

EQ MaidSafe

Insurance Policy

IMPORTANT NOTICE

Please read this Policy carefully and if there are any ambiguous terms or areas of uncertainty or if it is not in accordance with your requirements, kindly contact EQ Insurance Company Limited.

This Policy, the Policy Schedule, any Endorsement and Memoranda shall be read as one contract and any words or expressions to which a specific meaning has been attached in any of them shall have the same meaning wherever they appear

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INTRODUCTION

Please read this Policy carefully and ensure You understand it as it sets out the terms of a legal contract between You and Us.

The Policy, the Schedule and any Endorsements issued by Us shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part shall bear the same meaning wherever it appears.

The information provided in the application form, supplementary questionnaires and any correspondences relating to the application shall form the basis of this contract. It is of utmost importance that you have fully and faithfully declared to Us everything You know or could reasonably be expected to know that is relevant to Our decision to give you the insurance. If it contains any information that is incorrect, please tell Us immediately. Otherwise, You may receive no benefit from this Policy even if a valid claim is made.

In return for having accepted Your premium, We agree to pay You the benefits for the selected plan specified on the Schedule, subject to the exclusions and conditions, clauses, definitions, endorsements contained or endorsed thereon.

If You are aware that there has been new developments or details in the Insured Maid's health or occupational or leisure pursuits not conveyed to Us before We confirmed acceptance of Your application, please notify Us immediately.

DEFINITIONS

These terms, wherever used in this Policy, are defined as follows:

Accident / Accidental	An external event or occurrence which is unintended, sudden, fortuitous and unforeseen that solely & independently results in bodily injury and not caused by any disease or illness.
Age	The Insured Maid's current age, as of last birthday.
Chinese Physician	<p>A person engaging in the practice of traditional Chinese medicine and/or acupuncture, who is duly licensed or registered to do so according to the laws and regulations applicable in the geographical area of his/her practice.</p> <p>The Chinese Physician cannot be You, Your business partner or agent, Your employer or employee, or a person related to You by blood, marriage or adoption.</p>
Chiropractor	<p>A legally licensed practitioner in chiropractic medicine who is registered and can practice within the scope of their license under the laws of the country.</p> <p>The Chiropractor cannot be You, Your business partner or agent, Your employer or employee, or a person related to You by blood, marriage or adoption.</p>
Co-payment	The portion of the expenses that needs to be borne by the Policyholder as stated in the Schedule after applying the Pro-ration Factor (where applicable).
Day Surgery	Surgery that is scheduled and performed and is carried out by a surgeon but not on an inpatient basis.
Doctor	<p>A person qualified by a medical degree and duly licensed or registered to practice western medicine and who, in rendering treatment, is practicing within the scope of his/her licensing and training in the geographical area of practice.</p> <p>The Doctor cannot be You, Your business partner or agent, Your employer or employee, or a person related to You by blood, marriage or adoption. Any reference to "Doctor" in this Policy shall mean, wherever appropriate, a General Practitioner and/or Specialist.</p>
Effective Date	The commencement date of the Policy stated on the Schedule.
Endorsement	An authorised amendment issued by Us to confirm and record changes to the terms and conditions of the Policy.
General Practitioner	<p>A person registered and legally qualified by a medical degree in western medicine and authorised by the medical licensing authority of that country to provide general medical care. This should cover a variety of medical problems in patients of all ages. This often includes referring patients to an appropriate Specialist.</p> <p>The General Practitioner cannot be You, Your business partner or agent, Your employer or employee, or a person related to You by blood, marriage or adoption.</p>
Home Country	The country of which the Insured Maid is a citizen.
Hospital	<p>A legally constituted establishment operated pursuant to the laws of the country in which it is based, which holds a license as a Hospital (if licensing is required in the state or government jurisdiction), and meets the following requirements:</p> <ol style="list-style-type: none">Operates primarily for the reception, medical care and treatment of sick, ailing or injured persons as in-patients.Provides full-time nursing service by and under the supervision of a staff of nurses.Supervised by a staff of Doctors at all times.Maintains organised facilities for the medical diagnosis and treatment of such persons, and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by the establishment. <p>and Hospital shall not include the following:</p> <ol style="list-style-type: none">A mental institution; an institution confined primarily to the treatment of psychiatric disease including subnormality; the psychiatric department of a Hospital.A clinic; place for the aged; a rest or convalescent home or similar establishment, and is not other than incidentally a place for drug addicts or alcoholics.

	<p>iii. Health hydro or nature cure clinic; a special unit of a Hospital used primarily as a place for nursing, hospice, rehabilitation, extended-care facility, or a community Hospital.</p>
Hospitalisation	Being confined in a Hospital as a registered inpatient because of a medical necessity and on the recommendation of a Doctor. It must be a continuous 6 hours period for which the Hospital makes a charge for room and board for the treatment of Injury or Illness.
Illness/Sickness	Any sudden and unexpected pathological deviation from the normal healthy state not caused by an Accident, is marked by interruption, cessation or disorder of body functions, systems or organs as confirmed by a Doctor.
Injury	Physical bodily Injury which is caused solely and directly by an Accident and not by physical impairment, sickness, disease or anything which happens gradually and affects physical or mental health.
Insured Maid	The foreign domestic helper/worker as specified in the Policy Schedule.
Loss of Use	Complete severance or permanent functional disablement in terms of physical incapacity or disability and not in terms of professional or occupational incapacity or disability.
Loss of Hearing	Total and irrecoverable Loss of Hearing which is beyond the remedy by surgical or other treatment.
Loss of Limb	Complete severance or irrecoverable loss of use of a hand at/or above the wrist or a leg, or the total and permanent functional disablement of an entire hand, arm, or leg.
Loss of Sight	Total and irrecoverable loss of sight of an eye rendering the Insured Maid absolutely blind in that eye beyond remedy by surgical or other treatment as certified by a registered fully qualified ophthalmic specialist.
Loss of Speech	The disability in articulating any three of the four sounds which contribute to the speech such as the labial sounds, the alveolobial sounds, the palatal sounds and the velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in aphasia.
Medically Necessary	<p>A medical treatment, service, and/or supply which are:</p> <ol style="list-style-type: none"> pursuant to an order of a Doctor; consistent with the diagnosis and customary medical treatment for an Illness or Injury, in accordance with generally accepted medical practice in Singapore; in accordance with the standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits; not for the convenience of the Insured Maid or the Doctor; not of an experimental, investigation or research nature, preventive or screening nature; and not preventive, screening or health enhancement (including but not limited to dietary replacement or supplement) in purpose.
Per Annum	The total aggregate liability shall not exceed the annual limit as stated in the Policy Schedule. When the annual limit has been maxed, no further benefits shall be payable for the remainder of the Policy Year.
Per Disability	All medical conditions resulting from the same cause, including any and all complications arising therefrom or closely related thereto, except that after 30 days following the latest discharge from Hospital or Surgery, any subsequent disability from the same cause shall be considered as a new disability.
Permanent Disablement	<p>Injury which:</p> <ol style="list-style-type: none"> falls into one of the categories listed in the Table of Compensation; and having lasted for a continuous period of twelve (12) calendar months from the date of the Accident, entirely prevents the Insured Maid from engaging in gainful employment of any and every kind for the remainder of her life, and is medically certified that there is no hope of improvement.
Policyholder	The person in the Schedule as the employer.

Policy Year	Coverage start and end date (both dates inclusive) as stated in the Schedule or discharged date by MOM, whichever is earlier.
Pre-existing Condition	Any condition, including any symptoms prior or complications thereafter which: <ul style="list-style-type: none"> a) You or the Insured Maid knew about before the Effective Date; or b) the Insured Maid has received diagnosis, medical treatment or prescribed drugs within 12 months before the Effective Date; or c) the Insured Maid is under medical investigation and awaiting result before the Effective Date; or d) the Insured Maid has been advised to get medical treatment by a Doctor within 12 months before the Effective Date, or e) You or the Insured Maid should reasonably have been aware, based on normal medically accepted pathological development of the Injury, Illness or disease.
Pro-ration Factor	The percentage applied on the eligible medical expenses subject to the maximum limit stated in the Schedule in the event the Insured Maid is admitted into a ward higher than her entitlement or to private Hospital.
Reasonable and Customary Charges	Any expense or fee which is charged for treatment, medical services and/or supplies which is in accordance with the standards of good medical practice and in Our opinion does not: <ul style="list-style-type: none"> i. exceed the usual level of charges for similar treatment, medical services and/or supplies in Singapore; and ii. include fees or charges that would not have been incurred had no insurance existed.
Schedule	The document containing details of the Policyholder, Insured Maid, type of cover selected, premium payable, and Policy Year. The Schedule forms part of the Policy.
Specialist	A person who has the necessary qualifications and expertise to practice as a recognised specialist of diagnostic techniques, treatment and prevention, in a particular field of medicine, including but not limited to psychiatry, neurology, paediatrics, endocrinology, obstetrics, gynaecology, orthopaedic, optometry and dermatology. The Specialist cannot be You, Your business partner or agent, Your employer or employee, or a person related to You by blood, marriage or adoption.
We / Our / Us / The Insurer	EQ Insurance Company Limited.
You / Your	The Policyholder named in the Schedule.

MAIN COVER - DESCRIPTION OF BENEFITS

This Policy will cover You and the Insured Maid financially when an event happens during the Policy Year and while the Insured Maid is performing the customary duty of a domestic worker as per the Ministry of Manpower (MOM)'s work permit guidelines.

The benefits will be paid up to the maximum limits described in the Schedule and geographical coverage is 24 hours a day within Singapore, except for Section 2A and 2B which is worldwide cover, or otherwise stated.

Section 1 **Letter of Guarantee to Ministry of Manpower**

We will provide a letter of guarantee (to be issued separately) on Your behalf to replace the sum of five thousand (S\$5,000) Singapore dollars which You are required to deposit with MOM as a form of security for the employment of the Insured Maid as stated in this Policy. We will undertake to be the principal debtor to pay MOM on demand of the above sum.

With providing the benefit under Section 1, you agree to abide by the following conditions:

1. All terms and conditions stated in the Letter of Indemnity that is attached to the Certificate of Insurance.
2. You will, at all times, compensate us against all claims, payments, demands, action suits, proceedings, losses, liabilities costs and expenses which may be taken or made against us or which we may suffer under the issuance of the letter of guarantee.
3. You will pay us all costs, charges and expenses including legal costs we may suffer in enforcing or trying to get payment of all or any part of the money agreed to be paid. This includes any legal proceedings we may begin against you.
4. This counter indemnity will stay in force (even when the security bond ends) until we have no further liability under the security bond.
5. You will repay us the payment we have made under the letter of guarantee to MOM within 10 days. If full payment is not received after 10 days, you will repay us the payments plus interests at a rate of 6% per annum calculated from the date of demand by us until the date we receive full payment from you.
6. Any demand we make can be given in writing to you by our servant, agent or employee or by our solicitors either serving it personally on you or sending it by post to you at your last known address.
7. This section will not be in force unless and until the Counter Indemnity documents have been correctly executed, delivered to and accepted by us.

Section 2 **Personal Accident**

If the Insured Maid sustains bodily Injury caused by an Accident within twelve (12) months resulting in death, Permanent Disablement, or incurred medical expenses, we will pay the following respectively.

Section 2A – Death

If the Insured Maid dies, We will pay the Insured Maid's estate or legal personal representative(s) up to the limit as specified in the Schedule.

Section 2B – Permanent Disablement

If the Insured Maid suffers Permanent Disablement as described in the Table of Compensation, We will pay the Insured Maid according to table, up to the limit as specified in the Schedule.

Section 2C – Medical Expenses

If the Insured Maid sustains bodily Injury which requires outpatient medical treatment at a certified / registered clinic or hospital, We will reimburse the Reasonable and Customary Expenses incurred up to the limit as specified in the Schedule Per Annum.

It is extended to include:

- a) Dental treatment or surgery where the procedure is medically necessary to treat or restore the Insured Maid's sound natural teeth as a result of an Injury, up to 10% of the limit specified in the Schedule.
- b) Treatment for Physiotherapy, up to the limit of S\$150 per Accident and must be referred by the attending Doctor.
- c) Treatment by licensed Chinese Physician and Chiropractor, up to the limit of S\$100 per Accident.

Additional Conditions:

We will cover the Insured Maid starting from the date she arrives in Singapore directly for Your employment, or from the date her new work permit is effective for the purpose of her employment with You when Your Insured Maid is transferred to Your employment.

We will cease cover from the date she leaves Singapore upon completion of her employment with You, or where she is changing to a new employer to the date her new work permit is effective for purpose of her employment with her subsequent employer.

Exclusions for Section 2:

We will not pay when:

1. the Permanent Disablement or death is caused directly or indirectly by Illness. For example, we will not pay a claim if the Insured Maid dies from a heart attack or a stroke.
2. the Permanent Disablement or death is caused directly or indirectly by any physical disability which existed before the Effective Date.
3. the Insured Maid travels outside Singapore, including travelling back to Home Country, unless such overseas travel is required and she is travelling together with You. (Only applicable to Section 2C).

TABLE OF COMPENSATION

Description		Percentages of The Sum Insured
1	Loss of both limbs	100%
2	Total and permanent loss of sight of both eyes	100%
3	Total and permanent paralysis	100%
4	Injuries resulting in being permanently bedridden	100%
5	Any other injury causing permanent total disablement from attending to employment or occupation of any and every kind	100%
6	Eye: Total and permanent loss of	- whole eye, sight of
		- sight in, except perception of light
		- lens
7	Loss of one limb	50%
8	Loss of four fingers and thumb of one hand	50%
9	Loss of four fingers	40%
10	Loss of thumb	- both phalanges
		- one phalanx
11	Loss of index finger	- three phalanges
		- two phalanges
		- one phalanx
12	Loss of middle finger	- three phalanges
		- two phalanges
		- one phalanx
13	Loss of ring finger	- three phalanges
		- two phalanges
		- one phalanx
14	Loss of little finger	- three phalanges
		- two phalanges
		- one phalanx
15	Loss of metacarpals	- first or second (additional)
		- third, fourth or fifth (additional)
16	Loss of toes	- all
		- great, both phalanges
		- great, one phalanx
17	Total and permanent loss of hearing	- both ears
		- one ear
18	Total and permanent loss of speech	50%

Note:

1. Where the injury is not specified in the benefit scale above, we will adopt a percentage of disability based on the assessment by our appointed Doctor, which in our opinion is consistent with the benefit scale above.
2. If a claim is payable for loss of use of a whole part of the body, a claim for any component of that part will not be paid.
3. The total percentage payable under this Policy shall not exceed 100% of the sum insured under Section 2B during any one Policy period.

Section 3

Hospital and Surgical Expenses

We will reimburse the eligible medical expenses up to the limit stated in the Schedule less Co-payment Per Annum, as a result of an Injury or Illness sustained by the Insured Maid, provided such expenses are incurred in a Singapore Government Restructured Hospital under Class B2 or C ward. Benefits are payable only if the treatment affects the Insured Maid while she is covered under this Policy. If the treatment occurs or commences while the Insured Maid is covered, but continues or extends beyond the Period of Insurance, We will only pay benefits pertaining to the period while she was covered.

The hospital and surgical expenses will include the following:

a) Pre-hospitalisation Expenses

Charges incurred for Specialist consultation (including medication) recommended by a General Practitioner, if such charges are incurred within ninety (90) days prior to the date of Hospitalisation or Day Surgery for the same condition.

This includes charges incurred for diagnostic X-ray and laboratory fees made in a Hospital, clinic or laboratory on the recommendation of a Doctor, and A&E charges incurred within ninety (90) days prior to the date of Hospitalisation or Day Surgery for the same condition.

No benefit shall be payable if the pre-hospitalisation treatment does not lead to Hospitalisation or Day Surgery within the Policy Year.

b) Post-hospitalisation Expenses

Charges incurred for follow-up treatment by the same attending Doctor received immediately after discharge from a Hospital or Day Surgery, provided the treatment is for the same medical condition for which the Inpatient treatment or Day Surgery was required. The treatment must be received within ninety (90) days immediately following discharge from Hospital or Day Surgery.

c) Day Surgery

All medically necessary surgical procedures and related treatment provided by or on the order of a surgeon at a hospital or an out-patient medical clinic. Day Surgery excludes all non-surgical procedures and related treatment.

In the event the Insured Maid is admitted into a Private Hospital or a higher class of ward in the Singapore Government Restructured Hospital, the eligible hospital medical expenses payable under the Policy will be paid as follows, subject to the limit stated in the Schedule:

Type of Hospital	Type of Ward	Pro-ration factor
Singapore Govt Restructured Hospital	A1 Ward	50% of the eligible claim amount
	A2 Ward	60% of the eligible claim amount
	B1 Ward	70% of the eligible claim amount
Private Hospital in Singapore	All	40% of the eligible claim amount
Hospital outside Singapore	All	30% of the eligible claim amount

Additional Conditions:

Claim for overseas treatment must be on emergency basis as certified by the attending Doctor and the Insured Maid is travelling together with You at the time of incident.

Section 4

Daily Hospital Income

We will pay You the amount as specified in the Schedule for every full twenty-four (24) consecutive hours the Insured Maid is hospitalized in Singapore up to a maximum of sixty (60) days.

Section 5

Outpatient Kidney Dialysis / Cancer Treatment

If the Insured Maid is diagnosed with Kidney Disease or Cancer by a Doctor during the Policy Year which requires outpatient kidney dialysis or cancer treatment (chemotherapy and radiotherapy) in Singapore, We will reimburse the medical expenses incurred up to the limit as specified in the Schedule.

- Section 6 Repatriation Expenses**
We will reimburse the incurred expenses for repatriation in respect of:
1. Conveyance of the Insured Maid from Singapore to her Home Country following her Permanent Disablement as a result of an Injury or Illness, which is being certified by a Doctor to be medically unfit to perform her duties as a domestic helper, or
 2. Burial or cremation of the Insured Maid in Singapore and/or conveyance of body or ashes to her Home Country from Singapore.
- Additional Conditions:
1. Detailed quotation of the repatriation including medical report must be submitted and approved by Us before proceeding with the repatriation arrangement.
 2. If any expenses are not approved by Us, reimbursement of eligible expenses will be subject to Reasonable and Customary Charges determined by Us.
- Section 7 Special Grant**
If the Insured Maid dies in the course of her employment with You in Singapore, We will pay the amount as specified in the Schedule to her estate or legal personal representative. Death certificate must be provided for this section to be payable.
- Section 8 Wages and Levy Reimbursement**
If the Insured Maid is hospitalized due to an Injury or Illness and You suffer the loss of service of the Insured Maid, We will reimburse You the amount as specified in the Schedule up to a maximum of sixty (60) days based on the medical certificate (MC) issued by the Doctor.
- Additional Conditions:
1. This benefit shall be payable only if there is a claim paid under Section 3 (Hospital and Surgical Expenses) for the same period.
- Section 9 Termination and Re-hiring Expenses**
We will reimburse You up to the limit as specified in the Schedule for the agency fees incurred for terminating and replacing the Insured Maid due to her death or Permanent Disablement caused by an Accident subject to being certified by a Doctor to be medically unfit to perform her duties as a domestic helper.
- Additional Conditions:
1. Prior agreement must be obtained from Us for all such expenses and that the replacement domestic helper/worker must be employed within 30 days of the death or repatriation of the Insured Maid.
 2. The replacement foreign domestic helper/worker must have a valid work permit issued by the Ministry of Manpower.
 3. Death certificate must be provided in the event of death.
- Section 10 Insured Maid's Personal Belonging**
We will reimburse the Insured Maid up to the limit as specified in the Schedule for the loss of or damage to the Insured Maid's personal belongings which was caused by fire, water following bursting or overflowing of water tank(s), apparatus or pipe(s) or flood damage including theft accompanied by forcible and violent entry to or exit from Your home. This does not include jewelries, cash and cheques.
- Additional Conditions:
1. You or the Insured Maid must take all reasonable precautions to safeguard the belongings.
 2. We will pay a fair market value for the item (at the time of loss). This value will take into consideration normal wear and tear and depreciation.
 3. We will not pay more than the original purchase price for any lost or damaged item.
- Section 11 Liability to Third Party**
We will indemnify You up to the limit as specified in the Schedule which You are legally liable to pay as compensation for accidents resulting in:
1. Death or bodily injury to any other person;
 2. Loss of or damage to another person's property
- caused by the negligence of the Insured Maid in the course of and arising out of her employment with You in Singapore during the Policy Year.
- Additional Conditions:
1. Any other person that's not You, Your family member, business partner, employer, employee or agent.

OPTIONAL COVER (IF APPLICABLE) - DESCRIPTION OF BENEFITS

Optional A Waiver of Co-payment

We will cover your part of 25% Co-payment if the claim is admissible under Section 3 (Hospital and Surgical Expenses).

Optional B Reimbursement of Indemnity Paid to Insurer

We will cover Your liability to the Ministry of Manpower as described in Section 1 (Letter of Guarantee to Ministry of Manpower) in the event a demand is made by the Ministry of Manpower on the Letter of Guarantee; provided the conditions of the security bond were not broken as a result of your negligence, deliberate, wilful or criminal act.

You will need to pay an excess.

- a) S\$250 – If this option is purchased together with the Policy.
- b) S\$500 – If this option is purchased after and within one (1) month from the Effective Date, subject to a waiting period of thirty (30) days from the date of inclusion.

Exclusions:

We will not pay for:

- 1. any loss, claim or payment which You are aware of prior to Effective Date under this Policy.
- 2. any loss, claim or payment incurred by You after the cancellation of the Insured Maid's work permit by You.
- 3. any breach by You of the conditions of the security bond imposed by the Ministry of Manpower.
- 4. any loss, claim or payment arising out of any circumstances caused directly or indirectly by You and/or Your family members' willful, criminal or negligent act.

GENERAL EXCLUSIONS

The exclusions listed below applies to the whole Policy (including Optional Cover). We will not pay for the claim arising directly or indirectly from the following exclusions including related expenses under this Policy.

1. Pre-existing Condition, unless the Insured Maid has been continuously insured for at least 12 months under another maid policy in Singapore and there was no break in cover between the last policy and this Policy.
2. Treatment arising from pregnancy, childbirth, abortion or termination, and any complications arising therefrom; Investigations and treatment relating to birth control, infertility, sub-fertility, assisted conception, impotence or any contraceptive treatment, erectile dysfunction, ligation, and any complications arising therefrom.
3. Congenital or hereditary conditions or birth defects, including any complications arising therefrom.
4. Cosmetic (aesthetic) or plastic surgery or treatment, or any treatment which relates to or is indeed because of previous cosmetic treatment, except for reconstructive surgery if:
 - (i) it is carried out to restore function or appearance after an Accident or following surgery for a medical condition, (provided that the Accident occurs while the Insured Maid is covered under the policy); and
 - (ii) it is done at a medically appropriate stage after the Accident; and
 - (iii) the cost of the treatment is approved by Us in writing before it is done.
5. Sex change operations and hormone replacement related, including other type of treatment or surgery which arises from or is directly or indirectly made necessary, regardless of whether treatment is Medically Necessary.
6. Dental treatment and problems including but not limited to crowning, dentures, bridges tooth implantation or re-implantation, orthognathic surgery, bruxism, temporo-mandibular joint disorder, and oral and maxillofacial surgery, unless it is necessary to treat or replace sound natural teeth as a result of an Injury.
7. Expenses incurred after the 7th calendar day from being certified to be medically fit for discharge from inpatient treatment and assessed to have a feasible discharge option by a Doctor.
8. Health screening related examinations; Services (regardless of whether there is hospital confinement) for the primary purpose of diagnosis, medical check-up, genetic screening; Any treatment of a preventive nature including but not limited to immunisation/vaccinations; Eye examination or surgical procedure for correction of eye refraction, this includes contact lenses or eyeglasses.
9. Optional items that are outside the scope of treatment include:
 - a) Non-medical items including but not limited to, parking fees, administration and registration fees, personal care and hygiene products, regardless of whether it is prescribed by Doctor or otherwise necessarily.
 - b) Treatment for obesity, weight reduction or weight improvement regardless of whether it is caused (directly or indirectly) by a medical condition or whether treatment is Medically Necessary; Sleep test for diagnostic purposes unless it is followed by surgery.
 - c) Health supplements or vitamins, dietary replacement, and skincare products whether purchased over the counter or prescribed by a Doctor.
10. Outpatient rehabilitation/treatment including but not limited to physiotherapy, occupational therapy, speech therapy (unless recommended by the attending Doctor during his/her Hospitalisation); Treatment by licensed Chinese Physician; Chiropractor; Hydrotherapy; Osteopathic; Podiatric; Dietician; Naturopath; Homeopath; Foot reflexology; Alternative or complementary treatments.
11. Procurement of medical aids including but not limited to braces, prostheses, hearing aids, wheelchair, walking or home aids of any kind, blood pressure monitor, dialysis machine, breathing and respiratory appliances, sun lamps, or heat and cold compress; stem cell support; homograft; heterograft and artificial organ.
12. Home or outpatient nursing or palliative care, ambulatory care, rest cures or sanatoria care, convalescent care, hospice care, and any stay in a healthcare establishment for social or non-medical reasons.
13. Engaging in hazardous sports including but not limited to any winter sports (such as skiing or snowboarding), mountaineering and rock climbing, any underwater activities involving underwater breathing apparatus, aerial activities (such as taking a helicopter tour, paragliding), and motor sports (such as motorcycle racing and motor car racing).

14. Treatment for any medical condition or Injury arising from any malicious, wilful, illegal acts by employer or employer's family members; Treatment for conditions or Injuries arising from criminal acts by the Insured Maid.
15. Treatment for any medical condition or Injury arising directly or indirectly resulting from nuclear fallout, terrorism, war and related risks.
16. Any Sexually transmitted infections/disease (STI/STD), Human Immunodeficiency Virus (HIV) and/or any HIV related Illness including Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) and/or any mutant derivatives or variations however caused.
17. Treatment for or in respect of any medical condition or injury arising from addiction to a controlled drug (including illicit drugs).
18. Repeat treatment after the first treatment from the Hospital for each of the following categories will not be covered:
 - a. Any medical condition or injury arising from non-controlled drug addiction or addiction to alcohol.
 - b. Any medical condition or injury arising from participation in civil commotion, riot or strike.
 - c. Self-inflicted injuries and attempted suicide, whether or not arising from the same injury or suicide.
 - d. Any medical condition or injury for psychiatric, mental or nervous disorders, including but not limited to insanity, depression, and anxiety.

GENERAL CONDITIONS

The conditions listed below apply to the whole Policy. Your insurance cover under this Policy is valid only if You follow these conditions.

(1) **The Contract**

This policy is evidence of the contract between You and Us from the day the Policy commences.

We will provide the insurance to You according to the terms set out in this Policy, provided You pay the premium when due and We agree to accept it. The General Conditions which appear in this Policy or in any Endorsement forms part of the contract and must be complied with.

It is important that You:

- (i) read the whole Policy to make sure that You understand the protection that You have just bought; and
- (ii) are aware of the limits on the amounts We will pay You.

(2) **Interpretation**

This Policy including Your proposal form, Schedule and any Endorsement and amendment, shall be read together as one contract and any one word or expression to which a specific meaning has been attached, shall, unless the context otherwise requires, bear that specific meaning wherever it may appear.

No change in this Policy shall be valid unless approved by Us, and evidenced by an Endorsement reflecting the amendment on the Policy by Us.

(3) **Duty of Disclosure**

The accuracy of the information provided to Us will form the basis of and be part of the contract. Before You enter into the Insurance contract and during the Policy Year, You must tell Us everything You know or could reasonably be expected to know which will affect Our decision on the coverage, any additional premium being payable, and the terms of the insurance. If You are uncertain about whether a fact is relevant or not, You must tell Us about it. We will acknowledge receipt of acceptance of material information by stating these on the Policy Schedule. If such information is not disclosed to Us or if there is any concealment, including failure to disclose material facts during claim, We may:

- (i) reduce the amount payable for the claim under this Policy; or
- (ii) refuse to pay the claim that have or may arise; or
- (iii) cancel Your insurance policy from inception.

(4) **Eligibility**

Insured Maid eligible for cover under this Policy:

- (i) age sixty-four (64) years old and below.
- (ii) must be a foreigner holding a valid work permit and is residing in Singapore with the Policyholder.

(5) **Commencement of Cover**

If an eligible Insured Maid is hospitalized on the first day of the Period of Insurance (i.e. the policy commencement date), coverage shall only take effect on the day following his / her discharge from the Hospital. In the event of multiple consecutive hospitalizations, coverage shall commence only after the final discharge and certified by the attending doctor as fully recovered.

(6) **Policy Plan Upgrading**

Any request for change of plan must be in writing and subject to our approval, terms & conditions. For an Illness or Injury occurring during the period of twelve (12) months after the date of upgrading, We shall not be liable beyond the limits applicable for the previous Policy Year, if such Injury directly or indirectly arises or results from a condition occurring or sustained during the previous Policy Year.

(7) **Misstatement or Fraud**

We shall have no liability to pay any benefit under this Policy if You or the Insured Maid:

- (i) fails to fully and truthfully disclose to Us all material information known (or which could reasonably be expected to be known) before inception of this Policy and upon each renewal;
- (ii) fails to properly observe and fulfill the terms and conditions of this Policy;
- (iii) makes any untrue statement;
- (iv) omit, suppress or incorrectly state any material information affecting the risk;
- (v) makes any claim that is fraudulent or exaggerated, or make any false declaration or statement in support of a claim.

- (8) **Reasonable Care**
You and the Insured Maid must take all reasonable precautions to safeguard the Insured Maid against any loss covered under this Policy.
- (9) **Premium Warranty**
(i) Notwithstanding anything herein contained but subject to clause (ii) hereof, it is hereby agreed and declared that the premium due must be paid and actually received in full by Us (or the intermediary through whom this Policy was effected) on or before the inception date of the coverage under the Policy, Renewal Certificate, Cover Note or Endorsement.
(ii) In the event that the total premium due is not paid and actually received in full by Us (or the intermediary through whom this Policy was effected) on or before the inception date referred to above, then the Policy, Renewal Certificate, Cover Note and Endorsement shall not attach and no benefits whatsoever shall be payable by Us. Any payment received thereafter shall be of no effect whatsoever as cover never attached on the Policy, Renewal Certificate, Cover Note and Endorsement.
- (10) **Changes in Circumstances**
You shall give Us immediate written notice either via post or electronic mail (e-mail) of any changes which is likely to result in any material increase in hazard to Us. Failure to do so shall entitle us, in the event of a claim, to repudiate such a claim or at our discretion, adjust the benefits payable.
- (11) **Change of Terms and Conditions**
We reserve the right to amend the terms and provisions of this Policy by giving You thirty (30) days prior written notice either via post or electronic mail (e-mail) of such change to Your last known correspondence address in Our records. No alteration to this Policy shall be valid unless approved in writing by Us and reflected in an endorsement. No intermediary has the authority to amend or waive any of the terms and conditions of this Policy.
- (12) **Cancellation / Termination of Cover**
We can cancel the Policy by giving You seven (7) days written notice either via post or electronic mail (e-mail) to Your last known correspondence address in Our records. You may cancel this Policy at any time by giving seven (7) days written notice to Us. We will cancel Your Policy from the date We receive the Letter of Discharge from the Ministry of Manpower.

The refund of premium (if any) will be based on the following percentage, provided no claim has arisen during the Policy Year.

	Percentage of Refund of the Policy Premium			
	Within 90 days	91 to 180 days	181 to 365 days	After 365 days
14-month Policy	60%	30%	NA	NA
26-month Policy	60%	30%	20%	NA

Full refund will be given for Policy cancellation due to termination of In-Principle-Approval issued by the Ministry of Manpower.

We provide an additional 2-month cover under Your Policy, as required by the Ministry of Manpower, at no additional premium. When Your Insured Maid's work permit expires, there is no refund of any premium from Us.

- (13) **Claims Procedures**
Written notice of claim must be provided to Us within thirty (30) days after the occurrence of any event which may give rise to a claim under this Policy. This in its entirety is a condition precedent to any liability on the part of The Insurer under the policy, and failure to comply with this in respect of any incident and/or occurrence will result in the Insured Maid being denied indemnity under the policy.

All claims shall be made on our prescribed form and submitted to Us together with all original documentation, itemised bills, receipts and prescriptions. All information required for assessing the claim shall be furnished at Your own expense.

We shall have the right and the opportunity through Our appointed Doctor to examine the Insured Maid whenever and as often as may be reasonably required within the duration of any claim. We will bear the expenses incurred in such examinations, unless the claim is proven to be invalid, in which case We shall be entitled to recover all the expenses incurred from You.

If the Insured Maid fails to cooperate with Us in our admission of the claim, we may at Our discretion, terminate the claim. Such cooperation includes, but is not limited to, providing any information or documents needed to determine

whether benefits are payable. In the course of claims investigation and where required, We may request for a medical report from the attending Doctor. Any expenses incurred for such medical report shall be borne by You.

(14) **Payment of Benefits**

Any benefits payable under this Policy shall be paid to the Hospital, You or the Insured Maid. In the event of the Insured Maid's death, we will pay to her estate or her legal personal representative, whichever is applicable. The Insured Maid or Your receipt of any benefit payable under this Policy shall in all cases be deemed final and complete discharge of all Our liability.

In accordance with the plan type, eligible expenses shall be computed in the following sequence:

- (a) apply Pro-ration Factor (where applicable);
- (b) reduce proportionately by the Co-payment; then
- (c) subject the balance amount to the benefit limits (where applicable).

(15) **Legal / Beneficial Owner**

We shall treat You as the absolute legal and beneficial owner of this Policy and shall not be bound to recognise any equitable or other claim interest in this Policy.

(16) **Third Party Liability**

We have the right to proceed recovery at Our expense against any person or organization who may be responsible in the Insured Maid's or Your name for any occurrence of an event giving rise to a claim under this Policy. You and the Insured Maid shall fully and faithfully co-operate and provide Us with reasonable assistance including but not limited to, executing and delivering any instruments and/or documents one knows or ought to know.

(17) **Governing Law**

This Policy shall be governed by and interpreted in accordance with the laws of Singapore.

(18) **Sanction Limitation and Exclusion**

We shall not be deemed to provide cover and We shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose Us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.

(19) **Rights of Third Parties**

A person or entity who is not a party to this Policy shall have no right under the Contracts (Rights of Third Parties) Act 2001 (Cap.53B) to enforce any of its terms.

(20) **Currency**

All claims will be paid in Singapore dollars. Amount incurred in a foreign currency shall be payable in Singapore dollars based on the prevailing currency exchange rate determined by Us.

(21) **Non-Assignment**

This Policy is not assignable. We will not recognise or be affected by notice of any trust, charge, lien, assignment or other dealing with this Policy.

(22) **Legal Proceedings**

No action at law or in equity shall be brought under this Policy against Us prior to the expiration of sixty (60) days after the proof of claim has been filed in accordance with the requirements of this Policy nor shall such action be brought at all unless it is brought within two (2) years from the expiration of the period within which proof of claim is required under this Policy. If We shall disclaim liability for any claim under this Policy and no action has within twelve (12) calendar months from the date of such disclaimer been commenced against Us, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable.

(23) **Dispute Resolution / Mediation / Arbitration**

Any dispute arising out of or in connection with the decision made based on the Policy that We cannot reach an agreement, shall be referred to Financial Industry Disputes Resolution Centre Ltd ("FIDReC"). This applies as long as the dispute can be brought before FIDReC.

If the dispute cannot be brought before or dealt with by FIDReC, it will be referred to and finally resolved by arbitration in Singapore in accordance with the Arbitration Rules of the Singapore International Arbitration Centre ("SIAC Rules") for the time being in force in English.

(24) **Clerical Error**

If a clerical error or other mistake occurs, that error will not deprive You of benefits under the Policy nor will it create a right to benefits. If You make a clerical error (including but not limited to, sending Us inaccurate information regarding addition or termination of coverage under the Policy), We will not make any retroactive adjustments beyond a 60-day period.

(25) **Other Insurances** (Not applicable to Section 2A and 2B (Death & Permanent Disablement))

If at the time of any claim arises under this Policy, there be any other insurance covering the same liability, We shall not be liable to indemnify the Insured, except in respect of any excess beyond the amount which would have been payable under such other insurance. It is hereby warranted that the Insured should report the claim to the other insurer and provide such other insurance Policy upon Our request.

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 the Company or visit the GIA/LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).



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