Group Health Insurance Plan for 5-50 employees

Offer great employee benefits for your employees' healthcare

- O Same premium rate for all ages and genders.
- O High coverage with affordable premium.
- O Provide the coverage up to aged 65 years.
- O Ease your burden of medical expenses.
- Worry free with Allianz Ayudhya extensive medical network of over 490 hospitals and clinics nationwide.
- O No need to purchase with life insurance.

Remark : Acceptance is subject to underwriting assessment.

Examples of Exclusions

Examples of exclusions for health insurance policy, which Allianz Ayudhya shall reserve the rights not to pay out benefits, are described below.

- Pre-existing conditions, congenital abnormalities, growth development abnormalities, and genetic disorders.
- O Any treatment of acne, freckles, dandruff, hair loss, and weight reduction and weight gain.
- O Pregnancy, miscarriage, childbirth, sterilization and contraception.
- O AIDS, related or sexually transmitted diseases (STD).
- Health check ups, convalescent care including rest cures and rehabilitation, which is not according to the medical necessity and medical standard.
- O Eye examination and eyesight corrective surgery including lasik.
- O Any medical treatment that is not conventional treatment, including alternative treatment.
- Suicide or suicide attempt, self inflicted injury or attempt of self-inflicted injury including consuming, drinking, or injection of toxic substance into the body or drug overdose.

Remarks

- This document is not part of the insurance policy. Please refer to the general terms, conditions and exclusions in the health insurance policy.
- Policyholders could read general terms and conditions and exclusions in the health insurance policy.
- Policyholders should understand general terms and conditions before purchasing.
- Employee, We Care is the marketing name of Health and Accident for General Group and Organizational Group policy.



| Name and surname of applicant | |
|-------------------------------|------|
| Date/Month/Year | Time |
| Payment channel | |
| Mode of payment | |
| Amount of premium | |

| For more details of our health insurance plans, please contact | | | | | | |
|--|---------------------|--|--|--|--|--|
| Name Ronachai _{Surname} | Chumdee | | | | | |
| License no. 620404 | | | | | | |
| Tel 086-338-5006 Email | r.chumdee@gmail.com | | | | | |
| | | | | | | |

Whenever coverage provided by any insurance policy would be in violation of any United States (US), United Nations (UN) or European Union (EU) economic or trade sanctions, such coverage shall be null and void. For example, we can not pay for healthcare services provided in a country under sanction by the United States unlesspermitted under a written Office of Foreign Assets Control (OFAC) license. Learn more on the US Treasury's website at: www.treasury.gov/resource-center/sanctions.

Allianz Ayudhya General Insurance Public Company Limited. 898 Ploenchit Tower, Ploenchit Road, Khwang Lumpini, Khet Pathumwan, Bangkok 10330 Tel. 0 2677 0000 Fax : 0 2230 6500

Allianz (11) AYUDHYA



Employee, We Care Plan

Group Health Insurance for 5-50 employees



S-MK-08E Rev. 07

Underwriting Conditions

- Eligible for an organization having 5-50 employees and employees' average age not exceeding 48 years.
- Eligible for full-time employees aged 15 to 60 years with Occupation Class 1-2.
- All employees must apply for the insurance plan. The employees with the same position must apply for the same insurance plan. Allianz Ayudhya reserves the right to underwrite each individual.
- Spouse and children, who are eligible for insurance benefits, must also apply for the same or lower insurance plan as employees' plans.
- In case of selecting the Basic Coverage for more than 1 plan, the following plan must not exceed 3 levels of the previous plan.
- The difference between "Outpatient Treatment Benefit" plan and "Basic Coverage" plan must not exceed 3 levels of the plan
- All female employees and female spouse (in case that the coverage is extended to employees' spouse) must apply for the Optional Benefit : "Maternity Benefit"
- Allianz Ayudhya reserves the right not to upgrade or downgrade the plan upon request during the policy year.
- In case the covered person is enrolled or resigned during the policy

year, the dental benefit must be on a pro rata basis.

Remarks

- * Per Disability or Single Confinement means the case when the Covered Person is confined to a Hospital or Medical Center as an Inpatient at any time, which include the confinements for 2 times or more due to the same causes, disease, or complication, with intervals of not more than 90 days from the most recent discharge from a Hospital or Medical Center.
- ** Personal Accident insurance (Or.Bor.2) provides benefits in case of death, dismemberment, loss of sight, loss of hearing, loss of speech, and permanent disability (50% of the sum assured for personal accident coverage while riding a motorcycle whether as a rider or passenger).
- *** HB Incentive shall be payable to member who is hospitalized and do not reimburse for any medical expenses from any Allianz Ayudhya insurance policies (Individual and/or group).
- Costs associated with tests such as PET Scan, MRI, CT Scan, Echocardiogram or Exercise Stress Test (EST) will normally be paid under the outpatient benefits; unless such tests have been prior approved by Allianz Ayudhya, they will be paid under the Inpatient Hospitalization Benefits: Hospital General Expenses.

Annual Premium per Person (THB) (including tax and stamp duty

| Optional Benefits | For Every Organization (THB) |
|-------------------|------------------------------|
| Dental 3000 | 1,930 |
| Dental 5000 | 3,217 |
| PA 200 | 390 |
| PA 400 | 780 |

Table of Benefits

| Description | Benefit (THB) | | | | | | | | |
|--|--|---------|---------|---------|---------|---------|---------|--|--|
| Basic Coverage | Plan L1 | Plan 1 | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | | |
| npatient Hospitalization Benefits per Disability* | | | | - | , | , | | | |
| Room and Board including Fees for Nursing Services | | | | | | | | | |
| Non-intensive Care Room (maximum payable per day) | 800 | 1,500 | 2,000 | 2,500 | 3,000 | 4,000 | 5,000 | | |
| Intensive Care Unit (ICU) (maximum payable per day and maximum 15 days per disability) | 1,600 | 3,000 | 4,000 | 5,000 | 6,000 | 8,000 | 10,000 | | |
| Hospital General Expenses | | | ,, | | | , | | | |
| Hospital General Expenses | 10,000 | 20,000 | 30,000 | 40,000 | 50,000 | 60,000 | 80,000 | | |
| Emergency Accidental Outpatient Treatment (first visit within 24 hours after an accident and follow-up treatment within 15 days), included in Hospital General Expenses | 4,000 | 5,000 | 6,000 | 7,000 | 8,000 | 9,000 | 12,000 | | |
| Surgery's Consultation Fees in case of Non-surgery, included in Hospital General Expenses | 3,000 | 4,000 | 5,000 | 6,000 | 7,000 | 8,000 | 9,500 | | |
| Ambulance in case of an Emergency, included in Hospital General Expenses | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | 1,000 | | |
| Surgical Treatment | | | | | | | | | |
| Surgeon's Fees (per Surgical Schedule) | 25,000 | 35,000 | 45,000 | 55,000 | 65,000 | 70,000 | 80,000 | | |
| Surgery's Consultation Fees in case of Surgery (per Surgical Schedule), included in Surgeon's fees | 3,000 | 4,000 | 5,000 | 6,000 | 7,000 | 8,000 | 9,500 | | |
| Physician's Hospital Visit Fee (maximum payable per day) | 500 | 700 | 900 | 1,200 | 1,300 | 1,500 | 2,000 | | |
| Personal Accident Insurance | | | , | | | | | | |
| Personal Accident Insurance (Or.Bor.2)** | 100,000 | 100,000 | 200,000 | 300,000 | 400,000 | 500,000 | 600,000 | | |
| HB Incentive*** | 800 | 1,500 | 2,000 | 2,500 | 3,000 | 4,000 | 5,000 | | |
| Optional Benef | its | | | | _ | | | | |
| Major Medical Treatment Benefit | Plan L1 | Plan 1 | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | | |
| Major Medical Benefit pays 80% of medical expense in excess of Basic Coverage (excluding Room and Board and Fees for Nursing Services). The total benefit payout per Disability* of Major Medical and Basic Coverage shall not be more than the maximum benefit payable by plan. | 50,000 | 100,000 | 200,000 | 300,000 | 400,000 | 500,000 | 600,000 | | |
| Outpatient Treatment Benefit | Plan L1 | Plan 1 | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | | |
| Outpatient Treatment Benefit (maximum 1 visit per day and 30 visits per year) | 300 | 500 | 800 | 1,000 | 1,500 | 2,000 | 2,500 | | |
| Dental Treatment Benefit (maximum payable per year) | | | | | | | | | |
| Dental scaling, dental filling, dental extraction, dental examination and dental x-ray | Dental 3000 : maximum 3,000 THB per year Dental 5000 : maximum 5,000 THB per year | | | | | | | | |
| Maternity Benefit (for the expenses related to pregnancy and childbirth, excluding the expenses related to a child) | | | | | | | | | |
| Benefits for normal delivery, assisted delivery or intentional cesarean delivery 40,000 THB/ Ectopic Pregnancy or Emergency Cesarean Section 80,000 THB / Miscarriage 20,000 THB | | | | | | | | | |
| Additional Personal Accident Insurance | | | | | - | | | | |
| | | | | | | | | | |

Annual Premium per Person (THB) (including tax and stamp duty)

Personal Accident Insurance (Or.Bor.2)**

| Any organization with 5-19 employees | Plan L1 | Plan 1 | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | |
|--|---------|--------|--------|--------|--------|--------|--------|--|
| Basic Coverage (IPD and PA) | 2,210 | 3,426 | 4,968 | 6,557 | 8,056 | 9,743 | 12,302 | |
| Optional Benefit "Major Medical Treatment" | 1,143 | 1,534 | 1,900 | 2,173 | 2,433 | 2,665 | 3,345 | |
| Optional Benefit "Outpatient Treatment" | 1,445 | 2,408 | 3,853 | 4,816 | 7,224 | 9,633 | 12,041 | |
| Optional Benefit "Maternity Benefit" | 8,930 | | | | | | | |
| Any organization with 20-50 employees | Plan L1 | Plan 1 | Plan 2 | Plan 3 | Plan 4 | Plan 5 | Plan 6 | |
| Basic Coverage (IPD and PA) | 1,922 | 2,979 | 4,319 | 5,700 | 7,004 | 8,472 | 10,697 | |
| Optional Benefit "Major Medical Treatment" | 994 | 1,334 | 1,652 | 1,890 | 2,115 | 2,317 | 2,909 | |
| Optional Benefit "Outpatient Treatment" | 1,257 | 2,095 | 3,351 | 4,189 | 6,284 | 8,380 | 10,475 | |
| Optional Benefit "Maternity Benefit" | 7,765 | | | | | | | |

PA 200 : 200,000 THB of sum assured / PA 400 : 400,000 THB of sum assured