

This is to certify that the Life Insured named as Policyholder of Eligible Policy is insured under the Group Policy issued by THE GREAT EASTERN LIFE ASSURANCE COMPANY LIMITED (hereinafter called “the Company”).

This insurance is subject to the terms and conditions of the Group Policy issued to the Insured Member in the Certificate of Insurance.

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

The insurance cover commences on the Effective Date stated in the Certificate of Insurance and ceases on the Expiry Date.

CERTIFICATE OF INSURANCE (Dengue Care)			
Policyholder	:	The Great Eastern Life Assurance Company Limited	
Group Policy Number	:	G0007291	
Effective Date	:	Effective Date of your first Eligible Policy	
Expiry Date	:	12 months from Effective Date	
Benefits Covered, S\$	Eligible Member	Eligible Spouse	Eligible Child(ren)
Hospitalisation Benefit A lump sum benefit will be paid out if the Life Insured is diagnosed and Hospitalised solely due to Dengue Fever.	S\$1,000 per Period of Insurance	S\$500 per Period of Insurance	S\$500 per Child per Period of Insurance
Daily Hospital Cash Benefit A daily benefit paid for each day the Life Insured is Hospitalised solely due to Dengue Fever for a maximum of 10 consecutive days per Period of Insurance.	S\$200 per day	S\$100 per day	S\$100 per day
<p>The Hospitalisation of the Life Insured due to Dengue Fever must be considered Medically Necessary by a Registered Medical Practitioner.</p> <p>The Company will not pay any benefits under the Policy if the Life Insured is Hospitalised for Dengue Fever during the Waiting Period.</p> <p>These benefits are in addition to any benefits in the Eligible Policy.</p> <p>Hospitalisation Benefit and Daily Hospital Cash Benefit shall only be payable once for each Life Insured even if the Life Insured is Hospitalised multiple times due to Dengue Fever within the Period of Insurance.</p>			

All endorsements, changes and amendments to the Policy between the Company and the Policyholder shall be binding on the Life Insured. The Life Insured is not party to the Policy and shall have no rights whatsoever under the Policy.

This is a computer generated letter. No signature required.

Dengue Care: Terms & Conditions

1. General Definitions

In this Policy where the context so admits, the masculine gender shall be deemed to include the feminine, and likewise, the singular word shall be deemed to include the plural and vice versa, and the following words and expressions shall be deemed to have the following meanings:

- 1.1. **“Age Next Birthday”** shall mean Life Insured’s age at a particular time with addition of 1 year. In this Policy where the context so admits the age shall be deemed to be Age Next Birthday.
- 1.2. **“Certificate of Insurance”** shall mean a certificate of insurance issued by the Company to an Eligible Member which provides confirmation of insurance cover for the Life Insured under the Policy.
- 1.3. **“Claim Event(s)”** shall mean the Hospitalisation of the Life Insured due solely to Dengue Fever.
- 1.4. **“Country of Issue”** shall mean the country in which this Policy is issued.
- 1.5. **“Dengue Fever”** shall mean the unequivocal, final and confirmed diagnosis by a Registered Medical Practitioner in accordance with prevailing clinical guidelines published by Ministry of Health, where available, and supported by acceptable clinical, radiological, histological and laboratory evidence.
- 1.6. **“Effective Date”** shall mean the date from which the insurance coverage of the Life Insured has become effective as specified under the Certificate of Insurance.
- 1.7. **“Eligible Child(ren)”** shall mean the biological or step child(ren) from a legal marriage or legally adopted child(ren) of the Eligible Member, who is between 2 weeks old and 16 Age Next Birthday and is residing in Singapore.
- 1.8. **“Eligible Dependant(s)”** shall mean Eligible Spouse and/or Eligible Child(ren).
- 1.9. **“Eligible Member”** shall mean a natural person; who is:-
 - i) between 17 and 80 Age Next Birthday at the Effective Date;
 - ii) a Singaporean or Singapore Resident with a valid National Registration Identification Card, employment pass (EP holders / S Pass holders / Work Permit holder) or dependant’s pass;
 - iii) residing in Singapore; and
 - iv) a policyholder of the Eligible Policies.
- 1.10. **“Eligible Policies”** shall mean the product(s) that are eligible for Dengue Care as prescribed under the terms and conditions for this Dengue Care promotion found on the Company’s website.
- 1.11. **“Eligible Spouse”** shall mean the legal spouse of the Eligible Member who is not separated from the Eligible Member, who is between 17 and 80 Age Next Birthday and is residing in Singapore.
- 1.12. **“Hospital”** shall mean an establishment constituted and registered in Singapore as a hospital for the care and treatment of sick and injured persons as bed-paying patients and which:
 - i) has facilities for diagnosis and major surgery, provides 24 hours a day nursing services by registered nurses and is under the constant supervision of a Registered Medical Practitioner; or
 - ii) is a Government/ restructured/ private specialist medical centre.

However, the term “Hospital” does not refer to a clinic, an alcoholic or drug rehabilitation centre, a nursing, rest or convalescent home, a spa or a hydroclinic, a community hospital or similar establishment.

- 1.13. **“Hospitalisation”** or **“Hospitalised”** shall mean confinement of the Life Insured in a Hospital for 12 consecutive hours or longer in which a room and board charge is made in connection with such confinement.
- 1.14. **“Life Insured”** shall mean Eligible Member and/or Eligible Dependant in respect of whom insurance under this Policy has been effected.
- 1.15. **“Insured Member”** shall mean the Eligible Member in respect of whom insurance under this Policy has been effected.
- 1.16. **“Medically Necessary”** shall mean a treatment which is ordered by a Registered Medical Practitioner which is:
- i) provided for the direct treatment of a medical condition;
 - ii) appropriate and consistent with the symptoms and findings or diagnosis and treatment of that medical condition;
 - iii) provided in accordance with generally accepted medical practice;
 - iv) the most appropriate supply or level of service which can be provided on a cost effective basis; and
 - v) not of an experimental nature, not of an investigative nature and not in the nature of research.
- 1.17. **“Period of Insurance”** shall mean a period of 12 consecutive months starting from the Effective Date.
- 1.18. **“Policy”** shall mean this agreement, any rider or endorsement therein, any amendment signed by the Company, the application of the Policyholder, and any individual proposal form, consent form or any other form signed by the Life Insured or the Policyholder constituting the entire contract.
- 1.19. **“Pre-Existing Condition”** shall mean any condition, illness, disease, disability, including Dengue Fever or defect for which:
- i) the Life Insured has sought medical advice, been investigated, diagnosed, hospitalised, received medical treatment, undergone surgical operation, or been prescribed drugs at any time prior to the Effective Date; or
 - ii) signs and symptoms manifested prior to the Effective Date, which would have caused a prudent person to seek medical advice or counselling, undergo investigation or diagnostic tests, receive medical treatment, undergo surgery, be hospitalised, or be prescribed drugs.
- 1.20. **“Prohibited Person”** shall mean a person or an entity (as the case may be) who is subject to any sanction(s) pursuant to any laws and/or regulations, administered by any governmental or regulatory authority or any competent authority or law enforcement agency, in any country.
- 1.21. **“Registered Medical Practitioner”** shall mean a person qualified by degree in western medicine and legally licensed and authorised to practise medicine and surgery in Singapore, other than the Policyholder, the Life Insured or a family member of either.
- 1.22. **“Waiting Period”** shall mean a period of 10 days starting from the Effective Date as specific under the Certificate of Insurance.

2. General Provisions

2.1. Termination

- (a) The coverage of any Life Insured shall automatically be terminated on the earliest of the following events:
- (i) the Certificate of Insurance expires;
 - (ii) the Life Insured dies;
 - (iii) the Company admits claims for both Hospitalisation Benefit and Daily Hospital Cash Benefit in respect of the Life Insured under this Certificate of Insurance;
 - (iv) the Insured Member cancels the Eligible Policy within the Free Look Period; or
 - (v) the Life Insured and/or Policyholder is/becomes a Prohibited Person.

The Insured Member shall notify the Company in writing of any changes to the citizenship or residency status as soon as practicable. If the Insured Member fails to notify the Company, and there is a claim for any Claim Event(s) occurring on or after the Effective Date following the change of citizenship or residency status, the Company may reject such claim or, at its discretion, adjust the benefits payable.

- (b) This Certificate of Insurance shall be terminated on the date notified to the Policyholder by the Company to terminate the Policy by virtue of war (declared or undeclared) or act of war (whether or not there has been a declaration of war) where such date shall be at the discretion of the Company.
- (c) For the avoidance of doubt, in the case of termination of this Policy due to expiry of the Policy, the insurance cover for the Life Insured shall continued until the expiration of the Certificate of Insurance.
- (d) All benefits under this Policy shall cease to be payable after termination of Certificate of Insurance. If this Certificate of Insurance has been terminated in accordance with clauses 2.1 (a) (i, iii, iv and v) above, the Company will not pay any benefits under this Certificate of Insurance for any Claim Event(s) occurring on or after the date of such termination.

2.2. Cancellation of Policy

If the Company terminates the Policy, insurance coverage for the Life Insured shall continue.

2.3. Cancellation of Certification of Insurance

This Certificate of Insurance may be terminated by either the Company or the Life Insured by giving thirty (30) days' notice in writing.

2.4. Geographical Limit

This Certificate of Insurance only covers treatment received in Singapore for Dengue Fever.

2.5. Assignment

- (a) No benefit under this Certificate of Insurance can be assigned.
- (b) In the event the Eligible Policy is assigned, no benefits under this Certificate of Insurance will be payable for any Claim Event(s) occurring on or after the effective date of assignment.

2.6. Evidence of Age

Documentary evidence of age satisfactory to the Company shall be required before any benefit in respect of any coverage under this Policy shall be payable.

2.7. Duplication of Cover

No Life Insured shall be entitled to make a claim under more than one (1) Certificate of Insurance under this Policy with the Company.

If the Life Insured is covered under more than one (1) such Certificate of Insurance, the Company will regard the Life Insured as covered under the Certificate of Insurance which provides the Life Insured with the highest benefits for a Claim Event for the purposes of a claim. Upon admission of a claim by the Company under this Policy, the Life Insured will cease to be covered under any other Certificate of Insurance under this Policy.

Where the Life Insured is covered under more than one (1) Certificate of Insurance at any given time which pay out identical benefits for a Claim Event, the Company will regard the Life Insured as covered under the Certificate of Insurance that is issued earlier for the purposes of a claim. Upon admission of a claim by the Company under this Policy, the Life Insured will cease to be covered under any other Certificate of Insurance under this Policy.

2.8. Non Participating Policy

This is a non-participating Policy with no surrender or cash values.

2.9. Free Look Period

There is no free look provision in this Policy.

2.10. Misstatement

Where a misstatement of age or other relevant facts has caused a Life Insured to be insured hereunder when he is otherwise ineligible for insurance coverage, or where such statement has caused a Life Insured to remain insured when he would otherwise be disqualified for further insurance coverage in accordance with the terms and limitations of this Policy, his insurance coverage shall be void and there shall be a refund of premiums paid in respect of the Life Insured, provided always that where there is fraud on the part of the Policyholder or Life Insured, no premiums paid shall be refunded.

2.11. Contract

All statements made by Policyholder and by any Life Insured shall, in the absence of fraud, be deemed representations and not warranties and no such statement shall void this Policy or be used in defence of a claim, unless it is in writing.

2.12. Alteration of Contract

The terms of this Policy may be amended by the Company from time to time upon the Company giving 30 days prior notice to the Policyholder. Any amendments to this contract shall be binding on all Life Insured whether insured under this Policy prior to or on or after the effective date of the amendment.

2.13. Arbitration

All differences arising out of this Policy or incidental thereto or to the assurance hereby effected shall be referred to a single arbitrator to be appointed in writing by the Policyholder and the Company, or if they cannot agree upon a single arbitrator, to two arbitrators, one to be appointed in writing by each party and such arbitrators shall before commencing their investigations elect an umpire. In all other respects the arbitration shall be subject to the statutory provisions for the time being in force relating to arbitration. Unless and until an award has been made, no action or other legal proceedings shall be commenced in respect of any claim or by virtue of this Policy. After the expiration of two years from the date of an event giving rise to a claim under this Policy, the Company shall not be liable in respect

thereof unless the Company shall have admitted liability in respect of such claim or the claim shall in the meantime have been referred to arbitration.

2.14. Operation of Law

This Policy shall be construed according to and governed by the laws of Republic of Singapore.

2.15. Policy shall be Void

(a) If any written statements made by the Policyholder or the Life Insured, whichever applicable, on proposal for application of insurance is untrue in any respect or if any material fact affecting the risk is incorrectly stated or represented in or is omitted from these documents (“Misrepresentation or Non-disclosure”), the Company may, at its sole discretion:

- (i) declare this Policy or any Certificate of Insurance (as the case may be) void, whichever applicable; or
- (ii) impose such conditions or vary the terms of this Policy or any Certificate of Insurance (as the case may be), whichever applicable, as it would have had the Misrepresentation or Non-disclosure not been made.

(b) If the Company opts to declare this Certificate of Insurance void under Clause 2.15(a) (i) above, this Certificate of Insurance shall be treated as void on the Effective Date.

2.16. Absolute Owner

(a) The Company is entitled to treat the Insured Member as the absolute owner of the Certificate of Insurance.

(b) The Company will not recognise any equitable or other claim to or interest in the Certificate of Insurance.

(c) The receipt by the:

- (i) Insured Member; or
- (ii) Insured Member’s legal personal representative(s).

of any payment made by the Company in respect of a claim made under the Certificate of Insurance for this Policy will be in full and final discharge of the Company in respect of any liability under such a claim.

2.17. Exclusion of Contracts (Rights of Third Parties) Act 2001

A person who is not a party to the Contract of Insurance shall have no rights under the Contracts (Rights of Third Parties) Act 2001 and any subsequent amendments to the Act, to enforce its terms. This Policy, the Certificate of Insurance, schedules, endorsements, proposal forms and declarations by the Lives Insured and all subsequent written notices by the Company to the Policyholder and Insured Member make up the whole of the Contract of Insurance.

2.18. 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 this Policy is automatic and no further action is required from the Policyholder. 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 Life Insurance Association (LIA) or SDIC websites (www.lia.org.sg or www.sdic.org.sg).

3. Benefit Provisions

The benefits of this Policy are set out in the Certificate of Insurance.

3.1. Hospitalisation Benefit

Subject to the terms and conditions of this Policy, the Company will pay a lump sum Hospitalisation Benefit if the Life Insured is Hospitalised during the Period of Insurance solely due to Dengue Fever.

3.2. Daily Hospital Cash Benefit

Subject to the terms and conditions of this Policy, the Company will pay the Daily Hospital Cash Benefit if the Life Insured is Hospitalised during the Period of Insurance solely due to Dengue Fever, for up to a maximum of 10 consecutive days as set out in the Certificate of Insurance.

3.3. The Company will only process a claim for the benefit(s) upon receipt of:

- (a) proof of age;
- (b) proof of relationship status for Eligible Dependents; and
- (c) proof of Hospitalisation solely due to Dengue Fever.

3.4. The Hospitalisation of the Life Insured due to Dengue Fever must be considered Medically Necessary by a Registered Medical Practitioner.

3.5. The Company will not pay any benefits if the Claim Event occurs during the Waiting Period.

3.6. These benefits are in addition to any benefits in the Eligible Policy.

3.7. Hospitalisation Benefit and Daily Hospital Cash Benefit shall only be payable once for each Life Insured even if the Life Insured is Hospitalised multiple times due to Dengue Fever within the Period of Insurance.

4. Exclusions:

The Company will not pay for any benefits under this Policy for Hospitalisation for:

4.1. Pre-Existing Condition;

4.2. where the Hospitalisation for Dengue Fever occurs within the Waiting Period; or

4.3. where the Hospitalisation for Dengue Fever occurs after the Waiting Period, but resulting from or relating to any medical treatment(s), diagnosis, consultation(s) or investigation(s) of the Life Insured by a Registered Medical Practitioner during the Waiting Period.

5. Claims:

5.1. Notification

The Insured Member or his legal representative must, within 31 days after the occurrence of any event likely to give rise to a claim under this Policy, notify the Company of the claim and give written proof of the claim.

5.2. Submission and Documentation

The Insured Member or his legal representative will be required to submit documentary proof which is satisfactory to the Company for consideration of eligibility of claims. Any cost incurred in acquiring documentary proof will be borne by Insured Member or his legal representative.

5.3. Compensation

No compensation stated in this Certificate of Insurance shall be payable until the total amount of compensation shall have been ascertained and agreed.

5.4. Payment of Benefit

5.4.1. All benefits shall be paid only when the claim has been proven to the satisfaction of the Company and the total amount of compensation has been ascertained and agreed upon by the Company and Policyholder.

5.4.2. Upon receipt and approval of due proof of claim for Life Insured from the claimant (i.e. the Insured Member or his legal representative), the Company shall make payment of such claim to Insured Member or his legal representative, and such payment made shall release the Company from all liabilities under this Policy for that Life Insured.

5.4.3. In the event of a claim for a Life Insured who is an Eligible Dependant, the Company shall make payment of the benefit to the Insured Member.

5.5. Fraudulent Claims

If any claim under this Policy is in any respect, fraudulent or if any fraudulent means or devices shall be used by the Policyholder or a Life Insured or any one acting on behalf of the said parties to obtain a benefit under this Policy, the Company shall be under no liability in respect of such claims and shall be entitled to recover any payment made prior to the discovery of fraud.

No wording or wordings below this line will be construed as being part of this Certificate of Insurance unless approved by a duly authorised personnel of the Company.