A summary of your cover options

Private Hospital Plan Full Cover and Value Plus

The plans you can choose from	Private Hospital Plan	Value Plus
Area of cover	Worldwide excluding USA & Canada (Area 2)	Worldwide (Area 1)
Overall maximum annual benefit	€600,000	€600,000
In-patient & daycare		
 Hospital accommodation, including approved routine and special nursing and non-surgical and non-oncology drugs and dressings (See note 1) 	Full settlement of fair and reasonable charges in supporting hospitals in Malta Limits outside supporting hospitals are detailed in the Benefits Table	Full settlement of fair and reasonable charges in supporting hospitals in Malta Limits outside supporting hospitals are detailed in the Benefits Table
 Theatre & recovery room fees (including eligible appliances) and surgical drugs and dressings (See note 1) Surgeon's and Anaesthetists' fees including pre and post-operative consultations. Related out-patient charges are paid under Benefits 15. (See note 3) 		
3. Physicians' charges		
 Specialist consultations, diagnostic procedures and physiotherapy (except CT and MRI scans) 		
5. Charges for one parent staying with child member under 16 or charges for child staying with nursing mother		
6. Cash benefit for free in-patient treatment (psychiatric treatment excluded)	€50 per night for up to 40 nights	€50 per night for up to 40 nights
7. Psychiatric Illness (Pre-authorisation required)	Full settlement of fair and reasonable charges in Malta only for 28 days in a five-year period.	Full settlement of fair and reasonable charges in Malta only for 28 days in a five-year period.
Other treatment		
 Oncology charges including CT and MRI scans, specialist fees, tests and drugs 		
9(a) In-patient non-oncology related CT and MRI Scanning (specialist referral required)	Full settlement of fair and reasonable charges in supporting hospitals in Malta	Full settlement of fair and reasonable charges in supporting hospitals in Malta
9(b) Out-patient non-oncology related CT and MRI Scanning (specialist referral required)	Limits outside supporting hospitals are detailed in the Benefits Table	Limits outside supporting hospitals are detailed in the Benefits Table
10. Ambulance Transport (when medically essential)		
Out-patient		
11. Out-patient surgical procedures	Benefit is payable out of benefits 1 (b) & 2 above	Benefit is payable out of benefits 1 (b) & 2 above
12(a) General practitioner	a) & b) up to €150 per year but out- patient drugs and dressings must follow in-patient or daycare treatment and be prescribed by a specialist	a) Up to €150 per year
(b) Prescription drugs and dressings charges		b) Not available
(c) GP charges for minor surgery approved by us	c) Up to €100	c) Not available
13. Specialist consultations, GP secondary treatment, diagnostic procedures (except MRI and CT scans) and physiotherapy	Full settlement of fair and reasonable charges in Malta	Not available
14. Chiropractic, acupuncture, homeopathic treatment and osteopathy	Elsewhere limits are detailed in the benefits table	
15. Psychiatry (requires pre-authorisation)	Up to €600 per year	Not available
16. Accidental damage to natural teeth	Up to €500 per year	Not available
17. Nursing at home by specialist arrangement (requires pre-authorisation)	Up to €1,650 per year After the first 7 days, up to €50 per day	Not available
Additional benefits		
18. Routine Maternity Cash Benefit	Up to €250 per confinement	Not available
19. Health at Hand - phone access to international health information service	Included in your plan	Included in your plan
20. MMDNA nursing cover	Cover provided by MMDNA	Not available

Notes:

- 1. In Malta and the UK, hospitals used must be approved by us
- 2. The benefits table in this leaflet is only a summary of cover. For full details, please ask for a copy of the full Benefits Table. For a full list of other membership terms, please ask for a copy of the Membership Agreement
- 3. Benefits apply to each member each policy year unless otherwise stated
- 4. All-in-patient and daycare treatment must be preauthorised by us

You never know unless you ask

Why buy the new Value Plus Policy?

This policy has been designed just for individuals and families to cover the **important benefits that you really need at a price which is very affordable**. It is similar to the Private Hospital Full Cover in that it covers all inpatient and daycare treatment on a full refund direct settlement basis (subject to fair and reasonable charges) PLUS some expensive outpatient treatment:

- Full refund on outpatient surgical procedures carried out by a specialist
- Full refund on MRI and CT scans

AND

■ GP treatment up to €150 each year

With this product, members also get access to Health at Hand - our award winning international telephone health information service. Free medical help is available through a range of health professionals 24 hours a day. The service is staffed by UK registered nurses, midwives, pharmacists and counsellors.

This product is available for purchase online, it is underwritten using moratorium underwriting (as opposed to being fully medically underwritten) with no need to provide full medical information at that stage.

Why choose moratorium underwriting?

There is no need to disclose medical history on your application. Instead we automatically exclude pre-existing medical conditions which you have:

- received treatment or medication for (including diet) or
- sought medical advice or
- become aware of or might reasonably have become aware of any signs or symptoms

during the five years immediately before the start of your cover. We may need to ask for additional medical information when you make a claim.

Once you have been a member for two consecutive years, you may be able to claim for treatment of pre-existing conditions as long as you have had a period of two consecutive years with no treatment or symptoms for that condition since you became a member. There are some medical conditions, those that continue or keep recurring that you may never be able to claim for, since you will never have a two year symptom or treatment free period.

There are some conditions, namely diabetes, raised blood pressure, prostrate troubles and bowel trouble where certain specified related conditions will be excluded.

What is full medical underwriting?

With this type of underwriting, you complete an application form disclosing full medical history and we will assess the information and decide on any personal medical exclusions which will be shown on your membership statement. Failure to declare any medical condition of which you should reasonably have been aware may result in treatment of that condition being excluded from all future cover with us.

I am already insured. What if I purchase Value Plus or a Clinic Plan online?

You need to be aware that any pre-existing conditions will be excluded from cover on a moratorium basis – see above for an explanation of moratorium underwriting.

Can I add optional benefits to my Value Plus Cover?

Yes, Preventive Care, Preventive Care Plus and Personal Case Management and Wellness are all available as addons and may be purchased online

> Atlas Healthcare Insurance Agency Limited Tel (356) 21 322 600 Fax (356) 232 65 601 health@atlas.com.mt



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