



## **MyBenefits Plus**

A benefits plan that is both flexible and comprehensive  
– so your team can focus on their 100%





Inside this brochure, you can go through the **MyBenefits Plus** features, plan options and annual premium rates that will help you provide the best to your employees.

To sign up, simply call your trusted financial adviser representative for assistance.

For further information on the product, please email us at **[ebh\\_enquiries@aviva-asia.com](mailto:ebh_enquiries@aviva-asia.com)**.



# Make a difference to your team – where it counts

What makes people stay in their jobs? Apart from having work that they love, what's important is the relationships they build with their colleagues, employer and company. They need to know that beyond a paycheck every month, they are being looked after and can trust that the management has their best interests at heart.

Show your staff that when they join your team, they are entering into a relationship of trust and care. Aviva's **MyBenefits Plus** group plan is a specially designed insurance solution for Small and Medium Enterprises (SMEs) that gives your employees protection against unexpected health challenges and accidents, both on and off the job.

With premiums that are flexible and cost-effective depending on the level of coverage that your company needs, **MyBenefits Plus** will take care of your employees' well-being and also those they love most.

With a company that provides this level of security as benefits, who wouldn't love their job?

## Why consider **MyBenefits Plus**?



### Guaranteed acceptance

Eligible employees will be covered immediately upon enrolment without having to undergo medical examination<sup>1</sup>.



### Portfolio pricing

Premiums are priced based on the entire portfolio within MyBenefits Plus. This means that claims made by individual companies will not cause their premiums to automatically increase at renewal.



### A protection plan for every budget

MyBenefits Plus premium table shows you exactly how much you need to pay every year for both existing or new employees. This means that you can renew your plan without having to renegotiate on pricing.



### Minimal eligibility requirement

You can activate MyBenefits Plus with as few as two employees in your team.



### 24-Hours worldwide cover

Whether at work or on their day off, your employees are covered 24 hours, worldwide

<sup>1</sup> For Group Term Life and Group Living Care, Sum Assured in excess of S\$150,000 is subject to underwriting.

# MyBenefits Plus - An Overview

	Benefit Type	Coverage	Benefits
Basic Plans	Group Term Life	Death and Total & Permanent Disability due to any cause, i.e. illness or accident	<ul style="list-style-type: none"> <li>a. Lump sum payable upon death</li> <li>b. First S\$200,000 or full sum assured (whichever is lesser) payable in lump sum upon Total &amp; Permanent Disability and the balance in three equal annual installments</li> <li>c. Advanced Payment Benefit</li> <li>d. Extended Benefit</li> </ul>
	Group Personal Accident	Death, Total & Permanent Disability and Dismemberment resulting from Accidental injuries only	<ul style="list-style-type: none"> <li>a. Lump sum payable upon death</li> <li>b. Lump sum benefit payable for any permanent disabilities and dismemberment set out in the Schedule of Indemnity<sup>1</sup></li> <li>c. Lump sum benefit payable for any dismemberment set out in the Schedule of Indemnity<sup>1</sup></li> </ul>
	Group Basic Medical	Reimbursement of medical expenses incurred as a result of hospitalisation or a surgery due to an illness or an accident	<ul style="list-style-type: none"> <li>a. Lump sum limit per disability excluding room, board and ICU charges</li> <li>b. Covers Outpatient Kidney Treatment and Chemotherapy / Radiotherapy (for cancer) on per annum basis</li> <li>c. Flexibility of choice of hospitals</li> <li>d. No Surgical Schedule of Fees</li> <li>e. Death Benefit</li> </ul>
Supplementary Plans	Group Living Care (Rider to Group Term Life) (Accelerator)	Diagnosis of one of the 37 Critical Illnesses <sup>1</sup>	Lump sum payment upon diagnosis of one of the 37 Critical Illnesses <sup>1</sup> certified by a Registered Medical Practitioner. Cover for Group Living Care terminates upon payout of this benefit and cover for Group Term Life will be reduced by the same amount.
	Group Major Medical (Rider to Group Basic Medical)	Reimbursement of medical expenses in excess of Group Basic Medical	Payable if Hospital Confinement exceeds limits in the Group Basic Medical Plan and: <ul style="list-style-type: none"> <li>a. Hospitalisation &gt; 20 days or</li> <li>b. Surgical Percentage <math>\geq</math> 70% per incision</li> </ul> Co-insurance of 20% applies
	Group Outpatient Medical (Rider to Group Basic Medical)	Reimbursement of outpatient medical expenses incurred in General Practitioner (GP) or Specialist Practitioner (SP) clinics and Diagnostic Test	General Practitioner (GP) <ul style="list-style-type: none"> <li>a. Clinical consultation at limits as stipulated in Schedule</li> <li>b. Traditional Chinese Medicine Practitioner benefit at limits as stipulated in Schedule</li> </ul> Specialist Practitioner (SP) <ul style="list-style-type: none"> <li>a. Specialist consultation at limits as stipulated in Schedule subject to referral by GP</li> <li>b. Diagnostic Test, X-Ray &amp; Laboratory Test and Physiotherapy at limits as stipulated in Schedule subject to referral by GP or SP</li> </ul>
	Group Dental (Rider to Group Basic Medical)	Reimbursement of outpatient dental expenses incurred in the list of panel dental clinics	Panel Dentist <ul style="list-style-type: none"> <li>a. Dental services at limits as stipulated in Schedule</li> </ul>

<sup>1</sup> As stated out in the policy contract.

**Important Note:** Please refer to the policy contract for all policy terms.

# Basic Plans

Plan options for you to choose from

## Group Term Life

Benefits / Plan Type	Plan 1 (S\$)	Plan 2 (S\$)	Plan 3 (S\$)	Plan 4 (S\$)	Plan 5 (S\$)	Plan 6 (S\$)
Group Term Life <sup>1</sup>	50,000	100,000	150,000	200,000	300,000	500,000

<sup>1</sup> Sum Assured in excess of S\$150,000 is subject to underwriting

## Group Personal Accident

Benefits / Plan Type	Plan 1 (S\$)	Plan 2 (S\$)	Plan 3 (S\$)	Plan 4 (S\$)	Plan 5 (S\$)	Plan 6 (S\$)
Group Personal Accident	50,000	100,000	150,000	200,000	300,000	500,000

## Group Basic Medical

Benefits / Plan Type	Government/Restructured <sup>2</sup>		Private		
	Plan 1 (S\$)	Plan 2 (S\$)	Plan 3 (S\$)	Plan 4 (S\$)	Plan 5 (S\$)
<b>1. Room and board (R&amp;B)</b> a. Daily room & board (Maximum 120 days, inclusive of Intensive Care Unit (ICU)) b. Intensive Care Unit (per disability)	4-Bedded 10,000	1-Bedded 10,000	4-Bedded 10,000	2-Bedded 10,000	1-Bedded 10,000
<b>2. Hospitalisation</b> Other In-patient benefits: – Hospital Miscellaneous Services – Surgical fees – In-hospital doctor consultation	Maximum Limit per disability (excluding RNB & ICU)				
<b>3. Outpatient Benefits</b> a. Pre-hospital Confinement/Surgery – Diagnostic X-Ray and laboratory test (leads to hospitalisation within 90 days) b. Pre-hospital Confinement/Surgery – Specialist consultation (leads to hospitalisation within 90 days) c. Post-hospital Confinement/Surgery Follow-up Treatment (maximum 90 days after discharge)	15,000	20,000	15,000	18,000	20,000
<b>4. Inpatient Psychiatric Treatment<sup>3</sup></b> (Subject to 10 months waiting period)					
<b>5. Rehabilitation Benefit<sup>3</sup></b> (Up to maximum 31 days)					
<b>6. Home Nursing Care<sup>3</sup></b> (Up to maximum 26 weeks per annum)					
<b>7. Overseas Hospitalisation Due to Accident<sup>3</sup></b> (for items 1,2,3)	150% of Inpatient Benefits				
<b>8. Emergency Accident Treatment</b> Maximum limit per disability (excluding RNB & ICU)	1,000	1,000	1,000	1,000	1,000
<b>9. Death Benefit</b>	5,000	5,000	5,000	5,000	5,000
<b>10. Miscarriage Benefit</b>	1,000	1,000	1,000	1,000	1,000
<b>11. Outpatient Cancer &amp; Kidney</b> Kidney dialysis, Erythropoietin and Cyclosporin, Chemotherapy, Radiotherapy (limit per year)	12,000	24,000	12,000	18,000	24,000
<b>Group Major Medical (Optional Cover)</b> a. Maximum In-patient limit payable (per disability per year) b. Co-insurance by employee	60,000 20%	100,000 20%	60,000 20%	80,000 20%	100,000 20%

<sup>2</sup> If an insured person under Plan 1 or 2 is hospitalised in a Private hospital, a 75% pro-ration factor will apply to both Basic Medical and Major Medical Benefits. Pro-ration factor is applied to reduced private hospital bills to Singapore Restructured Hospital equivalent in the claims computation of Plan 1 and 2 except for admission or surgery caused by Medical Emergency and/or Accident.

Major Medical Benefit pays if eligible expenses with respect to Hospital Confinement exceed the limits in the Basic Medical Plan subject to: a) Hospitalisation > 20 days, or b) Surgical Percentage > 70% surgical procedure.

Co-payment applies.

<sup>3</sup> Benefit Enhancement with effect from 1 November 2017.

# Supplementary Plans

Plan options for you to choose from

## Group Living Care

Benefits / Plan Type	Plan 1 (S\$)	Plan 2 (S\$)	Plan 3 (S\$)	Plan 4 (S\$)	Plan 5 (S\$)	Plan 6 (S\$)
Group Living Care <sup>1</sup>	50,000	100,000	150,000	200,000	300,000	Not Applicable

<sup>1</sup> Sum Assured in excess of S\$150,000 is subject to underwriting

## Group Outpatient Medical

### A) General Practitioner (GP) Benefits

Benefits / Plan Type	Plan 1 (S\$)	Plan 2 (S\$)
Per Visit (Panel)	As charged	As charged
Per Visit Per Day (Non-Panel)	Not Applicable	35
Per Visit (Polyclinic)	As charged	As charged
Per Visit Per Day (Traditional Chinese Medicine Practitioner) <sup>2</sup> Benefit – maximum 3 visits per policy year	Not Applicable	30
Per Visit Per Day (Accident & Emergency (A&E) Department)	90 <sup>2</sup>	90 <sup>2</sup>
Per Visit (Overseas Outpatient Treatment)	25	35

### B) General Practitioner (GP), Specialist Practitioner (SP) & Diagnostic, X-ray & Laboratory Test (DXL) Benefits

Benefits / Plan Type	Plan 1 (S\$)	Plan 2 (S\$)	Plan 3 (S\$)	Plan 4 (S\$)
<b>General Practitioner (GP) Benefit</b>				
Per Visit (Panel)	As charged	As charged	As charged	As charged
Per Visit Per Day (Non-Panel)	Not Applicable	35	Not Applicable	35
Per Visit (Polyclinic)	As charged	As charged	As charged	As charged
Per Visit Per Day (Traditional Chinese Medicine Practitioner) <sup>2</sup> Benefit – maximum 3 visits per policy year	Not Applicable	30	Not Applicable	30
Per Visit Per Day (Accident & Emergency (A&E) Department)	90 <sup>2</sup>	90 <sup>2</sup>	90 <sup>2</sup>	90 <sup>2</sup>
Per Visit (Overseas Outpatient Treatment)	25	35	25	35
<b>Specialist Practitioner (SP) &amp; Diagnostic, X-Ray &amp; Laboratory Test (DXL) Benefit</b>				
Specialist Practitioner (SP), Diagnostic, X-Ray & Laboratory Test (DXL), Physiotherapy <sup>2</sup> Benefit Per Policy Year (subject to referral by GP or SP)	1,000 <sup>2</sup>	1,000 <sup>2</sup>	1,500 <sup>2</sup>	1,500 <sup>2</sup>
Includes cover for all other Diagnostic Scans such as Magnetic Resonance Imaging (MRI), Computer Tomography Scan (CT Scan) and Positron Emission Tomography (PET)	No	No	Yes	Yes

<sup>2</sup> Benefit Enhancement with effect from 1 November 2017.

# Supplementary Plans



## Plan options for you to choose from

### C) Group Dental

Benefits / Plan Type	Plan 1 (S\$)	Plan 2 (S\$)
<b>Basic Plan</b>		
1. Consultation and Oral Examination (Maximum thrice per policy year)	✓	✓
2. X-Rays	✓	✓
i) Periapical Film		
ii) Bite-wing (each)		
iii) Occlusal Film		
iv) Orthopantograph		
3. Scaling & Polishing (Maximum thrice per policy year)	✓	✓
4. Amalgam Restoration	✓	✓
i) One surface		
ii) Two surfaces		
iii) Three surfaces		
iv) Retentive Pin		
5. Tooth - Coloured Restoration	✓	✓
i) One surface		
ii) Two surfaces		
iii) Three surfaces		
6. Extraction (inclusive of Local Anaesthesia)	✓	✓
i) Anterior Tooth		
ii) Posterior Tooth		
7. Oral Surgery (inclusive of Local Anaesthesia)	✓	✓
i) Incision and drainage		
ii) Excision of hyper plastic tissue, cyst		
iii) Surgical root removal (per tooth)		
iv) Surgical root removal (soft tissue)		
v) Surgical removal of wisdom tooth (simple bony impaction)		
8. Periodontal Treatment Root Planing	✓	✓
i) Per Tooth		
ii) Subject to per quadrant		
9. Pulp/Root Canal Treatment (inclusive of temporary fillings/dressings)	✓	✓
i) Pulp Capping		
ii) Root Canal Treatment		
- One Canal		
- Two Canals		
10. Miscellaneous Treatment	✓	✓
i) Analgesics (oral only)		
ii) Antibiotics (oral only)		
iii) Administration of Local Anaesthesia (excluding extraction and oral surgery)		
<b>Superior Plan</b>		
1. Preprosthetic Alveoloplasty	Not Applicable	✓
2. Root Canal Treatment (inclusive of temporary fillings / dressing)	Not Applicable	✓
3. Dentures	Not Applicable	✓
i) Acrylic complete upper		
ii) Acrylic complete lower		
iii) Acrylic immediate dentures (Additional cost to denture)		
iv) Acrylic Partial Denture – Base only		
– Per tooth		
v) Metal Partial Denture – Base only		
– Per tooth		
4. Crowns (excludes precious metals)	Not Applicable	✓
5. Surgical removal of wisdom tooth (complicated bony impaction)	Not Applicable	✓
<b>Maximum Limit Per Year (Basic Plan)</b>	<b>200</b>	<b>Not Applicable</b>
<b>Maximum Limit Per Year (Basic + Superior Plan)</b>	<b>Not Applicable</b>	<b>500</b>

# Premium Rates

## Annual Premium Rates Per Person in S\$

Attained Age Benefit	Plan	30 & below	31 – 35	36 – 40	41 – 45	46 – 50	51 – 55	56 – 60	61 – 65	66	67	68	69	70
<b>Group Term Life*</b>	1	40	40	48	78	111	188	360	572	809	893	989	1,097	1,217
	2	80	80	95	155	222	376	720	1,144	1,618	1,785	1,977	2,193	2,434
	3	120	120	143	233	333	564	1,080	1,716	2,427	2,678	2,966	3,290	3,651
	4	160	160	190	310	444	752	1,440	2,288	3,236	3,570	3,954	4,386	4,868
	5	240	240	285	465	666	1,128	2,160	3,432	4,854	5,355	5,931	6,579	7,302
	6	400	400	475	775	1,110	1,880	3,600	5,720	8,090	8,925	9,885	10,965	12,170

Attained Age Benefit	Plan	30 & below	31 – 35	36 – 40	41 – 45	46 – 50	51 – 55	56 – 60	61 – 65	66	67	68	69	70
<b>Group Living Care*</b> (Rider to Group Term Life)	1	35	49	78	127	229	397	615	938	1,058	1,179	1,307	1,482	1,690
	2	70	97	156	253	457	794	1,230	1,875	2,115	2,358	2,614	2,963	3,379
	3	105	146	234	380	686	1,191	1,845	2,813	3,173	3,537	3,921	4,445	5,069
	4	140	194	312	506	914	1,588	2,460	3,750	4,230	4,716	5,228	5,926	6,758
	5	210	291	468	759	1,371	2,382	3,690	5,625	6,345	7,074	7,842	8,889	10,137

Benefit	Occupational Class	Plan	Class 1	Class 2	Class 3
<b>Group Personal Accident**</b>	1		24.08	32.10	42.80
	2		48.15	64.20	85.60
	3		72.23	96.30	128.40
	4		96.30	128.40	171.20
	5		144.45	192.60	256.80
	6		240.75	321.00	428.00

Occupation Class 1: Occupations which are sedentary in nature, e.g. Accountants

Occupation Class 2: Occupations involving outdoor activities, e.g. Outdoor sales persons

Occupation Class 3: Occupations involving the handling of light equipment, e.g. Building & construction workers

\* GST exempted

\*\* Premium Rates include prevailing GST



## Annual Premium Rates Per Person in S\$

Benefit \ Attained Age	Plan	30 & below	31 – 35	36 – 40	41 – 45	46 – 50	51 – 55	56 – 60	61 – 65	66 – 70
<b>Group Basic Medical**</b>	1	167.00	198.50	198.50	229.60	271.30	416.80	542.00	781.70	1,035.80
	2	292.20	313.00	313.00	364.90	416.80	542.00	865.10	1,042.20	1,380.90
	3	208.70	239.70	239.70	255.80	396.50	521.10	677.40	937.90	1,242.90
	4	260.60	292.20	292.20	354.80	479.40	604.60	833.60	1,042.20	1,380.90
	5	385.80	416.80	416.80	448.40	646.30	781.70	958.80	1,354.70	1,795.00
<b>Group Major Medical**</b> <small>(Rider to Group Basic Medical)</small>	1	9.10	10.70	10.70	12.40	14.50	22.00	28.90	41.20	55.20
	2	15.60	16.60	16.60	19.30	22.00	28.90	46.10	55.20	73.30
	3	11.30	12.90	12.90	14.00	20.90	27.90	35.90	49.80	66.40
	4	14.00	15.60	15.60	18.80	25.70	32.10	43.90	55.20	73.30
	5	20.40	22.00	22.00	24.10	34.30	41.20	50.90	71.70	95.30
<b>Group Outpatient (GP Benefit**)</b> <small>(Rider to Group Basic Medical)</small>	1	251.45					278.20			367.05
	2	304.95					353.10			466.00
<b>Group Outpatient (GP, SP &amp; DXL Benefit**)</b> <small>(Rider to Group Basic Medical)</small>	1	369.15					625.95			826.10
	2	422.65					700.85			925.05
	3	398.65					713.20			941.15
	4	452.15					788.10			1,040.10
<b>Group Dental**</b> <small>(Rider to Group Basic Medical)</small>	1	163.75								
	2	290.00								

\*\* Premium Rates include prevailing GST

# Underwriting Guidelines

## MyBenefits Plus Underwriting Guidelines

### Period of Insurance

- Duration of coverage is for 12 months, renewable annually

### Territorial Limits

- 24 hours, worldwide coverage

### Eligibility

- All full-time, permanent and actively at-work employees, directors, partners and proprietors aged 16 to 70 years who are Singaporeans, Permanent Residents (PR), or with valid employment pass are eligible.
- Dependants of employees are also eligible for coverage:
  - a) Spouse who is not divorced or legally separated from the Eligible Person at policy commencement date or at policy renewal
  - b) Unmarried or unemployed children who are between the ages of 15 days (and discharged from hospital) and 25 years at policy commencement date or at policy renewal
- Dependant Plan shall be the same as Employee Plan. If dependant's coverage is taken, it will apply to all eligible employees in the company within the same basis of coverage.

### Occupational Class

- All benefits are available to Occupational Class 1 to 3 only

### Premium

- Premium rate is based on the individual's attained age (age last birthday)
- Mode of payment is Annual
- Prevailing GST applies to all plans except Group Term Life & Group Living Care

### Benefit Plan Crossovers

- Crossing of plans for different benefits is allowed. For example, employees can be covered under Plan 1 for Group Term Life and Plan 3 for Group Basic Medical
- Group Basic Medical (GBM) and Group Major Medical (GMM) plans must be the same i.e., if Plan 1 for GBM is chosen, the GMM plan must be Plan 1 as well
- Group Term Life (GTL) and Group Living Care (GLC) plans must be the same i.e., if Plan 2 for GTL is chosen, the GLC plan must be Plan 2 as well. However, if insured is covered under Plan 6 for GTL, GLC will only be covered up to S\$300,000

## MyBenefits Plus Underwriting Guidelines

### Exclusions<sup>#</sup>

- For Group Term Life
  - a) All pre-existing conditions are excluded for first 18 months of coverage, unless Insured Person has been fully underwritten by Aviva
  - b) Suicide is excluded for the first 12 months
- For Group Basic Medical
  - a) All pre-existing conditions are excluded for first 12 months of coverage, except for Outpatient Cancer & Kidney Treatment, for which pre-existing conditions will be permanently excluded
- For Group Major Medical
  - a) All pre-existing conditions are excluded permanently unless Insured Person has been fully underwritten by Aviva
- For Group Living Care
  - a) All pre-existing conditions are excluded permanently
  - b) Suicide is excluded for the first 12 months
- For Group Personal Accident
  - a) Suicide or any attempted suicide or self-injury whether the Insured Person is sane or insane is excluded

<sup>#</sup> Please refer to the relevant policy contract for full list and details of exclusions.

### Important Notes

The policy is underwritten by Aviva. This is published for general information only and does not have regard to the specific investment objectives, financial situation and the particular needs of any specific person. You may wish to seek advice from a financial adviser representative before making a commitment to purchase the product. In the event that you choose not to seek advice from a financial adviser representative, you should consider whether the product in question is suitable for you. Buying a life and health insurance policy is a long-term commitment. An early termination of the policy usually involves a high cost and the surrender value payable, if any, may be less than the total premium paid. Buying life and health insurance products that are not suitable for you may impact your ability to finance your future life and healthcare needs. This is not a contract of insurance. Information is correct as at November 2017.

This policy is protected under the Policy Owners' Protection Scheme, and 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 Aviva or visit the Life Insurance Association or SDIC websites ([www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg))



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