



Enhanced MaidAssure Insurance Policy

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

This Policy is a contract between **Us**, the **Company** and **You**, our **Insured** named in the **Certificate of Insurance**. The application form, declaration and any information **You** gave to **Us** when applying for this Policy, are the basis of this contract. The **Certificate of Insurance** and any amendment or endorsement made altering the terms of this policy, form a part of this Policy.

In return for **Your** payment of the premium, **We** will provide **You** with insurance cover as described in this Policy during the **Period of Insurance** or any subsequent period for which **You** pay and **We** accept the required premium.

DEFINITION OF WORDS

Certain words are defined below. These have the same meaning wherever they are used in this Policy. They appear in bold print or begin with a capital letter.

We / Our / Us / Company

Shall mean ECICS Limited.

You / Your / the Insured

The policy owner named as **Insured** in the **Certificate of Insurance**.

Accident

An unforeseen and involuntary event which happens suddenly and gives rise to a result which the **Insured Maid** did not intend or anticipate.

Certificate of Insurance

The **Certificate of Insurance** containing the details of the **Insured Maid**, optional covers, if selected and **Period of Insurance**. The **Certificate of Insurance** forms a part of this Policy.

Chronic Disease/Illness

When **Insured Maid** is suffering from medical condition(s) which persists for a long time and which requires long-term medical care.

Dental Practitioner

A person other than **You**, **Your** relative, the **Insured Maid** or the **Insured Maid's** relative who is duly licensed or registered to practice as a dentist according to the laws and regulations applicable in Singapore.

Hospital

A lawfully operation institution which has 24 hours a day nursing services by registered graduate nurses, one or more **Medical Practitioners** 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 for convalescent home or home for the aged or similar establishment.

Address: 10 Eunos Road 8, #09-04A Singapore Post Centre, Singapore 408600

Tel: 6206 5588 | **Fax:** 6338 9267 | **Website:** <http://www.ecics.com>

Company Registration No.: 198901301C



Hospital and Surgical Expenses

Cost of surgery or treatment as an inpatient of a **Hospital** in Singapore including charges for a day surgery, accommodation, X-ray, normal food, medical attendants' fees, radiological treatment, surgeon's fees, anaesthetist's fees, theatre and pathology fees, drugs, medicines and any other costs of examination, treatment or special services certified as essential by a **Medical Practitioner** provided such expenses are incurred in respect of room and board charges in Class B2 or C ward in a Singapore government or re-structured **Hospital**.

Illness

Any sudden and unforeseen deterioration of health of the **Insured Maid** due to a medical condition contracted, commencing, and/or manifested during the **Period of Insurance**.

Injury

Bodily injury to the **Insured Maid** anywhere in the world during the Period of Insurance, caused solely and directly by an **Accident** and not by Sickness, Illness, Diseases or any medical conditions even if such conditions resulted from or were in any way connected to the **Accident**.

Insured Maid

Your foreign domestic worker named in the **Certificate of Insurance** who has been approved by Singapore's Ministry of Manpower for employment by you.

Medical Practitioner

A person other than **You**, **Your** relative, the **Insured Maid** or the **Insured Maid's** relative who is duly licensed or registered to practice as a medical doctor according to the laws and regulations applicable in Singapore.

Occurrence

Inpatient and/or day surgery episode in which the Insured Maid is treated till the Insured Maid is fit for discharge or for flight, should the employer wish to repatriate the Insured Maid.

Period of Insurance

A period of 14 months or 26 months as mentioned in the **Certificate of Insurance** during which the **Insured Maid** is in Your immediate employment and holds a valid work permit in respect of such employment that has not been cancelled whether temporary or otherwise.

Policy Year

Shall refer to each annual period from the commencement of the **Period of Insurance**.

Pre-existing Condition

Means any **Injury**, **Illness**, condition or symptom which existed before the commencement of the **Period of Insurance**:

- (a) for which treatment, or medication, or advice or diagnosis has been sought or received or was foreseeable, or
- (b) which originated or was known to exist by the **Insured Maid** or the **Insured** prior to the commencement of the **Period of Insurance** whether or not treatment or advice or diagnosis was sought or received.

Relative

Any person connected by blood or marriage i.e. spouse, child, parent, parent-in-law, grandparent, grandparent-in-law, sibling, brother/sister-in-law or daughter/son-in-law, etc.

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TCM Practitioner

A person other than **You**, **Your** relative, the **Insured Maid** or the **Insured Maid's** relative who is legally licensed and registered under the Traditional Chinese Medicine Practitioners Board (TCMPB) to practice as an herbalist, acupuncturist or bone-setter according to the laws and regulations applicable in Singapore.

BENEFITS

SECTION 1 - SECURITY BOND

We will furnish a security bond (to be issued separately) on **Your** behalf in lieu of the sum \$5,000 or such other lesser amount up to \$5,000 which **You** are required to deposit with the Ministry of Manpower of Singapore in respect of the **Insured Maid** employed.

Pursuant to the security bond, We will guarantee and undertake as principal debtor to pay the Ministry of Manpower of Singapore, on demand, any sums not exceeding \$5,000.

SPECIAL CONDITIONS TO SECTION 1

- (a) **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 security bond.
- (b) This Section will not be in force unless and until the Counter Indemnity documents have been correctly executed, delivered to and accepted by **Us**.

SECTION 2 – PERSONAL ACCIDENT

We will subject to terms of this Section pay to the **Insured Maid** or her legal personal representatives the Benefit A or B referred to below if during the **Period of Insurance** the **Insured Maid** named in the **Certificate of Insurance** shall sustain bodily injury caused by **Accident**, resulting directly and independently of any other cause within 12 calendar months from the occurrence of the **Accident** in death or **Permanent Disability**.

This Section will apply worldwide. If the Accident occurs outside of Singapore, the **Insured Maid** must be travelling with **You**, and must not be on home leave.

BENEFIT A - DEATH

Where the **Insured Maid** dies, the Sum Insured specified in the **Certificate of Insurance**.

BENEFIT B - PERMANENT DISABILITY

Where the **Insured Maid** suffers total and permanent loss or Disability, the relevant sum as specified in the Permanent Disability Scale. The payment under Benefit B shall be such percentage specified in the Permanent Disability Scale below.

PERMANENT DISABILITY SCALE

% of Sum Insured

1.	Loss of two limbs	)	
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	)	100%
5.	Injuries resulting in being permanently bedridden	)	
6.	Any other injury causing permanent total Disability from engaging in a or attending to employment or occupations of any and every kind	)	
7.	Loss of arm at shoulder		75%
8.	Loss of arm between shoulder and elbow		65%
9.	Loss of arm at elbow		50%
10.	Loss of arm between elbow and wrist		50%
11.	Loss of hand at wrist		40%
12.	Loss of leg		75%
	- at hip		65%
	- between knee and hip		50%
	- below knee		50%
13.	Eye: Total and Permanent Loss of		50%
	- whole eye		50%
	- sight		50%
	- sight, except perception of light		50%
	- lens		50%
14.	Loss of four fingers and thumb of one hand		50%
15.	Loss of four fingers		40%
16.	Loss of thumb		25%
	- both phalanges		10%
	- one phalanx		10%
17.	Loss of index finger		8%
	- three phalanges		4%
	- two phalanges		6%
	- one phalanx		4%
18.	Loss of middle finger		2%
	- three phalanges		4%
	- two phalanges		2%
	- one phalanx		4%
19.	Loss of ring finger		3%
	- three phalanges		2%
	- two phalanges		4%
	- one phalanx		3%
20.	Loss of little finger		2%
	- three phalanges		3%
	- two phalanges		2%
	- one phalanx		3%
21.	Loss of metacarpals		2%
	- first or second (additional)		2%
	- third, fourth or fifth (additional)		5%
22.	Loss of toes		2%
	- all		1%
	- Great, both phalanges		75%
	- Great, one phalanx		15%
23.	Total and Permanent		50%
	- both ears		
	- one ear		
24.	Total and Permanent Loss of speech		
25.	Third Degree Burns		
	Head - Damage as a percentage of total body surface area		
	• Equals to or greater than 2% but less than 5%		25%
	• Equals to or greater than 5% but less than 8%		50%
	• Equals to or greater than 8%		100%
	Body - Damage as a percentage of total body surface area		
	• Equals to or greater than 10% but less than 15%		25%
	• Equals to or greater than 15% but less than 20%		50%
	• Equals to or greater than 20%		100%

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BENEFIT C - OUTPATIENT MEDICAL EXPENSES (FOR ACCIDENT)

We will reimburse the **Insured** the reasonable and customary charge based on the receipt issued by the **Hospital**, a **Medical Practitioner**, **Dental Practitioner** or a **Traditional Chinese Medicine (TCM) Practitioner** (to the **Insured Maid** for expenses incurred by the **Insured Maid** during the **Period of Insurance** as a result of an **Accident** and certified as essential by a **Medical Practitioner**, **Dental Practitioner** or a **TCM Practitioner**, up to the sum insured specified in the **Certificate of Insurance**, subject to co-payment listed below.

If **Insured Maid** visits any clinic on the panel of Our Third Party Administrator – **Fullerton Healthcare Group**, we will provide cashless cover above the co-payment and up to the limit of benefit stated in the Schedule. In case **Insured Maid** visits other clinics, any covered benefit will be paid on a reimbursement basis.

This benefit is extended to expenses incurred overseas only if **Insured Maid** is travelling along with **You** or **Your Family**.

Clinic #	Cover	Co-Payment
Panel (Cashless)*	As Charged	\$10.00 on each & every claim
Non-Panel (Reimbursement Basis)		\$30.00 on each & every claim

* Please refer to enclosed 'Step-by-Step Guide to Fullerton Health Network Mobile Application (FHN3) Download and Usage'

Applicable to Policy taken up with effect from 1st March 2019

SPECIAL PROVISIONS TO SECTION 2

- (a) Loss of limb or member or part thereof shall mean loss by actual physical severance or total and permanent loss of use.
- (b) The total sum payable for Permanent Disability in respect of injury to more than one portion of a limb or member or part thereof shall not exceed the sum payable in respect of such injury to the whole of the limb or member or part thereof.
- (c) The total aggregate sum payable for Permanent Disability shall not exceed the sum insured specified under Section 2 Benefit A of the **Certificate of Insurance**.
- (d) A valid claim made for Section 2 Benefit A or for the maximum payable under Section 2 Benefit B, shall, with effect from the date of the **Accident** resulting in such claim, discharge Us from liability for any further claim under Section 2 except for expenses payable under Section 2 Benefit C.

Where the aggregate sum payable in respect of all claims made pursuant to Section 2 Benefit B is less than the sum insured specified under Section 2 Benefit A, the sum payable in respect of a subsequent claim made pursuant to Section 2 Benefit A shall be the remaining of the sum insured specified under Section 2 Benefit A after deduction of the said aggregate sum. Save for this, payment shall only be made under Section 2 Benefit A or B but not both.

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SECTION 3 – HOSPITALIZATION AND SURGICAL EXPENSES

We will reimburse the hospital on the **Insured's** behalf for **Hospital and Surgical Expenses** necessarily incurred as a result of an **Accident** or **Illness** sustained by the **Insured Maid** commencing or occurring during the **Period of Insurance** provided such expenses are incurred in respect of room and board charges in Class B2 or C ward in a Singapore government or re-structured **Hospital**.

If We pay the **Insured's** claim for **Hospital and Surgical Expenses**, We will also reimburse the **Insured** for the following associated costs, up to the respective Limits specified in the **Certificate of Insurance**:

- (a) Pre-hospitalization treatment, which includes diagnostic procedures ordered by a **Medical Practitioner**, provided that the **Insured Maid** is thereafter admitted to **Hospital** as a registered in-patient or for day surgery for the treatment of the specific medical condition diagnosed, within 90 days of the pre-hospitalization treatment.
- (b) Post-hospitalization treatment, which includes all medical treatment provided by a **Medical Practitioner** within 90 days immediately following discharge from **Hospital** for the same medical condition for which the **Insured Maid** was hospitalised.
- (c) Any medical report fees necessarily incurred.
- (d) Any fees incurred in respect of land ambulance services.

In the event that the **Insured Maid** is being admitted to a ward that is higher than the ward entitlement or being admitted to any Hospital out of Singapore excluding whilst on home leave approved by the Insured, we shall only pay such proportion of the reasonable expenses incurred for the necessary medical treatment of the **Insured Maid** by applying the relevant pro-ration factor, so that the benefits payable by us will be reduced to the amount calculated by multiplying the relevant pro-ration factor accordingly to the table below, against the **Insured Maid's Hospital and Surgical Expenses** claimable under this Policy.

<u>Ward Type</u>	<u>Percentage</u>
i) Private Hospital	20%
ii) A1 Class in Singapore Government / Re-structured Hospital	35%
iii) A2 Class in Singapore Government / Re-structured Hospital	35%
iv) B1 Class in Singapore Government / Re-structured Hospital	40%
v) Any Hospital Outside Singapore	20%

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Claims Co-payment

The **Insured** is responsible for a co-payment accordingly to the table below after **We** have paid out the first \$15,000 under this **Section** each **Policy Year**.

Hospital and Surgical Expenses incurred per Policy Year	Co-payment by Insured
First \$15,000	0%
Above \$15,000	25% of the Hospital and Surgical Expenses claimable under this Section

The aggregate total sum payable under this Section in respect of the **Insured Maid** for the **Policy Year** shall not exceed the Limit stated in the **Certificate of Insurance**.

For the avoidance of doubt, the total sum payable by **Us** and the co-payment payable by the **Insured** are calculated after pro-ratio factor is applied (if any).

This Section meets the requirements of Singapore Ministry of Manpower.

EXCEPTIONS TO SECTION 3

This Insurance shall not apply to:

- (a) Any expenses in respect of treatment in homes or infant welfare centres.
- (b) Any expenses in respect of any **Hospital** confinement, surgical operation, treatment or services which have not been previously recommended by a **Medical Practitioner**.
- (c) Any expenses in respect of health screening examinations for the purpose of diagnosis and or any treatment undertaken as a preventive measure, including but not restricted to vaccination, inoculations, contraception and other prophylactic treatment.
- (d) Any expenses in respect of normal dental inspection, dental work (except due to accidental injuries) and or in obtaining dentures.
- (e) Any expenses in respect of medical equipment or optional items which are outside the scope of treatment, including but not limited to special braces, prosthetic devices, eyeglasses or the like or hearing aids.
- (f) Cosmetic or plastic surgery other than therapeutic surgery considered as essential by a **Medical Practitioner** to remedy a malfunction.
- (g) Any expenses in respect of **Pre-existing Condition**, unless the **Illness** occurred while the **Insured Maid** has been employed with you for not less than the preceding 12 months.
- (h) Any expenses in respect of treatment that is covered by a more specific policy (e.g. Travel Insurance).

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- (i) Any expenses in respect any test or treatment related to infertility, sub-fertility, assisted conception or any contraceptive operation, including their related complications.
- (j) Any expenses incurred for sex change operations, including their related complications.
- (k) Any non-medically necessary procedure or treatment.
- (l) Any routine medical examinations or check-ups unrelated to the treatment or diagnosis of any injury or illness covered under this Policy, or examinations for employment or travel.

SECTION 4 - DAILY HOSPITALIZATION BENEFIT

If We are liable to pay under Section 3 of this Policy, then We will also pay the **Insured Maid** a daily sum for each consecutive day of the **Insured Maid's** stay in a **Hospital** up to a maximum of 90 consecutive days, subject to the Limit as specified in the **Certificate of Insurance**.

SECTION 5 - WAGES AND LEVY REIMBURSEMENT

We will, subject to the Terms of this Section, pay to the **Insured** the pro rata wages and Government Levy imposed on foreign domestic helpers in respect of the **Insured Maid** up to the Limit stated in the **Certificate of Insurance** in the event of the **Insured** suffering the loss of service of the **Insured** for each consecutive day of the **Insured Maid's** stay in **Hospital** due to **Illness** or **Injury**, the expenses of which are insured and payable under Section 3 of this Policy. Provided always that We shall not be liable for any payment beyond 90 days of the **Insured Maid's** hospitalization.

SECTION 6 – TERMINATION & RE-HIRING EXPENSES

We shall pay to the **Insured** the agency fee incurred in hiring a replacement domestic maid up to the policy limit as shown on the **Certificate of Insurance** as a result of termination of the **Insured Maid's** services following death or permanent disablement of the **Insured Maid** as a result of an **Accident** subject to being certified by Singapore Government registered physician/surgeon and provided that prior agreement is being obtained from the Company for all such expenses and that the replacement domestic maid be employed within 30 days of the death or repatriation of the **Insured Maid**.

SECTION 7 - REPATRIATION EXPENSES

We will reimburse the **Insured** for actual Repatriation Expenses incurred up to the Limit in the Certificate of Insurance in respect of:

- (a) Conveyance of the **Insured Maid** to her country of origin in the case of Permanent Disability or prolonged terminal or serious illness preventing the **Insured Maid** from engaging in or attending to her employment or occupation as a domestic maid. This has to be certified by a registered medical practitioner to be medically unfit to perform her duties as a domestic maid under her contract for the next 6 months from the date of illness or accident.
- (b) Burial or cremation or conveyance of body or ashes of the **Insured Maid** at her country of origin, where death occurs following Injury or Illness or Suicide.

It is a condition precedent to Our liability to reimburse the Repatriation Expenses that a detailed account with supporting documents be submitted to and approved by Us.

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SECTION 8 - DOMESTIC HELPER'S LIABILITY

We will pay the benefits shown below if, during the **Period of Insurance**, the **Insured Maid** is legally responsible for accidentally injuring someone; or for damaging or causing loss to someone else's property while performing her duties as a foreign domestic helper in the address stated in the policy.

BENEFIT A - LEGAL COSTS

We will pay the legal costs and expenses for representing or defending the **Insured Maid**, up to the Limit stated in the **Certificate of Insurance**.

BENEFIT B - JUDGEMENT AMOUNT

We will pay the amount awarded against the **Insured Maid** by a Court in Singapore, up to the Limit stated in the **Certificate of Insurance**.

EXCEPTIONS TO SECTION 8

This Insurance shall not apply to:

- (a) Any claim arising from the **Insured Maid's** deliberate, malicious, unlawful or criminal act.
- (b) Any claim arising from loss of or damage to property own, or are in charge of, which **You** or **Your** family member residing in the address stated in the Policy.
- (c) Expenses for legal services to which We have not agreed beforehand.
- (d) Any claim for injury or death to **You** or a member of **Your** household.
- (e) Any court judgement which is not in the first instance delivered by a court within Singapore.
- (f) Any legal responsibility that results from the **Insured Maid** passing on disease to others.
- (g) Any legal responsibility that results from the **Insured Maid's** abuse of controlled drugs.
- (h) Any legal responsibility that results from the **Insured Maid** being under the influence of alcohol or drugs or solvents.
- (i) Any claim for punitive, aggravated or exemplary damages.

SECTION 9 - SPECIAL GRANT

We will pay a lump sum benefit to the **Insured Maid's** estate or legal representative, as specified in the **Certificate of Insurance**, in the event of the **Insured Maid's** death.

This Section will not apply in the event that the **Insured Maid** commits suicide.



OPTIONAL COVERS

(Where applicable - please refer to the Certificate of Insurance to see if this section is in force)

SECTION 10 - WAIVER OF COUNTER INDEMNITY

In the event of a demand made by the Ministry of Manpower of Singapore on the security bond covered under Section 1 of this Policy following any breach of the Conditions of Work Permits, We shall waive Our rights to indemnification (save for the excess amount stated in the **Certificate of Insurance**) against the **Insured** and Special Condition (a) of Section 1 shall be of no effect.

Provided that the waiver given by **Us** under this Section does not apply to:

- (a) any breach by the **Insured** of the conditions of the security bond imposed by the Ministry of Manpower under Section 10 of Employment of Foreign Manpower (Work Passes) Regulation or Section 21 of Immigration Regulations.
- (b) any loss, claim or payment of which the **Insured** is aware of prior to the effective date of cover of the **Insured/Insured Maid** declared herein.
- (c) any loss, claim or payment incurred by the **Insured** within the first 30 days from the effective date of cover of the **Insured/Insured Maid** declared herein. This Exception shall not be applicable if the effective date of cover is the same as the signature date in the security bond referred to in Exception (a) above.
- (d) any loss, claim or payment incurred by the **Insured/Insured Maid** upon discharge of the security bond by the relevant government authorities or the original expiry of the Policy, whichever is the earlier.
- (e) the excess stated in the **Certificate of Insurance**.

SECTION 11 - OUTPATIENT MEDICAL EXPENSES (FOR ILLNESS)

If **Insured Maid** suffers from an Illness (excluding Chronic Illness) in Singapore, We will reimburse **You** the medically necessary outpatient medical expenses up to the limit of benefit stated in the Schedule.

Medical expenses include consultation, related medication and diagnostic tests. Any visit to a medical specialist will need to be recommended by the Medical Practitioner. Medical specialist visits are considered to be separate visit.

If **Insured Maid** visits any clinic on the panel of Our Third Party Administrator – Fullerton Healthcare Group, we will provide cashless cover above the co-payment and up to the limit of benefit stated in the Schedule. In case **Insured Maid** visits other clinics, any covered benefit will be paid on a reimbursement basis.

<u>Clinic #</u>	<u>Cover</u>	<u>Co-Payment</u>
Panel (Cashless)*	As per policy limit, subject to maximum \$60 per visit	\$10.00 on each & every claim
Non-Panel (Reimbursement Basis)		\$30.00 on each & every claim

* Please refer to enclosed 'Step-by-Step Guide to Fullerton Health Network Mobile Application (FHN3) Download and Usage';

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Note:

This is an optional benefit and additional top-up premium applies. This benefit is only made available if **Your Insured Maid** is below 51 years old.

EXCEPTIONS to SECTION 11

1. The Company will not pay for any benefits for any fees or charges incurred for any of the following services provided to the **Insured Maid**:

- (a) Any specialist medical treatment or service except for referral by Panel General Practitioner for Panel Specialist Clinics;
- (b) Any fees or charges incurred for any condition resulting from chronic illness or chronic diseases (lists of Chronic Illness/Diseases as per appended below);

(a) Alzheimer's Disease/Dementia	(r) Heart Attack	(ii) Nephrosis/Nephritis
(b) Angioplasty & Other Invasive Treatment for Coronary Artery	(s) Heart Valve Surgery	(ii) Osteoarthritis
(c) Anxiety	(t) HIV	(jj) Osteoporosis
(d) Apallic Syndrome	(u) Hyperlipidemia (Lipid Disorder)	(kk) Other Coronary Artery Disease
(e) Aplastic Anaemia	(v) Ischaemic Heart Disease	(ll) Paralysis (Loss of Use of Limbs)
(f) Asthma	(w) Kidney Failure	(mm) Parkinson's Disease
(g) Bacterial Meningitis	(x) Loss of Independence Existence	(nn) Poliomyelitis
(h) Benign Brain Tumour	(y) Loss of Speech	(oo) Primary Pulmonary Hypertension
(i) Benign Prostatic Hyperplasia	(z) Lung Disease	(pp) Progressive Scleroderma
(j) Bipolar Disorder	(aa) Major Burns	(qq) Psoriasis
(k) Blindness (Loss of Sight)	(bb) Major Depression	(rr) Rheumatoid Arthritis
(l) Cancers	(cc) Major Head Trauma	(ss) Schizophrenia
(m) Chronic Obstructive Pulmonary Disease (COPD)	(dd) Major Organ	(tt) Stroke
(n) Coronary Artery By-Pass Surgery	(ee) Bone Marrow Transplantation	(uu) Surgery to Aorta
(o) Deafness (Loss of Hearing)	(ff) Motor Neurone Disease	(vv) Terminal Illness
(p) Diabetes Mellitus	(gg) Multiple Sclerosis	(ww) Viral Encephalitis
(q) Epilepsy Fulminant Hepatitis	(hh) Muscular Dystrophy	

- (c) Any hospital services;
- (d) All health screening related examinations, including multiphasic health screening, laboratory tests and X-rays, and screening mammograms;
- (e) Neonatal services (neonates defined as infants aged 1 - 14 days) and hospitalization beginning in the first 14 days of life; and neonatal intensive care for babies of all ages;

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- (f) Treatment relating to birth control, infertility and impotency; treatment occasioned by or resulting from pregnancy, childbirth (including diagnostic tests for pregnancy), miscarriage (except due to an accident), abortion, contraception and all complications arising from any of the same;
- (g) Any dental work or treatment, oral surgery, orthodontics and orthognathic surgery; temporomandibular joint disorder;
- (h) Eye examination, surgical procedure for correction of eye refraction, procurement or use of contact lenses or eye glasses; speech therapy cosmetic or plastic surgery;
- (i) Services (irrespective of whether there is hospital confinement) for primary purpose of diagnosis, medical check-up, genetic or health screening immunization, procedures not generally recognized as standard medical practice such as hydrotherapy, acupuncture, chiropractic, foot reflexology, experimental treatment and procedure under investigation;
- (j) Chemotherapy, immunotherapy, radiotherapy and renal treatment;
- (k) All treatment including and relating to kidney dialysis and/ or organ transplants;
- (l) Therapy for chronic hepatitis conditions;
- (m) Rest care, sanatoria care or special nursing care; treatment or services that are not medically necessary reasonably required for the illness or bodily injury caused by and **Accident**;
- (n) Circumcision (except where it is medically necessary) or treatment relating to the same;
- (o) All vaccinations, prophylactic treatment and anti-viral;
- (p) Sex-hormones and growth hormone replacement therapies;
- (q) Vitamins and health supplement, unless medically required and in the presence of vitamin deficiency;
- (r) CT scan, ultrasound, radioisotope scan, barium studies, MRI services;
- (s) Physiotherapy, Traditional Chinese Medicine (TCM);
- (t) Treadmill ECG;
- (u) Laser treatment of eye;
- (v) Implants (homograft, heterograft, artificial) and prostheses; procurement of hearing aids, wheel-chairs, all forms of home aids, dialysis machine and any other hospital-type equipment;
- (w) Laboratory investigation related to cancer markers, sex and growth hormones;

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- (x) Stem cell support therapy, treatment following brain death, interferon and other biological response modifiers;
 - (y) Cases treated and claimable under the basic Maid Insurance Policy; and
 - (z) Any medication insisted upon by the **Insured** and/or **Insured Maid**.
2. The Company will not pay for any benefit in respect of any fees or charges incurred for the consultation, treatment, test and examination provided to or conducted on the **Insured Maid** for any of the following conditions:
- (a) Intentional self-inflicted injuries, or injuries sustained as a result of a criminal act of the **Insured Maid** or attempted suicide (while sane or insane); nervous and mental conditions, alcoholism or drug addiction;
 - (b) Congenital anomalies or genetic defects of the **Insured Maid** present at or existing from the time of his/her birth regardless of the time of discovery of such anomalies or defects and the time of such treatment or surgical procedure for the same;
 - (c) Treatment for xanthelasma, syringoma, acne, alopecia, cosmetic skin surgeries, inguinal hernia, hydrocele and all complications arising from any of the same;
 - (d) Treatment for sleep apnea, obesity, weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition;
 - (e) Venereal disease, Acquired Immune Deficiency Syndrome (AIDS), AIDS related complexes and all illnesses or diseases associated with the Human Immunodeficiency Virus (HIV); and
 - (f) Injuries or sickness arising directly or indirectly from insurrection, war or act of war (whether declared or undeclared) direct participation in strikes, riots or civil commotion, or full-time service in any of the armed forces including National Service reservist duty or training under Section 14 of the Enlistment Act, Cap. 93 of the Republic of Singapore.

SECTION 12: WAIVER OF CO-PAYMENT PAYABLE BY EMPLOYER

In consideration of additional premium paid for this Section, the imposed Claims co-payment under Section 3 shall not be applicable.

This optional benefit is available to **Your Insured Maid**:

- (a) who is below 51 years old; and
- (b) if **You** have elected to purchase this option prior to the commencement of the **Period of Insurance**.



GENERAL EXCEPTIONS

(Applicable to all Sections)

1. We will not pay for:
 - (a) any expenses or compensation for treatment or service incurred as a direct or indirect result of **Pre-existing Conditions**, unless waived under exclusion terms stated under Section 3.
 - (b) any consequential loss or damage of any kind whatsoever.
2. We will not indemnify or pay the **Insured** for bodily injury to the **Insured Maid** and/or expenses directly or indirectly consequent upon:
 - (a) any malicious, willful or illegal acts by the **Insured** or **Insured's** immediate family members residing with the **Insured**.
 - (b) any criminal acts committed by the **Insured Maid**.
 - (c) treatment of alcoholism and drug addiction, and the repeat occurrence of treatment of conditions or injuries arising from drug addiction (except that of **Illicit Drugs**) or alcoholism. For the purpose of this exception, Illicit Drugs means illicit or controlled drugs specified in the First Schedule to the Misuse of Drugs Act.
 - (d) repeat **Occurrence** of treatment of conditions or injuries arising from participation in civil commotion, riot or strike.
 - (e) repeat **Occurrence** of treatment of mental conditions and conditions or injuries arising from self-inflicted injuries and attempted suicide.
 - (f) repeat **Occurrence** of treatment of venereal diseases and/or sexually transmitted diseases.
 - (g) pregnancy, childbirth, miscarriage, abortion, sterilisation, menopause or any complications therefrom.
 - (h) voluntary participation in hazardous sports, as defined under the Employment of Foreign Manpower (Work Passes) Regulations 2012 which include winter sports (such as skiing or snowboarding), underwater activity (such as snorkelling or scuba diving), aerial activity (such as taking a helicopter tour or para-gliding) or motor sport (such as motorcycle racing or motor car racing).
 - (i) any action for compensation brought in the Courts of Law of any territory outside Singapore.
 - (j) nuclear fallout, war and related risk.
3. We will not indemnify or pay the **Insured** and/or **Insured Maid** for loss, damage, injury by accident or disease directly or indirectly occasioned by or happening through or in consequence of or contributed to by:
 - (a) war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, mutiny, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power;
 - (b) any act of terrorism. For the purpose of this endorsement an act of terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group (s) of persons, whether acting alone or on behalf of or in connection with any organization (s) or government (s), committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear;

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- (c) Earthquake, volcanic eruption, flood, avalanche or tempest;
- (d) ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this Exception combustion shall include any self-sustaining process of nuclear fission;
- (e) nuclear weapons material; and
- (f) any wilful act or wilful negligence of the **Insured/Insured Maid** or of his/her representatives.

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 shall be upon the **Insured** and/or **Insured Maid**.

GENERAL CONDITIONS

(Applicable to all Sections unless otherwise stated)

1. INTERPRETATION

This Policy and the Certificate of Insurance shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the **Certificate of Insurance** shall bear such meaning wherever it may appear.

2. HOME COUNTRY

This insurance does not operate when the **Insured Maid** returns to her home country whereupon:

- (a) cover ceases from the time she leaves Singapore or 7 days after the cancellation or expiry of her work permit, whichever is the earliest;
- (b) cover resumes upon her return to Singapore provided she holds a valid work permit that has not been cancelled whether temporarily or otherwise upon the renewal of her work permit whichever is the later.

3. CONDITIONS PRECEDENT TO THE COMPANY'S LIABILITY

Due observance and fulfilment of the terms provisions and conditions of this Policy in so far as they relate to anything to be done or not to be done by the **Insured** and/or the **Insured Maid** and the truth of the statements and answers in the proposal shall be conditions precedent to any liability of Us to make any payment under this Policy.

4. BREAK AND REVIEW CLAUSE

It is hereby declared and agreed that in consideration of the agreement to issue this insurance for a continuous period of twenty-four (24) months or more, coverage shall be continuous subject to the premium payable in accordance to the premium payment warranty. **We** will review, reassess, and reprice all policies under the insurance program's terms and conditions at each twelve (12) months anniversary date.

5. ALTERATION

This Policy shall cease to be in force if there be any material alteration in risk unless **We** by endorsement declare the Insurance to be continued.

6. REASONABLE PRECAUTION

The **Insured** and the **Insured Maid** shall take all reasonable precautions to safeguard the **Insured Maid** against **Accidents**, sickness and disease.

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7. CLAIMS PROCEDURE

On the happening of any **Injury** or **Illness** which may give rise to a claim under this Policy the **Insured** or save for Clause 7(e) the **Insured Maid** shall:

- (a) give notice in writing to **Us** within 21 days stating the circumstances of the loss for a claim to be made.
- (b) deliver to **Us** as soon as reasonably practicable a claim in writing with such detailed particulars and proofs as may be reasonably required.
- (c) give **Us** all reports, certificates and information required by **Us** which shall be furnished by the **Insured's/Insured Maid's** and shall be in such form as **We** shall prescribe.
- (d) ensure that the **Insured 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.
- (e) ensure in the case of death where any reasonable doubt exists as to the cause thereof that a qualified **Medical Practitioner** appointed by **Us** is allowed to make a post-mortem examination of the body of the **Insured Maid** at **Our** expense.

8. CESSATION OF POLICY

This Policy shall terminate in the event that the **Insured Maid** ceases to be your employee for any reason whatsoever. You hereby undertake that in the event of termination of this Policy, to procure the Ministry of Manpower to release the security bond and to discharge us as surety under the security bond. This undertaking shall continue in full force and effect notwithstanding termination of this Policy. Nothing herein shall affect Your counter indemnity issued in favour of **Us**.

9. FRAUDULENT CLAIMS

If the **Insured** and/or the **Insured Maid** or anyone acting on their behalf made any claim under this Policy knowing the claim to be fraudulent this Policy shall become void and all benefits forfeited.

10. THIRD PARTY'S RIGHTS

A person who is not a party to this Policy has no rights under the Contracts (Rights of Third Parties) Act (Cap 53B) of Singapore to enforce any terms of this Policy.

11. POLICY ASSIGNMENT

This Policy is not assignable and **We** shall not be affected by notice of any trust charge lien assignment or other dealing with this Policy.

12. DISCHARGE

The receipt of the **Insured** or the **Insured Maid** or of their legal personal representatives as the case may be shall in all cases be an effectual discharge to **Us**.

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13. OTHER INSURANCES

(Not applicable to Section 2 – Benefits A and B)

If at the time of any loss, damage or liability hereby insured there be any other subsisting Insurance or Insurances' whether effected by the Insured 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.

14. ARBITRATION

If there is any dispute as to the amount to be paid under this Policy (liability being otherwise admitted) such dispute shall be first referred for mediation by Financial Industry Disputes Resolution Centre Ltd.

If the parties are unable to reach a settlement, the dispute shall be referred to and finally resolved by arbitration administered by the Singapore International Arbitration Centre ("SIAC") in accordance with the Arbitration Rules of the SIAC for the time being in force, which rules are deemed to be incorporated by reference in this Clause.

The seat of the arbitration shall be Singapore and the tribunal shall consist of one arbitrator. The language of the arbitration shall be English.

15. LIMITATION

If We offer an amount in settlement or disclaims liability altogether for a claim, and such a claim is not within 12 months from the date of such an offer or disclaimer referred to arbitration as required under Condition 14 or made the subject of a pending court action, the claim will be deemed to be abandoned and We will have no liability in respect of it.

16. SUBROGATION

If We shall make any payment or otherwise made good any loss applicable under this Policy, We shall be subrogated to all the rights of recovery which You or the **Insured Maid** may have against any other person or persons and You shall complete, sign and deliver any documents necessary to secure such rights. You shall, and shall undertake that the **Insured Maid** shall, not take any action following a loss to prejudice such rights of subrogation.

17. GOVERNING LAW

This Policy is governed by and interpreted in accordance with the laws of the Republic of Singapore.

18. BREACH OF PREMIUM WARRANTY

This Policy is issued on a basis that the named **Insured** has never had any insurance (for the risk insured) cancelled due solely or in part to a breach of premium payment warranty in the last 12 months.

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19. CANCELLATION

In the event the Singapore Ministry of Manpower discharges the security bond we provided for the Insured under this **Policy**, the insurance coverage will cease automatically from the date of discharge. The Insured shall be entitled to a return of the premium paid computed as follows:

Number of days in force prior to termination	Percentage of policy premium entitled for refund
0 day to 30 days	80% refund
31 days to 90 days	50% refund
91 days to 180 days	30% refund
181 days and beyond	0% refund

100% of the premium will be refunded if:

- The Policy is cancelled within 90 days and replaced with a new MaidSure policy; or
- The In-Principal Approval (IPA) is terminated and the Insured Maid did not enter Singapore.

Provided there shall be no refund if:

- Any claim has been made or has arisen under this Policy; or
- The premium refund is less than \$27.25 (inclusive of GST).

We shall have the absolute discretion to change the conditions under this Policy and/or to cancel this Policy as we deem fit. The Insured will be notified of changes to the terms of the Policy.

PAYMENT BEFORE COVER WARRANTY

(Applicable to all Sections)

- Notwithstanding anything herein contained but subject to clause 2 below, it is hereby agreed and declared that the total premium due must be paid and actually received in full by Us (or the intermediary through whom this Policy was effected) on or before the inception date ("the inception date") of the coverage under the Policy, Renewal Certificate, Cover Note.
- In the event that the total premium due is not paid and actually received in full by Us (or the intermediary through whom this Policy was effected) on or before the inception date referred to above, then the Policy, Renewal Certificate and Cover Note shall not attach and no benefits whatsoever shall be payable by Us. Any payment received thereafter shall be of no effect whatsoever as cover never attached on the Policy, Renewal Certificate, Cover Note.

IMPORTANT - We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

The Insured is requested to read this Policy. If any error or mis-description be found, this Policy should be returned to the issuing office for correction.

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