heyavo.com

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This Benefit Schedule forms part of Your Policy with Avo Insurance Company Limited and it contains the limits which apply to the Plan you have chosen. You must read this Benefit Schedule together with the Terms and Conditions and Policy Schedule.

Avo Northbound Medical Protection - Benefit Schedule

Benefits Item			Benefit Plan Standard
Annual Benefit Limit			**RMB7,000,000**
a)	**Medical Expenses Benefit**		
	i)	Maximum benefit limit per Policy Year	RMB4,000,000
	ii)	Deductible per Policy Year	RMB20,000
	iii)	Reimbursement Ratio[1]	70%
b)	**Specific Drug Expense Benefit[2]**		
	i)	Maximum benefit limit per Policy Year	RMB1,000,000
	ii)	Deductible per Policy Year	RMB0
	iii)	Reimbursement Ratio[1]	70%
c)	**Proton and Heavy Ion Therapy Benefit**		
	i)	Maximum benefit limit per Policy Year	RMB1,000,000
	ii)	Deductible per Policy Year	RMB0
	iii)	Reimbursement Ratio[1]	100%
d)	**External Drugs and Medical Devices Benefit**		
	i)	Maximum benefit limit per Policy Year	RMB1,000,000
	ii)	Deductible per Policy Year	RMB0
	iii)	Reimbursement Ratio[1]	70%
Value-added Healthcare Services[3]			
	i)	Medical Escort Service	Applicable
	ii)	Green Channel Service	
	iii)	Hospital Assistance	
	iv)	Second Opinion for Critical Illness	
	v)	Nursing Care	
	vi)	Proton and Heavy Ion Therapy Medical Assistance	
	vii)	Pre-Treatment Genetic Testing for Medication Guidance	
	viii)	Hospital Deposit Guarantee	
	ix)	Specific Drug Direct Billing Service	

1. Reimbursement ratio after deducting the deductible for each policy year.
2. Prior written approval from the Company is required.
3. Please refer to the Healthcare Services Handbook for detailed services and frequency limits of the Value-added Healthcare Services. You can obtain and review the Healthcare Services Handbook at the time of application.