

OPAL SILVER

HEALTHCARE PLAN

		OPAL / SILVER (USD/EUR/GBP)	
INSURED PERSON AND PLANS			
Coverage		Worldwide excluding USA & Canada	
Insured person		Main insured spouse /partner, children up to 25 and other	
		relatives who are economically dependents	
Limit per insured person and per calendar year		2'000'000	
MEDICAL EXPENSES			
Deductible or co-payment		20% with min 250/year and max 5'000/year	
Hospitalisation and outpatient surgery		80% (single room)	
Hospital cash benefit		30 / night	
Outpatient benefit	Physician and specialist consultations, prescribed medicines and drugs, medical imaging, diagnostic and laboratory tests, prescribed medical aids and surgical appliances	80%	
	Preventive care and examinations	80% up to 900 / year	
	Complementary / Alternative Medicine	80% up to 3'000 / year	
Local ambulance benefits		80%	
Private nursing benefit	Inpatient in hospital or nursing home	80%	
	Home nursing by a registered nurse	60%	
	(up to 60 days per policy per year) Palliative Care	200/ up to 2/000	
Labarry and materia:		80% up to 3'000	
Labour and maternity (deferment period: 10 months)	Pregnancy, labour, treatment before and after birth Complications of pregnancy	80% up to 7'500	
	Congenital conditions	80% up to 60'000	
Cancer treatment benefit		80%	
Organ transplant benefit		80% up to 120'000 per illness	
Mental and behavioural disorders	Inpatient treatment	80% up to 60'000	
per insured person and per policy	(after 10 months waiting period)		
period	Per insured person / once during policy period		
	Outpatient treatment	80% up to 12 sessions	
	(after 18 months waiting period)		
	Per insured person / once during		
	policy period		
Emergency dental benefit	Accidental	80% once during policy period	
Emergency vision benefit	Accidental	80% once during policy period	
Linergency vision benefit	Accidental	solve once during policy period	

DENTAL AND VISION CARE (the aggregate benefit is limited to 3'000)			
Dentist fees & dental care (preventive and surgical treatment), bone		100% up to 3'000	
grafts, odontology (including ging	ivectomy)		
Dental prosthesis		60% up to 3'000	
Orthodontic treatment (begun before the child's 16 th birthday)		60% up to 3'000	
Vision treatment		100% up to 3'000	
Laser eye surgery		80% up to 3'000	
Optical devices (Includes frame and lenses)		100% max 250 every 2 years	
ASSISTANCE			
Medical advice over the phone		Included	
Second opinion benefit		Included	
Country guides		Included	
Worldwide emergency assistance		100%	
Repatriation assistance	Accident Death	 Provision of a ticket to return to the host country of the insured person, after his/her recovery – provided this is not combined with the dispatch of a replacement employee. This means a max of 2 tickets (1 return for the insured person who has been repatriated and 1 ticket for replacement employee) Provision of a round trip ticket to the insured or a family member to attend the funeral of a family member (father - mother or children or brothers - sisters) who died outside the host country of the insured person. 	
POLITICAL EVACUATION			
Political evacuation		Up to maximum 50'000	
THIRD PARTY LIABILITY / TENANT	'S LIABILITY		
Bodily injury		Included	
Property damage		Included	
Financial consequential damage		Included	
Loss of rent/use		Equivalent of one year's rent	
LEGAL ASSISTANCE			
Legal Assistance (Deductible of 10% with a minimum of 250)		Up to maximum 15'000	
Bail Bond		Up to maximum 50'000	

The General terms and conditions are based on the expatriate care plan reference AIG EUR AH GROUP PLUS EXPATCARE GC LUX EN 20121203 H