

International Healthcare Plans for Lebanon Valid from 1st July 2018

INDIVIDUAL POLICIES Table of Benefits



REASONS TO CHOOSE US



Flexible modular plans – ability to combine multiple plans



Access to Expat Assistance Programme and Travel Security Services



Access to health and wellbeing benefits, including preventative surgery - helping you to stay healthy



Comprehensive medical provider network



plans (full refund for specialist fees and diagnostic tests, generous cover for alternative treatment and physiotherapy)



24/7 multilingual Helpline and Emergency Assistance Services



Cashless access to treatment within our Medical Provider Network

POLICY TERMS AND CONDITIONS

This Table of Benefits provides an overview of the cover we provide under each plan. Cover is subject to our policy terms and conditions, as detailed in our Individual Benefit Guide. Details of our Treatment Guarantee process can also be found in this guide, which is available on our website **www.allianzworldwidecare.com/lebanon**

CORE PLANS

Core Plan Benefits	Allianz SNA	Allianz SNA Club	Allianz SNA Classic	Allianz SNA
	Premier Individual	Individual	Individual	Essential Individual
Maximum plan benefit USD (\$)	\$3,037,500	\$2,025,000	\$1,518,750	\$675,000

In-patient benefits*

Treatments and costs marked with an asterisk (*) require pre-approval through submission of a Treatment Guarantee Form.

Hospital accommodation*	Private room			Semi-private room	
Intensive care*	✓	→ →			
Prescription drugs and materials* In-patient and day-care treatment only. Prescription drugs are those which legally can only be purchased when you have a doctor's prescription	•	~	~	~	
Surgical fees, including anaesthesia and theatre charges*	✓	✓	✓	~	
Physician and therapist fees* In-patient and day-care treatment only	✓	✓	~	~	
Surgical appliances and materials*	✓	✓	~	~	
Diagnostic tests* In-patient and day-care treatment only	✓	~	~	~	
Organ transplant*	✓	✓	~	\$13,500	
Psychiatry and psychotherapy* In-patient and day-care treatment only. 10 month waiting period applies	~	\$8,100	\$6,750	\$6,750	
Accommodation costs for one parent staying in hospital with an insured child under 18^{\ast}	✓	~	~	~	
Emergency in-patient dental treatment	✓	✓	~	~	

Core Plan Benefits	Premier Individual	Individual	Individual	Essential Individual
Other benefits Treatments and costs marked with an asterisk (*) require	pre-approval through	submission of a Treat	ment Guarantee Form	1.
Day-care treatment*	~	✓	✓	~
Kidney dialysis*	✓	✓	✓	~
Out-patient surgery*	✓	✓	✓	~
Nursing at home or in a convalescent home* Immediately after or instead of hospitalisation	\$5,740	\$3,820	\$3,375	\$3,375
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	\$5,970	\$4,050	\$3,375	\$2,700
Local ambulance	~	✓	✓	\$675
Emergency treatment outside area of cover For trips of a maximum period of six weeks	Max. 42 days	Max. 42 days	Max. 42 days	Up to \$13,500 max. 42 days
Medical evacuation*				
Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre'	~	✓	✓	~
Where ongoing treatment is required, we will cover hotel accommodation costs'	✓	✓	✓	~
Evacuation in the event of unavailability of adequately screened blood*	✓	✓	✓	V
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	Max. 7 days	Max. 7 days	Max. 7 days
Expenses for one person accompanying an evacuated person*	\$4,050	\$4,050	\$4,050	\$4,050
Travel costs of insured family members in the event of an evacuation*	\$2,700 per event	\$2,700 per event	\$2,700 per event	\$2,700 per event
Repatriation of mortal remains*	\$13,500	\$13,500	\$13,500	\$13,500
Travel costs of insured family members in the event of the repatriation of mortal remains*	\$2,700 per event	\$2,700 per event	\$2,700 per event	\$2,700 per event
CT and MRI scans In-patient and out-patient treatment	~	✓	~	V
PET* and CT-PET* scans In-patient and out-patient treatment	~	~	✓	~
Oncology* In-patient, day-care and out-patient treatment	✓	✓	✓	~
- Purchase of a wig, prosthetic bra or other external prosthetic device for cosmetic purposes	\$270 per lifetime	\$270 per lifetime	\$270 per lifetime	\$270 per lifetime
Preventative surgery* (in-patient and out-patient treatment)	\$40,500	\$27,000	N/A	N/A
Complications of pregnancy and childbirth* 10 month waiting period applies	~	✓	✓	N/A
Laser eye treatment (limited to one treatment per lifetime)	\$1,350, per lifetime	\$675, per lifetime	N/A	N/A
In-patient cash benefit (per night) Where treatment has been received free of charge	\$205, max. 25 nights	\$205, max. 25 nights	\$205, max. 25 nights	\$205, max. 25 nights
Palliative care*	~	✓	✓	~
Long term care*	Max. 90 days per lifetime			
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	\$1,015	\$1,015	\$1,015	N/A
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	\$1,015	\$675	N/A	N/A

Core Plan Benefits	Allianz SNA Premier Individual	Allianz SNA Club Individual	Allianz SNA Classic Individual	Allianz SNA Essential Individual
Additional Core Plan Benefits				
Expat Assistance Programme** offers access to a range of 24/7 multilingual support services as follows: Confidential professional counselling (in-person, phone, video, on-line chat and email) Legal and financial support services Critical incident support Wellness website access	•	•	•	•
Travel Security Services*** offers 24/7 access to personal security information and advice for all your travel safety queries. This includes: • Emergency Security Assistance Hotline**** • Country intelligence and security advice • Daily security news updates and Travel safety alerts	•	~	•	•

Benefits marked with a \checkmark are covered in full, subject to the Maximum plan benefit.

- ** The Expat Assistance Programme Services are made available by Morneau Shepell Limited, subject to your acceptance of our terms and conditions. You understand and agree that AWP Health & Life SA Irish Branch and/or AWP Health & Life Services Limited are not responsible or liable for any claim, loss or damage directly or indirectly resulting from your use of the Expat Assistance Programme Services.
- *** The Travel Security Services are made available by WorldAware LTD (previously Red24), subject to your acceptance of our terms and conditions.

 You understand and agree that AWP Health & Life SA Irish Branch and/or AWP Health & Life Services Limited are not responsible or liable for any claim, loss or damage directly or indirectly resulting from your use of the Travel Security Services.
- **** Not a Freephone number.

CORE PLAN DEDUCTIBLES

To reduce your Core Plan premium, simply select an optional deductible from the list below and read across to find the relevant premium discount. The level of discount will depend on whether you have selected a Maternity Plan. Please note that either a Core Plan deductible OR an Out-patient Plan deductible can be chosen (details follow). Where a deductible is selected it is payable per person, per Insurance Year. Also, our premiums are expressed in whole numbers (i.e. without any cents), therefore, percentages may be slightly higher or lower than those stated below.

Optional Core Plan Deductibles per Insurance Year	Discount if a Maternity Plan is not included in your cover	Discount if a Maternity Plan is included in your cover
No deductible	0% premium discount	0% premium discount
\$610 deductible	5% premium discount	2.5% premium discount
\$1,015 deductible	10% premium discount	5% premium discount
\$2,025 deductible	20% premium discount	10% premium discount
\$4,050 deductible	35% premium discount	17.5% premium discount
\$8,100 deductible	50% premium discount	25% premium discount
\$13,500 deductible	60% premium discount	30% premium discount

OUT-PATIENT PLANS

The following Out-patient Plans can be purchased with any of our Core Plans. They cannot be bought separately.

Out-patient Plan Benefits	Allianz SNA Gold Individual	Allianz SNA Silver Individual	Allianz SNA Bronze Individual	Allianz SNA Crystal Individual
Maximum plan benefit	~	\$25,000	\$11,475	\$6,480
Medical practitioner fees and prescription drugs Prescription drugs are those which legally can only be purchased when you have a doctor's prescription	~	~	\$2,500	\$1,350
Specialist fees	~	~	~	✓
Diagnostic tests	~	✓	~	~
Vaccinations	~	~	~	N/A
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	~	~	\$1,520	\$675
Prescribed physiotherapy Initially limited to 12 sessions per condition; limit also applies to prescribed and non- prescribed physiotherapy sessions, where combined	~	~	\$1,520	\$675
- Non-prescribed physiotherapy	5 visits	5 visits	5 visits	5 visits
Prescribed speech therapy, oculomotor therapy and occupational therapy*	✓	✓	\$1,520	\$675
Infertility treatment 18 month waiting period applies	\$16,200 per lifetime	\$16,200 per lifetime	N/A	N/A
Psychiatry and psychotherapy 18 month waiting period applies	30 visits	20 visits	N/A	N/A
Prescribed medical aids	~	\$3,375	N/A	N/A
Dietician fees	4 visits	N/A	N/A	N/A
Prescribed drugs Must be prescribed by a physician, although a prescription is not legally required for purchase	\$70	N/A	N/A	N/A

OUT-PATIENT PLAN DEDUCTIBLES

To reduce your Out-patient Plan premium, simply select an optional deductible from the list below and read across to find the relevant premium discount. Where a deductible is selected it is payable per person and per out-patient visit. Please note that either an Out-patient Plan deductible OR a Core Plan deductible can be chosen. Also, our premiums are expressed in whole numbers (i.e. without any cents), therefore, percentages may be slightly higher or lower than those stated below.

Out-patient Plan Deductibles	Discount
No deductible	0% premium discount
\$10	2% premium discount
\$14	3.5% premium discount
\$15	4% premium discount
\$20	5% premium discount
\$25	6% premium discount
\$50	15% premium discount

WELLNESS PLANS

The following Wellness Plans can be purchased with any of the Core Plans. They cannot be bought separately. These Wellness Plans are available on a reimbursement basis only, whereby members pay for their checks and then use our Claim Form to obtain reimbursement for eligible expenses

Wellness Plan Benefits	Allianz SNA Gold Health, Wellbeing & Optical Plan	Allianz SNA Silver Health, Wellbeing & Optical Plan	Allianz SNA Bronze Health, Wellbeing & Optical Plan
Prescribed glasses and contact lenses including eye examination	\$120	\$120	\$120
Health and wellbeing checks including screening for the early detection of illness or disease Checks are limited to: 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 Annual pap smear Mammogram (every two years for women aged 45+, or earlier where a family history exists) Prostate screening (yearly for men aged 50+, or earlier 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, up to a maximum of 15 visits per lifetime)	\$1,080	\$810	\$400
*BRCA1 and BRCA2 genetic test (where a direct family history exists; Gold Individual Plan only)		N/A	N/A

MATERNITY PLANS

OPTIONAL

The Allianz SNA Premier Maternity Plan can only be purchased with the Allianz SNA Premier Individual Core Plan. The Allianz SNA Club Maternity Plan can only be purchased with the Allianz SNA Club Individual Core Plan. Please note that an Out-patient Plan must be selected in conjunction with a Maternity Plan. Maternity Plans are available to couples and families i.e. a spouse/partner must also be insured under the policy.

Maternity Plan Benefits	Premier Maternity	Club Maternity
Routine maternity* In-patient and out-patient treatment. 10 month waiting period applies	\$10,125 per pregnancy	\$6,650 per pregnancy
Complications of childbirth* In-patient treatment. 10 month waiting period applies	\$20,250 per pregnancy	\$13,500 per pregnancy

DENTAL PLANS

OPTIONAL

Allianz SNA Dental Plan 1 can only be purchased if both the Allianz SNA Premier Individual Core Plan and Allianz SNA Gold Individual Out-patient Plan have been selected. Allianz SNA Dental Plan 2 & Allianz SNA Dental Plan 3 can be purchased with any of the Core Plans. None of the Dental Plans can be bought separately.

Dental Plan Benefits	Allianz SNA Dental 1	Allianz SNA Dental 2	Allianz SNA Dental 3
Maximum plan benefit	~	\$2,770	\$700
Dental treatment	100% refund	80% refund	80% refund
Dental surgery	100% refund	80% refund	80% refund
Periodontics	80% refund	80% refund	80% refund
Orthodontic treatment and dental prostheses 10 month waiting period applies	65% refund, up to \$6,750	50% refund	50% refund

REPATRIATION PLAN



The following Repatriation Plan can be purchased with any of the Core Plans. It cannot be bought separately.

Repatriation Plan Benefits	
Medical repatriation*	
Where the necessary treatment is not available locally, you can choose to be medically repatriated to your home country instead of to the nearest appropriate medical centre. This benefit only applies when your home country is within your area*	✓
Where ongoing treatment is required, we will cover hotel accommodation costs*	✓
Repatriation in the event of unavailability of adequately screened blood"	✓
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
Expenses for one person accompanying a repatriated person*	\$4,050
Travel costs of insured family members in the event of a repatriation*	\$2,700 per event
Travel costs of insured members to be with a family member who is at peril of death or who has died	\$2,025 per lifetime

AREA OF COVER

We offer a choice of two different geographical areas of cover. The chosen area of cover will be specified in the Insurance Certificate.





RESIDENCY

Cover is offered to individuals residing in Lebanon who travel abroad, or to Lebanese individuals residing abroad.

Talk to us, we love to help!

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

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The insurer of this policy is Allianz SNA s.a.l., registered in Lebanon in the Insurance Companies Register under No. 104, dated 3.23.1963 (as per decree No. 177/1 and subject to Legislative decree No. 9812 dated 5.4.1968 MOF 4698). Address: Allianz SNA Building Hazmieh, P.O. Box 16-6528, Beirut, Lebanon.

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