MASTER SERIES



TABLE OF BENEFITS

SCHEDULE OF BENEFITS (in VND)	Plan M1+	Plan M2	Plan M3		
Treatment Area	WORLDWIDE				
Maximum Benefit For Any ONE Disability and Sequelae Covers normal, usual and customary charges, per disability per lifetime for:	5,000,000,000	20,000,000,000			
INPATIENT BENEFITS – Covers normal, usual and customa	ary charges for:				
Room and Board (standard room)	Private in Vietnam, Semi-Private in other countries	Private in Vietnam, Semi-Private in other countries	Semi-Private in E.U/ HK/ N. America/ Switzerland. Private in other countries		
Parent Accommodation – An extra bed in the same room for a parent accompanying an insured child under 18 years old					
Intensive Care Unit, Coronary Care Unit, and Operating Room		As Charged			
Surgeon's Fee – Includes pre-surgical assessment and normal post-surgical care for each operation	Surgeon's Fee – Includes pre-surgical assessment and normal post-surgical care for each operation	As Charged	As Charged		

Anaesthetist's Fee	Up to 35% of eligible Surgeon's Fee	As Charged	As Charged		
Pre and Post Hospitalization (including Rehabilitation) – Within 30 days before admission and 90 days after discharge up to	30,000,000 per disability per year	50,000,000 per disability per year			
Organ Transplant – Fees for kidney, heart, lung, liver and bone marrow transplants (up to 50% for donor and the remaining percentages for recipient, at the option of the Insured Person) to a total of This benefit is a lump sum maximum per organ per lifetime and no other policy benefits are payable in respect of Organ Transplant.	500,000,000	4,000,000,000			
HIV/AIDS – Coverage will apply when HIV and/or its related illnesses present for the first time after 5 years continuous coverage under the Policy and any renewal thereof, with lifetime limit of	500,000,000	2,000,000.000			
Home Nursing – Immediately after hospitalization and certified to be medically necessary by the attending physician for up to 30 days per disability per year	As Charged				
Miscellaneous Inpatient Charges – For required diagnostic laboratory tests, x-rays, prescribed medicines; professional fees; blood and plasma; wheel chair rentals; outpatient surgery; surgical appliances and devices; and intraoperative standard prosthetics (as approved by the Company)	As Charged				
Hospice Care – For terminal illnesses with lifetime limit of	100,000,000	100,000,000	200,000,000		
Psychiatric and Mental Disorders – Hospital charges of 50,000,000 (applicable to M1+ and M2) or 100,000,000 (applicable to M3) per year with lifetime limit of	100,000,000	200,000,000			
Maternity Benefit – Maximum limit per pregnancy after a 12-month waiting period (90 days for miscarriage and therapeutic abortion) up to Limit per pregnancy - Delivery - Miscarriage and therapeutic abortion When both husband and wife are insured, the limit shall be increased by 50%	40,000,000 20,000,000	60,000,000 30,000,000	100,000,000		

Free New Born cover —A child of an Insured Person is eligible for the same medical plan as the Insured Person (or the lower benefit level if both the parents of such child are insured persons and are insured for different levels of benefits) 15 days after the date of birth or the date of discharge - whichever is later. Eligibility is contingent on submission of an application form to the Company. Free New Born Cover extends until the Insured Person's next renewal, free of charge, provided that the Insured Person has been insured under this Policy at least 12 consecutive months and such child qualifies for insurance.		Included					
Mortal Remains – Repatriation to Home Country or Country of Residence		As Charged					
EMERGENCY BENEFITS							
Accidental Damage to Teeth – Emergency treatment for up to 7 days following accidental loss or damage caused to sound natural teeth		As Charged					
Accidental Emergency Outpatient Treatment (for covered accident which has been treated within 24 hours of the accident by the outpatient department of hospital, clinic, doctor's office)							
Emergency Local Ambulance Service	As Charged						
24-Hour Emergency Assistance Services and Emergency Medical Evacuation Service	Included						
Additional Travel Expenses (following Evacuation) - One economy class airline ticket to return an Insured Person to the Country of Residence	Included						
OUTPATIENT BENEFITS	Plan M1+	Plan M2	Plan M3				
Outpatient Benefit - Physician and specialists' fees for office visits, physiotherapist, and chiropractor when referred by the attending physician; and, for required diagnostic laboratory tests, x-rays and prescribed medicines	As Charged						
Alternative Medicines - Fees for visits to homeopath, osteopath, acupuncturist, bonesetter, herbalist and Chinese medicine practitioner and prescribed herbs up to an annual limit of	5,000,000	20,000,000					

TRAVEL BENEFIT (is included if Outpatient benefit is selected)

Covers the following eligible expenses worldwide when travelling outside the Insured's country of residence on trips lasting up to 90 days

Curtailment of Trip or Cancellation Charges	50,000,000	Baggage & Travel Documents	15,000,000	Travel Delay	13,000,000	
Hospital Cash Income	12,000,000	Personal Money	10,000,000	Baggage Delay	2,500,000	

OPTIONAL BENEFITS

Dental Benefit – Covers 80% of normal, usual and customary charges for Eligible Expenses per year up to VND20,000,000

Personal Accident Benefit – Option from 1,000,000,000 up to 10,000,000,000. Children (0-18 ages) only have 10% Personal Accident Sum Insured of their parents

OPTIONAL BENEFITS	LIFESTYLE UPGRADE 1	LIFESTYLE UPGRADE 2
MEDICAL CHECK-UP	2,600,000	4,000,000
VACCINATION	1,000,000	2,000,000
DENTAL BENEFIT	5,000,000 (you pay 20% and we pay 80% of eligible expenses)	10,000,000 (you pay 20% and we pay 80% of eligible expenses)
PERSONNAL ACCIDENT	200,000,000 (the benefit of Child (0-18 ages) is 20,000,000 only)	500,000,000 (the benefit of Child (0-18 ages) is 50,000,000 only)

PREMIUM RATES (UNIT: VND1,000)																	
A(AGE GROUP 0-5 6-18 19-25 26-30 31-35 36-40 41-45 46-50 51-55 56-60 61-65 66-70 71-75 76-80 81-85 86-90*																
7	M1+	29,308	27,407	38,881	41,824	44,831	47,921	51,068	57,247	63,548	78,264	93,924	140,917	194,481	268,349	370,295	510,986
LAN	M2	30,405	28,433	46,302	49,774	53,247	56,922	59,783	67,638	75,824	93,331	111,997	167,977	231,844	319,963	441,555	609,322
PL	М3	38,813	32,554	58,604	62,784	67,020	71,212	76,793	81,093	93,274	104,958	145,138	195,944	275,164	382,760	535,864	750,209
	Upgrade													1		1	
ည	Benefit:	1,516	1,418	1,739	1,900	2,060	2,221	2,355	2,488	2,756	2,917	3,211					
BENEFITS	1.000.000,000 Surgeon's Fee																
뿌	DENTAL																
Œ	BENEFIT	3,150								5,	775						
	PERSONNAL																
OPTIONAL	ACCIDENT						for	Class 1	Occupa	tion: 28	,350 per 2	0,000,00	0				
	BENEFIT																
	LIFESTYLE 4,494																
P.	UPGRADE 1									7,737							
0	LIFESTYLE									7,035							
	UPGRADE 2																

*Renew only

DISCOUNTS are not applicable to Optional Benefits and Discount for Outpatient Exclusion is not applicable to Upgrade Benefit.

Discount Option "50,000,000 Inpatient Benefits Deductible" is only available if a client takes Inpatient Benefits only. In this case, they can choose between two discount options - "50,000,000 Inpatient Benefits Deductible" or "20% Co-payment".

Outpatient Exclusion	30%
Treatment Area Limit (TAL): option limits coverage to 30 cumulative days of cover per policy year in North America, Japan and Hong Kong to emergency Inpatient treatment only (please refer to policy itself).	25%
20% Co-payment: you pay 20% and we pay 80% of eligible expenses.	25%
50,000,000 Inpatient Benefits Deductible: you pay the first 50,000,000 of eligible Inpatient treatment expenses in each policy year.	20%

NUMBER OF LIVES

3 – 4 Insured Persons	5%
5 – 10 Insured Persons	10%
11 – 20 Insured Persons	15%
21 Insured Persons and above	20%

NOTE

- Smoker has 15% loading.
- These medical plans are available for residents of Vietnam only. Residents in other countries will be subject to individual consideration.

Please contact us for a free consultation!

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