

INTERNATIONAL HEALTHCARE PLAN
TABLE OF BENEFITS
PANTAENIUS YACHT CREW PREMIER PLAN / 0312

Treatment guarantee (pre-authorization) may be required for some benefits as indicated by a '1' or a '2' in the table(s) below. Please refer to Notes section for further details. All benefit and deductible amounts are per person per year, unless otherwise indicated.

Core Plan	Pantaenius Premier
Maximum plan benefit €	€2.250.000
Maximum plan benefit US\$	\$2.812.500
Maximum plan benefit £ GBP	£1.500.000
In-patient benefits¹ - please refer to notes for Treatment Guarantee	
Hospital accommodation ¹	Private room
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
Physiotherapy ¹ (in-patient and day-care treatment only)	Full refund
Organ transplant ¹	Full refund
Emergency in-patient dental treatment	€5.000/\$6.250/£3.300
Other benefits - please refer to notes for Treatment Guarantee	
Day-care treatment ²	Full refund
Out-patient surgery ²	Full refund
Local ambulance	Full refund
Emergency treatment outside area of cover (for trips of a maximum period of six weeks)	Full refund, Max. 42 days
Medical evacuation ²	Full refund
<ul style="list-style-type: none"> • Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre² • Where ongoing treatment is required, we will cover hotel accommodation costs² • Evacuation in the event of unavailability of adequately screened blood² 	
<ul style="list-style-type: none"> • If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs² 	Max. 7 days
Expenses for one person accompanying an evacuated person ²	Full refund
Travel costs of insured family members in the event of an evacuation ²	€2.000/\$2.500/£1.335
Repatriation of mortal remains ²	€10.000/\$12.500/£6.500
Travel costs of insured family members in the event of the repatriation of mortal remains ²	€2.000/\$2.500/£1.335
CT scans (in-patient and out-patient treatment)	Full refund
MRI, PET and CT-PET scans ² (in-patient and out-patient treatment)	Full refund
Oncology ² (in-patient, day-care and out-patient treatment)	Full refund

Routine maternity ² (in-patient and out-patient treatment)	€3.000/\$3.750/£2.000
Complications of pregnancy and childbirth ²	Full refund
Emergency out-patient treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Out-patient Plan)	Full refund
Emergency out-patient dental treatment	€500/\$625/£350
Palliative care and long term care ²	Full refund, Max. 30 days per lifetime

Out-patient Plan

Maximum plan benefit

Out-patient Plan Deductible

Out-patient benefits

Medical practitioner fees and prescription drugs

Specialist fees

Diagnostic tests

Prescribed physiotherapy

Routine health checks including screening for early detection of illness or disease. Checks include:

- Cardiovascular exam
- Neurological exam
- Cancer screening
 - Annual pap smear
 - Mammogram (for women aged 50+, or earlier where a family history exists)
 - Prostate screening (for men aged 50+, or earlier where a family history exists)
- Well child test

Pantaenius Premier

No limit

€250/\$310/£160

Full refund

Full refund

Full refund

€3.000/\$3.750/£2.000

€750/\$940/£500

NOTES

Area of Cover

The agreed Area of cover is shown in the Insurance Certificate.

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**. If Treatment Guarantee is not obtained for the benefits listed with a **1**, we reserve the right to decline your claim. If the treatment is subsequently proven to be medically necessary, we will only pay **80%** of the eligible benefit, and for those listed with a **2**, we will only pay **50%** of the eligible benefit. For further details please refer to the "How to Claim" Section of the Individual Benefit Guide, or simply contact the Helpline.

Chronic Conditions

Chronic conditions are covered within the terms of your policy.

Pre-existing Conditions

Pre-existing conditions (including any pre-existing Chronic Conditions) are covered within the terms of your policy.

Waiting Periods

There are no waiting periods to qualify for covered benefits.

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**, for example 'Routine Maternity'. Specific benefit limits may be provided on a "per Insurance Year" basis, a "per lifetime" basis or on a "per event" basis, such as per trip, per visit or per pregnancy. 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). The currency is determined by the agreed currency for premium payment. All limits are per member, per insurance year, unless otherwise stated in your Table of Benefits.

Termination of Cover

The insurance coverage ends at the same date the employment contract of the member is terminated.

Policy Terms and Conditions

The Table of Benefits provides an outline 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 Individual Benefit Guide, which is issued to members upon policy inception. A copy of the Individual Benefit Guide can be obtained via www.pantaenius.de.

Emergency

Emergency constitutes the onset of a sudden and unforeseen medical condition that requires urgent medical assistance. Only treatment commencing within 24 hours of the emergency event will be covered.

Race Crew

Contrary to No. 19 of the General Conditions, professional yachting sports are covered. However, cover does not apply to crew members who participate in major races, such as, but not limited to, the America's Cup and the Volvo Ocean Race, on vessels that were specifically built and constructed in order to take part in these races.