



WorldCare Explained







Now Health International

Our promise to our customers is in our name: 'Now' is clear, innovative and accessible. This means clear, relevant information, easy-to-use online tools and fast service from people who respect your time. Our products are designed to be comprehensive and benefit rich.

Now Health International is a global business with its headquarters in Hong Kong and regional service centres in Hong Kong, Shanghai, Dubai, the United Kingdom, Singapore, Jakarta, Matla and Spain.

In July 2015, Now Health's investor acquired Best Doctors Insurance, a major medical insurance provider with distribution throughout Latin America, the Caribbean and Canada.

The combination of the two businesses creates one of the largest providers of high-end international private medical insurance globally, with 16 sales/service offices, 125,000+ members, 407 staff and 5,000+ distribution partners.

Best Doctors Insurance

Best Doctors Insurance is the leading international health insurance company in Latin America, the Caribbean and Canada. At Best Doctors Insurance we have a clear vision: to help our members connect with the very best healthcare, with access to the best-quality hospitals and specialised centers around the world.

Best Doctors Insurance offers top-quality medical insurance plans; each carefully designed to deliver a full range of exclusive benefits and services for our members. The result?

Our members can be certain they have the best health insurance plan that will help them, not only by paying the medical expenses but also guiding them through the complexities of the health care system when they need medical care.



125,000+
Members







Our Global Presence

Our main markets are Asia Pacific, Canada, Caribbean, United Kingdom, Europe, Latin America and the Middle East, offering personalised customer service from our 16 offices around the globe.



Our Awards

Our ongoing commitment to top-end products and service has won us a number of awards for international health insurance. Our award winning innovative service proposition provides you with peace of mind that we will deliver a fast, accurate service when you need it most. Digital tools such as our smartphone App also make it even simpler and quicker to submit claims or find a medical provider, creating an exceptional customer experience.

We are proud of our recognition from the worldwide medical insurance industry and continue to improve and develop our offer, to ensure we retain our position as the leading innovator in international health insurance.

Our Insurance Partner

Established in 1944 and present across nine Arab countries, Arabia Insurance Company S.A.L. owes its strength to 75 years of regional expertise, locally customised solutions, and a key focus on customer centricity to meet customers' evolving needs. Arabia Insurance Company S.A.L. has drawn its objectives over-delivering adequate coverage, proper and prompt claims handling, product development and the latest technical updating. The core of Arabia's success lies in understanding individual needs and maintaining a close relationship with customers.



































Our Promise to Members

Service Promise

Your employees time is precious. We understand you need to know how quickly we will handle your requests. That's why we've made six promises about how fast we can deliver key services, to provide you with peace of mind. These are:





Fast Claims Processing

We commit to processing your claims quickly. Providing we have all the information we need, we aim to process eligible claims within five working days





Accessing Medical Care

If you need to access medical care that needs to be pre-authorised, we will place guarantees of payment with medical providers within two working days, so you can access treatment as quickly as possible





24/7 Customer Service

Our 24/7 customer service teams understand your priorities and respect your time. We respond to all enquiries within one working day





Quick Underwriting Decisions

When you apply for your plan, we will respond to all our underwriting-referred business within two working days, so you receive a decision as quickly as possible





Plan documents

When you buy your plan, you can use your secure online portfolio to view and download plan document





Go Paper-free

You can use your secure online portfolio to download your membership card and add it to your smartphone wallet

Why Choose Us?

With us, it's easy to get immediate access to top-quality healthcare anywhere in the world.

We make it simple to choose the right cover and access the best medical care for you and your employees.



Secure

Reinsured by the financial strength of RGA, a global reinsurance leader in financial protection and the third largest reinsurer in the life and health sector worldwide, operating in 26 countries around the world, delivering expert solutions in individual group life and health reinsurance



Fast

Our quick and simple claims process means your employees can use our smartphone App, website or email us all their claims for fast reimbursement



Service Excellence

Our peerless customer experience is delivered via a unique set of service promises which set out how fast we will complete important tasks like processing claims



Experienced

We are international health insurance experts. Our senior management team has over 200-years combined experience and >10% employees are medically trained



Comprehensive

WorldCare is one of the most comprehensive, benefit-rich products in the international health insurance market today



Always on

Your employees can access our customer service teams 24-hours a day, 365-days a year



Innovative

Our state-of-the-art website provides instant access to plan documents, management information and claims tracking information



Access

Our worldwide network of medical providers offers access to healthcare without your employees having to pay up-front



Transparent

We operate an up-front approach to underwriting which means that all our members know exactly what they're covered for and what they're not



Global

Now Health's local service offices in Asia Pacific, the Middle East, Europe and the Americas offer a truly worldwide service



Wellness

Our preventive care additional option means your employees can look after their future health too

Our Added Value Services

Support to stay well and support when Your employees need it

At Now Health we think it's important to support your employees with their overall health and wellbeing. That's why we offer a range of added value services in addition to your core plan protection, so you know we're there for your employees, every step of the way.



Second Medical Opinion

Why: A second medical opinion can help provide reassurance, particularly for those who are uncertain about their diagnosis, have a complex condition, or are unsure about what treatment plan to choose.

What: Leveraging our extensive network of medical experts worldwide, we provide your employees with a second medical opinion service to help ensure they get the right diagnosis and the right treatment.

Members can access this service for both acute and long term conditions, and in most cases the second medical opinion will be delivered within a matter of days.

How: Employees simply contact their local Customer Service team to use this service. CustomerService@now-health.com



Global Concierge Service

Why: As an international health insurance provider, we recognise that many of our members may choose to seek treatment overseas, away from their home country.

What: To help make this process easier for your employees, we provide concierge support to help them manage the process. This includes:

- Recommending where to get treatment
- Support to book medical appointments
- Appointment reminders
- Placing guarantees of payment with the hospital, including in an emergency, so your employees don't need to pay up front
- Support with arranging medical visas as and when required

How: Employees simply contact their local Customer Service team to use this service. CustomerService@now-health.com



EAP (For SME Clients Only)

Why: At Now Health International we believe that mental health and well-being are integral components of your overall health. That's why we offer an Employee Assistance Programme (EAP) as an additional level of support to our SME clients, helping employees and their families to cope with real-life challenges and proactively manage their well-being.

What: The confidential EAP service is provided by LifeWorks (TELUS). The service includes:

- Immediate support by phone from specialised professionals in counselling, social work, psychology or human services, available 24/7 in multiple languages
- Each member is eligible for 5 sessions of short-term counselling per plan year
- Clients can also access a range of health and wellness advice via the EAP portal and App

How: Once you purchase your plan, eligible members can access this free service by logging into the <u>LifeWorks Portal</u> or App.

* Please note the EAP service is only available to our SME members (i.e. those on a company plan with 99 employees or less) with one of our enhanced WorldCare plans.



Pharmacy Delivery Service

We understand you need to receive your medication in a timely manner and have designed a simple process to help achieve this.

- ✓ You call our 24/7 Customer Service team with your existing prescription to request our Pharmacy Delivery Service at least seven days before you need the medicine
- If you require a refill prescription, a teleconsultation or a doctor home-visit can be arranged so you do not need to visit a doctor
- Once the pharmacy verifies your prescription, they will contact you to arrange delivery
- The pharmacy confirms delivery to us, and we'll pay the relevant cost of medication covered under your health insurance plan. If co-pay is applicable, you will need to pay via card or cash when your prescription is delivered

Our Digital Tools

Our Website

Manage your company plan online

The Now Health International website is designed to make it simpler to manage your international health insurance from accessing your plan documents to tracking your claims.

Members can access their information at any time with Now Health as all your details are stored in your secure online portfolio, which you can access 24-hours a day from anywhere in the world.

You can view and download all your group plan documents from here, including the certificate of insurance, group agreement, members' handbook and any form you might need. You can add and delete employees, order replacement membership cards for your staff and track all claims activity on your plan. Our complete online solution means that you can choose to go paper-free, although you can always request to receive your documents by post if you prefer.

Online management reporting

We prepare regular management reports about your plan so you always have an up to date view of how your plan is running, including a statement of account, claims summary and a membership list.

Designed for your employees

Our intuitive online tools are designed to make it easier for your employees to use their plan too. Each employee gets their own secure online portfolio where they can view and download their plan documents and track the status of their claims.



Our Smartphone App

Our smartphone App let's you claim and find doctors at the touch of a button. You can access thousands of medical professionals worldwide and enjoy quick and easy claims handling.

Our Mobile Pass

- Instantly access key plan information on your smartphone, including your plan type, expiry date and whether any Annual Deductible applies
- · Get in touch with us via the click to call feature
- · Validate your cover when seeking medical treatment in our network
- Access your secure online portfolio to submit claims, pre-authorisation requests and more!
- · Available for both iPhone and Android wallet



Our Mobile Pass

Our secure online portfolio is designed to make it easy to access all your plan information in just a few clicks. You can use secure online portfolio to download membership card and add it to smartphone wallet.

We work closely with the medical providers in our network so they recognise your Now Health card. Any out-patient benefits you have selected will be clearly labelled on the card.

On the Card front



- · Plan name and option
- · Membership number
- In/Day-Patient Deductible
- · Out-Patient Co-Insurance
- Direct Billing
- · A barcode for medical providers

On the Card back

VALIDATE MY PLAN

Name: Sara Mirae
NH Membership Number: MEFNCAD1234567
DHA Member ID: 012-123-123456789-01
Start Date: 23-MAY-23
Expiry Date: 22-MAY-24
In/Day-Patient Deductible: USD 0
Out-Patient Co-Insurance: Nil%
Direct Billing: - Out-Patient & In/Day-Patient
- Maternity Nil Co-Insurance
Area Of Cover: Worldwide Excluding USA
Network:

Group Name: N/A

View your full plan benefits. Tap here to log into your portfolio and select 'My Plan'.

SUBMIT CLAIM
Use the app button at the top of the pass to use the mobile app.

Tap here to log in to your portfolio.

TRACK YOUR CLAIMS
Tap here to log into your portfolio and select 'My
Claims'

HOW TO REACH US

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INSURANCE DETAILS
This plan is insured by Arabia Insurance Company
S.A.L.

Please present this card to your medical provider as evidence of your cover with us.

This membership card is the property of Arabia Insurance Company and will be voided if your cover stops mid-way through a plan year.

LATEST NEWS

SAMPLE

Tap here to find out the latest news from us.
Tap here to read our blog.
Tap here to watch our explainer videos.

- Member name
- · Membership number
- Start Date
- Expiry Date
- Plan information
- · Submit claim
- · Track your claims
- Customer Service
- 24-HOUR Emergency Assistance
- Mailing address
- Insurance details
- · Latest news

How to Use Your Company Plan

When you need to use your company plan, we've designed the process to be as straightforward as possible.

When your employees need out-patient treatment

If you select a plan that includes out-patient treatment, you can go to any medical practitioner, pay for your treatment and claim back your expenses. You won't have to pay anything if you have access to our Out-Patient Direct Billing Network. You can find a medical provider in our network from www.now-health.com or download our smartphone App.

When your employees need in-patient or day-patient treatment

If your employees need to be admitted to hospital for day-patient or in-patient treatment, contact us and we will place a guarantee of payment with the medical provider so you don't need to pay anything. We aim to do this within two working days of your employee's call.

When your employees need preventive care

If you select one of our wellness additional options, your employees will be able to access screening, optical and vaccination benefits to safeguard you and your employee's future health.

Accessing help

Our customer service teams around the world are accessible 24-hours a day, 365-days a year. This service is available to you no matter where you are in the world, no matter of what time of day it is. They are on hand to answer any question about your plan, benefits, claims or if you have an emergency and need immediate help.

▶ How to Claim

If your employees have accessed treatment within our out-patient direct billing network or if we've placed a guarantee of payment for them, there's no need to do anything further.

If your employees have had to pay and claim, we will process their eligible claims within *five working days or less*.

Your employees can track the status of all their claims in their secure online portfolio. We will email and SMS them updates as they happen.

All out-patient claims, and all in/day-patient claims

under USD 500 per medical condition

Employees can claim online using our secure online portfolio or smartphone App.

Alternatively, if you prefer an offline solution you can email, post or fax us the front of the claim form and your scanned receipts.



All in/day-patient claims

over USD 500 per medical condition

Complete the front of the claim form and ask your medical practitioner to complete the back of the form.

Upload it using our secure online portfolio, or email or fax it to us with your scanned receipts,

diagnostic reports and/or discharge reports.











▶ Introducing WorldCare

WorldCare is one of the most comprehensive, benefit-rich products in the international health insurance market today. There are four levels available: Essential, Advance, Excel and Apex. This means you can select the level of cover you prefer to suit your lifestyle, from basic medical treatment, to a more comprehensive package.

WorldCare

WorldCare Essential

is the most affordable package for people who want to be sure they can access in-patient and day-patient hospital care when they need it, while minimising their health insurance costs.

WorldCare Excel

covers you at higher benefit levels than Advance for in-patient, day-patient and out-patient treatment and includes routine and complex dental care.

WorldCare Advance

covers you for all-round medical care for in-patient, day-patient treatment and out-patient care including GP and specialist appointments, physiotherapy and alternative therapies.

WorldCare Apex

is the highest level of cover.
With very high benefit limits,
it includes in-patient, day-patient, out-patient,
routine and complex dental treatment,
and routine maternity care.

You can shape the cover you want by adding the following options providing a more comprehensive package for your employees.

See how you can take advantage of your WorldCare plan today!

- We also have a range of annual In and Day-Patient Deductibles to suit your lifestyle. Deductibles give you greater flexibility to tailor your plan to your needs – from a high deductible to reduce your premium, to a low or nil deductible if you expect to use your plan frequently.§
- If you choose an optional Deductible, on WorldCare Advance, WorldCare Excel or WorldCare Apex, you must also select a Co-Insurance Out-Patient Treatment option or an Out-Patient Per Visit Excess option. On WorldCare Essential if you choose an optional Deductible and an Out-Patient Charges option, you must also select a Co-Insurance Out-Patient Treatment option.#
- You can have an Out-Patient Per Visit Excess of either USD 25 or USD 15 per visit to an out-patient medical practitioner*
- Choose the Co-Insurance Out-Patient Treatment option – pay either 10% or 20% of your out-patient treatment. There is a premium discount associated with this option based on the co-insurance you have selected.#



- Select Extended Evacuation and Repatriation and select USA Elective Treatment to give you greater peace of mind if you need to travel abroad.
- Opt for our Restricted Network option[∅] –
 No Benefit will be payable in respect of costs
 associated with Eligible In-Patient, Day-Patient
 or Out-Patient Treatment made at either
 the American Hospital and associated clinics,
 City Hospital, Welcare Hospital and associated
 clinics of the Mediclinic Group.

Please note that if you selected the USD 25 or USD 15 per visit out-patient excess or one of the Co-insurance Plan options, these will still apply in the Restricted Network. (not available for WorldCare Essential). There is a premium discount associated with this option.



 Add options of Wellness, Optical and Vaccinations, Dental Care and Maternity for added flexibility





 Teleconsultation services will be paid in full with Now Health International medical providers even if you have selected an Out-Patient co-insurance or Out-Patient per visit excess.



- * WorldCare Essential is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi.
- § Annual deductibles are not available to Insured Persons with residence visas in the Emirates of Dubai or Abu Dhabi
- # Co-Insurance Out-Patient Treatment is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi
- * Please note that only Out-Patient Per Visit Excess USD 15 is available to Insured Persons with residence visas in the Emirate of Abu Dhabi.
- Restricted Network UAE Residents only is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi.
- Medical History Disregarded –
 where we may be able to offer cover
 without asking for detailed medical
 information on your employees
 up-front (for compulsory group plans
 with 10 or more employees)



WorldCare At a Glance

A summary of each plan is shown below.

WorldCare Essential*

Annual maximum up to USD 3m

- In-patient and day-patient care
- Out-patient charges
- Out-patient charges - Option 1/2/3
- Routine & complex dental treatment
- Menopause Hormone Replacement Therapy
- Annual deductible §
- Co-insurance out-patient treatment (10%/20%)#
- USA elective treatment
- Extended evacuation and repatriation
- Medical history disregarded
- Routine maternity care

WorldCare Advance

Annual maximum up to

USD 3.5m

- In-patient and day-patient care
- Out-patient care
- Menopause Hormone Replacement Therapy
- Routine & complex dental treatment
- Routine maternity care (no co-insurance/ 20% co-insurance)†
- Annual deductible§
- Out-patient per visit excess (USD 25, USD 15)*
- Co-insurance out-patient treatment (10%/20%)#
- USA elective treatment
- Extended evacuation and repatriation
- Wellness, optical and vaccinations
- Wellness, optical and vaccinations - Option 2
- Restricted Network^Ø
- Removal of dental co-insurance
- Medical history disregarded

WorldCare Excel

Annual maximum up to

USD 4m

- In-patient and day-patient care
- Out-patient care
- Menopause Hormone Replacement Therapy
- Routine & complex dental treatment
- Routine maternity care
- Annual deductible §
- Out-patient per visit excess (USD 25, USD 15)*
- Co-insurance out-patient treatment (10%/20%)#
- USA elective treatment
- Extended evacuation and repatriation
- Wellness, optical and vaccinations
- Wellness, optical and vaccinations - Option 2
- Restricted Network^Ø
- Removal of dental co-insurance
- Medical history disregarded

WorldCare **Apex**

Annual maximum up to

USD 4.5m

- In-patient and day-patient care
- Out-patient care
- Menopause Hormone Replacement Therapy
- Routine & complex dental treatment
- Routine maternity care
- Annual deductible §
- Out-patient per visit excess (USD 25, USD 15)*
- Co-insurance out-patient treatment (10%/20%)#
- USA elective treatment
- Extended evacuation and repatriation
- Wellness, optical and vaccinations
- Wellness, optical and vaccinations - Option 2
- Restricted Network^Ø
- Removal of dental co-insurance
- Medical history disregarded

- § Annual deductibles are not available to Insured Persons with residence visas in the Emirates of Dubai or Abu Dhabi Co-Insurance Out-Patient Treatment is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi
- Please note that only Out-Patient Per Visit Excess USD 15 is available to Insured Persons with residence visas in the Emirate of Abu Dhabi.
- † Maternity (20% Co-Ínsurance) is not available with employees with resident visas within the Emirates of Dubai and Abu Dhabi Restricted Network UAE Residents only is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi.
- Cover available





Optional

^{*} WorldCare Essential is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi.

WorldCare Benefit Schedule

se	enefit	Essential*	Advance	Excel	Apex
Anr	nual Maximum Group Plan Limit	USD 3m	USD 3.5m	USD 4m	USD 4.5m
١.	Maintenance of Chronic Medical Conditions	Not covered	Full refund	Full refund	Full refund
2.	Hospital Charges, Medical Practitioner and Specialist Fees (i) Hospital charges for in-patient and day-patient treatment (ii) Related ancillary charges	(i) Full refund(ii) Up to USD 1,500 per medical condition	(i) Full refund(ii) Up to USD 1,500 per medical condition	(i) Full refund(ii) Up to USD 2,000 per medical condition	ii) Full refund iii) Up to USD 2,500 per medical condition
3.	Diagnostic Procedures	▶ Full refund	> Full refund	> Full refund	Full refund
l.	Emergency Ambulance Transportation	▶ Full refund	➤ Full refund	> Full refund	Full refund
5 .	Parent Accommodation	▶ Full refund	> Full refund	> Full refund	▶ Full refund
5 .	Renal Failure and Renal Dialysis (i) Treatment of renal failure, including renal dialysis on an in-patient basis (ii) Treatment of renal failure, including renal dialysis on an a day-patient or out-patient basis	ii) Full refund for in-patient pre and post-operative care iii) Up to USD 50,000	(i) Full refund (ii) Up to USD 100,000	(i) Full refund (ii) Up to USD 100,000	(i) Full refund (ii) Up to USD 100,000
' .	Organ Transplant (i) Treatment (ii) Donor medical costs	(i) Full refund (ii) Up to USD 50,000	(i) Full refund (ii) Up to USD 50,000	(i) Full refund(ii) Up to USD 50,000	(i) Full refund (ii) Up to USD 50,000
	Cancer Treatment	▶ Full refund	➤ Full refund	> Full refund	Full refund
	Pregnancy Medical Conditions	▶ Full refund	> Full refund	> Full refund	➤ Full refund
0.	New Born Cover	Up to USD 100,000	> Up to USD 100,000	> Up to USD 125,000	Up to USD 150,000
1.	Hospital Accommodation for New Born Accompanying their Mother	▶ Full refund	➤ Full refund	➤ Full refund	Full refund
2.	Congenital Disorder	Up to USD 100,000	Up to USD 100,000	Up to USD 125,000	Up to USD 150,000
3.	Reconstructive Surgery	Full refund	➤ Full refund	➤ Full refund	Full refund
4.	Rehabilitation	Full refund for eligible In-patien Treatment only up to 30 days per medical condition	t Full refund for up to 180 day per medical condition	rs Full refund	> Full refund
5.	In-Patient Emergency Dental Treatment	Full refund	Full refund	Full refund	Full refund
6.	In-Patient Psychiatric Treatment	Full refund for up to 30 days	Full refund for up to 30 days	Full refund for up to 30 days	Full refund for up to 30 days
7.	Terminal Illness	In-patient and Day-patient treatment up to USD 50,000 lifetime limit	Up to USD 50,000 lifetime limit	Up to USD 75,000 lifetime limit	Up to USD 100,000 lifetime limit
8.	Emergency Non-Elective Treatment USA Cover	Full refund for accident requiring in-patient or day-patient care Illness: in-patient and day-patient care up to USD 25,000 Out-Patient Treatment in an Accident and Emergency Department in a hospital up to USD 500	Full refund for accident requirin in-patient or day-patient care Illness: in-patient and day-patien care up to USD 25,000 Out-Patient Treatment in an Accident and Emergency Department in a hospital up to USD 500	in-patient or day-patient care	Full refund for accident requin-patient or day-patient car Illness: in-patient and day-p- care up to USD 50,000 Out-Patient Treatment in an Accident and Emergency Department in a hospital up to USD 500
9.	Evacuation and Repatriation Evacuation (i) Transportation costs (ii) Reasonable local travel costs to and from medical appointments (iii) Reasonable travel costs for a locally-accompanying person (iv) Non-hospital accommodation costs Repatriation to country of residence or nationality following treatment	(ii) Full refund (iii) Full refund (iii) Full refund (iv) Up to USD 200 per day, up to USD 7,500 per person, per evacuation Full refund	(i) Full refund (ii) Full refund (iii) Full refund (iv) Up to USD 200 per day, up to USD 7,500 per person, per evacuation Full refund	(i) Full refund (ii) Full refund (iii) Full refund (iv) Up to USD 200 per day, up to USD 7,500 per person, per evacuation Full refund	ii) Full refund iii) Full refund iii) Full refund iii) Full refund iii) Up to USD 300 per day, up to USD 10,000 per per evacuation Full refund
.0.	Mortal Remains (i) Transportation of body or ashes of insured person to country of residence or country of nationality (ii) Burial or cremation costs at the place of death	(i) Full refund (ii) Up to USD 10,000	(i) Full refund (ii) Up to USD 10,000	(i) Full refund (ii) Up to USD 15,000	(i) Full refund (ii) Up to USD 20,000
1.	Hospital Cash Benefit	USD 125 per night	USD 175 per night	USD 225 per night	USD 275 per night
	Out-Patient Charges (i) Medical practitioner fees (ii) Teleconsultation (iii) Vitamins and minerals	(i) and (ii) Pre-operative consultations within 15 days from the admission and post hospitalisation consultation within 30 days following discharge from hospital up to maximum USD 2,000 per medical condition (iii) Not covered	i) and (ii) Full refund (iii) Up to USD 150 per period of cover	(i) and (ii) Full refund d (iii) Up to USD 150 per period of cover	 (i) and (ii) Full refund (iii) Up to USD 150 per per per per per per per per per per
23.	Menopause Hormone Replacement Therapy	Not covered	Up to USD 500 per Period of Cover	Up to USD 600 per Period of Cover	Up to USD 750 per Period of Cover
	Day-Patient and Out-Patient Surgery	▶ Full refund	► Full refund	➤ Full refund	Full refund

Full refund Not covered Subject to limits

Ве	enefit	Essential*	Advance	Excel	Apex
25.	Out-Patient Psychiatric Illness	Not covered	> Up to USD 2,500	Up to USD 5,000	▶ Up to USD 7,500
26.	Out-Patient Physiotherapy and Alternative Therapies (i) Physiotherapy by a registered physiotherapist. (ii) Complementary medicine and treatment by a therapist. This benefit extends to osteopaths, chiropodists and podiatrists, chiropractors, homeopaths, dietician and acupuncture treatment but excludes physiotherapist covered in (i). (iii) Out-patient treatment for therapies administered by a recognised traditional Chinese medical practitioner or an ayurvedic medical practitioner. We do not cover charges for general chiropody or podiatry.	i) Up to 5 sessions within 30 days after hospitalisation iii) Not covered iiii) Not covered	i) Full refund up to a maximum 30 sessions iii) and (iii) Full refund up to a maximum of 30 visits	➤ (i) Full refund ➤ (ii) and (iii) Full refund	(i) Full refund(ii) and (iii) Full refund
27.	Nursing Care at Home (i) Care given by a qualified nurse (ii) Emergency out-of-hours medical practitioner (GP) home visits	i) Up to USD 100 per day, up to 30 days per medical condition (ii) Not covered	i) Full refund up to 45 days per medical condition (ii) Not covered	i) Full refund up to 60 days per medical condition (ii) Not covered	ii) Full refund up to 120 days per medical condition iii) Up to five visits
28.	AIDS Cover only available after three years of continuous membership	In-patient and day-patient treatment only up to USD 25,000	Up to USD 25,000	Up to USD 40,000	▶ Up to USD 50,000
29.	Maternity Costs incurred within 12 months of plan start date are excluded	Not covered	Not covered	Not covered	Up to USD 17,500
30.	Dental Care (i) Routine dental treatment (ii) Complex dental treatment Costs incurred within nine months of plan start date are excluded. A co-insurance of 20% applies. Orthodontics subject to 50% co-insurance.	(i) Not covered (ii) Not covered	(i) Not covered (ii) Not covered	(i) Up to USD 1,000 (ii) Up to USD 2,000	(i) Up to USD 1,500(ii) Up to USD 3,000
31.	Dubai Health Authority (DHA) Mandatory requirements Benefit	Not available	For Insured Persons with residence visas within the Emirate of Dubai this Plan is extended to provide coverage up to USD 41,000 in aggregate per Insured Person, per Period of Cover for the following basic health services inclusive of Emergency services within the United Arab Emirates. For detailed benefit description please refer to the members handbook.		
32.	Health Authority Abu Dhabi (HAAD) Mandatory requirements Benefit	Not available	provide coverage up to USD 69,000 basic health services within the Em	visas in the Emirate of Abu Dhabi thi 0 in aggregate per Insured Person, pe irate of Abu Dhabi and for Emergenc ription please refer to the members h	er Period of Cover for the followin y services within the United Arab

Full refund Not covered

Subject to limits

Be	enefit	Essential*	Advance	Excel	Apex
Add	litional options				
33.	USA Elective Treatment	Optional Up to USD 1.5m	Optional Up to USD 1.5m	Optional Up to USD 1.5m	Optional Up to USD 1.5m
34.	Co-Insurance Out-Patient Treatment# (i) 10% Co-Insurance Out-Patient Treatment (ii) 20% Co-Insurance Out-Patient Treatment	ii) Optional iii) Optional	ii) Optional iii) Optional	i) Optional ii) Optional	(i) Optional (ii) Optional
35.	Out-Patient Charges (i) Medical practitioner fees (ii) Teleconsultation (iii) Vitamins and minerals This Benefit (i), (ii) and (iii) replaces Benefit 22 – Out-Patient Charges. (iv) a. Physiotherapy b. Treatment by Therapist c. Treatment for therapies by traditional Chinese medical practitioner or an ayurvedic medical practitioner (v) Out Patient Psychiatric Illness This Benefit replaces Benefit 25 – Out-Patient psychiatric illness (vi) Menopause Hormone Replacement Therapy This Benefit replaces Benefit 23 – Menopause Hormone Replacement Therapy	Optional (i)and (ii) Up to USD 5,000 (iii) Up to USD 150 per period of cover in aggregate of overall Out-Patient Charges Benefit limit (iv) Full refund up to 10 sessions Physiotherapy is limited to 10 sessions and not in addition to Benefit 26. (v) Up to USD 500 per period of cover and subject to a maximum of 10 sessions per period of cover (vi) Up to USD 400 per Period of Cover	Already covered	Already covered	Already covered
36.	Out-Patient Charges – Option 2 (i) Medical practitioner fees and maintenance of chronic conditions (iii) Teleconsultation (iii) Vitamins and minerals This Benefit (i), (ii) and (iii) replaces Benefit 22 – Out-Patient Charges. (iv) a. Physiotherapy b. Treatment by Therapist c. Treatment by Therapist c. Treatment for therapies by traditional Chinese medical practitioner or an ayuvedic medical practitioner (v) Out Patient Psychiatric Illness This Benefit replaces Benefit 25 – Out-Patient psychiatric illness (vi) Menopause Hormone Replacement Therapy This Benefit replaces Benefit 23 – Menopause Hormone Replacement Therapy	Optional (i)and (ii) Up to USD 5,000 (iii) Up to USD 150 per period of cover in aggregate of overall Out-Patient Charges Benefit limit (iv) Full refund up to 10 sessions Physiotherapy is limited to 10 sessions and not in addition to Benefit 26. (v) Up to USD 500 per period of cover and subject to a maximum of 10 sessions per period of cover (vi) Up to USD 400 per Period of Cover	Already covered	Already covered	Already covered
37.	Out-Patient Charges – Option 3 (i) Emergency Out-Patient Benefit (ii) Pre and Post-Operative Out-Patient Charges: a. Medical Practitioner fees b. Teleconsultation c. Physiotherapy by a Registered Physiotherapist This Benefit replaces Benefit 22- Out-Patient Charges and Benefit 26 – Out-Patient Physiotherapy and Alternative Therapies.	ii) Up to USD 300 per Period of Cover in aggregate and subject to USD 25 Out-Patient Per Visit Excess iii) Up to USD USD 3,500 per Medical Condition per Period of Cover Physiotherapy is up to 5 sessions within 90 days following hospitalisation in aggregate.	▶ Not covered	▶ Not covered	▶ Not covered
38.	Restricted Network – UAE Residents only $^{\varnothing}$	Not covered	▶ Optional	> Optional	▶ Optional
39.	Wellness, Optical and Vaccinations	Not covered	Optional For compulsory group plans 3+ employees Combined limit up to USD 500	Optional For compulsory group plans 3+ employees Combined limit up to USD 500	Optional For compulsory group plans 3+ employees Combined limit up to USD 500
40.	Wellness, Optical and Vaccinations - Option 2	Not covered	Optional For compulsory group plans 3+ employees Combined limit up to USD 1,000	 Optional For compulsory group plans 3+ employees Combined limit up to USD 1,000 	Optional For compulsory group plans 3+ employees Combined limit up to USD 1,00
41.	Medical History Disregarded Waiting period for maternity or dental care benefits does not apply	Optional For compulsory group plans 10+ employees	Optional For compulsory group plans 10+ employees	Optional For compulsory group plans 10+ employees	Optional For compulsory group plans 10+ employees
42.	Dental Care for Essential (i) Routine dental treatment (ii) Complex dental treatment Costs incurred within nine months of plan start date are excluded. A co-insurance of 20% applies.	Optional For compulsory group plans 10+ employees (i) Up to USD 250 (ii) Up to USD 1,000	Not covered	▶ Not covered	▶ Not covered
43.	Dental Care (i) Routine dental treatment (ii) Complex dental treatment Costs incurred within nine months of plan start date are excluded. A co-insurance of 20% applies. Orthodontics subject to 50% co-insurance.	Not covered	Optional For compulsory group plans 10+ employees (i) Up to USD 500 (ii) Up to USD 1,000	Already covered	Already covered

Full refund Not covered Subject to limits

Optional

Benefit	Essential*	Advance	Excel	Apex
44. Maternity (No Co-Insurance) Costs incurred within 12 months of plan start date are excluded	▶ Not covered	Optional For compulsory group plans 10+ employees Up to USD 8,500	Optional For compulsory group plans 10+ employees Up to USD 12,500	Already covered
45. Maternity (20% Co-Insurance) † Costs incurred within 12 months of plan start date are excluded	Not covered	 Optional For compulsory group plans 10+ employees Up to USD 8,500 	Not covered	Already covered
46. Removal of Dental Co-Insurance	▶ Not covered	 Optional For compulsory group plans 10+ employees 	 Optional For compulsory group plans 10+ employees 	 Optional For compulsory group plans 10+ employees
47. Extended Evacuation and Repatriation	▶ Optional	▶ Optional	Optional	▶ Optional
Deductible Options §				
Standard Deductible	Nil	Nil	Nil	Nil
Optional Deductibles	USD 1,000	USD 1,000	USD 1,000	USD 1,000
	USD 2,500	USD 2,500	USD 2,500	USD 2,500
	USD 5,000	USD 5,000	USD 5,000	USD 5,000
	USD 10,000	USD 10,000	USD 10,000	USD 10,000
	USD 15,000	USD 15,000	USD 15,000	USD 15,000
Out-Patient Per Visit Excess	▶ Not covered	Optional USD 25	Optional USD 25	Optional USD 25
Out-Patient Per Visit Excess – Option 2*	▶ Not covered	Optional USD 15	Optional USD 15	Optional USD 15

^{*} WorldCare Essential is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi.

 $[\]S$ Annual deductibles are not available to Insured Persons with residence visas in the Emirates of Dubai or Abu Dhabi

[#] Co-Insurance Out-Patient Treatment is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi

^{*} Please note that only Out-Patient Per Visit Excess USD 15 is available to Insured Persons with residence visas in the Emirate of Abu Dhabi.

[†] Maternity (20% Co-Insurance) is not available with employees with resident visas within the Emirates of Dubai and Abu Dhabi.

Ø Restricted Network – UAE Residents only is not available to Insured Persons with residence visas in the Emirate of Abu Dhabi.

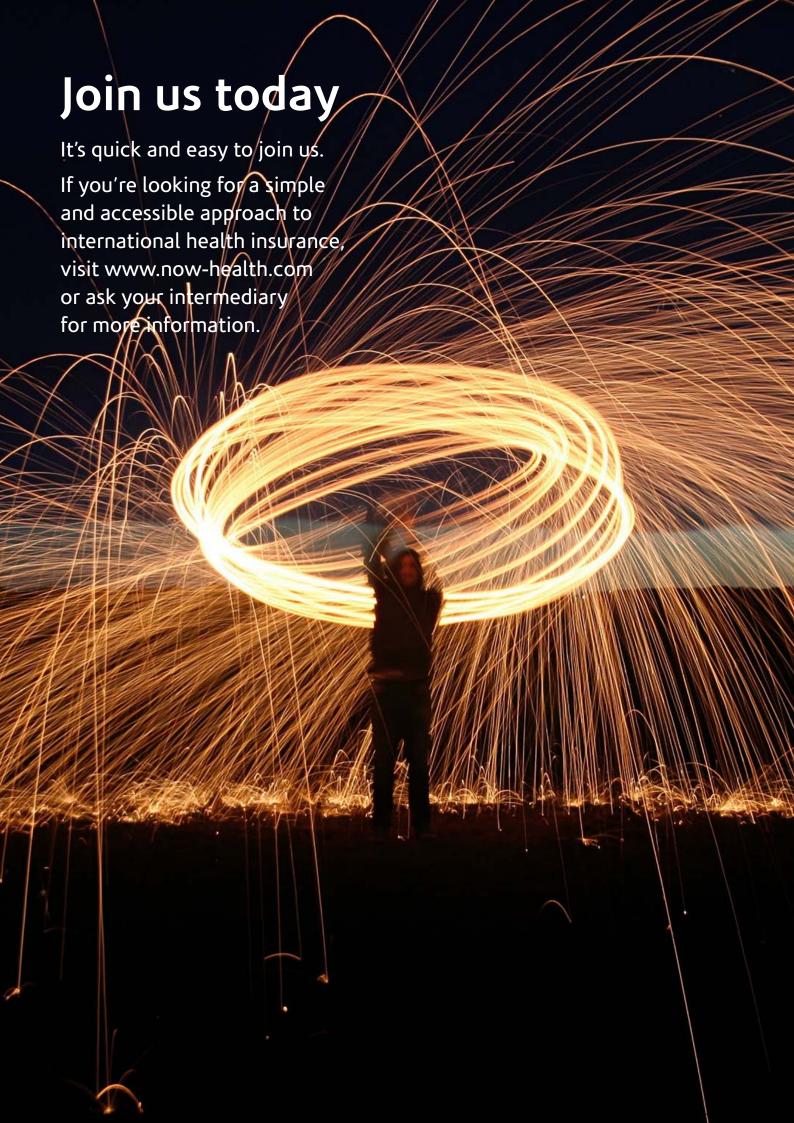
▶ What We Don't Cover

There are some limitations that apply in addition to any personal exclusion we may detail in your Certificate of Insurance. These include treatments that may be considered a matter of personal choice (such as cosmetic treatment) and other treatments that are excluded from cover to keep premiums at an affordable level. For a full description, please refer to the members' handbook.

- 1 Act of terrorism, war and illegal acts
- 2 Administrative and shipping fees
- 3 Alcohol and drug abuse
- 4 Allergy Testing
- 5 Chemical exposure
- 6 Cosmetic treatment
- 7 Contamination
- 8 Chronic conditions (Essential plan only)
- 9 Coma or Vegetative State
- 10 Deductible, out-patient per visit excess or co-insurance
- 11 Dental care– unless this additional option has been chosen
- 12 Developmental disorders
- 13 Dietary supplements and cosmetic products
- **14** Eating disorders
- 15 Experimental treatment and drugs
- Eyesight tests or vision correction, hearing tests, hearing or visual aids
 except as stated in the benefit schedule
- 17 External appliance and/or prosthesis
- 18 Failure to follow medical advice
- 19 Foetal surgery
- 20 Genetic testing

- 21 Hazardous sports and pursuits
- 22 HIV, AIDS or sexually transmitted disease
 except as stated in the benefit schedule
- 23 Hormone Replacement Therapy

 unless caused due to medical intervention
- 24 Morbid obesity
- 25 Nursing homes, convalescence homes, health hydros and nature cure clinics
- Pregnancy or maternity
 unless this option has been chosen or included within the core benefits of the plan
- 27 Pre-existing Medical Conditions– unless agreed by us in writing
- 28 Professional sports
- 29 Reproductive medicine
- 30 Routine examinations, health screening except as stated in the benefit schedule
- 31 Second opinions
 - unless agreed by us in writing as part of the added value Interconsultation® service
- 32 Self-inflicted injuries or attempted suicide
- 33 Sexual problems and gender re-assignment
- 34 Sleep disorders
- 35 Travel/accommodation costs
 except those pre-authorised by us
- 36 Travelling against medical advice
- 37 Treatment by a family member
- 38 Treatment charges outside of our reasonable and customary range













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Plans issued in the United Arab Emirates (UAE) are insured by Arabia Insurance Company S.A.L. (registered under UAE Federal Law No (6) of 2007 and regulated by CBUAE) with the Registration No: 20)

Registered address: Arabia Insurance, Green Tower, Floor No 8, 9 and 10. P.O. Box 1050 Dubai United Arab Emirates.

Plans are administered by Now Health International Gulf Third Party Administrators LLC (regulated by CBUAE with the Registration No: 26). Registered address: 2348 Sky Tower, Al Reem Island, P.O. Box 132168,

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