

## Schedule of Benefits

PLAN NAME		SALAMA PLUS
<b>Geographical Area</b> (please refer to Geographical description)	Elective Treatment	Worldwide
	Emergency Treatment	Worldwide
<b>Network</b> (Direct Billing Facility is available in the following countries)  Treatments at Bahrain Specialist Hospital & Royal Bahrain Hospital		<u>Network: "GN"</u> Within Bahrain and outside Bahrain on reimbursement basis  Covered on direct billing
Pre-existing / Chronic Conditions		Covered up to BHD 2,000
BENEFIT		INPATIENT & DAY-CARE
Annual Benefit Limit per person		BHD 10,000
Accommodation Type		Private
Hospital Accommodation & Services:		
at <b>Network</b> Provider		Covered
at <b>Non-network</b> Provider, per day		BHD 100
Consultant's, Surgeon's, Anaesthetist's Fees, Physiotherapy and etc.		
at <b>Network</b> Provider		Covered
at <b>Non-network</b> Provider inside and outside of Bahrain		80% Bahrain Network charges or actual whichever is less
Accidental damage to teeth		Covered up to the policy maximum annual limit
Organ Transplant ( <i>donor medical cost is covered</i> )		Covered ( <i>except cost of organ</i> )
Oncology		BHD 2,000
Dialysis		BHD 1,000
Nursing at Home, maximum up to		BHD 3,500
Ambulance ( <i>followed by Hospital Admission</i> ) per trip		BHD 200
Parent Accommodation for accompanying an Insured Child under 18 years of age, per day		BHD 40
Hospital Cash Benefit if Inpatient Treatment is received free of charge in a Government Hospital		BHD 50 ( <i>up to a max. BD 750 per year</i> )
Inpatient & Day-care Treatment subject to Pre-approval		Yes

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BENEFIT	OUTPATIENT
Annual Benefit Limit per person	Unlimited
Deductible, per consultation	BHD 5
Consultation:  at <b>Network</b> Provider  at <b>Non-network</b> Provider at a maximum of  In <b>Europe</b> at a maximum of	Covered (Free Follow-up, kindly refer to the list of Network Providers)  BHD 20
Diagnostics ( <i>x-ray, MRI, CT-scan, ultra sound &amp; etc.</i> ) , Laboratory, Pharmaceuticals  at <b>Network</b> Provider  at <b>Non-network</b> Provider	100%  80% Bahrain Network charges or actual whichever is less
Physiotherapy ( <i>up to a max. of sessions per person per policy year</i> )  at <b>Network</b> Provider  at <b>Non-network</b> Provider	15 sessions & Additional 5 sessions in case of accident following orthopedic Surgery.  Covered  BHD 15
MRI & CT Scan, Physiotherapy, Medication more than one month and Laboratory ( <i>more than BD 100</i> ) subject to Pre-approval	Yes
	ADDITIONAL BENEFITS
Doctor Home Visit	Covered as per Non-network consultation limit
Visiting Doctors	Covered as per Non-network consultation limit
Crohn's disease	BHD 500
Mental Health: A clinically significant disturbance in an individual's cognition, emotional regulation, or behaviour. It is usually associated with distress or impairment in important areas of functioning	BHD 500
Psychiatric Treatment due to Sickness/Accidental Bodily Injury (12 months waiting period for new joiners only)	Covered
Acupuncture Therapy Eligible if as a result of an accident covered by the policy on reimbursement basis	BHD 200

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Hormone Therapy covered in respect of pre & postmenopausal symptoms on reimbursement basis	BHD 250
Allergy: (excluding of allergy testing and desensitization treatment for allergy" and as for the test we exclude IGE, food intolerance test, skin allergy test & immune modulators)	Covered
Alternative: Homeopathy, Osteopathy and Ayurveda (on Reimbursement basis only) up to PPPA	BHD 160
Deviated Nasal Symptom: Non-cosmetic Deviated Nasal Septum in conjunction with any other ENT surgery if Medically necessary up to PPPA	BHD 400
Prostheses: as a result of accident or sickness covered by the policy, Plates, nails and K-wires for repair of bone fracture and insertion of Stents to coronary artery as a treatment of Ischemic heart disease	Covered
Vaccination for Children up to six (6) years of age as per the Ministry of Health requirements	Covered
Influenza Vaccination (once a year)	Covered
Wellness Medical Check-up: Physical Examination, Chest X-ray, ECG, Urine Analysis, Stool Analysis, Fasting Blood Sugar, Lipid Profile, Prostate Test for male aged +50 years & Mammogram for female aged +40 (per person per annum at MEM Hospital	BHD 50
Hepatitis B, Hepatitis C, HIV, PPD skin test & Chest X-ray (Once a year on reimbursement basis only at KIMS)	BHD 20 per member not exceeding BHD 5,500 in aggregate per year

BENEFIT	EMERGENCY TREATMENT ABROAD
<p><b>Inpatient Emergency Treatment Abroad During Business Trips and Holidays</b> (subject to a maximum of 45 consecutive days per trip)</p> <p><b>Emergency Conditions: A life threatening</b> medical condition or symptom resulting from Injury or Sickness which arises suddenly &amp; requires immediate care and treatment, generally received to avoid jeopardy to the life or health of a Covered Person.</p>	80% Bahrain Network charges or actual whichever is less
Any treatment " <b>outside</b> " Geographical Area other than an " <b>Emergency</b> " condition	Not covered
Upon Travelling Abroad, for assistance please call	+973 1738 2564

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BENEFIT	MATERNITY
Limited to 1 delivery (normal/screens) and abortion	
<b>Inpatient</b>	
Normal Delivery/Complications	Not Covered
Caesarean	Not Covered
Abortion/Miscarriage	Not Covered
<b>Outpatient (ante-/postnatal)</b>	Not Covered
<b>Waiting Period</b>	
Existing female members (16-45 years)	280 days
New female joiners (16-45 years)	280 days
New Born Child	Not Covered
Premature Child	Not Covered
Circumcision	Not Covered
Deductible, per consultation	NIL
Co-insurance	Not Covered
Inpatient and Outpatient treatment subject to Pre-approval	Not Covered

BENEFIT	DENTAL
Consultations, Extractions, X-Ray, Fillings (Composite & Amalgam), Root Canal Treatment and Medication (Painkiller & Antibiotics)	BHD 200
Dental Cleaning (Scaling & Polishing)	1
Gum Treatment	Covered
Deductible, per consultation	NIL
Co-insurance	20%
Treatment at non-network provider	Not covered
Treatment subject to Pre-approval	Yes

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BENEFIT	OPTICAL
Vision tests for errors of refraction	Not Covered
One pair of Lenses	Not Covered
Frames	Not Covered
Contact Lenses	Not Covered
Deductible, per consultation	Not Covered
Co-insurance	Not Covered
Treatment subject to Pre-approval	Not Covered

BENEFIT	INTERNATIONAL EMERGENCY MEDICAL EVACUATION
Emergency medical evacuation	\$1,000,000
Emergency medical repatriation and repatriation of mortal remains	Included within the above benefit amount
Compassionate Visit	One economy class return airfare
Return of minor children	One economy class one way fair
Convalescence expenses	\$ 1,000 subject to a sub-limit of \$ 250 per day

	GEOGRAPHICAL DESCRIPTION
South Asia and South East Asia	Afghanistan, Bangladesh, Bhutan, India, Iran, Indonesia, Malaysia, Nepal, Pakistan, Philippines, SriLanka, Thailand & Vietnam
GCC and Arab Countries	Algeria, Djibouti, Egypt, Iraq, Jordan, KSA, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Palestine, Qatar, Somalia, Sudan, Syria, Tunisia, UAE & Yemen

### COVID 19- COVERAGE

1. Only applicable members positively infected with COVID-19 declared/infected during the policy period
2. On Reimbursement basis only.
3. Accommodation is Private room with maximum limit of BD 500 per case.
4. Allowed hospitals are Al-Hilal Hospital & MEM.
5. The coverage to be only for the room charge and all investigations done during the quarantine stay in the hospital.
6. The COVID-19 test done prior admission or after the discharge is not covered.
7. Any complications after the quarantine period covered will not be covered.
8. Documents required for processing shall be: a. Medical certificate from MOH showing COVID-19 results b. Periodical

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### IMPORTANT NOTES:

1. Groups less than 26 employees are subject to Individual Underwriting and failure to disclose material information to the insurer will invalidate the proposed insurance policy.
2. Network cost is defined as cost of medical treatment on the general market standard or average cost of American Mission Hospital, Ibn Al-Nafees and Bahrain Defense Force.
3. Pre-authorization is requested for the following if received at a Network Provider:
  - a) Inpatient Treatment
  - b) Medication more than 1 month
  - c) MRI & CT Scan
  - d) Physiotherapy
  - e) Maternity
  - f) Dental
  - g) Optical
4. All Out-patient Maternity Treatments at Bahrain Defence Hospital, if exceeded the out-patient limit shall be automatically deducted from the inpatient limit without prior notification to the member.
5. A reimbursement Claim (*Non-Network Claims*) must be submitted within 30 days inside of Bahrain from the first treatment date & 60 days for outside KOB.
6. A "fully completed" reimbursement claim will be settled within 14 working days from the date received by Solidarity. All claims must be submitted through Health 360 Mobile Application or website.
7. General Exclusions, kindly refer to the comprehensive list provided.
8. All treatments at BDF Cardiac Centre are only covered under Shared Room.
9. Minor work related injuries are covered (Out-patient only).
10. Third Party Administrator - Health 360.
11. Deletion of members: Pro-rata refund in case of no claims and no refund in case of claims regardless the claims amount.
12. Maximum age covered under this policy is up to 70 years.
13. No physical card will be issued, electronic card shown in the mobile application must be used.
14. This quotation is valid for one month.
15. Premium will change if there is change in members.
16. Payment terms to be discussed upon finalizing the quotation.
17. Pre-existing Condition: Any bodily injury or illness or its related condition that is medically existing prior to the enrolment date of the insured member, whether it is known or not known to him/her, and necessitates the Covered Person to receive care and treatment.
18. Chronic Condition: A disease that persists for a long time. A chronic disease is one lasting 3 months or more.
19. Excluded providers from the policy (direct billing and reimbursement): Janeen Fertility & Genetics Centre, Dr. Mohammed Rajab Dental Clinic, Al-Amal Dental Clinic, Gulf Dental Clinic, Al-Noor Dental Clinic, Al-Manar Dental Clinic, Dr. Fadhel Al-Alawi Dental Clinic; Dr. Mona Ahmed Dental Clinic (El-Estiqlal Medical Complex), Dr. Ammar Al-Ekri Dental Clinic & Yateem Optician (All branches).
20. In case of any changes in the VAT rates, we shall charge you additional VAT on a pro rata basis for the period from the effective date of such changes in the VAT rate till the expiry of the Policy.
21. Hot Line number 8000 1151

CLIENT: ROYAL COLLEGE OF SURGEONS IN IRELAND (RCSI) - STUDENT

QTN. #: 15082023R160823 - REV 5

DATE: 25-09-2023

DATE: 11/09/2023



## Schedule of Benefits

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