



Policyholder:		#NAME?
Below limit options are per person in JD		
Plan Name	FAP Classic	
Annual Aggregate Limit Overarching total limit for all benefits and sub-limits.	JOD 1,000,000	
Per Confinement Limit One Period of Confinement - means a Hospital confinement due to the same Illness, or Disease or Sickness unless separated by at least 45 Days	Not Applicable	
Geographical Scope of Coverage for Elective	Jordan	
Geographical Scope of Coverage for Life-threatening Emergency Treatment	Worldwide	
Coverage Criteria for Treatment outside Jordan	(refer to reimbursment section)	
Applicable Network	Premier	
In-Patient Benefit		
Coverage is up to the relevant Annual Benefit Limit per person/per policy year with pre-approval		
Hospitalization Class	Class A	
IP Co-pay / Deductible	No Copay / NIL JD	
Cancer Treatment	Covered	
Hospital Accommodation and related Services	Covered	
Intensive care unit and coronary artery disease treatment	Covered	
Consultant's, Surgeon's and Anaesthetist's Fees	Covered	
Various therapies including physiotherapy, chemotherapy, radiation therapy etc	Covered	
Intra-venous infusions, injections, etc	Covered	
Recipient Organ transplantation service, excluding any charges related to Donor	Covered	
Use of hospital medical equipment (e.g. heart and lung support systems etc.)	Covered	
Ambulance Services (in Medical Emergency only and if followed by admission)	Covered	
Day Care Treatment	Covered	
Companion Room & Board expenses for Beneficiary below 13 years of age The cost of accommodation of a person accompanying a beneficiary below 13 years of age in the same room in cases of medical necessity at the recommendation of the treating doctor and with prior approval	Covered	
Diagnostic and laboratory tests, x-rays, electrocardiograms, scans, etc. (only related to the original cause of hospitalisation)	Covered	
Private nursing care, if medically necessary	Not Covered	
Waiting Periods		
Waiting periods are applicable only for fresh members		
Hernia	6 months	
Haemorrhoids , Anal Fissures and Fistula	6 months	
Tonsils Adenoids and Sinusitis	6 months	
Septal Deviation	6 months	
Maternity	12 Months	
Varicoceles, Varicose Veins, Hydroceles	12 Months	
Uterine Fibroids, Hysterectomy, Endometriosis	12 months	
Knee problems	12 months	
Back problems	12 months	
Chronic related cases medications (outpatient)	24 months	



Out-Patient Benefit		
Applicable number of SOAPS	10 SOAP	
Physician Consultation (PC)	Covered with 2 JD deductible per invoice	
Diagnostics and Laboratory Tests (DT)	Covered with 20% co-pay per invoice	
Pharmaceuticals (PH)	Covered with 20% co-pay per invoice	
Physiotherapy (PY) - Require pre-authorization	Covered with 20% co-pay per invoice	
<i>* Each SOAP caters for the three benefits: PC, PH, DT per out-hospital visit without monetary limitations. PY is limited to 30 sessions per year.</i>		
<i>* For eligible chronic cases, a special outpatient form will be issued to cover medications related to chronic diseases.</i>		
<i>* For outpatient maternity visits, additional personalized SOAPS will be issued up to a maximum of 9 taking into consideration pregnancy duration and policy expiry date. Vitamins related to pregnancy are covered.</i>		
Additional Benefits		
Maternity Benefit	Covered	
Annual limit	JD Unlimited	
Vaccination	Covered	
Vaccination covered as per MOH schedule (for children up to 6 years)	- Covered both on free Access & reimbursement basis	
	- Reimbursements claims are settled at 100% of actual - Covered cost subject to not exceeding 100% of applicable Network rates	
CLAIMS SETTLEMENT TERMS - before deductible / co-payment (what is Paid by the Insurer)		
In-patient - Elective Treatment	Free Access (Network)	100% Amount approved by MedNet Jordan
	Reimbursement (Non Network)	80% of Mednet Jordan tariff rates
	Reimbursement Out-side Jordan	Reimbursement basis subject to prior approval (80% of Mednet Jordan tariff rates) FAP Superior - Reimbursement at a maximum of 200% of Jordan network benchmark rates or actual rates whichever is less.
Out-Patient - Elective Treatment	Free Access (Network)	100% Amount approved by MedNet Jordan
	Reimbursement (Non Network)	Pharmacy : 70% Diagnostic test : 70% Physician Consultation : 100% (Max up to JD 10 per visit) Physiotherapy : 50% (Max up to JD 5 per session)
	Reimbursement Out-side Jordan	Reimbursement basis subject to submission of claims within 60 days from treatment date (As per Mednet Jordan tariff rates and applicable Outside Network Coinsurance) FAP Superior - Reimbursement at a maximum of 200% of Jordan network benchmark rates or actual rates whichever is less.
Emergency Treatment	Free Access (Network)	100% Amount approved by MedNet Jordan
	Reimbursement (Non Network)	100% of amount approved by MedNet Jordan
	Reimbursement Out-side Jordan	Reimbursement basis subject to submission of claims within 60 days from treatment date (As per Mednet Jordan tariff rates and applicable Outside Network Coinsurance) FAP Superior - Reimbursement at a maximum of 200% of Jordan network benchmark rates or actual rates whichever is less.

Policy Premium			
		Total price for all applicants	JD 315.51
S. No.	Name	Date of Birth	Gross Premium
1		07/Nov/1994	300.51
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
This quote is valid only for members residing in Jordan			
This quotation is valid for 30 days from the date of issuance.			

31/07/2022
Issuance Date

Applicant Signature