



WE'RE
HERE

Medical Plan for Individuals & Families: Golden Care

Golden Care grants the golden experience will full coverage and no additional fees along the way. This plan is in Fresh USD and comes in two versions: Full Network and Reduced Network.

Golden Care Table of Benefits

	Golden Care Full Network	Golden Care Reduced Network
Area of cover	Lebanon	
Networks available	Full Network on direct billing	Full Network on direct billing excluding: CMC, AUBMC, Rizk, Bellevue
Inpatient benefits		
Classes	First (A) - Second (B) - Semi Private (SK)	
Limit per year	Unlimited for all classes	A: \$500,000 B: \$300,000 SK: \$200,000
Emergency room	Full Cover. Exclusions covered up to \$100	Full Cover
Maternity (not applicable for Junior single)		
For couples	Full cover after 270 days of enrolment	Full cover after 365 days of enrolment
For single mother	Full cover after 365 days of enrolment	
Free of charge new born baby (Bébé Securite)	Covered from day one	Covered after 14 days, if eligible
Epidural	Covered	
Incubator & nursery	Unlimited days, up to \$30,000	Unlimited days, up to \$15,000
Screening test for baby	Up to \$200	Up to \$100
Congenital cases	All cases covered up till the age of 12 and with no financial limit	All cases covered up till the age of 12 and up to \$15,000 per year
Parent accommodation at hospital for children below 16 years	Covered	
Home Care	In-hospital treatments administered at home are covered	
Prosthesis		
Due to accident	Unlimited, as per TPA's tariff	Up to \$10,000 per year, as per TPA's tariff
Due to sickness	Up to \$30,000 per year, as per TPA's tariff	Up to \$7,000 per year, as per TPA's tariff
Orthesis		
Due to accident	Up to \$500	Not covered
Due to sickness	Up to \$500	Not covered
Additional Inpatient benefits		
Dialysis for acute renal failure, excluding "arteriovenostomy"	Covered for all needed sessions during 1 st initial admission	Up to 3 sessions during 1 st initial admission
Sleep disorder disease	Polysomnography is covered	
Sleep Apnea Surgery	Up to \$5,000	Not covered
Parkinson	Up to \$5,000 (In & Out)	Not covered
Epilepsy	Up to \$5,000 (In & Out)	Up to \$2,000 (In & Out)
New treatments, medical techniques, surgeries & tests	Up to \$5,000 (In & Out)	Not covered
Rehabilitation for a covered case	Up to \$2,000	Not covered
Breast reconstruction	Covered if due to a covered partial or complete breast excision due to breast cancer (within 6 months of sickness)	
Infertility	Covered after 12 months of enrolment and up to \$3,000 per year, for all classes. As per TPA's tariff	Covered after 12 months of enrolment and up to \$1,000 per year. As per TPA's tariff

**All the above limits and coverage are subject to underwriting*

	Golden Care Full Network	Golden Care Reduced Network
Cornea transplant	Surgery is covered. Cost of cornea is excluded	Not covered
Cardio vascular diseases	Unlimited	Up to \$100,000
Coronary stent Valves	Covered up to sickness prosthesis limit	
Work related accident	Covered	Not Covered
Bone marrow aspiration & organ transplant surgery	Up to \$30,000 per lifetime. As per TPA's tariff. Cost of organ is excluded	Up to \$10,000 per lifetime. As per TPA's tariff. Cost of organ is excluded
Bariatric surgery related to morbid obesity (e.g. Sleeve and bypass)	Up to \$7,500 per lifetime. As per TPA's tariff	Not covered
Cancer Diseases	Unlimited	Up to \$ 100,000
Tropical Disease (specific diseases as per general conditions)	Covered	Not covered
Sexually transmitted diseases (specific diseases as per general conditions)	Up to \$15,000 per year	Not covered
Psychiatric disorder	In-hospital treatment covered up to \$10,000 per year after 12 months of enrolment with a maximum of 30 days of hospitalization	Not covered
Hospital daily income	For entrepreneurs <60 years; \$50/day starting the 2 nd day & up to 7 days per year	Not covered
Morgue/Burial expenses following a covered hospitalization	Up to \$3,000	Up to \$ 1,000 for adherents aged 64 and below
Epidemic / Pandemic Diseases	Up to \$30,000	Up to \$10,000
Out of hospital benefits	Direct billing as per NEXT CARE preferred network	
Ambulatory		
Option 1	Unlimited, 100% coverage	N/A
Option 2	Unlimited, 85% coverage	Up to \$2,500 per year, 85% coverage
Amniocentesis	Covered	Not covered
Morphological Echography	Once per pregnancy	
Triple test	Covered once per pregnancy	
Dental panoramic	Covered if due to a covered accident and up to 9 months after the accident occurred	
MRI	Covered, subject to a prior approval	
Thallium myocardial Scintigraphy	Covered, subject to a prior approval	Not covered
Pet scan	Covered, subject to a prior approval	
VCT 64	Covered, subject to a prior approval	Not covered
Genetic test	Up to \$1,000 per year	Not covered
OCT	Covered, subject to a prior approval	
Osteodensitometry (for insured aged 50y & above)	Covered for a specific medical reason	
Physiotherapy & Kinesitherapy	25 sessions per year	15 sessions per year
Pre-Marital test	Covered	Not covered
Additional Benefits		
Waiver of medical premium of family (for adherents below 65 years)	We waive the medical premium of the family for a period of the policy year and 1 additional year in case of death, terminal illness, or total disability of the bread winner	Not covered
Family discount	Applicable for Family of 3 & Plus	
Junior single special rate	Special rate for people between 18 and 35 years who are single	
Life style discount	For every Km you run outdoor, earn \$0.5, up to \$100 per year. To be monitored by your Nike+ App, linked to your Facebook account	
Discount	3% discount for individuals and families for the first year only (new business)	
Rental of medical supplies	Up to 1 month rental	Not covered
Guaranteed renewability	720 days, lifetime subject to an observation period of 180 days for new members	
Pre-Existing conditions In Hospital	Covered after 1 year for new members	

*All the above limits and coverage are subject to underwriting

	Golden Care Full Network	Golden Care Reduced Network
Tests related to preexisting cases for new insured	Covered up to \$100, once per year from day 1	Not covered
Upgrades on renewal (e.g. class and product)	Observation period 270 days for maternity and preexisting conditions	Observation period 365 days for maternity and preexisting conditions
Extension of coverage at the expiry date and while in hospital	Up to 30 days	N/A
Claims outside of Lebanese territories or outside of network	Claim processed on reimbursement basis and as per NEXT CARE's Lebanese network rates and subject to 30% excess	
Travel insurance (Europe & MENA countries only) – up to 65 years	Medical & Travel benefits covering the insured aged up to 65 years for a period up to 30 days as per Schengen embassies requirements up to \$30,000 per trip for medical expenses. Covers 24/7 help desk. Covers accidental and acute sickness not due to any Pre-Existing condition. For single use only. <i>Policy to be requested at least 48 hours prior travel date.</i>	
Travel insurance (Europe & MENA countries only) – 66 years and above	Medical & Travel benefits covering the insured aged 66 years and above for a period up to 30 days as per Schengen embassies requirements up to \$10,000 per trip for medical expenses with a \$300 deductible per claim. Covers 24/7 help desk. Covers accidental and acute sickness not due to any Pre-Existing condition. For single use only. <i>Policy to be requested at least 48 hours prior travel date.</i>	
Private transportation service/private ambulance	Covered	Not covered
Natural Death (if the Head of Family/Policy Holder (aged between 18 & 45)	Covered, for \$10,000	
Accidental death (if the Head of Family/Policy Holder (aged between 46 & 65)	Covered, for \$10,000	

**All the above limits and coverage are subject to underwriting*



WE'RE
HERE

Medical Plan for Individuals & Families: Essential Care

Essential Care provides basic medical coverage for individuals and families. It is designed to be affordable, while covering most needed medical benefits within a specific network. This product is in Fresh USD.

Essential Care Table of Benefits

	Essential Care
Area of cover	Lebanon
Networks available	Limited Network* on direct billing
Inpatient benefits	
Classes	Semi Private (SK)
Limit per year	\$150,000
Emergency room	Full Cover
Maternity	
For couples & single mothers	Full cover after 365 days of enrolment
Free of charge new born baby (Bébé Securite)	Covered after 14 days, if eligible
Epidural	Covered
Incubator & nursery	Unlimited days up to \$10,000
Screening test for baby	Up to \$100
Congenital cases	All cases covered up till the age of 12 and up to \$10,000 per year
Home Care	In-hospital treatments administered at home are covered
Prosthesis	
Due to accident	Up to \$10,000 per year, as per TPA's tariff
Due to sickness	Up to \$7,000 per year, as per TPA's tariff
Additional Inpatient benefits	
Dialysis for acute renal failure, excluding "arteriovenostomy"	Up to 3 sessions during 1 st initial admission
Sleep disorder disease	Polysomnography is covered
Epilepsy	Up to \$2,000 (In & Out)
Breast reconstruction	Covered if due to a covered partial or complete breast excision due to breast cancer (within 6 months of sickness)
Infertility	Covered after 12 months of enrolment and up to \$1,000 per year. As per TPA's tariff
Cardio vascular diseases	Up to \$100,000
Coronary stent/ Valves	Covered up to sickness prosthesis limit
Bone marrow aspiration & organ transplant surgery	Up to \$10,000 per lifetime. As per TPA's tariff. Cost of organ is excluded
Cancer Diseases	Up to \$100,000
Morgue/Burial expenses following a covered hospitalization	Up to \$ 1,000 for adherents aged 64 and below
Epidemic / Pandemic Diseases	Up to \$10,000
Out of hospital benefits	Direct billing as per limited network*
Ambulatory	Up to \$2,000 per year, 85% coverage
Morphological Echography	Once per pregnancy
Triple test	Covered once per pregnancy
Dental panoramic	Covered if due to a covered accident and up to 9 months after the accident occurred
MRI	Covered, subject to a prior approval
Pet scan	Covered, subject to a prior approval
OCT	Covered, subject to a prior approval
Osteodensitometry (for insured aged 50y & above)	Covered for a specific medical reason
Physiotherapy & Kinesitherapy	15 sessions per year
Guaranteed renewability	720 days, lifetime subject to an observation period of 180 days for new members
Pre-Existing conditions In Hospital	Covered after 1 year for new members

*All the above limits and coverage are subject to underwriting

Medical Plans for SMEs in Fresh USD

- Up to 50 employees
- Tailor made products are available for SMEs as well as companies above 50 employees. Please refer to the company
- Fresh Payment guarantees no extra charges upon hospital admission

SME Table of Benefits

Area of cover	Full Network			Reduced Network		
	Class A	Class B	Class SK	Class A	Class B	Class SK
Area of cover	Lebanon					
Networks available	Full Network on direct billing			Full Network on direct billing excluding CMC, AUBMC, Rizk, Bellevue, St. Georges Orthodox		
Inpatient benefits						
Limit per year	\$300,000	\$250,000	\$150,000	\$200,000	\$150,000	\$100,000
Emergency room	Full cover. Exclusions covered up to \$100	Full cover		Full cover		
Maternity	Covered from day 1 for existing employees and after 280 Days for new employees			Covered from day 1 for existing employees and after 365 Days for new employees		
Normal Delivery	\$5,000	\$4,000	\$3,000	\$4,000	\$3,000	\$2,000
Cesarean Delivery	\$7,500	\$6,000	\$5,000	\$6,000	\$4,500	\$3,500
Legal abortion	\$2,500	\$2,000	\$1,750	\$2,000	\$1,500	\$1,250
Maternity complications	\$6,000	\$5,000	\$4,000	\$5,000	\$4,000	\$3,000
Free of charge new born baby (Bébé Securite)	Covered from day one			Covered after 14 days, if eligible		
Epidural	Covered					
Incubator & nursery	Covered					
Screening test for baby	Up to \$200			Up to \$100		
Congenital cases for babies born at Securite (Bébé Securite)	3 cases per year covered up to \$5,000 each and up till the age of 12			3 cases per year covered up to \$3,000 each and up till the age of 12		
Congenital cases for babies not born at Securite	3 cases covered up to \$3,000 each and up till the age of 12			3 cases covered up to \$2,000 each and up till the age of 12		
Parent accommodation at hospital for children below 12 years	Covered					
Prosthesis						
Due to accident	Unlimited	Up to \$20,000 per year	Up to \$15,000 per year	Up to \$20,000 per year	Up to \$15,000 per year	Up to \$10,000 per year
Due to sickness	Up to \$20,000 per year	Up to \$15,000 per year	Up to \$10,000 per year	Up to \$15,000 per year	Up to \$10,000 per year	Up to \$7,500 per year
Additional Inpatient benefits						
Dialysis for acute renal failure	Covered for all needed sessions during 1 st initial admission			Up to 3 sessions during 1 st initial admission		
Sleep disorders disease	Polysomnography is only covered					
Breast reconstruction	Covered due to a covered partial or complete breast excision due to breast cancer (within 6 months of sickness) up to					
	\$8,000	\$6,000	\$5,000	\$6,000	\$5,000	\$4,000
Infertility	Covered from day 1 for existing employees and after 12 months for new employees					
	up to \$2,000 per year and \$4,000 lifetime			up to \$1,500 per year and \$3,000 lifetime		
Cornea transplant	Surgery is covered. Cost of cornea is excluded					
Coronary stent	Covered up to sickness prosthesis limit					
Valves	Covered up to sickness prosthesis limit					
Work related accident	Covered			Not covered		
Bone marrow aspiration & organ transplant surgery	up to \$15,000 per lifetime. As per TPA's tariff. Cost of organ is excluded			Not covered		
Bariatric surgery related to morbid obesity (e.g. Sleeve and bypass)	up to \$7,500 per lifetime. As per TPA's tariff.			Not covered		

	Full Network			Reduced Network		
	Class A	Class B	Class SK	Class A	Class B	Class SK
Cancer including chemotherapy & radiotherapy	Covered					
Tropical Disease (specific diseases as per general conditions)	Covered					
Sexual transmitted diseases (specific diseases as per general conditions)	Up to \$5,000 lifetime			Not covered		
Psychiatric disorder In-hospital treatment	Up to \$1,000/year after 12 months of enrolment	Not covered		Not covered		
Morgue/Burial expenses following a covered hospitalization	Up to \$2,000			Up to \$1,000		
Epidemic / Pandemic Diseases	Up to \$30,000			Up to \$10,000		
Out of hospital benefits						
Ambulatory						
Out 85% or 100%	Unlimited	Up to \$3,000		Up to \$2,000		
Amniocentesis	Covered			Not covered		
Morphological Echography	Covered			Covered		
Triple test	Covered			Not covered		
Dental panoramic	Covered			Covered		
MRI	Covered			Covered		
Thallium myocardial Scintigraphy	Covered			Not covered		
Pet scan	Covered			Not covered		
VCT 64	Covered			Not covered		
OCT	Covered			Not covered		
Osteodensitometry (for insured aged 50y & above)	Covered			Covered		
Physiotherapy & Kinesitherapy	15 sessions per year			10 sessions per year		
Pre-Marital test	Covered			Not covered		
Doctor Visit	N/A			N/A		
Prescription drugs	N/A			N/A		
Additional benefits						
Guaranteed renewability	720 days lifetime subject to an observation period of 180 days for new members					
Pre-Existing conditions	\$4,000	\$2,500	\$1,500	\$2,000	\$1,500	\$1,000
Upgrades on renewal (e.g. class and product upgrade)	Observation period 365 days for maternity and preexisting conditions					
Extension of coverage at the expiry date and while in hospital	Up to 30 days			Up to 15 days		
Claims outside of network	Claim processed on reimbursement basis and as per NEXtCARE' s Lebanese network rates and subject to 30% excess					
Home Care	In-hospital treatments administered at home are covered					
Rental of medical supplies	Up to 1 month rental			Not covered		
Private transportation service/private ambulance	Covered			Not covered		
Natural Death (if the Head of Family/Policy Holder (aged between 18 & 45)	Covered, for \$10,000					
Accidental Death (if the Head of Family/Policy Holder (aged between 46 & 65)	Covered, for \$10,000					