



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)	<ul style="list-style-type: none"> <li>- Covered both on free Access &amp; reimbursement basis</li> <li>- Reimbursements claims are settled at 100% of actual</li> <li>- Covered cost subject to not exceeding 100% of applicable Network rates</li> </ul>

### 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 698.61
S. No.	Name	Date of Birth	Gross Premium
1		03/Oct/1995	300.51
2		20/Jun/1999	363.10
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.			

31/07/2023  
Issuance Date

Applicant Signature