



CURE - IN

Individual Medical Insurance
Quotation In Hospital



القدس للتأمين
JERUSALEM INSURANCE

Individual Medical Insurance Quotation In Hospital "CURE - IN"

Since Jerusalem Insurance Co., is keen on providing multi-insurance options and programmes that correspond to your needs and requirements, we are pleased to provide you with a medical insurance program for treatments inside of the hospital which comprises the following insurance advantages and coverages:

- a) **Geographical Scope:** The Hashemite Kingdom of Jordan and abroad.
- b) **Granted coverage:** in hospital only.
- c) **Service access:** through our electronic insurance card and without the need for paper forms.
- d) **Insurance class:** special, first and second.
- e) **Insurance period:** one year commencing from the date of the agreement between both parties.
- f) **Covered individuals:** all individuals as per the family book.

Medical Network

- a) Access to medical services through the largest medical network in the Hashemite Kingdom of Jordan.
- b) Geographical diversity and distribution of the medical network within the Hashemite Kingdom of Jordan.
- c) The availability of more than 60 approved hospitals throughout the Hashemite Kingdom of Jordan.
- d) Having the best and most skilled physicians within our medical network.
- e) Having multiple offices with company representatives in many of our major accredited hospitals.

Medical Consents

- a) The availability of more than 20 trained and qualified physicians who are very well versed in insurance matters.
- b) Provision of the service 24/7 throughout the year.
- c) Provision of free medical enquiries and consultancy service through NatHealth.

Issuance Services

- a) Issuance of all types of insurance policies within 48 working hours after completion of all requirements.
- b) E-medical insurance card approved and accredited by the approved medical network.
- c) Free mobile application for the purposes of accessing the medical network providers and the medical history of the insured and his/her family.

Cash Medical Claims

Cash claims that are covered under the insurance shall be paid within five working days from receipt of all the required documents.

Table of Benefits:

Each beneficiary shall be granted the following insurance coverages:

Class	Special	First	Second
Geographical Area	Within and outside the Hashemite Kingdom of Jordan		
Annual Limit per Individual in JD's	1,000,000		
Annual Limit per case / JD	20,000	15,000	10,000
Accommodation, Treatment and Food	Covered in full 100%		
Intensive and Medium Care			
Surgery, Operations and Anesthesia			
Diagnostic Procedures (Radiology and Laboratory Tests)			
Child's Escort up to age of 12 years			
Doctors' Fees (Supervision, Consultancy, Surgery, Anesthesia)			
Ambulance (without specifying the frequency)			
Stents and medical assistive devices for the heart, arteries, blood vessels			
* Reimbursement of cash claims for cases covered under insurance (outside the network or outside Jordan)			
Delivery and its Complications			
Normal Delivery / JD			
Cesarean Section / JD	1,500	1,250	750
Legal Abortion, Ectopic Pregnancy and Curettage / JD			
Reimbursement of cash claims (outside the network or outside Jordan)	70%		

* Reimbursement takes place as per the rates stated in the above table from the total value of cash claims for the cases covered under the insurance after applying the terms, conditions and limits of the coverage stated under the Policy as per the minimum rates of Jordan Medical Association of 2008 and the locally approved rates of the Ministry of Health of Jordan.

Additional Coverages and Benefits:

Subject to the terms, conditions and clauses of the policy, all cases stated hereunder that require hospitalization for at least one day in respect of a non-excluded medical case shall be covered. Furthermore, the cover shall include one day cases that require general anesthesia in the hospital which cannot be carried out at any of the external units of the hospital.

- 1) Delivery and its complications in respect of normal pregnancy within the limits stated under the Table of Benefits.
- 2) Cost of treatment of newborns in the hospital from day one where delivery is covered under the insurance.
- 3) Premature and jaundice cases of newborns of normal pregnancy shall be covered for a limit of JOD 2,500 per case per annum where the delivery is covered under the insurance.
- 4) Congenital and genetic malformations of newborns shall be covered for a limit of JOD 1,000.
- 5) Circumcision for newborns during their stay at the hospital from within the delivery limit stated under the Table of Benefits.
- 6) Epi-Dural injection.
- 7) Hepatitis A, B, C for cases that arise after the Policy comes into force.
- 8) Contagious diseases, unless the state declares that they are epidemical and requiring public medical quarantine.
- 9) Hernia, hemorrhoids, fistulas and anal fissure operations.
- 10) Deviation of septum for medical and non-cosmetic reasons.
- 11) Tonsillectomy, sinuses, routine operations and polyps.
- 12) Eyes illnesses except relating to (visual acuity, vision correction, keratoconus and aging).
- 13) Strokes, heart attacks, stents for arteries, blood vessels and the complications thereof.
- 14) All medical devices and supplies required by any surgical operation such as (screws, plates, pins, hernia operations mesh, artificial knees, artificial joints, heart valves and heart pacers) or any essential materials which are an integral part of the surgical operation or approved procedure covered under the insurance for a limit of JOD 2,500 per case per annum.
- 15) Surgery and operations of the back, spine and knee.
- 16) Varicose veins operations not related to fertility and/or cosmetics.
- 17) Benign tumors operations.
- 18) Acute asthma attacks.
- 19) Severe allergy diseases in hospital.
- 20) Injuries resulting from traffic accidents registered against an anonymous party and/or where there is no third party involved, for a limit of JOD 1,000 per case per annum.
- 21) Plastic reconstructive surgeries due to an accident covered by insurance and not as a result of traffic accident and/or judicial incident.
- 22) Drugs registered as medicine prescribed by the specialist during hospital stay whether foreign or domestic which correspond to the period of stay at hospital.
- 23) Strokes, brain hemorrhage and unstable angina.
- 24) All types of bone fractures, deep wounds that require surgical sutures and burns of all types.
- 25) External and internal bleeding cases.
- 26) Non-judicial poisoning cases.
- 27) Acute asthma and acute allergy cases.
- 28) High temperature of children less than three years of age.
- 29) Severe dehydration accompanied with changes in blood salts and/or vital signs.
- 30) Severe inflammatory bowel accompanied with changes in blood salts and/or vital signs and severe renal colic.
- 31) Unconsciousness cases.
- 32) In the event of death of policyholder whom below age of 60 years old due to any cause, the Company shall contribute an amount of JOD 5,000 to his/her legal heirs as an allowance for the interruption and/or loss of the family income, provided that the Company shall be provided with all the required documents within 30 days from the date of death.
- 33) You shall be granted 20% discount of all travel policies issued by Jerusalem Insurance Company.
- 34) The possibility of adding domestic helpers.

Optional Coverages and Benefits:

The dental benefit can be added as per the following coverage and dental procedures through (Smile Avenue) Dental Center as follows:

Radiographs

Periapical X-Ray
Occlusal X-Ray
Panoramic X-Ray
Lateral X-Ray

Periodontic Treatment

Treatment of various types of inflammation
Gingival Treatment
Scaling and Polishing
Subgingival scaling and root debridement

Conservative Treatment

Dental filling of all kinds (amalgam, composite)
Direct composite veneers as functional procedure

Endodontic Treatment

Root canal treatment
Re-root canal treatment
Re-root canal treatment using endontic Rotary device

Surgery

Deciduous tooth extraction
Permanent teeth extraction
Extraction of permanent teeth by root separation

1. The benefit is granted upon issuance or renewal of the medical contract and not during the contract's validity period.
2. The beneficiary also receives preferential prices and discounts of up to 50% on many cosmetic dental procedures.
3. The beneficiary benefits from the dental cleaning service once a year for free.
4. The deductible rate paid by the beneficiary to the service provider is calculated according to the price list issued by the Dental Association for the year 1999, and no other rates or allowances may be collected from the beneficiary by the service provider.
5. If the dental benefit is chosen, coverage is mandatory for all beneficiaries of the contract.
6. The dental benefit is granted to customers who are issued a medical insurance contract only and is not sold on the basis of a separate dental benefit.
7. The coverage ceiling is the same for all family members and/or beneficiaries of the same degree.
8. No refundable premium (for dental benefit) will be calculated if the customer wishes to cancel the medical contract.

*Coverage ceilings and annual premiums (not listed):

Coverage limit / JOD	Coverage percentage	Annual /JOD
150	%80	30
300		50
500		60

General Exclusions:

All services, medications, tests, disabilities and any complications resulting from the cases, injuries, diseases or the causes stated hereunder shall be deemed to be excluded from the insurance cover unless these are explicitly stated in the Table of Benefits or Additional Benefits.

- 1) Civil or non-civil war whether war is declared or not, invasion, disturbances, riots, civil commotion, peaceful and non-peaceful demonstrations, hostilities, rebellion, acts of terrorism, all types of judicial cases, violation of the law, commission or attempted commission of crimes, participation in sedition or quarrels, consumption of alcohol and all types of intoxicating substances.
- 2) Suicide, attempted suicide, self-inflicting harm, whether or not the assured is of a sound mind.
- 3) Professional sports, dangerous hobbies such as car racing, mountaineering, diving, riding motor cycles, yachts and air balloons.
- 4) Radioactive, chemical, biological and epidemical contamination and natural hazards such as volcanoes, earthquakes, floods and land-slides.
- 5) Undeclared medical cases or complaints in the insurance proposal, pre-existing cases and the complications thereof.
- 6) Any case that does not require admission and stay in the hospital, save what is applicable today care cases only.
- 7) Any treatment in the emergency room.
- 8) Cosmetic surgery and treatment, drugs used for such purpose, obesity and gastric banding.
- 9) Hair loss, hirsutism, acne, melisma, skin pigmentation, vitiligo lupus, pityriasis rosea, psoriasis, varicose veins, scar treatment and treatment by botox.
- 10) Infectious, contagious and epidemical diseases that require quarantine or isolation, such as, coronavirus, SARS, H1N1, cholera, plague, tuberculosis, malaria...etc.
- 11) Congenital, genetic, hereditary diseases, jaundice, premature birth, hip dislocation, delay in physical and cognitive development, learning difficulties and autism.
- 12) Mental, psychological and immunity diseases, multiple sclerosis, epilepsy, anorexia, bulimia and comprehensive allergy test.
- 13) Preventative treatment, vaccines, serums, cancer, chemo-therapy, gamma knife, renal failure, AIDS senility and aging diseases, such as Alzheimer's, Parkinson, dementia, sleep disorders and tests.
- 14) Price and cost of installation of auxiliary medical devices, medical supplies such as eye glasses lenses, medical braces, braces, respiratory therapy devices, jaw fixing devices, crutches, wheel chairs, hip dislocation devices, medical plates, screws and pins, natural and artificial organ transplants, prosthetic limbs, joints and knees, hearing aids, heart pacers etc...
- 15) Non-illness or symptom-related examinations, check-up, alternative medicine therapy, convalescence, hospitalization, tele-medicine therapy.
- 16) Hearing and visual defects, visual acuity keratoconus, squint, blindness and lasik surgery.
- 17) Treatment of the teeth, gums and jaws, unless it was caused by an accident covered by insurance, in which case dental procedures are excluded such as, cosmetic dentistry, dentures, bridges, crowns and orthodontics.
- 18) Medicines and drugs taken without a medical prescription or a recommendation from the attending physician and any complications resulting therefrom and tranquilizers.
- 19) All substances and products not registered as medicine within the Ministry of Health of Jordan such as those, which are subject to 16% sales tax such as preventative, immunotherapy and oil infections, biological medicine prepared via any entity other than the Pharmacists Syndicate of Jordan.
- 20) Treatment as a result of injury or illness that can be indemnified by a more specialized policy from any other insurance entity and the cases guaranteed by the State including labor injuries, vocational diseases, traffic accidents and personal accidents.
- 21) Sexually transmitted diseases, urinary incontinence, involuntary urination, neurogenic bladder and cases related to fertility, childbearing, IVF and treatments related to causes of abortion, infertility, sexual dysfunction regardless of causes and contraceptives.
- 22) Any treatment in the hospital, tests or other medical procedures which can be carried out outside the hospital and do not require admission without subjecting the assured's life to risk and cases, medicaments and procedures which were admitted to the hospital by an unauthorized person or who is not a physician.

Waiting Periods:

Waiting periods apply to all current beneficiaries and new members, and their insurance coverage for the cases listed below inside and outside the hospital and does not start until after the period has passed. The waiting period will be calculated from the date of the beneficiary's affiliation with the insurance.

Medical Case	Waiting Period
Tonsillectomy, polyps, sinuses and the non-cosmetic deviation of septum	6 months
Treatment of hemorrhoids, fistulas, anal fissure and all types of non-congenital hernia	6 months
Cystoscopy and lithotripsy	6 months
Gallbladder, ulcers and endoscopy	6 months
Spine, back, neck and knee diseases and operations	12 months
Maternity	12 months
All types of varicose veins and non-congenital hydrocele	12 months
Benign and fibroids tumors, hysterectomy and endometrial ablation	12 months
Retinal disease, cataract and high intraocular pressure	12 month
Diabetes, high blood pressure, osteoporosis, cardiac, arteries and blood vessel diseases, cholesterol and triglycerides and chronic diseases	12 months

Rates and Annual Premiums:

Age Category	Annual Premiums / in JD's		
	Special Class	First Class	Second Class
From day 1 until 17 years	105	75	65
From 18 years until 30 years	170	150	140
From 31 years until 40 years	195	170	160
From 41 years until 45 years	235	205	180
From 46 years until 50 years	300	245	225
From 51 years until 55 years	350	320	300
From 56 years until 60 years	485	420	390
From 61 years until 65 years	585	525	480

Special Provisions:

- Rates and coverages stated herein are based on that all the beneficiaries are in good health and have no illness or surgical record prior to the insurance, otherwise the Insurance Company shall be entitled to adjust the rates and coverages upon receipt of the insurance applications.
- Those covered under insurance are all employees and/or all family members (husband, wife, legal dependents up to the age of 18 years or up to the age of 25 years where they are not married and are pursuing their studies) as per the Family Book.
- The insurance coverage excludes those who are more than 65 years of age.
- The rates shall be subject to 5% issuance fees and 1% revenue stamps.
- Premium payment shall be as per the company's approved credit policy.
 - Cash in full upon issuance.
 - Five consecutive cheques payable within the first five months from the date of issuance of the policy covering the entire amount of the premium.
- The commencement of the insurance coverage shall be conditional upon payment of the premium as stated above.
- Collecting 0.5% Contributions from Insured Parties to the Guarantee Fund for Insured Parties and Beneficiaries of Insurance Contracts.
- If the amendments to the currently approved 2008 Doctor's fees Regulations are approved, an increase will be applied to the premiums in proportion to the value of the increase, starting from the date of activation of the new Doctors' Syndicate

*This quotation does not constitute any obligation on the part of the company until after all insurance applications have been filled out, studied, issued, and the payment of the policy premiums have been paid.

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