

CHOICE PROTECT360 BENEFITS TABLE

Sections	Benefits	Maximum Benefit Payable (S\$)			
		Basic	Silver	Gold	Platinum
PERSONAL ACCIDENT					
PA 1	Accidental Death & Permanent Disablement	100,000	200,000	300,000	500,000
PA 2	Accident Medical Reimbursement	2,000	6,000	8,000	10,000
PA 3	Mobility Aid & Ambulance Services Reimbursement	4,000			
PA 4	Daily Hospital Income	50 per day	100 per day	150 per day	250 per day
PA 5	Purchase Protection	5,000			
PA 6	Bill Protector	5,000			
PA 7	Funeral Expenses	5,000			
PA 8	Parent(s) Support Grant	1,000	3,000	4,000	5,000
PA 9	Dependent Child Cover	25% of PA 1, PA 2, PA 3		30% of PA 1, PA 2, PA 3	
HOME CONTENTS (OPTIONAL ADD-ON)					
HC 1	Household Contents, Renovation, Fixtures and Fittings	200,000			
HC 2	Alternative Accommodation Expenses	15,000			
HC 3	Valuables Coverage	30,000			
HC 4	Personal Liability	1,000,000			
HC 5	Home Assistance Concierge Services	Included			
HOSPITAL INCOME (OPTIONAL ADD-ON)					
HI 1	Hospitalization Cash (Up to 365 days)	100 per day			
HI 2	Triple Hospital Cash (ICU) (Up to 30 days)	300 per day			
HI 3	Recuperation Benefit (Up to 30 days)	50 per day			
ANNUAL TRAVEL (OPTIONAL ADD-ON)					
AT 1	Overseas Medical Expenses	100,000			
AT 2	Medical Expenses in Singapore	10,000			
AT 3	Trip Cancellation	10,000			
AT 4	Travel Delay	1,000			
AT 5	Baggage Delay	1,000			
AT 6	Loss or Damage to Baggage and Personal Effects	1,000			
AT 7	Worldwide Personal Liability	1,000,000			