Care4ever
HEALTH INSURANCE

PACIFIC CROSS

Retiring or taking a break from work?

Continued protection from Care4ever



pacificcrosshealth.com | 02-401-9189

The Health Insurance Partner You Trust
เรื่องประกันสุขภาพไว้ใจเรา

Mobile App

LINE OA

Care4ever
HEALTH INSURANCE

Take a break. Stay protected.

Immediate coverage with no waiting period

Worldwide coverage with 24/7 emergency assistance provided by Assist America

Coverage up to THB 1.2 million per confinement

Get a premium discount of up to 50%. You can choose to include a deductible, or opt for a 20% discount by excluding OPD coverage

Accident coverage up to THB 150,000, expandable up to THB 5 million

Home Nursing Care after hospital discharge*

**Special home nursing care may be provided when medically necessary for continued treatment after hospitalization, subject to the Company's prior approval.*

560 network hospitals

Medical assessment waiver

Optional dental and optical benefits available

Pacific Cross Care4ever Health Insurance

Live with confidence through continued protection.
For individuals transitioning from Pacific Cross group insurance coverage.

Coverages		Standard	Standard Plus	Standard Extra	Premier
Maximum benefit amount per confinement		270,000	450,000	780,000	1,200,000
1. Inpatient Benefits					
Section 1	Room and board, and hospital service charges (inpatient) per confinement				
	Non-Intensive Care Unit (maximum per day and maximum 45 days)	2,000	3,000	4,000	5,000
	In case that the insured is admitted to the Intensive Care Unit (ICU), the benefit payable for room and board will be 2 times the Non-ICU benefit (maximum per day and maximum 15 days)	4,000	6,000	8,000	10,000
Section 2	Medical service fee for diagnosis or treatment, blood and blood components fee, nursing services fee, medicine fee, parenteral nutrition fee, and medical supplies fee per confinement	20,000	50,000	100,000	200,000
2.1	Medical service fee for diagnosis	included in maximum benefit of Section 2			
2.2	Medical service fee for treatment, blood and blood components fee, and nursing services fee				
2.3	Medicine fee, parenteral nutrition fee, and medical supplies fee				
2.4	Medicine fee and consumable medical supplies fee (medical supplies 1) for take home (maximum 14 days)	2,000	3,000	4,000	5,000
Section 3	Medical professional (doctor) examination and treatment fee per confinement (maximum per day and maximum 45 days)	1,200	1,700	2,200	2,700
Section 4	Surgical medical expenses (surgery) and procedures per confinement	20,000	50,000	100,000	200,000
4.1	Operating rooms fee and procedure room fee	included in maximum benefit of Section 4			
4.2	Medicine fee, parenteral nutrition fee, medical supplies fee, and surgical and procedure equipment fee				
4.3	Medical professional fee which performing surgery and procedure for surgeon (including surgical assistant doctor) (Doctor Fee)				
4.4	Medical professional fee for anesthesiologist (Doctor Fee)				
4.5	Medical expenses for organ transplant surgery (2 times of benefit Section 4)	40,000	100,000	200,000	400,000

Remarks : Benefits and coverage are subject to the selected insurance plan and the Company's underwriting terms and conditions.

Coverages		Standard	Standard Plus	Standard Extra	Premier
Section 5	Major surgery that does not require inpatient admission (Day Surgery) per confinement	20,000	50,000	100,000	200,000
2. Benefits in case that does not require Inpatient Admission					
Section 6	Medical service fee for directly related diagnostic tests before and after inpatient admission, or OPD follow-up fee that are directly related to the ongoing treatment after inpatient admission per confinement				
6.1	Medical service fee for directly related diagnostic tests occuring within 30 days before and after inpatient admission	included in maximum benefit of Section 2			
6.2	OPD follow-up fee after inpatient admission per visit, for continued treatment within 30 days after discharge from that inpatient admission (excluding diagnostic medical service fee)				
Section 7	Medical expenses for injuries in outpatient cases within 24 hours of each accident (including follow-up treatment within 15 days after the initial treatment date for each injury)	4,000	6,000	8,000	10,000
Section 8	Rehabilitation fee after each inpatient admission per confinement within 30 days after that inpatient admission	included in maximum benefit of Section 2			
Section 9	Medical service fee for the treatment of chronic renal failure by dialysis through the veins per policy year	20,000	50,000	100,000	200,000
Section 10	Medical service fee for the treatment of tumors or cancer by radiation therapy, interventional radiology, therapeutic nuclear medicine per confinement	As charged			
Section 11	Medical service fee for cancer treatment using chemotherapy per confinement	As charged			
Section 12	Emergency ambulance service fee per occurrence	1,000	1,000	2,000	2,000
Section 13	Medical expenses for minor surgical procedures per occurrence	20,000	50,000	100,000	200,000
3. Endorsement Document for Extended Coverages Item 3.1-3.3 are additional benefits provided on top of the max. benefits under Section 2					
3.1	Medical equipment and instrument fee, and permanent artificial organs fee (5-year waiting period)	20,000	50,000	100,000	200,000
3.2	Home special nursing care service fee (continuing immediately after hospital discharge as prescribed by doctor; maximum 30 days)	Not covered		10,000	20,000
4. Outpatient Benefits and PA					
4.1	Maximum outpatient benefit amount per policy year	30,000	45,000	60,000	75,000
	Outpatient medical treatment (maximum 1 visit per day; 30 visits per year)	1,000	1,500	2,000	2,500
	Expenses for outpatient physical therapy, acupuncture, and chiropractic treatment (combined with outpatient medical treatment; maximum per year)	Not covered	3 visits per year		
4.2	Loss of Life, Dismemberment, Loss of Sight, or Total Permanent Disability due to Accident (Orbor1) (including Murder or Assault, and Riding or Travelling on Motorcycle)	100,000	100,000	150,000	150,000
	Orbor1 : additional purchase allowed maximum according to selected plan (Additional premium rate 145 baht / Sum insured 100,000 baht)	1,000,000	3,000,000	3,000,000	5,000,000
5. International Assistance Services					
5.1	24-hour Emergency assistance services	Fully indemnified (services available worldwide)			
5.2	Emergency medical evacuation				
Emergency medical evacuation services during travel shall commence when the insured person travels at least 150 kilometers away from his/her place of residence or crosses an international border, provided that the duration of such travel does not exceed 90 consecutive days.					
6. Premium Discount Options					
6.1	Removal of outpatient coverage	20% Discount			
6.2	The insured is responsible for paying deductible the first baht of medical expenses per policy year.	No Discount		20,000 : 15% Discount 40,000 : 25% Discount 100,000 : 32.5% Discount 200,000 : 40% Discount 300,000 : 50% Discount	

Net Premium (Baht/year)

	Age Group	Standard	Standard Plus	Standard Extra	Premier
APPLICANT	55 - 60	29,754	41,008	51,275	65,847
	61 - 65	38,244	52,710	65,907	84,637
	66 - 70 (Renewal)	60,245	83,034	103,820	133,325
	71 - 75 (Renewal)	95,386	131,465	164,377	211,095

	Age Group	Standard	Standard Plus	Standard Extra	Premier
DEPENDENT	0 - 5 (35% Co-payment)	36,693	45,866	56,350	72,219
	6 - 10	26,451	36,208	44,485	57,013
	11 - 15	15,596	18,715	22,993	29,575
	16 - 20	14,259	17,824	21,898	28,364
	21 - 25	14,561	18,685	23,362	30,003
	26 - 30	14,769	20,351	25,448	32,679
	31 - 35	15,285	21,065	26,337	33,822
	36 - 40	15,504	21,370	26,719	34,312
	41 - 45	16,893	23,284	29,111	37,385
	46 - 50	19,197	26,458	33,082	42,482
	51 - 54	20,773	28,574	35,728	45,880
	55 - 60	29,754	41,008	51,275	65,847
	61 - 65	38,244	52,710	65,907	84,637
	66 - 70 (Renewal)	60,245	83,034	103,820	133,325
	71 - 75(Renewal)	95,386	131,465	164,377	211,095

Remarks

• These net premiums exclude the stamps duty. The premium for age over 65 years old is use for guidance only. The actual premium is subject to PCHI's underwriting result. • The applicant must be aged between 55-65 years on the date of insurance application and is eligible for renewal up to age 75 years, provided that the applicant falls within occupation classes 1-3 only. • The company can no longer accept children for standalone policies. For children aged 0–5 years, coverage will be provided under 35% copayment condition. For children aged 0–10 years, enrollment must be made jointly with at least one parent or guardian (father, mother, or legal guardian). • The employee's spouse and children may apply for insurance coverage, subject to the same terms and conditions as the employee. The sum insured for the spouse and/or children must not exceed that of the employee. • The company will pay benefits as actually paid, not exceeding the maximum benefit per confinement. • Receiving medical treatment outside of Thailand must always be approved by the company in advance. • Applicants for insurance must primarily reside in Thailand, or have stayed in the country for a minimum of 6 months within a 12-month period. • Home Nursing Care services, subject to policy terms and conditions. • The information provided in this health plan brochure is partial and intended solely to inform the applicant for the purpose of making an insurance decision with the company. All coverage conditions shall be governed by the definitions, general terms and conditions, general exclusions, and coverage agreements as stated in the company's health and personal accident policy. • The applicant is obligated to disclose truthful information during the application process. Any concealment of facts or false statements may result in the insurer rescinding the contract and denying any claim payments under the policy.

Underwriting Conditions

• The applicant must be transitioning from a Pacific Cross group insurance policy and must have been covered under such policy for at least 1 year. • The applicant must apply between 31 and 60 days after leaving employment or before the group insurance termination date. • The 30-day and 120-day waiting periods may be waived for applicants who meet the specified continuity criteria, subject to the company's underwriting criteria. • Medical assessment waiver is subject to the company's underwriting criteria and approval. • Existing exclusions shall remain applicable unless specifically reviewed and removed by the company. • Pre-existing conditions must be fully disclosed by the applicant. The company may apply premium loading, exclusions, co-payment, or a deductible, or decline coverage. • Only the spouse or child of the main insured who was previously covered under the same group policy is eligible to apply for this plan and may continue under the same terms, subject to the applicable plan, coverage, and the company's underwriting criteria. • The insured's spouse or child who was not previously covered under the same group policy is not eligible to apply for this plan. • The proposed insured is advised to thoroughly understand the coverage, terms, conditions, and exclusions of the policy before deciding to purchase insurance. • Underwriting guidelines shall be subject to the Company's conditions.