

Oriental Insurance

Good Health Begins Here

DUBAI



ORIENTAL WELLNESS

HEALTH INSURANCE POLICY



800 NATURE (628873)
www.oicgulf.ae

Thank you for choosing Oriental Insurance to manage your healthcare benefits. We assure you of a healthy partnership through the policy year and beyond.



THE ORIENTAL INSURANCE CO. LTD.

TABLE OF BENEFITS (TOB)

ORIENTAL WELLNESS – SME 3

Coverage Details	
Area of Cover	UAE, Indian Sub-Continent, South East Asia and Arab countries IP treatments covered in India, Pakistan, Nepal, Bangladesh and Sri Lanka on Elective direct basis subject to prior approval. <u>IP cashless in India.</u>
Geographical Territory - Extended	Not Covered
Limit per insured per annum	AED 250,000 (including any coinsurance and/or deductibles)
Third Party Administrator	VIDAL MEDICAL SERVICES LLC
Eligibility of Cover	Employees and Dependents holding valid Dubai and Northern Emirates Visas (Excluding Abu Dhabi & Al Ain).
Network	VIDAL MEDICAL SERVICES LLC "SN NETWORK" , <u>Direct billing (Cashless) access in India for IP.</u> Direct billing arrangement for IP on pre-approval available in Pakistan, Nepal, Bangladesh, and Sri Lanka.
Pre-existing & Chronic conditions (In-patient & Out-patient combined) Note: Where a pre-existing or chronic condition develops into an emergency within the 6-month exclusion period this must be covered up to the annual aggregate limit)	Treatment for chronic & pre-existing conditions excluded for first 6 months of first scheme membership. Included thereafter

In-Patient Benefit	
In-patient and Day-patient (Prior approval required from the Insurance Company within 24 hours of admission to the authorized hospital)	In-patient and Day-patient (Prior approval required from the Insurance Company within 24 hours of admission to the authorized hospital)
Room and board costs for hospitalization	Private room
Tests, diagnosis, treatments and surgeries in hospitals for non-urgent medical cases (prior approval required from Insurer).	Covered
Tests, diagnosis, treatments and surgeries in hospitals for emergency treatment (approval required from Insurer within 24 hours of admission to the authorized hospital).	Covered
Healthcare services for emergency cases.	Covered



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Ground transportation service in the UAE provided by an authorized party for medical emergencies	Covered
The cost of accommodating a person accompanying an insured child up to 16 years old.	Maximum AED 300 per night
The cost of accommodation of a person accompanying an in-patient in the same room in cases of medical necessity at the recommendation of the treating doctor and after the prior approval of insurer.	Maximum AED 300 per night

Out –patient Benefits

Examination, diagnostic and treatment services by authorized general practitioners, specialists and consultants.	20% upto a max of AED 50 (Free Follow-up visits is made within seven days)
Laboratory test services carried out in the authorized facility assigned to treat the insured person.	Covered
Radiology diagnostic services carried out in the authorized facility assigned to treat the insured person (prior approval is required)	Covered
Physiotherapy treatment services (prior approval is required)	Covered up to 10 sessions per person per year with Nil Co-insurance.
Drugs and other medicines	Covered



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Maternity Benefits	
<p>Maternity Services (Outpatient ante- natal services) (prior approval required)</p> <p>Note: When any condition develops, which becomes an emergency, the medically necessary expenses will be covered up to the aggregate limit.</p> <p><u>New Born Cover:</u> Coverage of a pregnant female is extended by the insurer to provide the same benefits for a new born child of that female for a period up to 30 days from its date of birth. This cover is provided regardless of whether or not the new born is eventually enrolled as a dependent member under the insurer's policy.</p>	<ul style="list-style-type: none"> • Nil co-insurance payable by the insured • 8 visits to Public Health clinics. • All care provided by Public Health Clinics obstetrician for low risk or specialist obstetrician for high risk referrals. • Initial investigations to include: <ul style="list-style-type: none"> ○ FBC and platelets ○ Blood group, Rhesus status and antibodies ○ VDRL ○ MSU & urinalysis ○ Rubella serology ○ HIV ○ Hep. C offered to high risk patient ○ GTT if high risk ○ FBS, RBS or HBA1c for as per DHA diabetes screening protocol. ○ Visits to include reviews, checks and tests in accordance with DHA ante-natal care protocols. ○ 3 ante-natal ultrasound scans.
In patient maternity services (requires prior approval or within 24 hours of emergency treatment)	Nil co-insurance payable by the insured. Maximum benefit AED 10,000 per normal delivery, AED 12,500 for medically necessary C-section, complications and for medically necessary termination (all limits included co-insurance).
New born cover	<ul style="list-style-type: none"> • Cover for 30 days from birth. BCG, Hepatitis and neo-natal screening tests. (Phenylketonuria (PKU), Congenital Hypothyroidism, sickle cell screening, congenital adrenal hyperplasia)

Other Benefits	
Essential vaccinations and inoculations for newborns and children as stipulated in the DHA's policies and its updates in the assigned facilities.	Only available for services administered at DHA facilities.
Preventive services as stipulated by DHA to initially include diabetes screening.	Frequency restricted to: Diabetes: - Every 3 years from age 30. - High risk individuals annually from age 18.
Medical emergencies on diagnostic and treatment services for dental and gum treatments.	Covered subject to Nil coinsurance



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Medical emergencies on hearing and vision aids, and vision correction by surgeries and laser.	Covered subject to Nil coinsurance
Complementary therapy(Includes courses of acupuncture, ayurvedic and homeopathic treatment)	Covered with Annual Limit of AED 1,500/- on Re-imburement

Premium Table

AGE BAND	PREMIUM (AED)
0-30	4400/-
31-50	4972/-
51-65	6165/-

Basis of Claim Settlement

<u>In-patient and Out-patient Benefit</u>	
1. Network – Within UAE	1. 100% covered under free access plan
2. Non-Network (within UAE)	2. 80% of the equivalent of the UCR of SN NETWORK rates unless it is an Emergency as defined in the policy and the reimbursement will be based on 100% of UCR of SN NETWORK rates .
3. Treatment of Government Hospitals (within UAE) – Excluding Shaikh Khalifa Medical City & Tawam Hospital)	3. Reimbursement of 100% of UAE SN NETWORK rates for Emergency treatments only.
4. Outside UAE within Geographical scope of territory	4. 100% of the equivalent of the UCR of SN NETWORK rates subject to the applicable deductible/Co-charges as per the terms and conditions in the policy not exceeding 100% of UCR of SN NETWORK rates .



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The payment plan shall be as under:

Sr. No.	Premium Volume	Premium Payment Terms
1.	Upto Dhs. 100,000/-	100% Up-front
2.	Over Dhs. 100,000/- to Dhs. 300,000/-	50% up-front 50% Within 30 days
3.	Over 300,000/- to Dhs. 1,000,000/-	34% Up-front 33% within 30 days 33% within 60 days
4.	Over Dhs. 1,000,000/-	Quarterly Installments 25% Up-front 25% within 60 days 25% within 150 days 25% within 240 days

- Premium to be paid before coverage inception date as stated above upon cover confirmation for coverage to remain valid.
- Original Policy and Health Cards will be dispatched to broker / insured on receipt of premium payment.