GREAT SUPREMEHEALTH

One solution for all your hospitalisation needs, for life





GREAT is having one health solution to meet all your hospitalisation needs.

Having adequate health insurance is an important first step in protecting your finances should unexpected health issues occur. MediShield Life, offered by the Ministry of Health, is a basic health insurance plan that protects against large hospital bills for life. However, with the advancement of medical expertise and rising healthcare costs, basic coverage may not be sufficient to fully cover the medical treatments and financial help you may need.

Regardless of your life stage, you and your family can now enhance your basic health coverage with GREAT SupremeHealth, a Private Integrated Shield Plan (IP) to provide higher coverage against pre and post hospitalisation expenses. Bundled with GREAT TotalCare, you can manage your hospitalisation bill with greater assurance as it covers up to 95% of your total hospitalisation bill.

What's more, our Health Connect call-in service helps you find a specialist, obtain pre-authorisation for your hospital stay and settle your claims directly with the hospital.

With Great Eastern's GREAT SupremeHealth and GREAT TotalCare plans, you and your family will have the assurance of a comprehensive and affordable medical coverage to LIVE GREAT.





Choice of Hospitals and Wards

Receive medical care from Singapore restructured or private hospitals with choice of different ward types.



Choice of Doctors and Specialists

Seek professional medical advice from your preferred doctors and specialists.



Choice of Higher and Additional Benefits

Enjoy 'as-charged' benefits to reimburse the eligible medical and hospitalisation cost incurred.



Call-in Service for Direct Claim Settlement

Receive pre-authorisation of eligible medical expenses before hospitalisation, for direct claim settlement upon discharge.



Complementary Add-ons for Enhanced Coverage

Supplement with GREAT TotalCare plan to cover any deductible or co-insurance portion on your hospital bill, subject to co-payment. Extend your protection further with GREAT TotalCare Plus rider, to cover overseas medical treatment.



A COMPLETE HOSPITALISATION AND SURGICAL SOLUTION Medical coverage customised to your needs

MediShield Life

- Basic health insurance plan
- · Compulsory for all Singapore Citizens and Permanent Residents
- · Administered by the Central Provident Fund (CPF) Board with payouts pegged at Class B2 / C wards at restructured hospitals

GREAT SupremeHealth

- MediSave-approved Private Integrated Shield Plan (IP) to cover stays in private hospitals and Class A / B1 wards at restructured hospitals
- Exclusive access to Health Connect a call-in service offering specialist appointments, pre-stay authorisation and direct claims settlement
- Guaranteed lifetime coverage and renewability
- Additional Benefits:



Up to S\$1.5 million Annual Benefit Limits







Pregnancy & Childbirth Complications



Living Donor Organ Transplant



Speech & Occupational Therapy



Psychiatric Treatment



Congenital Abnormalities of Life Assured's Biological Child

GREAT MEDISHIELD TOTALCARE PLUS LIFE An optional rider to **GREAT TotalCare GREAT GREAT TOTALCARE SUPREMEHEALTH** An optional IP rider to **GREAT SupremeHealth** Complemented by **Health Connect** My total hospitalisation bill the bill My total hospitalisation of the bill (after paying the co-payment portion of the bill

GREAT TotalCare Plus

- Emergency and non-emergency medical treatment overseas
- Comprehensive Cancer Treatment Benefit
- Additional Benefits:





Emergency Assistance Services

Non-Emergency Overseas Treatment Coverage

3 GREAT TotalCare

- Enhanced coverage to cover up to 95% of your total hospitalisation bill
- 7 special benefits for out-of-hospital expenses
- Additional Benefits:







Health Care Benefit

Hospice Care Renefit

Companion

Note: Benefits and limits vary from plan type insured.



EXCLUSIVELY FOR GREAT SUPREMEHEALTH CUSTOMERS

When a hospital stay is required, trying to manage your medical expenses and administrative tasks can add unnecessary stress to you and your loved ones.

That's why we've introduced Health Connect, a call-in service for GREAT SupremeHealth customers such as yourself.

With Health Connect, your medical expenses can be pre-authorised even before your hospital stay, so you can focus on a speedy recovery.

Here's how HEALTH CONNECT helps you:





Health Connect puts you in touch with over 150 specialists across more than 20 medical specialties. Call Health Connect to schedule a **Specialist Appointment** with your preferred specialists.

COVER



Call Health Connect for the assessment of your eligible claims on medical expenses and have them **Pre-Authorised** before hospital admission.

CLAIM



For a hassle-free discharge, your **Claims are Settled Directly** with the hospital.

PEASY STEPS WITH HEALTH CONNECT

GET YOUR MEDICAL EXPENSES COVERED EVEN BEFORE HOSPITALISATION







When you need to consult a Specialist

CALL Health Connect to make an appointment with your preferred specialist from our selected panel of doctors.

Visit www.greateasternlife.com/HealthConnect for the list of panel doctors.



After your consultation, if hospitalisation is needed

CALL Health Connect to obtain a pre-authorisation on your eligible medical expenses three days before hospitalisation.





After pre-authorisation on your eligible medical expenses, you can benefit from:



Waiver of cash deposit upon hospital admission



Certainty of eligible medical expenses as you prepare for your treatment



✓ Hassle-free discharge



For more information, visit www.greateasternlife.com/HealthConnect



FOR AS LITTLE AS \$\$2.77* A DAY?

GREAT SupremeHealth P PLUS together with **GREAT TotalCare (ELITE-P)** helps you keep your cash outlay to a minimum for a stay at a private hospital.

Call **Health Connect**, a call-in service for the assessment of your eligible claims on medical expenses and have them pre-authorised before hospital admission, and the co-payment portion of your hospitalisation bill can be capped at **only S\$3,000**[†] **per policy year!**

	With GREAT SupremeHealth P PLUS only	With GREAT SupremeHealth P PLUS and GREAT TotalCare (ELITE-P)		
Inpatient bill	S\$100,000	S\$10	00,000	
Less: GREAT SupremeHealth P PLUS Deductible	S\$3,500	S\$3	3,500	
Less: GREAT SupremeHealth P PLUS Co-insurance (10% of \$96,500)	S\$9,650	S\$9,650		
GREAT SupremeHealth P PLUS pays	S\$86,850	S\$8	6,850	
GREAT TotalCare (ELITE-P) Co-payment Cap	NA	Without pre- authorisation Co-payment is 5% of total bill With pre- authorisation [‡] obtained through Health Connect, Co-payment is capped at \$\$3,000^†\$		
Total payout by Great Eastern	S\$86,850	S\$95,000 S\$97,000		
You pay	S\$13,150	S\$5,000	S\$3,000	

- * Annual premiums for GREAT SupremeHealth P PLUS and GREAT TotalCare (ELITE-P) for 31 to 35 years age next birthday divided by 365 days (rounded to nearest cent). For illustration purposes only. Premium rates are inclusive of 7% GST and do not include any premium subsidies, premium rebates and additional premiums that may be applicable to you under MediShield Life. Premium rates are not guaranteed and may be adjusted based on future experience.
- [†] Co-payment cap of S\$3,000 applies for treatments at a restructured hospital or when pre-authorisation is obtained through Health Connect for treatments by panel specialists at a private hospital.
- * Pre-authorisation is only applicable to inpatient hospitalisation and/or surgical expenses, excluding pre and post hospitalisation expenses. Manual claim submission is required for pre and post hospitalisation expenses.



Benefits Table - GREAT SupremeHealth

Dian Time	MadiOhiald Life	STANDARD	B PLUS	A PLUS	P PLUS	
Plan Type	MediShield Life		(inclusive of	MediShield Life)		
Hospital/Ward Class Entitlement	Restructured Hospitals, Class B2 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals	
Expense Item	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	
1. INPATIENT BENEFITS						
A. HOSPITALISATION AND SURGERY BE	ENEFITS					
Daily Ward and Treatment Charges (per	r day)					
Normal Ward ¹	S\$700	S\$1,700		As Charged		
Intensive Care Unit ward ¹	S\$1,200	S\$2,900		As Charged		
Community Hospital ²	S\$350	S\$650	S\$700	S\$750	S\$800	
Surgery ³						
Table 1 (less complex procedures)	S\$200	S\$590				
Table 2	S\$480	S\$1,670				
Table 3	S\$900	S\$3,290				
Table 4	S\$1,150	S\$4,990				
Table 5	S\$1,400	S\$8,760		As Charged		
Table 6	S\$1,850	S\$11,670		, to charged		
Table 7 (more complex procedures)	S\$2,000	S\$16,720				
Surgical Implants ⁴ (per treatment)	S\$7,000	S\$9,800				
Radiosurgery (including Novalis Radiosurgery & Gamma Knife)	S\$4,800 (per procedure)	S\$9,600 (per procedure)				
B. ADDITIONAL INPATIENT BENEFITS						
Daily In-Hospital Medical Doctor's Visit		Covered under				
Short-stay Ward ⁵	Covered under inpatient	inpatient hospital	As Charged			
Examination and Laboratory Tests	hospital treatment	treatment				
Pregnancy and Childbirth Complications		N.A.		As Charged ⁶		

"As Charged" means all Expenses incurred by the Life Assured in the Hospital and ward Class of the Life Assured's entitlement under the Plan Type insured.

Includes meal charges, prescriptions, professional charges, investigations and other miscellaneous charges.

² Claimable only upon referral from a Medical Doctor from a Hospital for further medical treatment after an inpatient admission.

³ Classified according to their level of complexity and listed according to the "Table of Surgical Procedures" as published by Ministry of Health.

⁴ Includes: - Intravascular electrodes used for electrophysiological procedures

⁻ Percutaneous Transluminal Coronary Angioplasty (PTCA) Balloons

⁻ Intra-aortic balloons (or Balloon Catheters)

⁵ Refer to Short-stay Wards in a Restructured Hospital.

Pregnancy and Childbirth Complications covered are ectopic pregnancy, pre-eclampsia or eclampsia, disseminated intravascular coagulation, miscarriage after the first trimester of the pregnancy, antepartum haemorrhage, intrauterine death, choriocarcinoma and hydatidiform mole, acute fatty liver pregnancy, breech delivery, placenta previa, post partum haemorrhage, amniotic fluid embolism and twin-to-twin transfusion syndrome. A waiting period of 300 days from the Last Policy Effective Date applies during which no benefits are payable.

Dian Time	Madichiald Life	STANDARD	B PLUS A PLUS		P PLUS	
Plan Type	MediShield Life		(inclusive of	MediShield Life)		
Hospital/Ward Class Entitlement	Restructured Hospitals, Class B2 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals	
Expense Item	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	
1. INPATIENT BENEFITS						
B. ADDITIONAL INPATIENT BENEFITS						
Breast Reconstruction after Mastectomy				As Charged ⁷		
Accidental Dental Treatment						
Stem Cell Transplant	Covered under inpatient	Covered under				
Organ Transplant ⁸	hospital treatment	inpatient hospital treatment	As Charged			
Human Immunodeficiency Virus ("HIV") Due to Blood Transfusion and Occupationally Acquired HIV		пеаппен				
C. PRE & POST HOSPITALISATION BENI	EFITS					
Pre-Hospital Specialist's Consultation (within 120 days before Hospitalisation)						
Post-Hospitalisation Treatment within 180 days from Hospital discharge within 365 days from Restructured Hospital discharge or Hospital discharge with Certification of Pre-authorisation ⁹	N.A.	N.A.	As Charged			
Other Post Hospitalisation Treatment (within 180 days from Hospital discharge) (a) Speech Therapy (b) Occupational Therapy			S\$1,000 per Period of Insurance (S\$100 per session)	S\$1,500 per Period of Insurance (S\$100 per session)	S\$2,500 per Period of Insurance (S\$100 per session)	

[&]quot;As Charged" means all Expenses incurred by the Life Assured in the Hospital and ward Class of the Life Assured's entitlement under the Plan Type insured.

⁷ Breast reconstruction surgery must be performed by a Medical Doctor within 365 days from the date of the first mastectomy.

⁸ Expenses incurred when Life Assured is the recipient of the following human organ(s) transplant – kidney(s), heart, liver, cornea(s), skin, pancreas and musculoskeletal tissue.

⁹ Post-hospitalisation follow-up treatments after 180 days must be provided in a Restructured Hospital or prescribed by a Specialist Doctor who is a Panel Provider.

Dian Time		MediShield Life	STANDARD	B PLUS	A PLUS	P PLUS	
Plan Type		MediSnieid Life		(inclusive o	f MediShield Life)		
Hospital/Ward Clas	s Entitlement	Restructured Hospitals, Class B2 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals	
Expense Item		Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	
2. OUTPATIENT BI	ENEFITS						
Chemotherapy for 0	Cancer	S\$3,000 per month	S\$5,200 per month				
Stereotactic Radiot	herapy for Cancer	S\$1,800 per treatment session	S\$1,800 per treatment session				
Immunotherapy for	cancer	N.A.	N.A.				
Radiotherapy for	External or Superficial	S\$140 per treatment session	S\$550 per treatment session		As Charged		
Cancer	Brachytherapy with or without external	S\$500 per treatment session	S\$1,100 per treatment session	As Charged			
Kidney Dialysis		S\$1,000 per month	S\$2,750 per month				
Immunosuppressan Organ Transplant	t for	S\$200 per month	S\$1,200 per month				
Erythropoietin		S\$200 per month ¹⁰	S\$450 per month ¹⁰				
Long-term Parenter	al Nutrition	S\$1,700 per month			N.A.		
3. ADDITIONAL BE	ENEFITS						
Psychiatric Treatme Post Hospitalisation		S\$100 per day (up to 35 days) ¹¹	S\$500 per day (up to 35 days) ¹¹	S\$20,000 per Period of Insurance	S\$22,000 per Period of Insurance	S\$25,000 per Period of Insurance	
Living Donor Organ Transplant	Life Assured is the Organ Donor ¹² - Covers Expenses Incurred by the Life Assured	Covered under inpatient hospital treatment	N.A.	S\$20,000 per Transplant	S\$40,000 per Transplant	S\$60,000 per Transplant	
(Kidney / Liver / Pancreas)	Life Assured is the Organ Recipient - Covers Expenses Incurred by the Organ Donor	N.	Α.	S\$20,000 S\$40,000 S\$60,000 per Transplant per Transplant per Transplant			

[&]quot;As Charged" means all Expenses incurred by the Life Assured in the Hospital and ward Class of the Life Assured's entitlement under the Plan Type insured.

¹⁰ Prescribed for chronic renal failure only.

For daily ward and treatment only. Claimable up to 35 days per policy year.
 The recipient must be a family member (parents, siblings, children or spouse) of the Life Assured. A waiting period of 730 days from the Last Policy Effective Date applies during which no benefits are payable.

Dian Tuna		MadiChiald Life	STANDARD	B PLUS	A PLUS	P PLUS
Plan Type		MediShield Life		(inclusive o	f MediShield Life)	
Hospital/Ward Class Entitlement		Restructured Hospitals, Class B2 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals
Expense Item		Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit
3. ADDITIONAL BE	ENEFITS					
Congenital Abnormalities of	Within (and including) 730 Days from the Last Policy Effective Date	Covered under inpatient hospital treatment ¹³	N.A.	S\$10,000 per Period of Insurance	S\$15,000 per Period of Insurance	S\$20,000 per Period of Insurance
the Life Assured	After 730 Days from the Last Policy Effective Date	nospital treatment		As Charged		
Congenital Abnormalities of the Life Assured's Biological Child ¹⁴	Within (and including) 730 Days from Date of Birth of the Child	N.A.	N.A.	S\$12,000 per Lifetime ¹⁵ (limited to S\$3,000 per child)	S\$16,000 per Lifetime ¹⁵ (limited to S\$4,000 per child)	S\$20,000 per Lifetime ¹⁵ (limited to S\$5,000 per child)
Emergency Medical Treatment outside Singapore ¹⁶				As Charged (Limited to S'pore Restructured Hospitals, Class B1 Ward charges)	As Charged (Limited to S'pore Restructured Hospitals, Class A Ward charges)	As Charged (Limited to S'pore Private Hosp. charges)
4. FINAL EXPENSE	ES BENEFIT ¹⁷	N.A.	N.A.	S\$3,600	S\$6,000	S\$7,000

[&]quot;As Charged" means all Expenses incurred by the Life Assured in the Hospital and ward Class of the Life Assured's entitlement under the Plan Type insured.

¹³ MediShield Life will exclude any surgical interventions for the following rare congenital conditions which are severe and fatal by nature: Trisomy 13, Trisomy 18, Bilateral Renal Agenesis, Bart's Hydrops, Alobar Holoprosencephaly, Anecephaly.

¹⁴ A waiting period of 300 days from the Last Policy Effective Date applies during which no benefits are payable.

¹⁵ The benefit limit refers to per lifetime of the Life Assured.

¹⁶ Covers all Expenses incurred if the Life Assured requires treatments, medical services and/or supplies as a result of an Emergency while outside Singapore up to limits stated above.

¹⁷ If the Life Assured dies during Hospitalisation or after discharge from Hospital, the Deductible and Co-insurance will be waived up to the limit stated.

Plan Type		MediSh	ield Life	S	FANDARD			B PLUS		A PLUS	P PLUS
5. PRO-RATION FA	ACTORS ¹⁸										
Citizenship Status		SC	PR	SC	PR	FR ¹⁹	SC	PR	FR ¹⁹	SC/PR/FR ¹⁹	SC/PR/FR
Day Surgery:											
Private Hospitals/P Clinics	rivate Medical	35%	35%	65%	65%	65%	50%	50%	50%	70%	
Restructured	Subsidised	100%	58%	100%	100%	100%	100%	90%	80%	100%	100%
Hospitals	Non-subsidised	35%	35%	100%	100%	100%	80%	80%	00%	100%	
Inpatient:											
Private Hospitals/ P	Private Medical Clinics	050/	050/	50%	50%	50%	50%	50%	50%	70%	
	Class A	35%	35%	80%	80%	80%	80%	80%			
Restructured	Class B1	43%	38%		90%	80%			80%	100%	100%
Hospitals	Class B2+	70%	47%	100%	100% 100%		100%	000/			
	Class B2	1000/	58%			100%		90%			
	Class C	100%	44%								
Private Community	Hospitals		50%	50%	50%	50%	50%	50% 70%	70%		
	Class A	50%		80%	80%	000/	80%	80%			
Government-	Class B1		50%		90%	80%			000/	1000/	
funded Community Hospitals	Class B2+ / B2	1000/		100%	4000/	1000/	100%	90%	80%	100%	
	Class C	100%			100%	100%					
Short-Stay Ward:											
Restructured	Subsidised	100%	58%	4000/	4000/	1000/	100%	90%	2007	1000/	1000/
Hospitals	Non-subsidised	35%	35%	100%	% 100%	100%	80%	80%	80%	100%	100%
Outpatient Treatm	ent:										
Private Hospitals/ P	Private Medical Clinics	50%20	50%20	65%	65%	65%	50%	50%	50%	70%	
Restructured	Subsidised	100%	67%	4000/	1000/	1000/	100%	90%21	000/21	1000/	100%
Hospitals	Non-subsidised	50%20	50% ²⁰	100%	100%	100%	80%21	80%21	80% ²¹	100%	

[&]quot;SC" means Singapore Citizen "PR" means Singapore Permanent Resident "FR" means Foreigner

¹⁸ Pro-ration Factors are applied to reduce higher class wards/ Private Hospital/ private medical institution/ medical treatment bills to equivalent ward/ medical treatment entitlement under each Plan Type in the claims computation.

¹⁹ GREAT SupremeHealth A PLUS, B PLUS & STANDARD are available for Singaporeans and Singapore PR only. If there is a change of Life Assured's Citizenship Status from Singaporean or Singapore PR to Foreigner, Proration factors for Foreigners will be applicable.

²⁰ MediShield Life pro-ration factors for non-subsidised outpatient cancer treatments will be applicable from 1 Nov 2016 onwards. Non-subsidised dialysis-related treatment and immunosuppressant will not be prorated.

²¹ GREAT SupremeHealth Pro-ration Factors do not apply to Expenses incurred by the Life Assured in a Restructured Hospital on an outpatient basis: Kidney Dialysis Treatment, Cancer Treatment, Erythropoietin and Immunosuppressant drugs prescribed for treatment of organ transplants.

Plan Type		MediShield Life	STANDARD	B PLUS	A PLUS	P PLUS
6. DEDUCTIBLE ²²						
or age next birth	day lower or equal to	80				
	Private				000 500	
	Class A	S\$2,000	S\$2,500		S\$3,500	
npatient	Class B1	5\$2,000			S\$2,500	
	Class B2+ / B2		S\$2,000		S\$2,000	
	Class C		O#1 F00		O#1 F00	
Short-Stay Ward	Subsidised		S\$1,500		S\$1,500	
Short-Stay ward	Non-subsidised	S\$1,500	S\$2,000		S\$2,000	
	Subsidised	5\$1,500	S\$1,500		5\$2,000	
Day Surgery	Non-subsidised		000 042		S\$2,500	
	Private		S\$2,000		S\$3,500	
For age next birth	day 81 to 85 (inclusive	e)				
	Private				000 500	
	Class A	S\$3,000	S\$2,000		S\$3,500	
npatient	Class B1		S\$3,000		S\$2,500	
	Class B2+ / B2				S\$2,000	
	Class C	S\$2,000	S\$2,000		C\$1 500	
Short-Stay Ward	Subsidised				S\$1,500	
Short-Stay waru	Non-subsidised				S\$2,000	
	Subsidised	S\$3,000	S\$3,000			
Day Surgery	Non-subsidised				S\$2,500	
	Private				S\$3,500	
For age next birth	day greater or equal t	o 86				
	Private				S&E 350	
	Class A	S\$3,000	S\$3,000		S\$5,250	
npatient	Class B1	ადა,000	ადა,000		S\$3,750	
	Class B2+ / B2				S\$3,000	
	Class C	S\$2,000	S\$2,000		S\$2,250	
Short-Stay Ward	Subsidised				3φ2,200	
Short-Stay Ward	Non-subsidised				S\$3,000	
	Subsidised	S\$3,000	S\$3,000			
Day Surgery	Non-subsidised				S\$3,750	
	Private				S\$5,250	

Deductible applies on a policy year basis and therefore payable only once in the year. Does not apply to Expenses incurred by the Life Assured on an outpatient basis: Kidney Dialysis Treatment, Cancer Treatment, Erythropoietin and Immunosuppressant drugs prescribed for treatment of organ transplants.

Plan Type	MediShield Life	STANDARD	B PLUS	A PLUS	P PLUS			
7. CO-INSURANCE								
All Ward Classes & Day Surgery Claima	All Ward Classes & Day Surgery Claimable Amount ²³							
S\$0 - S\$5,000	10%²⁴							
S\$5,000 - S\$10,000	5%		100/					
> S\$10,000	3%			10%				
Outpatient Treatments	10%							
8. LIMITS ON BENEFIT PAYABLE								
Per Policy Year	S\$100,000	S\$150,000	S\$500,000	S\$1,000,000	S\$1,500,000			
Lifetime	No Limit	No Limit	No Limit	No Limit	No Limit			

²³ Total claimable amount is computed as the sum of all claimable amounts under each claim limit. The claimable amount under each claim limit is based on the lower of the maximum claim limit or actual amount (with Pro-ration Factor applied where applicable) incurred under the claim limit. There will be Pro-ration Factor applied to bills that receive lower than the maximum subsidy level in Class B2/C wards, such as bills incurred by patients in Class A wards.

²⁴ The first \$\$5,000 Claimable Amount used to determine the Co-insurance under MediShield Life is inclusive of the Deductible.

Benefits Table - GREAT TotalCare

CLASSIC-B

CLASSIC

CLASSIC-A

Plan Class

Plan Type

· idii iypo						
Hospital/Ward Class Entitlement	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals
1. DEDUCTIBLE & CO-	INSURANCE					
Deductible & Co-insurance incurred under the Life Assured's corresponding GREAT SupremeHealth Policy			Covered, subject to	Co-payment to be borne by the	Policyholder	
2. SPECIAL BENEFITS						
	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit	Benefit Limit
Emergency Accidental	S\$1,000	S\$1,500	S\$2,000	S\$1,000	S\$1,500	S\$2,000
Outpatient Treatment (per Course of Treatment)	Covered, subject to Co-payment to be borne by the Policyholder					
Ambulance Services (per Course of Treatment)	S\$100	S\$150	S\$250	S\$100	S\$150	S\$250
Confinement in an Inpatient Hospice Care Institution (up to 90 days per Period of Insurance)	S\$200 per day	S\$250 per day	S\$300 per day	S\$200 per day	S\$250 per day	S\$300 per day
Home Health Care Benefit (within 180 days from Hospital discharge) ¹ (per Period of Insurance)	S\$6,000 (S\$200 per day)	S\$8,000 (S\$200 per day)	S\$10,000 (S\$200 per day)	S\$6,000 (S\$200 per day)	S\$8,000 (S\$200 per day)	S\$10,000 (S\$200 per day)
Post-Hospital Follow- up Traditional Chinese Medicine Treatment ² (within 180 days from Hospital discharge) (per Period of Insurance)	S\$4,000	S\$5,000	S\$6,000	S\$4,000	S\$5,000	S\$6,000

ELITE-B

CLASSIC-P

Notes

ELITE

ELITE-A

ELITE-P

¹ Eligible Expenses incurred by the Life Assured for treatments and/or medical services provided within 180 days from the day the Life Assured is discharged from the Hospital, Community Hospital or Inpatient Hospice Care Institution.

² For Post-Hospital Follow-up Traditional Chinese Medical Treatment (TCM) provided by a registered TCM Practitioner in an approved TCM clinic outside of a Singapore Hospital or a Community Hospital, the expenses incurred will be subject to a limit of \$60 per visit, up to 1 visit per day. Refer to policy contract for the list of medical institutions.

Benefits Table – GREAT TotalCare (Continued)

Plan Class		CLASSIC		ELITE		
Plan Type	CLASSIC-B	CLASSIC-A	CLASSIC-P	ELITE-B	ELITE-A	ELITE-P
Hospital/Ward Class Entitlement	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals
2. SPECIAL BENEFITS						
Medical Aids (per Period of Insurance)	S\$1,500	S\$2,000	S\$3,000	S\$1,500	S\$2,000	S\$3,000
Companion Accommodation Benefit ³ (up to 10 days per Hospitalisation)	S\$40 per day	S\$60 per day	S\$80 per day	S\$40 per day	S\$60 per day	S\$80 per day
LIMITS ON BENEFIT P	AYABLE					
Annual Benefit Limit	S\$150,000	S\$200,000	S\$400,000	S\$150,000	S\$200,000	S\$400,000
Lifetime Benefit Limit		Unlimited			Unlimited	

CO-PAYMENT TO BE BORNE BY THE POLICYHOLDER							
Co-payment ⁴ (per period of Insurance)	5% of the total Eligible Bills ⁵ or the Deductible incurred under the GREAT SupremeHealth plan (where applicable), whichever is higher	5% of the total Eligible Bills⁵					
Maximum Co-payment (per Period of Insurance)	S\$3,000 for Eligible Bills ⁵ incurred in Private Hospital / Private Community Hospital / Private Medical Clinic (with Certificate of Pre-authorisation) and/or Restructured Hospital / Government-funded Community Hospital	S\$3,000 for Eligible Bills ⁵ incurred in Private Hospital / Private Community Hospital / Private Medical Clinic (with Certificate of Pre-authorisation) and/or Restructured Hospital / Government-funded Community Hospital					

³ A companion refers to the Life Assured's parent, legal guardian, legal spouse, sibling, biological child or legally adopted child who is above 18 ANB during the Hospitalisation of the Life Assured. The Expenses incurred will be subject to the daily Renefit Limit up to 10 days per Hospitalisation.

incurred will be subject to the daily Benefit Limit up to 10 days per Hospitalisation.

If the Eligibile Bills in excess of the Benefit Limits or Bill Limits (if any) of this policy and the GREAT SupremeHealth, respectively are equal to or higher than the Co-payment, the Co-payment shall not be payable. For the avoidance of doubt, Policyholder shall bear the Eligible Bills in excess of the Benefit Limits or Bill Limits (if any) of this policy and the GREAT SupremeHealth, respectively.

⁵ Eligible Bills refer to the Expenses incurred, subject to Pro-ration Factor (where applicable) which are similar to those applied to the GREAT SupremeHealth.

Benefits Table – GREAT TotalCare Plus

Plan Type	ESSENTIAL	ADVANCE
Expense Item	Benefit Limit	Benefit Limit
WORLDWIDE COVERAGE		
	For ASEAN ² countries Expenses incurred are limited to the Reason where the treatment was provided	onable and Customary Charges in the country
(A) Overseas Emergency medical or surgical treatment ¹	For non-ASEAN countries Expenses incurred are limited to the Reasonable and Customary Charges in the Country of Issue	For non-ASEAN countries If the Life Assured has resided outside the Country of Issue for:- 90 days or less Expenses incurred are limited to the Reasonable and Customary Charges in the country where the treatment was provided More than 90 days³ Expenses incurred are limited to the Reasonable and Customary Charges in the Country of Issue
(B) Overseas Non-Emergency medical or surgical treatment ¹	 Expenses incurred are limited to the low Reasonable and Customary Charges in Reasonable and Customary Charges in 	
	S\$10,000	S\$30,000
(C) Cancer Treatment (per Period of Insurance)		bject to Co-payment as prescribed under nisured for the Life Assured
(D) Emergency Assistance Services	Not Covered	Covered

A waiting period of 30 days from the Commencement Date of Insurance of the Rider for Medical Treatment, Hospitalisation, Surgery and/or consultation provided to the Life Assured, resulting from any condition(s) other than Injury caused by an Accident applies during which no benefits are payable.

A waiting period of 300 days from the Last Policy Effective Date for Pregnancy and Childbirth Complications applies during which no benefits are payable. Refer to the terms and conditions of GREAT SupremeHealth and/or GREAT TotalCare for the list of complications.

¹ All Expenses payable for (A) and (B) are subject to the Deductibles (where applicable), Co-insurance, Benefit Limits and Co-payment as set out in GREAT TotalCare plan and/or GREAT SupremeHealth (As Charged) plan.

² Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, Philippines, Singapore, Thailand and Vietnam.

³ Life Assured has resided outside the Country of Issue for more than ninety (90) days, whether continuously or otherwise during the Period of Insurance.

Benefits Table – GREAT TotalCare Plus (Continued)

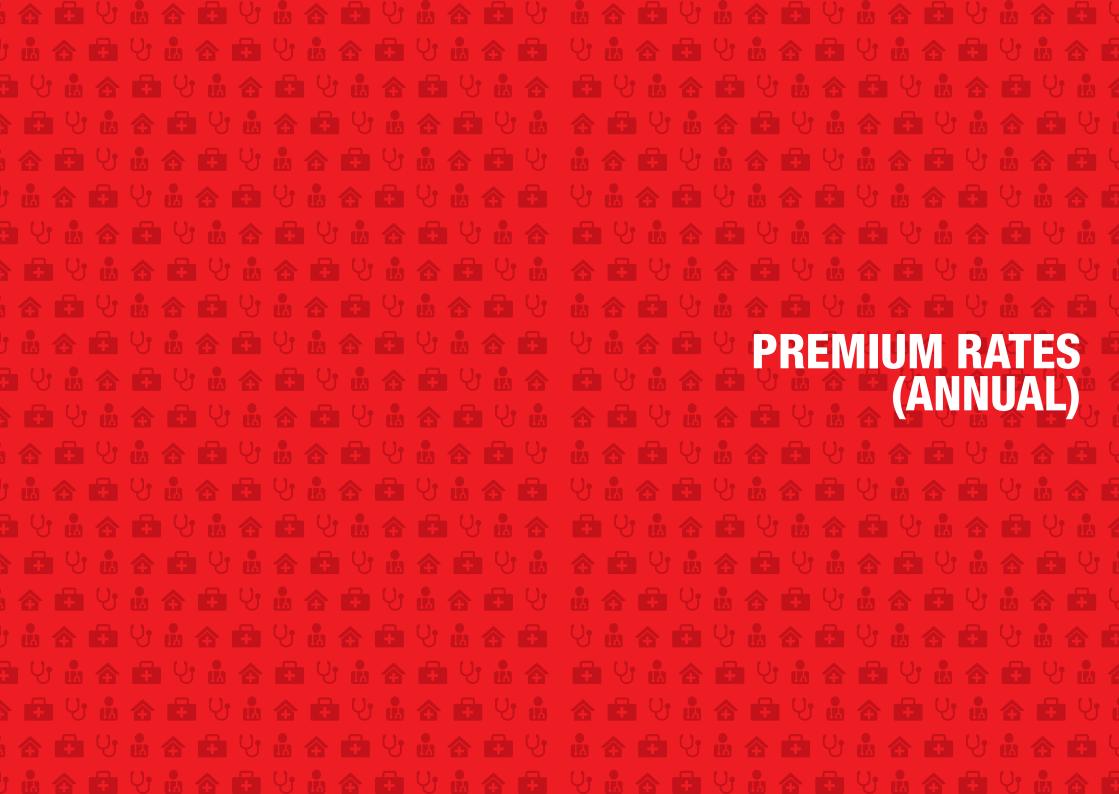
Plan Type	ESSENTIAL	ADVANCE
LIMITS ON BENEFITS PAYABLE		
Additional Annual Benefit Limit		
1. For a Life Assured who is not covered under GREAT SupremeHealth (As Charged) ⁴		
Benefits payable under this Rider for (B) and (C) shall be payable according to GREAT TotalCare insured for the Life Assured, with the following Additional Annual Benefit Limits added to GREAT TotalCare:		
Additional Annual Benefit Limit	S\$25,000	S\$50,000
2. For a Life Assured who is covered under GREAT SupremeHealth (As Charged) ⁴		
Benefits under this Rider for (B) and (C) shall be payable according to GREAT TotalCare and GREAT SupremeHealth (As Charged) ⁴ insured for the Life Assured, with the following Additional Annual Benefit Limits added to GREAT TotalCare:		
Additional Annual Benefit Limit	S\$50,000	S\$100,000
Lifetime Benefit Limit		
Benefits payable under this Rider for (B) and (C) shall be payable up to the following Lifetime Benefit Limits, in accordance with the plan type of GREAT TotalCare insured	GREAT TotalCare (ELITE-B) GREAT TotalCare (CLASSIC-B)	S\$1,000,000
for the Life Assured:	GREAT TotalCare (ELITE-A) GREAT TotalCare (CLASSIC-A)	S\$3,000,000
	GREAT TotalCare (ELITE-P) GREAT TotalCare (CLASSIC-P)	S\$5,000,000

A waiting period of 300 days from the Last Policy Effective Date for Pregnancy and Childbirth Complications applies during which no benefits are payable. Refer to the terms and conditions of GREAT SupremeHealth and/or GREAT TotalCare for the list of complications.

A waiting period of 30 days from the Commencement Date of Insurance of the Rider for Medical Treatment, Hospitalisation, Surgery and/or consultation provided to the Life Assured, resulting from any condition(s) other than Injury caused by an Accident applies during which no benefits are payable.

A waiting period of 300 days from the Last Policy Effective Date for Pregnancy and Childbirth

⁴ GREAT SupremeHealth (As Charged) refers to GREAT SupremeHealth P PLUS, A PLUS or B PLUS.



Premium Rates (Annual) – GREAT SupremeHealth STANDARD

		MediShield Life Premiums (S\$) [Fully Payable by MediSave^]	Additional Private Insurance Coverage		
Age Next Birthday (ANB)	Next Birthday (ANB) Total Premiums (S\$)		Premiums (S\$)	Additional Withdrawal Limits* (AWLs) [S\$]	Cash Outlay (S\$)
1-18	157	130	27		
19-20	163	130	33	300	
21-30	228	195	33	300	
31-40	358	310	48		
41-50	511	435	76		
51-55	732	630	102		
56-60	132	630	102	600	
61-65	962	755	207		0
66-70	1,144	815	329		
71-73	1,410	885	525		
74-75	1,573	975	598		
76-78	1,773	1,130	643		
79-80	1,861	1,175	686		
81-83	1,968	1,250	718		
84-85	2,328	1,430	898		
86-88	2,619	1.500	1,119	900	219
89-90	2,667	1,500	1,167		267
91-93	2,790		1,260		360
94-95	2,855	1,530	1,325		425
96-98	3,122		1,592		692
99-100	3,194		1,664		764
>100	3,373		1,843		943

Notes

- 1. Annual premium rates include the prevailing rate of GST. The prevailing rate of GST is subject to change.
- 2. Annual premium rates are for standard lives and exclusive of any discounts or subsidies given by MediŠhield Life.
- 3. We will give a 15% child discount on the first policy year's additional private insurance coverage premiums (before GST) for a child up to and including 18 ANB as long as one parent, who is the policyholder, is insured under GREAT SupremeHealth P PLUS, A PLUS, B PLUS or STANDARD.

[^] Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave.

If the Life Assured is a foreigner whose plan does not have a MediShield Life portion, you may utilise a MediSave amount equivalent to the MediShield Life premium above plus the Additional Withdrawal Limit to pay for your premiums.

[#] Subject to the prevailing rule by Ministry of Health.

Premium Rates (Annual) – GREAT SupremeHealth B PLUS

Age Next Birthday (ANB)	Total Premiums (S\$)	MediShield Life Premiums (S\$) [Fully Payable by MediSave^]	Additional Private Insurance Coverage		
			Premiums (S\$)	Additional Withdrawal Limits# (AWLs) [S\$]	Cash Outlay (S\$)
1-18	186	130	56		
19-20	197	130	67		
21-30	264	195	69	300	
31-35	380	010	70		
36-40	382	310	72		0
41-45	507	405	400		0
46-50	567	435	132		
51-55	000	000	000	000	
56-60	892	630	262	600	
61-65	1,196	755	441		
66-70	1,520	815	705		105
71-73	1,872	885	987		87
74-75	2,096	975	1,121		221
76-78*	2,756	1,130	1,626		726
79-80*	2,821	1,175	1,646		746
81-83*	2,916	1,250	1,666		766
84-85*	3,246	1,430	1,816		916
86-88*	4,069	1 500	2,569	900	1,669
89-90*	4,162	1,500	2,662		1,762
91-93*	4,216		2,686		1,786
94-95*	4,511	1,530	2,981		2,081
96-98*	4,537		3,007		2,107
99-100*	4.040		0.000		0.400
>100*	4,919		3,389		2,489

[^] Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave.

Notes:

- 1. Annual premium rates include the prevailing rate of GST. The prevailing rate of GST is subject to change.
- 2. Annual premium rates are for standard lives and exclusive of any discounts or subsidies given by MediShield Life.
- 3. We will give a 15% child discount on the first policy year's additional private insurance coverage premiums (before GST) for a child up to and including 18 ANB as long as one parent, who is the policyholder, is insured under GREAT SupremeHealth P PLUS, A PLUS, B PLUS or STANDARD.

If the Life Assured is a foreigner whose plan does not have a MediShield Life portion, you may utilise a MediSave amount equivalent to the MediShield Life premium above plus the Additional Withdrawal Limit to pay for your premiums.

^{*} Premium rates from 76 ANB onwards apply for additional private insurance coverage renewal only.

[#] Subject to the prevailing rule by Ministry of Health.

Premium Rates (Annual) – GREAT SupremeHealth A PLUS

Age Next Birthday (ANB) Total Pre		MediShield Life	Additional Private Insurance Coverage		
	Total Premiums (S\$)	Premiums (S\$) [Fully Payable by MediSave^]	Premiums (S\$)	Additional Withdrawal Limits# (AWLs) [S\$]	Cash Outlay (S\$)
1-18	198	130	68		
19-20	211	130	81	300	
21-30	276	195	01	300	
31-40	434	310	124		0
41-45	663	405	228		0
46-50	673	435	238		
51-55	55	000	000		
56-60	1,018	630	388	600	
61-65	1,381	755	626		26
66-70	1,899	815	1,084		484
71-73	2,507	885	1,622		722
74-75	2,899	975	1,924		1,024
76-78*	3,669	1,130	2,539		1,639
79-80*	3,748	1,175	2,573		1,673
81-83*	3,842	1,250	2,592		1,692
84-85*	4,570	1,430	3,140		2,240
86-88*	5,624	4.500	4,124	900	3,224
89-90*	5,689	1,500	4,189		3,289
91-93*	5,741		4,211		3,311
94-95*	5,762	1,530	4,232		3,332
96-98*	6,105		4,575		3,675
99-100*			F 000		4.400
>100*	6,618		5,088		4,188

Notes:

- 1. Annual premium rates include the prevailing rate of GST. The prevailing rate of GST is subject to change.
- 2. Annual premium rates are for standard lives and exclusive of any discounts or subsidies given by MediShield Life
- 3. We will give a 15% child discount on the first policy year's additional private insurance coverage premiums (before GST) for a child up to and including 18 ANB as long as one parent, who is the policyholder, is insured under GREAT SupremeHealth P PLUS, A PLUS, B PLUS or STANDARD.

[^] Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave. If the Life Assured is a foreigner whose plan does not have a MediShield Life portion, you may utilise a MediSave amount equivalent to the MediShield Life premium above plus the Additional Withdrawal Limit to pay for your premiums.

^{*} Premium rates from 76 ANB onwards apply for additional private insurance coverage renewal only.

[#] Subject to the prevailing rule by Ministry of Health.

Premium Rates (Annual) – GREAT SupremeHealth P PLUS

Age Next Birthday (ANB) 1-18 19-20	Total Premiums (S\$) 299 331	Premiums (S\$) [Fully Payable by MediSave^]	Premiums (S\$)	Additional Withdrawal	
19-20				Limits# (AWLs) [S\$]	Cash Outlay (S\$)
	331	130	169		
	001	130	201		
21-30	428	195	233	300	0
31-35	596	010	286		
36-40	609	310	299		
41-45	1,073	405	638		38
46-50	1,078	435	643		43
51-53	1,517		887		287
54-55	1,611	630	981	600	381
56-60	1,789		1,159		559
61-65	2,322	755	1,567		967
66-68	3,091	045	2,276		1,676
69-70	3,110	815	2,295		1,695
71-73	3,995	885	3,110		2,210
74-75	4,525	975 1,130 1,175	3,550		2,650
76-78*	5,123		3,993		3,093
79-80*	5,696		4,521		3,621
81-83*	6,632	1,250	5,382		4,482
84-85*	7,601	1,430	6,171		5,271
86-88*	7,971	1 500	6,471	900	5,571
89-90*	8,058	1,500	6,558		5,658
91-93*	8,997		7,467		6,567
94-95*	9,153		7,623		6,723
96-98*	9,585	1,530	8,055		7,155
99-100* >100*	9,910		8,380		7,480

[^] Your MediShield Life premiums may differ depending on your premium subsidies, premium rebates and whether you need to pay for the Additional Premiums. The Net MediShield Life Premium Payable after accounting for these is fully payable by MediSave. If the Life Assured is a foreigner whose plan does not have a MediShield Life portion, you may utilise a MediSave amount equivalent to the MediShield Life premium above plus the Additional Withdrawal Limit to pay for your premiums.

Notes:

- 1. Annual premium rates include the prevailing rate of GST. The prevailing rate of GST is subject to change.
- 2. Annual premium rates are for standard lives and exclusive of any discounts or subsidies given by MediShield Life
- 3. We will give a 15% child discount on the first policy year's additional private insurance coverage premiums (before GST) for a child up to and including 18 ANB as long as one parent, who is the policyholder, is insured under GREAT SupremeHealth P PLUS, A PLUS, B PLUS or STANDARD.

^{*} Premium rates from 76 ANB onwards apply for additional private insurance coverage renewal only.

^{*} Subject to the prevailing rule by Ministry of Health.

Premium Rates (Annual) – GREAT TotalCare

Plan Class	CLASSIC (S\$)		ELITE (S\$)			
Plan Type	CLASSIC-B	CLASSIC-A	CLASSIC-P	ELITE-B	ELITE-A	ELITE-P
Hospital/ Ward Class Age Entitlement Next Birthday (ANB)	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals	Restructured Hospitals, Class B1 Wards & lower	Restructured Hospitals, Class A Wards & lower	Private & Restructured Hospitals
1-18		25 30 55		100	160	308
19-20	25		55		175	323
21-25		40	90	440	400	007
26-30	30	45	100	110	182	327
31-35	35	55	135	138	213	415
36-40	40	61	148	150	219	418
41-45	61	100	200	000	290	620
46-50	75	120	205	209	290	644
51-55	100	155	295	300	413	926
56-60	131	165	370	375	465	1,075
61-65	165	180	500	505	608	1,259
66-70	251	305	640	655	795	1,539
71-73	300	335 705	705	790	1,063	2,035
74-75	300	333	705	923		
76-78*	355	395	845	1,040	1,277	2,977
79-80*	370	420	865	1,202	1,349	3,006
81-83*	375	425	880	1,260	1,463	3,020
84-85*	385	441	890	1,313	1,715	3,088
86-88*	395	450	905	1,335	1,794	3,106
89-90*	405	465	915	1,333	1,892	3,405
91-93*	415	480	930	1,491	1,950	3,539
94-95*	425	490	945	1,554	2,255	3,660
96-98*	435	505	960	1,616	2,396	3,822
99-100*	445	520	976	1,680	2,558	4,221
>100*	445	320	370	1,000	2,336	4,221

^{*} Premium rates from 76 ANB onwards apply for renewal only.

^{1.} Premium rates are inclusive of prevailing 7% GST. The prevailing rate of GST is subject to change.

^{2.} Monthly Premiums are calculated by multiplying annual premiums with factor of 0.08583. (Actual Premiums charged may be different due to rounding.)

^{3.} We will give a 10% child discount on the first policy year's premiums (before GST) for a child up to and including 18 ANB as long as one parent, who is the policyholder, is insured under GREAT TotalHealth or GREAT TotalCare.

Premium Rates (Annual) – GREAT TotalCare Plus

Age Next Birthday (ANB)	ESSENTIAL (S\$)	ADVANCE (S\$)
1-18	44	148
19-30	67	213
31-40	72	246
41-50	79	298
51-55	121	399
56-60	153	481
61-65	216	671
66-70	299	827
71-75	422	1,161
76-78*	544	1,518
79-80*	598	1,629
81-83*	771	2,062
84-85*	829	2,257

^{*} Premium rates from 76 ANB onwards apply for renewal only.

^{1.} Premium rates are inclusive of prevailing 7% GST. The prevailing rate of GST is subject to change.

^{2.} Monthly Premiums are calculated by multiplying annual premiums with factor of 0.08583. (Actual Premiums charged may be different due to rounding.)

^{3.} We will give a 10% child discount on the first policy year's premiums (before GST) for a child up to and including 18 ANB as long as one parent, who is the policyholder, is insured under GREAT TotalCare Plus or GREAT TotalHealth Plus.



Get Rewarded for Better Health with GETGREAT, your digital health and wellness buddy.



GET CLOSER TO WELLNESS GOALS



GET REWARDED FOR CHALLENGES



GET DAILY HEALTH TIPS



GUIDANCE



REDEEM REWARDS







Download to enjoy GETGREAT benefits today.

Start a conversation with your Great Eastern Financial Representative today.

+65 6248 2211

www.greateasternlife.com

wecare-sg@greateasternlife.com

Maximum entry age for GREAT SupremeHealth (B PLUS, A PLUS and P PLUS), GREAT TotalCare and GREAT TotalCare Plus rider is age 75 years next birthday.

All premium rates are inclusive of 7% GST. Premium rates are not guaranteed and may be adjusted based on future experience. Age stipulated refers to age next birthday.

GREAT TotalCare and GREAT TotalCare Plus are not MediSave-approved Integrated Shield plans and premiums are not payable using MediSave.

GREAT TotalCare is designed to complement the benefits offered under GREAT SupremeHealth. GREAT TotalCare Plus is a rider that can only be attached to GREAT TotalCare to extend medical coverage worldwide.

This advertisement has not been reviewed by the Monetary Authority of Singapore.

The above is for general information only. It is not a contract of insurance. The precise terms and conditions of this insurance plan are specified in the policy contract.

It is usually detrimental to replace an existing health plan with a new one. A penalty may be imposed for early plan termination and the new plan may cost more, or have less benefits at the same cost.

These plans are 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 us or visit the Life Insurance Association (LIA) or SDIC websites (www.lia.org.sg or www.sdic.org.sg).

In case of discrepancy between the English and the Chinese versions, the English version shall prevail.

Information correct as at 28 February 2019.

The Great Eastern Life Assurance Company Limited (Reg. No. 1908 00011G)

1 Pickering Street, #01-01 Great Eastern Centre, Singapore 048659