



## Group MediPlus Rider

附加团体意外无忧医疗保险



# I Product Features

Insured Member Age	3 - 64 years old
Period of Insurance	1 year

## I Benefit



Inpatient Medical Expense Due to Accident



Outpatient Medical Expense Due to Accident



Additional Medical Expense Coverage



Ambulance Charges Due to Accident

Benefit Table		
No.	Benefit	Benefit Limit Amount
1	<b>Inpatient Medical Expense Due to Accident:</b> A. Daily Room and Board B. Room and Board - Intensive Care Unit C. Hospital General Fees D. Surgery Benefit E. In-Hospital Physician's Visit F. Post-Hospital Benefits	Up To 10% of Basic Policy Sum Insured or \$2,500, Whichever is Lower
2	<b>Outpatient Medical Expense Due to Accident:</b> A. Physician/Specialist Consultation Fees B. Prescribed Medicines and Dressings C. Prescribed Diagnostic Procedure: x-ray, electrocardiograms, basal metabolism test, laboratory examinations and tests, ultrasound, endoscopy, computerized tomography (CT) and magnetic resonance imaging (MRI) scans	
3	<b>Additional Medical Expense Coverage:</b> A. Damage to the Teeth B. Dengue Fever/Malaria C. Food Poisoning D. Snake/Insect/Animal Bite E. Sport Injury	
4	<b>Ambulance Charge Due to Accident</b>	\$300

## I Exclusion

The Company shall not cover medical expenses that is caused directly or indirectly, wholly or partly, by any of following events:

1. Accidental Bodily Injuries caused by traffic Accidents while riding on a motorcycle (driver or passenger) without wearing a helmet, unless it is specifically stated in the Policy and additional Premium has been paid.
2. Alternative medicines, other than licensed chiropractors, osteopaths, homeopaths, and acupuncturists.
3. Any claim arising in the course of travel undertaken against medical advice.
4. Any medical or physical conditions arising from Dengue Fever or Malaria within the Waiting Period. This shall not be applicable after the first year of continuous cover of the Insured Member.
5. Flying or any aerial activity except as passenger in a properly licensed power-driven aircraft (the word 'passenger' does not include any member of the aircrew or a technician working in or upon an aircraft).
6. A pre-existing condition arising from any injury or sickness for which an Insured Member received consultation, medical treatment, diagnosis, care or service; or took prescribed drugs or medicine within a period of 12 (twelve) months prior to the effective date of insurance for that Insured Member. No benefit shall be payable under the Policy and supplementary contracts for pre-existing conditions unless the Insured Member has been continuously insured under the policy or the policy owner's group hospital and surgical insurance for at least 12 (twelve) months with the previous insurer.
7. Any treatment for mental disorders; injuries due to insanity or self-infliction or suicide ; rest cures or sanatoria care, special nursing care; communicable disease requiring by law isolation or quarantine; sexually transmitted disease; claim which in the opinion of the Company arises directly or indirectly from Acquired Immunodeficiency Syndrome (AIDS) or attributable to Human Immunodeficiency Virus (HIV).
8. Routine physical examination; drug addiction or alcoholism; services for care and treatment of oral cavity except for dental operation required as a result of injury sustained in an Accident.
9. Reconstructive or plastic surgery, cosmetic treatment or surgery for beautification purposes; treatment of obesity, weight reduction and improvement or any elective surgery.

This above list is for reference only. Please refer to the Terms and Conditions for the complete list and details of exclusion.

## I 投保说明

投保年龄	3 - 64 岁
保险期间	1 年

## I 保险利益



意外住院医疗费用



意外门诊医疗费用



额外医疗费用



意外救护车费用

### 医疗保险利益表

序号	保险利益	最高限额
1	<b>意外住院医疗费用：</b> 1. 每日病房和膳食费 2. 病房和膳食费 - 重症监护病房 3. 医院一般费用 4. 手术费 5. 住院医师问诊费 6. 出院后治疗费	最高为主险的 保险金额的 10% 或 \$2,500 以较低者为准
2	<b>意外门诊医疗费用：</b> 1. 医生/专科医生咨询费 2. 处方药物和敷料 3. 规定的诊断程序：X光、心电图、 基础代谢测试、实验室检查和测试、 超声波、内视镜检查、电脑断层扫描 (CT) 和磁共振成像 (MRI) 扫描	
3	<b>额外医疗费用：</b> 1. 牙齿损伤 2. 登革热/疟疾 3. 食物中毒 4. 蛇/昆虫/动物咬伤 5. 运动伤害	
4	<b>意外救护车费用</b>	\$300

## I 责任免除

如果因以下任何事件直接或间接，全部或部分造成的医疗费用支出，本公司将不承担给付保险金的责任：

- 1) 未戴头盔骑摩托车(司机或乘客)发生交通意外事故并造成的意外人身伤害或死亡，除非本附加合同有特别约定并且已支付额外保险费。
- 2) 除脊椎按摩师、骨科医生、顺势医疗师和针灸师以外的非常规医学。
- 3) 在旅行过程中，因不遵从医嘱而导致的任何索赔。
- 4) 被保险人在等待期内因登革热或疟疾引起发生的任何医疗或身体状况。在被保险人连续享受保障的第一年后不再受此限制。
- 5) 飞行或任何空中活动，但作为乘客乘坐获得适当许可的飞机除外（「乘客」一词不包括任何机组人员或在飞机内或飞机上工作的技术人员）。
- 6) 已患有的疾病是指被保险人因任何身体伤害或疾病而接受问诊、医疗、诊断、护理或服务；或在该被保险人保险生效日期前12（十二）个月内服用处方药。除非被保险人已在本附加保险合同或在保单持有人的上一份团体住院及手术保险下连续投保至少12（十二）个月，否则根据本附加保险合同，对于已患有的疾病不应支付任何赔偿。
- 7) 精神障碍的治疗；精神失常或自伤所导致的伤害；静养疗法或保健疗法、特殊护理；依法需要隔离或检测的传染病；性传播疾病；公司认为直接或间接由获得性免疫缺陷综合征(AIDS)或人类免疫缺陷病毒(HIV)引起的索赔。
- 8) 常规体检；吸毒或酗酒；口腔护理和治疗服务，但因意外受伤而需要进行牙科手术者除外。
- 9) 修复或整形手术、出于变美的目的而进行的美容治疗或手术；治疗肥胖，减肥和改善体重或任何择期手术。

以上列明的责任免除为简单叙述，详情请阅读本保险条款。

**Note:** This brochure is summarized. For complete details on the coverage provided, including benefits, exclusions and termination provisions, please refer to the Terms and Conditions.

注: 本宣传单为简单叙述, 详情请阅读本保险条款, 并以条款的叙述为准。



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