



MSH INTERNATIONAL

SIACI SAINT HONORE GROUP



# SUMMARY OF BENEFITS

For International personnel

MONDIAL Program – TOP 80 Option

1<sup>st</sup> euro Healthcare Plan





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Your employer has become a member of the PREVINTER\* Association to provide you with worldwide healthcare coverage while on international assignment.

This guide summarizes the healthcare benefits and specific conditions to which you are entitled.

To introduce you to the detailed procedures and services provided for enhanced assistance, please do not hesitate to consult the Practical Guide sent to you when you enrolled, also available on your personal Participant's Pages on [www.previnter-mb.com](http://www.previnter-mb.com).

Your plan is administered by MSH INTERNATIONAL, PREVINTER claims department that can be contacted at any time (see all contact addresses on your personal Participant's Pages on [www.previnter-mb.com](http://www.previnter-mb.com)).

You can alternatively use the available services in your Participant's Page.

**This guide is a summary of the main provisions of the AXA / PREVINTER policy No. 703.681.**

Neither the insurer nor the company, nor PREVINTER, nor MSH INTERNATIONAL can be held responsible if any statement in this guide and any provision in the policy differ.

**In that case, the wording of the policy and of the information guide will prevail.**

*\* PREVINTER is an independent, non-profit association, which offers its member companies the means to optimize their international employee benefit plans.*



# 1 Who is eligible for cover?

- ▶ **YOU**, as an employee of the member company ("third countries nationals" employees or employees on assignment abroad).
- ▶ **YOUR DEPENDENTS** if the family option has been selected:
  - **Your spouse**, provided you are not divorced or living apart under a separation order; or, if you are not married, **your common law spouse** or **partner**. A certificate or an affidavit attesting that you live together or a French "*Pacte Civil de Solidarité*" ("*P.A.C.S.*") will be required
  - **Your children**, and/or those of your spouse (or, if you are not married, those of your common law spouse or partner), provided that they do not earn a living and are financially dependent on you and are:
    - Under age 21,
    - Between age 21 and 26, in full-time secondary or higher education (a written proof of attendance at an educational establishment is required when enrolling and then at the beginning of each new academic year). They may take on paid work provided they do so not for more than three months per year. Dependent children that have a contract for international voluntary service in a company are also eligible.
  - **Your children**, whatever their age if they are physically or mentally disabled and on condition that the handicap has been certified by a competent medical authority before the child's 20<sup>th</sup> birthday (proof of the handicap is required when enrolling and must be regularly verified on request of PREVINTER).

## ENROLLMENT

Your employer pre-enrolls you online.

You receive an e-mail with **your temporary login details** to log in to our website [www.previnter-mb.com](http://www.previnter-mb.com).

**Complete carefully your pre-enrollment, validate it and send it back to us, if any, with the necessary enrolment documents.**

As soon as your employee's case is approved, you receive an e-mail to confirm your enrollment and give you **your definitive login details to access to your personal and secure Participant's Page** on [www.previnter-mb.com](http://www.previnter-mb.com).



## 2 Start and end date of your Healthcare Plan

### I START DATE

You are insured as soon as you belong to the eligible category of employees and at the soonest at the start date of the company policy, provided your work contract is active and not suspended.

Your dependents are eligible for cover under the same healthcare plan as you as soon as they are deemed dependent and at the soonest when you become eligible.

**The Healthcare Plan takes effect** for each insured accepted on this Plan:

- without any waiting periods:
  - for the employee who had coverage either under a individual or group basis, in the month preceding their enrolment, with benefits identical to the present plan under the condition that formal proof of previously held coverage is provided,
  - for expenses relating to an accident,
  - for member companies with 20 and more international employees at enrolment.
  
- after completion of the following waiting periods:
  - **10 months**, for medical care relating to pregnancy and childbirth as well as health check-ups,
  - **6 months**, for psychiatry, dental and vision care,
  - **3 months**, for medical care unrelated to an accident, a medical emergency or a contagious illness which occurs after the date of enrolment.

**In all cases, the 10 months waiting period is applied for medical care relating to pregnancy and childbirth.**

### I DURATION OF COVERAGE

Your cover under the present healthcare plan as well as the extension privilege end in any case:

- ▶ For all employees and therefore for their dependents on the same date, i.e.:
  - when the work contract ceases (e.g. for resignation, dismissal or retirement),
  - when the employee does not belong to the eligible category any more,
  - when the employee starts receiving an old age pension or similar.
  
- ▶ For all employees of the insured companies as well as for their dependents:
  - on the date of policy termination by the member company, PREVINTER or the insurer



## 3 Your Healthcare Plan

### I APPLICABLES RULES

PREVINTER will reimburse your medical expenses incurred throughout the world as of the first euro.

All treatment must be recognized by local medical authorities and delivered by licensed physicians practicing within the scope of their license (in compliance with all legal, regulatory and other dispositions required to practice).

Medical expenses are reimbursed after payment of their part by any Social Security scheme (French or other) or by any other health insurance through which you might be covered.

### I APPLICABLES RULES FOR DEPENDENTS

PREVINTER healthcare plan is complementary to a primary insurance plan for:

- Your children enrolled in full-time secondary or higher education. Whenever possible, they must enroll to the Student Social Security plan of the country where they study.
- Your spouse, common law spouse or partner to whom you are bonded by a French P.A.C.S., remaining in your country of origin and covered by a Social Security plan. These dependents must give their Social Security number to the claims department.

### I SCOPE OF COVERAGE

Your medical expenses must have been incurred:

- In the country of expatriation or country of origin,
  - In a third country:
    - during a business trip,
    - during a private trip, only for expenses resulting from an accident or unforeseen illness arising during that trip.
- ▶ « **Accident** »: Any unintentional personal injury suffered by an insured and arising from the sudden unexpected effect of an external cause.
- ▶ « **Unforeseen illness** »: A sudden illness that must not be caused by an illness or hospitalization prior to the trip departure date.



## I REASONABLE AND CUSTOMARY

Under this plan, medical charges actually incurred are reimbursed in line with “**reasonable and customary costs**” and according to the limits outlined in the following table.

This "reasonable and customary" notion is assessed according to the medical practice prevailing in the country where healthcare is delivered (kind of treatment, quality of care and equipment, geographical zone and country).

Costs are deemed "reasonable and customary" on the basis of codification standards and treatment referencing procedures in each country according to the ICD (International Coding Diagnostic).

In the USA for example, fees are deemed UCR (Usual, Customary and Reasonable) according to the CPT Physician Guide (Current Procedural Terminology Physician Guide).

In France, the CCAM (*Classification Commune des Actes Médicaux*) is the reference used.

You can freely choose your medical practitioners and facilities.

**However, unreasonable and unusual costs may be rejected or only partially reimbursed.**

### USEFUL TIP

For further information, please consult the « Expat Health » information website on your Participant's Pages on [www.previnter-mb.com](http://www.previnter-mb.com) or the Practical Guide you received after enrolling.



## 4 Reimbursements and ceilings

### TOP 80 OPTION

HOSPITALIZATION	
<ul style="list-style-type: none"> <li>▪ Medical fees / Room and Board in a semi-private room</li> <li>▪ Private room</li> <li>▪ Bed for the accompanying adult of a hospitalized child under 12 years of age</li> <li>▪ Transport by road ambulance (if medically justified)</li> <li>▪ Reconstructive surgery</li> <li>▪ Convalescent facilities (maximum 60 days)</li> </ul>	<ul style="list-style-type: none"> <li>▪ 100% of charges</li> <li>▪ 100% of charges</li> <li>▪ 100% of charges</li> <li>▪ 100% of charges (to the nearest hospital)</li> <li>▪ 100% of charges if following an accident occurred during the period of coverage</li> <li>▪ 100% of charges</li> </ul>
OUTPATIENT MEDICAL TREATMENT	
<ul style="list-style-type: none"> <li>▪ Consultations and home visits (excluding dentists and ophthalmologists)</li> <li>▪ Paramedical services (nurses, physiotherapists, speech therapists, orthoptists, podiatrists, etc)</li> <li>▪ Laboratory tests</li> <li>▪ X-rays, Medical imaging</li> <li>▪ Prescription drugs</li> </ul>	<ul style="list-style-type: none"> <li>▪ 80% of charges</li> <li>▪ 80% of charges</li> <li>▪ 80% of charges</li> <li>▪ 80% of charges</li> <li>▪ 80% of charges</li> </ul>
ALTERNATIVE MEDICINE	
<ul style="list-style-type: none"> <li>▪ Acupuncture, Osteopathy, Chiropractic, Homeopathy, Psychotherapy</li> </ul>	<ul style="list-style-type: none"> <li>▪ 80% of charges up to 10 sessions per person per calendar year (aggregate benefits for all alternative medicine)</li> </ul>
PREVENTIVE MEDICINE	
<ul style="list-style-type: none"> <li>▪ Inoculations and preventive prescription drugs</li> <li>▪ Medical check-ups for insured over 35 years (including the pre-expatriation check-up)</li> </ul>	<ul style="list-style-type: none"> <li>▪ 80% of charges if compulsory and prescribed by a medical doctor</li> <li>▪ Not covered</li> </ul>
VISION CARE	
<ul style="list-style-type: none"> <li>▪ Physician fee &amp; Diagnostic, preventive and necessary basic care</li> <li>▪ Eyeglass lenses, Frames, Contact lenses (including disposal lenses if medically prescribed)</li> </ul>	<ul style="list-style-type: none"> <li>▪ 80% of charges</li> <li>▪ 100% of charges up to € 270 per insured per calendar year</li> </ul>
DENTAL CARE	
<ul style="list-style-type: none"> <li>▪ Dentist fees &amp; dental care (preventive and surgical treatment), Parodontology (including gingivectomy)</li> <li>▪ Dental prostheses</li> <li>▪ Orthodontics (if treatment starts before child's 18<sup>th</sup> birthday)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Not covered</li> <li>▪ Not covered</li> <li>▪ Not covered</li> </ul>



PSYCHIATRY / DETOXIFICATION	
Out-patient medical treatment	▪ Not covered
Hospitalisation	▪ Not covered
PREGNANCY AND CHILDBIRTH	
	▪ Not covered
THERMAL SPA	
	▪ Not covered

## 5 Exclusions

The PREVINTER healthcare plan does not cover all treatment.

### ARE EXCLUDED:

- treatment performed by a person who is not legally licensed to carry out such procedures;
- whatever is not prescribed by a doctor or useless from a medical point of view ; medical or dental care that is not up to professional standards;
- treatment for which the insured has not made the required request for prior approval or for which such approval was denied;
- aesthetic treatment and cosmetic surgery of any type or nature, except following an accident occurring while this policy is in effect, with prior approval from PREVINTER and according to the terms, conditions and limitations stipulated by PREVINTER;
- surgical operations not undergone as an emergency and for which insurer's previous agreement has not been secured;
- charges for services or supplies ordered or received prior to the effective date of coverage or after the termination of coverage;
- no pharmaceuticals commonly used such as cotton wool, surgical spirit or sun-cream...;
- in the event of hospitalization, personal expenses such as telephone calls and television rental;
- expenses considered as unusual and excessive with respect to the country in which they were incurred;
- treatment against obesity;
- treatment of fertility and infertility;
- travel and accommodation expenses in relation with medical care;
- laser refractive surgery / radial keratotomy (myopia surgery);
- surgical dental implants;
- chiropody treatment when unrelated to an illness or accident;





- expenses normally refunded by any health plan (Social Security system or insurance company) whose benefits the insured is supposed to have received;
- medical care given in a public hospital or any such establishment, usually free of charge, even without the current healthcare coverage;
- expenses reimbursed or likely to be reimbursed by any other health plan;
- medical care given in nursing homes or old-age homes or resulting from help provided to people in their everyday life, even if those people are suffering from permanent or temporary disability;
- treatment considered as experimental;
- convalescent facilities unless preceded without any interruption by a hospitalization of at least 30 days for important surgical reasons;
- room, board, and treatment in a specialized establishment after a spa;
- room, board, and treatment in a physical therapy, rehabilitation, or retraining facility,
- any dental treatment;
- thermal spa;
- in-patient medical treatment for mental or nervous diseases for detoxification.
- health check-up;
- any expenses resulting from pregnancy and childbirth (all pre-natal care and post-natal care as well as the delivery).

For more information, **do not hesitate to contact us.**