

Summit

Plan Sponsor Guide

For plans starting on or after 1 August 2019

What's inside?

Before you join us

- 1 Introduction
- 2 Eligibility
- 3 Plan currencies, premiums and ways to pay
- 4 Your plan start date
- 5 Clinical policy bulletins
- 6 Help us prevent fraud

While you're with us

- 7 Adding and removing members
- 8 Making changes to your plan
- 9 How to cancel your plan
- 10 How to renew your plan

The extra bits

- 11 Definitions
- 12 Governing law, jurisdiction and language
- 13 Complaints
- 14 Data protection
- 15 Areas of cover

Before you join us

1 Introduction

This Plan Sponsor Guide, and the relevant **Benefits Schedule(s)**, details what **we** do and don't cover under your **plan**, as well as giving **you** important information about managing your **plan**. To see all the terms and conditions that apply to a **participant's** cover, please refer to the **plan documents**.

Please read this information carefully to make sure **you're** completely satisfied with the cover **we're** providing. If **you** have any questions, please contact **us** and **we'll** be more than happy to help.

We don't guarantee that your **plan** meets personal tax requirements and/or the visa and/or social health care requirements of the country that **participants** are residing in. It's your responsibility to ensure that any **plan you** choose meets the **participant's** needs.

If a **participant's area of cover** is Area 1, they are a citizen of the United States (US) and they spend more than 183 days in aggregate in the US in any one **plan year**, (i) **we** may cancel their cover, and (ii) they may be required to buy an ACA compliant **plan** or face US tax penalties.

If coverage provided by your **plan** violates or will violate any United States (US), United Nations (UN), European Union (EU) or other applicable economic trade sanctions, the coverage is immediately considered invalid. For example, Aetna and Al Khaleej companies cannot make payments or reimburse for health care or other claims or services if it violates a financial sanction regulation. This includes sanctions related to a blocked person or entity, or a country under sanction by the US, unless permitted under a valid written Office of Foreign Asset Control (OFAC) license. For more information on OFAC, visit www.treasury.gov/resource-center/sanctions/Pages/default.aspx.

Cover is subject to legal or regulatory requirements, depending on the **participant's** nationality and **country of residence**.

2 Eligibility

Main participant

Each person who **you** wish to include on your **plan** as a **main participant** must:

- be your **employee**, or, if **we** agree, an **employee** of a company that is part of the same corporate group as **you**;
- be a certain level of seniority or be in a certain location, that **you** have chosen and that **we** have agreed, if **you** do not want to include all of your **employees** on your **plan**;
- be aged 18-64 inclusive at their **date of joining**. **Employees** aged over 64 at their **date of joining** may also be eligible; **we** will need to ask them some medical questions in order to decide if **we** can include them and on what terms; and
- not be a citizen of the United States (US) who resides in the US.

You may add **main participants** to your **plan** on the terms **you** have agreed with **us** within 30 days of such persons meeting the above criteria. At any other time, **we'll** need to ask them some questions in order to decide if **we** can include them and on what terms.

Dependants

Each person who **you** wish to include on your **plan** as a **dependant** must be a **main participant's**:

- Spouse or **partner**;
- Unmarried child, stepchild or legally adopted child under the age of 18; or

- Unmarried child, stepchild or legally adopted child aged 18 to 26 who is in continuous full-time education (**we** may need written proof from the educational facility where they are enrolled).

You may add a **dependant** to your **plan** at any time. However, **we** may need to ask them some questions in order to decide if **we** can include them and on what terms if:

- **you** want to add them more than 30 days after the relevant **main participant's start date**;
- for a child, **you** want to add them more than 30 days after their birth or legal adoption; or
- for a spouse or **partner**, they are aged over 64 at their proposed **date of joining**.

Add-on plans

Our **add-on plans** have additional eligibility criteria – **you'll** find more details in the applicable **Benefits Schedule**.

Group

Unless **we** otherwise agree in writing, **you** must:

- have at least three **main participants** on your **plan** at any time;
- include all persons who qualify as **main participants** (as set out above) on your **plan** within 30 days of them meeting the criteria; and
- be responsible for all payments of **Takaful contribution** to **us** – **we** don't accept payment from **participants**,

If **you** require **participants** to contribute towards the cost of the **Takaful contribution**, or if **you** give **main participants** a choice of whether to include themselves or others as **dependants** on your **plan**, **you** must let **us** know and **we** may revise the terms of your **plan** and **Takaful contribution**.

If the number of **main participants** on your plan falls below three, at renewal **we** will not be able to offer **you** a **plan**, but **we** may be able to offer separate individual **plans** to each **participant** instead of a renewal of your **plan**.

If **you** want to have different **benefits** for **participants**, **you** can ask **us** to set up sub-groups. Sub-groups can be based on differences in regulation, location or seniority, and must each include a minimum of three **main participants** all on the same **benefits**, unless **we** otherwise agree in writing. **You** must include all **main participants** in the sub-group for which they qualify.

We'll apply the same **benefits** to **main participants** and their **dependants** on your **plan**, subject to legal or regulatory requirements.

3 Plan currencies, Takaful contributions and ways to pay

Each **plan** is an annual contract.

When **you** apply for your **plan**, **you** must choose from the currencies available on your **Group Formation Proposal** and pay all **Takaful contribution** in that currency. If your **Benefits Schedule** shows more than one currency, the **benefit** limits shown in the same currency as your **plan** will apply.

Your quote will explain how **you** can pay the **Takaful contribution** for your **plan**:

- for your **Summit plan** by single annual payment, four quarterly or twelve monthly instalments
- for your **add-on plans**, by single annual payment.

If **you** add or remove **participants** **we'll** let **you** know if **you** need to pay **us** any additional **Takaful contribution** or if **we'll** refund any **Takaful contribution** to **you**.

You may be able to pay by direct debit, bank transfer or by cheque or bankers draft as set out in your **Group Formation Proposal**. **You** can contact **us** if **you'd** like to change the method by which **you** pay.

Unpaid or late Takaful contributions

We'll write to **you** if **we** haven't received or been able to collect your **Takaful contribution** by a **Takaful contribution due date**. **We** have the right to suspend your **plan** until **you** have paid all **Takaful contributions** due, which means that **we** will not approve or pay any **claims** in that period, but if **we** do pay any **claims**, **we** have the right to recover the full amount of the **claim** from **you** or the **participant**.

We may cancel your **plan** if **we** don't receive payment within 30 days of a **Takaful contributions due date**. **You** will then have to apply for a new **plan** if **you** would still like **us** to cover your **participants**, and **we** may apply new **Takaful contributions** and terms.

4 Your plan start date

Your **plan** will start on the date **you** request as long as **we** accept the proposal and have received:

- your **Takaful contribution** (or first instalment of it) together with any applicable taxes on or before the **Takaful contribution due date**,
- the **Group Formation Proposal**,
- the **Group Participant Proposal** (if applicable),
- previous **Takaful certificates** if the underwriting terms are **CTT**,
- acceptance of any or all special terms offered in the quotation by **you** and/or the **participant**, as applicable,
- **Group Participant Declarations**, if **we** deem necessary, and
- the group membership census.

Your **Takaful certificate** will show your **plan start date**, and cover will continue for 12 months until your **plan renewal date**. **We're** unable to backdate cover.

5 Clinical policy bulletins

For information on how **we** classify certain **treatments** and services, refer to our clinical policy bulletins by visiting [aetna.com/health-care-professionals/clinical-policy-bulletins.html](https://www.aetna.com/health-care-professionals/clinical-policy-bulletins.html). Our clinical policy bulletins (CPBs) are based on objective and credible sources, including scientific literature, guidelines, consensus statements and expert opinions.

They're not a description of cover or confirmation that **we** cover these **treatments**, services or costs under your **plan**. If there's a discrepancy between a CPB and your **plan**, your **plan** terms will apply.

6 Help us prevent fraud

Fraud is a crime, and health care fraud increases **Takaful contributions** for all our customers. With your help, **we'll** do our utmost to detect and eliminate it.

Health care fraud includes:

- giving false or misleading information to get **Takaful cover** or a **Takaful contribution** reduction,
- claiming for **treatments** or services that a **participant** hasn't received,
- altering or amending invoices or bills,
- giving a false diagnosis,
- claiming from more than one **Takaful operator** for the same **treatment** or service, or
- using somebody else's **Takaful cover** to get **treatment** or services.

How you can help protect yourself and participants and keep Takaful contributions down

There are simple steps **you** and **participants** can take to protect yourselves from health care fraud:

- **participants** can compare invoices with their records,

While you're with us

checking dates are correct and that they received the **treatments** or services shown,

- **participants** asking questions if there's anything they're unsure about, don't understand, expect or recognise,
- letting **us** know if **participants** are concerned their doctor is giving them unsuitable **treatment**,
- filling in Takaful cover forms carefully,
- looking after Takaful cover details and documents and keeping original copies of documents and of any correspondence,
- making sure **you** and **participants** understand any documents before **you** sign them,
- reporting suspected fraud to **us**, and
- working with **us** on suspected fraud cases.

We work closely with others to prevent fraud

We're committed to protecting **you** and **participants** against fraud and also have statutory responsibilities to prevent **our** products from being used for financial crime. We work with other bodies such as international insurance bodies, international police and investigative agencies, regulatory bodies, legal agencies, and government departments to do this.

If you suspect fraud

Call **our** confidential Fraud and Investigation line immediately at +974-4-404-1111 or email ktg@alkhaleej.com.

7 Adding and removing participants

Adding a participant

You must contact **us** if you wish to add a **participant** to your **plan** and give us the information and documents **we** request. For **Continuous Transfer Terms**, this includes the original **Takaful Certificate** and other evidence from the proposed **participant's** previous Takaful operator.

For **Continuous Transfer Terms**, the proposed **participant's** cover will begin on:

- the date **we** receive your written acceptance of the special terms **we** offered in our quote, or
- an agreed later date.

Your **plan** and its terms, conditions and **benefits** may be different to those of their previous Takaful operator.

If your **plan** is a **Medical History Disregarded** or **moratorium plan**, with the exception of newborn children, the proposed **member's** cover will begin on:

- the date **we** receive the information **we've** requested, or
- an agreed later date.

If your **plan** is a **Full Medical Underwriting plan**, the proposed **member's** cover will begin on the date **we** receive your acceptance of the special terms **we** offered in **our** quote.

If, on the date **you** contact us to add a proposed **member** as a **dependant** on a **Medical History Disregarded** or **moratorium plan**, they're less than 31 days old, the mother's pregnancy was the result of natural conception and **we** have covered one of their parents for a continuous period of at least 12 months, **we'll** add them as a **dependant** to your **plan** with effect from their date of birth, regardless of their health. It remains your responsibility to disclose to **us** any material circumstance in accordance with section 2; 'Your Responsibilities', that

would influence **our** judgement as to whether to add the proposed **participant**.

If the **dependant** is less than 31 days old when **you** contact **us**, but the mother's pregnancy was the result of assisted conception and/or **we** have not covered either of the **dependant's** parents for a continuous period of at least 12 months then:

- where the **plan** is a **moratorium plan**, **we'll** (based on a completed medical questionnaire for the **dependant**) confirm the date **we** agree to add the **dependant** and a new **moratorium** will apply for that **dependant**; or
- where the **plan** is a **Medical History Disregarded plan**, **we'll** confirm if **we** need a completed medical questionnaire for the **dependant**, and:
 - if a medical questionnaire is needed, **we'll** (based on a completed medical questionnaire for the **dependant**) confirm the date **we** agree to add the **dependant** and any additional terms that apply; or
 - if no medical questionnaire is needed, **we'll** add them as a **dependant** to your **plan** with effect from their date of birth, regardless of their health. It remains your responsibility to disclose to **us** any material circumstance in accordance with section 2; 'Your Responsibilities', that would influence **our** judgement as to whether to add the proposed **participant**.

The terms of the relevant **main participant's plan** will apply to the added **dependant**. Once **we've** accepted a proposed **participant**, **we'll** send the relevant **main participant** the new **Participant ID card** and an updated **Takaful Certificate**.

Removing a participant

You must contact **us** in advance if **you** wish to remove a **participant** from your **plan**. **We'll** remove the **participant** on the future date **you** request.

Any request **you** make to remove **participants** during the **plan year** will be reviewed. Any pro-rata **Takaful contribution** adjustments are not guaranteed and will be subject to **our** agreement.

We can remove a **participant** from your **plan** if:

- they no longer meet the eligibility criteria set out in the eligibility section of this Plan Sponsor Guide; or
- they make a false or fraudulent **claim**.

If **you** or **we** remove a **main participant**, **we** will also remove their **dependants** from your **plan**. **You** must let a **participant** know if **you** or **we** are planning to remove them from the **plan** and what their **end date** will be.

You are responsible for ensuring that the **participant** deletes or destroys his or her **Takaful certificates** and **Participant ID cards** on or by that **participant's end date**. If a **participant** **you** have removed obtains **treatment** after that **participant's end date** that **we've** paid for, **we** have the right to recover the full amount of the **claim** from **you** or that **participant**.

When **you** remove a **dependant**, **we'll** send the **main participant** an updated **Takaful certificate** (unless **you** have also removed the **main participant**).

Members continuing cover when they leave your plan – 'continuation option'

The 'continuation option' allows **members** to transfer to a comparable individual **plan** and keep their existing underwriting terms when they leave the group **plan**, if:

- **you** have accepted the 'continuation option' at quotation stage or on renewal;
- they have been on cover for a continuous period of at least 12 months; and
- they are under 65 years of age.

If your **plan** has the 'continuation option', eligible **members** can contact **us** for details of what they need to provide when requesting continuation, and these terms will only be

available if they join the individual **plan** within 30 days of leaving your **plan**.

If your **plan** does not have the 'continuation option', or **members** do not meet the 'continuation option' criteria, **members** can still apply for an individual **plan**, but their existing underwriting terms are not guaranteed.

In all cases, **participants** will be subject to the terms and conditions of the individual **plan** and may incur an increase in **Takaful contribution**.

8 Making changes to your plan

During the **plan year** **you** may not make any changes to your **plan**, including any changes to **benefits**, except a change to a **participant's area of cover**. **You** may request changes to your **plan** at renewal.

If **we** accept any changes **you** request, **we'll** send **participants** a new **Takaful certificate** and a new **Participant ID card**. **We** may also change your **Takaful contributions**, taxes and **benefits** as a result.

9 How to cancel your plan

You must contact **us** if **you** want to cancel your **plan**.

The last day of cover will be the date **we** receive written confirmation of your wish to cancel, or on a future date **you** request. **You** must pay all **Takaful contribution** for the entire **plan year** and **we** won't refund any **Takaful contribution** nor pay a **claim** after **you** have cancelled your **plan**.

You're responsible for ensuring all **participants** delete and destroy their **Takaful certificates** and **Participant ID cards** on or by the last day of cover. If a **participant** obtains **treatment** after the last day of cover that **we've** paid for, **we** have the right to recover the full amount of the **claim** from **you** or that **participant**.

10 How to renew your plan

We'll contact **you** before your **plan renewal date** to discuss renewal and any changes **you** would like to make, or **we** need to make, to your **plan terms**. Once **you** agree terms with **us**, **we'll** work with **you** to formalise this in writing before the **plan renewal date**. If this happens after the **plan renewal date**, **we** may consider this a break in cover and **you'll** have to apply for a new **plan** if **you** want cover to recommence.

If a **main participant's** child is no longer eligible as a **dependant** at the **plan renewal date**, that child can apply for their own individual **plan**. As long as there is no break in their cover with **us**, **we** may continue the terms of their previous **plan**.

The extra bits

11 Definitions

Where **we** use bold words in this Plan Sponsor Guide, they have the meaning set out below. Where **we** used bold words in the rest of the **plan documents**, they will have the meaning set out in the definitions section of the Participant Handbook.

Wherever **we** use the words ‘including’, ‘include’, ‘in particular’, ‘for example’ or any similar expression, any following information is given as an example only, not a full list, and will not limit the sense of the words, description, definition, phrase or term before those words.

Add-on plan: a **plan** available in addition to the **Summit plan** that must have the same **plan start date** as the **Summit plan**.

Area of cover: the geographic area or areas of the world in which a **participant** must receive **treatment** or services for your **plan** to apply. Each **participant’s Takaful certificate** shows their **area of cover**.

Benefit: the cover provided by your **plan** and shown in the **Benefits Schedule**, subject to any conditions or exclusions in this document, the Participant Handbook or shown on the **Takaful certificate**

Benefits Schedule: the document that details the **benefits** available under your **plan**.

Continuous Transfer Terms (CTT): continuation of the same **underwriting** terms, including any special exclusions, that applied with a previous **Takaful** operator. The **participant** will not be subject to any new personal **underwriting** terms. Cover will still be governed by the **benefits**, terms and conditions of your **plan** with **us**. The **underwriting** terms with **us** can be **CTT previously MORI** or **CTT previously FMU**.

Country of residence: the country a **participant** lives in for most of the time, usually for a period of at least six months during a **plan year**.

CTT previously FMU: continuation of a **participant’s Full Medical Underwriting** terms with a previous **Takaful** operator. Cover will still be governed by the **benefits**, terms and conditions of your **plan**.

CTT previously MORI: continuation of a **participant’s moratorium** start date if they had **moratorium** underwriting terms with their previous **Takaful** operator. Cover will still be governed by the **benefits**, terms and conditions of your **plan**.

Date of joining: the date when a **participant** first enrolled, or re-enrolled if there is a break in their cover, onto your **plan**.

Dependant: a person who **we** agree meets the ‘**dependant**’ eligibility criteria described in the eligibility section of this Plan Sponsor Guide and who **we** add to your **plan**.

Employee: a person who has entered into or works under a contract of employment (whether express or implied). This does not include (i) a person who has entered into a commercial arrangement to do or personally perform any work or services and where the circumstances do not give rise to an employment relationship; or (ii) a person who is self-employed but enters into contracts to perform work or services.

End date: the last date **we** cover a **participant** under your **plan**.

Full Medical Underwriting (FMU): the process **we** use to assess a **participant’s** medical history and decide the special terms **we** offer them. Cover will still be governed by the **benefits**, terms and conditions of your **plan**.

Group Formation Proposal: the document entitled ‘Summit Group plan proposal which must be completed and signed by **you** to agree to the terms of your **plan** plus any supporting information **you** give **us** in connection with it.

Group Participant Proposal: the document entitled ‘Summit Group participant proposal which must be completed, if **we** require it, and signed by the **participant** to agree to the terms of your **plan** plus any supporting information the **participant** gives **us** in connection with it.

Main participant: a person who **we** agree meets the ‘**main participant**’ eligibility criteria set out in the eligibility section of this Plan Sponsor Guide and who **we** add to your **plan**.

Medical condition: any injury, illness or disease, or signs or symptoms of injury, illness or disease.

Medical History Disregarded (MHD): **we** will cover a **participant’s** pre-existing medical conditions, subject to the **benefits**, terms and conditions of your **plan**.

Moratorium: a waiting period of 24 months from either a **participant’s** **date of joining** or the date shown in the special terms section of a **participant’s Takaful certificate** that must have passed before that **participant** can make claims for any **pre-existing medical conditions** under your **plan**.

Participant: a main participant or **dependant** who is named on the **Takaful certificate**.

Participant ID card: a physical or virtual card **we** issue for each **participant**, which provides basic **plan** details and contact information.

Partner: a person who is in an established personal relationship with the **main participant**, and who lives with but is not married to that **main participant**.

Plan: our contract of Takaful cover with you in relation to your Summit plan and any add-on plan(s) as contained in your plan documents, unless otherwise defined in your Benefits Schedule.

Plan documents: the group quote, the Group Formation Proposal, the Group Participant Proposal (if applicable), the Takaful certificate, the Handbook, this Plan Sponsor Guide and the Benefits Schedule.

Plan renewal date: the date when a new plan year is due to begin, if you choose to renew your plan, as shown on your Takaful certificate.

Plan start date: the first day of the plan year, as shown on your Takaful certificate.

Plan year: the period of cover from the plan start date to the day before the plan renewal date, as shown on your Takaful certificate.

Start date: the first day we cover a participant under the plan during the plan year, as shown on the Takaful certificate.

Summit plan: the primary health care plan.

Takaful certificate: a document that contains a summary of plan details, including dates of cover, participant information and any special terms that apply.

Takaful contribution: the amount you have to pay for the Summit plan and any add-on plans.

Treatment: any medical or surgical service, including diagnostic tests and procedures needed to diagnose, relieve or cure a medical condition.

Underwriting: the process by which we assess risk and determine the appropriate cost of cover.

We/our/us: Al Khaleej Takaful Insurance.

You: the entity insured under the plan that has entered into the plan for participants.

12 Governing law, jurisdiction and language

The laws of Qatar govern your plan and any disputes or claims arising from or connected to them. The courts of Qatar shall have exclusive jurisdiction to settle any dispute or claim arising out of or in connection with your plan, its subject matter or formation.

Translated versions of your plan documents are for information only. If there are any wording or interpretation disputes or discrepancies, the Arabic versions will apply.

If you want to take legal action against us in relation to your plan, you must do so within six years from the date the relevant event took place, subject to applicable laws.

If we deviate from specific plan terms at any time, it won't constitute a waiver of our right to comply with or enforce those terms at any other time. This includes the payment of Takaful contributions or benefits.

13 Complaints

We strive to give you a first class experience. If there's ever a time when you feel we haven't done this, we want to know.

Please contact us with your plan number, claim number (if applicable), contact details and as much detail as possible at:

The Complaints Team
Al Khaleej Takaful Insurance
PO Box 4555
Doha
Qatar

Email: ktg@alkhaleej.com

We'll consider your complaint fairly, promptly and in accordance with relevant regulation. When we receive a complaint, we aim to resolve it by the end of the next business day. If this isn't possible, we'll acknowledge your

complaint by the end of the next business day and give you regular updates until we resolve the complaint. We'll offer our final response within eight weeks.

14 Data protection

We're committed to protecting your personal data and privacy. We'll keep any personal information confidential and process it in accordance with the relevant legislation and guidelines and our own strict internal policy.

We'll use any personal data to process your claims, administer your plan, better service our relationship with you, provide you with products and services and evaluate their effectiveness, as well as for statistical analysis.

Fraud

We may also use information to detect and prevent fraud and will pass any false or inaccurate information on to other Aetna entities, agents or others so that they may do the same. They may pass information they hold about you and participants to us for those very same reasons. We may also disclose information if we're required to do so by law enforcement or other legal agencies, governmental or judicial bodies, or to our regulators under proper authority.

Marketing

We may, from time to time, provide you and participants with marketing information about our products and services and those of any associated companies which may be of interest to you and participants. We'll give you and participants an opportunity to tell us if you or the participants prefer not to receive this information.

To help us make sure that personal information remains accurate and up-to-date, please tell us about any changes when they happen.

Contact us

For further information on our privacy policies or how we process personal data, please write to:

The Data Protection Officer
Al Khaleej Takaful Insurance
PO Box 4555
Doha
Qatar

You can find our full terms and conditions, and details of our privacy policy at www.aetnainternational.com/en/about-us/legal-notice.html.

15 Areas of cover

This is the geographic area or areas of the world in which participants must receive treatment or services for your plan to apply.

If any participant is working, residing or spending time in sanctioned countries or regions, please let us know immediately. Sanctioned countries and regions currently include Crimea (annexed region of Ukraine), Cuba, Iran, North Korea and Syria. This list is subject to change based on changes in financial sanctions regulations. In addition, there are other countries subject to less broad sanctions than the countries and regions listed here. For more information, visit www.treasury.gov/resource-center/sanctions/Pages/default.aspx.

Area 1

Includes all of the countries and territories in the world, including all countries and territories in Areas 2, 3, 4, 5, 6 and 7, plus the US

Area 2

Includes the countries and territories listed below and all countries and territories in Areas 3, 4, 5, 6 and 7

American Samoa	French Polynesia	Federated States of Nauru
Antarctica	French Southern Territories	New Caledonia
Bouvet Island	Guam	Niue
British Indian Ocean Territory	Heard Island & McDonald Islands	Norfolk Island
Canada	Hong Kong	Northern Mariana Islands
Christmas Island	Israel	Pitcairn
Cocos (Keeling) Islands	Kiribati	Russian Federation
Cook Islands	Macau	Saint Helena, Ascension & Tristan da Cunha
East Timor	Marshall Islands	
Fiji	Micronesia,	

Saint Pierre & Miquelon	South Georgia & the South Sandwich Islands	Tuvalu
Samoa	Tokelau	United States Minor Outlying Islands
Solomon Islands	Tonga	Vanuatu
		Wallis & Futuna

Area 3

Includes the country listed below and all countries and territories in Areas 4, 5, 6 and 7

China

Area 4

Includes the countries listed below and all countries and territories in Areas 5, 6 and 7

Australia	New Zealand	Singapore
Kuwait	Qatar	United Arab Emirates

Area 5

Includes the countries and territories listed below and all countries and territories in Areas 6 and 7

Åland Islands	Bahamas	Bulgaria
Albania	Barbados	Cayman Islands
Andorra	Belarus	Channel Islands
Anguilla	Belgium	Chile
Antigua & Barbuda	Belize	Colombia
Argentina	Bermuda	Costa Rica
Armenia	Bolivia	Croatia
Aruba	Bonaire, Sint Eustatius & Saba	Curaçao
Austria	Bosnia & Herzegovina	Cyprus
Azerbaijan	Brazil	Czech Republic
		Denmark

Dominica	Jamaica	Saint Lucia
Dominican Republic	Kosovo	Saint Martin
Ecuador	Latvia	Saint Vincent & the Grenadines
El Salvador	Liechtenstein	San Marino
Estonia	Lithuania	Serbia
Falkland Islands (Malvinas)	Luxembourg	Sint Maarten
Faroe Islands	Macedonia	Slovakia
Finland	Malta	Slovenia
France	Martinique	Spain
French Guiana	Mexico	Suriname
Georgia	Moldova, Republic of	Svalbard & Jan Mayen
Germany	Monaco	Sweden
Gibraltar	Montenegro	Switzerland
Greece	Montserrat	Trinidad & Tobago
Greenland	Netherlands	Turkey
Grenada	Nicaragua	Turks & Caicos Islands
Guadeloupe	Norway	Ukraine
Guatemala	Panama	United Kingdom
Guyana	Paraguay	Uruguay
Haiti	Peru	Vatican City
Honduras	Poland	Venezuela
Hungary	Portugal	Virgin Islands, British
Iceland	Puerto Rico	Virgin Islands, US
Ireland	Romania	
Isle of Man	Saint Barthélemy	
Italy	Saint Kitts & Nevis	

Area 6

Includes the countries and territories listed below and all countries and territories in Area 7

Afghanistan	Kyrgyzstan	Papua New Guinea
Bahrain	Laos	Philippines
Bangladesh	Lebanon	Saudi Arabia
Bhutan	Malaysia	South Korea
Brunei	Maldives	Sri Lanka
Cambodia	Mongolia	Taiwan
India	Myanmar	Tajikistan
Indonesia	Nepal	Thailand
Iraq	Oman	Turkmenistan
Japan	Pakistan	Uzbekistan
Jordan	Palau	Vietnam
Kazakhstan	Palestine, State of	Yemen

Area 7

Includes the countries and territories listed below only

Algeria	Gabon	Réunion
Angola	Gambia	Rwanda
Benin	Ghana	Sao Tome & Principe
Botswana	Guinea	Senegal
Burkina Faso	Guinea Bissau	Seychelles
Burundi	Kenya	Sierra Leone
Cameroon	Lesotho	Somalia
Cape Verde	Liberia	South Africa
Central African Republic	Libya	South Sudan
Chad	Madagascar	Sudan
Comoros	Malawi	Swaziland
Congo (DRC)	Mali	Tanzania
Congo-Brazzaville	Mauritania	Togo
Côte D'Ivoire	Mauritius	Tunisia
Djibouti	Mayotte	Uganda
Egypt	Morocco	Western Sahara
Equatorial Guinea	Mozambique	Zambia
Eritrea	Namibia	Zimbabwe
Ethiopia	Niger	
	Nigeria	

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