

FOUNDATION SERIES



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**PACIFIC
CROSS**

FOUNDATION SERIES

Foundation Series is designed for discerning clients who want reasonably priced medical care and worldwide coverage in times of need. Foundation Series has a wide range of flexible medical benefits to meet your health care needs with the convenience of an all in one plan - medical treatment, maternity, preventative health benefit and personal accident.



DENTAL BENEFITS are optional to match your needs and budget



EMERGENCY ASSISTANCE



Extensive DIRECT BILLING NETWORK IN VIETNAM



WORLDWIDE COVERAGE

SCHEDULE OF BENEFITS (in VND)

Maximum Benefit For Any ONE Disability and Sequelae

Covers normal, usual and customary charges, per disability per lifetime for:

Treatment Area

STANDARD

500,000,000

EXECUTIVE

1,000,000,000

PREMIER

2,000,000,000

WORLDWIDE

INPATIENT BENEFITS – Covers normal, usual and customary charges for:

Room and Board (standard room)

Semi-Private up to 2,000,000/day
(Private in Vietnam)

Semi-Private up to 3,000,000/day
(Private in Vietnam)

Semi-Private up to 4,000,000/day
(Private in Vietnam)

Up to limit of Room & Board of the Insured Person

Parent Accommodation – An extra bed in the same room for a parent accompanying an insured child under 18 years old

Intensive Care Unit, Coronary Care Unit – 15 days maximum per disability per year

3,000,000/day

5,000,000/day

7,000,000/day

Physician's Daily Hospital Visit

As Charged

Specialist's Fee

As Charged

Operating Room

20,000,000 per operation

As Charged

As Charged

Surgeon's Fee – Includes pre-surgical assessment and normal post-surgical care for each operation

100,000,000 per operation

200,000,000 per operation

240,000,000 per operation

Anaesthetist's Fee

Up to 30% of eligible Surgeon's Fee

Pre and Post Hospitalization (including Rehabilitation) – Within 30 days before admission and 90 days after discharge up to

10,000,000 per disability per year

15,000,000 per disability per year

20,000,000 per disability per year

Organ Transplant – Fees for kidney, heart, lung, liver and bone marrow transplants (up to 50% for donor and the remaining percentages for recipient, at the option of the Insured Person) to a total of

This benefit is a lump sum maximum per organ per lifetime and no other policy benefits are payable in respect of Organ Transplant.

100,000,000

200,000,000

300,000,000

Home Nursing – Immediately after hospitalization and certified to be medically necessary by the attending physician for up to 30 days per disability per year

400,000/day

600,000/day

1,000,000/day

Miscellaneous Inpatient Charges – For required diagnostic laboratory tests, x-rays, prescribed medicines; professional fees; blood and plasma; wheel chair rentals; outpatient surgery; surgical appliances and devices; and intra-operative standard prosthetics (as approved by the Company)

80,000,000 per disability per year

140,000,000 per disability per year

210,000,000 per disability per year

Maternity Benefit – Maximum limit per pregnancy after a 12-month waiting period (90 days for miscarriage and therapeutic abortion) up to

No

10,000,000

15,000,000

When both husband and wife are insured, the limit shall be increased by 50%

Free New Born cover – Free New Born cover - A child of an Insured Person is eligible for the same medical plan as the Insured Person (or the lower benefit level if both the parents of such child are insured persons and are insured for different levels of benefits) 15 days after the date of birth or the date of discharge - whichever is later. Eligibility is contingent on submission of an application form to the Company. Free New Born Cover extends until the Insured Person's next renewal, free of charge, provided that the Insured Person has been insured under this Policy at least 12 consecutive months and such child qualifies for insurance.

No

Included

Included

Preventive Health Benefit – Annual limit for routine check-up, vaccinations, appliances, vitamins

1,500,000

2,000,000

3,000,000

Burial and Funeral

6,000,000

10,000,000

10,000,000

Personal Accident Benefits

30,000,000

40,000,000

60,000,000

	STANDARD	EXECUTIVE	PREMIER
EMERGENCY BENEFITS – Subject to the overall maximum limit per disability			
Accidental Damage to Teeth - Emergency treatment for up to 7 days following accidental loss or damage caused to sound natural teeth	10,000,000 per accident	15,000,000 per accident	20,000,000 per accident
Accidental Emergency Outpatient Treatment - For covered accident which has been treated within 24 hours of the accident by the outpatient department of hospital, clinic, doctor's office	As Charged		
Emergency Local Ambulance Service	As Charged		
24-Hour Emergency Assistance Services and Emergency Medical Evacuation Service	Included		
Additional Travel Expenses (following Evacuation) - One economy class airline ticket to return an Insured Person to the Country of Residence	Included		

OUTPATIENT BENEFITS: Client can choose any plan			
MAXIMUM BENEFIT PER YEAR	24,000,000	36,000,000	48,000,000
Outpatient Benefit - Physician and specialists' fees for office visits, physiotherapist, and chiropractor when referred by the attending physician; and, for required diagnostic laboratory tests, x-rays and prescribed medicines	1,500,000/visit	2,000,000/visit	2,500,000/visit
Alternative Medicines - Fees for visits to homeopath, osteopath, acupuncturist, bonesetter, herbalist and Chinese medicine practitioner; and prescribed herbs up to an annual limit of	5,000,000		

OPTIONAL BENEFITS			
Dental Benefit 1 – Covers 80% of normal, usual and customary charges for Eligible Expenses per year up to VND5,000,000			
Dental Benefit 2 – Covers 80% of normal, usual and customary charges for Eligible Expenses per year up to VND10,000,000			

PREMIUM RATES (UNIT: VND 1,000)														
AGE GROUP		0-5	6-18	19-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66-70	71-75
INPATIENT	STANDARD	4,697	4,084	5,655	6,205	6,676	7,199	7,697	8,901	10,079	12,618	15,707	23,560	35,340
	EXECUTIVE	5,781	5,026	6,885	7,461	8,037	8,692	9,346	10,943	12,566	15,420	20,525	30,787	46,180
	PREMIER	7,137	6,205	11,205	12,147	13,116	14,163	14,660	16,650	18,980	23,038	30,368	45,552	68,328
OUTPATIENT	STANDARD	4,336	3,770	2,829	3,120	3,297	4,083	4,296	4,538	4,743	4,959	5,212	7,818	11,727
	EXECUTIVE	6,658	5,788	4,896	5,865	6,237	6,549	8,169	8,561	9,007	9,401	9,819	14,728	22,092
	PREMIER	8,192	7,122	6,466	7,749	8,220	8,694	10,815	11,312	11,887	12,435	12,990	19,485	29,227

OPTIONAL BENEFITS		DISCOUNT	
Dental Benefit 1	2,100	Discounts are not applied for Optional Benefits	
Dental Benefit 2	3,780	3 – 4 Insured Persons	5%
		5 – 10 Insured Persons	10%
		11 – 20 Insured Persons	15%
		21 Insured Persons and above	20%

NOTE
- Smoker has 15% loading.
- These medical plans are available for residents of Vietnam only. Residents in other countries will be subject to individual consideration.
This brochure is not a contract. For exact wording and complete details of the cover, terms, conditions and exclusions of the policy please refer to the policy itself.



PACIFIC CROSS VIETNAM (PCV) is part of Pacific Cross Group of Companies and specializing in third- party administrator (TPA) services, developing and managing health and travel insurance projects, arranging reinsurance for insurance companies.

Please contact us for a free consultation!

Provided by:

**HUNG VUONG
INSURANCE CORPORATION**



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INSURANCE**

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