

Table of Benefits

The NGO Care Premier Plus and NGO Care Premier Plans are packaged health insurance solutions which include a Core Plan, an Out-patient Plan and a Dental Plan. These plans cannot be bought separately and the Core Plan option selected will determine the Out-patient and Dental Plans included in the cover.

NGO Care Premier Plus and NGO Care Premier Plans are only available for groups of five members or more.

Treatment Guarantee is required for all benefits indicated with a 1 or 2 in the following tables and may be required for other benefits. Please refer to note 2 within the "Notes" section for more information.

Core Plans

Core Plan Benefits	NGO Care Premier Plus	NGO Care Premier
Maximum plan benefit in €, USD (\$) and CHF	€1,500,000	€1,000,000
	\$2,025,000	\$1,350,000
	CHF1,950,000	CHF1,300,000
Hospital accommodation ¹		
- Private room	€150 / \$205 / CHF195 per day	N/A
- Semi-private room	Full refund	Full refund
Intensive care ¹	Full refund	Full refund
Prescription drugs and materials ¹ (in-patient and day-care treatment only) (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	Full refund	Full refund
Surgical fees, including anaesthesia and theatre charges ¹	Full refund	Full refund
Physician and therapist fees ¹ (in-patient and day-care treatment only)	Full refund	Full refund
Surgical appliances and materials ¹	Full refund	Full refund
Diagnostic tests ¹ (in-patient and day-care treatment only)	Full refund	Full refund
Organ transplant ¹	Full refund	Full refund
Psychiatry and psychotherapy ¹ (in-patient and day-care treatment only)	€3,000 / \$4,050 / CHF3,900	€1,500 / \$2,025 / CHF1,950
Accommodation costs for one parent staying in hospital with an insured child under 18 ¹	€50 / \$ 70 / CHF65 per day	€50 / \$ 70 / CHF65 per day
Emergency in-patient dental treatment	Full refund	Full refund
Day-care treatment ²	Full refund	Full refund
Kidney dialysis ²	Full refund	Full refund
Out-patient surgery ²	Full refund	Full refund
Nursing at home or in a convalescent home ² (immediately after or instead of hospitalisation)	€2,500 / \$3,375 / CHF3,250	€2,000 / \$2,700 / CHF2,600
Rehabilitation treatment (in-patient, day-care and out-patient treatment; must commence within 14 days of discharge, after the acute medical and/or surgical treatment ceases)	€2,500 / \$3,375 / CHF3,250	€2,000 / \$2,700 / CHF2,600
Local ambulance	Full refund	Full refund

Core Plan Benefits	NGO Care Premier Plus	NGO Care Premier
Emergency treatment outside area of cover (for trips of a maximum period of six weeks)	Full refund, max. 42 days	Full refund, max. 42 days
Medical evacuation ² <ul style="list-style-type: none"> Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre² Where ongoing treatment is required, we will cover hotel accommodation costs² Evacuation in the event of unavailability of adequately screened blood² If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs (max. 7 days)² 	Full refund	Full refund
Expenses for one person accompanying an evacuated person ²	€3,000 / \$4,050 / CHF3,900	€3,000 / \$4,050 / CHF3,900
Travel costs of insured family members in the event of an evacuation ²	€2,000 / \$2,700 / CHF2,600	€2,000 / \$2,700 / CHF2,600
Repatriation of mortal remains ²	€10,000 / \$13,500 / CHF13,000	€10,000 / \$13,500 / CHF13,000
Travel costs of insured family members in the event of the repatriation of mortal remains ²	€2,000 / \$2,700 / CHF2,600	€2,000 / \$2,700 / CHF2,600
CT and MRI scans (in-patient and out-patient treatment)	Full refund	Full refund
PET and CT-PET scans ² (in-patient and out-patient treatment)	Full refund	Full refund
Oncology ² (in-patient, day-care and out-patient treatment)	Full refund	Full refund
Purchase of a wig, prosthetic bra or other external prosthetic device for cosmetic purposes	€200 / \$270 / CHF260	€200 / \$270 / CHF260
Routine maternity ² (in-patient and out-patient treatment)	€4,500 / \$6,075 / CHF5,850	€1,250 / \$1,690 / CHF1,625
Complications of pregnancy and childbirth ²	Full refund	Full refund
Home delivery	€1,000 / \$1,350 / CHF1,300	€1,000 / \$1,350 / CHF1,300
Laser eye treatment	90% refund, up to €350 / \$475 / CHF455	90% refund, up to €200 / \$270 / CHF260
In-patient cash benefit (per night) (where treatment has been received free of charge)	€120 / \$160 / CHF155, max. 25 nights	€120 / \$160 / CHF155, max. 25 nights
Emergency out-patient treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Out-patient Plan)	€750 / \$1,015 / CHF975	€750 / \$1,015 / CHF975
Emergency out-patient dental treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Dental Plan)	€750 / \$1,015 / CHF975	€750 / \$1,015 / CHF975
Palliative care ²	Full refund, max. 30 days	Full refund, max. 30 days
Long term care ²	Full refund, max. 90 days per lifetime	Full refund, max. 90 days per lifetime

Additional Core Plan Services

Employee Assistance Programme* offers access to a range of 24/7 multilingual support services as follows: <ul style="list-style-type: none"> Confidential professional counselling (in-person, telephone, video and chat) Legal and financial support services Critical incident support Wellness website access 	Services available	Services available
Travel Security Services* offers 24/7 access to personal security information and advice for all your travel safety queries. This includes: <ul style="list-style-type: none"> Emergency Security Assistance Hotline (not a free phone number) Country intelligence and security advice Daily security news updates and travel safety alerts 	Services available	Services available
MyHealth Digital Services <ul style="list-style-type: none"> Manage your cover online with our app or portal anytime, anywhere Submit and track progress of claims Access your policy documents, health services, payment details and more 	Services available	Services available
Olive* Our Health & Wellness support program includes, for example: <ul style="list-style-type: none"> HealthSteps fitness app Access to wellness resources 	Services available	Services available
Second Medical Opinion Service* Offers access to expert help on the best treatment options available, if you have been diagnosed with a serious illness or had surgery recommended	Services available	Services available

Out-patient Plans

Out-patient Plan Benefits	NGO Care Premier Plus	NGO Care Premier
Maximum plan benefit in €, USD (\$) and CHF	No limit	€7,500
		\$10,125
		CHF9,750
Medical practitioner fees	Full refund	90% refund
Video consultation services*	Full refund	Full refund
Prescription drugs (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	Full refund	90% refund
Specialist fees	€120 / \$160 / CHF155 per visit	90% refund up to €100 / \$135 / CHF130 per visit
Prescribed ancillary nursing care	Full refund	90% refund
Diagnostic tests	Full refund	90% refund
Vaccinations	Full refund	90% refund
Chiropractic treatment, osteopathy, homeopathy, Chinese herbal medicine, acupuncture and podiatry (max. 12 sessions per condition for chiropractic treatment and max. 12 sessions per condition for osteopathic treatment, subject to the benefit limit)	€50 / \$70 / CHF65 per visit	N/A
Prescribed speech therapy and occupational therapy ²	Full refund, max. 20 visits	90% refund, max. 20 visits
Prescribed physiotherapy (initially limited to 12 sessions per condition; limit also applies to prescribed and non-prescribed physiotherapy sessions, where combined)		
Non-prescribed physiotherapy	5 visits (also subject to benefit limit of max. 20 visits)	5 visits (also subject to benefit limit of 90% refund, max. 20 visits)
Health and wellbeing checks including screening for the early detection of illness or disease. Such tests are limited to:	€300 / \$405 / CHF390	€100 / \$135 / CHF130
<ul style="list-style-type: none"> • Physical examination • Blood tests (full blood count, biochemistry, lipid profile, thyroid function test, liver function test, kidney function test) • Cardiovascular examination (physical examination, electrocardiogram, blood pressure) • Neurological examination (physical examination) • Cancer screening <ul style="list-style-type: none"> - Annual pap smear - Mammogram (every two years for women 45+, or earlier where a family history exists) - Prostate screening (yearly for men aged 50+, or earlier where a family history exists) - Colonoscopy (every five years for members aged 50+ or 40+ where a family history exists) - Annual faecal occult blood test • Bone densitometry (every five years for women aged 50+) • Well child test (for children up to the age of six years) 	15 visits	15 visits
Personal counselling	Full refund, max. 5 visits	90% refund, max. 5 visits
Psychiatry and psychotherapy (Referral from Doctor required for Psychotherapy)	€700 / \$945 / CHF910	N/A
Prescribed medical aids	€2,000 / \$2,700 / CHF2,600	90% refund, up to €1,000 / \$1,350 / CHF1,300
Annual eye examination	€120 / \$160 / CHF155 per visit	90% refund up to €100 / \$135 / CHF130 per visit
Prescribed glasses and contact lenses (eye test to be included under specialist fees, limited to one visit per year)	90% refund, up to €350 / \$475 / CHF455	90% refund, up to €200 / \$270 / CHF260

Dental Plans

Dental Plan Benefits	NGO Care Premier Plus	NGO Care Premier
Maximum plan benefit in €, USD (\$) and CHF	€2,000	€1,000
	\$2,700	\$1,350
	CHF2,600	CHF1,300
Dental treatment	90% refund, up to €1,000 / \$1,350 / CHF1,300	80% refund, up to €500 / \$675 / CHF650
Dental surgery	90% refund, up to €1,000 / \$1,350 / CHF1,300	80% refund, up to €500 / \$675 / CHF650

Dental Plan Benefits	NGO Care Premier Plus	NGO Care Premier
Periodontics	90% refund, up to €1,000 / \$1,350 / CHF1,300	80% refund, up to €500 / \$675 / CHF650
Orthodontic treatment	50% refund, up to €1,000 / \$1,350 / CHF1,300	N/A
Orthodontic treatment (for children up to and including 18 years of age)	90% refund, up to €500 / \$675 / CHF650	N/A
Dental prostheses	90% refund, up to €1,000 / \$1,350 / CHF1,300	80% refund, up to €500 / \$675 / CHF650

Repatriation Plan

The optional Repatriation Plan can be purchased in addition to the NGO Care Premier Plus or NGO Care Premier Plans (which include a Core, Out-patient and Dental Plan). The Repatriation Plan cannot be bought separately.

Repatriation Plan Benefits	NGO Care Premier Plus and NGO Care Premier
Medical repatriation ² <ul style="list-style-type: none"> Where necessary treatment is not available locally, you can choose to be medically evacuated to your home country instead of the nearest appropriate medical centre² Where ongoing treatment is required, we will cover hotel accommodation costs² Repatriation in the event of unavailability of adequately screened blood² If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs (max. 7 days)² 	Full refund
Expenses for one person accompanying a repatriated person ²	€3,000 / \$4,050 / CHF3,900
Travel costs of insured family members in the event of a repatriation ²	€2,000 / \$2,700 / CHF2,600
Travel costs of insured members to be with a family member who is at peril of death or who has died	€1,500 / \$2,025 / CHF1,950

* Certain services which may be included in your plan are provided by third party providers outside the Allianz group, such as the Employee Assistance Programme, Travel Security services, HealthSteps app, Second Medical Opinion and tele-medicine services. If included in your plan, these services will show in your Table of Benefits. These services are made available to you subject to your acceptance of the terms and conditions of your policy and the terms and conditions of the third parties. These services may be subject to geographical restrictions. The HealthSteps app does not provide medical or health advice and the wellness resources contained within Olive are for informational purposes only. The HealthSteps app and the wellness resources contained within Olive shouldn't be regarded as a substitute for professional advice (medical, physical or psychological). They are also not a substitute for the diagnosis, treatment, assessment or care that you may need from your own doctor. You understand and agree that AWP Health & Life SA (Irish Branch) and AWP Health & Life Services Limited are not responsible or liable for any claim, loss or damage, directly or indirectly resulting from your use of any of these third party services.

Notes

1. Area of cover

Allianz Care offers five different areas of cover:

- Africa only
- Worldwide, which provides cover anywhere in the world
- Worldwide excluding USA
- Worldwide excluding USA for Hong Kong and China residents
- Worldwide excluding USA for Switzerland and Singapore residents

The chosen area of cover will be specified in the Insurance Certificate.

2. Treatment Guarantee

Certain treatments and costs require submission of a Treatment Guarantee Form in advance. Following approval by Allianz Care, cover for these required treatments or costs can then be guaranteed. In the Table of Benefits, benefits which require pre-approval through submission of a Treatment Guarantee Form are indicated by either a 1 or a 2. These benefits are listed below, along with further important details:

- All in-patient benefits as listed¹.
- Day-care treatment².
- Kidney dialysis².
- Out-patient surgery².
- MRI (Magnetic Resonance Imaging) scan. Treatment Guarantee may be required for this test if you would like us to settle the bill directly with the medical provider.
- PET² (Positron Emission Tomography) and CT-PET² scans.
- Nursing at home or in a convalescent home².
- Routine maternity² and complications of pregnancy and childbirth² (in-patient treatment only).
- Oncology² (in-patient and day-care treatment only).
- Occupational therapy² (out-patient treatment only).
- Medical evacuation/repatriation where covered².
- Travel costs of insured family members in the event of an evacuation/repatriation².
- Repatriation of mortal remains².
- Travel costs of insured family members in the event of the repatriation of mortal remains².
- Expenses for one person accompanying an evacuated/repatriated person².
- Palliative care².
- Long term care².

¹ If Treatment Guarantee is not obtained for the benefits listed with a 1, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only 80% of the eligible benefits.

² If Treatment Guarantee is not obtained for the benefits listed with a 2, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only 50% of the eligible benefits.

We should be contacted at least five working days before receiving treatment, so that we can ensure that there will be no delays at the time of admission. This will ensure that members have cashless access to hospitals for in-patient treatment, where possible, as well as providing the advantage of treatment being overseen by our medical professionals.

In the case of an emergency, we should be informed within 48 hours of the event to ensure that no Treatment Guarantee penalty will apply to the claim.

3. Claims process and turnaround

Allianz Care has a simple claiming process in place to ensure that members can seek reimbursement for medical expenses. Fully completed Claim Forms are processed and payment instructions issued to the member's bank within 48 hours. Where further information is required to complete the claim, the member/medical practitioner will automatically be notified by email or mail within 24 hours of receipt of the Claim Form. An email is sent automatically to the member (where email addresses are provided to us) to advise them when the claim is processed.

This swift claims processing policy ensures that our members receive their claims payment in the most effective and efficient manner.

4. Benefit limits

There are two kinds of benefit limits shown in the Table of Benefits. The maximum plan benefit, which applies to certain plans, is the maximum we will pay for all benefits in total, per member, per Insurance Year, under that particular plan. Some benefits also have a specific benefit limit, for example "Surgical appliances and materials". Specific benefit limits may be provided on a "per Insurance Year" basis, a "per lifetime" basis or on a "per event" basis, such as per trip, per visit or per pregnancy. Where a specific benefit limit applies or where the term "Full refund" appears next to certain benefits, the refund is subject to the maximum plan benefit, if one applies to your plan(s). All limits are per member, per insurance year, unless otherwise stated in your Table of Benefits.

5. Policy Terms and Conditions

Please note that cover for smaller groups is subject to underwriting. We reserve the right to apply special conditions to such group schemes, including the recalculation of the premium, to reflect the higher risk due to pre-existing medical conditions or additional risk factors.

Pre-existing conditions (including any pre-existing chronic conditions) are covered subject to these being declared on the Application Form and subject to the terms and conditions of your policy.

In addition, cover is conditional upon acceptance of your application, which is only confirmed when an Insurance Certificate is provided. This Table of Benefits provides an outline of the cover we provide under each plan. Cover is subject to our policy terms and conditions, as detailed in our Employee Benefit Guide, which is issued to members upon policy inception. Our Employee Benefit Guide can also be downloaded from our website: www.allianzcare.com/en/group-hub/ipfe.html

If you have any queries, please do not hesitate to contact us:

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