

# Table of Benefits Individual Policies

International Healthcare Plans for Egypt

Valid from 1st July 2023

All monetary figures shown are in US Dollars (\$).



# Policy terms and conditions

This Table of Benefits offers an overview of the cover we provide under each plan. Cover is subject to our policy terms and conditions, as detailed in our Benefit Guide. Details of our pre-approval process can also be found in this guide, which is available on our website.

### **Key to Table of Benefits**

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Covered in full, up to the maximum plan benefit.



Not available.



Waiting period applies.



Treatments/costs require pre-approval through submission of a Pre-authorisation Form. Details of our pre-approval process can also be found in our Benefit Guide.

# **Core Plans**

	Premier Individual Direct (Egypt)	Classic Individual Direct (Egypt)	Essential Individual Direct (Egypt)
Maximum plan benefit USD (\$)	\$3,037,500	\$1,518,750	\$675,000
In-patient benefits			
Hospital accommodation	Private room	Private room	Private room
Intensive care	$\otimes$	$\otimes$	$\otimes$
Prescription drugs and materials (in-patient and day-care treatment only) (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	$\otimes$	$\otimes$	$\otimes$
Surgical fees, including anaesthesia and theatre charges	$\otimes$	$\otimes$	$\otimes$
Physician and therapist fees (in-patient and day-care treatment only)	$\otimes$	$\otimes$	$\otimes$
Surgical appliances and materials	$\otimes$	$\otimes$	$\otimes$
Diagnostic tests (in-patient and day-care treatment only)	$\otimes$	$\otimes$	$\otimes$
Organ transplant	$\otimes$	$\otimes$	$\otimes$
Psychiatry and psychotherapy (in-patient and day-care treatment only)	<b>⊘</b>	$\otimes$	$\otimes$

	Premier Individual Direct (Egypt)	Classic Individual Direct (Egypt)	Essential Individual Direct (Egypt)
Accommodation costs for one parent staying in hospital with an insured child under 18	$\otimes$	$\odot$	$\otimes$
Emergency in-patient dental treatment	$\otimes$	$\otimes$	$\otimes$
Other benefits			
Day-care treatment	$\otimes$	$\otimes$	$\otimes$
Kidney dialysis	$\otimes$	$\otimes$	$\otimes$
Out-patient surgery	$\otimes$	$\otimes$	$\otimes$
Nursing at home or in a convalescent home (immediately after or instead of hospitalisation)	\$5,740	\$3,375	\$3,375
Rehabilitation treatment (in-patient, day-care and out-patient treatment; must commence within 14 days of discharge after the acute medical and/or surgical treatment ceases)	\$5,970	\$3,375	\$2,700
Local ambulance	$\otimes$	$\odot$	\$675
Emergency treatment outside area of cover (for trips of a maximum period of six weeks)	max. 42 days	max. 42 days	Up to \$13,500, max. 42 days
Medical evacuation			
Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre	$\otimes$	$\otimes$	$\odot$
Where ongoing treatment is required, we will cover hotel accommodation costs	$\otimes$	$\otimes$	$\odot$
Evacuation in the event of unavailability of adequately screened blood	$\otimes$	$\otimes$	$\otimes$
If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs	Max. 7 days	Max. 7 days	Max. 7 days
Expenses for one person accompanying an evacuated person	\$4,050	\$4,050	\$2,700

	Premier Individual Direct (Egypt)	Classic Individual Direct (Egypt)	Essential Individual Direct (Egypt)
Travel costs of insured family members in the event of an evacuation	\$2,700 per event	\$2,700 per event	\$1,350 per event
Repatriation of mortal remains	\$13,500	\$13,500	\$13,500
Travel costs of insured family members in the event of the repatriation of mortal remains	\$2,700 per event	\$2,700 per event	\$2,700 per event
CT and MRI scans (in-patient and out-patient treatment)	$\otimes$	$\otimes$	$\otimes$
PET and CT-PET scans (in-patient and out-patient treatment)	$\otimes$	$\otimes$	$\odot$
Oncology (in-patient, day-care and out-patient treatment)	$\otimes$	$\otimes$	$\odot$
Purchase of a wig, prosthetic bra or other external prosthetic device for cosmetic purposes	\$270	\$270	\$270
Complications of pregnancy (in-patient and out-patient treatment)	$\otimes$	$\otimes$	$\otimes$
Laser eye treatment 0 10 months	\$1,350	$\otimes$	$\otimes$
In-patient cash benefit (per night) (where treatment has been received free of charge)	\$205, max. 25 nights	\$205, max. 25 nights	\$205, max. 25 nights
Emergency out-patient treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Out-patient Plan)	\$750	\$250	8
Emergency out-patient dental treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Dental Plan)	\$750	8	8
Palliative care	$\otimes$	$\otimes$	$\odot$
Long term care	Max. 90 days per lifetime	Max. 90 days per lifetime	Max. 90 days per lifetime
Accidental death (insured members aged 18 to 70)	\$13,500	$\otimes$	$\otimes$

	Premier Individual Direct (Egypt)	Classic Individual Direct (Egypt)	Essential Individual Direct (Egypt)
Additional Core Plan services			
Olive** Our Health & Wellness support program includes, for example:  HealthSteps fitness app Access to wellness resources	$\otimes$	$\otimes$	$\otimes$
<ul> <li>MyHealth Digital Services</li> <li>Manage your cover online with our app or portal anytime, anywhere</li> <li>Submit and track progress of claims</li> <li>Access your policy documents, health services, payment details and more</li> </ul>	$\otimes$	$\otimes$	$\otimes$

### **Core Plan Deductibles**

To reduce your Core Plan premium, simply select an optional deductible from the list below and read across to find the relevant premium discount. The level of discount will depend on whether you have selected a Maternity Plan. Please note that either a Core Plan deductible OR an Out-patient Plan deductible can be chosen (details follow). Where a Core Plan deductible is selected it is payable per person, per Insurance Year. Also, our premiums are expressed in whole numbers (i.e. without any cents), therefore, percentages may be slightly higher or lower than those stated below.

Optional Core Plan Deductibles	Discount if a Maternity Plan is not included on your policy	Discount if a Maternity Plan is included on your policy
No deductible	0% premium discount	0% premium discount
\$610 deductible	5% premium discount	2.5% premium discount
\$1,015 deductible	10% premium discount	5% premium discount
\$2,025 deductible	20% premium discount	10% premium discount
\$4,050 deductible	35% premium discount	17.5% premium discount
\$8,100 deductible	50% premium discount	25% premium discount
\$13,500 deductible	60% premium discount	30% premium discount

# Out-patient Plans

The following out-patient Plans cover your day to day medical expenses and can be purchased with any of our Core Plans. They can't be bought separately.

	Gold Individual Direct (Egypt)	Silver Individual Direct (Egypt)	Crystal Individual Direct (Egypt)
Maximum plan benefit	No limit	\$25,000	\$3,375
Out-patient Plan benefits			
Video consultation services**	$\otimes$	$\otimes$	$\otimes$
Medical practitioner fees			¢1.250
Specialist fees	$\otimes$	$\otimes$	\$1,350
Prescription drugs (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	80% refund	80% refund, up to \$5,000	\$675
Diagnostic tests	$\otimes$	$\otimes$	$\odot$
Vaccinations	$\otimes$	$\otimes$	$\otimes$
Chiropractic treatment, osteopathy, homeopathy, Chinese herbal medicine, acupuncture and podi (max. 12 sessions per condition for chiropractic treatment and max. 12 sessions per condition for osteopathic treatment subject to the benefit limit)		$\otimes$	\$675
Prescribed physiotherapy (initially limited to 12 sessions per condition)	$\otimes$	$\otimes$	\$675
Prescribed speech therapy and occupational therapy	Ø	$\otimes$	\$675
Infertility treatment U 18 mo	\$16,200, per lifetime	\$16,200, per lifetime	$\otimes$
Psychiatry and psychotherapy (Referral from doctor required for psychotherapy)	nths 30 visits	20 visits	$\otimes$
Prescribed medical aids	$\bigcirc$	\$3,375	$\otimes$

### **Out-patient Plan Deductibles**

To reduce your Out-patient Plan premium, simply select an optional deductible from the list below and read across to find the relevant premium discount. Also, our premiums are expressed in whole numbers (i.e. without any cents), therefore, percentages may be slightly higher or lower than those stated below.

Where a deductible is selected it is payable per person, per out-patient consultation. The deductible applies to the following:

- Medical practitioner consultations
- Specialist consultations
- Psychiatry and psychotherapy consultations
- Health and wellbeing check consultations
- Infertility treatment consultations
- Vaccinations consultations

Optional Out-patient Plan Deductibles	Discount
No deductible	0% premium discount
\$5	1% premium discount
\$10	2% premium discount
\$15	4% premium discount

# Wellness Plans

The following Wellness Plans can be purchased with any of the Core Plans. They can't be bought separately. These Wellness Plans provide cover on a reimbursement basis only: this means that members pay for their checks and then use our Claim Form to obtain reimbursement for eligible expenses.

	Gold Health, Wellbeing & Optical Plan (Egypt)	Silver Health, Wellbeing & Optical Plan (Egypt)	Bronze Health, Wellbeing & Optical Plan (Egypt)
Wellness Plan benefits			
Prescribed glasses and contact lenses including eye examination	\$120	\$120	\$120

	Gold Health, Wellbeing & Optical Plan (Egypt)	Silver Health, Wellbeing & Optical Plan (Egypt)	Bronze Health, Wellbeing & Optical Plan (Egypt)
Health and wellbeing checks including screening for the early detection of illness or disease	\$1,080	\$810	\$400
Checks are limited to:			
Physical examination			
Blood tests (full blood count, biochemistry, lipid profile, thyroid function test, liver function test, kidney function test)			
<ul> <li>Cardiovascular examination (physical examination, electrocardiogram, blood pressure)</li> </ul>			
Neurological examination (physical examination)			
Cancer screening			
- Annual pap smear			
- Mammogram (every two years for women aged 45+, or younger where a family history exists)			
- Annual prostate screening (yearly for men aged 50+, or younger where a family history exists)			
<ul> <li>Colonoscopy (every five years for members aged 50+, or 40+ where a family history exists)</li> </ul>			
- Annual faecal occult blood test			
Bone densitometry (every five years for women aged 50+)			
Well child test (for children up to the age of six years)	15 Visits	15 Visits	15 Visits
BRCA1 and BRCA2 genetic test (where a direct family history exists; Gold Individual Plan only)		$\otimes$	$\otimes$

# **Maternity Plans**

The Premier Direct Maternity Plan can only be purchased with the Premier Individual Direct Core Plan. The Club Direct Maternity Plan can only be purchased with the Classic Individual Direct Core Plan. Please note that an Out-patient Plan must be selected in conjunction with a Maternity Plan. Maternity Plans are available to couples and families i.e. a spouse/partner must also be insured under the policy.

		Premier Direct Maternity (Egypt)	Club Direct Maternity (Egypt)
Maternity Plan benefits			
Routine maternity (in-patient and out-patient treatment)	10 months	\$10,125 per pregnancy	\$6,750 per pregnancy
Complications of childbirth (in-patient treatment)	U 10 months	\$20,250 per pregnancy	\$13,500 per pregnancy

# **Dental Plans**

Dental Plan 1 can only be purchased if both the Premier Individual Direct Core Plan and Gold Individual Direct Out-patient Plan have been selected. Dental Plan 2 can be purchased with any of the Core Plans. None of the Dental Plans can be bought separately.

		Dental 1 Individual Direct (Egypt)	Dental 2 Individual Direct (Egypt)	
Maximum plan benefit		No limit	\$2,770	
Dental Plan benefits				
Dental treatment		100% refund	80% refund	
Dental surgery		100% refund	80% refund	
Periodontics		80% refund	80% refund	
Orthodontic treatment	10 months	65% refund,	E00/ refund	
Dental prostheses	Up to \$6,750 up to \$6,750		50% refund	

# Repatriation Plan

The following Repatriation Plan can be purchased with any of the Core Plans. It can't be bought separately.

### **Repatriation Plan benefits**



Expenses for one person accompanying a repatriated person	\$4,050
Travel costs of insured family members in the event of a repatriation	\$2,700 per event
Travel costs of insured members to be with a family member who is at peril of death or who has died	\$2,025 per lifetime

\*\* Certain services which may be included in your plan are provided by third party providers outside the Allianz Group, such as the Expat Assistance Programme, Travel Security services, HealthSteps app, Second Medical Opinion and tele-medicine services. If included in your plan, these services will show in your Table of Benefits. These services are made available to you subject to your acceptance of the terms and conditions of your policy and the terms and conditions of the third parties. These services may be subject to geographical restrictions. The HealthSteps app does not provide medical or health advice and the wellness resources contained within Olive are for informational purposes only. The HealthSteps app and the wellness resources contained within Olive shouldn't be regarded as a substitute for professional advice (medical, physical or psychological). They are also not a substitute for the diagnosis, treatment, assessment or care that you may need from your own doctor. You understand and agree that Allianz Insurance Company – Egypt (S.A.E.), its reinsurers and administrators are not responsible or liable for any claim, loss or damage, directly or indirectly resulting from your use of any of these third party services.

## Area of cover

We offer a choice of three different geographical areas of cover. The area of cover is subject to full terms and conditions as stated in the Benefit Guide.



Worldwide, which provides cover anywhere in the world



Worldwide excluding USA



Africa only

# Medical provider network

Under these plans, you'll have access to our General Network, which includes a comprehensive list of medical providers in Egypt.

We have contractual arrangements in place with a large number of clinics/hospitals and pharmacies in Egypt. Upon presentation of your Nextcare Insurance Card each of these clinics/hospitals and pharmacies will provide their services and products without seeking immediate payment from you (unless the prescribed treatment is specifically excluded under your policy).

Please note that cover provided under the following benefits is available on a reimbursement basis only i.e. you will have to pay for eligible treatment and then complete and submit a Claim Form for:

- Psychiatry and psychotherapy
- Vaccinations

# Talk to us, we love to help!

If you have any queries, please do not hesitate to contact us:

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This policy is supported by AWP Health & Life SA, a limited company governed by the French Insurance Code and acting through its Irish Branch. AWP Health & Life is registered in France: No. 679 154 401 RCS Bobigny. Irish Branch registered in the Irish Companies Registration Office, registered No.:907619, address: 15 Joyce Way, Park West Business Campus, Nangor Road, Dublin 12, Ireland. AWP Health & Life SA acts as the reinsurer and provides administration and technical support for the policy. Allianz Care and Allianz Partners are registered business names of AWP Health & Life SA. The insurer is Allianz Insurance Company – Egypt (S.A.E.).

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