

TABLE OF BENEFITS

MaxMedical UAE - Dubai



NOTES:

- Please note, in the event that a benefit listed in the Table of Benefits include a benefit that is shown as Excluded under the 'Exclusions List' section, the Table of Benefits shall prevail.
- Pre-authorization may be required for some benefits while some other benefits are covered on a reimbursement basis only, as indicated by a 'P' or 'R' in the table(s) below.
- All the benefits and deductibles mentioned below are per insured person, per policy year, unless otherwise specified.

BENEFITS	COVERAGE
Maximum Annual Benefit	AED 10,000,000
INPATIENT	
1. Hospital Accommodation ^P	100%
2. Prescription Drugs and Materials ^P	100%
3. Hospital Charges Including Surgery, Anaesthesia, and Theatre Charges ^P	100%
4. Follow-up Consultations ^P	100%
5. Physicians' and Therapists' Fees ^P	100%
6. Surgical Appliances, Internal Prosthesis and Implants ^P	100%
7. Diagnostic Tests ^P	100%
8. MRI, CT, PET Scan (Inpatient and Outpatient) ^P	100%
9. Organ Transplant ^P	100%
10. Removal of Donor Organ ^P	Up to AED 54,750 per policy year (specific requirements apply)
11. Reconstructive Surgery ^P	Up to AED 54,750 per policy year (in cases related to injury or disfiguring accident or following a mastectomy for cancer)
12. Psychiatry and Psychotherapy ^P	100% (with 18 months waiting period)
13. Accommodation costs for one parent or legal guardian staying in hospital with an insured child under 17 years of age. For cases where hospital facilities are not available, a cash benefit of AED 365 per night will be provided. ^P	100%
14. Accommodation of an accompanying person in the same room in cases of medical necessity and as per recommendation of attending physician, subject to prior approval. ^P	Up to AED 100 per day
15. Emergency Inpatient Dental Treatment ^P	100%
16. Rehabilitation Treatment ^P	Up to AED 25,550 per policy year
17. Emergency Treatment Outside Area of Cover ^P	100% (maximum 90 days)
18. Oncology (Inpatient and Outpatient) ^P	100%
19. Artificial Life Maintenance ^P	Up to AED 1,277,500 per lifetime
20. Inpatient Cash Benefit (if treatment is free of charge) ^P	Up to AED 765 per night (maximum 25 nights per policy year)
MATERNITY	
21. Routine Maternity (Inpatient ^P and Outpatient)	Up to AED 54,750 per policy year
22. Amniocentesis ^P	Covered under routine maternity limit
23. Pre-natal Maternity Tests (HIV, TORCH, Hepatitis, Triple Barts, Quadruple and Spina Bifida) ^P	Covered under routine maternity limit
24. Complications of Maternity ^P	100%

BENEFITS	COVERAGE
Maximum Annual Benefit	AED 10,000,000
25. Complications Arising from Birth Control Procedures ^P	100%
26. Termination of Pregnancy (Legal Abortion) ^P	100%
27. Multiple Birth Babies After Infertility Treatment ^P	Up to AED 182,500 per baby (for first 3 months after birth)
28. Prescribed Vitamins in Case of Pregnancy and Deficiency Syndrome ^P	100%
29. Newborn Care ^P	Up to AED 547,500 per policy year
OUTPATIENT	
30. Physicians' and Specialists' Consultation Fees	100%
31. Diagnostic Tests/Procedures ^P	100%
32. Outpatient Medication ^P	100%
33. Adult Vaccination (as per WHO guidelines) ^R	Subject to 20% co-insurance
34. Children Vaccination (as per WHO guidelines) ^P	100%
35. Physiotherapy and Occupational Therapy ^P	25 sessions per policy year (subject to progress report after every 5 sessions)
36. Minor Procedures/Outpatient Surgery ^P	100%
37. Psychiatry and Psychotherapy ^{PR}	30 visits per policy year (with 18 months waiting period and 20% co-insurance)
38. Annual Routine Health Checks (including diabetes and cancer screening) ^R	Up to AED 4,380 per policy year
39. Alternative Therapies and/or Complementary Therapies ^{PR}	Up to AED 8,210 per policy year
40. Doctor's Home Visits ^R	Up to AED 510 per visit (maximum 3 visits per policy year)
41. Nursing at Home ^P	Up to AED 25,550 per policy year
42. Allergies and Allergic Disorders	100%
43. Allergy Testing ^P	100%
OTHER BENEFITS	
44. Pre-Existing and Chronic Conditions	Up to AED 150,000 per policy year (subject to a waiting period of 6 months, if the member has not previously been insured in the UAE)
45. Prescribed Medical Aids ^R	Up to AED 12,775 per policy year (maximum AED 1,825 for hearing aids)
46. Prescribed Frames, Glasses and Contact Lenses ^R	Up to AED 1,275 per policy year with 20% co-insurance (This benefit will be forfeited if you avail of the Laser/Lasik Eye Treatment.)
47. Medical Repatriation ^P	100%
48. Repatriation of Mortal Remains ^P	100%
49. Medical Evacuation ^P	100%
50. Local Ambulance	100%
51. Laser/Lasik Eye Treatment ^R	Up to AED 3,650 per lifetime with 12 months waiting period (This benefit once availed, will result in the forfeiture of the benefit for prescribed frames, glasses and contact lenses.)
52. Congenital and Hereditary Conditions	Up to AED 547,500 per policy year
53. Speech Therapy ^R	Up to AED 18,250 per policy year
54. Deafness	100%

BENEFITS	COVERAGE
Maximum Annual Benefit	AED 10,000,000
55. Acne Treatment	100%
56. Tests Related to Sexually Transmitted Diseases and AIDS	100%
57. Non-invasive Fertility/Infertility Investigations	100%
58. Menopausal Related Symptoms	100%
59. HIV/AIDS	Up to AED 182,500 per policy year (after 3 years waiting period)
60. Palliative and Long Term Care ^P	100% (maximum 90 days per lifetime)

BENEFITS	COVERAGE
Maximum Annual Benefit	AED 5,000
DENTAL	
1. Dental Treatment ^P	Subject to 20% co-insurance (after 6 months waiting period)
2. Dental Surgery ^P	Subject to 20% co-insurance (after 6 months waiting period)
3. Periodontics ^P	Subject to 20% co-insurance (after 6 months waiting period)

GEOGRAPHICAL AREA OF COVER	Depending on your selected Zones of area of cover
PROVIDER NETWORK	MSH International Platinum Network
BASIS OF CLAIM SETTLEMENT	DEDUCTIBLE & CO-INSURANCE
Within UAE	
Within Network	At Actual
Elective Treatment Outside Network	80% as per Usual, Customary and Reasonable (UCR) charges
Emergency Treatment Outside Network	100% as per Usual, Customary and Reasonable (UCR) charges
Outside UAE	
Within Network	At Actual
Elective Treatment Outside Network (Subject to Pre-Approval)	80% as per Usual, Customary and Reasonable (UCR) charges where the treatment was sought.
Emergency Treatment Outside Network (Within geographical area of coverage)	100% as per Usual, Customary and Reasonable (UCR) charges where the treatment was sought.
Emergency Treatment outside Network (Outside geographical area of coverage, maximum 90 days per annual period of cover)	100% as per Usual, Customary and Reasonable (UCR) charges where the treatment was sought.