

BENEFIT SCHEDULE
2019 - 2020

LONG-TERM INTERNATIONAL HEALTH PLAN

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PLAN BENEFITS	INTERNATIONAL	INTERNATIONAL PLUS	EXECUTIVE	EXECUTIVE PLUS
Overall Aggregate Limit each Certificate period	£1,000,000 \$2,000,000 €1,500,000	£1,000,000 \$2,000,000 €1,500,000	£1,000,000 \$2,000,000 €1,500,000	£1,000,000 \$2,000,000 €1,500,000

Pre-authorization is required for all claims where the costs are likely to exceed £2,500/\$4,250/€3,500 and for all claims under benefits marked *. If pre-authorization is not obtained, a penalty of £1,000/\$1,700/€1,400 will be deducted from your claim settlement

INPATIENT TREATMENT BENEFITS

Hospital Services* > Accommodation and meal charges > All Inpatient Treatment ordered by a Physician > Physician, Surgeon and Anaesthetist Fees > Intensive Care Unit charges	Full Refund	Full Refund	Full Refund	Full Refund
Hospital Cash Benefit* Where Inpatient Treatment is provided free of charge	£250/\$500/€375 per night Max 30 days	£250/\$500/€375 per night Max 30 days	£250/\$500/€375 per night Max 30 days	£250/\$500/€375 per night Max 30 days
Parental Accommodation When an insured child up to age 17 years is an Inpatient	Full Refund	Full Refund	Full Refund	Full Refund
Daycare Treatment Where a period of recovery is required in a hospital bed	Full Refund	Full Refund	Full Refund	Full Refund
Inpatient Psychiatric Treatment* Treatment in a psychiatric unit, available after one year of cover	Full Refund Max 30 days	Full Refund Max 30 days	Full Refund Max 30 days	Full Refund Max 30 days
Reconstructive Surgery To restore appearance/function following an Accident or illness that occurred whilst covered by your Plan	Full Refund	Full Refund	Full Refund	Full Refund
Accident and Emergency Room Treatment	Full Refund	Full Refund	Full Refund	Full Refund
Organ and Bone Marrow Transplant and Stem Cell Treatment* For kidney, heart, heart-lung, liver, bone marrow and stem cell. Acquisition and donor costs are excluded	Full Refund	Full Refund	Full Refund	Full Refund
Internal Prostheses, Medical Aids and Devices Which are required intra-operatively	Full Refund	Full Refund	Full Refund	Full Refund
Hospice Care Palliative care in a hospice	Full Refund Max 15 days	Full Refund Max 15 days	Full Refund Max 15 days	Full Refund Max 15 days
Local Road Ambulance Services	Full Refund	Full Refund	Full Refund	Full Refund

POST HOSPITAL TREATMENT BENEFITS

Post Hospital Treatment Consultations and treatment received within 90 days of receiving Inpatient Care	Up to £500/\$1,000/€750	Covered under Outpatient Services	Covered under Outpatient Services	Covered under Outpatient Services
Rehabilitation Care To restore health and mobility after injury or illness	£100,000/\$200,000/€150,000 lifetime limit	£100,000/\$200,000/€150,000 lifetime limit	£100,000/\$200,000/€150,000 lifetime limit	£200,000/\$400,000/€300,000 lifetime limit
External Prostheses, Medical Aids and Devices Which are medically required following Inpatient Care, Daycare Treatment or Accident and Emergency Room Treatment	Up to £250/\$500/€375	Up to £500/\$1,000/€750	Up to £750/\$1,500/€1,125	Up to £1,000/\$2,000/€1,500

CANCER TREATMENT

Oncology, Chemotherapy and Radiotherapy* Consultations, diagnostics and treatment received under Inpatient Care, Daycare Treatment or Outpatient Services	Full Refund	Full Refund	Full Refund	Full Refund
Cancer counselling Following a cancer diagnosis with a registered psychologist/counsellor	Up to £1,000/\$2,000/€1,500	Up to £1,000/\$2,000/€1,500	Up to £1,000/\$2,000/€1,500	Up to £1,000/\$2,000/€1,500
Artificial Hair Benefit Wig costs, available following cancer treatment	Up to £1,000/\$2,000/€1,500	Up to £1,000/\$2,000/€1,500	Up to £1,000/\$2,000/€1,500	Up to £1,000/\$2,000/€1,500

EMERGENCY MEDICAL EVACUATION BENEFITS

Emergency Medical Evacuation* Evacuation costs for acute medical conditions where local medical facilities are inadequate	Full Refund	Full Refund	Full Refund	Full Refund
Emergency Medical Evacuation – Supplementary Expenses* Cost of travel to place of origin Hotel accommodation costs for companion Taxi costs for companion Accommodation Costs following Inpatient Care	Economy air ticket Up to 12 nights Up to £500/\$1,000/€750 Up to 7 nights	Economy air ticket Up to 12 nights Up to £500/\$1,000/€750 Up to 7 nights	Economy air ticket Up to 12 nights Up to £500/\$1,000/€750 Up to 7 nights	Economy air ticket Up to 12 nights Up to £500/\$1,000/€750 Up to 7 nights

Emergency Non-Medical Evacuation* Evacuation to a safe location in the event of life-threatening situations resulting from political or civil unrest Evacuation to a safe location in the event of a natural disaster	Full Refund	Full Refund	Full Refund	Full Refund
Compassionate Home Travel* In the event of the death of a close family member, available after one year of cover	One return economy air ticket	One return economy air ticket	One return economy air ticket	One return economy air ticket
Repatriation or Local Burial* Where death occurs outside the Home Country. Not available if you are aged over 65	Up to £7,500/\$15,000/€11,250	Up to £7,500/\$15,000/€11,250	Up to £10,000/\$20,000/€15,000	Full Refund
OUTPATIENT TREATMENT BENEFITS				
MRI, CT, PET Scans	Full Refund	Full Refund	Full Refund	Full Refund
Hormone Replacement Therapy When not related to the menopause	Full Refund	Full Refund	Full Refund	Full Refund
Outpatient Services > General Physician fees > Specialist and Consultant fees > Prescription Drugs and Dressing > X-Rays, diagnostic and pathology tests	Not Covered	Full Refund £50/\$100/€75 excess per claim #	Full Refund £50/\$100/€75 excess per claim #	Full Refund £50/\$100/€75 excess per claim # ~
Physiotherapy Up to 20 sessions				
Complementary Therapies Osteopathy, Chiropractic, Homeopathy and Acupuncture				
Chinese Medicine Consultations and medications provided by a registered Chinese Medicine Practitioner	Not Covered	Not Covered	Up to £200/\$400/€350 20% co-insurance	Up to £400/\$800/€600 20% co-insurance
Nursing at Home When medically necessary and prescribed by a Physician	Full Refund Up to 26 weeks	Full Refund Up to 26 weeks	Full Refund Up to 26 weeks	Full Refund Up to 26 weeks
MENTAL HEALTH BENEFITS				
Outpatient Psychiatric Services > General Physician and Consultant fees > Prescription Drugs available after one year of cover	Not Covered	Not Covered	Full Refund £50/\$100/€75 excess per claim #	Full Refund £50/\$100/€75 excess per claim #
Outpatient Psychiatric Therapies Counselling, Cognitive Behavioural Therapy and Psychotherapy. When referred by a Physician, available after one year of cover	Not Covered	Not Covered	Up to £500/\$1,000/€750 20% co-insurance	Up to £1,000/\$2,000/€1,500 20% co-insurance
DENTAL CARE BENEFITS				
Dental Treatment following an Accident To restore or repair sound natural teeth	Full Refund	Full Refund	Full Refund	Full Refund
Routine Dental Treatment	Not Covered	Up to £300/\$600/€450 20% co-insurance	Up to £500/\$1,000/€750 20% co-insurance	Up to £1,000/\$2,000/€1,500 20% co-insurance
MATERNITY CARE BENEFITS				
Normal Pregnancy and Childbirth Available after one year of cover	Not Covered	Not Covered	Up to £6,000/\$12,000/€9,000	Up to £15,000/\$30,000/€22,500
Complicated Pregnancy and Childbirth Available after one year of cover	Not Covered	Not Covered	Up to £12,000/\$24,000/€18,000	Up to £30,000/\$60,000/€45,000
Complications of Pregnancy Available after one year of cover	Not Covered	Not Covered	Full Refund	Full Refund
Newborn Care Available when a newborn child is enrolled on the plan	Up to £50,000/\$100,000/€75,000	Up to £50,000/\$100,000/€75,000	Up to £50,000/\$100,000/€75,000	Up to £50,000/\$100,000/€75,000
Congenital Conditions and Birth Defects When diagnosed within one year of birth	Not Covered	Not Covered	Not Covered	Up to £25,000/\$50,000/€37,500 Lifetime limit
WELL BEING BENEFITS				
Routine Health Screening Preventative health checks available after one year of cover	Not Covered	Not Covered	Up to £300/\$600/€450 20% co-insurance	Up to £500/\$1,000/€750 20% co-insurance
Vaccination Benefit Childhood and travel-related vaccinations	Up to £200/\$400/€300	Up to £200/\$400/€300	Up to £200/\$400/€300	Up to £200/\$400/€300
Optical Care Eyesight examinations and a contribution towards the cost of lenses to correct vision, available after one year of cover	Not Covered	Not Covered	Not Covered	Up to £300/\$600/€450 20% co-insurance
Hearing Care Hearing tests and a contribution towards the costs of a hearing aid, available after one year of cover	Not Covered	Not Covered	Not Covered	Up to £300/\$600/€450 20% co-insurance
ADDITIONAL BENEFITS				
HIV/AIDS Benefit Available after two years of cover	£10,000/\$20,000/€15,000 Lifetime limit	£10,000/\$20,000/€15,000 Lifetime limit	£10,000/\$20,000/€15,000 Lifetime limit	£10,000/\$20,000/€15,000 Lifetime limit
Chronic Condition Treatment	Covered within listed benefits	Covered within listed benefits	Covered within listed benefits	Covered within listed benefits
Out of Area Cover For emergencies and acute episodes of existing covered medical conditions	Up to £20,000/\$40,000/€30,000 Max 60 days	Up to £30,000/\$60,000/€45,000 Max 60 days	Up to £40,000/\$80,000/€60,000 Max 60 days	Up to £50,000/\$100,000/€75,000 Max 60 days
ADDITIONAL SERVICES				
WorldAware	Included	Included	Included	Included
Bloodcare Foundation	Included	Included	Included	Included
Best Doctors Second Opinion Service	Included	Included	Included	Included

A claim is considered to be a course of treatment per diagnosed medical condition

~ The Executive Plus Plan can be further enhanced by paying an additional premium to remove the £50/\$100/€75 excess per claim on the Outpatient Services benefit.

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