



Liberty Insurance Pte Ltd
 Registration no. 199002791D

51 Club Street #03-00 Liberty House
 Singapore 069428
 Tel: (65) 6-2722277
 Fax: (65) 6-2722567



FOREIGN WORKERS MEDICAL INSURANCE

PROPOSAL FORM

Name of Proposer : _____

Employer CPF No : _____ Industry : _____

Address : _____

Period of Insurance : _____ to _____ Agent Code : _____

Person to Contact : _____ Tel : _____ e-mail : _____

Choice of Plan : Plan A Plan B

Annual Premium per worker \$ _____ × No. of foreign workers _____ = Total Premium (b/f GST) \$ _____

Please provide details of foreign workers to be covered.

	Name of Workers	Work Permit No.	S Pass No.	Gender	DOB	Nationality
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Declaration By Proposer

We hereby declare that the information is true and complete and we have not withheld any information that may influence the acceptance of this insurance. We further declare that all the foreign workers listed above are in good health and free from any physical defects or infirmity.

We hereby agree that this proposal and declaration shall be the basis of the contract between the Proposer and Liberty Insurance Pte Ltd and I/We understand that any false, incorrect or misleading statement may render this insurance null and void.

We understand that this Contract shall only commence until this proposal and the listing of foreign workers have been accepted in writing by Liberty Insurance Pte Ltd.

Signature of Proposer/Authorised Officer : _____

Designation : _____

Date : _____

Company Stamp : _____



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Foreign Workers Medical Insurance – Summary of Coverage

Schedule of Benefits	Plan A	Plan B
1. Room & Board	Based on Government Restructured Hospital Charges	Based on Government Restructured Hospital Charges
2. Intensive Care Unit	As Charged	As Charged
3. Hospital Miscellaneous Services	As Charged	As Charged
4. Surgical Fee	As Charged	As Charged
5. In Hospital Physician's Visits	As Charged	As Charged
6. Pre-Hospitalisation Diagnostic X-Ray & Lab Test 90 days prior to hospitalisation	As Charged	As Charged
7. Pre-Hospitalisation Specialist Consultation Fees 90 days prior to hospitalisation	As Charged	As Charged
8. Post Hospitalisation Within 90 days following discharged from Hospital	As Charged	As Charged
9. Annual Overall Limit per person per policy year	S\$5,000	S\$5,000
10. Coinsurance* Deductible* *Subject to Coinsurance or Deductible whichever is higher for each and every claim	NIL NIL	10% S\$500
11. Special Grant per person	S\$3,000	S\$3,000

Annual Premium per employee (before GST)	Plan A	Plan B
1 to 10	S\$80.00	S\$60.00
11 to 30	S\$75.00	S\$55.00
31 to 50	S\$65.00	S\$50.00

Optional Riders : (available to WP holders only, group discount do not apply)	Limits	Additional Premium per employee (before GST)
1) Outpatient Specialist Consultation per person per policy year Subject to S\$10 co-payment per visit and maximum of 20 visits per year	S\$300	S\$18.00
2) Outpatient Cancer and Kidney Dialysis Treatment per person per policy year	S\$5,000	S\$25.00

The information provided here is only a summary. This Policy is subjected to Liberty's Standard Foreign Worker Medical Insurance Policy terms and conditions, details of which can be obtained from our Liberty website at www.libertyinsurance.com.sg



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Product Summary

1. Eligibility

Only Work Permit or S Pass holders are eligible for the cover and participation is compulsory. For Singaporeans, Singapore PRs or other pass holders, acceptance is on a case-by-case basis.

2. Scope of Cover/Territorial Limit

24 hours coverage within Singapore only. However when an Insured Employee is entitled to benefits payable under Workmen's Compensation Law or similar legislation, any group or individual insurances, the benefit payable under the Policy shall be limited to the balance of charges not covered by benefits payable under the Law or similar legislation, and other insurances or that calculated from the Schedule of Benefits, whichever is the lesser.

3. Terms at Renewal

Coverage may be renewed on the policy anniversary date by payment of the annual premium. Premium rates are non-guaranteed.

4. Cancellation

The Company reserves the right to terminate or change the Policy terms and coverage at any time by giving 30 days' notice in writing to the Insured. Cancellation is subject to short rate premium table as stipulated in the Policy.

5. Waiting Period for Pre-Existing Condition

For Group Size 10 and below – Any Pre-Existing illnesses and conditions are permanently excluded from cover for all Foreign Workers

For Group Size 11 and above – Any Pre-Existing illnesses and conditions will only be covered after 12 months of continuous insurance commencing from the effective date of cover, unless they have been continuously insured for 12 months without any lapse of cover under the Policyholder's Group Hospital & Surgical insurance with the previous Insurer.

6. Age Limit

Maximum entry age is 65 years old. Renewal age is up to 70 years old subject to annual health declaration.

7. Free-Look is not applicable.

8. Coverage is subject to Liberty's standard Foreign Worker Medical Insurance policy terms and conditions.



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Major Definitions:-

1. Pre-Existing Condition refers to any condition which existed or have developed symptoms or there exists manifestation of illness or medical treatment have been sought on drugs and medicine have been prescribed before the effective date of cover in respect of any Insured Employee of which the Insured Employee was aware or should reasonably have been aware or based on normal medically accepted physical or pathological development of the illness or illnesses.
2. Special Grant refers to the compensation amount payable to the Employer or legal representative in the event of death of the Insured Employee for an Injury or illness during or after treatment at a Hospital or in a Day Surgery Ward.

Major Exclusions:-

1. Birth defects, congenital abnormalities and hereditary conditions.
2. Charges which are not actual, necessary and reasonable expenses incurred in the treatment of the illness or injury.
3. Cost resulting from abuse of drugs or alcohol, self-inflicted injuries, criminal act of the Insured Person and sexually transmitted diseases, or treatment which in any way arises from is attributable to, or is consequential upon Acquired Immune Deficiency Syndrome (AIDS), AIDS related Complex Syndrome (ARCS) and all diseases caused by and/or related to the virus HIV positive, and any communicable diseases requiring isolation or quarantine by law.
4. Treatment for injuries or diseases arising from or consequent upon War, riot, civil commotion, civil war, invasion.
5. Pregnancy including childbirth, caesarean operation, abortion, ectopic pregnancy, hydatidiform mole, miscarriage, treatment against infertility, sterilization and contraception.
6. Treatment arising from any geriatric, psycho-geriatric, psychiatric conditions or physiotherapy.
7. Treatment for obesity, weight reduction and weight improvement.
8. Expenses recoverable from a third party, including Workmen's Compensation Insurance or Social Security Organization.
9. Routine medical examination (including vaccinations, the issue of medical certificates and attestations), routine eye and ear examinations, refractive errors of the eyes, cosmetic or plastic surgery and the provision of appliances including spectacles, special braces, hearing aids, lenses, wheelchairs and any prosthetic devices.
10. Services or treatment of any institution that is mainly long term care facility like convalescent and nursing homes, nature cure clinics, spa, hydro-clinic and sanatorium and establishments that provides only incidental or limited hospital services.

For a full set of exclusions, please refer to the full Policy terms and conditions, details of which can be obtained from our Liberty website at www.libertyinsurance.com.sg