



**24 Hours Worldwide Emergency Treatment**



**Guarantee Renewability**



**Your Choice of Discount Options**



**Substandard Risks Considered**

### COVERAGE OF SILVER PLAN

Benefits	No Limit on Hospital choice
	Worldwide Evacuation
Maximum Limit per Disability per Policy year <u>Such as</u> Heart, Cancer, Kidney, Liver, Lung Diseases, etc.	5,000,000
Inpatient Benefits	
Room and Board, Nursing Charges, Other Medical Charge (Maximum limit per day)	8,000
Intensive Care Unit and Coronary Care Unit	Normal & Customary Charge
Operating Theatre	Normal & Customary Charge
Surgical's Fee Including Pre-Surgical Assessment and Normal Post-Surgical Care (Actual Expenses)	Normal & Customary Charge
Organ Transplant's Fee for Liver, Heart, Lung, Kidneys, Bone Marrow and Kidney Dialysis Including Donor's Costs (Maximum per disability)	1,000,000
Anaesthetist's Fee	Normal & Customary Charge
Private Nurse Fee recommended by physician immediately after hospitalization (Up to 30 days)	Normal & Customary Charge
Inpatient Psychiatric/Mental Disorder	50,000 disability   200,000 life time
Hospital Expenses : Diagnostic Laboratory Fee, X-rays, Prescribed Medicines, Blood and Plasma, Wheel Chair Rentals, Surgical Appliances and Devices	Normal & Customary Charge
Permanent implanted medical devices and artificial organs (Subject to 5 years waiting period.)	300,000
Physician's Daily Hospital Visit (Maximum per day)	Normal & Customary Charge
Specialist's consultation fee	Normal & Customary Charge
Emergency OPD within 24 hours, maximum per accident	Normal & Customary Charge
Emergency Local Ambulance Service Including equipment and staff fee	Full Indemnified
Outpatient Benefits	
Doctor Consultation, Medicines, X-ray, Laboratory tests, Outpatient Surgery, Dressing, Chemotherapy, Radiation and Alternative Treatment when referred by attending physician (Maximum per day)	Normal & Customary Charge
Allowable number of visits to Chiropractor, Accupunturist and Physiotherapist permitted without first reference to an attending Physician (Maximum visit per year)	5 visits
Emergency Expenses	
Emergency Assistance: 24 Hours a Day and 7 Days a Week	Fully Indemnified
Emergency Medical Evacuation	Fully Indemnified

Maternity and Miscarriage Expenses	
Maternity Expenses Maximum Limit per Pregnancy. (Subject to 280 days waiting period)	60,000 Normal Delivery 100,000 Surgical Delivery
Miscarriage in case of Dilation and Curettage Maximum Limit per Pregnancy (Subject to 90 days waiting period)	40,000
Other Benefits	
Personal Accident Benefit: Covers loss of life, loss of one or both hands, loss of vision in one or both eyes, or permanent and total disability caused directly and solely by accident - Additional rate 145 Baht/100,000 Baht	200,000 (Maximum Coverage 20,000,000)
Dental Benefit: Pay 80%	80,000 / Optional
Vision Benefit: Pay 80%	20,000 / Optional
Discount Options	
Outpatient Exclusion	20% Discount
20,000 Baht Deductible Option (You pay the first 20,000 Baht of your eligible medical expenses)	15% Discount
40,000 Baht Deductible Option (You pay the first 40,000 Baht of your eligible medical expenses)	25% Discount
100,000 Baht Deductible Option (You pay the first 100,000 Baht of your eligible medical expenses)	32.5% Discount
200,000 Baht Deductible Option (You pay the first 200,000 Baht of your eligible medical expenses)	40% Discount
300,000 Baht Deductible Option (You pay the first 300,000 Baht of your eligible medical expenses)	50% Discount
• The application of each discount is based on the reducing value of the premium after the application of each discount option chosen	
Family Discount	
For 1 Family with Father or Mother with Children - one or more	5% Discount
No Claim Discount	
No claim for 1 year	10% Discount
No claim for 2 consecutive year	15% Discount
No claim for 3 consecutive year	20% Discount
<b>Remark</b> <ul style="list-style-type: none"> <li>The limit unit and premium are in Thai Baht.</li> <li>The applicant must be Thai resident or reside in Thailand at least 6 months in 12 months period.</li> <li>If a claim is made by any insured or covered person under the Policy during a Policy year, any No Claim Discount achieved will be lost and the status of the discount will be as at 1st policy year shown above.</li> <li>If a claim relating to the previous year is subsequently submitted and accepted, and a No Claim Discount has already been given, The Company reserves the right to deduct the equivalent monetary amount of the No Claim Discount from the value of the claim. Any No Claim Discount achieved will be lost and the status of the discount will be as at 1st policy.</li> <li>The No Claim Discount applies only to the premium in respect of the basic benefits. Claims against any additional benefits in the Policy for Vision or Dental will not affect the No Claim Discount.</li> <li>Elective Treatment for North America, Japan, HongKong, EU Countries, Switzerland and Singapore - This benefit is permitted only on a case by case basis with no guarantee of acceptance.</li> <li>The emergency medical evacuation service shall activate while the insured person travelling more than 150 kilometres away from home for less than 90 consecutive days.</li> <li>Information in this brochure is only preliminary information provided for the applicant to consider for applying for health insurance coverage from the company, all insuring conditions shall be referred to Definitions, General Definitions, General Exclusions and Insuring Agreement of the health insurance policy of The Company.</li> </ul>	