

These rates are for guidance only. For exact quotations please use our quickquote tool on morgan-price.com

Rates

January 2023

Area 1

Bangladesh, Brunei, Cambodia, East Timor, India, Indonesia, Laos, Malaysia, Myanmar, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Vietnam

	Core IP	Optional OP Module 1	Optional OP Module 2	Optional Remove OP Co-Insurance	Optional Reduce Overall Annual Limit to \$250,000	Optional Dental	Optional Maternity Module	Optional Enhanced Network Module
Age	\$	\$	\$	\$	\$	\$	\$	\$
Child	489.20	244.60	366.90	73.38	- 36.69	39.14	-	122.30
20 to 24	682.39	341.19	511.79	102.36	- 51.18	54.59	682.39	170.60
25 to 29	734.15	367.07	550.61	110.12	- 55.06	58.73	734.15	183.54
30 to 34	805.90	402.95	604.43	120.89	- 60.44	64.47	805.90	201.48
35 to 39	919.06	459.53	689.29	137.86	- 68.93	73.52	919.06	229.76
40 to 44	1,047.40	523.70	785.55	157.11	- 78.56	83.79	1,047.40	261.85
45 to 49	1,254.39	627.20	940.80	188.16	- 94.08	100.35	1,254.39	313.60
50 to 54	1,395.15	697.57	1,046.36	209.27	- 104.64	111.61	1,395.15	348.79
55 to 59	1,768.65	884.33	1,326.49	265.30	- 132.65	141.49	1,768.65	442.16
60 to 64	2,454.54	1,227.27	1,840.91	368.18	- 184.09	196.36	-	613.64
65 to 69	3,329.47	1,664.73	2,497.10	499.42	- 249.71	266.36	-	832.37
70 to 74	4,204.28	2,102.14	3,153.21	630.64	- 315.32	336.34	-	1,051.07

Rates

January 2023

Area 2 Worldwide excluding USA, China, Hong Kong, Singapore

	Core IP	Optional OP Module 1	Optional OP Module 2	Optional Remove OP Co-Insurance	Optional Reduce Overall Annual Limit to \$250,000	Optional Dental	Optional Maternity Module	Optional Enhanced Network Module
Age	\$	\$	\$	\$	\$	\$	\$	\$
Child	538.11	269.06	403.59	80.72	- 40.36	43.05	-	134.53
20 to 24	750.63	375.31	562.97	112.59	- 56.30	60.05	750.63	187.66
25 to 29	807.56	403.78	605.67	121.13	- 60.57	64.60	807.56	201.89
30 to 34	886.49	443.25	664.87	132.97	- 66.49	70.92	886.49	221.62
35 to 39	1,010.96	505.48	758.22	151.64	- 75.82	80.88	1,010.96	252.74
40 to 44	1,152.14	576.07	864.11	172.82	- 86.41	92.17	1,152.14	288.04
45 to 49	1,379.83	689.92	1,034.88	206.98	- 103.49	110.39	1,379.83	344.96
50 to 54	1,534.66	767.33	1,151.00	230.20	- 115.10	122.77	1,534.66	383.67
55 to 59	1,945.52	972.76	1,459.14	291.83	- 145.91	155.64	1,945.52	486.38
60 to 64	2,700.00	1,350.00	2,025.00	405.00	- 202.50	216.00	-	675.00
65 to 69	3,662.42	1,831.21	2,746.81	549.36	- 274.68	292.99	-	915.60
70 to 74	4,624.71	2,312.35	3,468.53	693.71	- 346.85	369.98	-	1,156.18

Rates

January 2023

Area 3 Worldwide excluding USA

	Core IP	Optional OP Module 1	Optional OP Module 2	Optional Remove OP Co-Insurance	Optional Reduce Overall Annual Limit to \$250,000	Optional Dental	Optional Maternity Module	Optional Enhanced Network Module
Age	\$	\$	\$	\$	\$	\$	\$	\$
Child	611.49	305.75	458.62	91.72	- 45.86	48.92	-	152.87
20 to 24	852.99	426.49	639.74	127.95	- 63.97	68.24	852.99	213.25
25 to 29	917.68	458.84	688.26	137.65	- 68.83	73.41	917.68	229.42
30 to 34	1,007.38	503.69	755.53	151.11	- 75.55	80.59	1,007.38	251.84
35 to 39	1,148.82	574.41	861.62	172.32	- 86.16	91.91	1,148.82	287.21
40 to 44	1,309.25	654.63	981.94	196.39	- 98.19	104.74	1,309.25	327.31
45 to 49	1,567.99	784.00	1,175.99	235.20	- 117.60	125.44	1,567.99	392.00
50 to 54	1,743.93	871.97	1,307.95	261.59	- 130.80	139.51	1,743.93	435.98
55 to 59	2,210.81	1,105.41	1,658.11	331.62	- 165.81	176.87	2,210.81	552.70
60 to 64	3,068.18	1,534.09	2,301.14	460.23	- 230.11	245.45	-	767.05
65 to 69	4,161.84	2,080.92	3,121.38	624.28	- 312.14	332.95	-	1,040.46
70 to 74	5,255.35	2,627.67	3,941.51	788.30	- 394.15	420.43	-	1,313.84

Rates are calculated in the following way:

1. Find applicable Core IP rate
2. Add all options together
3. Add 1 and 2 together
4. Deduct excess discount (if applicable)
5. Add Service Fee if applicable

For example Area 1/53 Year old with OP1, Dental, Reduced Sum Assured and \$1000 excess

1. 1395.15
2. $697.57 + 111.61 - 104.64 = 704.55$
3. $1395.15 + 704.55 = 2099.70$
4. $2099.70 - 20\% = 1679.76$
5. $1679.76 + 8\% \text{ monthly fee} = 1814.14 / 12 = 151.18 \text{ per month}$

Excess applicable to In-Patient treatment

Excess per person	Premium reduction
\$	%
100	5%
250	10%
500	15%
1000	20%
2500	30%
5000	40%

The excess does not apply to the following benefits:

- Evacuation and repatriation
- Wellness benefit
- Cancer screening

Service fees

Annual	0%
Semi-Annual	4%
Quarterly	5%
Monthly	8%