

IMPORTANT: PLEASE READ



2011 GLOBAL HEALTH ELITE PLAN CHANGES FOR INDIVIDUAL CLIENTS

Changes to the Global Health Elite plan agreement from your renewal



GLOBAL HEALTH[®]
Health Insurance for Expatriates

BENEFIT CHANGES

The following changes to your Global Health Elite plan agreement will take effect from your renewal date.

THE ROUTINE MATERNITY CARE AND NEWBORN BENEFIT

For new Gold and Platinum plan clients in 2011, we are removing the routine maternity care and newborn benefit from the Gold and Platinum plan Table of Benefits.

The Gold and Platinum routine maternity care and newborn benefits will be available to Gold and Platinum plan members on an **optional** basis, and there will be an additional Gold or Platinum Maternity Plan premium charged for this benefit.

How this change affects existing Gold or Platinum plan holders

For our existing Gold and Platinum plan clients the additional Maternity Plan premium will be waived until renewal in 2012. This means that if you are currently covered by the Gold plan, you will continue to enjoy the Gold plan routine maternity care and newborn benefit from your renewal date, for a further twelve month period, without having to pay the additional Gold Maternity Plan premium. If you are covered by the Platinum plan, you will continue to enjoy the Platinum plan routine maternity care and newborn benefit from your renewal date, for a further twelve month period, without having to pay the additional Platinum Maternity Plan premium.

Please note however that you will have to pay the additional Gold or Platinum Maternity Plan premium from your renewal in 2012, if you still require this benefit.

Example: If you are a Gold plan holder whose policy renews in May 2011 and you become pregnant in October 2011 (with an estimated due date of June 2012), you will have to pay the additional Gold Maternity Plan premium with effect from your May 2012 renewal in order to be eligible to claim eligible maternity plan expenses incurred after your renewal date in May 2011.

Benefit in respect of out-patient treatment necessary as a complication of pregnancy has been added to the optional Maternity Plan as follows:

BENEFITS	GOLD MATERNITY PLAN	PLATINUM MATERNITY PLAN
<p>Routine maternity care and childbirth After you have been covered by the Gold or Platinum Maternity Plan for a continuous period of 12 months, we will pay towards the cost of routine pre-natal and post-natal treatments and examinations, and towards the cost of natural childbirth or childbirth by elective or emergency caesarean section.</p> <p>We will also pay for out-patient treatment you receive as a result of a complication of pregnancy.</p> <p>There is no cover for costs incurred within the first 12 months of your Maternity Plan.</p> <p>Pre-natal tests are limited to blood tests, urine tests, Downs Syndrome Screening, Combined Test, Triple Test, Quadruple test, testing for gestational diabetes, foetal echocardiography recommended as part of routine anomaly scan, blood pressure monitoring and foetal scans (up to a maximum of 3. There is no cover for 3-D or 4-D scans or for scan photographs).</p>	80% of costs up to a maximum of \$6,400 or €6,000 or £4,000 or AED 23,488 per pregnancy	Full refund up to \$12,000 or €11,250 or £7,500 or AED 44,040 per pregnancy
<p>Cover for newborns We will pay the in-patient and day-patient accommodation and treatment charges of a child born to a mother who has been insured by the Gold or Platinum Maternity Plan for at least 12 consecutive months. Cover will be restricted to the first 28 days of life. After that an application form and neonatal questionnaire must be completed and submitted to us in respect of the newborn child. During the first 28 days of life we will pay for any necessary in-patient and day-patient treatment required relating to birth defects and congenital abnormalities. In the event of a multiple birth, the limit stated opposite is the maximum amount that can be claimed regardless of the number of children born.</p>	Up to \$40,000 or €37,500 or £25,000 or AED 146,800	Up to \$48,000 or €45,000 or £30,000 or AED 176,160

Changes to your Global Health Elite plan from renewal

Individuals only

The complications of pregnancy benefit

In-patient and day-patient treatment required as a result of a complication of pregnancy will continue to be offered as a benefit under the Bronze, Silver, Gold and Platinum plans. However, as before, no cover is provided for childbirth or emergency caesarean section under this benefit.

ROUTINE MAINTENANCE OF CHRONIC CONDITIONS

The following higher benefit limits will apply for the routine maintenance of covered chronic conditions for Silver and Gold policyholders, subject to the terms of the Global Health plan agreement:

SILVER	GOLD
Up to \$5,000 or €4,650 or £3,125 or AED 18,350 per period of cover	Up to \$10,000 or €6,250 or €9,375 or AED 36,700 per period of cover

COVER FOR HIV & AIDS

Once you have been insured by the same plan type for a continuous period of 24 months, we will pay towards the cost of treatment arising from or related to human immunodeficiency virus (HIV) and/or HIV-related illness, including acquired immune deficiency syndrome (AIDS) or AIDS related complex (ARC) up to the annual benefit limit stated below and for a maximum period of 5 years, provided the HIV virus was contracted after your date of entry to the Global Health plan.

BRONZE	SILVER	GOLD	PLATINUM
Up to \$5,000 or €4,650 or £3,125 or AED 18,350 per period of cover for in-patient or day-patient treatment only	Up to \$5,000 or €4,650 or £3,125 or AED 18,350 per period of cover	Up to \$5,000 or €4,650 or £3,125 or AED 18,350 per period of cover	Up to \$10,000 or €9,375 or €6,250 or AED 36,700 per period of cover

THE LOCAL BURIAL OR CREMATION EXPENSES BENEFIT

If you die as the result of a condition that is covered by your plan whilst you are outside your home country (and no claim has been made under the Repatriation of mortal remains benefit) we will pay for you to be buried or cremated at the place where you died. Costs for this benefit will now be subject to the following limits:

BRONZE	SILVER	GOLD	PLATINUM
Up to \$1,600 or €1,500 or £1,000 or AED 5,875	Up to \$1,600 or €1,500 or £1,000 or AED 5,875	Up to \$1,600 or €1,500 or £1,000 or AED 5,875	Up to \$1,600 or €1,500 or £1,000 or AED 5,875

HIGHER TOTAL ANNUAL BENEFIT LIMIT FOR SILVER POLICYHOLDERS

The overall maximum limit to the amount you can claim during any one period of cover has been increased to \$2,000,000 or €1,875,000 or £1,250,000 or AED 7,340,000.

THE BENEFITS WE PROVIDE IF YOU HAVE YOUR TREATMENT WITHIN THE LONDON AREA

For Bronze, Silver and Gold policyholders the following clause has been amended to make it clear that if you have your treatment within the London area we will pay only 80% of your total eligible treatment costs. This co-insurance applies in respect of all in-patient, day-patient and out-patient treatment and consultations.

REFERRAL LETTERS

If you are claiming for an MRI or CAT scan you must now send us the written referral letter signed by your medical doctor. If you are claiming for a PET scan we will require a referral letter from your specialist.

ADDITIONAL EXCLUSIONS

ALLERGY DESENSITISATION

We do not pay for allergy desensitisation or food neutralising injections.

ALTERNATIVE TREATMENTS AND THERAPIES

The exclusion has been amended to make it clear that we do not pay for biokinetik exercise technique (BET), Body Talk, Tecar therapy, Acupressure or magnet therapy.

EYESIGHT

The exclusion has been amended to make it clear that we do not pay for treatment of strabismus (squint).

HYPERBARIC OXYGEN THERAPY

We do not pay for hyperbaric oxygen therapy, except if used as treatment for decompression sickness.

PSYCHIATRIC CONDITIONS

The exclusion has been amended to make it clear that we do not pay for the treatment of a psychiatric condition that is a pre-existing condition or related to a pre-existing condition.

ADMINISTRATIVE CHANGES

ACCEPTABLE CREDIT AND DEBIT CARDS

We no longer accept Electron and Solo as methods of payment.

YOUR RENEWAL PREMIUM INVOICE

We will email you with our renewal terms and a renewal premium invoice prior to your renewal date. It is therefore very important that you update us if you change your email address.

DUBAI PREMIUM LEVY

From renewal, Dubai Premium Levy will be charged at the following rates on your premium:

- Medical insurance 0.4%
- Accident plan 0.5%
- Travel plan 0.5%