

## International Healthcare Plans

# Table of Benefits Corporate Group Schemes

Valid from 1<sup>st</sup> November 2009



The following plans are only available for corporate groups of three employees or more.

Treatment Guarantee is required for all in-patient benefits<sup>1</sup> and may be required for other benefits<sup>2</sup> as indicated in the following tables - please refer to note 2 for more information.

## Core Plans

Core Plan Benefits	Premier	Executive	Club	Classic	Essential
Maximum plan benefit £ GBP	£1,650,000	£1,100,000	£825,000	£825,000	£365,000
Maximum plan benefit €	€2,250,000	€1,500,000	€1,125,000	€1,125,000	€500,000
Maximum plan benefit US\$	\$3,150,000	\$2,100,000	\$1,600,000	\$1,600,000	\$710,000
Maximum plan benefit CHF	CHF3,375,000	CHF2,250,000	CHF1,687,500	CHF1,687,500	CHF750,000
<b>In-patient benefits<sup>1</sup> - please refer to note 2 for Treatment Guarantee</b>					
Hospital accommodation <sup>1</sup>	Private room	Private room	Semi-private room	Private room	Semi-private room
Prescription drugs and materials <sup>1</sup> (in-patient and day-care treatment only)	Full refund	Full refund	Full refund	Full refund	Full refund
Surgical fees, including anaesthesia and theatre charges <sup>1</sup>	Full refund	Full refund	Full refund	Full refund	Full refund
Physician and therapist fees <sup>1</sup> (in-patient and day-care treatment only)	Full refund	Full refund	Full refund	Full refund	Full refund
Surgical appliances and prostheses <sup>1</sup>	Full refund	Full refund	Full refund	Full refund	Full refund
Diagnostic tests <sup>1</sup> (in-patient and day-care treatment only)	Full refund	Full refund	Full refund	Full refund	Full refund
Organ transplant <sup>1</sup>	Full refund	Full refund	Full refund	Full refund	£7,330/€10,000/ \$14,000/CHF15,000
Psychiatry and psychotherapy <sup>1</sup> (in-patient and day-care treatment only) (10 month waiting period applies)	Full refund	£13,000/€17,680/ \$25,000/CHF26,520	£7,750/€10,600/ \$15,000/CHF15,900	£6,500/€8,850/ \$12,500/CHF13,275	£3,650/€5,000/ \$7,100/CHF7,500
Accommodation costs for one parent staying in hospital with an insured child under 18 <sup>1</sup>	Full refund	Full refund	Full refund	Full refund	Full refund
Emergency in-patient dental treatment	Full refund	Full refund	Full refund	Full refund	Full refund
<b>Other benefits - please refer to note 2 for Treatment Guarantee</b>					
Day-care treatment <sup>2</sup>	Full refund	Full refund	Full refund	Full refund	Full refund
Out-patient surgery <sup>2</sup>	Full refund	Full refund	Full refund	Full refund	Full refund
Nursing at home or in a convalescent home <sup>2</sup> (immediately after or instead of hospitalisation)	£3,100/€4,250/ \$6,000/CHF6,375	£2,600/€3,550/ \$5,000/CHF5,325	£2,070/€2,830/ \$4,000/CHF4,245	£1,830/€2,500/ \$3,550/CHF3,750	£1,830/€2,500/ \$3,550/CHF3,750
Rehabilitation treatment <sup>2</sup> (immediately after acute medical treatment ceases)	£3,240/€4,420/ \$6,250/CHF6,630	£2,520/€3,500/ \$4,690/CHF5,250	£2,200/€3,000/ \$4,250/CHF4,500	£1,830/€2,500/ \$3,550/CHF3,750	£1,500/€2,000/ \$2,800/CHF3,000

Continued overleaf

Core Plan Benefits (continued)	Premier	Executive	Club	Classic	Essential
Local ambulance	Full refund	Full refund	Full refund	Full refund	£365/€500/ \$710/CHF750
Emergency treatment outside area of cover (for trips of a maximum period of six weeks)	Full refund, max. 42 days	Full refund, max. 42 days	Full refund, max. 42 days	Full refund, max. 42 days	Up to £7,330/ €10,000/\$14,000/ CHF15,000, max. 42 days
Medical evacuation <sup>2</sup>	Full refund	Full refund	Full refund	Full refund	Full refund
Expenses for one person accompanying an evacuated/ repatriated person <sup>2</sup>	£2,200/€3,000/ \$4,250/CHF4,500	£2,200/€3,000/ \$4,250/CHF4,500	£2,200/€3,000/ \$4,250/CHF4,500	£2,200/€3,000/ \$4,250/CHF4,500	£2,200/€3,000/ \$4,250/CHF4,500
Repatriation of mortal remains <sup>2</sup>	£7,330/€10,000/ \$14,000/CHF15,000	£7,330/€10,000/ \$14,000/CHF15,000	£7,330/€10,000/ \$14,000/CHF15,000	£7,330/€10,000/ \$14,000/CHF15,000	£7,330/€10,000/ \$14,000/CHF15,000
CT scans (in-patient and out-patient treatment)	Full refund	Full refund	Full refund	Full refund	Full refund
MRI, PET and CT-PET scans <sup>2</sup> (in-patient and out-patient treatment)	Full refund	Full refund	Full refund	Full refund	Full refund
Oncology <sup>2</sup> (in-patient and out-patient treatment)	Full refund	Full refund	Full refund	Full refund	Full refund
Routine maternity <sup>2</sup> (in-patient and out-patient treatment) (10 month waiting period applies)	Full refund	£4,400/€6,000/ \$8,500/CHF9,000 per pregnancy	Full refund	N/A	N/A
Complications of pregnancy and childbirth <sup>2</sup> (10 month waiting period applies)	Full refund	Full refund	Full refund	Full refund	N/A
Home delivery	£730/€1,000/ \$1,400/CHF1,500	N/A	N/A	N/A	N/A
In-patient cash benefit (per night) (where treatment has been received free of charge)	£110/€150/ \$210/CHF225, max. 25 nights	£110/€150/ \$210/CHF225, max. 25 nights	£110/€150/ \$210/CHF225, max. 25 nights	£110/€150/ \$210/CHF225, max. 25 nights	£110/€150/ \$210/CHF225, max. 25 nights
Emergency out-patient treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Out-patient Plan)	£550/€750/ \$1,050/CHF1,125	£550/€750/ \$1,050/CHF1,125	£550/€750/ \$1,050/CHF1,125	£550/€750/ \$1,050/CHF1,125	N/A
Emergency out-patient dental treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Dental Plan)	£550/€750/ \$1,050/CHF1,125	£550/€750/ \$1,050/CHF1,125	N/A	N/A	N/A
Palliative care and long term care <sup>2</sup>	Full refund, max. 30 days per lifetime	Full refund, max. 30 days per lifetime	Full refund, max. 30 days per lifetime	Full refund, max. 30 days per lifetime	Full refund, max. 30 days per lifetime
Death benefit (in the event of death by accident or sickness) (for insured members aged 18 to 70) (12 month waiting period applies regarding death due to sickness)	£7,330/€10,000/ \$14,000/CHF15,000	N/A	N/A	N/A	N/A

<sup>1</sup>If Treatment Guarantee is not obtained for the benefits listed with a **1**, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only **80%** of the eligible benefits.

<sup>2</sup>If Treatment Guarantee is not obtained for the benefits listed with a **2**, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only **50%** of the eligible benefits.

# Out-patient Plans and Deductibles

The following are the optional Out-patient Plan deductibles payable per person per Insurance Year. To reduce your Out-patient Plan premium, select a deductible from the list below and read across to find the relevant premium discount. Our premiums are expressed in whole numbers (i.e. without any cents or pence etc.), so please note that percentages may be slightly higher or lower than those stated.

Optional Out-patient Plan Deductibles	Discount
No deductible	0% premium discount
£75/€100/\$140/CHF150 deductible	10% premium discount
£150/€200/\$280/CHF300 deductible	20% premium discount
£365/€500/\$710/CHF750 deductible	45% premium discount
£730/€1,000/\$1,400/CHF1,500 deductible	70% premium discount

The following Out-patient Plans can be purchased with any of the Core Plans. They cannot be bought separately.

Out-patient Plan Benefits	Gold	Silver	Bronze	Crystal
Maximum plan benefit	No limit	£6,600/€9,000/ \$12,700/CHF13,500	£3,300/€4,500/ \$6,350/CHF6,750	£1,830/€2,500/ \$3,550/CHF3,750
<b>Out-patient benefits</b>				
Medical practitioner fees and prescription drugs	Full refund	Full refund	£730/€1,000/ \$1,400/CHF1,500*	£730/€1,000/ \$1,400/CHF1,500
Specialist fees	Full refund	Full refund	Full refund	Full refund
Diagnostic tests	Full refund	Full refund	Full refund	Full refund
Vaccinations	Full refund	Full refund	Full refund	N/A
Chiropractic treatment, osteopathy, homeopathy, Chinese herbal medicine and acupuncture (max. 12 sessions per condition for chiropractic treatment and max. 12 sessions per condition for osteopathic treatment, subject to the benefit limit)	Full refund	Full refund	£825/€1,125/ \$1,600/CHF1,688	£365/€500/ \$710/CHF750
Prescribed physiotherapy, speech therapy, oculomotor therapy and occupational therapy <sup>2</sup>	Full refund	Full refund	£825/€1,125/ \$1,600/CHF1,688	£365/€500/ \$710/CHF750
Routine health checks including cancer screening	£585/€800/ \$1,125/CHF1,200	£440/€600/ \$850/CHF900	N/A	N/A
Infertility treatment (18 month waiting period applies)	£8,800/€12,000/ \$17,000/CHF18,000 per lifetime	£8,800/€12,000/ \$17,000/CHF18,000 per lifetime	N/A	N/A
Psychiatry and psychotherapy (18 month waiting period applies)	30 visits	20 visits	N/A	N/A
Prescribed medical aids	Full refund	£1,830/€2,500/ \$3,550/CHF3,750	N/A	N/A
Prescribed glasses and contact lenses	£150/€200/ \$280/CHF300	£130/€180/ \$250/CHF270	N/A	N/A
*This benefit amount is payable in addition to the maximum plan benefit amount.				

# Dental Plans

The following Dental Plans can be purchased with any of the Core Plans. They cannot be bought separately.

Dental Plan Benefits	Dental 1	Dental 2
Maximum plan benefit	No limit	£1,530/€2,050/\$2,875/CHF3,075
<b>Reimbursement</b>		
Dental treatment	100% refund	80% refund
Dental surgery	100% refund	80% refund
Periodontics	80% refund	80% refund
Orthodontic treatment and dental prostheses (10 month waiting period applies)	65% refund, up to £3,650/€5,000/\$7,100/CHF7,500	50% refund

# Repatriation Plan

The following plan can be purchased with any of the Core Plans. It cannot be bought separately.

Repatriation Plan Benefit	
Medical repatriation <sup>2</sup>	Full refund

# Notes

## 1. Area of cover

Allianz Worldwide Care offers a range of options in relation to geographical cover. The chosen area of cover will be specified in the Insurance Certificate.

## 2. Treatment Guarantee

Certain treatments and costs require submission of a Treatment Guarantee Form in advance. Following approval by Allianz Worldwide Care, cover for these required treatments or costs can then be guaranteed. In the Table of Benefits, benefits which require pre-approval through submission of a Treatment Guarantee Form are indicated by either a 1 or a 2. These benefits are listed below, along with further important details:

- All in-patient benefits as listed<sup>1</sup>
- Day-care treatment<sup>2</sup>
- Out-patient surgery<sup>2</sup>
- MRI<sup>2</sup> (Magnetic Resonance Imaging), PET<sup>2</sup> (Positron Emission Tomography) and CT-PET<sup>2</sup> scans
- Nursing at home or in a convalescent home<sup>2</sup>
- Routine maternity<sup>2</sup> and complications of pregnancy and childbirth<sup>2</sup> (in-patient treatment only)
- Oncology<sup>2</sup> (in-patient and day-care treatment only)
- Occupational therapy<sup>2</sup> (out-patient treatment only)
- Rehabilitation treatment<sup>2</sup>
- Medical evacuation<sup>2</sup> (or repatriation where covered)
- Repatriation of mortal remains<sup>2</sup>
- Expenses for one person accompanying an evacuated/repatriated person<sup>2</sup>
- Palliative care and long term care<sup>2</sup>

<sup>1</sup> If Treatment Guarantee is not obtained for the benefits listed with a **1**, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only **80%** of the eligible benefits.

<sup>2</sup> If Treatment Guarantee is not obtained for the benefits listed with a **2**, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only **50%** of the eligible benefits.

We should be contacted at least five working days before receiving treatment, so that we can ensure that there will be no delays at the time of admission. This will ensure that members have cashless access to hospitals for in-patient treatment, where possible, as well as providing the advantage of treatment being overseen by our medical professionals.

In the case of an emergency, we should be informed within 48 hours of the event to ensure that no Treatment Guarantee penalty will apply to the claim.

## 3. Claims process and turnaround

Allianz Worldwide Care has a simple claiming process in place to ensure that members can seek reimbursement for medical expenses.

Fully completed Claim Forms are processed and payment instructions issued to the member's bank **within 48 hours**. Where further information is required to complete the claim, the member/medical practitioner will automatically be notified by email or mail within 24 hours of receipt of the Claim Form. An email is sent automatically to the member (where email addresses are provided to us) to advise them when the claim is received and when it is processed.

This swift claims processing policy ensures that our members receive their claims payment in the most effective and efficient manner.

## 4. Benefit limits

There are two kinds of benefit limits shown in the Table of Benefits. The **maximum plan benefit**, which applies to certain plans, is the maximum we will pay for all benefits in total, per member, per Insurance Year, under that particular plan. Some benefits also have a **specific benefit limit** which is applied separately, for example "Nursing at home or in a convalescent home". Specific benefit limits may be provided on a "per Insurance Year" basis, a "per lifetime" basis or on a "per event" basis, such as per trip, per visit or per pregnancy. In some instances we will pay a percentage of the costs for the specific benefit e.g. "65% refund, up to £3,650/€5,000/\$7,100/CHF7,500". Where the term "Full refund" appears next to certain benefits, please note that this refund is subject to the maximum plan benefit, if one applies to your plan(s).

## 5. Policy terms and conditions

Please note that cover for smaller groups is subject to underwriting i.e. cover may be excluded for pre-existing conditions, or a higher premium rate may apply to reflect the higher risk due to pre-existing medical conditions or additional risk factors. Cover is conditional upon acceptance of your application, which is only confirmed when an Insurance Certificate is provided. This Table of Benefits provides an outline of the cover we provide under each plan. Cover is subject to our policy terms and conditions, as detailed in our Employee Benefit Guide, which is issued to members upon policy inception. Our Employee Benefit Guide can also be downloaded from our website [www.allianzworldwidecare.com](http://www.allianzworldwidecare.com).

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If you have any queries, please do not hesitate to contact us:

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