

# HIMALAYAN GENERAL INSURANCE CO.LTD.

BABARMAHAL, P.O.BOX 148, KATHMANANDU, NEPAL  
Tel : 4231788 / 4213014, Fax : 4241517, Email : ktm@hgi.com.np

## OVERSEAS MEDICLAIM & TRAVEL INSURANCE

### GOLD PLAN- PLAN - 'A' (World wide EXCLUDING USA & CANADA)

Medical Only - A to C			
Age band	5 - 40	41 - 60	61 - 70
PERIOD	US\$	US\$	US\$
DAY 1 - 7	30	36	46
DAY 8 - 14	38	41	54
DAY 15 - 21	40	43	57
DAY 22 - 28	42	46	64
DAY 29 - 35	50	54	74
DAY 36 - 47	55	59	84
DAY 48 - 60	60	67	95
DAY 61 - 75	73	80	118
DAY 76 - 90	84	94	137
DAY 91 - 120	135	147	218
DAY 121 - 147	165	180	260
DAY 148 - 180	202	220	330

Package Policy - A to N		
5 - 40	41 - 60	61 - 70
US\$	US\$	US\$
34	39	53
42	44	63
44	47	67
47	52	73
56	61	84
62	68	97
72	79	117
87	96	135
102	114	158
168	176	262
200	210	321
250	265	390

Annual Multi Trip			
Maximum Any One Trip 31 Days	123.00	135.00	220.00

Annual Multi Trip		
140.00	152.00	250.00

### PLAN - 'B' (World wide INCLUDING USA & CANADA)

Medical Only - A to C			
Age band	5 - 40	41 - 60	61 - 70
PERIOD	US\$	US\$	US\$
DAY 1 - 7	48	66	87
DAY 8 - 14	66	88	96
DAY 15 - 21	72	93	101
DAY 22 - 28	77	105	115
DAY 29 - 35	90	120	135
DAY 36 - 47	104	144	162
DAY 48 - 60	144	207	231
DAY 61 - 75	201	295	328
DAY 76 - 90	240	351	393
DAY 91 - 120	332	491	551
DAY 121 - 147	436	650	731
DAY 148 - 180	629	747	867

Package Policy - A to N		
5 - 40	41 - 60	61 - 70
US\$	US\$	US\$
60	82	96
75	103	113
80	109	120
88	125	136
105	145	161
122	175	194
171	250	278
242	356	399
290	426	479
403	599	673
533	794	895
769	946	1060

Annual Multi Trip			
Maximum Any One Trip 31 Days	224.00	300.00	400.00

Annual Multi Trip		
260.00	360.00	486.00

THE ABOVE RATE IS APPLICABLE WITH EFFECT FROM 16.07.2017

#### SCHEDULE OF BENEFITS

Section of Cover	Benefits	Max. Sum Insured	Excess
A	Personal Accident	USD 30,000	Nil
B	Emergency Medical Expenses and Emergency Medical Evacuation and Air Ambulance Expenses	USD 200,000	USD100
	Emergency Dental Care	USD 250	Nil
	Repatriation of Mortal Remains	Covered	USD100
	Travel of one immediate family member	Covered	USD100
	C	Hospital Benefits : USD 25 per each 24 hours of Hospitalisation up to max of USD 250	USD 350
D / E	Loss of Checked Baggage	USD 2,500	USD100
	Delayed Baggage \$ 50 per each 12 hour period of delay	USD 350	12 Hours
F	Loss of Passport	USD 650	Nil
G	Personal Liability	USD 300,000	USD 300 In respect of property damaged only
H	Travel Delay	USD 30 per hours, up to a max of USD 150	12 Hours
I	Hi - Jack \$ 50 per each 24 hr period of detention	USD 75 per day, up to maximum USD 1,500	24 Hours
J	Cancellation and Curtailment	USD 1,500	USD100
K	Emergency return home following death of a close family member	USD 1,500	USD100
L	Catastrophe	USD 4,000	USD100
M	Legal Expenses	USD 12,500	USD100
N	Repatriation of family member travelling with the participant	USD 2,000	USD100