery of such anomalies or defects and the time of such treatment or surgical procedure for the same.
3. Self-inflicted injuries, or injuries sustained as a result of a criminal act or attempted suicide (while sane or insane); nervous and mental conditions; alcoholism or drug addiction
4. All treatments pertaining to sterilization, infertility, (including procedures done at fertility clinic, reproductive assistance clinic or reproductive medicines clinics or centres), sexual dysfunction, sex-reassignment operation or procedure, impotency and use of birth control methods; sex and growth hormone replacement therapies
5. All treatments occasioned by or resulting from pregnancy, childbirth (including diagnostic tests for pregnancy), miscarriage, abortion and all complications arising from any of the same except for non-elective miscarriage due to medical reason and ectopic pregnancy.
6. Any dental work or treatment, oral surgery, orthodontics and orthognathic surgery; temporo-mandibular joint disorder; eye examination and vision care, surgical procedure for correction of eye refraction, Laser treatment or eye, procurement or us of contact lenses or eye glasses, speech therapy
7. Any health screening related examinations, including multiphasic health screening, laboratory tests and X-rays, and screening mammograms; services (irrespective of whether there is hospital confinement) for the primary purpose of diagnosis, medical check-up, genetic screening; immunization/vaccinations, outpatient physiotherapy, procedures not generally recognized as standard medical practice such as hydrotherapy, traditional chinese medicine, acupuncture, osteopathic, podiatric, chiropractic, foot reflexology, experimental treatment and procedure under investigation.
8. All treatments for xanthelasma, scar, keloid, syringoma, acne, alopecia, cosmetic skin surgeries, inguinal hernia (except if Insured Person is more than 5 year old), hydrocele and all complication; Circumcision (except where medically necessary) or treatment relating to the same; vitamins and health supplement; house-call or office calls by Registered Medical Practitioner
9. All treatments for cosmetic and plastic surgery for the purposes of beautification and any complication arising thereof except for cosmetic and plastic surgery which are medically necessary arising from injury sustained as a result of an Accident occurring while the insured member is insured under this policy
10. All treatments for sleep apnea including sleep study, obesity , weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition or whether treatment is medically necessary.

Policy Exclusions

Applicable to GHS, GMM and Outpatient Specialist

11. All treatments for any type of sexually- transmitted disease, Acquired Immunodeficiency Syndrome (AIDS) and all illnesses or diseases caused by or related to the Human Immunodeficiency Virus (HIV); Communicable diseases requiring by law isolation or quarantine in the event of an epidemic.
12. Outpatient treatment for chemotherapy, radiotherapy, immunotherapy, kidney dialysis stem cell therapy, interferon and other biological response modifiers unless provided in the Schedule of Benefits of this Policy.
13. Rest cares, sanatoria care or special nursing care; treatment or services that are not medically necessary or reasonably required for the illness or bodily injury caused by Accident; treatments, services and supplies not recommended, approved and performed by a registered medical practitioner or which are not medically necessary for the treatment of an illness or bodily injury; administrative or other charges of a non-medical nature e.g telephone calls, referral fees or medical report fees
14. Implants (homograft, heterograft, artificial) and prosthesis, procurement of hearing aids, wheel-chairs, all forms or home aids, dialysis machine and any other hospital-type equipment; stem cell support therapy, treatment following brain death, Interferon and other biological response modifiers
15. Injuries of sickness arising directly or indirectly from insurrection, war or act of war (whether declared or undeclared), direct participation in strikes, riot or civil commotion, or full-time service in any of the armed forces including National Service under Section 10 of the Enlistment Act, Cap. 93 of the Republic of Singapore except National Service reservist duty or training under Section 14 of the Enlistment Act, Cap. 93 of the Republic of Singapore
16. Goods and Services Tax (GST) and any other Government duties or taxes levied on the medical fees and charges incurred.
17. Hospital confinement or treatments occurring and received by the insured member after the insured member ceases to be insured under this policy.

Policy Exclusions

Applicable to GP

An insured member shall not be eligible for any benefits in respect of any fees or charges incurred for any of the following services provided to the insured member:

1. Any Specialist medical treatment or service
2. Any hospital services, except treatment in an Accident and Emergency (A&E) Department in any Hospital in Singapore;
3. All health screening related examinations, including multiphasic health screening, laboratory tests and X-rays and screening mammograms
4. Neonatal services (neonates defined as infants age 1 to 14 days) and hospitalisation beginning in the first 14 days of life; and neonatal intensive care for babies of all ages
5. Treatment relating to birth control, infertility and impotency treatment; treatment occasioned by or resulting from pregnancy, childbirth (including the diagnostic test for pregnancy), miscarriage, abortion and all complications arising from any of the same
6. Any dental work or treatment, oral surgery, orthodontics and also orthonathic surgery ;temporo-mandibular joint disorder;
7. Eye examination, surgical procedure for correction of eye refraction, laser treatment of eye, procurement or use of contact lenses or eyeglasses; speech therapy; cosmetic of plastic surgery services;
8. Services (irrespective of whether there is Hospital confinement) for the primary purpose of diagnosis, medical check-up genetic health screening; immunisation, procedures not generally recognised as standard medical practice such as hydrotherapy, acupuncture, chiropractic, foot reflexology, experimental treatment and procedure under investigation;
9. Chemotherapy, immunotherapy, radiotherapy and Renal treatment;
10. All treatment including and relating to kidney dialysis and/or organ transplants;
11. Therapy for chronic hepatitis conditions;
12. Rest cares, sanatoria care or special nursing care; treatment or services that are not medically necessary or reasonably required for the illness or bodily injury caused by an accident;
13. Circumcision (except where it is medically necessary) or treatment relating to the same;
14. All vaccinations, immunization, prophylactic treatment and anti-viral therapy;
15. Sex hormones and growth hormones replacement therapies;
16. Vitamins and health supplements, unless medically required and in the presence of vitamin deficiency;
17. CT scan, ultrasound, radioisotope scan, barium studies, MRI services;
18. Physiotherapy
19. Treadmill ECG;
20. Implants, (homograft, heterograft, artificial) and prostheses; procurement of hearing aid, wheel-chairs, all forms of home aids, dialysis machine and any other hospital-type equipment;

Policy Exclusions

Applicable to GP

An insured member shall not be eligible for any benefits in respect of any fees or charges incurred for any of the following services provided to the insured member:

21. Laboratory investigations related to cancer markers, sex and growth hormones
22. Stem cell support therapy treatment following brain death, interferon and other biological response modifiers;
23. Cases treated and claimable under the basic good hospital and surgical policy
24. House-calls or office calls performed by a general practitioner outside of the site of any Panel clinic
25. Self-inflicted injuries, or injuries sustained as a result of a criminal act or attempted suicide (while sane or insane); nervous and mental conditions; alcoholism or drug addiction;
26. Congenital anomalies or genetic defects of the insured member present at or existing from the time of is birth regardless of the time of discovery of such anomalies or defects and the time of such treatment or surgical procedure for the same;
27. Treatment for xanthelasma, syringoma, scar, keloid, acne, alopecia, cosmetic skin surgeries, inguinal hernia, hydrocele and all complications arising from any of the same;
28. Treatments for sleep apnea, obesity, weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition;
29. Veneral disease, Acquired Immunodeficiency Syndrome (AIDS), AIDS related complexes and all illnesses or diseases associated with the Human Immunodeficiency Virus (HIV);
30. Injuries of sickness arising directly or indirectly from insurrection, war or act of war (whether declared or undeclared), direct participation in strikes, riot or civil commotion, or full-time service in any of the armed forces including National Service under Section 10 of the Enlistment Act, Cap. 93 of the Republic of Singapore except National Service reservist duty or training under Section 14 of the Enlistment Act, Cap. 93 of the Republic of Singapore.
31. The Insured Member or Insured Dependant shall not be entitled to any reimbursement for any expenses administrative or other charges of a non-medical nature in connection with the provision and/or performance of medical supplies and/or services, e.g. telephone calls or referral fees.
32. In the addition to the above, all exclusions as specified in the basic GHS policy shall also apply with the exception of the exclusion of pre-existing illnesses.

Policy Exclusions

Applicable to Dental

An Insured Member shall not be eligible for any benefits in respect of any fees or charges incurred for any of the following services provided to the Insured Member or Insured Dependent:

1. Treatment which is cosmetic in nature
2. Treatment or services not stated in the Schedule of Compensation
3. Treatment or service specified under the Optional Benefits (if opted for and stated in the Schedule of Compensation) during the first 12 months from the Effective Date of insurance of the Insured Member under this Contract Rider
4. Extra charges made for consultation outside the normal operating clinic hours.

Thank You

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