

# Health Insurance

Coverage	Benefit (per time/disability)
<b>Inpatient and day-case benefits</b>	
<b>1. Room and board including nursing service (per day)</b>	
- Normal Room and board (Maximum 30 days)	2,000
- ICU room and board (Maximum 15 days)	4,000
(The total maximum number of days including ICU room is 31 days)	
<b>2. Hospital general expenses</b>	
- Hospital general expenses (including follow up 30 days)	20,000
- Specialist 's consultation fees when no surgery (included in hospital general expenses)	2,000
- Ambulance (included in hospital general expenses)	1,000
- Emergency treatment (first visit within 24 hours of emergency and 15 days follow up) (included in hospital general expenses)	4,000
<b>3. Surgical fee</b>	
- Surgical fee (non-schedule)	30,000
- Specialist 's consultation fees for surgical cases (included in surgical )	3,000
<b>4. Physician's fee</b>	
- In-patient Physician's fees for doctor visit (1 visit per day / maximum 30 days)	1,000
<b>Outpatient benefit</b>	
- Outpatient (1 visit per day / maximum 30 times per year)	1,800
<b>Major Medical</b>	
- Major medical pays 80% of eligible medical expenses in excess of the basis inpatient benefits (excluding room and board) (maximum per year)	100,000
<b>Personal Accident (PA2)</b>	
- Loss of life, Dismemberment, Loss of sight, hearing, and speech and permanent disability due to accident (extended murder&assault and motorcycling)	50,000

## Remarks :

1. The above annual premium are excluded Stamp Duty.
2. All benefits are available to eligible employees and spouses age 15 to 65 years
3. Nursing service is included in Room and board
4. Inpatient expenses are payable for any one disability.

This means expenses relating to treatment for a condition or symptoms arising from the same cause including all complications.

If the same disability should reoccur 90 days must elapse from the last treatment date for that disability to be considered a new disability.

5. Cost of outpatient emergency treatment due to injury within 24 hours of the injury or accident occurring including 15 days follow up.

The Company will pay this benefit according to the amount actually paid but not exceeding the maximum amount per disability or the maximum benefit stated in the schedule whichever is smaller.