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## MAIDPLUS INSURANCE POLICY

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This is your *MaidPlus* insurance policy document. Please examine it together with the **schedule**, to make sure that you have the protection you need.

It is important that this policy document together with the **schedule** and any amendments or endorsement issued from time to time are read together to avoid any misunderstanding.

If there are any changes that may affect the insurance provided, please notify us immediately.

### HOW YOUR INSURANCE OPERATES

Your policy is a contract between us, the **company**, you (the **policyholder**), and the **maid** named in the **schedule**. The application form, declaration and any information you gave to us when applying for the policy, are the basis of this contract.

The insurance we provide in this policy is subject to the terms, conditions, exclusions contained in this policy, the **schedule** and any endorsement to this policy (hereinafter collectively referred to as the "Terms of this policy").

In return for your payment of the premium, we will provide you with insurance cover as described in the policy during the **period of insurance** as specified in the **schedule** or any subsequent period for which you pay and we accept the required premium.

### OUR PROMISE OF SERVICE

We want to provide you with a high standard of service and to meet any claims covered by this policy honestly, fairly and promptly. If you have any reason to believe that we have not done so, please contact your agent or broker. If you do not use the services of a professional intermediary, please contact us directly. We are ready to help you with your concerns.

## A GUIDE TO THE POLICY

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## DEFINITION OF WORDS

(Applicable to the whole policy)

Certain words are defined below. These have the same meaning wherever they are used in the policy or the **schedule** and are highlighted in the policy by being in bold print (e.g. **maid**, **accident**).

<b>TERM</b>	<b>DEFINITION</b>
<b>Accident</b>	An unexpected event which happens suddenly and gives rise to a result which the <b>maid</b> did not intend or anticipate.
<b>TCM practitioner</b>	A traditional Chinese medicine practitioner who is legally licensed medical practitioner, including acupuncturists and bonesetters, who is qualified to practise traditional Chinese medicine in line with the laws which apply in the country in which the practice is granted. The TCM practitioner must not be the family member, business partner, employee or employer of the <b>policyholder</b> or the <b>maid</b> .
<b>Co-payment</b>	Means the proportion of covered medical expenses claims which the <b>policyholder</b> must co-pay as specified in the <b>schedule</b> .
<b>Dentist</b>	Means a properly qualified dentist, dental surgeon or dental practitioner (other than the <b>policyholder</b> or a member of the <b>policyholder's</b> immediate family) licensed by the competent authorities of the country in which treatment is provided, and who in rendering such treatment is practicing within the scope of his/her licensing and training.

<b>TERM</b>	<b>DEFINITION</b>
<b>Doctor</b>	A legally registered medical practitioner qualified to practise western medicine and surgery in line with the laws of the country in which the practice is granted. The doctor must not be the family member, business partner, employee or employer of the <b>policyholder</b> or the <b>maid</b> .
<b>Hospital</b>	A lawfully operating institution which has 24 hours nursing services by registered graduate nurses, one or more <b>doctors</b> available at all times and organised facilities for diagnosis and major surgery, and shall not primarily be a clinic, a place for alcoholics or drug addicts, a nursing, rest or convalescent home or home for the aged or similar establishment.
<b>Hospital and surgical expenses</b>	Costs of surgery or treatment as an <b>inpatient</b> of a <b>hospital</b> incurred during the <b>period of cover</b> including charges for accommodation, X-ray, normal food, medical attendants' fees, radiological treatment, surgeon's fees, anaesthetist's fees, theatre fees, pathology fees, drugs, medicines and any other costs of examination, treatment or special services prescribed by a registered <b>doctor</b> .
<b>Illness</b>	Means physical illness or disease, marked by a pathological deviation from the normal healthy state.
<b>Injury</b>	Bodily injury to the <b>maid</b> suffered anywhere in the world, caused solely and directly by an <b>accident</b> and not by <b>illness</b> or gradual physical or mental wear and tear.
<b>Inpatient</b>	Means an inpatient stay in the <b>hospital</b> by the <b>maid</b> where the treatment is being received for which room and board charges are made by the <b>hospital</b> , and this excludes inpatient stay by the <b>maid</b> under observation in a ward.
<b>Maid</b>	Your foreign domestic worker named in the <b>schedule</b> who has been approved by Singapore's Ministry of Manpower for employment by you.
<b>Occurrence</b>	Means an <b>inpatient</b> and day care surgery episode in which the <b>maid</b> is treated or until the <b>maid</b> is fit for discharge.
<b>Period of cover</b>	The period which the <b>maid</b> is covered within the <b>period of insurance</b> . For a new <b>maid</b> , the cover starts on the <b>maid's</b> arrival in Singapore, upon the clearance of the Singapore immigration. Cover ceases in accordance with General Condition 9 – Termination.
<b>Period of insurance</b>	The period as stated in the <b>schedule</b> .
<b>Pre-existing condition</b>	Means any <b>injury, illness, condition</b> or symptom: <ol style="list-style-type: none"> <li>for which treatment, or medication, or advice, or diagnosis has been sought or received or was foreseeable prior to the <b>period of cover</b>, or</li> <li>which presented signs or symptoms of which the <b>maid</b> or the <b>insured</b> was aware or should reasonably have been aware or which originated or existed, prior to the <b>period of cover</b>.</li> </ol>
<b>Schedule</b>	The schedule containing details of the <b>insured, maid</b> , optional covers (if selected) and <b>period of insurance</b> . The schedule forms part of the policy.
<b>Serious medical condition</b>	A condition which, in the opinion of the treating <b>doctor</b> , is a critically ill state of health that requires emergency medical treatment in order to avoid death or serious impairment to the <b>maid's</b> immediate or long-term health.
<b>Sum insured</b>	The maximum limit we will pay for the relevant section as specified in the Table of Benefits based on the plan stated in the <b>schedule</b> .
We, us, our, the <b>company</b>	Means MSIG Insurance (Singapore) Pte. Ltd.
You, your, the <b>insured</b> , the <b>policyholder</b>	The policy owner named as insured in the <b>schedule</b> .



## THE BENEFITS

We will cover your **maid** based on the benefits up to the **sum insured** of the selected plan as stated in the **schedule**. For sections 1 and 2, the sums insured are for every 12 months.

### SECTION 1 – PERSONAL ACCIDENT

We will pay to the **maid** or her legal personal representatives or any other person appointed by the Controller of Work Passes to act on behalf of the **maid** or the **maid's** legal representatives the benefit(s) referred to below if during the **period of cover** the **maid** sustains an **injury** which within 12 calendar months from the **accident**, results directly and independently of any other cause in death or disablement or expenses being incurred.

#### 1.1 Death

Where the **maid** dies, we will pay the **sum insured**.

#### 1.2 Permanent disablement

Where the **maid** suffers total and permanent loss or disablement ("Permanent disablement") as described in the permanent disability scale, we will pay the relevant percentage of **sum insured** as specified in the scale.

#### 1.3 Medical expenses

We will pay the medical, surgical or **hospital** expenses incurred during the **period of cover** which are prescribed by a **doctor** up to the **sum insured**.

Section 1.3 (Medical expenses) is extended to cover for the following medical expenses incurred during the **period of cover**, up to each sub-limit but not exceeding the **sum insured** as specified.

##### a) Dental treatment due to injury

We will pay for the **maid's** medical expenses for treatment by a licensed **dentist**, necessitated by an **injury** sustained during the **period of cover**.

##### b) Treatment by TCM practitioner due to injury

We will pay for the **maid's** medical expenses for treatment by a **TCM practitioner**, necessitated by an **injury** sustained during the **period of cover**.

##### c) Medical expenses for dengue fever

If during the **period of cover**, a **doctor** suspects that the **maid** has dengue and prescribes the diagnostic tests necessary to confirm the infection, we will pay for the medical expenses incurred.

- i) If your **maid's** diagnostic test result is positive, meaning she has dengue infection, we will pay for the medical expenses for the **maid's** medical treatment due to dengue fever.
- ii) If your **maid's** diagnostic test result is negative, meaning she does not have dengue infection, we will pay for the medical expenses relating to the consultation and diagnostic test for dengue, excluding any treatment or medication. Payment of benefit for negative result is limited to one claim per policy.

All claims under this benefit must be accompanied with the submission of diagnostic test results.



If your **maid** is hospitalised as a result of dengue with claims payable under section 2, no benefit will be payable under this extension – Medical expenses for dengue fever.

**Special provisions to Section 1**

1. Loss of limb or member or part of it described in the Permanent Disability Scale below means loss by actual physical severance or total and permanent loss of use.
2. The total sum payable for permanent disablement in respect of **injury** to more than one portion of a limb or member or part of it will not be more than the sum payable in respect of such **injury** to the whole of that limb or member or part of it.

For any one **accident**, the maximum total sum payable for any or all compensation under permanent disablement shall not exceed 100% of the **sum insured** specified under section 1.2 (Permanent disablement).

3. The maximum we will pay for section 1.1 (Death) and section 1.2 (Permanent disablement) is \$60,000 per policy year. For the avoidance of doubt, the maximum we will pay for section 1.3 (Medical expenses) is \$1,000 per policy.
4. The **sum insured** for section 1.1 (Death) and section 1.2 (Permanent disablement) are limits for every 12 months from the start of the **period of cover**.

**Permanent Disability Scale**

Permanent Disablement	Percentage of sum insured
1. Loss of two limbs	100%
2. Loss of both hands, or of all fingers and both thumbs	
3. Total and permanent loss of sight of both eyes	
4. Total and permanent paralysis	
5. Injuries resulting in being permanently bedridden	
6. Any other Injury causing permanent total disablement from engaging in or attending to employment or occupations of any and every kind	
7. Loss of arm at shoulder	
8. Loss of arm between shoulder and elbow	
9. Loss of arm at elbow	
10. Loss of arm between elbow and wrist	
11. Loss of hand at wrist	
12. Loss of leg	100%
- at hip	
- between knee and hip	
- below knee	
13. Eye: Total and permanent loss of	50%
- whole eye or sight in one eye except perception of light	
14. Total and permanent loss of hearing	75%
- both ears	
- one ear	15%
15. Total and permanent loss of speech	50%
16. Loss of four fingers and thumb of one hand	50%
17. Loss of four fingers	40%
18. Loss of thumb	25%
- both phalanges	
- one phalanx	10%
19. Loss of index finger	10%
- three phalanges	
- two phalanges	8%

	- one phalanx	4%
20. Loss of middle finger	- three phalanges	6%
	- two phalanges	4%
	- one phalanx	2%
21. Loss of ring finger	- three phalanges	5%
	- two phalanges	4%
	- one phalanx	2%
22. Loss of little finger	- three phalanges	4%
	- two phalanges	3%
	- one phalanx	2%
23. Loss of metacarpals	- first or second (additional)	3%
	- third, fourth or fifth (additional)	2%
24. Loss of toes	- all	15%
	- great, both phalanges	5%
	- great, one phalanx	2%
	- other than great, if more than one toe lost, each	1%

### Special conditions to Section 1

You must give immediate notice in writing to us of any **illness** or physical defect or infirmity of the **maid** of which you have become aware and you must pay any additional premium that we may require.

## SECTION 2 – HOSPITAL & SURGICAL EXPENSES

This section meets the requirements of Singapore Ministry of Manpower.

We will reimburse for **hospital and surgical expenses**, incurred as a result of an **injury** or **illness** sustained by the **maid** during the **period of cover** provided such expenses are incurred in respect of room and board charges in Class B2 or C ward in a **hospital** which is a Singapore government **hospital** or Singapore restructured **hospital**.

If the **maid** is hospitalised in other class of ward or **hospital** other than the above mentioned, we will reimburse a percentage of the **hospital and surgical expenses** incurred according to the Proration Factor Table.

**Hospital and surgical expenses** include:

### 2.1 Day care surgery

All medically necessary surgical procedures and related treatment prescribed by a **doctor** at a **hospital** or an outpatient medical clinic. Day care surgery excludes all non-surgical procedures and related treatment.

### 2.2 Pre-hospitalisation medical consultation and diagnostic services

Consultation by a **doctor**, and laboratory, X-ray or other medically necessary diagnostic procedures prescribed by a **doctor**, for the treatment of an **injury** or **illness** and which within 90 days of being carried out, result in the **maid** being admitted as a registered **inpatient**, or requiring day care surgery, for the treatment of the same **injury** or **illness**.

### 2.3 Post-hospitalisation follow-up treatment

The medically necessary follow-up treatment prescribed by a **doctor** to be rendered for up to 90 days from the **maid's** discharge from **hospital** and day care surgery. Cover is restricted to follow-up treatment of the same **injury** or **illness** for which the **maid** received **inpatient** treatment or day care surgery.



## Proration Factor Table

Type of hospital	Type of ward	Amount claimable up to the sum insured
Singapore government or restructured hospital	A1 ward	50% of total bill
	A2 ward	60% of total bill
	B1 ward	70% of total bill
Private hospital in Singapore	All	40% of total bill
Hospital outside Singapore*	All	30% of total bill

\***Hospital and surgical expenses** for **hospital** outside Singapore is covered only if the **maid** sustained **injury** or **illness** outside Singapore, which results in a **serious medical condition**, while travelling with you.

## Claims co-payment

A **co-payment** is applicable after the first \$15,000 of an eligible bill per policy year, up to the maximum **sum insured** specified in the **schedule**, as follows:

Hospital and surgical expenses incurred per policy year	Co-payment by policyholder
First \$15,000	No <b>co-payment</b>
Above \$15,000	<b>Co-payment</b> as stated in the <b>schedule</b>

The most we will pay under this section is the **sum insured** stated in the Benefits Summary for the plan stated in the **schedule**. The **sum insured** for section 2 is the limit per policy year from the start of the **period of cover**.

For the avoidance of doubt, per policy year refers to each 12-month duration from the start of the **period of cover**.

## Exceptions to Section 2

This insurance does not cover:

- any **pre-existing condition**. This exception is waived if the **maid** has been employed with you for more than 12 continuous months subject to these limits for all plans:
  - sum insured** up to \$60,000; and
  - 25% **co-payment** for the portion of eligible claims amount which is above \$15,000;
- any expenses incurred after the 7th calendar day from being certified to be medically fit for discharge from **inpatient** treatment and assessed to have a feasible discharge option by a **doctor**; or
- any expenses in respect of any instrument examinations, laboratory test, **hospital** confinement, surgical operation, treatment or services which have not been prescribed by a **doctor**;
- routine medical examinations or check-ups; any medical examinations or laboratory test which are not incident to the treatment or diagnosis of any **injury** or **illness** as may be covered by this policy; any expenses in respect of treatment undertaken as a preventive measure including but not restricted to vaccinations, inoculations, contraception and other prophylactic treatment; or examinations for employment or travel; or any non-medically necessary procedure;
- inpatient** treatment for conditions in respect of which the **maid** can be properly treated as an outpatient; ambulance fees and private nursing charges;
- any expenses in respect of dental treatment except due to an accident;
- any expenses in respect of purchase of medical equipment, eye glasses or the like, dentures, hearing aids or prosthesis; corrective devices and medical appliances which are not surgically required;



8. cosmetic or plastic surgery other than therapeutic surgery considered as medically necessary by a **doctor**, treatment for obesity, weight reduction or weight improvement;
9. tests or treatment related to sex change, infertility, contraception, impotence, or sexual dysfunction;
10. outpatient rehabilitation such as physiotherapy, occupational therapy and speech therapy, unless prescribed by a **doctor** during **inpatient** and as part of post-hospitalisation follow-up treatment;
11. traditional Chinese medicine or any form of alternative treatment;
12. treatment of:
  - a) conditions or injuries arising from drug addiction (except that of illicit drugs) or alcoholism;
  - b) conditions or injuries arising from participation in civil commotion, riot, or strike; and
  - c) mental conditions and conditions or injuries arising from self-inflicted injuries or attempted suicide.This exception is waived for the first **occurrence**.
13. the costs of medical reports.

### SECTION 3 – ALTERNATIVE DOMESTIC HELP

In the event that the **maid** sustains **injury** or **illness** during the **period of cover** and is admitted into a **hospital** during the **period of cover**, we will reimburse you a daily allowance for the hiring of temporary domestic help, up to the covered duration and **sum insured**.

### SECTION 4 – WAGES & LEVY

#### 4.1 Inpatient hospitalisation

If you suffer the loss of service of the **maid** due to her **inpatient** hospitalisation for **injury** or **illness** and for which **hospital and surgical expenses** are payable under section 2 of this policy, we will reimburse you the **maid's** wages and levy during her **inpatient** hospitalisation up to the covered duration and **sum insured**.

The benefit under this section is payable for each completed 24 hours that the **maid** is confined at a **hospital** during the **period of cover**.

#### 4.2 Compassionate home leave

If you suffer the loss of service of the **maid** who travels back to her home country due to the death of her legal parent, spouse or child, we will reimburse you the **maid's** wages and levy during such home leave, up to the covered duration and **sum insured**.

Home leave refers to each day the **maid** is outside Singapore for travelling back to her home country to visit her family.

To avoid any doubt, we will only pay either sections 4.1 or 4.2, but not both benefits if the **maid** is hospitalised during her home leave. In addition, if there is a claim under sections 4.1 and 4.2 during the same **period of cover**, we will only pay either sections 4.1 or 4.2, but not both benefits.





## SECTION 5 – REPATRIATION EXPENSES

We will reimburse you for actual repatriation expenses you incurred due to the **maid's injury or illness** sustained during the **period of cover**, up to the **sum insured** in respect of:

1. conveyance of the **maid** from Singapore to her home country due to her permanent disablement as described in items 1 to 13 and items 15 to 16 of the Permanent Disability Scale of section 1, which prevents her from engaging in or attending to her employment or occupation as your **maid**; or
2. burial or cremation of the **maid** in Singapore and conveyance of body or ashes from Singapore to her home country.

We will only pay under this section if a detailed account with supporting bills is submitted to and approved by us.

## SECTION 6 – TERMINATION EXPENSES

We will reimburse you for the actual expenses incurred up to the **sum insured** in respect of the maid agency fees excluding travel fare, for the termination of the **maid's** services as a result of her being certified to be medically unfit to perform the usual services as required of her as a **maid** due to **injury or illness** sustained during the **period of cover**, provided that such certification is given by a **doctor**.

## SECTION 7 – REPLACEMENT MAID EXPENSES

We will reimburse you for the actual employment agency's fees incurred in hiring a replacement maid up to the **sum insured** following the termination of the **maid's** services as a result of her death or being certified to be medically unfit to perform the usual services as required of her as a **maid** due to **injury or illness** sustained during the **period of cover**, provided that such certification is given by a **doctor**.

To qualify for claim under this section, prior agreement must be obtained from us for all such expenses and that the replacement maid be employed within 90 days from the termination of the **maid's** services.

### Exceptions to Section 7

1. No payment shall be made under this section unless the replacement maid is a maid whose work permit is issued by the Ministry of Manpower.
2. No payment shall be made under this section if the death or permanent disablement of the **maid** is caused directly or indirectly by the **insured** or the **insured's** household members residing with the **insured**.

## SECTION 8 – SPECIAL GRANT

If your **maid** dies in the course of her employment with you in Singapore during the **period of cover**, we will pay the **sum insured** to her estate or legal personal representative.

## SECTION 9 – LIABILITY TO THIRD PARTIES

We will indemnify you up to the **sum insured**, against all sums which you are legally liable to pay as compensation for **accidents** resulting in:

1. death or bodily **injury** to any other person; and
2. loss of or damage to property belonging to other persons

caused by the negligence of your **maid** in the course of and arising out of her employment with you in Singapore during the **period of cover**.



We will also pay:

1. costs and expenses of litigation recovered by any claimant from you and your **maid**; and
2. costs and expenses of legal defence incurred by you and your **maid** with our written consent.

### **Exceptions to Section 9**

We will not pay for:

1. liability in respect of loss or damage to property belonging to or in the charge or under the control of you or your **maid**;
2. liability for death, **injury, illness** or loss of or damage to property:
  - a) arising out of any deliberate or malicious act;
  - b) arising out of your own employment, business or profession; and
  - c) arising out of a contract or agreement which would not have arisen in the absence of such contract or agreement;
3. any claim or loss arising out of any activities or business conducted or transacted via the internet, intranet, extranet or via your or the **maid's** own website, internet site, web address or via the transmission of electronic mail or documents by electronic means;
4. fines, penalties, exemplary or punitive damages; and
5. judgments which are not in the first instance delivered by or obtained from a Court of competent jurisdiction within the Republic of Singapore nor to orders obtained in the said Court for the enforcement of judgments made outside the Republic of Singapore whether by way of reciprocal agreement or otherwise.

## **SECTION 10 – MAID'S WELFARE**

### **10.1. Personal belongings**

We will reimburse you up to the **sum insured** for loss of or damage which occurs within the **insured's** residence to personal effects belonging to your **maid** caused by fire, water following bursting or overflowing of water tank(s), apparatus or pipe(s) or flood damage including theft accompanied by actual forcible and violent entry to or exit from the **insured's** residence in Singapore during the **period of cover**.

### **10.2. Compassionate travel expenses**

If your **maid** is required to travel back to her home country as a result of the death of the **maid's** legal parents, spouse or children, we will reimburse you up to the **sum insured** for the reasonable travel (economy air travel, first-class rail travel) and accommodation (standard room) expenses incurred for such return journey.

## **SECTION 11 – INSURANCE GUARANTEE BOND**

(to Ministry of Manpower)

We will furnish a Letter of Guarantee (to be issued separately) on your behalf in lieu of the sum of S\$5,000 which you are required to deposit with the Ministry of Manpower in respect of the **maid** employed.

Pursuant to the Letter of Guarantee, we will guarantee and undertake as principal debtor to pay the Ministry of Manpower on demand, any sums not exceeding S\$5,000.



Conditions applicable to this section:

1. you must counter-indemnify us against all claims, payment, losses, liabilities, costs, or expenses whatsoever which we incur or may incur under the terms of the Letter of Guarantee; and
2. this section will not be in force unless and until the counter indemnity documents have been correctly executed, delivered to and accepted by us.

## OPTIONAL COVERS

### SECTION 12 – WAIVER OF COUNTER INDEMNITY

(Please refer to the **schedule** to see if this section is in force)

In the event of a demand made by the Ministry of Manpower on the Letter of Guarantee covered under section 11 of this policy, the company shall waive its rights to indemnification against the **insured** under the counter indemnity for the said Letter of Guarantee.

Provided that the waiver given by us under this section does not apply to:

1. any loss or payment which the **insured** is aware of prior to effecting cover;
2. any loss or payment arising out of any circumstances caused directly by the **insured** or **insured's** family members or tenants residing with the **insured**; and
3. the amount stated as excess in the **schedule**.

### SECTION 13 – EMPLOYER'S LIABILITY

(Please refer to the **schedule** to see if this section is in force)

In the event your **maid** sustains **injury** or **illness** in Singapore during the **period of cover**, we will indemnify you against all sums for which you are liable to pay compensation at Common Law including all costs and expenses incurred with the written consent of the **company**, up to the **sum insured** specified in the **schedule**.

### SECTION 14 – REDUCTION OF CO-PAYMENT

(Please refer to the **schedule** to see if this section is in force)

You have the option to reduce your co-payment under section 2 by paying additional premium. The co-payment option you have selected during the application of this policy will be stated in the **schedule**.

This optional benefit can only be added before the commencement of the **period of insurance**.

## GENERAL EXCEPTIONS

(Applicable to the whole policy)

1. The policy does not cover:
  - a) any expenses or compensation for treatment or service incurred as a direct or indirect result of **pre-existing conditions**.  
This exception is waived if the maid has been employed with you for more than 12 continuous months and shall be covered under section 2 – Hospital & Surgical Expenses of this policy.
  - b) any consequential loss or damage of any kind whatsoever.



2. The policy does not cover any claim arising directly or indirectly from:

- a) alcoholism or the effect or influence (temporary or otherwise) of alcohol, unless waived under section 2, exclusion 12;
- b) drug addiction or the effect or influence (temporary or otherwise) of drugs not prescribed by a **doctor**, unless waived under section 2, exclusion 12;
- c) riot, strike or civil commotion (unless unforeseeable), unless waived under section 2, exclusion 12;
- d) psychiatric or insanity or conditions related to functional disorder of the mind, nervous disorders, unless waived under section 2, exclusion 12;
- e) suicide, attempted suicide or intentional self-injury while sane or insane or caused directly by the **maid's** deliberate act, unless waived under section 2, exclusion 12;
- f) venereal disease, sexually transmitted diseases, Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC);
- g) any unlawful act of the **maid** or wilful exposure to danger (other than in an attempt to save human life) or wilful act or wilful neglect of the **maid**;
- h) any malicious, wilful, or illegal acts by **insured** or **insured's** family members;
- i) pregnancy, childbirth, miscarriage, abortion, sterilization, menopause or any complications arising from any of these;
- j) any birth defects, congenital abnormalities, hereditary conditions; or
- k) hazardous sports or activities including but not limited to winter sports (such as skiing or snowboarding), underwater activity (such as snorkelling or scuba diving), aerial activity (such as taking a helicopter tour or paragliding) or motor sport (such as motorcycle racing or motor car racing).

3. **War and terrorism exclusion**

This insurance will not cover death, disability, loss, damage, destruction, any legal liabilities, cost or expense including consequential loss of whatever nature, directly or indirectly caused by, resulting from or in connection with any of the following, no matter whether there is any other cause or event contributing at the same time or in any other sequence to the loss.

- a) War, invasion, act of foreign enemy or warlike operations (whether declared or not), riot, civil war, revolution, civil commotion assuming the proportions of or amounting to any uprising, military or usurped power or any similar event.
- b) Any act of terrorism including but not limited to:
  - i) the use or threat of force or violence; or
  - ii) harm or damage to life or to property (or the threat of harm or damage) including, but not limited to, nuclear radiation or contamination by chemical or biological agents,  
  
by any person or group committed for political, religious, ideological or similar purposes, with the intention of putting the public or any section of the public in fear; or



c) Any action taken in controlling, preventing, suppressing or in any way relating to (a) or (b) above.

If we say your claim is not covered as a result of this exclusion, you will need to prove to us otherwise to pay the claim.

#### 4. **Radioactive contamination, chemical, biological, biochemical and electromagnetic weapons exclusion**

This clause will override anything in this insurance which says differently.

We will not cover loss, damage, liability or expense directly or indirectly caused by or contributed to by or arising from:

- a) ionising radiations from or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel;
  - b) the radioactive, toxic, explosive or other dangerous properties of any nuclear installation, reactor or other nuclear machinery;
  - c) any weapon or device using atomic or nuclear fission or fusion or other similar reaction or radioactive force or matter; or
  - d) the radioactive, toxic, explosive or other dangerous properties of any radioactive matter. This exclusion does not apply to radioactive isotopes, other than nuclear fuel, when these isotopes are being prepared, carried, stored, or used for commercial, agricultural, medical, scientific or other similar peaceful purposes;
  - e) any chemical, biological, biochemical, or electromagnetic weapon.
5. Sections 9 and 13 exclude all claims and losses based upon, arising out of, directly or indirectly resulting from or as a result of, or any way involving:
- a) asbestos, or
  - b) any actual or alleged asbestos-related **injury** or damage involving using asbestos, or the presence, existence, detection, removal, elimination or avoidance of asbestos or exposure or potential exposure to asbestos.

In any claim and in any action suit or other proceedings where we allege that by reason of any of the above exceptions any loss is not covered by this policy the burden of proving that such loss is covered will be upon you or the **maid**.

## GENERAL CONDITIONS

(Applicable to the whole policy)

### 1. **Observance**

The due observance and fulfilment of the terms of this policy by the **insured** and the **maid** and the truth of the statements and answers in the application form shall be conditions precedent to any liability by us to make any payment under this policy.

### 2. **Alteration**

We have the right to vary the premium payable and all other terms of this policy by giving the **insured** 30 days' notice of such variations.

### 3. **Reasonable precaution**

You and the maid must take all reasonable precautions to safeguard the **maid** against any loss insured under this policy.



#### 4. Who can claim

You, the **maid**, the **maid's** legal representative or any other person appointed by the Controller of Work Passes to act on behalf of the **maid** or the **maid's** legal representative can submit a claim under this policy.

#### 5. Policy Assignment

This policy is not assignable by you and we shall not be affected by notice of any trust, charge, lien, assignment or other dealing with this policy.

#### 6. Cancellation

We can cancel this policy or any section by giving you 14 days' notice in writing via registered mail to your last known address with exception to section 11.

If we cancel the policy, we will provide a pro-rated refund of the premiums paid less the premium (if stated in the **schedule**) for any unexpired **period of insurance**.

You may cancel the entire policy by giving 14 days' notice in writing to our office provided that full discharge is given to us in writing by the relevant authorities in respect of our liability under section 11.

If you cancel the policy, we will refund to you the premiums paid for the unexpired **period of insurance**, subject to a minimum premium of S\$50 to be retained by us and according to the following scale for short-period refund:

Number of days in force prior to cancellation	Percentage of policy premium entitled for refund
Within 60 days	80%
Within 61 to 90 days	60%
Within 91 to 180 days	30%
After 180 days	No refund

There shall be no refund if there is any claim made on the policy.

#### 7. Termination

7.1 The entire policy will terminate immediately upon:

- a) non-payment of premium by the due date as described in the Payment Before Cover Warranty of this policy; or
- b) the cancellation of this policy as described in General Condition 8 – Cancellation.

7.2 Unless we have agreed otherwise in writing, this policy will terminate in any of the following circumstances, whichever first occurs:

- a) if the **maid** is renewing her work permit under the employment of the **insured**, the cover ceases immediately after the expiry date of the **maid's** current work permit for which the full employment period is covered by this policy;
- b) if the **maid** is transferring to a new employer, the cover ceases on the date of issue of the new work permit by Ministry of Manpower (Singapore) for the new employer; and
- c) if the **maid** is leaving Singapore after the cancellation of the work permit, cover ceases as follow:
  - i) For section 1, the cover ceases upon the **maid's** clearance of the Singapore immigration for departure.

- ii) For section 2, the cover ceases upon the **maid's** clearance of the Singapore immigration for departure or the original expiry of the policy, whichever is earlier.
- iii) For sections 11, 12 and 14, the cover ceases upon discharge of the security bond by the relevant authorities or the original expiry of the policy, whichever is earlier.
- iv) For other sections not stated above, the cover ceases upon cancellation of the work permit.

## 8. Other insurances

If at the time of any loss, damage or liability insured by this policy, there is any other subsisting insurance or insurances whether taken up by you or by any other person or persons covering such loss, damage or liability, we shall not be liable to pay or contribute more than its rateable proportion of such loss, damage or liability.

This condition is not applicable to section 1.1 (Death) and section 1.2 (Permanent disablement), section 4 (Wages & levy) and section 8 (Special grant).

## 9. Exclusion of Rights under the Contracts (Rights of Third Parties) Act

With the exception of the **maid**, the **maid's** legal representative or any other person appointed by the Controller of Work Passes to act on behalf of the **maid** or the **maid's** legal representative, any other person who is not a party to this policy contract shall have no right under the Contracts (Rights of Third Parties) Act 2001 to enforce any of its terms.

## 10. Legal Proceedings

No action in law or equity shall be brought to recover under the policy until after the expiration of 60 days from the date proof of claim has been furnished in accordance with the policy conditions. The parties submit themselves to the exclusive venue and jurisdiction of the Courts of Singapore for the resolution of any conflict or dispute between the parties with regard to the policy, save where the circumstances are governed by the arbitration clause of the policy.

## 11. Governing Laws

This policy contract is governed by the laws of Singapore.

### CLAIM CONDITIONS

(Applicable to the whole policy)

#### 1. Telling us about a claim

On the happening of any **injury** or **illness** which may give rise to a claim under this policy, you or the **maid** must:

- a) give notice in writing to us within 21 days stating the circumstances of the death, **injury** or **illness**;
- b) deliver to us as soon as reasonably practicable a claim in writing with such detailed particulars and proof as may be reasonably required,
  - i) You or the **maid** must give us all reports, certificates and information required by us which shall be furnished at your or the **maid's** expense and shall be in such form as we shall prescribe;
  - ii) You must ensure that the **maid** shall from time to time submit herself to medical examination at the expense of us as may be required in connection with any claim;

- c) ensure that in the case of death where any reasonable doubt exists as to the cause of it, a **doctor** appointed by us is allowed to make a post-mortem examination of the body of the **maid** at our expense; and
- d) you or the **maid** must also tell us as soon as possible if you know about any writ, summons or prosecution against you or the **maid** and immediately send us every letter or document which relates to a claim.

## 2. Who we will pay

<b>Benefit</b>	<b>Who we will pay</b>
Section 1 – Personal accident Section 8 – Special grant	We will pay the <b>maid</b> or her legal representatives or any other person appointed by the Controller of Work Passes to act on behalf of the <b>maid</b> of the <b>maid</b> 's legal representatives. If the <b>maid</b> has died, we will pay the <b>maid</b> 's legal personal representatives.
Section 2 – Hospital and surgical expenses	We will pay to the <b>hospital</b> all eligible claims, less the <b>co-payment</b> required of the <b>policyholder</b> . In the event if the <b>policyholder</b> has made full payment to the <b>hospital</b> , and submits a claim to us, we will then reimburse the <b>policyholder</b> all eligible claims, less the <b>co-payment</b> required of the <b>policyholder</b> .
Section 3 – Alternative domestic help Section 4 – Wages & Levy Section 5 – Repatriation expenses Section 6 – Termination expenses Section 7 – Replacement maid expenses Section 10 – Maid's welfare	We will pay to the <b>policyholder</b> .
Section 9 – Liability to third parties	We will pay to: <ul style="list-style-type: none"> <li>1. the <b>policyholder</b> or <b>maid</b> concerned who had the expense or liability; or</li> <li>2. the person or organization that the <b>policyholder</b> or the <b>maid</b> owes the money to.</li> </ul> <p>If we pay the claim in line with the above, we will have no further legal responsibility under this policy for the <b>policyholder</b> or the <b>maid</b> concerned.</p>
Section 11 – Insurance guarantee bond	We will pay to the Ministry of Manpower (Singapore).
Section 13 – Employer's liability	We will indemnify the <b>policyholder</b> against all sums for which the <b>policyholder</b> is liable to pay compensation at Common Law to the <b>maid</b> including all costs and expenses incurred.

## 3. Subrogation

In the event of a claim we are entitled to undertake in the name and on behalf of you or the **maid** the absolute conduct control and settlement of any proceedings and to take proceedings at our expense and for our benefit but in your name or the **maid** to recover compensation or secure indemnity from any third party in respect of anything covered by this policy.

## 4. Discharge

The receipt of any compensation payable under this policy by you or that of the **maid** or of your or her legal personal representatives as the case may be shall in all cases be an effectual discharge to us.





## 5. Arbitration

If there is any dispute about whether we are legally responsible for paying a claim or about the amount to be paid under this policy, it will be decided by arbitration in line with current law. Before you can take any other action, this arbitration must take place and an award made.

If within 12 months from the date of you claiming that we are legally responsible for a claim and you do not take up the offer of arbitration, we will assume you have abandoned the claim.

## 6. Time limit for taking legal action

If you do not begin legal action within 12 months after the arbitration award is made, we will not be legally responsible for the claim.

## 7. False or exaggerated claims

If you or anyone acting for you makes a claim under this policy knowing the claim to be dishonest or exaggerated in any way, we will not pay the claim and all cover under this policy will end immediately. We can tell the police about this.

### PAYMENT BEFORE COVER WARRANTY

(Applicable to policy issued to an individual)

1. We must receive the total premium due on or before the start date for the cover under the policy. Payment shall be considered to have been received by us when one of the following acts takes place:
  - a) cash or honoured cheque for the premium is handed over to the **company** or our intermediary;
  - b) a credit or debit card transaction for the premium is approved by the issuing bank;
  - c) a payment through an electronic medium including the internet is approved by the relevant party; or
  - d) a credit in favour of the company or our intermediary is made through an electronic medium including the internet
2. In the event that the total premium due is not paid to the **company** (or our intermediary through whom this policy or Bond was effected) on or before first day of the **period of insurance**, then the insurance shall not attach and no benefits whatsoever shall be payable by the **company**. Any payment received thereafter shall be of no effect whatsoever as cover has not attached.

### USEFUL PROCEDURES

#### 1. Making a claim

Report your claim to us and send us a completed claim form together with all supporting documents. Information requested on the claim form includes the claimant's personal particulars, contact details and policy number. You should also include a brief description of the claim and particulars of other persons or witnesses involved, if applicable. Refer to our website for details.

#### 2. Your feedback channels

If you have any feedback or comments on our service, tell us about it. Our service quality team will acknowledge receipt of your feedback within one working day and give you a final reply within seven working days. Refer to our website for details.



**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 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 MSIG or visit the GIA /LIA or SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

**IMPORTANT - The insured is requested to read this policy. If any error or misdescription be found, the policy should be returned to the issuing office for correction.**

## MaidPlus Benefits Summary

The MaidPlus Benefits Summary below sets out the maximum amounts we will pay per policy under the applicable plan unless otherwise specified. Sub-limits and cover restrictions may apply. For sections 1 and 2, the **sums insured** are for every 12 months. Please refer to the policy for full details of the limits, terms, conditions and exclusions of this insurance. All sums are in Singapore Dollars.

Section Number/Benefits	Sum Insured		
	Standard Plan	Classic Plan	Premier Plan
<b>1. Personal accident</b>			
1.1 Death	\$60,000 per policy year	\$60,000 per policy year	\$60,000 per policy year
1.2 Permanent disablement	\$60,000 per policy year	\$60,000 per policy year	\$60,000 per policy year
Refer to the Permanent Disability Scale for the applicable percentage of sum insured payable			
1.3 Medical expenses	\$1,000	\$2,000	\$3,000
a) Dental treatment due to injury	\$500 (sub-limit)	\$500 (sub-limit)	\$500 (sub-limit)
b) Treatment by TCM practitioner due to injury	\$100 (sub-limit)	\$100 (sub-limit)	\$100 (sub-limit)
c) Medical expenses for dengue fever	\$100 (sub-limit)	\$100 (sub-limit)	\$100 (sub-limit)
<b>2. Hospital &amp; surgical expenses</b>			
Inpatient expenses up to B2 ward, Singapore government restructured hospitals			
Including:			
2.1 Day care surgery			
2.2 Pre-hospitalisation medical consultation and diagnostic services (Up to 90 days)	\$60,000 per policy year	\$80,000 per policy year	\$120,000 per policy year
2.3 Post-hospitalisation follow-up treatment (Up to 90 days)			
<u>Co-payment conditions for section 2</u>			
First \$15,000 of eligible claims No co-payment required			
Above \$15,000 of eligible claims 25% co-payment applies			
<b>3. Alternative domestic help</b>	\$50 per day, maximum 30 days	\$50 per day, maximum 45 days	\$50 per day, maximum 60 days
<b>4. Wages &amp; levy</b>			
4.1 Inpatient hospitalisation	\$30 per day, maximum 30 days	\$30 per day, maximum 45 days	\$30 per day, maximum 60 days



4.2 Compassionate home leave	\$30 per day, maximum 14 days	\$30 per day, maximum 14 days	\$30 per day, maximum 14 days
<b>5. Repatriation expenses</b>	\$10,000	\$15,000	\$20,000
<b>6. Termination expenses</b>	\$300	\$600	\$600
<b>7. Replacement maid expenses</b>	\$500	\$500	\$750
<b>8. Special grant</b>	\$2,000	\$3,000	\$3,000
<b>9. Liability to third parties</b>	\$5,000	\$10,000	\$20,000
<b>10. Maid's welfare</b>			
10.1 Personal belongings	\$300	\$300	\$500
10.2 Compassionate travel expenses	\$300	\$400	\$500
<b>11. Insurance guarantee Bond</b> (to Ministry of Manpower)	\$5,000	\$5,000	\$5,000
<b>OPTIONAL COVERS</b>			
Please refer to the <b>schedule</b> for the selected optional cover(s) and <b>sum insured</b> or limit.			
<b>12. Waiver of counter indemnity</b>	Refer to the <b>schedule</b>		
<b>13. Employer's liability</b>	Refer to the <b>schedule</b>		
<b>14. Reduction of co-payment</b>	Refer to the <b>schedule</b>		

**Important notes:**

Change of plan is not allowed after the policy has commenced.