



The strength behind your insurance

F O U N D A T I O N S E R I E S



FOUNDATION SERIES

Foundation Series is designed for discerning clients who want reasonably priced medical care and worldwide coverage in times of need. Foundation Series has a wide range of flexible medical benefits to meet your health care needs with the convenience of an all in one plan - medical treatment, maternity, preventative health benefit and personal accident.



Dental Benefits are optional to match your needs and budget



Emergency Assistance



Extensive **Direct Billing network in Vietnam**



Worldwide Coverage

SCHEDULE OF BENEFITS (in VND)

	STANDARD	EXECUTIVE	PREMIER
Maximum Benefit For Any ONE Disability and Sequelae - Covers normal, usual and customary charges, per disability per lifetime for:	500,000,000	1,000,000,000	2,000,000,000
Treatment Area	Worldwide	Worldwide	Worldwide
INPATIENT BENEFITS – Covers normal, usual and customary charges for:			
Room and Board (standard room)	Semi-Private up to 2,000,000/day (Private in Vietnam)	Semi-Private up to 3,000,000/day (Private in Vietnam)	Semi-Private up to 4,000,000/day (Private in Vietnam)
Parent Accommodation – An extra bed in the same room for a parent accompanying an insured child under 18 years old	Up to limit of Room & Board of the Insured Person		
Intensive Care Unit, Coronary Care Unit – 15 days maximum per disability per year	3,000,000/day	5,000,000/day	7,000,000/day
Physician's Daily Hospital Visit	As Charged		
Specialist's Fee	As Charged		
Operating Room	20,000,000 per operation	As Charged	As Charged
Surgeon's Fee – Includes pre-surgical assessment and normal post-surgical care for each operation	100,000,000 per operation	200,000,000 per operation	240,000,000 per operation
Anaesthetist's Fee	Up to 30% of eligible Surgeon's Fee		
Pre and Post Hospitalization (including Rehabilitation) – Within 30 days before admission and 90 days after discharge up to	10,000,000 per disability per year	15,000,000 per disability per year	20,000,000 per disability per year
Organ Transplant – Fees for kidney, heart, lung, liver and bone marrow transplants (up to 50% for donor and the remaining percentages for recipient, at the option of the Insured Person) to a total of This benefit is a lump sum maximum per organ per lifetime and no other policy benefits are payable in respect of Organ Transplant.	100,000,000	200,000,000	300,000,000
Home Nursing – Immediately after hospitalization and certified to be medically necessary by the attending physician for up to 30 days per disability per year	400,000/day	600,000/day	1,000,000/day
Miscellaneous Inpatient Charges – For required diagnostic laboratory tests, x-rays, prescribed medicines; professional fees; blood and plasma; wheel chair rentals; outpatient surgery; surgical appliances and devices; and intra-operative standard prosthetics (as approved by the Company)	80,000,000 per disability per year	140,000,000 per disability per year	210,000,000 per disability per year
Maternity Benefit – Maximum limit per pregnancy after a 12-month waiting period (90 days for miscarriage and therapeutic abortion) up to When both husband and wife are insured, the limit shall be increased by 50%	No	10,000,000	15,000,000
Free New Born cover – A child of an Insured Person is eligible for the same medical plan as the Insured Person 15 days after the date of birth, or the date of discharge on submission of application to the Company whichever is the later until the Insured Person's next renewal for free	No	Included	Included
Preventive Health Benefit – Annual limit for routine check-up, vaccinations, appliances, vitamins	1,500,000	2,000,000	3,000,000

	STANDARD	EXECUTIVE	PREMIER
Burial and Funeral	6,000,000	10,000,000	10,000,000
Personal Accident Benefits	30,000,000	40,000,000	60,000,000
EMERGENCY BENEFITS - Subject to the overall maximum limit per disability			
Accidental Damage to Teeth – Emergency treatment for up to 7 days following accidental loss or damage caused to sound natural teeth	10,000,000 per accident	15,000,000 per accident	20,000,000 per accident
Accidental Emergency Outpatient Treatment - For covered accident which has been treated within 24 hours of the accident by the outpatient department of hospital, clinic, doctor's office	As Charged		
Emergency Local Ambulance Service	As Charged		
24-Hour Emergency Assistance Services and Emergency Medical Evacuation Service	Included		
Additional Travel Expenses (following Evacuation) – One economy class airline ticket to return an Insured Person to the Country of Residence	Included		
OUTPATIENT BENEFITS: Client can choose any plan			
Maximum Benefit per year	24,000,000	36,000,000	48,000,000
Outpatient Benefit – Physician and specialists' fees for office visits, physiotherapist, and chiropractor when referred by the attending physician; and, for required diagnostic laboratory tests, x-rays and prescribed medicines	1,500,000/visit	2,000,000/visit	2,500,000/visit
Alternative Medicines – Fees for visits to homeopath, osteopath, acupuncturist, bonesetter, herbalist and Chinese medicine practitioner; and prescribed herbs up to an annual limit of	5,000,000		

OPTIONAL BENEFITS
Dental Benefit 1 – Covers 80% of normal, usual and customary charges for Eligible Expenses per year up to VND5,000,000
Dental Benefit 2 – Covers 80% of normal, usual and customary charges for Eligible Expenses per year up to VND10,000,000

PREMIUM RATES (UNIT: VND1,000)

AGE GROUP	INPATIENT			OUTPATIENT		
	Standard	Executive	Premier	Standard	Executive	Premier
0-5	3,865	4,756	5,871	3,567	5,477	6,739
6-18	3,792	4,668	5,761	3,501	5,375	6,614
19-25	5,251	6,394	10,405	2,627	4,546	6,005
26-30	5,761	6,928	11,280	2,898	5,447	7,196
31-35	6,199	7,463	12,179	3,062	5,792	7,633
36-40	6,685	8,071	13,152	3,791	6,081	8,073
41-45	7,147	8,679	13,614	3,989	7,586	10,042
46-50	8,265	10,162	15,461	4,214	7,949	10,504
51-55	9,359	11,669	17,625	4,405	8,364	11,038
56-60	11,717	14,319	21,393	4,605	8,730	11,547
61-65	14,585	19,059	28,200	4,840	9,117	12,062
66-70*	21,878	28,589	42,300	7,260	13,676	18,094
71-75*	32,816	42,883	63,449	10,890	20,514	27,141

* Renew Only

OPTIONAL BENEFITS	
Dental Benefit 1	2,100
Dental Benefit 2	3,780

DISCOUNT (Discount Options are not applicable to Optional Benefits)	
3 – 4 Insured Persons	5%
5 – 10 Insured Persons	10%
11 – 20 Insured Persons	15%
21 Insured Persons and above	20%

NOTE	
- Smoker has 15% loading.	
-These medical plans are available for residents of Vietnam only. Residents in other countries will be subject to individual consideration.	
- This brochure is not a contract. For exact wording and complete details of the cover, terms, conditions and exclusions of the policy please refer to the policy itself.	



**PACIFIC
CROSS**
V I E T N A M

PACIFIC CROSS VIETNAM is a part of an international group managing and designing travel and medical insurance benefits for people living and working in Asia. Pacific Cross Vietnam is a professional Third Party Administrator (TPA) and is **the strength behind your insurance.**

Please contact us for a free consultation!

Provided by:
**HUNG VUONG
ASSURANCE CORPORATION**



**BẢO HIỂM
HÙNG VƯƠNG**



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