

THE SUMMARY TERMS & CONDITIONS OF HEALTHCARE INSURANCE PLAN FOUNDATION, MASTER

The updated date: 15.07.2024

Please kindly carefully read and note below summary Terms & Conditions of Healthcare Insurance when registering for insurance. This Summary of Terms & Conditions is not an insurance contract.

Please see the details in:

- <https://pacificcross.com.vn/foundation-series/> (Foundation Product);
- <https://pacificcross.com.vn/master-series/> (Master Product);
- <https://pacificcross.com.vn/wp-content/uploads/2023/10/Health-Insurance-Policy-Wording-ENG-042023.pdf> (Terms & Conditions of Healthcare Insurance)

A. THE SUMMARY OF INSURANCE BENEFIT

COVERAGE	BASIS INFORMATION
COVERAGE	<ul style="list-style-type: none"> - Worldwide; - Maximum benefit for any ONE disability and sequelae per lifetime; - The maximum benefit of each benefit depends on your plan choosing (please refer details in the Healthcare Insurance Product)
CORE BENEFITS	Covers normal, usual and customary charges for: <ul style="list-style-type: none"> - Inpatient benefit, including <ul style="list-style-type: none"> • Room and Board (standard room), inpatient treatment fee/ surgery; • Maternity benefit (if any); • Free newborn cover (if any); • Preventive health benefit (if any); • Burial and Funeral (if any); • Personal accident benefits (if any). - Emergency benefit.
ADDITIONAL MEDICAL BENEFIT (Optional)	Client can choose any benefit <ul style="list-style-type: none"> - Outpatient; - Dental (co-payment 80:20 – Company pays 80%); - Personal accident; - Lifestyles Upgrade (for Master only).

B. THE EXCLUSIONS

1. Pre-existing conditions, except those which are declared to and accepted by the Company;
2. Other exclusions: please refer to the details regulations in the Term “Exclusions” in the Policy Wording (mentioned above)

C. TERM

1. **Insurance Period:** begins at 12:00 midnight on the first day and ends at 12:00 midnight on the last day (local time in the Insured Person's Country of residence)
2. **Premium Payment period:**
 - o 30 days from the effective date of the Insurance Policy, or the due date for the periodical payment.
 - o The premium is paid annually or semi-annually (52% of annual premium)
 - o The Company reserves the right to offset any unpaid premium(s) from any benefits payable.
3. **Waiting Period:** The Company shall not cover:
 - a. Prior the date on which such premiums are paid: any disability;
 - b. 30 days from the first effective date of the policy: all Illnesses that begins or manifests during this period;
 - c. 90 days from the first effective date of the policy: miscarriage or abortion, hydatidiform mole or ectopic pregnancy;
 - d. 270 days from the first effective date of the policy: maternity benefit and free newborn Child cover;
 - e. 12 months from the first effective date of the policy: special disease.

D. THE TERMINATION OF THE INSURANCE CONTRACT BEFORE THE DAEDLINE

- In case there is any arising claim, the policy is terminated prematurely and will not be refunded;
- In case there does not have any arising claim, the Company will refund to the Insured Person following the "Short Period Rate" which is specified in the Terms & Conditions or following the "Prorate Premium" for some special cases.

E. OBLIGATIONS OF TRUE DISCLOSURE

1. Any liability of the Company under the Insurance Policy shall depend solely on the truthfulness and the accuracy of all declarations provided by the Policyholder and the relevant Insured Person on (1) Application Form, (2) Any other Forms provided by the Company, (3) Claims Form;
2. The Company will not pay for the benefits under the Insurance Policy if the Insured Person has concealed or misrepresented any important event about the relevant situation;
3. If there are any claims under the Insurance Policy is fraudulent or unfounded in any respect, all benefits paid or payable in respect of such claim shall be forfeited and will be recovered by the Company (if paid). Furthermore, the Company has the full right to cancel the Insurance Policy in such cases.

F. OTHER NOTES

1. **Additional benefits:** are applicable after the insurance period of the Insured Person exceeded the Waiting period (if any)
 - a. **Free newborn Child cover:**
 - i. The policyholder may apply to the Company for covering under this Policy for the newborn Child of an Insured Person. This Child will become an Insured Person and is

- free covered when the Company accepts the Policyholder's written request in accordance with current underwriting rules of the Company;
- ii. The term of free covering is from 15 days after the date of birth of the Child or from the date of submitting the application form after the Child discharges hospital, depending on which day comes later, until the renewal date of the Insurance Policy of an Insured Person;
 - iii. The Company shall not cover for any congenital condition, congenital defects, birth anomalies, or premature birth of a newborn Child.
- b. Maternity benefit:** when both husband and wife are insured – both have fulfilled the waiting period and the health insurance plan of the husband is equal to or higher than the health insurance plan of the wife, the maternity of the wife shall be increased by 50%.
 - c. Travel benefit:** is included in the Insurance Policy for the Insured Person who has the Outpatient benefit (exclude the Foundation series)

2. The necessary claims documents

i. Claims form	Full information and signature of the Insured Person.
ii. Medical report	Medical report, surgery report, discharge paper, medical tests prescription, medical test result, prescription, etc.
iii. For Dental (if any)	Oral exam report (done by the physician/ dentist, is required for the first submitting of dental claim. If the policy has passed 6 months of waiting period, this report is waived)
iv. For Travel (if any)	The copy of Passport, boarding pass, airline ticket, etc.
v. Invoice and the Breakdown of charges	
vi. Other related documents (if any)	
Please refer details guideline: https://pacificcross.com.vn/claim-procedure-information/	