



**Liberty Insurance Pte Ltd**  
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The EZ way to  
**show your**  
**employees**  
you care

**EZCare**



## A Better Health Insurance Experience for SMEs

EZCare is an Employee Benefits starter kit for companies with headcounts as low as 3 employees. It has simple health plans which are easy to understand and administer while providing access to best in class health care services.

## Benefits At A Glance

- Get an instant quote using our table rates.
- Skip the hassle of completing multiple forms.
- Outpatient claims submission through mobile application and online web portal.
- No surgical sub-limits or tables.
- Concierge service for Specialist consultations and Inpatient procedures.

## Summary of Benefits

| Description of Benefits<br>(Hospitalization and Surgery)   | Plan 1   | Plan 2                         | Plan 3                          | Plan 4                               |
|--|--|--------------------------------|---------------------------------|--------------------------------------|
| Annual Overall Limit<br>(Max. amount per person per policy year)   | S\$300,000   | Not Applicable                 | Not Applicable                  | Not Applicable                       |
| Room & Board Eligibility   | Standard 1 Bed<br>Private Hospital                           | 1 Bed<br>Restructured Hospital | Shared Room<br>Private Hospital | Shared Room<br>Restructured Hospital |
| Room & Board<br>Intensive Care Unit<br>In Hospital Physician Visit<br>Day Surgery<br>Surgeon's Fee<br>Theatre Fee<br>Anaesthetist Fee<br>Hospital Miscellaneous Services<br>Minor Surgical Procedure in an Outpatient Clinic<br>Local Ambulance Services<br>Medical Report Fee (only if claim is eligible for cover) | As charged   | S\$25,000<br>per disability    | S\$20,000<br>per disability     | S\$15,000<br>per disability          |
| Pre-Hospitalization Consultation<br>(Within 90 days preceding hospital admission)<br>Pre-Hospitalization Diagnosis Services<br>(Within 90 days preceding hospital admission)<br>Post-Hospitalization Consultation and Treatment<br>(Within 180 days following discharge from hospital)                               | As charged   | S\$2,000<br>per disability     | S\$1,500<br>per disability      | S\$1,000<br>per disability           |
| Emergency Outpatient Accidental Treatment<br>(Within 24 hours of accident)   | As charged   | S\$2,000<br>per disability     | S\$1,500<br>per disability      | S\$1,000<br>per disability           |
| Emergency Dental Treatment<br>(Within 24 hours of accident)  | As charged   | S\$2,000<br>per disability     | S\$1,500<br>per disability      | S\$1,000<br>per disability           |
| Surgical Implants  | S\$5,000<br>per disability                                   | S\$2,000<br>per disability     | S\$1,500<br>per disability      | S\$1,000<br>per disability           |
| Nursing at home  | As charged<br>(Max. 26 consecutive<br>weeks per policy year) | Not covered                    | Not covered                     | Not covered                          |



## Summary of Benefits

| Description of Benefits<br>(Hospitalization and Surgery)  | Plan 1                                     | Plan 2                       | Plan 3                       | Plan 4                             |
|---|--|------------------------------|------------------------------|------------------------------------|
| Lodger Benefit<br>(For Insured Child below age 12)  | Covered<br>(Max. amount<br>S\$100 per day) | Not covered                  | Not covered                  | Not covered                        |
| Emergency Medical Evacuation  | Covered                                    | Covered                      | Covered                      | Covered                            |
| Repatriation/Local Burial<br>(Cover for death in home country is excluded)  | Covered                                    | Covered                      | Covered                      | Covered                            |
| Special Grant   | S\$10,000                                  | S\$7,500                     | S\$5,000                     | S\$5,000                           |
| Hospital Cash Benefit (per day) of Hospital Confinement in<br>Government/Restructured Hospital <ul style="list-style-type: none"> <li>B1 Ward</li> <li>B2/B2+ Ward</li> <li>C Ward</li> </ul> | S\$200<br>S\$250<br>S\$300                 | S\$100<br>S\$200<br>S\$300   | S\$100<br>S\$200<br>S\$300   | Not Applicable<br>S\$150<br>S\$200 |
| Miscarriage<br>(Due to accident)  | As charged                                 | As charged                   | As charged                   | As charged                         |
| Outpatient Kidney Treatment   | S\$75,000<br>per policy year               | S\$20,000<br>per policy year | S\$15,000<br>per policy year | S\$10,000<br>per policy year       |
| Outpatient Cancer Treatment   | S\$75,000<br>per policy year               | S\$20,000<br>per policy year | S\$15,000<br>per policy year | S\$10,000<br>per policy year       |
| Best Doctors Service  | Covered                                    | Not Covered                  | Not Covered                  | Not Covered                        |

The information provided here is a summary. Please refer to the actual policy wordings for the terms and conditions. More information about EZCare is available on our website [www.libertyinsurance.com.sg](http://www.libertyinsurance.com.sg).

### General Conditions:

1. A Letter of Guarantee will be provided if medical procedure is pre-authorized. 20% co-insurance applies if medical procedure is not pre-authorized.
2. Geographic Cover: Worldwide cover up to 60 days from date of travel.
3. If the Insured is admitted to a ward or Hospital higher than what he is entitled to under the policy, we will pay 60% of eligible medical expenses subject to the maximum stated in the policy schedule.

#### Emergency Treatments:

Full cover

#### Non-Emergency Treatments:

USA, Canada and Japan: 50% co-insurance

Other countries: 30% co-insurance

Malaysia: No co-insurance

## Annual Premium Table (Hospitalization and Surgery)

| Age Next Birthday       | Plan 1      | Plan 2      | Plan 3      | Plan 4      |
|-------------------------|-------------|-------------|-------------|-------------|
| Below 18                | S\$715.00   | S\$350.00   | S\$340.00   | S\$160.00   |
| 18 to 24                | S\$715.00   | S\$350.00   | S\$340.00   | S\$160.00   |
| 25 to 29                | S\$715.00   | S\$350.00   | S\$340.00   | S\$160.00   |
| 30 to 39                | S\$881.90   | S\$389.52   | S\$377.14   | S\$180.95   |
| 40 to 44                | S\$988.57   | S\$420.00   | S\$422.86   | S\$202.86   |
| 45 to 49                | S\$1,297.00 | S\$621.00   | S\$555.00   | S\$266.00   |
| 50 to 54                | S\$1,653.75 | S\$804.30   | S\$707.70   | S\$368.55   |
| 55 to 59                | S\$2,139.90 | S\$999.60   | S\$915.60   | S\$491.40   |
| 60 to 64                | S\$2,916.90 | S\$1,304.10 | S\$1,247.40 | S\$649.95   |
| 65 to 69 (Renewal Only) | S\$4,375.35 | S\$1,738.80 | S\$1,871.10 | S\$897.75   |
| 70 to 75 (Renewal Only) | S\$5,347.65 | S\$2,390.85 | S\$2,286.90 | S\$1,097.25 |
| 76 to 80 (Renewal Only) | S\$7,001.40 | S\$3,130.05 | S\$2,994.60 | S\$1,436.40 |

Premiums above include prevailing GST.

## Group Discounts

| Number of Employee Headcount | Discount (%) |
|------------------------------|--------------|
| 5 - 9                        | 5            |
| 10 or more                   | 10           |

| Outpatient General Practitioner (GP) Rider   | Plan 1                    | Plan 2                          |
|--|---------------------------|---------------------------------|
| Outpatient panel GP  | Cashless, no co-insurance | Cashless, co-insurance of S\$10 |
| Non-panel GP   | Max. S\$35 per visit      | Not covered                     |
| Overseas Outpatient Treatment  | Max. S\$35 per visit      | Max. S\$35 per visit            |
| Polyclinics  | As charged                | As charged                      |
| Panel TCM (Max. 3 visits per policy year)  | Max. S\$35 per visit      | Not covered                     |
| A&E (Max. 2 visits per policy year)  | As charged                | As charged                      |
| Outpatient X-Ray and Lab Test<br>(For diagnostic purposes only) referred by panel GP or Polyclinic | As charged                | As charged                      |

#### Exclusions:

1. Routine physical examinations and health check ups.
2. Pregnancy or childbirth.
3. Treatment performed by a Specialist.
4. Special investigations (e.g. MRI, CT scan, PET Scan, Barium Test etc.)

#### Special Features:

1. All Insureds will receive a physical and a virtual panel clinic card which allows for cashless transactions at more than 500 panel network GP clinics in Singapore and Malaysia and more than 25 panel network TCM clinics.
2. Insureds will be able to submit their non-panel medical claims online through a mobile application and web portal.

#### General Information:

1. Pediatric visits are not covered under Outpatient GP Services.
2. Overseas Outpatient cover is applicable only for first 60 days of Insured Person's living/traveling overseas.

| Annual Premium Table<br>(Outpatient General Practitioner Rider) | Plan 1 | Plan 2 |
|---|--------|--------|
| Per employee/dependent  | S\$320 | S\$270 |

Premiums above include prevailing GST.

| Outpatient Specialist Rider                                       | Plan 1                           | Plan 2                           |
|---|----------------------------------|----------------------------------|
| Outpatient panel Specialist Consultation and Diagnostic Services* | Max. S\$2,000<br>per policy year | Max. S\$1,000<br>per policy year |
| Outpatient Physiotherapy  | Max. S\$500<br>per policy year   | Max. S\$500<br>per policy year   |

*Non-panel Specialist visits covered only under Plan 1 and is subject to 20% co-insurance.*

**Exclusions:**

1. Routine physical examinations and health check ups.
2. Pregnancy or childbirth.

**Special Features:**

1. All Insureds will receive a physical and a virtual panel clinic card which allows for cashless transactions at 400 panel network Specialist clinics.
2. Insureds will get to enjoy a concierge referral service to panel network Specialist clinics.
3. Insureds will be able to submit their non-panel medical claims online through a mobile application and web portal.

**General Information:**

1. A referral letter is required from panel or non-panel GP for both panel as well as non-panel Specialist consultations.
2. A referral letter from the Specialist is required for the Outpatient Physiotherapy benefit.
3. There is no Outpatient Specialist cover overseas.

| Annual Premium Table<br>(Outpatient Specialist Rider) | Plan 1 | Plan 2 |
|---|--------|--------|
| Per employee/dependent                                | S\$250 | S\$170 |

Premiums above include prevailing GST.



| Outpatient Dental Rider  | Plan 1                        | Plan 2                        |
|--|-------------------------------|-------------------------------|
| Panel Dentist Benefit  | Max. S\$1,200 per policy year | Max. S\$800 per policy year   |
| Co-payment   | 20%                           | 20%                           |
| Non-panel Dentist Benefit  | Not covered                   | Not covered                   |
| Emergency or Accident Related Dental Treatment<br>(including Crowning and Bridging)<br><br>Routine Dental Visit<br>(including Scaling, Polishing and Fluoride application)<br><br>Consultation<br><br>Medication<br><br>X-Rays<br><br>Amalgam Restorations (Fillings)<br><br>Extractions<br><br>Oral Surgery (including LA)<br><br>Root Canal Treatment<br><br>Periodontal Treatment | As charged up to annual limit | As charged up to annual limit |

**Exclusions:**

1. Dental Implants
2. Procedures for cosmetic purposes
3. Dentures, retainers, braces, orthodontic treatment

**Special Features:**

1. All Insureds will receive a physical and a virtual panel clinic card which allows for cashless transactions at more than 140 panel network Dental clinics.

**General Information:**

1. There is no Outpatient Dental cover overseas.

| Annual Premium Table<br>(Outpatient Dental Rider) | Plan 1 | Plan 2 |
|---|--------|--------|
| Per employee/dependent                            | S\$230 | S\$190 |

Premiums above include prevailing GST.



| Personal Accident (PA)   | Plan 1     | Plan 2     | Plan 3     | Plan 4     |
|--|------------|------------|------------|------------|
| Sum Insured<br>- Cover only for Death and Permanent Disablement (Scale II) | S\$500,000 | S\$300,000 | S\$200,000 | S\$100,000 |

| Annual Premium Table<br>(Personal Accident)  | Plan 1    | Plan 2    | Plan 3    | Plan 4   |
|--|-----------|-----------|-----------|----------|
| Class 1 - Indoor and Non-manual work   | S\$200.09 | S\$120.05 | S\$80.04  | S\$40.02 |
| Class 2 - Work of an outdoor or supervisory nature<br>(e.g. Property agent, outdoor sales) | S\$249.85 | S\$149.91 | S\$99.94  | S\$49.97 |
| Class 3- Manual, non-hazardous work (e.g. baker, driver)                                   | S\$428.00 | S\$256.80 | S\$171.20 | S\$85.60 |

Premiums above include prevailing GST.

The information provided here is a summary. Please refer to the actual policy wordings for the term and conditions. More information about Personal Accident is available on our website [www.libertyinsurance.com.sg](http://www.libertyinsurance.com.sg).

**Notes:**

As per Table of Benefits in the actual Personal Accident policy wordings

**Notes:**

- There is a loading of 35% for extension of Motor Cycling (100%)
- Premium payable may be revised at policy renewal at the full discretion of the Company

**Major Exclusion:**

The PA rider does not provide compensation for death or disablement arising from:

- Sickness or diseases
- AIDS and diseases associated with HIV
- Pre-existing physical defect or infirmity
- Suicide or self-inflicted injury
- War and nuclear related events
- Pregnancy, childbirth or its complications

## Notes

### Persons Eligible to Apply

1. Employees Actively at work.
2. Employees and spouses between 18 to 80 years of age and not more than 65 years of age at the Policy Commencement Date of the first Period of Insurance.
3. Children from 15 days old to 18 years old (dependent children can be covered up to age 25 if he/she is enrolled in an educational institution on full-time higher education and is not in full-time national service).
4. Domiciled (residing) in Singapore, meaning Singapore Citizens, Singapore Permanent Residents (holders of re-entry permits), holders of Employment Passes, S Passes, Personalized Employment Passes, EntrePasses, Work Permits, student passes or dependent passes.

### Declined Risks

Air and ship crew, professional divers, professional sports persons; occupations involving diving, working on oil rigs, onboard vessels or offshore, firefighting, police or military personnel or occupations of a hazardous nature, i.e. involving height, depth or heat.

### Major Exclusion

There are some costs which are not covered under the Policy, the following are some Major Exclusions for this Policy. You are advised to read the policy wordings for the full list of exclusions.

- a. Treatment relating to birth defects, congenital abnormalities and hereditary conditions.
- b. Routine medical examinations (including confinement in hospital to facilitate the conduct of test) and vaccinations.
- c. Cosmetic related treatments.
- d. Pre-existing conditions are excluded for the first year of cover for each insured. Pre-existing specified illnesses\* are permanently excluded.

*\*Heart Disease, Cancer, Diabetes and Renal Failure*



## Key Product Provisions

The following are some key provisions found in the actual wordings of this plan. This is a product summary and you are advised to refer to the actual terms and conditions in the wordings.

|   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• <b>Cancellation Clause</b></li> </ul>  | <p>This is a short-term accident and health policy and the insurer is not required to renew this policy. The insurer reserves the right to terminate this policy at any time by giving 30 days' notice in writing to the insured. Whenever such cancellation occurs, the Company shall return the unearned portion of premium based on the short rated table (refer to actual policy wordings). No premium will be refunded if claims have already been made by the Insured. Cancellation shall be without prejudice to any claim origination prior to the effective date of cancellation.</p> |
| <ul style="list-style-type: none"> <li>• <b>Terms of Renewal</b></li> </ul>   | <p>Coverage may be renewed on the Policy Anniversary Date by payment of the annual premium.</p>  |
| <ul style="list-style-type: none"> <li>• <b>Non-Guaranteed Premium</b></li> </ul>   | <p>Premiums payable for this coverage are not guaranteed and may be revised at policy renewal at the full discretion of Liberty Insurance Pte Ltd.</p>   |
| <ul style="list-style-type: none"> <li>• <b>Change in Circumstances</b></li> </ul>  | <p>In the event of a change in occupation/designation of an employee of the Insured, the Insured shall notify the Company in writing of the new occupation/designation. The Company will proceed to reclassify the employee to the applicable benefits plan based on employee group. The Insured shall also notify the Company in writing in the event of an employee's change in country of residence<br/>(Note: Only Employees and Dependents residing in Singapore are eligible for cover).</p>   |
| <ul style="list-style-type: none"> <li>• <b>Reasonable &amp; Customary Charges</b></li> </ul>   | <p>Benefits payable are limited to Reasonable and Customary charges for the treatments provided and to the limits of the Plan chosen.</p>  |
| <ul style="list-style-type: none"> <li>• <b>Policy Period</b></li> </ul>  | <p>Insurance will only commence when the proposal is accepted, the premium paid and accepted by Liberty Insurance Pte Ltd.</p>   |
| <ul style="list-style-type: none"> <li>• <b>Free Look Period</b></li> </ul>   | <p>In the event that the Insured is not satisfied with the policy for any reason, it may be returned to the Company for cancellation within fourteen days from date of receipt and any premium paid or billed will be refunded in full.</p>  |
| <ul style="list-style-type: none"> <li>• <b>Claims Submission</b></li> </ul>  | <p>All claims on reimbursement basis should be submitted within 30 days starting from the first date of the treatment.</p>   |
| <p>Switching of medical Policies may result in the Policyholder having to pay a different premium amount and different policy terms and conditions.</p> |  |
| <p>This policy is not a Medisave-approved policy and you may not use Medisave to pay the premium for this policy.</p>                                   |  |

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