

**MERCER MARSH BENEFITS (MMB) BENEFITS ELECT PROGRAM
GHS POLICY SCHEDULE**

| POLICY INFORMATION | | | |
|---|--|------------|------------|
| Policy No | 25800 | | |
| Plan | Group Hospital & Surgical (GHS) | | |
| Areas of Coverage | Worldwide | | |
| Policyholder | ABC PTE. LTD. | | |
| Period Of Insurance | 01 Apr 2025 (Commencement Date) to 31 Mar 2026 (Expiry Date) | | |
| Type of Administration | Head Count Basis | | |
| Currency | Singapore Dollars | | |
| Country of Residence | Singapore | | |
| Insured Persons | All eligible persons enrolled under the GHS Policy on compulsory basis | | |
| Benefits | Upon receipt and approval of the Insured Person's claim within the Period of Insurance, the Benefits as specified in the GHS Policy Schedule shall be payable. | | |
| Classification of Plan | Plan J Executive Managers/General Managers and Their Eligible Dependants Plan K Standard Employees | | |
| ANNUAL PREMIUM PER INSURED PERSON (SGD) | | | |
| AGE(FROM) | AGE(TO) | Plan J | Plan K |
| 0 | 75 | S\$ 816.00 | S\$ 578.00 |

** Premiums payable are subject to the Goods and Services Tax (GST). The above tabulated premium rates are before GST, which must be paid in addition to the premium before the insurance cover will be effected.

This GHS Policy Schedule forms part of Your GHS Policy. We agree to pay the Benefits set out here during the Period of Insurance, subject to Your payment of the Premiums and proof being furnished to Our satisfaction that such Benefits are payable.

Group Policy Administration Team

Issue Date: 01 April 2025

This is computer-generated. No signature is required.

SCHEDULE OF GROUP HOSPITAL & SURGICAL BENEFITS

| SCHEDULE OF BENEFITS (SGD) | | |
|---|----------------------------|----------------------------|
| BENEFIT | Plan J | Plan K |
| Maximum Limit Per Disability (For Items 1 to 2) | | |
| 1) HOSPITALISATION BENEFITS | | |
| a) Daily Room & Board Benefits (max. 120 days inclusive of ICU) | 1 Bed | 2 Bed |
| b) Intensive Care Unit (ICU) | \$10,000 | \$10,000 |
| c) Hospital Miscellaneous Services (Includes Surgical Implants & Appliances, Medical | \$25,000 | \$20,000 |
| d) Surgical Benefit (Surgical Schedule of Fees waived for All Hospitals) | | |
| e) In-Hospital Doctor Consultation (max. 120 days) | | |
| f) Overseas Hospitalisation for Accident Benefit [Applicable for Item 1(a) to (e) and 2(a) to (c)] (Apply to travel within 185 days of departure from Singapore) | 150% of Inpatient Benefits | 150% of Inpatient Benefits |
| 2) OUTPATIENT BENEFITS | | |
| a) Pre-Hospital Confinement/Surgery Specialist Consultation Fees (within 120 days prior to admission) | \$2,000 | \$1,800 |
| b) Pre-Hospital Diagnostic X-ray & Laboratory Tests (within 120 days prior to admission) | | |
| c) Post-Hospital Confinement/Surgery Follow-up Treatment (within 120 days from date of discharge) - include Traditional Chinese Medicine (TCM) & Podiatry - include Dietician Consultation (up to \$50 per visit, max. 2 visits per disability) - include Chiropractic treatment and Osteopath (up to \$100 per visit, max 5 visits per policy year) - include Physiotherapy treatment (subject to the treatment recommended by the same Attending Physician) | | |
| d) Emergency Outpatient Treatment (Accident Injury) - Outpatient expenses, emergency dental treatment and Traditional Chinese Medicine Treatment (TCM) (not exceeding \$1,000) incurred within 90 days of accident provided treatment is sought within 24 hours of accident | \$2,000 | \$2,000 |
| OVERALL ANNUAL LIMIT (FOR ITEMS 1 TO 2) | NA | NA |
| 3) MISCARRIAGE BENEFIT | As Per Disability | As Per Disability |
| Maximum Limit Per Policy Year (For Items 4 to 7 and 9 to 10) | | |
| 4) REHABILITATION BENEFIT - up to maximum 31 days, subject to referral letter from attending physician | \$5,000 | \$5,000 |

| | | |
|--|--|--|
| 5) OUTPATIENT KIDNEY DIALYSIS & CANCER TREATMENT i. Kidney Dialysis ii. Erythropoietin & Cyclosporin iii. Chemotherapy iv. Radiotherapy (Pre-existing conditions excluded for the first 12 months from effective date of cover) | \$15,000 | \$12,000 |
| 6) INPATIENT PSYCHIATRIC / PSYCHOLOGY TREATMENT - expenses incurred for hospitalisation treatment in Government Restructured Hospitals & Private hospitals in Singapore Only | \$1,000 | \$1,000 |
| 7) ORGAN TRANSPLANT | \$20,000 | \$15,000 |
| 8) DEATH BENEFIT | \$10,000 | \$10,000 |
| 9) TREATMENT FOR HIV / AIDS BENEFIT | \$5,000 | \$5,000 |
| 10) COMPLICATIONS FROM PREGNANCY BENEFIT | \$2,000 | \$2,000 |
| 11) CO-INSURANCE AT ALL PRIVATE HOSPITALS | 0% | 0% |
| 12) PRO-RATION | NA | NA |
| HOSPITAL CASH ALLOWANCE Not applicable to Foreign Workers (Employment Pass, Work Permit or S-Pass Holders) When an insured Person is warded in the following Class of Ward in a Singapore Government Restructured Hospital, the respective hospital cash benefit shall apply as follows: | | |
| Class of Ward Admitted to: | Hospital Cash Benefits Per Day of Confinement (\$) (Max. 120 days per disability) | Hospital Cash Benefits Per Day of Confinement (\$) (Max. 120 days per disability) |
| - GRH A1 | \$100 | \$100 |
| - GRH A2 | \$150 | \$150 |
| - GRH B1 | \$200 | \$200 |
| - GRH B2 / B2 + | \$250 | \$250 |
| - GRH C | \$300 | \$300 |

NOTES:

1. **PTE** shall refer to Private Hospitals.

2. **Government Restructured Hospitals (GRH)** and **Community Hospitals** shall refer to all institutions defined as such by the Ministry of Health in Singapore. Any Community Hospitals stay must follow treatment at GRH: both the stay and inpatient treatment is payable as part of the Daily Room & Board for up to 120 days.