



# CIGNA HEALTHGUARD<sup>SM</sup> PLANS

For Individuals residing in the Emirate of Dubai

**Together, all the way.<sup>®</sup>**



Policy underwritten by  
Zurich Insurance Middle East,  
a Cigna-owned Company.

This material is intended for informational purposes only and contains a partial and general description of benefits. We recommend that you examine your (product) policy in detail to be certain of precise terms, conditions and coverage.



# A PLAN THAT IS BUILT WITH YOU IN MIND

Having joined the millions of others around the world who've taken the huge step in life to relocate to a new country, it's important to secure peace of mind in as many aspects of your new life as possible – and your health comes first. Our plans have been specifically created for individuals working and residing in the Emirate of Dubai, ensuring you have the very best of care available to you as and when you need it.

At Cigna | Zurich Insurance Middle East, we specialize in health insurance policies for people just like you. It's our mission to help improve your health, wellbeing and sense of security – and everything we do is designed to achieve this.





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# WHY CHOOSE A CIGNA HEALTHGUARD<sup>SM</sup> PLAN

At Cigna | Zurich Insurance Middle East, our mission is to help the people we serve improve their health, well-being and sense of security. We promise easy access to quality healthcare around the world.

When it comes to staying well - physically, financially, emotionally - we're with you all the way. We don't just want you to feel better. We want you to stay that way.

Our Cigna Healthguard<sup>SM</sup> plans provide peace of mind for customers worldwide. Whatever your circumstances, we are here to see you through the good times, as well as the hard times.

We've provided global health insurance for many years. Today we have 95 million customer relationships in over 200 countries and jurisdictions. Looking after them is an international workforce of 40,000 people, plus a medical network comprising of over 1 million partnerships, including 108,000 behavioural health care professionals, and 13,900 facilities and clinics.

We have partnered with Neuron to give you the best possible access to healthcare providers in the UAE, based on a tiered network of healthcare providers.

Neuron is one of the leading third party administrators (TPA) in the Middle East region delivering quality healthcare administrative services and business solutions amongst regional and international insurance companies and several multi-national self-funded organisations. Moreover, their experience in the healthcare sector in the region for over a decade has resulted in an extensive provider network.

Our partnership combines a comprehensive regional network with Cigna international network, ensuring access to uninterrupted quality healthcare during your travel outside the UAE.

Cigna's extensive global network coupled with Neuron's regional network capabilities means not only do we have you covered in the Emirate of Dubai, but also when you are travelling for business and pleasure across the globe.

Our goal is to provide you with easy access to quality care worldwide.

We have created flexible health plans for the Emirate of Dubai that you can tailor to your specific needs. Read on to find out more about what we have to offer.





# PUT YOUR HEALTH IN THE RIGHT HANDS



A healthcare plan specifically designed for you and your family if you are living or working in the Emirate of Dubai



Proactively manage you and your family's health with our Healthy Connect optional module



Compliance with local regulatory requirements



Quick and easy access to healthcare facilities and professionals around the world through our extensive network 24 hours a day, 7 days a week, 365 days a year

## WE HAVE YOU COVERED

### Pre-existing conditions

Our plans provide cover for pre-existing and chronic conditions. Please refer to the benefit tables further on for details of the individual limits that apply. A waiting period of 6 months applies if you have not had a previous healthcare plan in the UAE. Please let us know about any pre-existing conditions or chronic conditions as part of your application, as any undisclosed conditions could result in us not paying claims for those conditions.

### Out of area emergency care

For additional peace of mind, your plan includes emergency short-term medical coverage when you are visiting a location outside of your selected area of coverage. Beneficiaries will be covered for emergency treatment during temporary trips, even if those trips are outside your selected area of coverage.



# HOW OUR PLANS WORK

Our Healthguard plans comprise of 3 distinct levels of cover. Depending on where you will be travelling to and your budget, we have a plan to suit your needs.

Our International plans provide cover for worldwide travel with the option to select the Worldwide including USA area of cover. The International plan has a generous overall benefit limit of AED 7,350,000 and access to our Comprehensive network of providers ([excluding the American Hospital Dubai](#)) in the UAE. The International Plus plan, our most comprehensive plan, has higher individual benefit limits and an unlimited overall annual limit with access to all of our network of providers in the UAE.

The Regional plan is a quality healthcare plan with a lower premium and a generous overall annual limit of AED 2,750,000. This plan not only covers you in the Emirate of Dubai and the wider Middle East but extends across Asia (with the exceptions of Hong Kong, China and Singapore). This is perfect for individuals who do not intend on travelling outside of Asia. The Regional plan excludes some of the higher cost hospitals and medical practitioners within the UAE.

## Our three Healthguard plans at a glance

Regional	International	International Plus
<ul style="list-style-type: none"><li>✓ Coverage within the countries of the GCC, other Middle East and Asia countries (excluding Singapore, Hong Kong and China)</li><li>✓ Overall annual benefit limit: AED 2,750,000</li><li>✓ Excludes some of the high cost hospitals and medical practitioners in the UAE</li></ul>	<ul style="list-style-type: none"><li>✓ Worldwide coverage with the option to include cover in the USA</li><li>✓ Overall annual benefit limit: AED 7,350,000</li><li>✓ Access to all of our network of hospitals (excluding American Hospital Dubai) and medical practitioners within the UAE</li></ul>	<ul style="list-style-type: none"><li>✓ Worldwide coverage with the option to include cover in the USA</li><li>✓ Unlimited overall annual benefit limit*</li><li>✓ Access to all of our network of hospitals and medical practitioners within the UAE</li></ul>
<b>Option to include our Healthy Connect module</b>	<b>Option to include our Healthy Connect module</b>	<b>Option to include our Healthy Connect module</b>

\*Some benefits have individual limits.

## Our plans include the following as standard:



Inpatient & daypatient hospital treatment and accommodation



Outpatient consultations, diagnostic tests & prescribed drugs



Mental health care



Maternity care



Cover for Pre-existing and chronic conditions\*



Out of area emergency cover

And many more benefits.



# HEALTHY CONNECT

## Optional module

In addition to the core medical offering, our Healthy Connect optional module includes a wide range of benefits that will help you take control and proactively manage the health and wellbeing of you and your family. The benefits range from comprehensive dental care, non-symptomatic health screenings and examinations, medical evacuation in the event treatment is not available locally in an emergency and much more. What's more, we understand that there are times when you would prefer to have treatment in a familiar surrounding with family members close by; Healthy Connect also includes a Return home cash benefit, making it possible to return home, should the need arise.

**Wellness tests and screenings** - your annual health check, cancer screenings and counselling service

**Dental care** - including: preventative, routine and major restorative treatment

**Vision care** - eye tests and help with costs for prescription glasses

**Medical evacuation and repatriation service** - when medical treatment is not available locally in an emergency

**Return home cash benefit** - helping you with costs to return home for treatment should the need arise

\*a waiting period of 6 months may apply if you have not had a previous healthcare plan in the UAE

# OUR GLOBAL HEALTH ASSIST PROGRAM

Looking after you when you need us most



**Our unique Global Health Assist program is carried out by our dedicated team of doctors and nurses, who work hand in hand with customers with serious or complex health conditions to bring them the full medical support they deserve.**

We are dedicated to helping you and your family live happier, healthier lives with an unparalleled level of clinical expertise, which grants all beneficiaries access to:

## MEDICAL SECOND OPINION SERVICE



We provide our customers with access to speak with a doctor or nurse. This can offer an international second opinion service or simple reassurance to our customers at what can often be a sensitive and potentially emotional time. Included within this service may be an independent view on their diagnosis or treatment plan.

## NURSE COMPLEX CASE MANAGEMENT



When treatment is more complex, our nurses can take over the case providing clinical guidance and reassurance. In addition, that nurse can become the beneficiary's dedicated point of contact throughout the treatment process.



Our Global Health Assist service works with a proactive and personalised approach to manage complex health conditions.

Our qualified nurses from the Clinical team will immediately contact customers suffering from pre-existing conditions or serious illnesses and confirm a personalised and dedicated point of contact for the customer, and you will receive personalised support and information about:

- > Our second medical opinion program;
- > Medical network/preferred provider information;
- > Hospital visits and navigating the “Healthcare Maze”;
- > Detailed coverage information;
- > Personalised support and case management and;
- > Global Care on Demand.





## HEALTHY LIVING

As a reward for healthy living, we will give you a  
**10% DISCOUNT** on your annual premium

The lifestyle you lead and the choices you make have a bigger impact on your health than you may think. If you don't smoke, eat healthy and get active, you're less likely to get ill. As a reward for healthy living, we will give you a 10% discount on your annual premium.

To qualify, all beneficiaries over the age of 13 years must have a normal BMI (body mass index) of between 18.50 and 24.99. You must also have not smoked or used nicotine or tobacco replacements in the last 12 months. Our Underwriters will determine qualification based on your completed medical questionnaire at the application stage (including taking into account any pre-existing conditions), for all beneficiaries.

We know that making lifestyle changes can be difficult, it requires a lot of motivation. To give you that little bit of extra encouragement, our healthy living discount is not only available for new customers, but also for existing customers at renewal. So if you don't qualify in your initial policy year, you may qualify for the discount at renewal. All you have to do is submit your BMI results for each applicable beneficiary to our Customer Care team at least 45 days prior to the annual renewal date.

The 10% discount applies to the core plan and the optional Healthy Connect module. Terms and Conditions apply.



# HOW COST SHARE AND OUT OF POCKET MAXIMUM WORK

Cost share is the percentage of each claim which a beneficiary must pay themselves for all outpatient treatment. You will be responsible for paying the amount of cost share directly to the healthcare provider. We will let you know what this amount is. Your Certificate of Insurance and Medical ID Cards will detail any cost share(s) applicable.

For your added protection, there is an out of pocket maximum cost share amount on the Healthguard Regional plan and the Healthguard International plan for outpatient treatment. This is the maximum

amount of cost share any beneficiary would have to pay for outpatient treatment per period of cover.

A specific cost share also applies to routine maternity, childbirth and medically necessary caesarean benefit across all plans and some of the dental benefits in the optional Healthy Connect module. The cost share amount you pay for these benefits does not count towards your out of pocket maximum

The following examples show how cost share and out of pocket maximum work.

## EXAMPLE 1: HEALTHGUARD REGIONAL PLAN - OUTPATIENT TREATMENT



**YOU PAY..  
AED 3,680**



**WE PAY...  
AED 14,720**

Claim value: **AED 18,400**

20% cost share: **AED 3,680**

Out of pocket maximum: **AED 7,500**

You have satisfied AED 3,680 of the AED 7,500 Out of Pocket Maximum.

### WHAT THIS MEANS FOR YOU...

Your cost share is 20% of AED 18,400 (AED 3,680). This is less than your out of pocket maximum.

## EXAMPLE 2: HEALTHGUARD INTERNATIONAL PLAN - OUTPATIENT TREATMENT



**YOU PAY..  
AED 3,500**



**WE PAY...  
AED 42,400**

Claim value: **AED 45,900**

10% cost share: **AED 4,590**

Out of pocket maximum: **AED 3,500**

### WHAT THIS MEANS FOR YOU...

Your cost share is 10% of AED 45,900 (AED 4,590). This is more than your out of pocket maximum.

#### Please note:

The cost share and out of pocket maximum is determined separately for each beneficiary and each period of cover.

# HOW TO CREATE YOUR HEALTHGUARD PLAN

## 1 SELECT YOUR CORE PLAN

Do you need Worldwide coverage?

**NO**  
Choose the **Regional plan**

**YES**  
Choose the **International or International Plus plan**

Annual overall benefit limit  
Regional: **AED 2,750,000**

Annual overall benefit limit  
International: **AED 7,350,000**  
International Plus: **Unlimited**

Add the optional Worldwide including USA coverage

## 2 WANT TO EXTEND YOUR COVERAGE?

It's easy, add the **Healthy Connect** optional module.

## 3 MANAGE YOUR PREMIUM

If you have selected the Regional plan, you can choose your outpatient treatment cost share option. The higher the cost share, the lower your premium will be.

(see page 10 for a full explanation of how cost share and out of pocket maximum work)

## 4 PAY FOR YOUR PLAN

You can make payments by debit or credit card, or alternatively if you pay annually, you can pay by bank wire transfer.





# AREA OF COVERAGE GUIDE FOR REGIONAL PLAN

The Regional plan includes the following countries:

Gulf Corporation Council (GCC) countries*:	Other Middle East and Asia countries:	
Kingdom of Bahrain State of Kuwait Sultanate of Oman State of Qatar Kingdom of Saudi Arabia United Arab Emirates (UAE)	Armenia Azerbaijan Bangladesh Bhutan Brunei Darussalam Cyprus/Northern Cyprus Cambodia Egypt Georgia India Indonesia Jordan Kazakhstan Kuwait Kyrgyzstan Lao People’s Democratic Republic Lebanon Macao	Malaysia Maldives Mongolia Myanmar Nepal Pakistan Palestine/Israel Philippines South Korea Sri Lanka Taiwan Tajikistan Thailand Timor-Leste Turkey Turkmenistan Yemen Uzbekistan Vietnam

\*Which at the date of publication include the following countries.

The following countries in Asia are not included in the **Healthguard Regional plan**:

<b>Not included in the Healthguard Regional plan</b>
Singapore Hong Kong China

### Important note

Notwithstanding the foregoing areas of cover, we will not pay claims for services received in sanctioned countries if doing so would violate the requirements of the United Nations Security Council, the European Union or the United States Department of Treasury’s Office of Foreign Assets Control.



# HEALTHGUARD PLAN BENEFITS

Our Healthguard plans comprise of three levels of cover. The Regional plan provides coverage within the countries of the Gulf Cooperation Council (GCC), other Middle East countries and Asia (excluding Singapore, Hong Kong and China).

The two International plans provide coverage Worldwide excluding the USA as standard, however, you may select the Worldwide including the USA coverage additional option.

The list of benefits below details the level of cover you can choose. All benefits detailed as 'Paid in full' are subject to the overall annual benefit limit and are subject to any cost share amounts applicable. All amounts apply per beneficiary per period of cover (except where otherwise noted).

Our plans are designed to cover for inpatient, daypatient, accommodation costs, outpatient care and treatments, as well as cover for cancer, maternity, mental health care and much more.

Please note benefit limits displayed in USD (\$) are for illustrative purposes only and have been rounded.

## LIST OF BENEFITS

### YOUR PLAN

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Healthcare provider network in the UAE	General network	Comprehensive network excl. American Hospital Dubai (AHD)	Comprehensive network
<p>A full list of our network of healthcare providers will be provided to you and updated from time to time.</p> <p>Please note, in the following circumstances direct payment to the provider may not be possible and a reimbursement will apply, up to the maximum amount per benefit per period of cover:</p> <ul style="list-style-type: none"> <li>› No network exists within area of coverage</li> <li>› Emergency treatment</li> <li>› The treatment required is not available in the network of healthcare providers.</li> </ul>			
	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Network of healthcare providers	Direct payment to providers in the UAE  Out of network penalty in the UAE - 20% *	Direct payment to providers in the UAE  Out of network penalty in the UAE and the USA - 20% *	
<p>If a beneficiary receives treatment in the in the UAE or the USA (if applicable) and the provider is not part of the healthcare provider network, we will reduce any amount we pay, by 20%.</p> <p>*Please note there are occasions when this may not apply, including:</p> <ul style="list-style-type: none"> <li>› Where there is no Cigna   Zurich Insurance Middle East network of healthcare providers within 30 miles/50 kilometres of the beneficiaries home address.</li> <li>› When the treatment the beneficiary needs is not available from a local network hospital, medical practitioner or clinic.</li> <li>› In the event emergency treatment is required at a hospital, medical practitioner or clinic that is not part of the Cigna   Zurich Insurance Middle East network.</li> <li>› The Cigna   Zurich Insurance Middle East network of healthcare providers is used outside of the UAE or the USA (if applicable).</li> </ul>			
	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
USA area of coverage option	Not applicable	Worldwide excluding the USA or; Worldwide including the USA	
Choose to include the USA area of coverage (International plans only).			

## YOUR OVERALL LIMIT

Please note benefit limits displayed in USD (\$) are for illustrative purposes only and have been rounded.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Annual overall benefit - maximum per beneficiary per period of cover</b> Includes all inpatient, daypatient and outpatient treatment.	AED 2,750,000 (\$750,000)	AED 7,350,000 (\$2,000,000)	Unlimited

## YOUR STANDARD MEDICAL BENEFITS

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Out of Area Emergency Cover</b>	AED 180,000 (\$50,000)	AED 280,000 (\$75,000)	AED 500,000 (\$135,000)
Not applicable if you have selected the Worldwide including the USA coverage option.			

Emergency inpatient, daypatient or outpatient medical treatment during temporary business or leisure trips outside your area of coverage.

### Important notes:

- › The medical condition requiring emergency treatment must not have existed prior to the travel and the beneficiary must have been treatment, symptom, and advice free of the medical condition prior to initiating the travel.
- › Coverage is limited to a maximum period of 30 days per trip and a maximum of 60 days per period of cover for all trips combined.
- › Treatments relating to maternity, pregnancy, childbirth or any complications of pregnancy or childbirth are excluded from this Out of Area Emergency Cover.

Up to the maximum amount per period of cover.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Treatment for pre-existing and chronic conditions within the UAE</b>	AED 150,000 (\$41,000)	AED 150,000 (\$41,000)	AED 150,000 (\$41,000)

- › A 6 month waiting period applies for all pre-existing conditions and chronic conditions if you are a new arrival to the UAE and have not been previously insured in the UAE.
- › Where a pre-existing or chronic condition develops into an emergency within the 6 month exclusion period, coverage will be provided up to the benefit limit.
- › Please note, the 6 months waiting period is only applicable to conditions that are subject to this benefit limit.

Up to the maximum amount per period of cover.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Treatment for pre-existing and chronic conditions outside of the UAE</b>	AED 5,000 (\$1,360)	AED 5,000 (\$1,360)	AED 5,000 (\$1,360)

- › A 6 month waiting period applies for pre-existing conditions and chronic conditions.
- › Where a pre-existing or chronic condition develops into an emergency within the 6 month exclusion period, coverage will be provided up to the benefit limit.
- › Please note, the 6 months waiting period is only applicable to conditions that are subject to this benefit limit.

Up to the maximum amount per period of cover.



## INPATIENT & DAYPATIENT BENEFITS

Please note, there are some benefits detailed below that include outpatient treatment. Therefore, the applicable cost share will apply for such treatments.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Hospital charges for:</b> Nursing care, accommodation on a private room basis for inpatient and daypatient treatment and recovery room including emergency treatment.	Paid in full Standard private room	Paid in full Standard private room	Paid in full Standard private room
<ul style="list-style-type: none"> <li>› We will pay for nursing care and accommodation whilst a beneficiary is receiving inpatient or daypatient treatment; or the cost of a treatment room while a beneficiary is undergoing outpatient surgery, if one is required.</li> <li>› We will only pay these costs if:               <ul style="list-style-type: none"> <li>• it is medically necessary for the beneficiary to be treated on an inpatient or daypatient basis;</li> <li>• they stay in hospital for a medically appropriate period of time;</li> <li>• the treatment which they receive is provided or managed by a specialist.</li> </ul> </li> <li>› If a hospital's fees vary depending on the type of room which the beneficiary stays in, the maximum amount which we will pay is reasonable and customary costs in line with appropriate costs in that area, based on a standard single room with a private bathroom or equivalent.</li> <li>› If the treating medical practitioner decides that the beneficiary needs to stay in hospital for a longer period than we have approved in advance, or decides that the treatment which the beneficiary needs is different to that which we have approved in advance, then that medical practitioner must provide us with a report, explaining: how long the beneficiary will need to stay in hospital; the diagnosis (if this has changed); and the treatment which the beneficiary has received, and needs to receive.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Hospital charges for:</b> Operating theatre, prescribed medicines, drugs and dressings and surgeon's and anaesthetists fees on an inpatient and daypatient basis.	Paid in full	Paid in full	Paid in full
Operating theatre costs: <ul style="list-style-type: none"> <li>› Costs and charges relating to the use of an operating theatre, if the treatment being given is covered under this policy.</li> </ul> Medicines, drugs and dressings: <ul style="list-style-type: none"> <li>› Medicines, drugs and dressings which are prescribed for the beneficiary whilst he or she is receiving inpatient or daypatient treatment.</li> <li>› Medicines, drugs and dressings which are prescribed for use at home will be covered under the limits of the prescribed drugs and dressing limit in Outpatient benefits (unless they are prescribed as part of cancer treatment).</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Intensive care:</b> Including intensive therapy, coronary care and high dependency unit.	Paid in full	Paid in full	Paid in full
Treatment in an intensive care, intensive therapy, coronary care or high dependency facility if: <ul style="list-style-type: none"> <li>› that facility is the most appropriate place for them to be treated;</li> <li>› the care provided by that facility is an essential part of their treatment; and</li> <li>› the care provided by that facility is routinely required by patients suffering from the same type of illness or injury, or receiving the same type of treatment.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Surgeons' and Anaesthetists' fees</b>	Paid in full	Paid in full	Paid in full
Inpatient or daypatient costs for: <ul style="list-style-type: none"> <li>› surgeons' and anaesthetists' surgery fees; and</li> <li>› surgeons' and anaesthetists' fees in respect of treatment which is needed immediately before or after surgery (i.e. on the same day as the surgery).</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Specialists' consultation fees</b>	Paid in full	Paid in full	Paid in full

Regular visits by a specialist during stays in hospital including intensive care by a specialist for as long as is required by medical necessity.

We will pay for consultations with a specialist during stays in a hospital where the beneficiary:

- › is being treated on an inpatient or daypatient basis;
- › is having surgery; or
- › where the consultation is a medical necessity.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Companion Accommodation (per night)</b>	AED 100 (\$28)	AED 100 (\$28)	AED 200 (\$56)

- › The cost of accommodation of a person accompanying an inpatient beneficiary in the same room in cases of medical necessity at the recommendation of the treating doctor.

Up to the maximum amount per period of cover.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Hospital accommodation for a parent or legal guardian (per night)</b>	AED 500 (\$135)	AED 1,000 (\$270)	Paid in full

If a beneficiary who is under the age of 18 years old needs inpatient treatment and has to stay in hospital overnight, we will also pay for hospital accommodation for a parent or legal guardian, if:

- › accommodation is available in the same hospital; and
- › the cost is reasonable.

We will only pay for hospital accommodation for a parent or legal guardian if the treatment which the beneficiary is receiving during their stay in hospital is covered under this policy.

Up to the maximum amount per period of cover.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Transplant services for organ, bone marrow and stem cell transplants</b>	Paid in full	Paid in full	Paid in full
<p>We will pay for inpatient treatment directly associated with an organ transplant, for the beneficiary if:</p> <ul style="list-style-type: none"> <li>› the transplant is medically necessary, and the organ to be transplanted has been donated by a member of the beneficiary's family or comes from a verified and legitimate source.</li> </ul> <p>We will pay for anti-rejection medicines following a transplant, when they are given on an inpatient basis.</p> <p>We will pay for inpatient treatment directly associated with a bone marrow or peripheral stem cell transplant if:</p> <ul style="list-style-type: none"> <li>› the transplant is medically necessary; and</li> <li>› the material to be transplanted is the beneficiary's own bone marrow or stem cells, or bone marrow taken from a verified and legitimate source.</li> </ul> <p>We will not pay for bone marrow or peripheral stem cell transplants under this part of this policy if the transplants form part of cancer treatment. The cover which we provide in respect of cancer treatment is explained in other parts of this policy.</p> <p>If a person donates bone marrow or an organ to a beneficiary, we will pay for:</p> <ul style="list-style-type: none"> <li>› the harvesting of the organ or bone marrow;</li> <li>› any medically necessary tissue matching tests or procedures;</li> <li>› the donor's hospital costs; and</li> <li>› any costs which are incurred if the donor experiences complications, for a period of 30 days after their procedure; whether or not the donor is covered by this policy.</li> </ul> <p>The amount which we will pay towards a donor's medical costs will be reduced by the amount which is payable to them in relation to those costs under any other insurance policy or from any other source.</p> <p>If a beneficiary donates an organ for a medically necessary transplant, we will cover the medical costs incurred by the beneficiary associated with this donation up to any policy limits. However, we will only pay for the harvesting of the donated organ if the intended recipient is also a beneficiary under this plan.</p> <p>We will consider all medically necessary transplants. Other transplants (such as transplants which are considered to be experimental procedures) are not covered under this policy.</p> <p><b>Important note:</b></p> <p>A cost share will apply for all outpatient treatment on the Regional and International plan.</p> <p>A beneficiary must contact us and get approval in advance before they incur any costs relating to organ, bone marrow or stem cell donation or transplant.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Kidney dialysis</b>	Paid in full	Paid in full	Paid in full
<p>Treatment for kidney dialysis will be covered if such treatment is available.</p> <ul style="list-style-type: none"> <li>› We will pay for this on an inpatient or daypatient basis.</li> <li>› We will pay for kidney dialysis treatment outside the beneficiary's country of habitual residence if the country where that treatment is provided is within the beneficiary's selected area of coverage. We will pay for this on a daypatient basis. Travel and accommodation expenses incurred in connection with such treatment will not be covered.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Pathology, radiology and diagnostic tests</b>	Paid in full	Paid in full	Paid in full
<p>Tests which are medically necessary and are recommended by a specialist as part of a beneficiary's hospital stay for inpatient or daypatient treatment, including:</p> <ul style="list-style-type: none"> <li>› blood and urine tests;</li> <li>› X-rays;</li> <li>› ultrasound scans;</li> <li>› electrocardiograms (ECG); and</li> <li>› other diagnostic tests.</li> </ul>			



	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Advanced medical imaging</b>	Paid in full	Paid in full	Paid in full
<p>We will pay for the following scans if they are recommended by a specialist as a part of a beneficiary's inpatient or daypatient treatment:</p> <ul style="list-style-type: none"> <li>› magnetic resonance imaging (MRI);</li> <li>› computed tomography (CT); and/or</li> <li>› positron emission tomography (PET).</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Rehabilitation</b>	AED 9,000 (\$2,500)	AED 18,000 (\$5,000)	Paid in full
<p>We will pay for rehabilitation on an inpatient, daypatient or outpatient basis immediately following treatment that is covered under the policy.</p> <p>We will pay for rehabilitation treatments (physical, occupational and speech therapies), which are recommended by a specialist and are medically necessary after a traumatic event such as a stroke or spinal injury.</p> <p>If the rehabilitation treatment is required in a residential rehabilitation centre we will pay for accommodation and board for up to 30 days for each separate condition that requires rehabilitation treatment.</p> <p>In determining when the 30 day limit has been reached:</p> <ul style="list-style-type: none"> <li>› we count each overnight stay during which a beneficiary receives inpatient treatment as one day;</li> <li>› we count each day on which a beneficiary receives outpatient and daypatient treatment as one day.</li> </ul> <p>Subject to prior approval being obtained, prior to the commencement of any treatment, we will pay for rehabilitation treatment for more than 30 days, if further treatment is medically necessary and is recommended by the treating specialist.</p> <p><b>Important notes:</b></p> <p>A cost share will apply for all outpatient treatment on the Regional and International plan.</p> <p>We will only pay for rehabilitation treatment if it is needed after, or as a result of, treatment which is covered by this policy and it begins within 30 days of the end of that original treatment.</p> <p>All rehabilitation treatment must be approved by us in advance. We will only approve rehabilitation treatment if the treating specialist provides us with a report, explaining:</p> <ul style="list-style-type: none"> <li>› how long the beneficiary will need to stay in hospital;</li> <li>› the diagnosis; and</li> <li>› the treatment which the beneficiary has received, or needs to receive.</li> </ul> <p>Up to 30 days and the maximum amount shown per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Home nursing</b>	AED 9,000 (\$2,500)	AED 18,000 (\$5,000)	Paid in full
<p>We will pay for a beneficiary to have up to 30 days of home nursing care per period of cover if:</p> <ul style="list-style-type: none"> <li>› it is recommended by a specialist following inpatient or daypatient treatment which is covered by this policy;</li> <li>› it starts immediately after the beneficiary leaves hospital; and</li> <li>› it reduces the length of time for which the beneficiary needs to stay in hospital.</li> </ul> <p><b>Important notes:</b></p> <ul style="list-style-type: none"> <li>› We will only pay for home nursing if it is provided in the beneficiary's home by a qualified nurse and it comprises medically necessary care that would normally be provided in a hospital. We will not pay for home nursing which only provides non-medical care or personal assistance.</li> </ul> <p>Up to 30 days and the maximum amount shown per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Physiotherapy</b>	Paid in full	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>› Where treatment is provided on an inpatient or daypatient basis.</li> <li>› We will pay for treatment provided by physiotherapist if it is recommended by a specialist as part of the beneficiary's hospital stay for inpatient or daypatient treatment (but is not the primary treatment which they are in hospital to receive).</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Local road and air ambulance services</b>	Paid in Full (Road only)	Paid in full	Paid in full
<p>Where it is medically necessary, we will pay for a local ambulance to transport a beneficiary:</p> <ul style="list-style-type: none"> <li>› from the scene of an accident or injury to a hospital;</li> <li>› from one hospital to another; or</li> <li>› from their home to a hospital.</li> </ul> <p>We will only pay for a local road ambulance where its use relates to treatment which a beneficiary needs to receive in hospital. Where it is medically necessary, we will pay for an air ambulance to transport the beneficiary from the scene of an accident or injury to a hospital or from one hospital to another.</p> <p><b>Important notes:</b></p> <p>Air ambulance cover is subject to the following conditions and limitations:</p> <ul style="list-style-type: none"> <li>› In some situations it will be impossible, impractical or unreasonably dangerous for an air ambulance to operate. In these situations, we will not arrange or pay for an air ambulance. This policy does not guarantee that an air ambulance will always be available when requested, even if it is medically appropriate.</li> <li>› We will only pay for a local air ambulance, such as a helicopter, to transport a beneficiary for distances up to 100 miles (160 kilometres) and we will only pay for an air ambulance where its use relates to treatment which a beneficiary needs to receive in hospital.</li> </ul> <p>This policy does not provide cover for mountain rescue services.</p> <p>Cover for medical evacuation or repatriation is only available if you have cover under the Healthy Connect option.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Hospice and palliative care</b>	Paid in full	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>› If a beneficiary is given a terminal diagnosis, and there is no available treatment which will be effective in aiding recovery, we will pay for hospital or hospice care and accommodation, nursing care, prescribed medicines, and physical and psychological care.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Internal prosthetic devices/ surgical and medical appliances</b>	AED 150,000 (\$41,000)	Paid in full	Paid in full
<p>Medically necessary internal prosthetic implants, devices or appliances which are put in place during surgery as part of a beneficiary's treatment.</p> <ul style="list-style-type: none"> <li>› A surgical appliance or a medical appliance can mean a prosthesis or device which is required for the purpose of or in connection with surgery or an artificial device or prosthesis which is a necessary part of the treatment immediately following surgery for as long as required by medical necessity.</li> </ul> <p>Up to the maximum amount per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>External prosthetic devices/ surgical and medical appliances</b>	AED 10,000 (\$2,700)	AED 15,000 (\$4,100)	Paid in full
<ul style="list-style-type: none"> <li>› External prosthetics, devices or appliances which are necessary as part of a beneficiary's treatment (subject to the limitations explained below).</li> <li>› We will pay for: <ul style="list-style-type: none"> <li>• a prosthetic device or appliance which is a necessary part of the treatment immediately following surgery for as long as is required by medical necessity;</li> <li>• a prosthetic device or appliance which is medically necessary and is part of the recuperation process on a short-term basis.</li> </ul> </li> <li>› We will pay for an initial external prosthetic device for beneficiaries aged 18 or over per period of cover. We do not pay for any replacement prosthetic devices for beneficiaries who are aged 18 and over.</li> <li>› We will pay for an initial external prosthetic device and up to two replacements for beneficiaries aged 17 or younger per period of cover.</li> <li>› By an external 'prosthetic device', we mean an external artificial body part, such as a prosthetic limb or prosthetic hand which is medically necessary as part of treatment immediately following the beneficiary's surgery or as part of the recuperation process on a short-term basis.</li> </ul> <p>Up to the maximum amount per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Inpatient cash benefit (per night)</b>	AED 400 (\$100)	AED 600 (\$150)	AED 900 (\$250)
<p>Cash payment directly to a beneficiary when they:</p> <ul style="list-style-type: none"> <li>› receive treatment in hospital which is covered under this plan;</li> <li>› stay in a hospital overnight; and</li> <li>› have not been charged for their room, board and treatment costs.</li> </ul> <p>Per night up to 30 nights per period of cover. Up to the maximum amount per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Emergency dental and gum treatment</b>	Paid in full	Paid in full	Paid in full
<p>Dental or gum treatment, in the case of a medical emergency immediately after damage to sound natural teeth or gums on an inpatient or daypatient basis, subject to the conditions set out below.</p> <ul style="list-style-type: none"> <li>› We will pay for emergency treatment which is required by a beneficiary while they are in hospital as an inpatient, if that emergency inpatient dental treatment is recommended by the treating medical practitioner because of a dental emergency (but is not the primary treatment which the beneficiary is in hospital to receive).</li> <li>› This benefit is paid instead of any other dental benefits the beneficiary may be entitled to in these circumstances.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Emergency mental health care</b>	Paid in full	Paid in full	Paid in full
<p>Treatment for emergency mental health conditions and disorders and addiction treatment on an inpatient, daypatient and outpatient basis. We will only pay for evidence-based, medically necessary treatment and recommended by a medical practitioner.</p> <ul style="list-style-type: none"> <li>› Prescription drugs or medication prescribed on an outpatient basis is paid under the prescribed drugs and dressings benefit.</li> <li>› A cost share will apply for all outpatient treatment on the Regional and International plan.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Non-emergency mental health care</b>	AED 5,500 (\$1,500)	AED 7,500 (\$2,000)	AED 7,500 (\$2,000)
<p>Subject to the limits explained below we will pay for the following treatment on an inpatient, daypatient or outpatient basis:</p> <ul style="list-style-type: none"> <li>the treatment of mental health conditions and disorders; and</li> <li>the diagnosis of addictions.</li> </ul> <p><b>Addiction treatment</b></p> <ul style="list-style-type: none"> <li>We will pay for one course or programme of addiction treatment at a specialist centre providing evidence based treatment, if that treatment is medically necessary and recommended by a medical practitioner.</li> <li>We pay for up to three attempts at detoxification, following which we will only pay for further detoxification treatment if the beneficiary completes a formal outpatient course or programme of addiction treatment.</li> <li>We will not pay for any other treatment related to alcoholism or controlled substances addiction; or treatment of any related condition (such as depression, dementia or liver failure); where we reasonably believe that the condition which requires treatment was the direct result of alcoholism or controlled substances addiction.</li> <li>Prescription drugs or medication prescribed on an outpatient basis is paid under the prescribed drugs and dressings benefit.</li> </ul> <p><b>Important note:</b></p> <p>A cost share will apply for all outpatient treatment on the Regional and International plan.</p> <p>Up to the maximum amount per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Cancer care</b>	Paid in full	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>Following a diagnosis of cancer, we will pay for costs for the treatment of cancer if the treatment is considered by us to be active treatment and evidence-based treatment. This includes chemotherapy, radiotherapy, oncology, diagnostic tests and drugs, whether the beneficiary is staying in a hospital overnight or receiving treatment as a daypatient or outpatient.</li> <li>We do not pay for genetic cancer screening.</li> <li>No cost share will apply for outpatient treatment, including drugs.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Routine maternity, childbirth and medically necessary caesarean</b> 10% cost share applies.	AED 18,000 (\$5,000) - routine delivery or up to; AED 18,000 (\$5,000) for medically necessary caesarean	AED 25,500 (\$7,000) - routine delivery or up to; AED 36,500 (\$10,000) for medically necessary caesarean	AED 51,500 (\$14,000) - routine delivery or up to; AED 73,500 (\$20,000) for medically necessary caesarean
<p>We will pay for routine maternity care, childbirth, elective caesarean and medically necessary caesarean costs on an inpatient or daypatient basis including:</p> <ul style="list-style-type: none"> <li>hospital, obstetricians' and midwives' fees for routine childbirth;</li> <li>any fees as a result of post-natal care required by the mother immediately following routine childbirth.</li> </ul> <p>We will not pay for surrogacy or any related treatment. We will not pay for maternity benefit care or treatment for a beneficiary acting as a surrogate or anyone acting as a surrogate for a beneficiary.</p> <p>The International plans benefit limits for routine maternity and a medically necessary caesarean treatment does not result in a combined aggregate limit payable.</p> <p><b>Important notes:</b></p> <ul style="list-style-type: none"> <li>A 10% cost share applies to this benefit.</li> <li>The benefit is payable outside of the UAE once the mother has been covered by the policy for 12 months or more.</li> </ul> <p>Up to the maximum amount per period of cover.</p>			



	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Complications arising from maternity	Paid in full	Paid in full	Paid in full
<p><b>Important note:</b></p> <ul style="list-style-type: none"> <li>› We will pay for all treatment as a result of complications of pregnancy, including a medically necessary termination, ectopic pregnancy and pre-eclampsia.</li> <li>› The benefit is payable outside of the UAE once the mother has been covered by the policy for 12 months or more.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Homebirths	Not covered	AED 2,000 (\$550)	AED 4,000 (\$1,100)
<ul style="list-style-type: none"> <li>› We will pay midwives' and specialists' fees relating to routine home births up to the maximum amount shown per period of cover.</li> <li>› Please note that the Complications from maternity cover explained above does not include cover for home childbirth. This means that any costs relating to complications which arise in relation to home childbirth will only be paid in accordance with the home childbirth limits, as explained in the list of benefits.</li> </ul> <p><b>Important note:</b></p> <p>The benefit is payable outside of the UAE once the mother has been covered by the policy for 12 months or more. Up to the maximum amount per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Newborn Care	Paid in full up to and including 30 days from newborn's birth.	Paid in full up to and including 30 days from newborn's birth.	Paid in full up to and including 30 days from newborn's birth.
<p>We will pay for the following:</p> <ul style="list-style-type: none"> <li>› Any illness or defect detected (congenital or otherwise) during pregnancy or evident at or arising up to and including 30 days from birth.</li> <li>› BCG, Hepatitis B, Vit K and other neo-natal screening tests, including; Phenylketonuria, Congenital Hypothyroidism, Sickle cell screening, Congenital adrenal hyperplasia, G6PD and hearing tests.</li> </ul> <p><b>Important note:</b></p> <p>The pre-existing conditions exclusion period does not apply to newborns.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Congenital conditions and birth defects (life threatening)	AED 150,000 (\$41,000)	AED 150,000 (\$41,000)	AED 150,000 (\$41,000)
<ul style="list-style-type: none"> <li>› We will pay for treatment for life threatening congenital conditions and birth defects on an inpatient, outpatient and daypatient basis which are life threatening.</li> </ul> <p>Up to the maximum shown per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Congenital conditions and birth defects (non-life threatening)	AED 36,500 (\$10,000)	AED 73,500 (\$20,000)	AED 140,000 (\$39,000)
<ul style="list-style-type: none"> <li>› We will pay for treatment of congenital conditions and birth defects on an inpatient, outpatient and daypatient basis which are non-life threatening and manifest themselves before the beneficiary's 18th birthday if: <ul style="list-style-type: none"> <li>• at least one parent has been covered by the policy for a continuous period of 12 months or more prior to the newborn's birth and the newborn is added to the policy within 30 days of the birth.</li> </ul> </li> </ul> <p>Up to the maximum shown per period of cover.</p>			

## OUTPATIENT BENEFITS

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
A cost share applies to all outpatient care benefits (excluding the International Plus plan)	Choose your cost share option for Outpatient treatment. 10% or 20%	A 10% cost share applies for all Outpatient treatment.	No cost share.

Your out of pocket maximum (not applicable on the International Plus plan)	Out of pocket maximum AED 7,500 (\$2,000)	Out of pocket maximum AED 3,500 (\$1,000)	Out of pocket maximum not applicable
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Cost share is the percentage of each claim that is not covered by your plan. For additional peace of mind, our plans include an out of pocket maximum. This means, once a beneficiary has reached the out of pocket maximum, we will cover the rest of any treatment costs for that period of cover.

- › The out of pocket maximum is the maximum amount of cost share any beneficiary would have to pay in a period of cover.
- › Only amounts you pay related to cost share contribute to the out of pocket maximum.
- › The beneficiary is responsible for paying the amount of any cost share to the healthcare provider.
- › The cost share and out of pocket maximum is determined separately for each beneficiary and each period of cover.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Consultations with medical practitioners and specialists	Paid in full	Paid in full	Paid in full

- › Consultations or meetings with a medical practitioner which are necessary to diagnose an illness, or to arrange or receive treatment;
- › Non-surgical treatment on an outpatient basis, which is recommended by a specialist as being medically necessary.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Surgeons' and Anaesthetists' fees	Paid in full	Paid in full	Paid in full

Outpatient costs for:

- › surgeons' and anaesthetists' surgery fees; and
- › surgeons' and anaesthetists' fees in respect of treatment which is needed immediately before or after surgery (i.e. on the same day as the surgery).

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Outpatient maternity	Paid in full Maximum of 8 visits to obstetrician.	Paid in full Maximum of 12 visits to obstetrician.	Paid in full

- › All care provided for low risk or specialist obstetrician for high risk referrals.
- › All blood tests required during one of the visits to an obstetrician including, initial investigations such as:
  - FBC and Platelets;
  - Blood group, rhesus status and antibodies;
  - VDRL, MSU and urinalysis;
  - Rubella serology;
  - GTT (for high risk patients);
  - FBS, random s or A1.
- › 3 ante-natal ultrasound scans;
- › Appointment(s) for and tests such as the CTG and Bishops score and a membrane sweep; and
- › All visits including reviews, checks and tests in accordance with ante-natal protocols for high risk patients.

**Important notes:**

- › All complications in relation to outpatient maternity are paid in full.
- › All post-natal treatment (other than immediately following delivery and complications) is covered under the applicable outpatient care benefit.
- › The benefit is payable outside of the UAE once the mother has been covered by the policy for 12 months or more.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Kidney dialysis	Paid in full	Paid in full	Paid in full

Treatment for kidney dialysis will be covered if such treatment is available.

- › We will pay for this on an outpatient basis.
- › We will pay for kidney dialysis treatment outside the beneficiary's country of habitual residence if the country where that treatment is provided is within the beneficiary's selected area of coverage.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Pathology, radiology and diagnostic tests	Paid in full	Paid in full	Paid in full

Tests which are medically necessary and are recommended by a specialist as part of a beneficiary's outpatient treatment, including:

- › blood and urine tests;
- › X-rays;
- › ultrasound scans;
- › electrocardiograms (ECG); and
- › other diagnostic tests.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Advanced medical imaging	Paid in full	Paid in full	Paid in full

We will pay for the following scans on an outpatient basis if they are recommended by a specialist part of beneficiary's outpatient treatment:

- › magnetic resonance imaging (MRI);
- › computed tomography (CT); and/or
- › positron emission tomography (PET).

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Physiotherapy</b>	Paid in full Maximum of 15 visits	Paid in full Maximum of 30 visits	Paid in full
<p>› Physiotherapy treatment on an outpatient basis that is medically necessary and restorative in nature to help you to carry out your normal activities of daily living. The treatment must be carried out by a properly qualified practitioner who holds the appropriate license to practice in the country where the treatment is received. This excludes any sports medicine treatment.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Osteopathy and chiropractic treatment</b>	Paid in full up to a combined maximum of 10 visits	Paid in full up to a combined maximum of 15 visits	Paid in full
<p>› Treatment includes a combined maximum total of visits in any one period of cover for osteopathy and chiropractic treatment which is evidence-based treatment, medically necessary and recommended by a treating specialist, if a medical practitioner recommends the treatment and provides a referral. The treatment must be carried out by a properly qualified practitioner who holds the appropriate license to practice in the country where the treatment is received. We will require a medical report and treatment plan prior to approval. This excludes any sports medicine treatment.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Acupuncture</b>	AED 3,500 (\$1,000)	Paid in full	Paid in full
<p>› Treatment administered by a registered Acupuncturist, when those treatments are recommended by a medical practitioner. The treatment must be carried out by a properly qualified practitioner who holds the appropriate license to practice in the country where the treatment is received.</p> <p>› We will not pay for any other types of alternate therapies or treatment, including but not limited to Naturopathy, Herbal Medicine, Reiki or Hypnotism.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Emergency dental and gum treatment</b>	Paid in full	Paid in full	Paid in full
<p>› Dental or gum <i>treatment</i>, in the case of a medical emergency immediately after damage to <i>sound natural teeth</i> or gums on an <i>outpatient</i> basis.</p> <ul style="list-style-type: none"> <li>• This <i>benefit</i> is paid instead of any other dental <i>benefits</i> the <i>beneficiary</i> may be entitled to in these circumstances.</li> </ul>			



	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Restorative speech therapy</b>	AED 9,000 (\$2,500)	AED 18,000 (\$5,000)	Paid in full
Restorative speech therapy if: <ul style="list-style-type: none"> <li>› it is required immediately following treatment which is covered under this policy (for example, as part of a beneficiary's follow-up care after they have suffered a stroke);</li> <li>› it is confirmed by a specialist to be medically necessary on a short-term basis.</li> </ul> <b>Important notes:</b> <ul style="list-style-type: none"> <li>› We will only pay for speech therapy if the aim of that therapy is to restore impaired speech function.</li> <li>› We will not pay for speech therapy which:               <ul style="list-style-type: none"> <li>• aims to improve speech skills which are not fully developed;</li> <li>• is educational in nature;</li> <li>• is intended to maintain speech communication;</li> <li>• aims to improve speech or language disorders (such as stammering); or</li> <li>• is as a result of learning difficulties, developmental problems (such as dyslexia), attention-deficit hyperactivity disorder or autism.</li> </ul> </li> </ul> Up to the maximum amount shown per period of cover.			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Prescribed drugs and dressings</b>	AED 9,000 (\$2,500)	AED 18,000 (\$5,000)	Paid in full
<ul style="list-style-type: none"> <li>› Prescription drugs and dressings which are prescribed by a medical practitioner on an outpatient basis.</li> </ul> Up to the maximum shown per period of cover.			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Rental of durable equipment</b>	AED 9,000 (\$2,500)	AED 18,000 (\$5,000)	Paid in full
<ul style="list-style-type: none"> <li>› Rental of durable medical equipment for up to 45 days per period of cover, if the use of that equipment is recommended by a specialist in order to support the beneficiary's treatment.</li> <li>› We will only pay for the rental of durable medical equipment which:               <ul style="list-style-type: none"> <li>• is not disposable, and is capable of being used more than once;</li> <li>• serves a medical purpose;</li> <li>• is fit for use in the home; and</li> <li>• is of a type only normally used by a person who is suffering from the effect of a disease, illness or injury.</li> </ul> </li> </ul> Up to the maximum shown per period of cover.			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Adult vaccinations</b>	AED 2,000 (\$550)	AED 7,500 (\$2,000)	Paid in full
<ul style="list-style-type: none"> <li>› The following vaccinations and immunisations that are clinically appropriate, namely:               <ul style="list-style-type: none"> <li>• Influenza (flu);</li> <li>• Tetanus (once every 10 years);</li> <li>• Hepatitis A;</li> <li>• Hepatitis B;</li> <li>• Meningitis;</li> <li>• Rabies;</li> <li>• Cholera;</li> <li>• Yellow Fever;</li> <li>• Japanese Encephalitis;</li> <li>• Polio booster;</li> <li>• Typhoid; and</li> <li>• Malaria (in tablet form, either daily or weekly).</li> </ul> </li> </ul> Up to the maximum shown per period of cover.			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Well child tests</b>	AED 9,000 (\$2,500)	Paid in full	Paid in full
<p>Payable for children at appropriate age intervals up to the age of 6.</p> <p>We will pay for well child routine tests at any of the appropriate age intervals (birth, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 2 years, 3 years, 4 years, 5 years and 6 years) and for a medical practitioner to provide preventative care consisting of:</p> <ul style="list-style-type: none"> <li>› evaluating medical history;</li> <li>› physical examinations;</li> <li>› development assessment;</li> <li>› anticipatory guidance; and</li> <li>› appropriate laboratory tests for children aged 6 or younger.</li> </ul> <p>We will pay for one visit to a medical practitioner at each of the appropriate age intervals (up to a total of 13 visits for each child) for the purposes of receiving preventative care services.</p> <p>In addition, we will pay for:</p> <ul style="list-style-type: none"> <li>› one school entry health check, to assess growth, hearing and vision, for each child aged 6 or younger.</li> <li>› diabetic retinopathy screening for children over the age of 12 and up to age 17 years who have diabetes.</li> </ul> <p>Up to the maximum amount shown per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Child vaccinations and immunisations</b>	Paid in full	Paid in full	Paid in full
<p>The following vaccinations and immunisations as appropriate, for children aged 17 or younger:</p> <ul style="list-style-type: none"> <li>› DPT (Diphtheria, Pertussis and Tetanus);</li> <li>› MMR (Measles, Mumps and Rubella);</li> <li>› HiB (Haemophilus influenza type b);</li> <li>› Polio;</li> <li>› Influenza;</li> <li>› Hepatitis B;</li> <li>› Meningitis; and</li> <li>› Human Papilloma Virus (HPV).</li> </ul> <p><b>Important note:</b></p> <p>The benefit includes vaccinations and immunisations as per the guidelines set by the Dubai Ministry of Health.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Annual routine tests for children aged 15 or younger</b>	AED 9,000 (\$2,500)	Paid in full	Paid in full
<p>We will pay for the following routine tests for children aged 15 or younger:</p> <ul style="list-style-type: none"> <li>› one eye examination; and</li> <li>› one hearing test.</li> </ul> <p>Up to the maximum amount shown per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Diabetes screening</b>	Paid in full	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>› Diabetes screening coverage every 3 years for low risk individuals from age 30 years, and also for high risk individuals annually from age 18 years.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Treatment for accidental hearing loss</b>	Paid in full	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>› We will pay for treatment for accidental hearing loss as a result of a medical emergency or as a result of a life threatening condition.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Hearing and vision aids and vision correction by surgeries and laser in a medical emergency</b>	Paid in full	Paid in full	Paid in full



# OPTIONAL COVERAGE

# HEALTHY CONNECT



## HEALTHY CONNECT

In addition to the core medical offering, our Healthy Connect optional module includes a wide range of benefits that will help you take control and pro-actively manage the health and wellbeing of you and your family. The benefits range from comprehensive dental care, non-symptomatic health screenings and examinations, medical evacuation in the event treatment is not available locally in an emergency and much more. What's more, we understand that there are times when you would prefer to have treatment in a familiar surrounding with family members close by; Healthy connect also includes a Return home cash benefit, making it possible to return home, should the need arise.

[Healthy Connect cannot be purchased on its own and is applicable to all beneficiaries.](#)

## WELLNESS

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Routine adult physical examinations</b>	AED 1,500 (\$400)	AED 2,000 (\$550)	AED 3,500 (\$1,000)
<ul style="list-style-type: none"> <li>Routine adult physical examinations (including but not limited to: height, weight, body mass index, bloods, urinalysis, blood pressure, cardiac examination, vital organ functions, lung function etc.) for persons aged 18 or older.</li> <li>Up to the maximum amount shown per period of cover.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Screening and tests</b>	AED 5,500 (\$1,500)	AED 11,000 (\$3,000)	Paid in full
<p>One annual screening/test for each of the following:</p> <ul style="list-style-type: none"> <li>Pap smear <ul style="list-style-type: none"> <li>Papanicolaou test (pap smear) for female beneficiaries.</li> </ul> </li> <li>Prostate cancer screening <ul style="list-style-type: none"> <li>Prostate examination (prostate specific antigen (PSA) test) for male beneficiaries aged 50 or over.</li> </ul> </li> <li>Mammograms for breast cancer screening <ul style="list-style-type: none"> <li>Aged 35-39: one baseline mammogram for asymptomatic women.</li> <li>Aged 40-49: one mammogram for asymptomatic women every two years.</li> <li>Aged 50 or older: one mammogram each year.</li> </ul> </li> <li>Bowel cancer screening <ul style="list-style-type: none"> <li>Bowel cancer screening for beneficiaries aged 55 or older.</li> </ul> </li> <li>Bone densitometry <ul style="list-style-type: none"> <li>One scan to determine the density of the beneficiary's bones.</li> </ul> </li> </ul> <p>Up to the maximum amount shown per period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Homeopathy, Ayurveda and Chinese medicine</b>	AED 3,500 (\$1,000)	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>Treatment administered by a registered Homeopath, Ayurvedic &amp; Chinese medicine practitioner, when those treatments are recommended by a medical practitioner. The treatment must be carried out by a properly qualified practitioner who holds the appropriate license to practice in the country where the treatment is received.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Dietetic consultations</b>	Not covered	Not covered	Paid in full
<ul style="list-style-type: none"> <li>Up to 4 consultations with a dietician per period of cover, if the beneficiary requires dietary advice relating to a diagnosed disease or illness such as diabetes (International Plus plan only).</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Life management assistance programme</b>	Paid in full	Paid in full	Paid in full
<ul style="list-style-type: none"> <li>Our Life Management service is available 24 hours a day, 7 days a week, 365 days a year. Professionals are ready to assist you with any issue that matters to you.</li> <li>We will pay for up to 5 counselling sessions per issue per period of cover. This could be telephonic or face to face counselling support.</li> <li>Unlimited in the moment telephonic support for live assistance.</li> <li>Provides information, resources and counselling on any work, life, personal, or family issue that matters to you.</li> <li>Information services provide support including assistance for day to day demands or the logistics of relocating. The information specialists can offer assistance over the phone and perform research and provide pre-qualified referrals to local resources.</li> </ul> <p><b>Please contact us for approval. The service is provided by our chosen counselling provider.</b></p>			



## DENTAL CARE

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Annual benefit - maximum per beneficiary per period of cover</b>	AED 4,500 (\$1,250)	AED 13,000 (\$3,550)	AED 27,500 (\$7,500)

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Preventative dental treatment</b> No waiting period applies.	Paid in full	Paid in full	Paid in full

We will pay for the following preventative dental treatment recommended by a dentist:

- › two dental check-ups per period of cover;
- › X-rays, including bitewing, single view, and or thopantomogram (OPG);
- › scaling and polishing including topical fluoride application when necessary (two per period of cover);
- › one mouth guard per period of cover;
- › one night guard per period of cover; and
- › Fissure sealant.

Paid in full up to the overall annual Dental Care benefit limit.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Routine dental treatment</b> After the beneficiary has been covered on the Healthy Connect module for 3 months.	Paid in full	Paid in full	Paid in full

Treatment costs for the following routine dental treatment after the beneficiary has been covered on the Healthy Connect optional module for 3 months (if that treatment is necessary for continued oral health and is recommended by a dentist):

- › dental fillings;
- › root canal treatment;
- › extractions;
- › surgical procedures;
- › occasional treatment;
- › anaesthetics; and
- › periodontal treatment.

Paid in full up to the overall annual Dental Care benefit limit.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Major restorative dental treatment</b> After the beneficiary has been covered on the Healthy Connect module for 9 months.	Paid in full 20% cost share applies	Paid in full 20% cost share applies	Paid in full 20% cost share applies

Treatment costs for the following major restorative dental treatments after the beneficiary has been covered on the Healthy Connect option for 9 months:

- › dentures (acrylic/synthetic, metal and metal/acrylic);
- › crowns;
- › inlays; and
- › placement of dental implants.

If a beneficiary needs major restorative dental treatment before they have had Healthy Connect cover for 9 months, we will pay 50% of the treatment costs.

Paid in full up to the overall annual Dental Care benefit limit.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Orthodontic treatment</b> After the beneficiary has been covered on the Healthy Connect module for 18 months.	Not covered	Paid in full 20% cost share applies	Paid in full 20% cost share applies

Treatment for beneficiaries aged 18 years old or younger after the beneficiary has been covered on the Healthy Connect option for 18 months.

We will only pay for orthodontic treatment if:

- › the dentist or orthodontist who is going to provide the treatment provides us, in advance, with a detailed description of the proposed treatment (including X-rays and models), and an estimate of the cost of treatment; and
- › we have approved the treatment in advance.

Paid in full up to the overall annual Dental Care benefit limit.

## VISION CARE

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Routine eye examination	Paid in full	Paid in full	Paid in full
<p>› One routine eye examination per period of cover to be carried out by either an ophthalmologist or optometrist. We will not pay for more than one eye examination in any one period of cover.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Expenses for:	AED 600 (\$150)	AED 900 (\$250)	AED 2,000 (\$550)
<p>› Spectacle lenses; › Contact lenses; › Spectacle frames; › Prescription sunglasses;</p> <p>when all are prescribed by an optometrist or ophthalmologist. Up to the maximum amount per period of cover.</p>			

## RETURN HOME CASH BENEFIT

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Return home cash benefit	AED 900 (\$250)	AED 3,000 (\$800)	AED 5,500 (\$1,500)
<p>If a beneficiary requests to travel back to their country of nationality for medically necessary inpatient or daypatient treatment, we will make a cash payment directly to the beneficiary:</p> <ul style="list-style-type: none"> <li>› to receive treatment in a hospital which is covered under the limits of this plan and within the beneficiary's selected area of coverage.</li> <li>› if it is medically appropriate for the beneficiary to travel back to their country of nationality.</li> </ul> <p>As regards to the return journey, we will pay the price of reasonable costs for an economy class air ticket for the beneficiary requiring treatment.</p> <p><b>Important notes:</b></p> <ul style="list-style-type: none"> <li>› The benefit is not payable in respect of any pre-existing conditions;</li> <li>› All treatment must be approved in advance by our customer care team;</li> <li>› The air ticket excludes the cost of an air ambulance;</li> <li>› The beneficiary will receive reimbursement once the treatment has been completed;</li> <li>› Evidence of the air ticket and cost is required prior to any reimbursement;</li> <li>› We will not pay for any other costs related to the journey home including; accommodation costs, other transport costs to and from the hospital, living allowance expenses or for anyone accompanying the beneficiary on the journey;</li> <li>› We will not pay for hospital accommodation if a beneficiary is no longer being treated but is waiting for a return flight; and</li> <li>› If the beneficiary is unable to return to their expatriate location following treatment, we may need to exercise our right to terminate the policy.</li> </ul> <p>Up to the maximum amount per period of cover.</p>			

## MEDICAL EVACUATION AND REPATRIATION SERVICE

Medical Evacuation and Repatriation service provides coverage for reasonable transportation costs to the nearest centre of medical excellence in the event that the treatment is not available locally in an emergency. This option also includes repatriation coverage. It also includes compassionate visits for a parent, spouse, partner, sibling or child to visit a beneficiary after an accident or sudden illness and the beneficiary has not been evacuated or repatriated.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Medical Evacuation</b>	Paid in full	Paid in full	Paid in full
<p>Transfer to the nearest centre of medical excellence if the treatment the beneficiary needs is not available locally in an emergency.</p> <p>If a beneficiary requires emergency treatment, we will pay for medical evacuation for them:</p> <ul style="list-style-type: none"> <li>to be taken to the nearest hospital where the necessary treatment is available (even if this is in another part of the country, or in another country); and</li> <li>to return to the place they were taken from, provided the return journey takes place not more than 14 days after the treatment is completed.</li> </ul> <p>As regards to the return journey, we will pay:</p> <ul style="list-style-type: none"> <li>the price of an economy class air ticket; or</li> <li>the reasonable cost of travel by land or sea; whichever is lesser.</li> </ul> <p>We will only pay for taxi fares if:</p> <ul style="list-style-type: none"> <li>it is medically preferable for the beneficiary to travel to the airport by taxi, rather than by ambulance; and</li> <li>approval is obtained in advance from the medical assistance service.</li> </ul> <p>We will pay for evacuation (but not repatriation) if the beneficiary needs diagnostic tests or cancer treatment (such as chemotherapy) if, in the opinion of our medical assistance service, evacuation is appropriate and medically necessary in the circumstances.</p> <p>We will not pay any other costs related to an evacuation (such as accommodation costs).</p> <p><b>Important note:</b></p> <p>If you require to return to the hospital where you were evacuated for follow up treatment, we will not pay for travel costs or living allowance costs.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<b>Medical repatriation</b>	Paid in full	Paid in full	Paid in full
<p>If a beneficiary requires a medical repatriation, we will pay:</p> <ul style="list-style-type: none"> <li>for them to be returned to their country of habitual residence or country of nationality; and</li> <li>to return them to the place they were taken from, provided the return journey takes place not more than 14 days after the treatment is completed.</li> </ul> <p>The above journey must be approved in advance by our medical assistance service and to avoid doubt all transportation costs are required to be reasonable and customary.</p> <p>As regards to the return journey, we will pay:</p> <ul style="list-style-type: none"> <li>the price of an economy class air ticket; or</li> <li>the reasonable cost of travel by land or sea; whichever is lesser.</li> </ul> <p>We will only pay for taxi fares if:</p> <ul style="list-style-type: none"> <li>it is medically preferable for the beneficiary to travel to the airport by taxi, rather than by ambulance; and</li> <li>approval is obtained in advance from the medical assistance service.</li> </ul> <p>We will not pay any other costs related to a repatriation (such as accommodation costs).</p> <p><b>Important notes:</b></p> <ul style="list-style-type: none"> <li>If you require to return to the hospital where you were repatriated for follow up treatment, we will not pay for travel costs or living allowance costs.</li> <li>If a beneficiary contacts the medical assistance service to ask for prior approval for repatriation, but the medical assistance service does not consider repatriation to be medically appropriate, we may instead arrange for the beneficiary to be evacuated to the nearest hospital where the necessary treatment is available. We will then repatriate the beneficiary to his or her specified country of nationality or country of habitual residence when his or her condition is stable, and it is medically appropriate to do so.</li> </ul>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Repatriation of mortal remains	Paid in full	Paid in full	Paid in full
<p>› If a beneficiary dies outside their country of habitual residence during the period of cover, the medical assistance service will arrange for their mortal remains to be returned to their country of habitual residence or country of nationality as soon as reasonably practicable, subject to airlines requirements and restrictions.</p> <p>› We will not pay any costs associated with burial or cremation or the transport costs for someone to collect or accompany the beneficiary's mortal remains.</p>			

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
Travel costs for accompanying person	Paid in full	Paid in full	Paid in full
<p>› If a beneficiary needs a parent, sibling, child, spouse or partner, to travel with them on their journey in conjunction with a medical evacuation or repatriation, because they:</p> <ul style="list-style-type: none"> <li>• need help getting on or off an aeroplane or other vehicle;</li> <li>• are travelling 1000 miles (or 1600km) or further;</li> <li>• are severely anxious or distressed, and are not being accompanied by a nurse, paramedic or other medical escort; or</li> <li>• are very seriously ill or injured;</li> </ul> <p>we will pay for a relative or partner to accompany them. The journeys (for the avoidance of doubt shall mean one outbound and one return) must be approved in advance by the medical assistance service and the return journey must take place not more than 14 days after the treatment is completed.</p> <p>› We will pay:</p> <ul style="list-style-type: none"> <li>• the price of an economy class air ticket; or</li> <li>• the reasonable cost of travel by land or sea; whichever is the lesser.</li> </ul> <p>If it is appropriate, considering the beneficiary's medical requirements, the family member or partner who is accompanying them may travel in a different class. If it is medically necessary for a beneficiary to be evacuated or repatriated, and they are going to be accompanied by their spouse or partner, we will also pay the reasonable travel costs of any children aged 17 or under, if those children would otherwise be left without a parent or guardian.</p> <p><b>Important notes:</b></p> <p>We will not pay for a third party to accompany a beneficiary if the original purpose of the evacuation was to enable the beneficiary to receive outpatient treatment.</p> <p>We will not pay for any other costs relating to third party travel costs, such as accommodation or local transportation.</p>			

## COMPASSIONATE VISITS

The Healthy Connect option includes the provision detailed below for compassionate visits to you by immediate family members.

	REGIONAL	INTERNATIONAL	INTERNATIONAL PLUS
<p><b>Compassionate visits - travel costs</b></p> <p>Up to a maximum of 5 trips per lifetime. Up to the maximum amount shown per period of cover.</p>	AED 3,500 (\$1,000)	AED 4,500 (\$1,250)	AED 4,500 (\$1,250)
<p><b>Compassionate visits - living allowance costs</b></p> <p>Up to the maximum amount shown per day for each visit with a maximum of 10 days per visit. Up to the maximum amount shown per period of cover.</p>	AED 600 (\$150)	AED 750 (\$200)	AED 750 (\$200)

- › For each beneficiary we will pay for up to 5 compassionate visits over the lifetime of the cover. Compassionate visits must be approved in advance by our medical assistance service.
- › We will pay the cost of economy class return travel for a parent, spouse, partner, sibling or child to visit a beneficiary after an accident or sudden illness, if the beneficiary is in a different country and is anticipated to be hospitalised for five days or more, or has been given a short-term terminal prognosis.
- › We will also pay for living expenses incurred by a family member during a compassionate visit, for up to 10 days per visit while they are away from their country of habitual residence up to the limits shown in the list of benefits (subject to being provided with receipts in respect of the costs incurred).

**Important note:**

We will not pay for a compassionate visit when the beneficiary has been evacuated or repatriated. If an evacuation or repatriation takes place during a compassionate visit, we will not pay any further third party transportation costs.



# YOUR TRAVEL SAFETY COMPANION

**Our Healthguard International and Healthguard International Plus plans** include the Safe Travel by Cigna application, which includes helpful travel advice, country profiles, real time alerts, news for specific travel destinations and much more.



Global incident monitoring system, with push notification travel news and security alerts



Extensive country profiles, with travel safety guides for over 195 countries



Secure personal profile and travel document upload/storage facility



Pre-trip advice and information on everything from personal security to natural hazards



SOS tracking system that turns your mobile phone into a personal safety device



The Safe Travel by Cigna App is currently made available to you free of charge for use on your phone whilst you remain a policyholder of the Healthguard International and Healthguard International Plus plans. We reserve the right to amend or withdraw the Safe Travel by Cigna App.

Available for Apple and Android devices only.

# WHEN YOU NEED OUR HELP - WE WILL BE THERE FOR YOU

If you become ill or have a medical emergency, we want to make sure you are getting the right treatment when you need it. Our experts are available 24 hours a day, 7 days a week, 365 days a year and can help you arrange your treatment plan, and point you in the right direction, saving you the time and hassle of looking for a hospital, clinic or medical practitioner yourself. What's more, in most cases we can arrange direct payment with your treatment provider, cutting down the hassle and letting you focus on your health.

## Getting treatment

Prior authorisation is required for all treatments and services with the exception of certain outpatient treatments. Our Customer Care Team will help you find a high quality hospital or doctor near you. Wherever possible, we will pay them directly, saving you the inconvenience of paying for your treatment yourself and claiming a refund later.

On occasions where you do pay for treatment yourself, we'll aim to process your claim within 5 working days after receiving all necessary documentation.

The Customer Handbook you receive as part of your welcome pack will tell you everything you need to know about getting treatment and making a claim.



**We're here to help 24 hours a day  
7 days a week, 365 days a year**



# WHAT YOU CAN EXPECT FROM US

**In addition to your Cigna Healthguard<sup>SM</sup> plan, there are a few more things you might like to know about us and the service you can expect as a customer of ours.**

## Comprehensive welcome pack

Once you have joined Cigna | Zurich Insurance Middle East, we will send your policy documents to the postal address you provided on your application form.

Please read through your policy documents when you receive them and make sure you check the details of your policy on the certificate of insurance. You will need to show your ID card when you require treatment so your doctor knows who you are (it's not used for payment). It also has all the contact numbers you'll need.

## Your policy documents include the following:



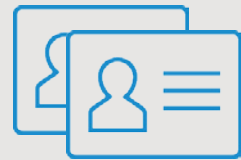
### Customer Handbook

This is your guide to using your health care plan, how it works and a guide to the benefits. It also includes the terms and conditions, general exclusions and definitions of your policy and our Complaints procedure - all in one useful booklet.



### Certificate of Insurance

A record of the plan you chose, the premium and what and who it covers.



### ID Cards

These provide proof of your identity and cover for when you need treatment.







**Together, all the way.®**



Policy underwritten by  
Zurich Insurance Middle East,  
a Cigna-owned Company.

Important note: This document serves only as a reference and does not form part of a legal contract. The information herein is believed accurate as of the date of publication and is subject to change. This material is intended for informational purposes only and contains a partial and general description of benefits. We recommend that you examine your (product) policy in detail to be certain of precise terms, conditions and coverage. Coverage and benefits are available except where prohibited by applicable law.

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