

BENEFITS	COVERAGE/ LIMIT
OUT PATIENT:	
<ul style="list-style-type: none"> ✓ Consultation ✓ Pre and Post Natal Consultations ✓ Routine and Laboratory Procedures ✓ Special Procedures 	Covered up to Maximum Benefit Limit/ Per Illness per year Covered up to 14 Sessions
IN PATIENT:	
Emergency Admission	Covered up to MBL Covered up to MBL
Cataract Surgery Motor Vehicular Accident not due to members fault (with police report) Scoliosis including necessary procedure, except physical therapy sessions.	Covered 25,000 up to MBL Covered up to MBL Covered up to P20,000
Congenital Conditions except physical therapy and developmental disorders Valvular Heart Diseases/ Pre-existing Illness even dreaded illness Work Related Conditions	Covered up to P20,000 Covered up to MBL Covered up to MBL
EMERGENCY:	
Outside the Philippines	Covered 100% but not exceeding P30,000 thru reimbursement
Areas without affiliated Hospitals	Covered up to MBL based HMO rate
Initial Treatment of Animal Bites except cost of vaccines	Covered within 24 hours up to MBL
Annual Physical Exam: <ul style="list-style-type: none"> ⊗ Physical Examination ⊗ Chest X-ray ⊗ Complete Blood Count ⊗ Urinalysis ⊗ Fecalalysis 	Covered once a year
Basic Dental Benefits: <ul style="list-style-type: none"> ⊗ Oral Prophylaxis ⊗ Consultation ⊗ Simple Tooth Extraction ⊗ Permanent Fillings (2 Teeth) ⊗ Gum Treatment ⊗ Other Basic Dental Benefits 	Covered

Special Benefits	COVERAGE/LIMIT
Covid 19 Coverage	Covered up to MBL
Passive and Active Vaccines for Animal Bites	Covered up to MBL
Life Insurance	Natural Death- P25,000-P100,000 Accident Death- Additional P50,000-P100,000
Physical Therapy and Occupational Therapy excluding sub specialties such as cardiac rehabilitation, pulmonary rehabilitation	12 Sessions/ Year or Subject to MBL
Wellness Program	Minimum 2 Wellness to maximum 12 Wellness Program based on the number of heads or principal enrollees
Maternity Assistance	280 Days waiting period (based on the number of heads or principal enrollees) Normal Delivery - Php5,000 Cesarean Delivery - Php 10,000

Premium Rates:

For Minimum 20-99 Employees

PRINCIPAL	MAXIMUM BENEFITS LIMIT	VISMIN ANNUAL PREMIUMS	NATIONWIDE ANNUAL PREMIUMS
WARD	50,000	8,000.00	8,510.00
REGULAR PRIVATE	100,000	12,500.00	13,800.00
REGULAR PRIVATE	150,000	15,800.00	16,900.00
REGULAR PRIVATE	200,000	20,865.00	21,780.00

For Minimum 100-300 Employees

PRINCIPAL	MAXIMUM BENEFITS LIMIT	VISMIN ANNUAL PREMIUMS	NATIONWIDE ANNUAL PREMIUMS
WARD	50,000	7,800.00	8,205.00
REGULAR PRIVATE	100,000	12,280.00	13,500.00
REGULAR PRIVATE	150,000	15,500.00	16,600.00
REGULAR PRIVATE	200,000	20,430.00	21,450.00

For Minimum 301-499 Employees

PRINCIPAL	MAXIMUM BENEFITS LIMIT	VISMIN ANNUAL PREMIUMS	NATIONWIDE ANNUAL PREMIUMS
WARD	50,000	7,300.00	7,800.00
REGULAR PRIVATE	100,000	12,000.00	13,120.00
REGULAR PRIVATE	150,000	15,170.00	16,200.00
REGULAR PRIVATE	200,000	20,110.00	21,050.00

For Minimum 500+ Employees

PRINCIPAL	MAXIMUM BENEFITS LIMIT	VISMIN ANNUAL PREMIUMS	NATIONWIDE ANNUAL PREMIUMS
WARD	50,000	7,000.00	7,500.00
REGULAR PRIVATE	100,000	11,800.00	12,700.00
REGULAR PRIVATE	150,000	14,820.00	15,800.00
REGULAR PRIVATE	200,000	19,700.00	20,650.00

Note:

All premium rates are subject for approval based on the existing benefits, enhancement, utilization and based on the chosen insurance provider.