

# GLOBAL CANCER CARE

## TABLE OF BENEFITS



### SCHEDULE OF BENEFITS (in USD)

Coverage Area

**Zone 1: Vietnam and Thailand**

**Zone 2: Vietnam, Thailand, Singapore, Malaysia, Hong Kong, Japan**

**Zone 3: Worldwide**

	Plan A	Plan B	Plan C	Plan D
<b>Annual Limit per Covered Illness (USD)</b>	100,000	250,000	500,000	750,000
<b>Lifetime Limit (USD) *</b>	300,000	750,000	1,500,000	2,250,000
<b>Waiting Period **</b>	180 days	180 days	180 days	180 days

### INPATIENT BENEFITS

<b>Room and Board</b>	Standard single-bedded room	Standard single-bedded room	Standard single-bedded room	Standard single-bedded room
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**Physician/ Specialist visit as deemed necessary and appropriate while the insured is a patient in a hospital**

**Inpatient drugs and supplies**

**Blood transfusions, blood plasma, blood plasma expanders and all related testing, components, equipment and service**

**Diagnostic X-ray examinations, MRI, CAT scans and PET scans**

**Radiation therapy rendered by a radiologist or qualified nurse/ technician under the direction of a licensed physician/ radiologist for proven malignancy**

**Respiratory therapy rendered by a physician or registered therapist**

**Chemotherapy**

**Reconstructive surgery**

**Local Road ambulance**

Paid in full

Paid in full

Paid in full

Paid in full

## **OUTPATIENT BENEFIT**

**Outpatient cancer treatment:**

Chemotherapy, Radiotherapy, Cancer Hormonal Therapy and prescribed medications

Paid in full

Paid in full

Paid in full

Paid in full

**Pre-hospitalization treatment:**

This benefit pays for charges incurred for consultation, prescriptions, diagnostic procedure within the specified number of days prior to an in-patient or day-care treatment and such charges are necessary to determine whether the member should be admitted in a hospital.

within 90 days

within 90 days

within 90 days

within 90 days

**Post-hospitalization treatment:**

This benefit pays for charges incurred for consultation and treatment following an eligible in-patient treatment or day surgery when such consultation is carried out by the in-patient treating medical practitioner or a referred medical practitioner and provided such consultation or treatment occurs within the specified number of days following the date of discharge from Hospital for which the member was confined as an in-patient, or the date of the day-care treatment.

within 90 days

within 90 days

within 90 days

within 90 days

**PROTON BEAM THERAPY & TARGETED CANCER THERAPY**

**Targeted cancer therapy**

This benefit refers to all types of cancer treatments that acts on specific cancer genes, proteins, or tissue environment that contributes to cancer growth and survival. This includes treatments such as but not limited to immunotherapy including Chimeric Antigen Receptor T Cell Therapy (CAR-T), hormone therapies, gene expression modulators (changing the way the gene instructions from cancer cells are interpreted), apoptosis inducers (inducing cancer cells to go through normal cell death) or Targeted Cell Treatments.

Limit of USD 50,000 per year

Limit of USD 50,000 per year

Limit of USD 50,000 per year

Limit of USD 50,000 per year

**Proton Beam Therapy**

This benefit is for Proton Beam Therapy when it is used ONLY FOR THE FOLLOWING conditions:

- CNS (brain & spinal cord) cancer or malignant solid cancer for insured < 21 years old
- Chordomas or chondrosarcomas (types of spinal cancers) in the base of the skull or cervical spine (neck bones) which have not spread (metastasized)
- Cancer of the iris, ciliary body or choroid parts of the eye (uveal melanoma) which have not spread (metastasized)

Limit of USD 50,000 per year

Limit of USD 50,000 per year

Limit of USD 50,000 per year

Limit of USD 50,000 per year

## TRAVEL

Annual limit on travel (USD)	10,000	20,000	20,000	30,000
<b>Transportation costs from the country of residence to country of treatment (round trip)</b>	Economy flight / 2nd class train ticket	Economy flight / 2nd class train ticket	Economy flight / 2nd class train ticket	Business class flight / 1st class train ticket
<b>Accommodation (limited to 4 star hotel)</b> - Cost for insured and one companion during their travel for a covered treatment - Annual max length of stay while receiving the treatment - Cost of trips within country of residence is not covered	100% subject to annual travel limit and deductible  max length of stay (30 days)	100% subject to annual travel limit and deductible  max length of stay (30 days)	100% subject to annual travel limit and deductible  max length of stay (30 days)	100% subject to annual travel limit and deductible  max length of stay (60 days)

## Annual Deductible & Coinsurance options are available

\* The maximum amount of benefits paid by us. After the lifetime limit is reached, you are required to pay the cost of all care exceeding this limit.  
 \*\* No benefit will be payable for Cancer and the policy will terminate if within 180 days (Waiting Period) following the policy commencement date or inclusion date of the Insured in the policy, whichever is later, the Insured suffers from or have Symptoms or Signs of , undergoes investigation for or is diagnosed with Cancer.

### What's covered under my Global Cancer Care plan?

You will be covered for all malignant tumors, except for tumors classified as or belonging to any of the following:

Cervical Dysplasia CIN-1, CIN-2, and CIN-3 and low grade & high grade squamous epithelial lesions

Prostatic Intraepithelial Neoplasia (PIN)

Vulvar intraepithelial Neoplasia (VIN)

Melanoma in situ and all non-melanomas skin carcinoma

Any lesion or tumour which is histologically described as benign, dysplasia, premalignant, borderline malignant, or suspicious malignant potential

Non-invasive papillary urothelial carcinoma of the bladder (Stage TaN0M0)

Chronic Lymphocytic Leukemia (CLL) RAI Stage 0 or lower

All Gastrointestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below with mitotic count less than or equal to 5/50

HPFs we cover only when there is surgery, chemotherapy or targeted therapy/immunotherapy;

Any tumor in the presence of Human Immunodeficiency Virus (HIV) infection

**Please note:** At the time of initial application, you must have no previous or present signs, symptoms or any pre-existing Conditions. You must carefully read the general terms and conditions and fully understood when you fill up the Application Form (especially medical questionnaire).

## PREMIUM RATES (UNIT: VND)

### Zone 1: Vietnam and Thailand

AGE GROUP	Plan A	Plan B	Plan C	Plan D
0 - 20	1,515,000	2,222,000	2,297,000	2,701,000
21 - 25	2,020,000	2,962,000	3,063,000	3,601,000
26 - 30	2,399,000	3,518,000	3,638,000	4,276,000
31 - 35	2,904,000	4,258,000	4,403,000	5,176,000
36 - 40	4,041,000	5,924,000	6,127,000	7,202,000
41 - 45	5,809,000	8,516,000	8,807,000	10,353,000
46 - 50	8,839,000	12,960,000	13,402,000	15,754,000
51 - 55	12,628,000	18,514,000	19,145,000	22,506,000
56 - 60	17,792,000	26,086,000	26,976,000	31,710,000
61 - 65	23,841,000	34,954,000	36,146,000	42,491,000
66 - 70	31,165,000	45,692,000	47,251,000	55,544,000

## PREMIUM RATES (UNIT: VND)

### Zone 2: Vietnam, Thailand, Singapore, Malaysia, Hong Kong, Japan

AGE GROUP	Plan A	Plan B	Plan C	Plan D
0 - 20	2,331,000	3,417,000	3,533,000	4,154,000
21 - 25	3,107,000	4,556,000	4,711,000	5,538,000
26 - 30	3,690,000	5,410,000	5,595,000	6,577,000
31 - 35	4,467,000	6,549,000	6,773,000	7,961,000
36 - 40	6,215,000	9,112,000	9,423,000	11,076,000
41 - 45	8,934,000	13,098,000	13,545,000	15,922,000
46 - 50	13,595,000	19,932,000	20,612,000	24,230,000
51 - 55	19,421,000	28,474,000	29,446,000	34,614,000
56 - 60	27,365,000	40,120,000	41,489,000	48,771,000
61 - 65	36,667,000	53,760,000	55,593,000	65,351,000
66 - 70	47,932,000	70,275,000	72,672,000	85,427,000

## PREMIUM RATES (UNIT: VND)

### Zone 3: Worldwide

AGE GROUP	Plan A	Plan B	Plan C	Plan D
0 - 20	3,788,000	5,554,000	5,744,000	6,752,000
21 - 25	5,051,000	7,406,000	7,658,000	9,002,000
26 - 30	5,998,000	8,794,000	9,094,000	10,690,000
31 - 35	7,261,000	10,645,000	11,009,000	12,941,000
36 - 40	10,102,000	14,811,000	15,316,000	18,005,000
41 - 45	14,522,000	21,291,000	22,017,000	25,881,000
46 - 50	22,098,000	32,399,000	33,504,000	39,385,000
51 - 55	31,569,000	46,285,000	47,863,000	56,264,000
56 - 60	44,481,000	65,215,000	67,440,000	79,276,000
61 - 65	59,602,000	87,385,000	90,366,000	106,227,000
66 - 70	77,912,000	114,231,000	118,127,000	138,860,000

**Please contact us for a free consultation!**

## **YOUR INSURANCE24H - HUYEN GIA SERVICES CO LTD**

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