HSBC Life Benefits+ Business





Flexible protection for your employees

Regardless of your business's unique needs and budget, you can provide your greatest assets the protection they deserve.



Comprehensive coverage with no sub-limits

Enjoy the flexibility of staying protected without having to be constrained by the limitations of per-disability claims.



Flexible plan options for every need and budget

Tailor your coverage to suit your business's needs. With a wide range of plans and riders, you will be able to find an annual limit plan to suit your budget.



No minimum group size* to kickstart the plan

With no minimum group size requirement, you can keep all of your employees covered for peace of mind.

Experience the HSBC Life Benefits+ advantage[^]

Our HSBC Life Benefits+ series of corporate health products are designed to allow businesses to provide employees with customisable benefits that meet their individual needs, while offering health and wellness services that help boost employee satisfaction and productivity.



Chronic Disease Management Program**

Manage chronic diseases with the support of dedicated and experienced doctors and nurses and a curated personalised plan that best suits your condition. Enjoy greater convenience with video consultation services and delivery of medication, which are also available on weekends and public holidays.



Mental support

Get connected with multi-disciplinary coaches and a suite of services that support your mental health needs. Enjoy one-to-one in-person or virtual consultations, a dedicated hotline for immediate support and self-help modules that you can learn on the go.



Health screening (Panel)

Gain access to discounted packages from our partner. Health screening costs will be borne by insured members.

Find out more at https://grp.hsbc/BenefitsPlusServices

- * For policy plan with a group size of 1 employee, there will be 70% loading across medical benefits (excluding GTL, GCl and GPA) for all insured members.
- ^ The following wellness services are offered by our appointed service providers. HSBC Life (Singapore) Pte. Ltd. has no liability in any manner and shall not be liable for any loss arising out of or howsoever caused by any advice given or services rendered by or any acts or omissions of any service providers.
- **Only applies for members who take up Group General Practitioner (GP) rider.

Benefits at a glance*

Basic plans	
Group Hospital & Surgical (GHS)^	 Covers hospitalisation and surgical expenses Choice of private and government restructured hospitals (GRH) Covers outpatient cancer and kidney dialysis treatment Waiver of pre-existing conditions** is applicable if the company has prior GHS cover with a headcount of 25 employees and above Home recovery services provided by our appointed service provider(s) are available to members who received designated treatment in GRH* Claims are pro-rated at 60% if the insured member is admitted to a ward or hospital type higher than he is entitled to under the policy
Group Term Life (GTL)	 Covers death and total & permanent disability Provides one lump sum payment upon diagnosis of a terminal illness from which death is highly probable within the next 12 months If the employee was terminated on medical grounds, benefits can be extended for another 12 months⁺ All pre-existing conditions are excluded for the first 18 months of continuous coverage^^
Group Personal Accident (GPA)	Covers loss of life, permanent disablement or dismemberment due to an accident
Optional riders	
Group Major Medical (GMM - rider to GHS)	 Compulsory rider to GHS Plan 6 (S Pass and work permit holders only) and it cannot be taken with other GHS plans Reimbursement of eligible expenses in excess of benefits payable under the basic Group Hospital and Surgical Plan 6 (S Pass and work permit holders only) with a co-payment of 25% No waiting period for pre-existing conditions Claims are pro-rated at 60% if the insured member is admitted to a ward or hospital type higher than he is entitled to under the policy
Group Extended Major Medical (GEMM - rider to GHS)^	 Reimbursement of eligible expenses in excess of benefits payable under the basic Group Hospital and Surgical plan where: Hospitalisation is more than 20 days; or Surgical procedures of at least 75% of the benefit is payable under the Schedule of Surgical Benefits 12 months waiting period for pre-existing medical conditions Claims are pro-rated at 60% if the insured member is admitted to a ward or hospital type higher than he is entitled to under the policy
Group General Practitioner (GP - rider to GHS and/or GTL)	 Covers eligible expenses incurred at a General Practitioner, polyclinic or Accident and Emergency (A&E) department of any hospital in Singapore Cashless visits at an islandwide panel network of General Practitioner clinics Cashless arrangement in A&E departments at selected GRH Covers Traditional Chinese Medicine
Group Specialist (SP - rider to GHS and/or GTL, needs to be taken up with Group General Practitioner)	 Reimbursement of eligible expenses incurred at specialist clinics and diagnostic scans, including X-ray and laboratory tests, referred by General Practitioner Cashless arrangement at selected GRH for specialist services Covers physiotherapy (referred by physician), chiropractic treatment
Group Dental (GDEN - rider to GHS)	Reimbursement of eligible reasonable and customary charges at non-panel dental clinics; cashless arrangement for panel dental clinics

Optional riders				
Group Critical Illness (GCI - rider to GTL)	 Covers 37 critical illnesses** Choice of acceleration basis or additional basis* 			

- * These benefits are not exhaustive, for the full benefits please refer to policy wordings.
- ^ Pre-existing renal failure and cancer are permanently excluded under GHS and GEMM. These conditions are covered under GHS Plan 5 and Plan 6.
- ** 12 months waiting period will apply to members who have not been insured under the existing GHS policy, and for companies with existing member(s) that suffered or are suffering any designated serious conditions. Member listing from previous insurer is required to be provided. This does not apply to GHS Plan 5 and Plan 6.
- ⁺ Terms and conditions apply. Please refer to the policy wordings for full details.
- ^^ For sum insured up to S\$200,000.
- ⁺⁺ The Life Insurance Association Singapore (LIA) has standard definitions for 37 severe-stage critical illnesses (Version 2019). These critical illnesses fall under Version 2019. You may refer to www.lia.org.sg for the standard definitions (Version 2019).
- * Refer to page 21 for more details.

Building your best-fit Group Hospital and Surgical cover



Choose from the **three options below** for the hospital type and co-payment cover.

	Option 1	Option 2	Option 3
Hospital type	ospital type Private hospital		Government restructured hospital
Co-payment	payment No co-payment		No co-payment

- For option 1 and option 2, if there is an admission to government restructured hospital, co-payment will not be applicable.
- For option 3, 60% pro-ration applies* if insured member goes to a private hospital.
- For all options, a 60% pro-ration will be applicable for hospital type or ward upgrade*.



Choose from six available plans for benefit limits.

You may choose different plans for different categories of employees in your company.



Choose from two options for daily room & board cover.

You may choose either 1 bed or 4 bed ward type for daily room & board cover.



Choose **any optional riders** you require according to your needs and budget.

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^{*} Please refer to the "Limitation of Cover" clause in the policy documents for full details.

Basic plan - Group Hospital & Surgical (GHS)* - Plan 1 to Plan 4

Choice of hospital cover:

Option 1: Private hospital with no co-payment

Option 2: Private hospital with 20% co-payment

Option 3: Government restructured hospital with no co-payment

Choice of daily room and board cover:

1 bed or 4 bed ward type

Benefit description	Plan 1	Plan 2	Plan 3	Plan 4
Annual policy limit (applicable to all benefits except items marked ^ or **)	S\$250,000	S\$100,000	S\$60,000	S\$30,000
Room and board (Standard)				
2. Short-stay ward				
3. Intensive Care Unit (ICU)				
Hospital miscellaneous expenses				As charged
5. Surgeon's fees				
6. In-hospital physician's visit				
7. Emergency outpatient treatment (due to accident only) (up to 31 days)	As charged	charged As charged	As charged	
8. Ambulance charges				
9. Parent accommodation				
10. Miscarriage and ectopic pregnancy				
11. Medical report fees				
12. Pre-hospitalisation (up to 120 days before hospitalisation/surgery)				
13. Post-hospitalisation (up to 120 days after discharge)				
14. Home nursing (up to 182 days after discharge)				
15. Outpatient kidney dialysis^	S\$75,000	S\$50,000	S\$40,000	S\$20,000
16. Outpatient cancer treatment^	S\$75,000	S\$50,000	S\$40,000	S\$20,000
17. Surgical implants	S\$5,000			

Benefit description	Plan 1	Plan 2	Plan 3	Plan 4
18. Dread disease recuperation benefit (major cancer, heart attack of specified severity, stroke with permanent neurological deficit)^#	S\$10,000		N/A	
19. Special grant** (doubled for accidental death)		S\$5	,000	
20. Emergency assistance^	As charged		N/A	
21. Get better benefit*** (daily cash benefit per day starting on day 4 up to day 30 of hospitalisation)	S\$200			
22. Hospital daily cash^ (up to 30 days of confinement in government restructured hospital) - B1 ward or below	S\$200			
23. Home recovery benefit		S\$!	5,000	
24. Rehabilitation benefit (up to 45 days)	As charged up to annual policy limit			
25. Inpatient psychiatric treatment	S\$5,000			
26. Major organ transplant	As charged up to annual policy limit			
27. Overseas hospitalisation due to accident	As charged up to 1.5x annual policy limit			

^{*} This plan is not subject to schedule of surgical benefits.

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[^] The benefit(s) is not subject to annual policy limit.

^{**}Specified sum basis benefits payable for benefit(s) that is the specified sum as stated in the schedule or endorsement and is payable as one lump sum. The benefit(s) is not subject to the annual policy limit.

[#] Dread disease recuperation benefit is subject to a waiting period of 90 days. Please refer to www.lia.org.sg for the standard definitions of critical illnesses to qualify for the 4 critical illnesses stated.

⁺ Not payable for confinement in a community hospital.

Basic plan - Group Hospital & Surgical (GHS)* - Plan 5 and Plan 6

Hospital cover:

Government restructured hospital with no co-payment

Daily room and board cover:

4 bed ward type

Benefit description	Plan 5 (S Pass and work permit holders only)	Plan 6 (S Pass and work permit holders only)
Annual policy limit (applicable to all benefits except items marked ^ or **)	S\$60,000	S\$15,000
1. Room and board (Standard)		
2. Short-stay ward		
3. Intensive Care Unit (ICU)		
Hospital miscellaneous expenses		
5. Surgeon's fees		
6. In-hospital physician's visit		
7. Emergency outpatient treatment (due to accident only) (up to 31 days)	As charged	As charged
8. Ambulance charges		
9. Parent accommodation		
10. Miscarriage and ectopic pregnancy		
11. Medical report fees		
12. Pre-hospitalisation (up to 120 days before hospitalisation/surgery)		
13. Post-hospitalisation (up to 120 days after discharge)		
14. Home nursing (up to 182 days after discharge)		
15. Outpatient kidney dialysis^	S\$40,000	S\$5,000
16. Outpatient cancer treatment^	S\$40,000	S\$5,000
17. Surgical implants	S\$5,	,000

Benefit description	Plan 5 (S Pass and work permit holders only)	Plan 6 (S Pass and work permit holders only)	
18. Dread disease recuperation benefit (major cancer, heart attack of specified severity, stroke with permanent neurological deficit)^#	N/A		
19. Special grant** (doubled for accidental death)	S\$5,	000	
20. Emergency assistance^	N/	A	
21. Get better benefit*** (daily cash benefit per day starting on day 4 up to day 30 of hospitalisation)	S\$200		
22. Hospital daily cash^ (up to 30 days of confinement in government restructured hospital) - B1 ward or below	N/A		
23. Home recovery benefit	S\$5,	000	
24. Rehabilitation benefit (up to 45 days)	As cha	arged	
25. Inpatient psychiatric treatment	S\$5,000		
26. Major organ transplant	As charged		
27. Overseas hospitalisation due to accident	As charged up to 1.5x annual policy limit		

^{*} This plan is not subject to schedule of surgical benefits.

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[^] The benefit(s) is not subject to annual policy limit.

^{**}Specified sum basis benefits payable for benefit(s) that is the specified sum as stated in the schedule or endorsement and is payable as one lump sum. The benefit(s) is not subject to the annual policy limit.

^{*} Dread disease recuperation benefit is subject to a waiting period of 90 days. Please refer to www.lia.org.sg for the standard definitions of critical illnesses to qualify for the 4 critical illnesses stated.

⁺ Not payable for confinement in a community hospital.

Basic plan – Group Term Life (GTL)*

	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Sum insured	S\$500,000	S\$300,000	S\$200,000	S\$150,000	S\$100,000	S\$50,000

^{*} A dependant can choose same or lower sum insured as the employee, subject to maximum sum insured of S\$100,000.

Basic plan – Group Personal Accident (GPA)*

	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Sum insured	S\$500,000	S\$300,000	S\$200,000	S\$150,000	S\$100,000	S\$50,000

^{*} A dependant can choose same or lower sum insured as the employee, subject to maximum sum insured of S\$100,000.

Rider - Group Major Medical (GMM)*

Hospital cover:

Government restructured hospital

Daily room and board cover:

4 bed ward type

Benefit description	Plan 6 (S Pass and work permit holders only)		
Annual policy limit	S\$45,000		
Co-payment	25%		
1. Room and board (Standard)			
2. Intensive Care Unit (ICU)			
Hospital miscellaneous expenses	As charged		
4. Surgeon's fees	As charged		
5. In-hospital physician's visit			
6. Surgical implants			

^{*} GMM rider is a compulsory addition to GHS Plan 6 (annual policy limit of S\$15,000). This rider is not applicable to GHS Plans 1 - 5.

Rider - Group Extended Major Medical (GEMM)*

Benefit description	Plan 1	Plan 2	Plan 3	Plan 4
Annual policy limit	S\$100,000	S\$90,000	S\$80,000	S\$50,000
Co-payment	0% or 20% (Any co-payment in the basic policy will continue to be applicable)			
1. Room and Board (Standard)				
2. Intensive Care Unit (ICU)		As charged	As charged	As charged
3. Hospital miscellaneous expenses				
4. Surgeon's fees	As charged			
5. In-hospital physician's visit				
6. Surgical implants				
7. HIV/AIDS treatment				

^{*} Choice of GEMM rider must follow selected GHS plan type, hospital type, bed type and co-payment type. For example, if you are on GHS Option 1 (Plan 1, 1 bed, 0% co-payment), you must choose GEMM Option 1 (Plan 1, 1 bed, 0% co-payment). This rider is not applicable for GHS Plan 5 and Plan 6.

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Rider – Group General Practitioner (GP)

Benefit description	Plan 1	Plan 2	
Co-payment	N/A	S\$10 per visit	
1. General Practitioner treatment (Panel)			
General Practitioner video consultation (Panel)	As charged		
General Practitioner treatment (Non-panel)	S\$30 per visit		
Accident and Emergency (Government restructured hospital)	As charged		
5. Accident and Emergency (Private)	S\$120 per visit		
6. GP overseas treatment	S\$100 per visit		
7. Traditional Chinese Medicine (max. 6 visits per year)	S\$50 per visit		

Rider - Group Specialist (SP)

Choice of co-payment:
Option 1: 0% co-payment

Option 2: 20% co-payment

Benefit description	Plan 1	Plan 2	Plan 3
1. Specialist consultation (Panel)*	S\$1,500	S\$1,000	S\$1,000
Specialist consultation (Government restructured hospital)^ ++		As charged	
3. Specialist consultation (Non-panel)^	S\$1,500	S\$1,000	N/A
4. X-ray & laboratory test (Panel)+	S\$1,500	S\$1,000	S\$1,000
5. X-ray & laboratory test (Government restructured hospital)^^ ++		As charged	
6. X-ray & laboratory test (Non-panel)^^	S\$1,500	S\$1,000	N/A
7. Specialised diagnostic scans^^	S\$2,000	S\$2,000	S\$1,000
8. Physiotherapy treatment^^ /chiropractor treatment	S\$1,000	S\$500	S\$500
9. Direct pediatrician treatment (up to ANB 7 years, max. 6 visits per year)	Shared limit with specialist consultation (Non-panel)	Shared limit with specialist consultation (Non-panel)	N/A
10. Second opinion (max. 2 visits per year)	Shared limit with specialist consultation	Shared limit with specialist consultation	Shared limit with specialist consultation

- * With GP (Panel) referral.
- ^ With GP referral.
- + With physician (Panel) referral.
- ^^ With physician referral.
- ++ Not subjected to co-payment.

Rider - Group Dental (GDEN)

Choice of co-payment:

Option 1: 0% co-payment

Option 2: 10% co-payment

Choice of type of dental clinic:

Option 1: Panel clinic (cashless, except co-payment and subject to annual policy limits)

Option 2: Non-panel clinic* (reimbursement basis)

Benefit description	Plan 1	Plan 2
Annual policy limit	S\$1,000	S\$500
General consultation, scaling/polishing, fillings i) Consultation & examination ii) Scaling & polishing iii) Tooth colour/composite/amalgam fillings iv) Reinforced pin		
Dental X-rays i) Intraoral - occlusal/periapical/bitewing ii) Extraoral - panoramic/OPG/cephalogram/ tomograms		
3. Extractions & consumables i) Non-surgical/simple/routine extraction ii) Surgical/complex extraction iii) Surgical, impacted wisdom tooth extraction iv) Fluoride treatment v) Dental treatment consumables, hygiene products, infection control, etc		
4. Drugs i) Analgesic (oral) - in relation to a dental procedure/surgery ii) Antibiotics (oral) - in relation to a dental procedure/surgery		
5. Root canal treatment i) Pulpotomy ii) Pulp cap iii) First root canal - anterior tooth iv) First root canal - premolar tooth v) First root canal - molar tooth vi) Subsequent canals	As charged up to annual policy limit	As charged up to annual policy limit
Alveoplasty i) Per quadrant, in connections with extractions ii) Per quadrant, not in connections with extractions iii) For complete alveoplasty, involving more than one quadrant		
7. Periodontal treatment – root planing		
8. Miscellaneous treatment i) Biopsy & examination of tissue ii) Excision of tumour iii) Sedative dressings iv) Retention pins - restoration of tooth		
9. Crowning		
10. Bridges		

^{*} Refers to any dental clinic.

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Rider - Group Critical Illness (GCI)*

	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Sum insured	S\$250,000	S\$150,000	S\$100,000	S\$75,000	S\$50,000	S\$25,000

^{*} The selected Group Critical Illness coverage cannot exceed the Group Term Life coverage. Dependant can choose same or lower sum insured as the employee, subject to maximum sum insured of \$\$100,000.

Choice of acceleration or additional basis

Acceleration basis	The sum insured shall be payable in advance from the Group Term Life benefit. The balance of the Group Term Life benefit will be payable upon subsequent death.
Additional basis	This is an additional benefit and does not affect the Group Term Life benefit.

Group size premium adjustment		
Applicable plan and riders	 Group Hospital & Surgical (GHS) Group Extended Major Medical (GEMM - rider to GHS) Group Major Medical (GMM - rider to GHS) Group General Practitioner (GP - rider to GHS and/or GTL) Group Specialist (SP - rider to GHS and/or GTL only if there is a Group General Practitioner) Group Dental (GDEN - rider to GHS) 	
1 employee*	70% loading^	
2 - 4 employees	10% loading^	
5 - 9 employees	Brochure rates [^]	
10 or more employees	5% discount+	

^{*} Upon renewal, there must be at least 2 employees.

Underwriting guidelines

Eligibility (applicable to medical plans only)

Coverage under this policy shall be subject to the fulfilment of all of the following eligibility requirements by the insured members:

- (i) Your employee and your employee's legal spouse who are from age 16 years to 75 years old and who is a Resident of Singapore;
- (ii) Your employee's natural child, step-child or legally adopted child, who is aged between 15 days and age 25 and who is unmarried and unemployed, including National Service Full Time Servicemen (NSF). If a dependant child is in hospital confinement on the date which he would have become eligible for participation in the policy, his eligibility will be deferred to the date immediately following the date of discharge from the hospital.

An insured member's coverage will cease automatically if he remains outside of his country of residence for a period in excess of 185 consecutive days.

Applicable to medical plans only (i.e. excluding Group Term Life, Group Personal Accident and Group Critical Illness): Where insured member commenced coverage between age 16 and age 75, insured member will be eligible for renewal for coverage up to age 85.

Upon the termination of base plan, the rider to the base plan will also be terminated.

Occupation risk guideline

All benefits under the group packaged plan are available to occupational risk class 1 to 3 only.

The group packaged plan will not be available to employees of firms in the following industries:

- Professional sports associations or organisations
- Airline companies (pilots, cabin crew)
- Companies involved in sea faring
- Companies involved in shipbuilding
- Companies involved in mining (including underground construction or exploration of minerals)
- Companies working in offshore sites, submarine or boat and/or involved directly in the construction on or under water
- Companies working in industrial sites
- Companies involved in direct contact with explosives or explosive devices
- Companies involved directly in oil and gas exploration, production or refining
- Companies involved in tobacco production or distribution
- Companies involved in the production or refining of hazardous materials and/or chemicals
- Companies involved in animal testing
- Companies involved in gambling activities or casinos
- Field military police and armed security forces
- Nuclear facility workers
- Companies that are involved in the production of anti-personnel mines and/or cluster munitions or their key components.
- Any executive scheme related to companies whose main business activities include thermal coal mining or thermal coal power generation.

Participation and plan selection

- Dependants are eligible for Group Term Life, Group Critical Illness and Group Personal Accident. Dependant participation must follow the same plan(s) or lower than the selected for the employees.
- Dependant participation for Group Hospital & Surgical and medical riders (where applicable) must follow the same plan(s) or lower than the selected for the employees. Dependants are not eligible for Group Hospital & Surgical Plan 5 and Plan 6.
- Dependant can choose same or lower overall limit, while keeping the choice of ward type, hospital type, co-payment the same as the employee.
- For employee with Group Extended Major Medical, dependant can select whether to have or not to have Group Extended Major Medical.
- Group General Practitioner can be chosen with the basic plan Group Hospital Surgical and/or Group Term Life. Group General Practitioner must be selected before Group Specialist can be taken up.

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[^] Brochure rates will apply to all subsequent new members within the same policy year.

⁺ 5% discount will apply to all subsequent new members within the same policy year.

- Group Extended Major Medical plan(s) selected for the employee must be the same as the Group Hospital & Surgical plan selected. This plan cannot be added to Group Hospital & Surgical Plan 5 and Plan 6.
- Group Critical Illness (Acceleration) and Group Critical Illness (Additional) cannot be taken up together. The sum insured of Group Critical Illness (Acceleration or Additional) must not exceed the sum insured of Group Term Life plan.
- Coverage is for employee and dependant residing in Singapore only. Participation must be on compulsory basis.
- Maximum entry age and renewable age for Group Critical Illness is 70.
- Entry age of Group Personal Accident and Group Term Life is 16 to 70, renewable up to age 75 for death benefit only.
- For group size of 1 or 2 employees only, maximum entry age is 50 (age next birthday). For group size of 1 employee, there will be a loading of 70% across medical benefits only (excluding GTL, GCI and GPA) for all insured members. By the next renewal, there must be 2 employees covered under the plan, otherwise the plan will be terminated.

Limitation of cover

Admission to higher ward or hospital type that differs from plan entitlement:

If the insured member received treatment or is admitted to a ward or hospital type higher than what he is entitled to under the policy, either as an inpatient or for day surgery, we will pay up to 60% of the eligible reasonable and customary charges (excluding daily room and board and surgeon's fees) subject to the maximum limit stated in the policy schedule. For surgeon's fees, we will reference the guidelines and published fee benchmarks provided by Ministry of Health (MOH). For upgrade in bed type or hospital type, the daily room and board amount will be capped at the highest amount charged by a hospital in Singapore for the entitled bed type and hospital type. For avoidance of doubt, this is only applicable to hospitalisation in Singapore.

Application documents

- i) Enrolment form
- ii) Business profile report from the Accounting & Corporate Regulatory Authority (ACRA) or copy of Certificate of Incorporation/Registration and list of persons with executive authority within the company
- iii) List of names, identification numbers and specimen signatures of authorised persons to sign on the enrolment form
- iv) Member listing from previous insurer (for companies applicable to waiver of pre-existing conditions)
- v) Health declaration form for:
 - a) Group Term Life sum insured applied in excess of \$\$200,000 for members up to age 65 next birthday.
 - b) Group Critical Illness (Acceleration) sum insured applied in excess of S\$100,000 for members up to age 65 next birthday.
 - c) Group Term Life/Group Critical Illness (Acceleration) application for members above age 65 next birthday.
 - d) Group Critical Illness (Additional) application.

Exclusions

There are certain conditions under which no benefits will be payable. These are stated as exclusions in the contract. The following is a list of some of the exclusions for the respective plans. The exclusions include, but are not limited to, the following conditions. You are advised to read the policy contract for the full list of exclusions.

Group Term Life (GTL):

For sum insured up to S\$200,000, all pre-existing medical conditions are excluded for the first 18 months of continuous coverage.

Group Critical Illness (GCI):

- i) Pre-existing medical conditions.
- ii) Attempted suicide or self-inflicted injuries.
- iii) Under the influence of narcotics or drugs.

Group Hospital and Surgical (GHS) and Group Extended Major Medical (GEMM):

Pre-existing medical conditions are excluded for the first 12 months of continuous coverage except for pre-existing cancer or renal failure for which these conditions will be permanently excluded. These exclusion conditions do not apply to Plan 5 and Plan 6.

Group General Practitioner (GP) and Group Specialist (SP), charges in respect of the following:

- i) Physical examination by a physician at home or office.
- ii) Medicines obtained without physician's consultation, except for the medicines which have been classified as Prescription Only Medicines (POM) by Health Sciences Authority (HSA).
- iii) Surgery including but not limited to toilet and suture, incision and drainage and excision biopsy.

Group Dental (GDEN):

- i) Orthodontic treatment and temporary dentures.
- ii) Treatment consisting of cosmetic or plastic surgery or for beautification not necessitated by injury or illness.

Group Personal Accident (GPA):

- i) Suicide, attempted suicide or self-inflicted injuries, regardless of the insured member mental condition.
- ii) Engaging or taking part in war, act of foreign enemy, invasion, civil war, riot, rebellion, insurrection, revolution, overthrow of a legally constituted government, explosions of war weapons, or any event similar to one of those listed.
- iii) Engaging in or taking in or taking part in acts of terrorism, nuclear contamination, biological contamination or chemical contamination.
- iv) Participation in racing on wheels.
- v) Participation in a riot or civil commotion, violation or attempted violation of law, or resistance to lawful arrest or imprisonment.
- vi) Air travel, other than as a fare-paying passenger on a licensed commercial aircraft.

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About HSBC Life Singapore

HSBC Life (Singapore) Pte. Ltd. is a wholly owned subsidiary of HSBC Insurance (Asia Pacific) Holdings Limited, which is ultimately owned by HSBC Holdings plc, the London-based holding company of the HSBC Group. HSBC Life Singapore has received an A+ rating by Standard & Poor's, most recently affirmed in February 2024. It provides a wide range of solutions that cater to life, health, retirement, protection, education, legacy planning, and wealth accumulation needs of retail and corporate clients.

Important notes

Benefits+ Business is underwritten by HSBC Life (Singapore) Pte. Ltd. (Reg. No.199903512M).

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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 GIA/LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

This advertisement has not been reviewed by the Monetary Authority of Singapore. Information is correct as at 1 February 2025.

HSBC Life SG

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