

ASIA EXPAT

| | BASIC OPTION | ADVANCED OPTION |
|---|--|--|
| Annual upper limit of reimbursement per insured individual | USD 1,000,000 per insurance year | USD 1,000,000 per insurance year |
| Hospitalisation <small>see definition p6</small> for surgery, medical hospitalisation or day hospitalisation <small>see definition p6</small> ; Transfer by ambulance (if hospital charges covered by APRIL International) Accommodation Medical and surgical fees Examinations, tests and medicines Medical procedures | 100% of actual costs <small>see definition p6</small> | 100% of actual costs <small>see definition p6</small> |
| Private room | 100% of actual costs | 100% of actual costs |
| Direct payment of hospital charges during approved hospitalisation for more than 24 hours | provided on request 24 hours a day, if prior agreement has been obtained | provided on request 24 hours a day, if prior agreement has been obtained |
| Parent accommodation | 100% of actual costs, up to 10 days per year (for children under 18) | 100% of actual costs, up to 10 days per year (for children under 18) |
| Cancer treatment (chemotherapy and radiotherapy) | 100% of actual costs | 100% of actual costs |
| Treatment of AIDS | 100% of actual costs | 100% of actual costs |
| Organ transplant | 100% of actual costs, up to USD 200,000 per year | 100% of actual costs, up to USD 200,000 per year |
| Pre and post hospitalisation treatment (incurred within 30 days before admission, and 90 days following hospital discharge) | 100% of actual costs, up to USD 3,000 | 100% of actual costs, up to USD 3,000 |
| Emergency treatment | 100% of actual costs | 100% of actual costs |
| Treatment in a specialist re-education unit following hospitalisation covered by APRIL International | 100% of actual costs, up to 30 days | 100% of actual costs, up to 30 days |
| Nursing at home* | 100% of actual costs, up to 182 days per year | 100% of actual costs, up to 182 days per year |
| Emergency dental treatment following an accident | 100% of actual costs, up to USD 50,000 per year | 100% of actual costs, up to USD 50,000 per year |

MATERNITY

Waiting period see definition p6 9 months



| | BASIC OPTION | ADVANCED OPTION |
|--|------------------------------|------------------------------|
| Annual upper limit of reimbursement per insured individual | USD 5,000 per insurance year | USD 5,000 per insurance year |
| Pre and post natal treatment | 100% of actual costs | 100% of actual costs |
| Delivery | 100% of actual costs | 100% of actual costs |

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|--|----------------------------------|----------------------------------|
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MEDICAL EXPENSES - OUTPATIENT SERVICES



| | BASIC OPTION | ADVANCED OPTION |
|---|--------------|--|
| Annual upper limit of reimbursement per insured individual | not covered | USD 5,000 per insurance year |
| Consultations and visits: general practitioners | not covered | 100% of actual costs |
| Consultations and visits: specialists | not covered | 100% of actual costs |
| Diagnostic tests, X-rays, scans, EKG | not covered | 100% of actual costs |
| Prescription drugs | not covered | 100% of actual costs |
| Physiotherapy and chiropractor treatment waiting period: 6 months** | not covered | 100% of actual costs, up to USD 60 per session, up to 15 sessions per year |
| Acupuncture - waiting period: 6 months** | not covered | 100% of actual costs, up to USD 45 per session, up to 10 sessions per year |
| Hormone replacement therapy | not covered | 100% of actual costs, up to USD 2,000 per year |

DENTAL CARE

Waiting period 6 months**



| | BASIC OPTION | ADVANCED OPTION |
|---|--------------|---|
| Annual upper limit of reimbursement per insured individual | not covered | USD 1,000 per insurance year |
| Routine oral examination (including scaling & polishing) | not covered | 100% of actual costs up to USD 100 per year (once per year) |
| Basic dental services: extraction, amalgam filling, X-rays, periodontal scaling | not covered | 100% of actual costs |