

Benefits Schedule

INTERNATIONAL HEALTHCARE PLAN — CORE

In the table below, **We** have summarised the **Benefits** applicable for this product option. All **Benefits** shown are per **Insured Person**, per **Period of Cover** (unless specifically stated).

To help you understand your **Cover**, the words and phrases that are capitalised and in bold in the **Policy Documentation** have specific meanings, and are defined in the IHP Brochure.

*Please note that this **Benefits** Schedule is not applicable to **Members** residing and/or working in the emirate of Abu Dhabi. For **Members** residing and/or working in the emirate of Abu Dhabi, kindly refer to the **Benefits** Schedule approved by Health Authorities of Abu Dhabi, which will be provided with the IHP **Member Handbook**.

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IHP Core Benefits Schedule	USD (\$)
Maximum Annual Aggregate Limit	A maximum of \$1,600,000 per Member per Period of Cover
Accidental Damage to Teeth	Full refund
Accident & Emergency Treatment Outside Area of Cover	Full refund for In-Patient Treatment Out-Patient Treatment is limited to \$500 per Medical Condition and subject to an Excess of \$80
AIDS	Up to \$10,000 per Insured Person per Period of Cover
Ancillary Charges	Up to \$1,000 per Medical Condition
Complications of Pregnancy	Full refund
Congenital Anomalies	Up to \$100,000 per Medical Condition
CT and MRI Scans	Full refund
Emergency Transportation	Full refund
Evacuation	Full refund
Evacuation - Additional Travel Expense Costs following an Evacuation to include: <ul style="list-style-type: none"> i) Travel to and from medical appointments. ii) For an accompanying person to travel to and from the Hospital to visit the Member. iii) Non-Hospital accommodation for immediate pre- and post-Hospital admission periods iv) Economy class airline ticket to return the Member and accompanying person to the Country of Residence or the country where Evacuation occurred. 	<ul style="list-style-type: none"> i) Full refund ii) Full refund iii) Up to \$150 per person per day and up to \$5,000 per person, per Evacuation iv) Full refund
Home Nursing	Full refund up to 30 days per Medical Condition
Hospital Cash	\$125 per night for a maximum of 20 nights per Medical Condition



Innocent Bystander	Up to \$50,000 per Member per incident
In-Patient Care <ul style="list-style-type: none"> i) Accommodation in a standard Private Room ii) Medical Practitioner, Specialist, Consultant and Nursing fees iii) Diagnostic and surgical procedures including pathology, x-rays iv) Drugs, Dressings and Medicines v) Appliances (devices and equipment used as an integral part of a surgical procedure) 	Full refund
In-Patient Psychiatric Treatment	Full refund (up to 30 days) per Period of Cover
Mortal Remains	\$8,500 per Insured Person
New Born Accommodation	Full refund
New Born Care	Up to \$100,000 per Insured Person per Period of Cover and to a maximum of 90 days Hospital stay
Oncology	Full refund
Organ Transplant	Full refund
Out-Patient Care <ul style="list-style-type: none"> i) Medical Practitioner, Specialist, Consultant and Nursing fees ii) Diagnostic and surgical procedures including pathology, x-rays iii) Drugs and Dressings and Appliances iv) Physiotherapy v) Alternative Treatment 	i-iv) Up to \$1,700 per Medical Condition prior to hospitalisation and up to 60 days immediately following hospitalisation v) Up to 10 sessions in aggregate per Medical Condition , and subject to the Benefit limit above
Out-Patient Surgery	Full refund
Parental Accommodation	Full refund
Reconstructive Surgery	Full refund
Rehabilitation	Full refund up to 120 days per Medical Condition

Additional Options	USD (\$)
China Private Room Restriction	Available
Extended Evacuation	Available
Hong Kong Semi-Private Room Restriction	Available
Excess Options	USD (\$)
Standard	\$0
Optional	\$1,000 or \$5,000

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