

Asia Care Plus International

International health insurance
for individuals and families



 **Luma**

Asia Care Plus Overview

Essential international health insurance plans

Essential coverage for costly unexpected future events such as accidents and treatment of medical conditions, acute or chronic.

Lifetime renewal guarantee regardless of age or health condition.

Worldwide coverage for accidents and medical emergencies.

Free choice of medical provider

Direct billing - no cash advance required for both inpatient or outpatient treatments in our preferred medical network.

1st day coverage - immediately get covered on the first day your plan starts.

Our plans at a glance

Plan 1 Essential care		Plan 2 Balance care		Plan 3 Superior care		Plan 4 Premium care		Plan 5 Platinum care	
Inpatient	●	Inpatient	●	Inpatient	●	Inpatient	●	Inpatient	●
Cancer	●	Cancer	●	Cancer	●	Cancer	●	Cancer	●
		Outpatient	●	Outpatient	●	Outpatient	●	Outpatient	●
		Healthcheckup	●	Healthcheckup	●	Healthcheckup	●	Healthcheckup	●
				Maternity	●	Maternity+	●	Maternity++	●
				Dental	●	Dental+	●	Dental+	●

● Paid in full ● Limited cover

Area Of Coverage

Area of coverage for elective treatments

Asia Care Plus plans offer a choice of 3 zones: **Zone A**, **Zone B** or **Zone C**.

You may choose to have your planned treatments in any of the countries listed in your chosen zone.

ZONE C

Worldwide

excluding :

USA, China,
Bahamas, Canada,
Hong-Kong, Israel,
Japan, Switzerland,
Russia, Singapore,
Brazil, Taiwan
and United Kingdom

ZONE B

Worldwide

excluding:

USA, China,
Bahamas, Canada,
Hong-Kong, Israel,
Japan and Switzerland

ZONE A

Worldwide

excluding:

USA



To be eligible for Asia Care Plus plans, you must reside in one or more countries listed below for at least 185 days per year.

Bangladesh, Bhutan, Brunei, Cambodia, East Timor, India, Indonesia, Laos, Malaysia, Maldives, Myanmar, Nepal, Pakistan, Philippines, Sri Lanka, Thailand, Vietnam.

Worldwide Emergency Cover

OUTSIDE YOUR ZONE OF COVERAGE

Whichever zone you select, you will be covered worldwide for accidents and unforeseen medical emergencies for trips up to 60 days (not more than 180 days per year and in the limit of \$250,000 per year).



Asia Care Plus Benefits

Benefits	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Annual Limit per Year & per person	\$1,000,000	\$1,000,000	\$1,000,000	\$1,600,000	\$1,600,000
Inpatient Benefits					
Staying in hospital overnight or as a day case	Private room up to \$170 per day	Private room up to \$170 per day	Private room up to \$170 per day	Paid in full (standard private room)	Paid in full (standard private room)
Parent accommodation with an insured child under 18 years old	\$40 per day max. 30 days	\$40 per day max. 30 days	\$40 per day max. 30 days	\$40 per day max. 30 days	\$40 per day max. 30 days
Day care treatment*	●	●	●	●	●
Nursing Care	●	●	●	●	●
Operating room, medicine & surgical dressing	●	●	●	●	●
Prescription drugs and materials	●	●	●	●	●
MRI, PET & CT-PET Scans	●	●	●	●	●
Intensive care, coronary care, dependency unit	●	●	●	●	●
Surgical fees including anesthesia	●	●	●	●	●
Reconstructive surgery following accident/eligible medical condition	●	●	●	●	●
Specialist's consultations fees	●	●	●	●	●
Diagnostic Test - Pathology Xrays	●	●	●	●	●
Organ and bone marrow transplant services	●	●	●	●	●
Hospice and palliative care	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000
Psychiatric treatment ^(WP) Waiting period 10 months	● for 20 days	● for 20 days	● for 20 days	● for 20 days	● for 20 days
Prosthetic implants & appliances	●	●	●	●	●
Rehabilitation	● for 30 days per medical condition	● for 30 days per medical condition	● for 30 days per medical condition	● for 30 days per medical condition	● for 30 days per medical condition
Nursing at home or in a convalescent home	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Emergency dental treatment following an accident	●	●	●	●	●

* Day care treatment or Outpatient surgery: treatment cost for a surgical procedure performed in a surgery, hospital, day care facility or outpatient department, as part of an hospitalisation of less than 24 hours

^(WP) WAITING PERIODS APPLIES.

The benefits will be available after the end of the waiting period.

● Paid in full

■ Not covered

Benefits	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Local road ambulance service	●	●	●	●	●
Pre-operative consultation & diagnostic procedure**	\$2,000 per year, within 30 days from the admission & post hospitalization	\$2,000 per year, within 30 days from the admission & post hospitalization	\$2,000 per year, within 30 days from the admission & post hospitalization	Paid in full within 60 days from the admission & post hospitalization	Paid in full within 60 days from the admission & post hospitalization
Cancer treatment					
Both inpatient and outpatient	●	●	●	●	●
Treatment for HIV and Aids					
Both inpatient and outpatient. ^(WP) Maximum coverage: 5 years. Waiting period 24 months	\$15,000	\$15,000	\$15,000	\$15,000	\$15,000
Congenital anomalies					
Treatment for congenital anomalies which manifests themselves after the day of entry ^(WP) Waiting period 45 days for children aged 0 to 6 years old	\$10,000	\$10,000	\$10,000	\$20,000	\$20,000
Personal Accident					
Loss of Life, Dismemberment, Loss of Sight, Hearing, Speech or Permanent Disability including driving or riding as a passenger on motorcycles	\$20,000	\$20,000	\$20,000	\$50,000	\$50,000
Outpatient Benefits					
Annual limit per person	■	\$6,000	\$6,000	\$6,000	●
General Practitioner fees	■	●	●	●	●
Specialist fees	■	\$250 per visit	\$250 per visit	\$250 per visit	\$250 per visit
Prescribed Medicine***	■	●	●	●	●
Minor surgery	■	●	●	●	●
Lab test, Xrays, Diagnostic & Pathology test	■	●	●	●	●
Vaccinations	■	\$200	\$200	\$200	Up to \$800
Chiropractic, osteopathy, homeopathy, acupuncture treatment, traditional Chinese medicine***	■	\$250 / 15 sessions per year	\$250 / 15 sessions per year	\$250 / 15 sessions per year	Up to \$300 (20 sessions per year)
Prescribed physiotherapy***	■	10 visits / \$50 per session	10 visits / \$50 per session	10 visits / \$50 per session	Up to \$1,000 / year

** Medical practitioners fees, specialist fees, diagnostic test & prescribed drugs & dressing: pre-operative consultation & diagnostic procedure within 30 or 60 days from the admission & post-hospitalisation

*** By a recognized medical practitioner

^(WP) WAITING PERIODS APPLIES.

The benefits will be available after the end of the waiting period.

● Paid in full ■ Not covered

Benefits	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Prescribed medical aids (hearing aids & orthopedic appliances)	■	\$250 per year	\$250 per year	\$250 per year	Up to \$250 per year
Routine health checkup including screening for early detection (Full health screen, Mammogram, Papanicolaou (PAP) test, Prostate Cancer Screen)	■	\$200 per year	\$200 per year	\$200 per year	Up to \$500 per year

Dental Treatment

Routine treatments (check up, basic)	■	■	\$1,000 per year	\$2,500 per year	\$2,500 per year
Major restorative treatments including orthodontic, prostheses bridges, implants ^(WP) Waiting period 9 months					
Orthodontic for children less than 18 years old ^(WP) Waiting period 24 months					

Maternity and Childbirth Benefits

Normal pregnancy and delivery costs ^(WP) Waiting period 10 months	■	■	\$2,500	\$4,000	\$8,000
Complications of pregnancy and delivery ^(WP) Waiting period 10 months					
Newborn care within 25 days after birth ^(WP) Waiting period 10 months					

Vision care

Including glasses, frames, contact lenses, laser treatment ^(WP) Waiting period 9 months	■	■	\$200 per year	\$500 per year	\$500 per year
Medical Evacuation	Included	Included	Included	Included	Included
Deductibles (Optional)	nil, \$500, \$1,000, \$6,000				

^(WP) WAITING PERIODS APPLIES.

The benefits will be available after the end of the waiting period.

● Paid in full ■ Not covered

Medical Evacuation

Assistance Plus Medical Evacuation

In case of accidents or illnesses of a covered person

Transportation to a regional hospital or nearby country	●	
Direct evacuation to country of nationality / residence if there is no suitable medical assistance nearby	●	
Transportation under medical supervision depending on the seriousness of the condition	●	
Transportation to country of nationality / residence after treatment, with or without hospitalization	●	
Transportation for a family member to visit when hospitalised ≥ 8 days with nobody by his/her bedside	●	Hotel stay up to \$59 per night, and \$586 per year incl. VAT
Shipment of the necessary medication when such medication or equivalent is not available	●	

In case of death encountered of a covered person

Transportation of body to country of nationality / residence including a simple coffin	●	Coffin up to \$777 incl. VAT
Transportation of body to country of nationality / residence after temporary burial	●	
Transportation for a family member to attend the place of temporary or permanent burial	●	
Transportation for a family member to return from the place of temporary or permanent burial	●	
Transportation for other insured members to return to the country of nationality / residence when initial scheduled flight can no longer be used	●	

In case of life-threatening accident, serious illnesses, death encountered by a 1st degree family member

Transportation to travel to the affected person's country of nationality / residence	●	
Transportation to return from the affected person's country of nationality / residence	●	

● Paid in full



FAQ?

Who can apply?

Individuals between 18 and 70 years of age.
Children age 0 – 17 must apply with at least one parent.

All applicants must fill out a medical questionnaire. In some cases, we may request additional medical information.

What is the condition of residence?

Applicants must reside in one or more of the countries listed in the primary area of coverage for at least 185 days per year.

Can I visit a hospital of my choosing?

Yes, you are free to choose any medical provider. However, the establishment must be licensed as a medical or surgical hospital under the laws of the country where it operates.

Do I need to pay upfront for my medical expenses?

No, in most cases if you visit a hospital in our vast direct billing network, we will settle the bill with the hospital directly. In the event that you visit a hospital outside our network, you will need to submit us your claims, which are typically processed within 5 working days.

Are people with pre-existing conditions covered?

Those who are aware of pre-existing medical conditions may apply - but pre-existing conditions may be excluded from coverage.

Can I renew my policy?

Yes, all our plans guarantee renewability regardless of your age or state of health.

What are the payment options & can I pay in installments?

You may pay for your insurance premiums by bank transfer or credit card, quarterly (8%) or semi-annually (4%) at participating banks. Please contact us for more details.

When does my coverage begin?

Your coverage begins on the date you are accepted into our insurance. This means your benefits can apply immediately after we have approved your application and received your payment.

After membership acceptance, waiting periods, as listed in the table of benefits, may be applied if you do not previously hold a similar insurance. This means that, for a period of time, there will be no coverage for particular benefits.

What is the currency of the policy?

The currency of this policy is US Dollar (USD).

Can I add more people to the policy?

Yes. You may add:

1. **Spouse** - must be legally married, in civil partnership or permanently living in a similar relationship with the eligible member.
2. **Dependent children** - including the eligible member's own children, legally adopted children, step-children, foster-children and any other child who depends on the sole support of the eligible member. Eligible dependent children must also live with the eligible member in a customary parent-child relationship.

Conditions of age for all dependent children:

- Children under the age of 18 must be unmarried.
- Children between the age of 18 and 24 must be unmarried, in full time education, and depend solely upon the eligible member's expatriate's support.
- Newborn children must be enrolled within 25 days after the date of birth.

What we don't cover

There are some medical events that we do not cover. We believe they do not diminish the benefits of our plans and by excluding them we can make the plans more affordable for everyone.

*By excluding unnecessary risks (e.g. consequences of alcohol consumption) or expenses which are incurred due to personal preferences (e.g. cosmetic treatment) - medical costs can be minimized; thus ensuring the long term stability and affordability of our plan for all our members.

Excluded profession

Some professions may be excluded such as medical professionals, high risk professions, professional athletes, politicians, soldiers, police, etc.

If you have questions about your professions, please contact us consult@lumahealth.com

For more information, please contact your insurance consultant

