

Benefits and Limits are per beneficiary and per year. They are expressed on a usual, customary, and reasonable basis.

| BENEFITS   | REFUND &LIMITS                           |
|--|--|
| In-patient and Day-case Treatment  | 100%                                     |
| Any private Hospital or Clinic accommodation in private room                                   | 100%                                     |
| Surgical operations including post-operative care  | 100%, up to 3 months post-operative care |
| Surgical appliances and prosthetic implants  | 100%                                     |
| Drugs and materials, including surgical dressings  | 100%                                     |
| Physician and therapist fees   | 100%                                     |
| Theatre charges & Anaesthesia  | 100%                                     |
| Intensive & Critical Care, Intensive Treatment & Therapy                                       | 100%                                     |
| Coronary care and High Dependency Unit   | 100%                                     |
| Pathology X-rays, Diagnostics test   | 100%                                     |
| Advanced diagnostic tests (CT, MRI scans)  | 100%                                     |
| Advanced diagnostic tests (PET and CT-PET scans)   | 100%                                     |
| Reconstructive surgeries to restore appearance after an accident                               | 100%                                     |
| Reconstructive surgeries to restore appearance after a surgery                                 | 100%                                     |
| Accommodation cost for one parent staying in hospital with an insured child under 12 years old | 100%                                     |
| Outpatient - Medical Treatment   | 000/                                     |
| Day-care treatment and out-patient surgical operations   | 90%                                      |
| General practitioner fees including costs for family doctor and specialist                     | 90%                                      |
| Prescribed drugs and dressings   | 90%                                      |
| Pathology X-rays and diagnostic tests  | 90%, pre-approval required               |
| Advanced diagnostic tests (CT, MRI scans)  | 90%, pre-approval required               |
| Advanced diagnostic tests (PET and CT-PET scans)   | 90%, pre-approval required               |
| Cancer and Oncology Therapy  | 1000/                                    |
| In- & day-patient treatment  | 100%                                     |
| Related out-patient treatment  | 90%                                      |
| Organ, Bone marrow, Tissue transplants   | 10001                                    |
| In-& day-patient treatment   | 100%                                     |
| Related out-patient treatment required prior to and after transplants                          | 90%                                      |
| Kidney and Renal Dialysis  |  |
| In-& day-patient treatment   | 100%                                     |
| Related out-patient treatment required prior to and after transplants                          | 90%                                      |
| Hospice and Palliative care  |  |
| In-& day-patient treatment   | 100%                                     |
| Related out-patient treatment  | 90%                                      |

The annual refund limit per beneficiary per year is EUR 1'000'000

## **CLASSIC**



Benefits and Limits are per beneficiary and per year. They are expressed on a usual, customary, and reasonable basis.

| BENEFITS   | REFUND &LIMITS                                    |
|--|---|
| Further Benefits   |   |
| Pre-existing chronic conditions, (applicable after 12 months)  | 100%, up to EUR 3'000 lifetime                    |
| Pre-existing medical conditions, (applicable after 12 months)  | 100%, up to EUR 3'000 per year                    |
| Rehabilitation Treatment (Maximum 60 days)   | 100%  |
| Hormone Replacement Therapy  | 90%   |
| Local Road Ambulance / Local Air Ambulance   | 100%  |
| Preventive Medicine  |   |
| Prescribed vaccinations, Inoculations & preventive drugs   | 100% refund if prescribed, up to EUR 200 per year |
| Health check-up, including analysis and screening for early detection of illness or disease, applicable after 6 months | 100%, up to EUR 300 once a year                   |
| Alternative Medicine   | Overall limit up to 5 sessions per year           |
| Chiropractic, Osteopathy, Physiotherapy  | 100%, up to EUR 50 per session                    |
| Acupuncture, Homeopathy, Traditional Chinese Medicine  | 100%, up to EUR 50 per session                    |
| Maternity  |   |
| Routine maternity (in-patient and out-patient treatment)   | 100%, up to EUR 3'500                             |
| Complications of pregnancy (in-patient and out-patient treatment)  | 100%, up to EUR 1'000'000                         |
| Complications of childbirth (in-patient treatment)   | 100%, up to EUR 1'000'000                         |
| New-born care (up to 14 days before being named)   | 100%, up to EUR 7'500                             |
| Optical Care   |   |
| Physician fees, Visits & optical care  | 90%   |
| Frame / contact lenses   | 100%, up to EUR 350 per year                      |
| Dental Care  |   |
| Dental treatment and Dental surgery  | Not covered                                       |
| Dental prosthesis  | Not covered                                       |
| Orthodontic treatment (must begin before the age of 18)  | Not covered                                       |
| Accident-related dental treatment (in-patient and out-patient)   | 100%, up to EUR 1'000'000                         |
| Life insurance   |   |
| Death benefit maximum  | EUR 10'000  |
| Emergency Evacuation   |   |
| Medical evacuation   | 100%  |
| Emergency treatment outside area of cover  | 100%, up to 30 days per year                      |
| Return airfare to country of residence   | 100%  |
| Expenses for one person accompanying an evacuated person   | 100%  |
| Travel costs of one insured family member in the event of an evacuation  | 100%  |
| Travel costs of one insured family member for the repatriation of mortal remains                                       | 100%  |
| Repatriation of mortal remains   | 100% up to EUR 300                                |
| Local burial or cremation  | 100% up to EUR 1'000                              |
| Treatment arising directly or indirectly as a consequence of war or terrorism, provided you are an innocent bystander  | 100%, upto EUR 40'000                             |
| Accidental death (Costs of repatriation or burial of remains only)   | 100%  |
| TI 1 6 11 11 11 11 11 11 11 11 11 11 11 11   |   |

The annual refund limit per beneficiary per year is EUR 1'000'000