

Plan options

Core package (In-patient only)

Serious Matters

Daily Matters

Optics

Dental

Wellness Matters

Your plan								
RemoHealth Core	RemoHealth Standard	RemoHealth Plus	RemoHealth Premium		Paid up to your annual limit of USD 1,000,000			
✓	✓	✓	✓		All in-patient costs, Cancer treatment, Operating theatre charges and intensive care, Transplants (surgery only), Parent accommodation, Home nursing after in-patient treatment, Ground ambulance, Assistance cover, Local air ambulance, Compassionate visit and living allowance, Specialist fees whilst in hospital, Kidney failure and treatment, Advanced imaging, Psychiatric treatments, "Pathology, X-rays, diagnostic tests			
					Paid up to your annual limit of USD 5,000,000			
	✓	✓	✓		All in-patient costs, Cancer treatment, Operating theatre charges and intensive care, Transplants (surgery only), Parent accommodation, Home nursing after in-patient treatment, Ground ambulance, Assistance cover, Local air ambulance, Compassionate visit and living allowance, Specialist fees whilst in hospital, Kidney failure and treatment, Advanced imaging, Psychiatric treatments, "Pathology, X-rays, diagnostic tests, accident-related dental treatment, hospice and palliative care.			
					Paid up to your annual limit of USD 5,000,000	Limited to USD 4,000 per prosthetic device service per year	USD 2,000 per benefit	USD 20,000
					Specialist fees, General Medical Practitioner (GP) fees, Advanced imaging (pre-authorisation required	Prosthetic devices required at the time of treatment,	All medicine and surgical dressings are covered	HIV/AIDS drug therapy
					USD 400			
		✓	✓		Eye test (every year), 75% for non-cosmetic spectacles and contact lenses, Frames (75%) and lenses (every 2 years),			
					USD 4200			
		✓	✓		Preventative (100%), Routine (80%), *Major restorative orthodontic and periodontal (50%)			
			✓		Complementary medicine practitioners, Child wellness, Physiotherapists, Chiropractors, Wellness & full health screening, Vaccinations			

Core package (In-patient only)

Your core benefits are the compulsory benefits and services that form the foundation of your health insurance plan. These benefits are what really matter most in any health insurance plan, covering everything from key hospital procedures, surgeries and treatments (in- patient benefits) to medical evacuations, tests, and home nursing

Paid up to your annual limit of USD 1,000,000

- ✓ All in-patient costs
- ✓ Cancer treatment
- ✓ Operating theatre charges and intensive care
- ✓ Transplants — (surgery only)
- ✓ Parent accommodation
- ✓ Home nursing after in-patient treatment
- ✓ Ground ambulance
- ✓ Assistance cover
- ✓ Local air ambulance
- ✓ Compassionate visit and living allowance
- ✓ Specialist fees — whilst in hospital
- ✓ Kidney failure and treatment
- ✓ Advanced imaging
- ✓ Psychiatric treatment
- ✓ Pathology, X-rays, diagnostic tests and physiotherapy services — while you're an admitted patient in hospital
- ✓ Outside area of cover — Acute conditions are covered for 30 calendar days per trip
- ✓ Evacuation — We cover the transport costs for in-patient treatment or day case treatment, as well as for evacuation when the treatment is not available locally
- ✓ Return journey — We will cover the cost of an economy class air ticket by the most direct route available. In the event of your death while you are away from home, we will pay reasonable costs for transportation only of your body

Serious matters

Your core benefits are the compulsory benefits and services that form the foundation of your health insurance plan. These benefits are what really matter most in any health insurance plan, covering everything from key hospital procedures, surgeries and treatments (in- patient benefits) to medical evacuations, tests, and home nursing

Paid up to your annual limit USD 5 000 000

- ✓ All in-patient costs
- ✓ Cancer treatment
- ✓ Transplants — (surgery only)
- ✓ Parent accommodation
- ✓ Specialist fees — whilst in hospital
- ✓ Nursing care — medicine, and surgical dressings
- ✓ Hospice and palliative care — up to USD 40 000 following the diagnosis that your condition is terminal
- ✓ Parent accommodation
- ✓ Kidney failure and treatment
- ✓ Operating theatre charges — and intensive care
- ✓ Home nursing after in-patient treatment
- ✓ Physicians’ and Specialist’ fees — whilst in hospital
- ✓ Surgical operations — including pre-and post-operative care
- ✓ In-patient rehabilitation
- ✓ Psychiatric treatment
- ✓ Pathology
- ✓ Evacuation — We cover the transport costs for in-patient treatment or day case treatment, as well as for evacuation when the treatment is not available locally
- ✓ Ground ambulance
- ✓ Prostheses, implants and appliances
- ✓ Assistance cover
- ✓ Local air ambulance
- ✓ Outside area of cover — Acute conditions are covered for 30 calendar days per trip
- ✓ Compassionate visit and living allowance
- ✓ Return journey — We will cover the cost of an economy class air ticket by the most direct route available. In the event of your death while you are away from home, we will pay reasonable costs for transportation only of your body
- ✓ Pathology, X-rays, diagnostic tests and physiotherapy services — while you’re an admitted patient in hospital
- ✓ Accident-related dental treatment

Daily Matters

We understand that sometimes ‘life happens’, which is why we’ve developed essential day-to-day benefits for all of those regular services (such as GP and specialist visits) and weird and wonderful tests (such as blood tests, X-rays and ECGs) that you may need. Accidents do happen from time to time, which is why these benefits cover accident-related dental treatment and advancing imaging (such as MRI, CT and PET scans).

All Daily Matters benefits are on a reimbursement basis where members pay upfront for treatment and services and claim back from the Umatter policy.

Paid in full up to overall limit

- ✓ Specialist’ fees

✓ General Medical Practitioner (GP) fees
- ✓ Basic pathology

✓ Advanced imaging — (pre-authorisations required)

USD 20 000

- ✓ HIV/AIDS drug therapy

Limited to USD 4 000 per prosthetic device per year

- ✓ Prosthetic devices required at the time of treatment

Family Matters

What matters more than your family? If you’re thinking about starting a family or adding a new little member to your family, then our optional family care benefits are for you. They cover everything from prenatal care and maternity cover to childbirth benefits, and post-natal and newborn care. A 10-month (ten) waiting period is applicable to this benefit. Life threatening pregnancy and childbirth complications which are as a direct result of pregnancy or childbirth are covered as part of Serious Matters.

In-Patient treatment is subject to pre-authorisation whilst all out-patient treatment is on a reimbursement basis where members pay upfront for treatment and services and claim back from the Umatter policy.

USD 1 300

- ✓ Childbirth at home or birthing centre

USD 10 000

- ✓ Infertility treatment — *18-month (eighteen) moratorium wherafter benefits are reimbursable at 50%.

USD 12 250

- ✓ Maternity cover — elective caesarean and routine childbirth
- ✓ Prenatal care

USD 25 500

- ✓ Medically essential caesarean section

USD 100 000

- ✓ Newborn care

Opti-Denti Matters

It matters to us that you’re seeing a bright future and smiling about what lies ahead.

This section offers optional dental treatment and optical benefits, including preventative tests and checks (such as eye tests and dental check-ups), as well as routine dental maintenance and new spectacles and contact lenses.

All Opti-Denti Matters benefits are on a reimbursement basis where members pay upfront for treatment and services and claim back from the Umatter policy.

USD 400 - Optical

- ✓ **Eye test** — every year
- ✓ **75% for non-cosmetic spectacles and contact lenses**
- ✓ **The percentages (%) represent the reimbursement rates.**
- ✓ **Frames (75%) and lenses (every 2 years)**

USD 4200 - Dental treatment

- ✓ **Preventative (100%)**
- ✓ **Routine (80%)**
- ✓ **Major restorative, orthodontic and periodontal (50%)**
A 6-month (six) waiting period is applicable to this benefit.

Wellness Matters

We believe that everyone should take their health matters into their own hands and adopt a holistic approach to their overall well-being. A healthy body needs a healthy mind to guide it, which is why our optional wellness benefits are of our most popular services. These optional extras include cover for full wellness screenings and preventative tests, as well as treatment by psychologists and complementary medicine practitioners.

All Wellness Matters benefits are on a reimbursement basis where members pay upfront for treatment and services and claim back from the Umatter policy.

40 visits

- ✓ **Complementary medicine practitioners** For necessary medical treatment, we pay for supplementary treatment provided by acupuncturists, chiropractors, homeopaths, osteopaths and traditional Chinese medicine, physiotherapists, occupational therapy, orthoptists, dieticians, speech therapists and ergotherapy

USD 2 000

- ✓ **Wellness & Full health screening**

USD 1 000

- ✓ **Child wellness**

USD 350

- ✓ **Vaccinations**

Paid in full up to the overall limit

- ✓ **Psychology**