

AON Expats Top up

Overall maximum plan benefit €	€10,000,000
Core Plan	Aon Global Health Supplement (Semi-private)
Maximum plan benefit	See overall maximum plan benefit
In-patient benefits¹ - please refer to notes for Treatment Guarantee	
Hospital accommodation ¹ - Semi - private	Full refund
Prescription drugs and materials ¹ (in-patient and day-care treatment only)	Full refund
Surgical fees, including anaesthesia and theatre charges ¹	Full refund
Physician and therapist fees ¹ (in-patient and day-care treatment only)	Full refund
Surgical appliances and prostheses ¹	Full refund
Diagnostic tests ¹ (in-patient and day-care treatment only)	Full refund
Organ transplant ¹	Full refund
Psychiatry and psychotherapy ¹ (in-patient and day-care treatment only)	Full refund
Accommodation costs for one parent staying in hospital or similar accommodation with an insured child under 16 ¹	Full refund
If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care in a hospital outside the members town or residence, we will cover hotel accommodation costs ²	€100 per night, max. €1000
If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care for an insured child under 16, in a hospital outside the members town or residence, we will cover hotel accommodation costs for both parents ²	€100 per night, max. €1000
Other benefits - please refer to notes for Treatment Guarantee	
Day-care treatment ²	Full refund
Out-patient surgery ²	Full refund
Nursing at home or in a convalescent home ²	Full refund

Palliative care ²	Full refund, max. 30 days per lifetime
Prescribed Independent Treatment Centre ²	Full refund
Plastic surgery ²	Full refund
Prescribed stay in Asthma Centre Davos ² (Netherlands and Switzerland applies to adults only)	Full refund
Prescribed stay in a therapeutic camps for asthmatic children up to the age of 18 years A	Subject to a combined limit of € 500 Please refer to footnote below
Accommodation costs for insured member attending treatment A	€35 per day, subject to a combined limit of € 500 Please refer to footnote below
Stay in a therapeutic camps for disabled members ² A	Subject to a combined limit of € 500 Please refer to footnote below
Prescribed genetic testing ² (in-patient and out-patient treatment)	Full refund
Additional Core Plan Services	
Employee Assistance Programme offers access to a range of 24/7 multilingual support services as follows: • Confidential professional counselling (in-person, phone, video, on-line chat and email) • Legal and financial support services • Critical incident support • Wellness website access	Services available
Travel Security Services offers 24/7 access to personal security information and advice for all your travel safety queries. This includes: • Emergency Security Assistance Hotline (not a free phone number) • Country intelligence and security advice • Daily security news and travel safety alerts	Services available
MyHealth Digital Services • Manage your cover with our app or portal anytime, anywhere, online and offline. • Submit and track progress of claims. • Access your policy documents, health services, payment details and more.	Services available
Olive. Our Health & Wellness support program includes, for example: HealthSteps fitness app; Access to wellness resources	Services available
Second Medical Opinion Service offers access to expert help on the best treatment options available if you have been diagnosed with a serious illness or had surgery recommended	Services available

Overall Out-patient Maximum Deductible (The deductible does not apply to children up to 18 years)	€220
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Out-patient Plan	Aon Global Health Supplement
Maximum plan benefit	See overall maximum plan benefit
Out-patient benefits	
Medical practitioner fees	Full refund
Video consultation services	Full refund
Prescription drugs	Full refund
Prescription contraceptives and intra uterine devices	Full refund
Specialist fees	Full refund
Diagnostic tests	Full refund
Vaccinations that are included in the Dutch national program (for children under 16 years of age)	Full refund
Vaccinations for travelling abroad	75% refund, max. €300
Midwife/Kraamzorg visits Cover includes: 12 pre-natal care visits with a midwife 10 post-natal care visits with a midwife or a Kraamzorg	Full refund
Alternative therapies and treatments (if carried out by alternative healers or therapists - doctors)	€ 75 per visit, max. 20 visits
Alternative therapies and treatments (if carried out by alternative healers or therapists – non-doctors)	€ 40 per visit, max. 20 visits
Alternative medicines (if prescribed by a GP or doctor and provided by a pharmacy)	Full refund
Prescribed physiotherapy ² (initially limited to 12 sessions per condition)	Full refund
Prescribed thrombosis treatment	Full refund
Exercise programme ²	€350
Mechanical respiration	Full refund
Occupational therapy ²	10 visits
Prescribed speech therapy ²	Full refund
Prescribed skincare ²	€600
Prescribed visit to a hearing centre	Full refund
Prescribed psoriasis treatment	€1000
Prescribed UVB treatment of psoriasis ²	Full refund
Home help ²	€1000, max. 21 days
Stutter therapy	€1,000 per lifetime
Prescribed dyslexia care (in children age 7 to 10)	Full refund

Preventive examinations and screening for early detection of illness or disease. Checks include: • Cardiovascular exam • Neurological exam • Cancer screening - Annual pap smear - Mammogram - Prostate screening	Full refund
Infertility treatment ² (Max. 3 attempts per prospective pregnancy)	€7,000 per claim (diagnosis) per lifetime
Psychiatry and psychotherapy (out-patient only)	11 visits, max. €2000
Prescribed chiropodist A	Subject to a combined limit of € 500 Please refer to footnote below
Prescribed podotherapy and podology A	Subject to a combined limit of € 500 Please refer to footnote below
Prescribed melatonin medicine for sleeping disorders ² A	Subject to a combined limit of € 500 Please refer to footnote below
Prescribed therapeutic swimming for rheumatism patients ² A	Subject to a combined limit of € 500 Please refer to footnote below
Arch supports A	Subject to a combined limit of € 500 Please refer to footnote below
Bedwetting Alarm A	Subject to a combined limit of € 500 Please refer to footnote below
Preventative Courses (proof of registration need per course) A	Subject to a combined limit of € 500 Please refer to footnote below
Menopause consultant A	Subject to a combined limit of € 500 Please refer to footnote below
Glasses and contact lenses including eye examination A	€250 for a period of 3 years, subject to a combined limit of € 500 Please refer to footnote below
Contact lenses plus or minus 4 dioptr for short terms use A	€65 subject to a combined limit of € 500 Please refer to footnote below
Prescribed dietician/nutritionist treatments ²	Full refund
Obesity treatment	€1,000 per lifetime
Prescribed medical aids Adhesive strips for affixing prosthetic breasts Aerochamber Telemonitoring Vacuum Assisted Closure system Supportive pessary	Full refund

Neuromodulator and biofeedback equipment	
Mouth guard	
Elbow support device	
Wigs	€486
Prosthetic bra or other external prosthetic device for cosmetic purposes (if related to an Oncology treatment)	€200 per lifetime
Head cover	€75
Hearing aid (per ear)	€800
Walking Aids	€250
Orthopaedic shoes – pair 1 (for members over the age of 16 years)	Max. 1
Orthopaedic shoes – pair 2 (for members over the age of 16 years)	Max. 1
Prescribed monitoring equipment or sensormat for prevention of crib death A	Full refund
Sterilisation	Max. 1 per lifetime
Lactation specialist	75% refund, up to €115

A These benefits are grouped and are subject to a combined limit of € 500

Dental Plan	Aon Global Health Supplement
Maximum plan benefit	
Dental treatment (For members under 18 years old)	Full refund
Orthodontic treatment (For members under 18 years old)	€2,000 per lifetime
Orthodontic treatment (For members 18 years and older)	70% refund, max. €1,000 per lifetime
Dental prostheses (For members 18 years and older)	75% refund, up to €500

Repatriation Plan	
Medical repatriation² - Where the necessary treatment is not available locally, you can choose to be medically repatriated to your home country instead of to the nearest appropriate medical centre. This benefit only applies when your home country is within your area of cover² - Where ongoing treatment is required, we will cover hotel accommodation costs² - Repatriation in the event of unavailability of adequately screened blood²	Full refund
- If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs² - Extension of flight ticket in connection with your illness or injury which arises during repatriation, this also includes travelling family members	Max. 7 days €1,250

Cost of economy flight ticket of insured member to return home to Country of residence for childbirth	75% refund
Reimbursement of telecommunication costs incurred with a repatriation or evacuation	€125 per event
Expenses for one person accompanying a repatriated person ²	Full refund
Travel costs of one person to be with an insured family member who is at peril of death or who has died	Full refund
Accommodation cost of one person to be with an insured family member who is at peril of death or who has died	€ 100 per day €2,000 per event

OPTIONAL COVERS (Adults Only)

Supplementary Private Room Cover

Supplementary Private Room	Comfort Class
Hospital accommodation ¹ - Private	Full refund

Supplementary Dental Cover

Dental Plans	T - Start	T - Extra	T - Royal
Maximum plan benefit	€250	€500	€900
Dental benefits			
Dental treatment	100% refund	100% refund	100% refund
Dental surgery	100% refund	100% refund	100% refund
Periodontics	75% refund	75% refund	75% refund

NOTES

The deductible does not apply to children up to 18 years.

For members under a Top-up option, the following will apply:

- The Treatment Guarantee process does not apply to your policy for treatments received inside the Netherlands.
- This contract is supplemental to your basic insurance cover in the Netherlands.
- For any treatment inside the Netherlands, costs will be settled directly by the Dutch statutory insurance. Treatment costs that are not covered by the Dutch statutory insurance can be claimed from Allianz Care by submitting a Claim Form along with the relevant invoices. Allianz Care will reimburse the remaining medical expenses incurred, subject to our policy terms and conditions, as detailed in the Table of Benefits and our Employee Benefit Guide.
- For treatment outside the Netherlands, please follow the Treatment Guarantee process indicated above. Please also note that in some instances, you will need to pay the medical costs to the provider at the time of treatment and then seek reimbursement from us, by submitting a Claim Form along with your invoices. Allianz Care will reimburse the medical expenses incurred,

subject to our policy terms and conditions, as detailed in the Table of Benefits and our Employee Benefit Guide.

Furthermore, Allianz Care will subrogate your basic insurance on your behalf

Treatment Guarantee/Pre-authorisation

Treatment Guarantee/Pre-authorisation is a process whereby we guarantee cover for certain treatment and costs, as indicated in the Table of Benefits with a **1** or a **2**. Please note that you and your physician should complete the relevant sections of a Treatment Guarantee Form and send it to us for approval prior to commencement of your treatment.

It is highly recommended that you take advantage of this facility as this will provide you with the benefit of cashless access to hospitals for in-patient treatment, as well as giving you the advantage of your treatment being overseen by our Doctor.

For further details please refer to our Benefit Guide, or simply contact our Helpline.

Chronic Conditions

Chronic conditions are covered within the terms of your policy. Please refer to the definitions section of our Benefit Guide for further information or simply contact our Helpline.

Pre-existing Conditions

Pre-existing conditions are covered within the terms of your policy. For further details please refer to the "Definitions" section of our Benefit Guide or simply contact our Helpline.

For non-underwritten policies, pre-existing conditions are covered where medical history is disregarded.

For Individual applicants please note that cover is subject to underwriting i.e. cover may be excluded for pre-existing conditions, or a higher premium rate may apply to reflect the higher risk due to pre-existing medical conditions or additional risk factors. Please refer to the definitions section of our Benefit Guide for further information.

Benefit limits

There are two kinds of benefit limits shown in the Table of Benefits. The **maximum plan benefit**, which applies to certain plans, is the maximum we will pay for all benefits in total, per member, per Insurance Year, under that particular plan. Some benefits also have a **specific benefit limit**, which may be provided on a "per Insurance Year" basis, a "per lifetime" basis or on a "per event" basis, such as per trip or per visit.. In some instances we will pay a percentage of the costs for the specific benefit e.g. "75% refund, up to €100". Where a specific benefit limit applies or where the term "Full refund" appears next to certain benefits, the refund is subject to the maximum plan benefit, if one applies to your plan(s). All limits are per member, per insurance year, unless otherwise stated in your Table of Benefits.

Policy Terms and Conditions

The Table of Benefits outlines of the cover we offer under your policy. Please note that cover is subject to our standard policy definitions, limitations and exclusions. These are detailed in our Benefit Guide, which is issued to you upon policy inception. Our current Benefit Guide can also be downloaded from our website **www.aonexpatinsurance.com**

Policy Endorsement(s)

If there are any policy terms and conditions unique to your policy they will be listed below. Please read carefully in conjunction with our Benefit Guide.

Certain services which may be included in your plan are provided by third party providers outside the Allianz group, such as the Employee Assistance Programme, Travel Security services, HealthSteps app, Second Medical Opinion and tele-medicine services. If included in your plan,

these services will show in this Table of Benefits. These services are made available to you subject to your acceptance of the terms and conditions of your policy and the terms and conditions of the third parties. These Services may be subject to geographical restrictions. The HealthSteps app does not provide medical or health advice and the wellness resources contained within Olive are for informational purposes only. The HealthSteps app and the wellness resources contained within Olive shouldn't be regarded as a substitute for professional advice (medical, physical or psychological). They are also not a substitute for the diagnosis, treatment, assessment or care that you may need from your own doctor. You understand and agree that AWP Health & Life SA (Irish Branch) and AWP Health & Life Services Limited are not responsible or liable for any claim, loss or damage, directly or indirectly resulting from your use of any of these third party services.