

OUTPATIENT SPECIALIST INSURANCE GENERAL EXCLUSIONS

Unless specifically included in the Benefit Schedule or Endorsements, all medical care, tests and treatment in relation to the following shall not be reimbursed by Us :

1. All medications, investigations or treatment requested by the Insured Person. Drugs purchased without doctor's prescription. Special nursing care, general physical or medical check-up or test not incidental to the treatment of diagnosis of an actual Sickness or Injury or any treatment which is not medically necessary.
2. Experimental medical treatment or diagnostic examinations or services for education purposes, such as, but not limited to, investigations and/or treatment as part of clinical trials. Blood tests for food allergies are specifically excluded.
3. Alternative treatment clinic or centres, where alternative treatment includes but is not limited to, chiropractic, acupuncture, podiatry, reflexology, hydrotherapy, physiotherapy, occupational and speech therapy. Unless pre-approve by Us or as indicated in the Benefit Schedule.
4. Routine physical examinations, medical check-ups, health screening or any other tests or treatment which are not medically necessary and any preventive treatments including vaccination and preventive medicines and pap smear screening.
5. Sleep disorders; Alcoholism or drug addiction; Suicide or attempted suicide, self-inflicted injuries or any attempt threat while sane or insane; Injuries sustained as a result of a criminal act of the Insured Person. Consultation or treatment for developmental conditions; Treatment for developmental delay and/or learning disabilities in children.
6. Any expenses incurred in relation to birth control measures, pregnancy, infertility, post-delivery confinement, miscarriage, ligation, abortion, erectile dysfunction and Hormone Replacement Therapy. Consultation or treatment for natural/physiological menopause and/or medical conditions arising directly from it (such as osteoporosis) except where the menopause was induced by the surgical removal of both ovaries deemed medically necessary.
7. Any expenses incurred in relation to cosmetic nature including but not limited to aesthetic and plastic surgery: acne, skin peeling or treatment for hair loss, and sex change operation, pigmentation, keloids, skin tags, moles, circumcision & viral wart (except where it is medically or functionally necessary) or treatment relating to the same.
8. Consultation or treatment at wellness or lifestyle clinics or centres; Treatment for obesity, weight reduction or weight improvement; Treatment and Investigations for sleep apnoea. All bariatric surgeries/surgeries to achieve weight loss are specifically excluded, regardless of the reason the bariatric surgery is being done for. Vitamins and health supplements unless medically required as a result of vitamin deficiency.
9. Congenital conditions or birth defects or conditions arising therefrom.
10. Any expenses incurred in relation to illness or disablement arising from, venereal disease, HIV infection, AIDS or any illness caused by the misconduct or negligence of the Insured Members.
11. Any dental treatment or surgery except where the procedure is necessitated by damage to sound natural teeth as a result of an Accident or Injury occurring during the Period of Insurance. For avoidance of doubt, any treatment that requires the expertise of a Dental Surgeon, regardless of the disease or condition being treated, will be excluded. This is regardless of the involvement or any Medical Doctor in the treatment or surgery for that condition.
12. Any expenses , including investigations, incurred in relation to illness and disablement during or in the course of employment which constitutes a valid claim under the Workmen's Compensation Act, Singapore.
13. Any surcharge incurred due to visits outside the normal operating hours of the clinic except for emergency cases seen in Accident and Emergency Department.
14. Claims for which all original receipts and/or bills are not submitted for processing within three months of incurring such expenses.
15. Any eye examination or surgical procedure for correction of eye refraction
16. All visits for second opinion of the same condition for the insured that had previously been claimed with Raffles Health Insurance.
17. Any expenses incurred in relation to procurement or use of special braces, equipment, prosthetic devices or appliances including but not limited to spectacles, contact lens or artificial limbs due to medical, surgical, dental or optical reason. Implants, medical appliances and prosthetic devices including spectacles, hearing aids, wheelchairs, lenses and pressure garments.

SANCTION LIMITATION

1. No insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.

GROUP HOSPITALISATION & SURGICAL INSURANCE

GENERAL EXCLUSIONS

Unless specifically included in the Benefit Schedule or Endorsements, all medical care, tests and treatment in relation to the following shall not be reimbursed by Us :

2. All medications, investigations or treatment requested by the Insured Person. Drugs purchased without doctor's prescription. Special nursing care, general physical or medical check-up or test not incidental to the treatment of diagnosis of an actual Sickness or Injury or any treatment which is not medically necessary.
3. Experimental medical treatment or diagnostic examinations or services for education purposes, such as, but not limited to, investigations and/or treatment as part of clinical trials. Blood tests for food allergies are specifically excluded.
4. Alternative treatment clinic or centres, where alternative treatment includes but is not limited to, chiropractic, acupuncture, podiatry, reflexology, hydrotherapy, occupational and speech therapy. Unless pre-approved by Us or as indicated in the Benefit Schedule.
5. Routine physical examinations, medical check-ups, health screening or any other tests or treatment which are not medically necessary and any preventive treatments including vaccination and preventive medicines and pap smear screening.
6. Sleep disorders; Alcoholism or drug addiction; Suicide or attempted suicide, self-inflicted injuries or any attempt thereof while sane or insane; Injuries sustained as a result of a criminal act of the Insured Person. Consultation or treatment for developmental conditions; Treatment for developmental delay and/or learning disabilities in children.
7. Any expenses incurred in relation to birth control measures, pregnancy, infertility, post-delivery confinement, miscarriage, ligation, abortion, erectile dysfunction and Hormone Replacement Therapy. Consultation or treatment for natural/physiological menopause and/or medical conditions arising directly from it (such as osteoporosis) except where the menopause was induced by the surgical removal of both ovaries deemed medically necessary.
8. Any expenses incurred in relation to cosmetic nature including but not limited to aesthetic and plastic surgery: acne, skin peeling or treatment for hair loss, and sex change operation, pigmentation, keloids, skin tags, moles, circumcision & viral wart (except where it is medically or functionally necessary) or treatment relating to the same.
9. Consultation or treatment at wellness or lifestyle clinics or centres; Treatment for obesity, weight reduction or weight improvement; Treatment and Investigations for sleep apnoea. All bariatric surgeries/surgeries to achieve weight loss are specifically excluded, regardless of the reason the bariatric surgery is being done for. Vitamins and health supplements unless medically required as a result of vitamin deficiency.
10. Congenital conditions or birth defects or conditions arising therefrom.
11. Any expenses incurred in relation to illness or disablement arising from, venereal disease, HIV infection, AIDS or any illness caused by the misconduct or negligence of the Insured Members.
12. Any dental treatment or surgery except where the procedure is necessitated by damage to sound natural teeth as a result of an Accident or Injury occurring during the Period of Insurance. For avoidance of doubt, any treatment that requires the expertise of a Dental Surgeon, regardless of the disease or condition being treated, will be excluded. This is regardless of the involvement of any Medical Doctor in the treatment or surgery for that condition.
13. Any expenses incurred in relation to procurement or use of special braces, equipment, prosthetic devices or appliances including but not limited to spectacles, contact lens or artificial limbs due to medical, surgical, dental or optical reason. Implants, medical appliances and prosthetic devices including spectacles, hearing aids, wheelchairs, lenses and pressure garments; Non-medical services or specially requested items not normally included in the room rate such as international calls, television, radio or similar facilities
14. Any expenses, including investigations, incurred in relation to illness and disablement during or in the course of employment which constitutes a valid claim under the Workmen's Compensation Act, Singapore.
15. Claims for which all original receipts and/or bills are not submitted for processing within three months of incurring such expenses.
16. Any eye examination or surgical procedure for correction of eye refraction.
17. Hospitalisation for the primary purpose of investigation, x-ray examinations, including CT Scans and MRI Scans, medical check-up or health screening, without any medical treatment.
18. Non-hospital charges, including nursing care or ambulatory care, rest cures or sanatoria care, convalescent care, hospice care and treatment arising from any geriatric or psycho-geriatric condition.

19. Treatment or surgical procedures done for aesthetic purposes. This includes Cosmetic (aesthetic) or plastic surgery or any treatment which relates to or is needed because of previous cosmetic treatment, except where reconstructive Surgery :
 - (a) is necessary for functional or medical purposes after an Accident or following Surgery for a medical condition (provided that the Accident or Surgery occurred while the Insured Person was covered under this Policy); and.
 - (b) is done at a medically appropriate stage after the Accident or Surgery; and
 - (c) the cost of the treatment is approved by Us in writing before it is done.
20. Injuries arising from direct participation in a strike, riot, insurrection, any act of war (whether declared or undeclared) or any act of terror, injuries arising from participating in any sports in a professional capacity.
21. All visits for second opinion of the same condition for the insured that had previously been claimed with Raffles Health Insurance.

SANCTION LIMITATION

1. No insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom or United States of America.