

# Health Long Stay VISA Plus Premium Plan 100,000USD

Individual Health Insurance – Universal plus for Long Stay with Deductible





U-LongStayVISAPlus2022-PD.07.2022
The English language used in this table of benefit is merely a translation of Thai Version.
VISA TYPE-OA/STV Premium Plan VISA 100,000USD

Universal Plus – LONG STAY VISA Plus 2022
With Deductible (Cover in Thailand only)

In accordance with the Cabinet Resolution, dated 2 April B.E. 2562 (2019), starting from 31<sup>st</sup> October 2019, foreigners who wish to apply for Non-Immigrant Visa "O-A" (1 Year Visa) are required to submit the proof of health insurance that covers the whole duration of stay in Thailand. Individual Health Insurance for a Long Stay Visa provided by the LMG Insurance (Public) Company Limited.



The health insurance policy provided coverage THB 3,500,000 per policy per year for Inpatient and THB 60,000 for Outpatient per policy per year.



You will receive an insurance certificate as the key evidence for Visa application after you complete the purchase of your health insurance



Your data will be automatically upload to the TGIA's portal database and immigration authorities to allow them to validate the policy is in force.



Customary and reasonable medical charges will be eligibility after full deductible limit on your selected plan



Entry age up to 80 years old and Renewal to age 100 years.



Deductible starts from 300,000 THB\*

\* DEDUCTIBLE refers to the first fixed amount of eligible medical expenses per visit or per confinement for which the covered person is responsible for paying as stated in the policy schedule.

Page 1 / 7

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## Table of Benefits

Individual Health Universal Series - LONG STAY VISA O-A 2022 (with Deductible per confinement)

	Sum insured (Thai Baht)			
Insuring Agreement	Plan 1	Plan 2	Plan 3	
Maximum limit per year		3,500,000		
Required Deductible THB per confinement or per visit	300,000	500,000	1,000,000	
Area of coverage	Thailand only			
Inpatient Benefit (Maximum limit)	3,500,000			
1. Inpatient Benefit				
Module 1 Daily Room and board including hospital services, standard inpatient	5,000	5,000	5,000	
accommodation (maximum limit per day)	5,000		5,000	
Module 1.1 Inpatient Room and board including hospital services for Intensive	0 1			
Care Unit (ICU) / CCU (Coronary Care Unit) (maximum limit per day) (Maximum		d reasonable me		
benefits for Standard room, ICU/CCU would not exceeding 365 days per any	up to maxim	up to maximum limit per year of <u>Inpatient</u>		
injury or illness)	<u>Benefit</u>			
Module 2 Hospital Medical Expenses for Diagnosis or Treatment. Blood	Customary and reasonable medical charges up to maximum limit per year of <u>Inpatient</u> <u>Benefit</u>			
Transfusion Services and Blood Components. Nursing Service Fees, Drugs and				
Parenteral Nutrition and Medical Supplies (maximum limit per confinement)				
Module 2.1 Hospital Medical Expenses for Diagnosis				
Module 2.2 Hospital Medical Expenses for medical Treatment, Blood				
Transfusion Services and Blood Components, and Nursing Service Fees				
Module 2.3 Hospital Medical Expenses for Drugs and Parenteral Nutrition and				
Medical Supplies				
Module 2.4 Cost of medicines and consumable supplies (medical supplies 1) for				
home medication				
	Customary and reasonable medical charges			
Module 3 Physical Evaluation and Management Services (per confinement)	up to maximum limit per year of Inpatient			
	<u>Benefit</u>			

Page 2 / 7

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	Sum insured (Thai Baht)		
Insuring Agreement	Plan 1	Plan 2	Plan 3
Module 4 Cost incurred for any surgical operation. Medical expenses for operation			
and procedures (per confinement)			
Module 4.1 Operating Theater and Physical Procedures			
Module 4.2 Hospital Medical Expenses for Drugs and Parenteral Nutrition and Medical	Customani and recomplia modical charges		
Supplies. Operating room medical equipment.	Customary and reasonable medical charges  up to maximum limit per year of Inpatient		
Module 4.3 Physician Procedures, Medical practitioner fee perform surgery and			
procedures for surgeons and procedures (including surgical assistants) (Doctor fee)		<u>Benefit</u>	
Module 4.4 Professional fee and Anesthetic fee (Doctor fee)			
Module 4.5 Medical expenses for Organ transplantation (kidney, pancreas, liver, heart,			
lung)			
Module 5 Major operation that does not require an inpatient stay (Day Surgery)			
2. Treatment as outpatient benefits			
Module 6 Medical fees for diagnosis that are directly related to before and after the			
stay as an inpatient	Customary and reasonable medical charges		adical charges
Module 6.1 Medical fees for diagnosis that are directly related and incurred within 30			
days before and after the stay as an inpatient	up to maximum limit per year of Inpatient		
Module 6.2 Follow up Outpatient care for the same illness within 30 days after	<u>Benefit</u>		
discharge from the hospital as inpatient (not include diagnosis costs)			
Module 7 Emergency Out-Patient Treatment within 24 hours of an accident			
Module 8 Rehabilitation treatment after being treated as an inpatient	Customary and reasonable medical charges up to maximum limit per year of Inpatient		
Module 9 Medical expenses for chronic renal failure treatment by Hemodialysis			adical charges
Medical expenses for the treatment of tumors or cancer by radiation therapy,			
Intervention Radiology and Nuclear medicine			i oi <u>iripatierit</u>
Module 11 Medical fees for cancer treatment by chemotherapy	<u>Benefit</u>		
Module 12 Emergency Ambulance Services			
Module 13 Medical expenses for minor operation			
Outpatient Benefit (Maximum limit) (Max. 1 visit per day, limit 30 visits per year)		2,000	
Lump Sum payment in the event of death or dismemberment including murder, assault, driving and being passenger on motorcycle		100,000	

Page 3 / 7

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Net premium including stamp duty 0.4% (per person per year)					
Age (Year)	Plan 1	Plan 2	Plan 3		
Deductible per disability	300,000	500,000	1,000,000		
1-17 years old	23,700	19,100	12,700		
18-50 years old	17,600	14,700	9,600		
51-60 years old	27,600	22,300	14,500		
61-70 years old	37,100	35,500	26,800		
71-80 years old	74,800	56,700	36,700		
81 - 100 years old (Renewal only)	100,200	93,100	68,500		

#### Remarks: -

- 1. Standard premium for each age band for the first policy year only.
- 2. Eligible to apply for the first year coverage from 1 years up to 80 years of age, renewable up to 100 years.
- 3. This medical plan require DEDUCTIBLE, the insured person is responsible to the first fixed amount of eligible medical expenses per visit or per disability or per visit for which the covered person is responsible for paying as stated in the policy schedule.
- 4. This policy does not cover injury / illness / chronic disease which occur before effective date of policy and still not recover on the first effective date and unnecessary medical treatment.
- 5. Applicant must send the filled out and signed health application form together with a copy of passport for the company's consideration, and annual premium must be paid before coverage can commence and issuing the policy.
- 6. The company reserves the right to reject any application or accept with exclusions, according to underwriting standard of the company.
- 7. Renewal year premium will be adjusted according to increasing age of each insured person. Each insured person may be charged higher, up to maximum rate of standard premium, according to claims experiences (Loss Ratio) of the previous policy year or not to renew each insured person in the renewal year with 30 days prior notices.
- 8. Health care card is provided for the insured to service with network hospital.
- 9. The benefit and coverage are subject to term &condition of policy.
- 10. Customers can holding only one effective LMG Health Insurance Policy.
- 11. This medical plan will not cover medical expenses provided for bone marrow transplant, organ transplant, and kidney dialysis.
- 12. Information in this brochure is only preliminary information provided for the applicant to consider for applying for health insurance.

Page 4 / 7

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13. This document is not part of any insurance policy. Please refer to the general terms, conditions and exclusions in the health insurance policy. / Policyholders should understand the general terms and conditions, as well as the exclusions before purchasing

### Waiting Period and pre-existing conditions:-

- 1. The Company will not pay the benefits for any sickness during the first 30 days, from the first policy commencement date.
- 2. The Company will not pay any benefits during the first 120 days, from the first policy commencement date for the following diseases: Benign or malignant tumor or cancer or cystic mass, Hemorrhoids, Hernias, Pterygium, pinguecula, cataract, Tonsillectomy or adenoidectomy, Stones, Varicose Veins, Endometriosis.
- 3. Coverage for injury from accident and shall be start covered immediately from the policy effective date.
- 4. Pre-existing condition(s),
  - a. Chronic disease(s) or /and HIV, AIDS are not covered under this policy, unless pre-existing/chronic condition has been explicitly accepted in writing at time of application.
  - b. No benefits provided for any illness or injury for which a Covered Person received any diagnosis, medical advice or treatment, or had taken any prescribed drug, or where distinct symptoms were evident prior to the effective date.

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# Some Examples of Personal Health Insurance (File and use) Exclusion:

- 1. This insurance does not cover the cost of treatment or losses arising from injury or illness (complications thereof) symptoms or conditions arising from the following:
- 2. Pre-existing conditions, Congenital abnormalities, growth development abnormalities, and genetic disorders.
- 3. Any cosmetic surgery or beautification treatment including treatment of acne, freckles, dandruff, weight reduction and weight gain, hair loss. Reconstructive surgery is also excluded unless injury is sustained as a result of an accident.
- 4. Services in connection with infertility, pregnancy, childbirth, abortion or miscarriage, or any causes related to pregnancy, sterilization or investigation of sterilization
- 5. AIDS, related or sexually transmitted diseases (STD)
- 6. Treatment to relieve symptoms commonly associated with aging, menopause or precocious puberty, sexual dysfunction or sex change.
- 7. Health check ups, convalescent care including rest cures and rehabilitation. Any treatment, drugs or medical supplies which are not related to the diagnosis; and. diagnosis which is not related to the injury or illness or not according to the medical necessity and normal standard.
- 8. Eye examination and eyesight corrective surgery including lasik and other expenses associated with eyesight correction.

Page 5 / 7

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- Treatment or surgery relating to dental or gum e.g. denture, crowns and bridges, root treatment, filling, orthodontic, scaling, extraction, except the necessary dental treatment after an accident. However, the coverage does not include the costs for crowns and bridges, root treatment, orthodontic services.
- 10. Medical treatment related to alcoholism, cigarette addition, drug or other addicted substance.
- 11. Medical treatment related to the nervous disorders, mental disorder, anxiety, psychiatric problems, personality disorder, autism, stress, eating disorder.
- 12. Medical treatment which is in a trial stage or experiment, associated with disease or symptoms of sleep apnea, sleeping disorder, treatment to stop snoring.
- 13. Any inoculations or vaccinations, except rabies vaccine needed after an animal attack or tetanus shots needed after an accident or injury.
- 14. Treatment which is not considered a modern medicine, including alternative medicine.
- 15. Any medical treatment given by a medical practitioner who is the parent, spouse or child of the covered person. The covered person who is a registered medical practitioner may not be reimbursed for any self- administered treatment.
- 16. Suicide or suicide attempt, self inflicted injury or attempt of self-inflicted injury whether being his/her own action or allow others to perform while insane or not, while insane or not. This also includes the accident to the covered person due to consuming, drinking, or injection of toxic substance into the body or drug overdose
- 17. Any loss or injury arising from the action of the covered person whilst under the influence of alcohol, control one's mind, addictive drugs, narcotic drugs to the extent of being unable to The term "under the influence of alcohol" in case of having a blood test refers to a blood/alcohol level of 150% mg and over.
- 18. Injury while the covered person is taking part in a brawl or taking part in inciting a brawl.
- 19. Injury while the covered person is committing a felony or while the covered person is being arrested, under arrest or escaping the arrest
- 20. Injury while the covered person is taking part in dangerous sports or activities including racing of all kinds including car, boat and horse racing, racing of water and snow ski-ing, including jet-ski, skating, boxing, parachuting jumping (except for the purpose of life saving), boarding or traveling in a hot air balloon, gliding, bungee jumping, diving with oxygen tank and breathing equipment under water.
- 21. Injury while the covered person is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as a commercial aircraft.
- 22. Injury while the covered person is piloting or working on board as an employee of an airline.

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23. Injury while the covered person serves as a soldier, police, or a volunteer and participates in war or crime suppression.

Page 6 / 7

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- 24. War (whether declared or not), invasion, acts of foreign enemies, civil war, revolution, insurrection, civil commotion, popular rising against the government, riot, strike.
- 25. Terrorism
- 26. Ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
- 27. The radioactive toxic explosive or other hazardous property of any explosive nuclear assembly or
- 28. This insurance will not pay the benefits for any sickness during the first 30 days from the first policy commencement date.
- 29. Any benefits during the first 120 days from the first policy commencement date for the following diseases: including Tumors,
  Benign or malignant tumor or cancer or cystic mass, Hemorrhoids, Hernias, Pterygium, pinguecula, cataract, Tonsillectomy or
  adenoidectomy, Stones, Varicose Veins and Endometriosis
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Page 7 / 7

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