



# Table of Benefits

## Group Schemes for Steamship Mutual Members

### Compliance with MLC 2006

By compliance with the Maritime Labour Convention (MLC) 2006, we mean that our product meets the Maritime Labour Convention requirements in terms of onshore health cover. In this Table of Benefits we specify which benefits are mandatory and which are voluntary in the Core Plan and Out-patient Plan. For the voluntary benefits, you can decide whether or not you wish to select this cover for your employees.

### Core Plan

Core Plan Benefits		
Maximum plan benefit GBP (£)		£415,000
Maximum plan benefit EUR (€)		€500,000
Maximum plan benefit USD (\$)		\$675,000
Maximum plan benefit CHF		CHF650,000
In-patient benefits - please refer to note 2 for more information on Treatment Guarantee		
	Benefit Limits	Mandatory or Voluntary under MLC 2006
Hospital accommodation <sup>1</sup>	General Ward	Mandatory
Intensive care <sup>1</sup>	Full refund	Mandatory
Prescription drugs and materials <sup>1</sup> (in-patient and day-care treatment only) (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	Full refund	Mandatory
Surgical fees, including anaesthesia and theatre charges <sup>1</sup>	Full refund	Mandatory
Physician and therapist fees <sup>1</sup> (in-patient and day-care treatment only)	Full refund	Mandatory
Surgical appliances and materials <sup>1</sup>	Full refund	Mandatory
Diagnostic tests <sup>1</sup> (in-patient and day-care treatment only)	Full refund	Mandatory
Organ transplant <sup>1</sup>	£8,300/€10,000/ \$13,500/CHF13,000	Mandatory
Psychiatry and psychotherapy <sup>1</sup> (in-patient and day-care treatment only) (10 month waiting period applies)	£4,150/€5,000/ \$6,750/CHF6,500	Mandatory
Accommodation costs for one parent staying in hospital with an insured child under 18 <sup>1</sup>	Full refund	Voluntary
Emergency in-patient dental treatment	Full refund	Mandatory
		Continued overleaf

Other benefits - please refer to note 2 for more information on Treatment Guarantee		
Day-care treatment <sup>2</sup>	Full refund	Mandatory
Kidney dialysis <sup>2</sup>	Full refund	Mandatory
Out-patient surgery <sup>2</sup>	Full refund	Mandatory
Nursing at home or in a convalescent home <sup>2</sup> (Immediately after or instead of hospitalisation)	£2,075/€2,500/ \$3,375/CHF3,250	Mandatory
Rehabilitation treatment <sup>2</sup> (in-patient, day-care and out-patient treatment, must commence within 14 days of discharge after the acute medical and/or surgical treatment ceases)	£1,660/€2,000/ \$2,700/CHF2,600	Mandatory
Local ambulance	£415/€500/ \$675/CHF650	Mandatory
Emergency treatment outside area of cover (for trips of a maximum period of six weeks)	Up to £8,300/€10,000/ \$13,500/CHF13,000, max. 42 days	Voluntary
Medical evacuation <sup>2</sup>	Full refund	Mandatory
<ul style="list-style-type: none"> <li>Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre<sup>2</sup></li> <li>Where ongoing treatment is required, we will cover hotel accommodation costs<sup>2</sup></li> <li>Evacuation in the event of unavailability of adequately screened blood<sup>2</sup></li> <li>If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs<sup>2</sup></li> </ul>	Full refund	
Expenses for one person accompanying an evacuated person <sup>2</sup>	£2,490/€3,000/ \$4,050/CHF3,900	Voluntary
Travel costs of insured family members in the event of an evacuation <sup>2</sup>	£1,660/€2,000/ \$2,700/CHF2,600, per event	Voluntary
Repatriation of mortal remains <sup>2</sup>	£8,300/€10,000/ \$13,500/CHF13,000	Mandatory
Travel costs of insured family members in the event of the repatriation of mortal remains <sup>2</sup>	£1,660/€2,000/ \$2,700/CHF2,600, per event	Voluntary
CT and MRI scans (in-patient and out-patient treatment)	Full refund	Mandatory
PET <sup>2</sup> and CT-PET <sup>2</sup> scans (in-patient and out-patient treatment)	Full refund	Mandatory
Oncology <sup>2</sup> (in-patient, day-care and out-patient treatment)	Full refund	Mandatory
- Purchase of a wig	£165/€200/ \$270/CHF260, per lifetime	Voluntary
Routine maternity <sup>2</sup> (in-patient and out-patient treatment) (10 month waiting period applies)	£4,980/€6,000/ \$8,100/CHF7,800, per pregnancy	Mandatory
Complications of pregnancy and childbirth <sup>2</sup> (10 month waiting period applies)	Full Refund	Mandatory
Home delivery	£830/€1,000/ \$1,350/CHF1,300	Voluntary
In-patient cash benefit (per night) (where treatment has been received free of charge)	£125/€150/ \$205/CHF195, max. 25 nights	Voluntary
Emergency out-patient treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Out-patient Plan)	£625/€750/ \$1,015/CHF975	Mandatory
Emergency out-patient dental treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Dental Plan)	£625/€750/ \$1,015/CHF975	Mandatory
Palliative care <sup>2</sup>	Full refund	Mandatory
Long term care <sup>2</sup>	Full refund, max. 90 days per lifetime	Mandatory
Accidental death (insured members aged 18 to 70)	£8,300/€10,000/ \$13,500/CHF13,000	Mandatory

<sup>1</sup> If Treatment Guarantee is not obtained for the benefits listed with a 1, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only 80% of the eligible benefits.

<sup>2</sup> If Treatment Guarantee is not obtained for the benefits listed with a 2, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only 50% of the eligible benefits.

## Out-patient Plan and Deductibles

To reduce your Out-patient Plan premium, simply select an optional deductible from the list below and read across to find the relevant premium discount. Where a deductible is selected it is payable per person, per Insurance Year. Also, our premiums are expressed in whole numbers (i.e. without any cents or pence etc.), so please note that percentages may be slightly higher or lower than those stated below.

Optional Out-patient Plan Deductibles	Discount
No deductible	0% premium discount
£83/€100/\$135/CHF130	10% premium discount
£165/€200/\$270/CHF260	20% premium discount
£415/€500/\$675/CHF650	45% premium discount
£830/€1,000/\$1,350/CHF1,300	70% premium discount

The following Out-patient Plan can be purchased with the Core Plan, it cannot be bought separately.

Out-patient Plan Benefits		
Maximum plan benefit	£2,075/€2,500/\$3,375/CHF3,250	
	Minimum for MLC 2006 compliance	Mandatory or Voluntary under MLC 2006
Medical practitioner fees and prescription drugs (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	£830/€1,000/ \$1,350/CHF1,300	Mandatory
Specialist fees	Full refund	Mandatory
Diagnostic tests	Full refund	Mandatory
Vaccinations	Full refund	Mandatory
Chiropractic treatment, osteopathy, homeopathy, Chinese herbal medicine, acupuncture and podiatry (max. 12 sessions per condition for chiropractic treatment and max. 12 sessions per condition for osteopathic treatment, subject to the benefit limit)	£415/€500/ \$675/CHF650	Mandatory
Prescribed physiotherapy (initially limited to 12 sessions per condition; limit also applies to prescribed and non-prescribed physiotherapy sessions, where combined)	£415/€500/ \$675/CHF650	Mandatory
- Non-prescribed physiotherapy	5 visits	Voluntary
Prescribed speech therapy, oculomotor therapy and occupational therapy <sup>2</sup>	£415/€500/ \$675/CHF650	Mandatory
Health and wellbeing checks including screening for the early detection of illness or disease. Checks are limited to: <ul style="list-style-type: none"> <li>Physical Examination</li> <li>Blood tests (full blood count, biochemistry, lipid profile, thyroid function test, liver function test, kidney function test)</li> <li>Cardiovascular examination (physical examination, electrocardiogram, blood pressure)</li> <li>Neurological examination (physical examination)</li> <li>Cancer screening <ul style="list-style-type: none"> <li>Annual pap smear</li> <li>Mammogram (every two years for women aged 45+, or earlier where a family history exists)</li> <li>Prostate screening (yearly for men aged 50+, or earlier where a family history exists)</li> <li>Colonoscopy (every five years for members aged 50+, or 40+ where a family history exists)</li> </ul> </li> <li>Annual faecal occult blood test</li> <li>Bone densitometry (every five years for women aged 50+)</li> <li>Well child test (for children up to the age of six years, up to a maximum of 15 visits per lifetime)</li> </ul>	£498/€600/ \$810/CHF780	Mandatory
Infertility treatment (18 month waiting period applies)	£9,960/€12,000/ \$16,200/CHF15,600, per lifetime	Voluntary
Psychiatry and psychotherapy (18 month waiting period applies)	20 visits	Mandatory
Prescribed medical aids	£2,075/€2,500/ \$3,375/CHF3,250	Mandatory
Prescribed glasses and contact lenses including eye examination	£149/€180/ \$245/CHF234	Voluntary
Dietician Fees	4 visits	Voluntary
Prescribed drugs (must be prescribed by a physician, although a prescription is not legally required for purchase)	£42/€50/ \$70/CHF65	Mandatory

# Repatriation Plan

The following Repatriation Plan can be purchased with the Core Plan, it cannot be bought separately.

Repatriation Plan Benefits		
	Benefit Limits	Mandatory or Voluntary under MLC 2006
Medical repatriation <sup>2</sup> <ul style="list-style-type: none"> <li>Where the necessary treatment is not available locally, you can choose to be medically repatriated to your home country instead of to the nearest appropriate medical centre<sup>2</sup></li> <li>Where ongoing treatment is required, we will cover hotel accommodation costs<sup>2</sup></li> <li>Repatriation in the event of unavailability of adequately screened blood<sup>2</sup></li> <li>If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs<sup>2</sup></li> </ul>	Full refund  Full refund  Full refund  Full refund, max. 7 days	Mandatory
Expenses for one person accompanying a repatriated person <sup>2</sup>	£2,490/€3,000/ \$4,050/CHF3,900	Voluntary
Travel costs of insured family members in the event of a repatriation <sup>2</sup>	£1,660/€2,000/ \$2,700/CHF2,600, per event	Voluntary
Travel costs of insured members to be with a family member who is at peril of death or who has died	£1,245/€1,500/ \$2,025/CHF1,950, per lifetime	Voluntary
Burial Expenses	£830/€1,000/ \$1,350/CHF1,300	Voluntary

# Notes

## 1. Area of cover

Allianz Worldwide Care offers a range of options in relation to geographical cover. The chosen area of cover will be specified in the Insurance Certificate.

## 2. Treatment Guarantee

Certain treatments and costs require submission of a Treatment Guarantee Form in advance. Following approval by Allianz Worldwide Care, cover for these required treatments or costs can then be guaranteed. In the Table of Benefits, benefits which require pre-approval through submission of a Treatment Guarantee Form are indicated by either a 1 or a 2. These benefits are listed below, along with further important details:

- All in-patient benefits<sup>1</sup> listed.
- Day-care treatment<sup>2</sup>.
- Kidney dialysis<sup>2</sup>.
- Out-patient surgery<sup>2</sup>.
- MRI (Magnetic Resonance Imaging) scan. Treatment Guarantee may be required for this test if you would like us to settle the bill directly with the medical provider.
- PET<sup>2</sup> (Positron Emission Tomography) and CT-PET<sup>2</sup> scans.
- Nursing at home or in a convalescent home<sup>2</sup>.
- Routine maternity<sup>2</sup> and complications of pregnancy and childbirth<sup>2</sup> (in-patient treatment only).
- Oncology<sup>2</sup> (in-patient and day-care treatment only).
- Occupational therapy<sup>2</sup> (out-patient treatment only).
- Rehabilitation treatment<sup>2</sup>.
- Medical evacuation<sup>2</sup> (or repatriation where covered).
- Travel costs of insured family members in the event of an evacuation/repatriation<sup>2</sup>.
- Repatriation of mortal remains<sup>2</sup>.
- Travel costs of insured family members in the event of the repatriation of mortal remains<sup>2</sup>.
- Expenses for one person accompanying an evacuated/repatriated person<sup>2</sup>.
- Palliative care<sup>2</sup>.
- Long term care<sup>2</sup>.

<sup>1</sup> If Treatment Guarantee is not obtained for the benefits listed with a 1, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only **80%** of the eligible benefits.

<sup>2</sup> If Treatment Guarantee is not obtained for the benefits listed with a 2, we reserve the right to decline a claim. If the respective treatment is subsequently proven to be medically necessary, we will pay only **50%** of the eligible benefits.

We should be contacted at least five working days before receiving treatment, so that we can ensure that there will be no delays at the time of admission. This will ensure that members benefit from cashless access to hospitals for in-patient treatment, where possible, and have their treatment overseen by our team of medical professionals.

**In the case of an emergency, we should be informed within 48 hours of the event to ensure that no Treatment Guarantee penalty will apply to the claim.**

## 3. Claims process and turnaround

Allianz Worldwide Care has a simple claims process in place to ensure that members can seek reimbursement for medical expenses. Members with access to our Online Services can avail of our MyHealth app for quick and easy claims submission.

Fully completed claims are processed and payment instructions issued to the member's bank **within 48 hours**. Where further information is required to complete the claim, the member/medical practitioner will automatically be notified by email or mail within 48 hours of receipt of the claim. An email is sent automatically to the member (where email addresses are provided to us) to advise them when the claim is processed.

This swift claims processing policy ensures that our members receive their claims payment in the most effective and efficient manner.

## 4. Benefit limits

There are two kinds of benefit limits shown in the Table of Benefits. The **maximum plan benefit**, which applies to certain plans, is the maximum we will pay for all benefits in total, per member, per Insurance Year, under that particular plan. Some benefits also have a **specific benefit limit**, for example "Nursing at home or in a convalescent home". Specific benefit limits may be provided on a "per Insurance Year" basis, a "per lifetime" basis or on a "per event" basis, such as per trip, per visit or per pregnancy. In some instances we will pay a percentage of the costs for the specific benefit e.g. "65% refund, up to £4,150/€5,000/\$6,750/CHF6,500". Where a specific benefit limit applies or where the term "Full refund" appears next to certain benefits, the refund is subject to the maximum plan benefit, if one applies to your plan(s). All limits are per member, per Insurance Year, unless otherwise stated in your Table of Benefits.

## 5. Policy terms and conditions

This Company Plan is part of a facility underwritten by Allianz Worldwide Care for Members of the Steamship Mutual Underwriting Association Limited. The Company must confirm it is currently a Member of the Steamship Mutual Underwriting Association Limited ("Steamship") and acknowledge that its membership of Steamship at the time of the commencement of this policy is a relevant and pertinent underwriting information and a condition precedent for the Insurer in agreeing the terms and conditions of this policy.

By accepting this policy and making any claim hereunder, you acknowledge that Allianz Worldwide Care and the Company may disclose to Steamship Mutual any claims which have been presented under this policy where strictly necessary to ensure that the appropriate insurer is handling the claim. You also need to acknowledge that Steamship Mutual may, where necessary in order to ensure that the appropriate insurer is handling the claim, disclose to the Allianz Worldwide Care and the Company any claims presented to Steamship Mutual which may, in whole or in part, be covered under this Policy. No personal information whatsoever may be disclosed that would allow the identification of the claimant without the express prior written consent of the individual concerned and subject at all times to applicable data protection laws.

*Unless otherwise agreed, the following exclusion will apply:*

### Accident On Board Vessel Exclusion

This policy provides crew with cover in respect of illnesses and non-work-related accidents (where those accidents occur on-shore) throughout the period of cover in accordance with the policy terms and conditions. However no cover is available under this policy in respect of accidents whilst crew are on-board a vessel operated by the Company who arranged this Company Plan. Crew must advise your Company of any accidents which occur on board a Company vessel immediately. This policy does cover your crew for illness which occurs whilst they are on board a vessel in accordance with the policy terms and conditions.

This Table of Benefits provides an outline of the cover we provide under each plan. Cover is subject to our policy terms and conditions, as detailed in our Employee Benefit Guide, which is issued to members upon policy inception. This Employee Benefit Guide can also be downloaded from [my.allianzworldwidecare.com](http://my.allianzworldwidecare.com)







If you have any queries, please do not hesitate to contact us:

Allianz Worldwide Care  
15 Joyce Way  
Park West Business Campus  
Nangor Road  
Dublin 12  
Ireland

[sales@allianzworldwidecare.com](mailto:sales@allianzworldwidecare.com)  
[www.allianzworldwidecare.com](http://www.allianzworldwidecare.com)

**Helpline**

English: + 353 1 630 1301  
German: + 353 1 630 1302  
French: + 353 1 630 1303  
Spanish: + 353 1 630 1304  
Italian: + 353 1 630 1305  
Portuguese: + 353 1 645 4040  
Fax: + 353 1 630 1306

-  [www.facebook.com/allianzworldwidecare](http://www.facebook.com/allianzworldwidecare)
-  [plus.google.com/+allianzworldwidecare](https://plus.google.com/+allianzworldwidecare)
-  [www.youtube.com/user/allianzworldwide](http://www.youtube.com/user/allianzworldwide)
-  [www.linkedin.com/company/allianz-worldwide-care](http://www.linkedin.com/company/allianz-worldwide-care)



Rating effective from 17th December 2015. For the latest rating, please visit [www.ambest.com](http://www.ambest.com)



Professional Adviser  
**INTERNATIONAL  
FUND & PRODUCT  
AWARDS 2015  
WINNER**  
Best International  
Private Health  
Insurance Provider

