



Medi-Extra

Hospitalization & Hospital Special Services

- Local : Unlimited cover for treatment whilst as a bed patient in the registered class of the insured.
- Abroad: Same – except that the MAXIMUM tariffs of CURACAO will apply for the particular class of insured.

Surgery

Customary and Normal charges as published by the government of CURACAO will be considered for the particular operation performed in the area of the country of the operation. *In the event of arbitration the Medical Advisor of Citizens Insurance will be the final consideration.*

Doctor Visits

Reimbursement for each visit to a maximum of Nafl. 42,- limited to one visit per day. *EXCLUSIONS will apply to General Health Examination.*

Specialist

Unlimited treatment – however maximum per treatment will be in accordance with the tariffs of the Medical Association of CURACAO.

Prescribed Drugs

100% of all charges will be reimbursed.

- *Prescriptions must be recommended by the Normal General Practitioner or Specialist*
- *A list of drugs not paid for is published*

Diagnostic X-Ray & Laboratory Expense

100% of all charges will be reimbursed.

Test must be recommended by a Normal General Practitioner or specialist

Maternity Benefits

- Normal Delivery in hospital : Doctor Fee Nafl. 850,-
- Normal Delivery at home : Doctor Fee Nafl. 350,-
- Hospital Care : Reimbursement of 80% of 10 days maximum
- Consult : 1 consult per month up to a maximum of 10 consultation per maternity case
- Echo : 100% will be reimbursed up to 3x per maternity case
- Caesarean Section : Will be covered under normal Hospital Services Benefits and Surgery

Physiotherapy

8 treatments up to a maximum of Nafl. 500,- per ailment per year.

Mental Disease

- Hospitalization : The first 365 days are covered
- Out-of-Hospitalization: *psychiatric* visits to a maximum of Nafl. 1.000,-
- Medical Services : Nafl. 1.500,- per year

Intensive Care

Intensive care hospital charges will be paid in full according to the charges made by the particular hospital in the area of the insured's confinement to a MAXIMUM of 14 days.

Isolation Room

Hospital charges to a Maximum of 4 days.

Ambulance

Charges for transportation to and from the Hospital or medical facility within local confines or the airport of board facility.

Air Transport

80% of the cost – A MAXIMUM of Nafl. 2.000,-

Insured must spend at least three days in hospital abroad and must be recommended in the normal way. (limited to two trips per annum)

Preventive Medicine

Benefits will be paid for costs incurred for the following examination and/or procedures by a general practitioner or specialist;

- Breast cancer examination (*Mammography*)
- Cervical cancer examination (*Cervix Smear/ Pap Smear*)
- Prostate cancer examination *for insured older than 45 year once a Year*

Dental Care

- 100% of Preventive Expenses will be reimbursed
- 80% of Minor Restorative Expenses will be Reimbursed
- 50% of Major Restorative Expenses will be Reimbursed

Max Coverage per year Nafl. 2,000. *Policy Condition will be applied.*

- Orthodontia 80% of Expenses up to a MAXIMUM of Nafl. 3,000.
Expenditure over three years for dependent children under age 15.

Important Information

- **Waiting period on Medical Benefits** : Two (2) months except for accident
- **Waiting period on Dental Benefits** : Six (6) months or "Saneringsbrief"
- **Waiting period on Maternity Benefits:** 280 Days

- **Maximum Per Case:** Nafl. 150.000,-

- **Acceptance Age:** Till 59 years old.
- **Age Loading:** 45 – 50 Premium increases by 20%
51 – 59 Premium increases by 40%

Yearly Premium Medi-Extra Table	
Class	Premium
Class III	Nafl. 1,615.07
Class II	Nafl. 2,141.41
Class I	Nafl. 2,866.50
Child Below Age 13	Nafl. 982.80

Payment made on a quarterly or semi-annual can be arranged:

- Semi-annual premium: 4% increase
- Quarterly premium : 8% increase

Policy Cost: Nafl. 10,-

**INUSRED'S NOT REQUIRED DENTAL COVER, PLEASE DEDUCT NAFL. 150,-
ON CLASS I-II-III**

Optional Additional Coverage

Vision:

- 100% for the cost of frame and standard white glasses up to a maximum of Nafl. 500,-
- 100% for the cost of contact lenses up to a maximum of Nafl. 250,-

The above mentioned coverage is applicable for:

- Dependents up to age 18 every year
- Dependents above age 18 every two years

Waiting Period on Vision: Three months

Vision Yearly Premium: Nafl. 218.40 per person