



# GLOBAL HEALTH ELITE PLAN POLICY SUMMARY



Some important facts about your health insurance policy are summarised below. This policy summary does not contain the full terms and conditions of the insurance policy, which can be found in the Global Health Elite plan Agreement and on your Certificate of Insurance. It is important that you read these documents carefully when you receive them to make sure that you understand the cover your policy provides.

## The Insurer

The insurer of your Global Health plan is Dubai Insurance Company psc.

## Type of policy

Your policy provides cover for necessary medical treatment of acute medical conditions covered by your plan.

## Significant features and benefits

The extent of the cover provided is detailed in the **Global Health Elite plan agreement** and outlined in the attached summary of cover.

The plan you have chosen will be stated on your Certificate of Insurance.

## Significant and unusual exclusions or limitations

### The following limitations apply to your policy:

- Any limitations contained in your Certificate of Insurance,
- The overall limit of cover for the plan you have chosen,
- The limits specified for particular benefits within the plan you have chosen,
- The excess, as specified on your Certificate of Insurance,
- Cover is restricted to treatment within the area of cover you have selected (see area of cover options in the attached summary of cover) and as specified on your Certificate of Insurance.

### The following are excluded from cover under your policy:

- Pre-existing conditions,
- Addictive conditions/disorders and alcohol, drug and solvent abuse,
- Birth control, infertility treatment, assisted reproduction, foetal surgery sexual problems and sex changes,
- Birth defects and congenital conditions (although there is limited cover for the first 28 days of life, provided the mother has been insured under a Gold or Platinum plan for a continuous period of 12 months at the time of birth),
- Chemical, biological or nuclear contamination, or active participation in war and terrorism,
- Chronic conditions (although there is limited cover for the out-patient treatment of chronic conditions under the Silver, Gold and Platinum plans),
- Convalescence,
- Cosmetic surgery,
- Dental cover is limited depending on your plan type – please see the **Global Health Elite plan agreement**,
- Eating disorders and weight-related conditions,
- Experimental drugs and treatments,
- Hearing,
- Hearing,
- Kidney dialysis continuing for more than 4 weeks
- Long-term kidney dialysis,
- Nasal septum deviation,
- Organ transplant (except as stated under the organ transplant benefit and up to the stated limit),

- Pregnancy (although there is limited cover for pregnancy under the Gold and Platinum plans, and limited cover for in-patient treatment for complications of pregnancy after 12 months continuous cover under all plans),
- Illness or injury caused by professional sports and racing,
- Psychiatric conditions (although there is limited cover after 24 months continuous cover),
- Routine preventive health checks and vaccinations (although there is limited cover under the Silver, Gold and Platinum plans after 12 months continuous cover),
- Search and/or rescue,
- Sexually transmitted diseases,
- Self-inflicted injuries, suicide and/or wilful exposure to needless danger,
- Sleep disorders,
- Surgical or medical appliances and equipment,
- Treatment associated with any bodily change such as the menopause, puberty or ageing,
- Treatment by a family member,

A full list of exclusions is contained in the **Global Health Elite plan agreement**.

## Duration of the policy

Your cover will remain in force for a period of 12 months provided you maintain your premium payments in accordance with the Global Health Elite plan agreement. Your cover may be renewed each year with our agreement. Premiums are age-related and will increase as you get older. We review our premiums annually. The current premium rates are not guaranteed for the duration of your plan.

## Right of Cancellation

You have a right to cancel during the first 30 days of the policy, provided that you confirm this to us in writing and have not made a claim. We will refund the premium you have paid to us.

## Claims

Please call +971 4 2697708 or our 24-hour emergency number +44 1243 621155 or email us on [claimsdubai@globalplans.ae](mailto:claimsdubai@globalplans.ae). More information about making a claim can be found in the **Global Health Elite plan agreement**.

## Complaints

Any complaints should be addressed to:

Executive Manager (Middle East),  
Global Plans Team,  
Dubai Insurance Company psc,  
PO Box 3027,  
Dubai,  
United Arab Emirates.

## Compensation scheme

Dubai Insurance Company psc is not covered by any compensation scheme.

|  | PLATINUM PLAN                       |
|--|-------------------------------------|
| <b>ANNUAL BENEFIT LIMIT</b><br>(Plan available in US dollars, Euros, GBP sterling or UAE dirhams)          | <b>\$2,500,000 or AED9,175,000</b>  |
| <b>IN-PATIENT AND DAY-PATIENT TREATMENT</b>  |                                     |
| <b>Private hospital accommodation and nursing</b>  | 100% refund                         |
| <b>Parent accommodation</b>  | 100% refund                         |
| <b>Surgery, treatment and tests</b>  | 100% refund                         |
| <b>Organ and bone marrow transplants</b>   | 100% refund                         |
| <b>Surgically implanted artificial body parts</b>  | 100% refund                         |
| <b>Road ambulance charges</b>  | 100% refund                         |
| <b>Hospital cash benefit</b> (Max 60 nights per period of cover)   | \$350 or AED1,300 (per night)       |
| <b>Hospice and palliative care</b> (Life-time limit)   | \$75,000 or AED275,160              |
| <b>TREATMENT FOR CANCER</b>  |                                     |
| <b>In- &amp; day-patient treatment, radiotherapy and chemotherapy</b>                                      | 100% refund                         |
| <b>Out-patient follow-up consultations and tests</b> (Excess applied per claim, per period of cover)       | 100% refund                         |
| <b>POST HOSPITAL TREATMENT</b>   |                                     |
| <b>Home Nursing</b> (max 12 weeks per period of cover)   | 100% refund                         |
| <b>Rehabilitation treatment</b> following discharge from hospital  | \$10,000 or AED36,700               |
| <b>Medical Aids</b> such as wheelchairs, crutches  | \$1,000 or AED3,700                 |
| <b>External Prosthetic Devices</b>   | \$2,500 or AED9,175 (per device)    |
| <b>OUT-PATIENT TREATMENT</b>   |                                     |
| <b>Emergency ward treatment</b>  | 100% refund                         |
| <b>Out-patient surgical procedure</b>  | 100% refund                         |
| <b>GP and specialist consultations, treatments, tests and prescribed drugs</b>                             | 100% refund                         |
| <b>Complementary medicine (max 10 visits per annum)</b>  | 100% refund                         |
| <b>Traditional Chinese medicine</b> (China only, max 10 visits per period of cover)                        | \$32 or AED118 (per visit)          |
| <b>Physiotherapy</b>   | Full Refund                         |
| <b>CHRONIC CONDITIONS</b>  |                                     |
| <b>Periodic examinations, tests and treatment</b> (Excess applied once per condition, per period of cover) | 100% refund                         |
| <b>Treatment for acute flare-ups of a chronic condition</b>  | 100% refund                         |
| <b>TREATMENT FOR HIV &amp; AIDS</b>  |                                     |
| <b>24 In- &amp; out-patient treatment</b> (Per annum, for a max of 5 years)                                | \$10,000 or AED36,700               |
| <b>PSYCHIATRIC CARE (Up to life-time limit)</b>  |                                     |
| <b>24 In-patient psychiatric treatment</b> (Max 30 days per annum)   | \$80,000 or AED293,600              |
| <b>24 Out-patient psychiatric care</b> (Max 10 consultations per annum)                                    | (Life-time limit)                   |
| <b>WELL-BEING BENEFIT</b>  |                                     |
| Excess applied once per period of cover in respect of all claims under this benefit                        |                                     |
| <b>12 Well-being health screening</b>  | \$550 or AED2,020                   |
| <b>12 Well-child health screening</b>  | \$500 or AED1,835 (Life-time limit) |
| <b>12 Vaccinations</b> for adult members only  | \$100 or AED370                     |
| <b>12 Annual optical examination</b>   | \$50 or AED185                      |

**KEY:**
**WAITING PERIODS**

**6** **12** **24** Benefit is available after either 6, 12 or 24 months continuous cover respectively. No benefit is paid in respect of treatment received during the waiting period.

|   | PLATINUM PLAN   |
|---|---|
| <b>MATERNITY CARE BENEFIT AND COVER FOR NEWBORNS</b>  |   |
| <b>12</b> Routine maternity care, out-patient complications of pregnancy, and normal child birth  | \$12,000 or AED44,040 per pregnancy                                   |
| <b>12</b> Childbirth that necessitates an emergency surgical procedure  | 100% refund   |
| <b>12</b> In- & day-patient treatment for medical conditions that arise as a result of pregnancy  | 100% refund   |
| <b>12</b> Cover for newborns In-and day-patient accommodation and treatment charges received during the first 28 days of life   | \$100,000 or AED367,000 per pregnancy                                 |
| <b>24</b> Investigations into the causes of infertility Includes the male partner, provided the partner has also been insured by the Platinum plan for a continuous period of 24 months. (Lifetime limit)                                       | 80% of costs up to \$2,500 or AED9,175                                |
| <b>DENTAL CARE</b>  |   |
| <b>Emergency in-patient dental treatment for accidental injury</b> (Within 15 days of accident)   | 100% refund   |
| <b>Emergency out-patient dental treatment for accidental injury</b> (Within 72 hours of accident)   | \$1,500 or AED5,505   |
| <b>6</b> Routine dental treatment (Excess applied per claim, per period of cover)   | \$2,500 or AED9,175   |
| <b>12</b> Complex dental treatment (Excess applied per claim, per period of cover)  |   |
| <b>EMERGENCY EVACUATION</b>   |   |
| <b>Emergency evacuation</b>   | 100% refund   |
| <b>Economy class return airfare to country of residence</b>   | 100% refund   |
| <b>Economy class travelling expenses of a companion</b>   | 100% refund   |
| <b>Accommodation expenses of a companion</b> (Up to 15 nights per period of cover)  | \$160 or AED588 (per night)   |
| <b>12</b> Economy class return airfare for compassionate home travel (One claim only)   | 100% refund   |
| <b>Repatriation of mortal remains, <u>or</u></b>  | \$20,000 or AED73,400   |
| <b>Local burial or cremation</b> (If death occurs outside your home country)  | \$1,600 or AED5,875   |
| <b>STANDARD EXCESS</b>  |   |
| <b>Applied per claim unless otherwise stated</b><br>(More excess options available)   | \$50 or AED185 excess   |
| <b>TRAVEL PLAN – Policy holder and spouse/partner only</b>  |   |
| <b>All the benefits of the Global Travel Plan</b> whilst you are travelling away from your country of residence (and for trips within your country of residence when a trip is pre-booked and involves at least two nights paid accommodation). |   |
| Personal accident cover   | \$85,000 or AED311,950  |
| Accidental loss of or damage to personal baggage *  | \$4,250 or AED15,598 (\$850 or AED3,120 for any one article) per trip |
| Cancellation and curtailment*   | \$4,250 or AED15,598 per trip   |
| Travel delay - \$85 or AED312 for each full 12 hour delay   | \$340 or AED1,248 per trip  |
| Personal liability  | \$1,700,000 or AED6,239,000   |
| Personal money *  | \$850 or AED3,120 (\$340 or AED1,248 in respect of cash) per trip     |
| Legal expenses  | \$42,500 or AED155,975 per trip                                       |
| Travel disruption   | \$1,700 or AED6,239 per trip  |
| Hijack - \$85 or AED312 for each full day   | \$850 or AED3,120 per trip  |
| Passport replacement  | \$425 or AED1,560 per trip  |
| Piste closure due to lack of snow   | \$340 or AED1,250 (Maximum \$34 or AED125 per day) per trip           |
| Ski hire if your skis are lost or damaged   | \$255 or AED930 (Maximum \$17 or AED62 per day) per trip              |
| Being unable to ski due to illness or injury  | \$170 or AED620 (Maximum \$17 or AED62 per day) per trip              |
| *Excess of \$68 per claim applies in respect of the Travel Plan   |   |

**KEY:**
**WAITING PERIODS**

**6 12 24** Benefit is available after either 6, 12 or 24 months continuous cover respectively. No benefit is paid in respect of treatment received during the waiting period.

**IMPORTANT NOTE:** All benefits are per insured person per annum unless stated otherwise. Please refer to the Global Health Elite plan agreement for a full description of the cover provided at [www.globalplans.ae/webworks](http://www.globalplans.ae/webworks).

Please refer to the Global Travel Plan Rules for a full description of the cover provided by the Travel Plan.

|   | <b>GOLD PLAN</b>                            | <b>SILVER PLAN</b>                          | <b>BRONZE PLAN</b>                                       |
|---|---|---|--|
| <b>ANNUAL BENEFIT LIMIT</b><br>(Plans available in US dollars, Euros, GBP sterling or UAE dirhams)            | <b>\$2,500,000 or AED9,175,000</b>          | <b>\$2,000,000 or AED7,340,000</b>          | <b>\$1,000,000 or AED3,670,000</b>                       |
| <b>IN-PATIENT AND DAY-PATIENT TREATMENT</b>   |   |   |  |
| <b>Private hospital accommodation and nursing</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Parent accommodation</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Surgery, treatment and tests</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Organ and bone marrow transplants</b>  | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Surgically implanted artificial body parts</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Road ambulance charges</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Hospital cash benefit</b> (Max 60 nights per annum)  | \$160 or AED588 (per night)                 | \$80 or AED294 (per night)                  | \$40 or AED147 (per night)                               |
| <b>Hospice and palliative care</b> (Life-time limit)  | \$50,000 or AED183,750                      | \$25,000 or AED91,875                       | \$20,000 or AED73,500                                    |
| <b>TREATMENT FOR CANCER</b>   |   |   |  |
| <b>In- &amp; day-patient treatment, radiotherapy and chemotherapy</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Out-patient follow-up consultations and tests</b><br>(Excess applied per claim, per period of cover)       | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>POST HOSPITAL TREATMENT</b>  |   |   |  |
| <b>Home Nursing</b> (Maximum 12 weeks per period of cover)  | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>Rehabilitation treatment</b> following discharge from hospital   | \$7,500 or AED27,525                        | \$5,000 or AED18,350                        | \$2,500 or AED9,175                                      |
| <b>Medical aids</b> such as wheelchairs, crutches   | \$500 or AED1,835                           | \$250 or AED920                             | \$150 or AED550  |
| <b>External prosthetic devices</b>  | \$1,500 or AED5,505 (per device)            | \$1,000 or AED3,670 (per device)            | \$500 or AED1,835(per device)                            |
| <b>OUT-PATIENT TREATMENT</b>  |   |   |  |
| <b>Emergency ward treatment</b>   | 100% refund                                 | 100% refund                                 | Not covered  |
| <b>Out-patient surgical procedure</b>   | 100% refund                                 | 100% refund                                 | 100% refund  |
| <b>GP and specialist consultations, treatments, tests and prescribed drugs</b>                                | 100% refund                                 | 100% refund                                 | 100% refund for post-hospital treatment only             |
| <b>Complementary medicine</b> (Max 10 visits per period of cover)   | 100% refund                                 | 100% refund                                 | 100% refund for post-hospital treatment only             |
| <b>Traditional Chinese medicine</b> (China only, max 10 visits per period of cover)                           | \$32 or AED118 (per visit)                  | \$32 or AED118 (per visit)                  | Not covered  |
| <b>Physiotherapy</b>  | \$5,000 or AED18,350                        | \$2,500 or AED9,175                         | \$1,000 or AED3,700<br>(Post-hospital treatment only)    |
| <b>CHRONIC CONDITIONS</b>   |   |   |  |
| <b>Periodic examinations, tests and treatment</b><br>(Excess applied once per condition, per period of cover) | \$15,000 or AED55,050                       | \$10,000 or AED36,700                       | Not covered  |
| <b>Treatment for acute flare ups of a chronic condition</b>   | 100% refund                                 | 100% refund                                 | (Post-hospital treatment only)                           |
| <b>TREATMENT FOR HIV &amp; AIDS</b>   |   |   |  |
| <b>24 In- &amp; day-patient treatment</b><br>(Per period of cover, max 5 years)                               | \$5,000 or AED18,350                        | \$5,000 or AED18,350                        | \$5,000 or AED18,350                                     |
| <b>12 Out-patient treatment</b><br>(Per period of cover, max 5 years)   |   |   | (Post-hospital treatment only)                           |
| <b>PSYCHIATRIC CARE (Up to life-time limit)</b>   |   |   |  |
| <b>24 In- &amp; day-patient psychiatric treatment</b><br>(Max 30 days per annum)                              | \$64,000 or AED234,880<br>(Life-time limit) | \$48,000 or AED176,160<br>(Life-time limit) | \$40,000 or AED146,800<br>(Life-time limit)              |
| <b>24 Out-patient psychiatric care</b><br>(Max 10 consultations per annum)                                    |   |   | (Post-hospital treatment only<br>within life-time limit) |

|  | GOLD PLAN   | SILVER PLAN                        | BRONZE PLAN                        |
|--|---|------------------------------------|------------------------------------|
| <b>WELL BEING BENEFIT</b>  |   |                                    |                                    |
| (Excess applied once per period of cover in respect of all benefits)   |   |                                    |                                    |
| <b>12 Well-being health screening</b>  | \$400 or AED1,468                                     | \$250 or AED920                    | Not covered                        |
| <b>12 Well-child health screening</b>  | \$250 or AED920 (life-time limit)                     | Not covered                        | Not covered                        |
| <b>12 Vaccinations</b> for adult members only  | \$50 or AED185  | Not covered                        | Not covered                        |
| <b>MATERNITY CARE BENEFIT &amp; COVER FOR NEWBORNS</b>   |   |                                    |                                    |
| <b>12 Routine maternity care, out-patient complications of pregnancy, and normal child birth</b>                               | 80% of costs up to \$6,400 or AED23,488 per pregnancy | Not covered                        | Not covered                        |
| <b>12 Child birth that necessitates an emergency surgical procedure</b>  | \$15,000 or AED55,050 per pregnancy                   | Not covered                        | Not covered                        |
| <b>12 In- &amp; day-patient treatment for medical conditions that arise as a result of pregnancy</b>                           |   | \$6,400 or AED23,488 per pregnancy | \$4,800 or AED17,616 per pregnancy |
| <b>12 Cover for newborns</b> In- and day-patient accommodation and treatment charges received during the first 28 days of life | \$75,000 or AED275,625 per pregnancy                  | \$5,000 or AED18,350 per pregnancy | Not covered                        |
| <b>DENTAL CARE</b>   |   |                                    |                                    |
| <b>Emergency in-patient dental treatment for accidental injury</b> (Within 15 days of accident)                                | \$12,800 or AED46,976                                 | \$8,000 or AED29,360               | \$4,800 or AED17,616               |
| <b>Emergency out-patient dental treatment for accidental injury</b> (Within 72 hours of accident)                              | \$1,000 or AED3,700                                   | \$500 or AED1,835                  | Not covered                        |
| <b>6 Routine dental treatment</b> (Excess applied per claim, per period of cover)  | \$1,000 or AED3,670                                   | Not covered                        | Not covered                        |
| <b>EMERGENCY EVACUATION</b>  |   |                                    |                                    |
| <b>Emergency evacuation</b>  | 100% refund   | 100% refund                        | 100% refund                        |
| <b>Economy class return airfare to country of residence</b>  | 100% refund   | 100% refund                        | 100% refund                        |
| <b>Economy transport expenses of a companion</b>   | 100% refund   | 100% refund                        | 100% refund                        |
| <b>Accommodation expenses of a companion</b> (Up to 15 nights per period of cover)   | \$120 or AED441 (per night)                           | \$96 or AED353 (per night)         | \$72 or AED265 (per night)         |
| <b>12 Compassionate home travel – economy class</b> (One claim only)   | 100% refund   | 100% refund                        | 100% refund                        |
| <b>Repatriation of mortal remains, <u>or</u></b>   | \$16,000 or AED58,720                                 | \$11,200 or AED41,104              | \$8,000 or AED29,360               |
| <b>Local burial or cremation</b> (If death occurs outside your home country)   | \$1,600 or AED5,875                                   | \$1,600 or AED5,875                | \$1,600 or AED5,875                |
| <b>STANDARD EXCESS</b>   |   |                                    |                                    |
| <b>Applied per claim unless otherwise stated</b> (More excess options available)   | \$50 or AED185  | \$50 or AED185                     | Not Applicable                     |

**AREA OF COVER OPTIONS AVAILABLE WITH PLATINUM, GOLD, SILVER AND BRONZE PLANS**

|                   |  |
|-------------------|--|
| <b>AREA ONE</b>   | World-wide excluding cover in the United States of America (USA).  |
| <b>AREA TWO</b>   | World-wide, subject to cover in the USA being limited to \$100,000 during temporary trips of not more than 45 days duration.   |
| <b>AREA THREE</b> | World-wide, subject to cover in the USA being limited to \$250,000 during temporary trips of not more than 90 days duration.   |
| <b>AREA FOUR</b>  | Africa & Indian Sub-continent. Plus cover for unforeseen emergency treatment, covered by your plan, and received during temporary trips of up to 90 days duration outside Africa & Indian Sub-continent (up to \$100,000 or AED367,000). No cover is provided for any treatment received in the USA, Canada, the Caribbean, or within the London area. |

**KEY:**

**WAITING PERIODS**

**6 12 24** Benefit is available after either 6, 12 or 24 months continuous cover respectively. No benefit is paid in respect of treatment received during the waiting period.

**POST-HOSPITAL TREATMENT (BRONZE):** Post-hospital treatment means medically necessary follow-up consultations and treatment received within 90 days of being discharged from hospital, following in-patient or day-patient treatment covered by your plan.