

MEDISHIELD COVERAGE

Frequently Asked Questions

Entry into MediShield

1. Can persons with special needs join MediShield?

Entry into MediShield is based on the health condition of the applicant at the point of application. All applicants to MediShield are assessed based on the same entry condition, that is, whether they are healthy at the point of entry and have no serious pre-existing illnesses.

Persons with congenital or pre-existing conditions can apply to join MediShield to obtain coverage for medical treatment that is not related to their condition.

Applicants may not be accepted under MediShield if their pre-existing health condition posed a higher insurance risk at the point they make the application. However, applicants may re-apply to enter MediShield once their health condition has improved or have been resolved, for example, through surgery or other medical intervention and their condition has remained stable for some time. Applicants under such circumstances need to provide a detailed medical report of their condition dated within six months of the date of their application.

2. Can a mentally disabled person join MediShield?

Entry into MediShield is based on the applicant's health condition at the point of application. All applicants to MediShield are assessed based on the same entry condition, that is, whether they are healthy at the point of entry and have no pre-existing illnesses.

Mentally disabled applicants will also be assessed based on their health condition at the point of entry. However, claims arising from treatment related to mental disability or illness and personality disorders would not be admitted as these are standard exclusions under MediShield.

3. If I discover a congenital anomaly or a hereditary condition after I have successfully joined MediShield, do I have to declare it to CPF?

No, you do not have to declare it to CPF. Once you have been accepted into MediShield, MediShield will continue to cover you for all medically necessary treatment that is unrelated to the congenital anomaly or hereditary condition.

MediShield does not cover the costs of treatment for congenital anomalies, hereditary conditions and disorders regardless of the time the condition is discovered. Please see Question 7 for examples of treatments excluded from MediShield coverage.

4. If I have been rejected from MediShield coverage, can I re-apply?

You may re-apply to MediShield if you were initially rejected and if your health condition has improved. Each applicant's health will be assessed at the point of application.

5. How do I know if I am covered under MediShield?

Your yearly CPF Statement of Account and "My Messages" from *my cpf Online Services* will indicate the status of your and your dependant(s)' coverage (if any). You will have to log into the CPF website with your CPF Account Number and SingPass.

Alternatively, you can also call CPF Board at 1800-227 1188 to check.

6. How do I apply for MediShield coverage for myself and my family?

If you are applying for coverage for yourself and/or your dependant(s) who are below 16 years old, you can submit your application online via *my cpf Online Services* (under My Requests). You will have to log into the CPF website with your CPF Account Number and SingPass.

You may also download an application form from the CPF website and return it to the CPF Board.

To apply for coverage for your dependant(s) who are 16 years old and above, you will need to complete the same application form (available from the CPF website) and return it to the CPF Board.

You have to declare the past and current illnesses and medical conditions of yourself and/or your dependant(s) to support yours and/or their application(s). This is to determine your and/or your dependant(s)' insurability under the MediShield Scheme. CPF Board will not consider claims from a member who has given false or misleading information, or withheld relevant information in the health declaration.

Treatments Covered by MediShield

7. What does MediShield cover?

MediShield covers hospitalisation for medically necessary treatment and expensive outpatient treatments. MediShield coverage is meant for large hospital bills at the Class B2/C level.

MediShield does not cover the following:

- Overseas medical treatment
- Cosmetic surgery
- Infertility and assisted conception or any contraceptive operations
- Maternity charges
- Congenital anomalies, hereditary conditions and disorders (e.g. Down

Syndrome, Muscular Dystrophy, Atrial Septal Defect)

- Treatment of pre-existing illnesses
- Treatment for drug addiction or alcoholism
- Mental illness and personality disorders
- Vaccinations
- Private nursing charges

For the full list of excluded treatments, please refer to the CPF website at http://ask-us.cpf.gov.sg/Home/Hybrid/themes/CPF/Uploads/Healthcare/MSH_List_of_Excluded_Treatments.pdf.

MediShield payouts are subject to the applicable deductible and co-insurance. Please refer to the CPF website and MOH website for more details on the deductible and co-insurance features.

8. If I have a congenital anomaly or a hereditary condition and join MediShield, what does MediShield coverage provide?

MediShield covers hospitalisation for medically necessary treatment that is not related to the congenital anomaly or hereditary condition. For example, in case of a car accident, an insured will be covered by MediShield for the treatment costs incurred as the treatment is not related to the congenital anomaly or hereditary condition.

MediShield payouts are subject to the applicable deductible and co-insurance. Please refer to the CPF website and MOH website for more details on the deductible and co-insurance features.

9. How does CPF assess whether my medical treatment is related to my congenital anomaly or hereditary condition?

CPF will assess each case on a case-by-case basis. In cases of doubt, MediShield will seek further medical advice from the doctor-in-charge.