



OPTIMUM GLOBAL GEMS

All benefits shown are per insured person, per annum (unless specified otherwise).

Plan	Emerald	Sapphire	Ruby	Jade	Diamond
Annual Policy Maximum	\$1,000,000	\$2,000,000	\$3,000,000	\$5,000,000	\$8,000,000

1. HOSPITAL AND RELATED SERVICES

In-hospital accommodation, surgery, treatment, facilities & services	In Full	In Full	In Full	In Full	In Full	
Cancer treatment (in-patient & out-patient)	In Full	In Full	In Full	In Full	In Full	
Kidney dialysis (in-patient & out-patient)	\$50,000	In Full	In Full	In Full	In Full	
In-patient physiotherapy treatment	In Full	In Full	In Full	In Full	In Full	
Day surgery	In Full	In Full	In Full	In Full	In Full	
Psychiatric treatment (after 10 months coverage)	Maximum 100 days per lifetime membership	In Full	In Full	In Full	In Full	
Hospital accommodation for accompanying parent of insured child	\$160 per night up to \$800 per year	In Full	In Full	In Full	In Full	
Emergency local road ambulance services	In Full	In Full	In Full	In Full	In Full	
Emergency treatment outside area of cover - not exceeding forty-five (45) days per trip	Not Covered	Up to \$50,000 in USA & Canada	Up to \$75,000 in USA & Canada	Up to \$100,000 in USA & Canada	In Full	
		(In Full for all other countries)				
Home nursing care following discharge from hospital			\$10,000 (up to 26 weeks max per policy year)	\$10,000 (up to 26 weeks max per policy year)	\$10,000 (up to 26 weeks max per policy year)	\$15,000 (up to 26 weeks max per policy year)
Hospital cash per night for non-paying patient (max 30 days per disability)			\$150	\$150	\$200	\$300
Accidental dental treatment	\$8,000	In Full	In Full	In Full	In Full	
Chronic medical conditions	In Full	In Full	In Full	In Full	In Full	
Congenital conditions	Not Covered	\$30,000	\$40,000	\$50,000	\$75,000	

continued overleaf



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2. PRE & POST HOSPITALISATION

Pre Hospitalisation medical expenses	In Full	In Full	In Full	In Full	In Full
Prescribed Post Hospital Treatment following an eligible In-hospital admission (up to max 30 days following discharge)	In Full	In Full	In Full	In Full	In Full

3. ORGAN TRANSPLANT

Operation costs for kidney, heart, liver, lung and bone marrow transplants (excluding cost of obtaining organ donor)	\$100,000	In Full	In Full	In Full	In Full
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4. EMERGENCY MEDICAL EVACUATION AND REPATRIATION

Medical evacuation and repatriation	In Full	In Full	In Full	In Full	In Full
Repatriation of mortal remains	In Full	In Full	In Full	In Full	In Full
Compassionate travel for family member	Cover in full for return economy class air ticket. Up to \$125 per day for ancillary charges & max 14 days				

5. OUT-PATIENT BENEFITS

Family doctor consultations	\$500	Not Covered	\$3,500	\$10,000	In Full
Family doctor prescribed drugs & dressings					
Drugs Prescribed by Specialists (including take home drugs following a hospital admission)					
Specialist consultations					
External prostheses and appliances					
Chronic medical conditions	\$1,000	\$1,000	\$3,500	\$4,000	In Full
Laboratory, x-ray & diagnostic services (inc. CT, PET & MRI Scans)					
Out-patient psychiatric treatment – after 10 months of coverage					
Prescribed physiotherapy, speech & oculomotor therapy					
Accidental dental treatment					
Alternative medicine	Not Covered	Not Covered	Not Covered	\$1,000	\$1,500
Emergency room accident & emergency services					

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Vaccinations	Not Covered	Not Covered	Not Covered	\$500	\$750
Well being benefit – after 12 months coverage					

6. COMPLICATIONS OF MATERNITY (subject to 10 months waiting period)

Complications of maternity	Not Covered	In Full	In Full	In Full	In Full
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7. LIFE & CRITICAL ILLNESS

Life & Critical Illness (Please refer to Life & CIC policy wording for full list of covered illnesses)	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
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OPTIONAL BENEFITS

If selected as part of your plan and detailed on your membership certificate

1. MATERNITY BENEFITS (subject to 10 months waiting period)

Delivery (including anaesthetist fee, pre and post natal care, first five days checks & accommodation for newborn)	Not Covered	Not Covered	\$7,000	\$7,000	\$10,000
Newborn cover – (non-routine care for 30 days after birth)			\$30,000	\$30,000	\$50,000

2. DENTAL

Routine dental treatment	\$800 (20% Co-pay)	\$800 (20% Co-pay)	\$800 (20% Co-pay)	\$800 (20% Co-pay)	\$1,000 (20% Co-pay)
Restorative dental treatment	\$1,500 (20% Co-pay)	\$1,500 (20% Co-pay)	\$1,500 (20% Co-pay)	\$1,500 (20% Co-pay)	\$2,000 (20% Co-pay)

3. OPTICAL

Coverage for eye examination annually and cover for glasses applicable every 2 years	\$200 (20% Co-pay)	\$200 (20% Co-pay)	\$200 (20% Co-pay)	\$250 (20% Co-pay)	\$300 (20% Co-pay)
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4. LIFE AND CRITICAL ILLNESS TOP UP OPTION

Top-up option 1	\$50,000 Total Sum Assured
Top-up option 2	\$100,000 Total Sum Assured



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OPTIONAL BENEFITS CONTINUED (SUBJECT TO ADDITIONAL PREMIUM PAYABLE) If selected as part of your plan and detailed on your membership certificate					
5. TRAVEL (WORLDWIDE)					
1. Cancellation and Curtailment	\$8,000 (Excess, per person \$125)				
2. Baggage and Personal Effects	\$3,000 (Excess, per person \$125)				
Single item limit	\$425 (Excess, per person \$125)				
Money	\$1,600 (Excess, per person \$125)				
Cash (children under 18)	\$250 (Excess, per person \$125)				
Cash (adult)	\$1,200 (Excess, per person \$125)				
Loss of Passport	\$425 (Excess, per person \$125)				
Baggage Delay	\$180 per 12 hours up to \$360				
3. Outward Delay / Missed Departure or Connection / Abandonment					
Delayed Departure	\$125 first 12 hours, then \$90 for each subsequent 12 hours up to \$300				
Abandonment	\$8,000 (Excess, per person \$125)				
Missed Departure or Connection	\$1,600 (Excess, per person \$125)				
4. Personal Accident					
Accidental Death	\$31,000				
Loss of one or more limbs	\$31,000				
Loss of one or more eyes	\$31,000				
Loss of thumb or big toe	\$6,250				
Loss of one or more fingers or toes	\$3,750 (Total)				
Permanent Total Disablement	\$31,000				
5. Public Liability	\$3,000,000 (Excess, per person \$125)				
6. Hijack	\$80 per 24 hours up to \$800				
7. Catastrophe Cover	\$1,600				

AREA OF COVER OPTIONS

Option 1: Worldwide

Option 2: Worldwide excluding USA

Option 3: Asia (Bangladesh - Bhutan - Brunei - Cambodia - East Timor - India - Indonesia - Japan - Laos - Malaysia - Maldives - Mongolia - Myanmar - Nepal - Pakistan - Philippines - Sri Lanka - Taiwan - Thailand - Vietnam)

Option 4: Africa (including India & Pakistan)

Option 5: Principal Country of Residence within the African Continent and pre-authorised Centres of Excellence on the African Continent

For further information or to receive a personal quotation, please contact your usual adviser