

Individual Medical Table of Benefits			
Plan Name	Platinum	Gold	Silver
Country of Residence	Kuwait		
Territorial Limit	Worldwide	Worldwide Excluding USA & Canada Travel Worldwide	Kuwait, Arab Countries, South East Asia Travel Worldwide
Annual Benefit Limit	KWD 100,000	KWD 50,000	KWD 15,000
Pre-existing / Chronic Conditions – i.e. oncology, Chemotherapy, Radium Therapy,	Covered from day 1		
• Within 24 months limit	KWD 1,000	KWD 500	KWD 250
• After completion 24 consecutive months			
• Member without chronic	100%		
• Member with chronic	Refer to Underwriter		
Inpatient and Daycare			
Accommodation Type	Private Standard Room		
Hospital Accommodation & Services			
• At designated/network	100%		
• At non-designated/non-network provider up to a			
o Within Kuwait	100%		
o Outside Kuwait	KWD 250	KWD 175	KWD 60
Consultant's, Surgeon's & Anesthetist's	100%		
Ambulance followed by hospital admission, up to a	100%		KWD 50
Nursing at Home Primary care services of a registered nurse in the insured person's home immediately after, or instead of, in patient or daycare treatment. Subject to a	KWD 2,750		
Organ Transplant Cost of the surgical procedures in performing an organ transplant for kidney, Liver, Heart, Lung, in respect of the insured person as recipient and	100%		
Parent Accommodation for accompanying an insured child under 16 years of age (up to a	100%		

Hospital Cash Benefit If Inpatient Treatment is received free of charge in a government	KWD 75	KWD 35
Psychiatric Treatment As a result of accident or sickness covered by the policy on reimbursement basis subject to a waiting period of 12 months	KWD 3,500	KWD 2,000
Deviated Nasal Surgery Medically necessary & not for cosmetic reasons & should be informed up to a maximum of	100%	Not covered
Reconstructive Surgeries Medically necessary & not for cosmetic reasons & should be informed up to a maximum of	100%	Not covered
Rehabilitation Medically necessary & not for cosmetic reasons & should be informed up to a maximum of	100%	Not covered
Kidney Failure/Dialysis Up to a maximum of 12 sessions	100%	Not covered
Accidental Damage to Teeth	100%	
Coinsurance	Nil or 10% or 20%	
Outpatient		
Consultations		
• At designated/network	100%	
• At non-designated/non-network provider up to a		
o Within Kuwait	100%	
o Outside Kuwait	KWD 100	KWD 75 KWD 20
Diagnostics (X-ray, MRI, CT-scan, ultra- sound, etc.),		
• At designated/network	100%	
• At non-designated/non-network provider up to a		
Coinsurance	Nil or 10% or 20%	
Pharmaceuticals:		
• Prescribed drugs and medications		
• Prescribed herbal Medication/health supplements but not limited to cough syrup, nasal and mouth Spray, omacor,	100%	
Coinsurance	Nil or 10% or 20%	

Physiotherapy and Ayurveda (Homeopathy &			
Maximum sessions per person per policy year	20 sessions	15 sessions	12 sessions
Additional sessions in case of accident following orthopedic	5 sessions		Not applicable
• At designated/network	100%		
• At non-designated/non-network provider up to a maximum per session			
• Within Kuwait	100%		
• Outside Kuwait	KWD 75	KWD 50	KWD 15
Coinsurance	20%		
Psychiatric Treatment As a result of accident or sickness covered by the policy on reimbursement basis subject to waiting period of 12 months	KWD 1,500	KWD 1,000	KWD 500
Coinsurance	20%		
Deductible	Option 1: Nil		KWD 5
Per outpatient consultation	Option 2: KWD 5		
	Option 3: KWD 10		
Treatment Abroad			
Inpatient/Outpatient Emergency Treatment Abroad During Business Trips and Holidays subject to a maximum of 45 consecutive days per trip	Subject to reasonable and customary charges of country of treatment up to 150% of correspondent network in Kuwait	Subject to reasonable and customary charges of country of treatment up to 125% of correspondent network in Kuwait	Subject to reasonable and customary charges of country of treatment up to 100% of correspondent network in Kuwait
Inpatient/Outpatient Treatment Abroad other than emergency	Subject to reasonable and customary charges of country of treatment up to 100% of correspondent network in Kuwait		
Inpatient/Outpatient Treatment Abroad other than emergency outside Territorial Limit	Subject to reasonable and customary charges of country of treatment up to 100% of correspondent network in Kuwait		
Emergency Evacuation and Repatriation			
Emergency Medical Evacuation	KWD 300,000		
Emergency Medical Repatriation	Included in the above limit		
Repatriation of Mortal Remain	Included in the above limit		
Compassionate Visit	One economy class return airfare		
Return of minor children	One economy class one-way airfare		
Convalescence expenses	KWD 300 subject to a sub-limit of KWD 75 per day		

Additional Benefits			
Lost Luggage or Document	Covered		
Pre-trip Information	Covered		
Hospital Admission Assistance	Covered		
Medical Consultation Evaluation and Referral	Covered		
Medical Monitoring	Covered		
Prescription on Assistance	Covered		
Additional Optional Benefits			
Maternity – limited to 1 pregnancy per year and subject to a 12 months waiting period			
• Normal Delivery	KWD 2,250	KWD 1,500	KWD 1,000
• Complications Cesarean	KWD 3,000	KWD 2,000	KWD 1,500
• Abortion/Miscarriage	KWD 2,000	KWD 1,000	KWD 600
• Outpatient (ante-/postnatal - outpatient deductible option applies and to cover HIV, Hepatitis, 4D congenital anomalies, STD, Genetics, Sexual Transmitted disease	KWD 1,000	KWD 500 with a deductible of KWD 5	KWD 400 with a deductible of KWD 5
Dental subject to 3 months waiting period from joining			
• Consultations, extractions, X-ray, composite fillings, root canal treatment, gum treatment and medication (painkiller, antibiotics) &1	KWD 500	KWD 400	KWD 300
• Crown & Bridges subject to 12 months waiting period from joining date	Sub-limit of 25% of the benefit limit		Not covered
Coinsurance	20%		
Optical			
Vision tests for errors of refraction & one pair of	KWD 300	KWD 200	KWD 100
Frames &/or contact lenses (waiting period 12 month	Sub-limit of 25% of the benefit limit		
Coinsurance	20%		
Vaccination - as approved by MOH and restricted to	100%	Not covered	
Medical Examination once a year (applicable to employees only) Physical Examination, CXR, ECG, FBS, & Lipid Profile	At designated provider by Boubyan Takaful Co.	Not covered	
Prostheses as a result of accident or sickness covered			

<ul style="list-style-type: none"> Plates, nails and K-wires for repair of bone fracture and insertion of stents to coronary artery as a 	100%		
<ul style="list-style-type: none"> Artificial body parts 	KWD 1,000	KWD 500	
Accidental Critical Illness Benefit - refer to note 16	KWD 10,000	KWD 5,000	KWD 2,500
Covered Conditions: Paralysis, Loss of Limbs, Blindness, Coma, Loss of Hearing, Loss of Speech, Severe Burns, Loss of one Limb and Loss			
<ul style="list-style-type: none"> Waiting period 	12 months		
<ul style="list-style-type: none"> Survival period 	30 days		
Supplementary Benefits			
HIV/AIDS or any STD	Not covered		
Allergy An abnormal reaction of the body to a previously encountered allergen introduced by inhalation, injection, or skin contact, often manifested by itchy eyes, runny nose, wheezing, skin rash, or diarrhea excluding of	100%		
Advanced Accidental Death Benefit - refer to note 21	Option 1: KWD	Option 1: KWD 1,000	KWD 1,000
	Option 2: KWD	Option 2: KWD 2,500	
Non-Designated Provider	20%		
Medical network			
<ul style="list-style-type: none"> Kuwait 	Comprehensive network of	General network of GlobeMed	Restricted network of GlobeMed
<ul style="list-style-type: none"> Allowing free access at designated provider subject to prior approval (applicable to IP & OP 	GCC, Jordan, Lebanon		Kuwait only
Hormone Therapy in respect of pre & post post-	KWD 250		Not covered
Vitamins when prescribed for a severe deficiency	100%		
Alternative therapy As a result of an accident covered by the policy	KWD 200 subject to KWD 5 deductible		Not covered

Terms and Conditions

1. Non-Designated provider deductible is applicable for any treatment outside the designated providers, outpatient and inpatient treatment abroad. This deductible will not be applied to benefits with sub limits and additional benefits other than maternity (e.g. IP Non-Designated/Non-network Provider accommodations and OP Physiotherapy, Psychiatric Treatment, Hormone Therapy, Acupuncture Therapy, Medical Examination, Artificial Limits and Consultation) in addition to emergency treatment abroad. This will be applicable on any diagnostics procedures taken within the network if the initial treatment takes place outside the designated network. This deductible is applied on the reasonable and customary charges of Country of Treatment (depending on the territorial limits of the plan) for any claim outside the designated network and/or outside Country of Residence.
2. Principles, spouses, and unmarried & unemployed children (up to 25 years old) may be covered. Parents and siblings are not covered. For families with Maternity benefits, husband and wife or 2 children has to be covered under the same policy.
3. Pre-existing and chronic conditions are covered from day 1 during the first 24 months unless otherwise specified and excluded by Boubyan. At 1st & 2nd anniversary of the policy, Boubyan has the right to revise their underwriting decision based on the member actual claims records. Thereafter, the policy will fall under a guaranteed renewal following their 1st & 2nd underwriting terms and conditions, change in age bracket and consistent annual inflation irrespective of the loss ratio and development of any other chronic conditions.
This is subject that the policy at each anniversary has not lapsed for more than 30 days otherwise it will be subject to new underwriting
4. No premium refunds for mid-term deletions in case claims have been incurred.
5. Premium Payment must be received upon cover's confirmation unless otherwise approved and agreed by Boubyan
6. The policyholder or the insurance company may terminate the Policy at any time and for any reason, giving a 30-day notice to the other party.
7. Pre-authorization is required towards the following; in-patient treatment outside the network (Surgical Procedures above KWD 50), outpatient treatment procedures outside the network MRI/CT/Endoscopies, Medication more than 1 month, Hepatitis, Physiotherapy, Hormone Therapy, Acupuncture Therapy, Vaccination, Medical Examination and Artificial Limits & Additional Benefits) and treatment outside the country of residence other than emergency.
8. Lost card replacement/correction KD 3/-
9. A free follow-up without the outpatient deductible will only be applicable subject that the treatment is at the same provider of the initial consultation and condition from first consultation date based on the free follow-directory.
10. Kuwait Reasonable and Customary Charges: The charges of medical care are based on the general level or average cost of Kuwait Network Medical Providers; this is applicable to all treatment outside the designated providers.
11. Any emergency treatment abroad outside the territorial limits will be subject to the terms and conditions as per the above schedule of benefits
12. Client reimbursement claims submission period 30days from the treatment date within Kuwait and 60 days outside Kuwait.

13. Hormone Therapy is restricted to client reimbursement.
14. Medical Evacuation and Repatriation while traveling abroad: The transportation costs of an insured person to the nearest center where adequate medical facilities are available. Payment of this benefit, including treatment incurred, will be subject to the insured person suffering from a medical emergency; (a) that is critical, and, (b) for which, in our opinion, adequate treatment is not available in the insured person's location and, (c) not a pre-existing condition. The compassionate visit return of minor children and convalescence expenses services are subject to a Limit of Indemnity of KWD 3,000 for any insured for any one event in addition to the emergency medical evacuation, emergency medical repatriation and repatriation of mortal remains benefits. In the event of any IP treatment is not available in Kuwait according to the medical opinion of Afro-Asia doctors and subject to submission of a certificate from the medical commission of Kuwait, Medical Evacuation to the nearest location where adequate medical facilities are available will be arranged.
15. General Exclusions: Elective surgery, cosmetic treatment, circumcision, birth defects, infertility treatment, menopause, prostheses (other than plates, nails and K-wires for repair of bone fracture and insertion of Stents to coronary artery as a treatment of Ischemic heart disease) mental illness, self-inflicted injury.
16. Advanced Accidental Critical Illness benefit is applicable to members from age 18 to 65. In the first 24 months of cover, only Accidental Critical Illness will be covered subject to all conditions set out in the policy being fulfilled. After a period of 24 months, the policy is reassessed and may not be offered Regular Critical Illness or only offered under special terms and conditions. There can be no more than one payment of sum insured for each insured under this cover. The following exclusions shall be applicable:
 - Flying in any form of aircraft, unless the insured is traveling as fare-paying passengers in a civilian aircraft which is certified for transporting passengers.
 - The insured actively participates in war, rebellion, anarchy, sabotage and the intensity events defined as a crime or actively participates in illegal events causing illnesses/accidents which are covered by the policy
 - Chronic alcohol abuse or the use of drugs (excluding at doctor's orders)
 - Intentionally self-inflicted injury, regardless of whether or not the insured is sound of mind and committing suicide
 - Boxing, wrestling, or any kind of physical combat, skiing (water or on snow), gliding, parachuting, bungee jumping, mountaineering, professional sports activities, diving using equipment.
 - Illnesses or conditions which are mutations or variations of AIDS, HTVL and HIV
 - Injury from non-conventional weapons (such as atomic, chemical or biological weapons) or from conventional ballistic missiles.
 - Nuclear fusion, nuclear fission, nuclear waste, where the illnesses and injuries stem from radioactive or ionizing radiation
 - Illegal acts by the policy beneficiary that lead to an accidental critical illness of the insured
 - Pre-existing conditions
17. Accidental Damage to Teeth: In case of accidental injury, where damage has occurred to sound natural teeth. Services are covered for initial pain relief & for any treatment necessary to preserve the dental structure for future permanent restoration for damages done to sound natural teeth.

18. Treatment within or outside the network for contact lens will be covered subject to:
- Monthly quantities (i.e. daily/monthly/weekly lens) only, unless it is an annual lens which are bought once a year
 - First prescription is to be attached with an error refraction report
 - Colored or cosmetic lens are not part covered
 - Any members prescribing for lens (daily, monthly, weekly or annual) will not be entitled for the purchase of spectacles lens or frames.
 - All standard policy exclusion relating complication of contact lens will be maintained & unaltered.
19. Second Opinion Medical services: is provided for participants and such services is available when;
- A Participant's medical condition is undiagnosed by a treating physician;
 - A Participant seeks an additional medical opinion following an original diagnosis;
 - The determination of the most appropriate course of medical treatment is required based on a current diagnosis. A Participant seeking a medical second opinion must contact GlobeMed/Boubyan/AAAL's operation center
 - All Participant are responsible for gathering, obtaining, and submitting to GlobeMed/Boubyan/AAAL all required medical reports, charts, data, and medical history pertaining to the Participant's condition and responding to follow up requests for additional information.
 - All information provided to GlobeMed/Boubyan/AAAL must be legible and produced in the required format. The medical review will be undertaken by a physician licensed to practice medicine in the United States of America and within a practice discipline that relates to the condition/diagnosis. GlobeMed/Boubyan /AAAL will send the medical second opinion to the Participant in electronic format and such opinion will be reached only after all required medical history, data, reports, charts are properly submitted for consideration and review. The service related solely to the provision of a written medical opinion and it does not include personal visits or follow up discussions for the implementation of course of treatment. If a Participant seeks further involvement from the physician rendering the opinion or seeks to converse with or visit the physician, such must be arranged on a fee for service basis with GlobeMed/Boubyan /AAAL facilitating such arrangements. All opinions rendered by the physician are the opinions of the physician who are not under the control or employment of GlobeMed/Boubyan /AAAL and GlobeMed/Boubyan /AAAL is not responsible or liable for the content of such opinions.
20. The policy holder shall be liable for any liability arising to Boubyan due to misuse of the cards that is not returned back by the policyholder against the requirement of clause 3.6 of Group Medical Policy Wording.
21. Advanced Accidental Death Benefit is applicable to members from age 18 to 65. In the first 24 months of cover, only Accidental Death will be covered. After a period of 24 months, the policy is reassessed and may not be offered Death (any cause) or only offered under special terms and conditions. The following exclusion shall be applicable.
- War, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or not), civil war, military rising, insurrection, rebellion, revolution, military or usurped power, martial law, acts of terrorism, mutiny or riot or civil commotion assuming the proportions of or amounting to popular rising.
 - AIDS if it was contracted prior the insurance cover with Boubyan.
 - Atomic, Biological, and Chemical contamination.
 - Criminal Acts committed by the insured
 - Suicide within the first 12 months

22. These terms, conditions and limitations are based on the information provided and communicated. It is duty of client to disclose all material facts and it is agreed that in the event of any miss-presentation or miss-declaration and discovered either at the point of claim or during period of cover by Boubyan, we will have the right terminate the policy, decline the claim or charge additional premium. The duty of disclosure is re-imposed after inception of cover when there are changes or variation in cover and when the policy is renewed or extended. In addition, changes which substantially increase the risk, or relate to compliance with a warranty or condition in the policy must be notified at once.
23. Member age will have to be calculated at the policy inception date and will not consider the changes of the age during the policy year i.e. will reflected at the next renewal only.
24. Any waiting period will be considered and counted from the member join date and not from the policy inception date.
25. Only newborn baby or newly married spouse will be added during the policy year, otherwise the additional will be effective at the renewal date. For any addition, they will follow the terms and conditions of any new policy and not of their existing policyholder i.e. any waiting period will be considered and counted from the member join date and not from the policy inception date.
26. The determination of the most appropriate course of medical treatment is required based on a current diagnosis. A Participant seeking a medical second opinion must contact Boubyan/AAAL's operation center.
27. The table/schedule of benefits (i.e. limits, additional benefits, deductibles, co-insurance, special extensions, etc.) supersedes the policy wording. All other terms pertaining to policy and claims administration, terms and conditions etc. follow the standard policy wording.
28. It is the duty of the applicant to disclose all material facts and it is agreed that in the event of any mis presentation or misdeclaration and discovered either at the point of claim or during period of cover by the company, the company will have the right to terminate the policy and policyholder shall be liable to pay all incurred claims, decline the claim or charge additional premium.
29. Our terms, conditions and Gross Premiums (earned & unearned) are net of Value Added Tax (V.A.T) or any form of government taxes. If such duties are introduced, premium will be adjusted accordingly.
30. Refer to policy wording for the comprehensive terms and conditions.