

GLOBALHEALTH PLANS – BENEFITS

	Level 1	Level 2	Level 3
Overall annual limit	£500,000/€750,000/US\$1,000,000	£750,000/€1,125,000/US\$1,406,250	£2,000,000/€3,000,000/US\$3,750,000
In-patient and day-patient treatment			
Accommodation	Full refund	Full refund	Full refund
Specialists (incl. Physicians, Surgeons and Anaesthetists)	Full refund	Full refund	Full refund
Diagnostics and Physiotherapy	Full refund	Full refund	Full refund
Cash Benefit	£75/€125/US\$160 per night as an in-patient	£75/€125/US\$160 per night as an in-patient	£100/€150/US\$190 per night as an in-patient
Road Ambulance	£150/€225/US\$285	£200/€300/US\$375	£250/€375/US\$470
Parent Accommodation for child under 18	Full refund	Full refund	Full refund
Home Nursing	Not covered	14 days	30 days
Psychiatric	Not covered	14 days	30 days
Organ Transplants	Not covered	£100,000/€150,000/US\$187,500	£100,000/€150,000/US\$187,500
Chronic Conditions – Acute phases of a chronic condition diagnosed after inception date of the policy	Full refund	Full refund	Full refund
Routine management of a chronic condition after inception date of the policy	Not covered	Not covered	£5,000/€7,500/US\$9,375 in-patient treatment and £1,500/€2,250/US\$2,812 out-patient treatment (per annum combined) with a maximum of £25,000/€37,500/US\$46,875 lifetime limit
HIV/AIDS Cover (after 2 years continuous membership for conditions newly diagnosed after the inception date of the policy)	Not covered	Not covered	£5,000/€7,500/US\$9,375 per annum with a maximum of £25,000/€37,500/US\$46,875 lifetime limit
Oncology			
Radio and Chemotherapy	Full refund	Full refund	Full refund
Physicians and Specialists	Full refund	Full refund	Full refund
Out-patient treatment			
Annual limit per person	Not covered (except Surgical Intervention)	£5,000/€7,500/US\$9,375 subject to any applicable excess per claim	Full refund subject to any applicable excess per claim
GP and Specialists fees	Not covered	Full refund	Full refund
Routine Health Checks (after 2 years continuous membership)	Not covered	£250/€375/US\$470	£500/€750/US\$940 – with the additional sub-limits as follows: Hearing test £100/€150/US\$190 Vaccinations £100/€150/US\$190
Prescription Drugs and Dressings	Not covered	Up to a max of £100/€150/US\$190	Up to a max of £500/€750/US\$940
Diagnostics and Prescribed Physiotherapy	Not covered	Full refund	Full refund
Surgical Intervention	Full refund	Full refund	Full refund
Complementary Medicine	Not covered	Not covered	Up to a max of £500/€750/US\$940 per annum
Out-patient Psychiatric	Not covered	Not covered	20 sessions up to a maximum of £7,000/€10,500/US\$13,125

Treatment outside AREA of cover			
Maximum Medical Limit	Up to a maximum of £10,000/€15,000/US\$18,750	Up to a maximum of £20,000/€30,000/US\$37,500	Up to a maximum of £50,000/€75,000/US\$93,750
Routine Maternity	Level 1	Level 2	Level 3
After 12 months membership	Not covered	Not covered	Up to a maximum of £5000/€7,500/US\$9,375
Complicated Maternity			
After 12 months membership	£10,000/€15,000/US\$18,750	£10,000/€15,000/US\$18,750	£10,000/€15,000/US\$18,750
Premature Birth Benefit	Not covered	Not covered	20 days hospitalisation immediately after birth for a baby added to mother's policy born prior to 37 weeks - max £20,000/€30,000/US\$37,500
Emergency Dental Treatment			
	Not covered	Not covered	Up to a maximum of £1000/€1,500/US\$1,875
Routine Dental Treatment			
After 6 months membership	Not covered	Not covered	Up to a maximum of £750/€1,125/US\$1,406 subject to a 10% co-insurance per claim and the following sub-limits: <ul style="list-style-type: none"> • Routine examination -£80/€120/US\$150 - 2 per year; • Cleaning & polishing - £80/€120/US\$150 - 2 per year; • Fillings - £80/€120/US\$150 - each tooth; • Extractions - £80/€120/US\$150 - each tooth; • Wisdom tooth extraction - £225/€338 US\$420 - each tooth; • Porcelain crown or inlay; Root canal; New bridge - £250/€375/US\$465 - each tooth; • Repair of crown or inlay - £150/€225/US\$280 - each tooth; • Repair of bridge - £175/€260/US\$325 - each tooth
Optical Treatment			
	Not covered	Not covered	Up to maximum of £500/€750/US\$940
Home Country Cover			
	Level 1	Level 2	Level 3
Where home country falls within area of cover (except US and Canadian Nationals)	No restrictions	No restrictions	No restrictions
Where home country falls outside area of cover (except US and Canadian Nationals)	90 days	90 days	90 days
US and Canadian Nationals (must select AREA 3 worldwide)	120 days per annum with annual maximum limit of £50,000/€75,000/US\$93,750	120 days per annum with annual maximum limit of £50,000/€75,000/US\$93,750	120 days per annum with annual maximum limit of £50,000/€75,000/US\$93,750
Evacuation and Repatriation			
Evacuation, Repatriation, Transport of mortal remains	Up to a maximum of £30,000/€45,000/US\$56,250	Up to maximum of £50,000/€75,000/US\$93,750	Full refund
Per Out-patient Claim Excess Alternative			
NOTE: The excess applies to all out-patient treatment except Routine Health checks. The excess options are not available on Level 1 cover.			
Nil Excess +20%	£40/€60/\$75 Excess Standard	£50/€75/\$95 Excess -10%	£100/€150/\$190 Excess -15%
£250/€375/\$470 Excess -20%	£500/€750/\$950 Excess -25%	£1000/€1500/\$1875 Excess -30%	£2500/€3750/\$4600 Excess -45%