SICOM WeCare Insurance



		Medical Plans					
		Essential	Enhanced	Comprehensive	Prestige	Prestige Plus	
Benefit Schedule per person (MUR)	Cover	Limit (Rs)	Limit (Rs)	Limit (Rs)	Limit (Rs)	Limit (Rs)	
Section A - Hospital Benefits	Limit Per Illness						
A1 - Inpatient benefits (Medical and Surgical)	Lifetime	Rs. 100,000	Rs. 250,000	Rs. 500,000	Rs. 1,000,000	Rs. 2,000,000	
A2- Childbirth - (Normal or Caesarean delivery)	Annual	Rs. 25,000	Rs. 50,000	Rs. 50,000	Rs. 75,000	Rs. 75,000	
A3 - Maternity Cash Benefit (if delivery is done at a Public Hospital)	Annual	Rs. 10,000	Rs. 15,000	Rs. 15,000	Rs. 20,000	Rs. 20,000	
A4 - Funeral Benefits (Accidental or Natural death)	Lifetime	Rs. 10,000	Rs. 15,000	Rs. 15,000	Rs. 20,000	Rs. 20,000	
Excess Applicable		Rs10k / admission	Rs 10k / admission	Rs10k / admission	Rs10k / admission	Rs10k / admission	
Section B. Overseas treatment if not available in Mauritius (Accrues to limit in Section A1)							
B1 - Air tickets - 1 return economy class ticket per insured person	Annual	Rs. 30,000	Rs. 30,000	Rs. 30,000	Rs. 30,000	Rs. 30,000	
B2 - Stretcher transport to aircraft	Annual	Rs. 50,000	Rs. 50,000	Rs. 50,000	Rs. 50,000	Rs. 50,000	

NOTE

Quotation Validity	 - 30 days as from issue date unless the age of any proposed insured has changed meanwhile. - Quotation is valid for Mauritian nationals. For Non-Mauritians citizens, a loading of 25% will be applicable. - This Quotation is indicative only. Any acceptance of cover, final terms and conditions including premium payable will be determined following examination of completed proposal form and any related documents. No reason whatsoever shall be furnished when a Proposal is declined. 							
Type of Insurance	Medical - Inpatient only. Worldwide cover except USA, Canada, Japan & Singapore							
Period of Insurance	12 months from date to be agreed. Policy can be renewed for consecutive 12 months periods subject to claims experience and medical inflation. Change in cover will be subject to approval.							
Medical Tests	Medical Examination/Other Medical Tests required at enrolment as per table below OR where necessary for evaluation of a proposal inclusive of additional tests and the Costs of such Medical Exam/Tests shall be borne by the Proposer directly.							
	Age Plan Requirements List of blood test d	40-59 years Full Blood health check liffers from each age band category.		60-64 years Medical Exam + Full Blood health check				
Cover	To pay costs of Medical Treatment or Surgical Procedures incurred following hospitalisation. Coverage is subject to the Policy terms and conditions, the benefit limits set out in the Table of Benefits and any terms, including special conditions, exclusions outlined in the Insurance Certificate and subject to payment of the agreed premium.							
Geographical Treatment Limits	Emergency Treatment Abroad where applicable - Limited to nearest center of excellence (Reunion Islands, South Africa and India).							
Specific Exclusions	The following shall be excluded from the coverage: (a) Any bodily injury, illness, sickness, or death of the Insured person arising directly or indirectly from or relating to or in any way attributable to a disease declared by the World Health Organisation or a regional or local body or authority as a pandemic or epidemic; (b) Coronavirus disease (COVID-19); (c) Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2); (d) Any mutation or variation of SARS-CoV-2; (e) Any fear or threat of a), b) or c) above							
Waiting periods	The period after inception date of policy when claims will become payable. (i) Accident: Nil (ii) Pregnancy & Childbirth: 24 months (iii) Specific conditions listed below: 24 months -Hypertension, Diabetes, Cardiovascular diseases, Cerebrovascular accident and/or any sequelae thereof &/or related conditions -Arthritis, Gout, Rheumatism, Lumbar, & Vertebrate problems, Locomotor System Disorders, Sciatica, Prolapsed Disc, Lumbago, Spinal disorders and/or sequelae thereof&/or related complications -Any treatment requiring Arthroscopy or Meniscectomy -All types of Cancers, Cysts, Endometriosis, Fibroid, gynecological problems and/or any sequelae thereof&/or related complications -Any treatments requiring Hysterectomy, Laparotomy, Laparoscopy, Cystectomy, Myomectomy & bleeding PV (per Vaginum) relating to fibroids -Cataract or any Eyes problems requiring surgical operation and/or any sequelae thereof &/or related complications. (iv) Other Inpatient Treatments: 3 Months							
Exclusions	Pre-existing medical conditions							
Claims	- Inpatient claims will be subject to scale of costs, the maximum amount payable for related medical and surgical treatments to a private hospital or clinic - Benefits payable will be subject to terms, conditions and exceptions of SICOM MyCare Health Insurance Policy.							

Please refer to the <u>Policy wording</u> for full terms and conditions.



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