



FAMILY HEALTH INSURANCE

Embrace today, pursue tomorrow





FamilyCare | Walk Alongside Vietnamese Families

The comprehensive FamilyCare medical insurance plan covers all insurance benefits, compensating for medical expenses in the unfortunate events of diseases and accidents occurred to a family member, especially critical illnesses such as cardiovascular, diabetes, cancer... The insurance plans are designed for all families with two generations, including parents and children, with a commitment to walk alongside our clients in building their families, all at an affordable premium. This product, by Liberty, is a practical health care solution to all family members, in ensuring a financial stability and a secure future for all Vietnamese families.

- ✓ Insurance covearage up to VND 1.5B, among the most attractive benefits in the market.
- ✓ Cover both accidents and illnesses, including medical expenses for common diseases such as cardiovascular, diabetes, cancer...
- ✓ Flexible hospital cash allowance benefit, unlimited hospitalization days, and companion bed benefits.
- ✓ Family members are taken a better care with annual check-up, vaccination, dental and optical benefits.
- ✓ Practical maternity care for families.
- ✓ 5 flexible insurance plans, fitting with each person, meeting the insurance need of you and your family.
- ✓ Enjoy international medical services with treatments in Vietnam and overseas.
- Emergency medical evacuation and repatriation in Vietnam and overseas.
- ✓ Renewal guarantee is a promise to stand by your family through years.
- ✓ Transparent and fast claim procedure responding to claim request in 7 working days
- ✓ 24/7 customer service hotline



BASIC BENEFIT SCHEDULE (unit: VND)

HOSPITALIZATION SERVICES	Plan F1 Bronze	Plan F2 Silver	Plan F3 Gold	Plan F4 Platinum	Plan F5 Diamond
Hospital Services Overall Annual Limit	150,000,000	250,000,000	500,000,000	1,000,000,000	1,500,000,000
Hospital Services Surgeon's fee, per policy year Anesthetist's fee, per policy year Other hospital charges, per policy year Room & Board, per day (standard private room) Intensive Care Unit, per day Companion Bed, per day (accompany a dependent child	25,000,000 10,000,000 Fully Covered 1,000,000 3,000,000 Not Applicable	50,000,000 25,000,000 Fully Covered 2,000,000 6,000,000 Not Applicable	100,000,000 50,000,000 Fully Covered 3,000,000 9,000,000 Not Applicable	Fully Covered Fully Covered Fully Covered 4,000,000 12,000,000	Fully Covered Fully Covered Fully Covered 5,000,000 15,000,000 2,000,000
below the age of 18, max 10 days per policy year)				.,,,,,,,,,	
Oncology Treatment Treatment given for cancer received as an Inpatient or Day-patient at the Hospital, max per policy year	50,000,000	125,000,000	250,000,000	500,000,000	Fully Covered
Day Case Treatment Admitted to a hospital bed but does not stay overnight, including outpatient surgery	Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Covered
Local Ambulance Services The medically necessary road ambulance transportation services to and from a local Hospital	Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Covered
Organ transplant In respect of kidney, heart, liver and bone narrow transplants, max per sickness or injury	Not Applicable	Not Applicable	Not Applicable	500,000,000	Fully Covered
Pre and Post Hospitalization Treatment (Outpatient expenses incurred before admission & following	6,000,000	8,000,000	10,000,000	20,000,000	30,000,000
hospital discharge, max per hospitalization) Pre-Hospitalisation Treatment - per policy year, maximum 30 consecutive days prior to hospital admission Post-Hospitalisation Treatment - per policy year, maximum	3,000,000	4,000,000 4,000,000	5,000,000	10,000,000	15,000,000 15,000,000
90 consecutive days from the day of discharge					
Emergency Ward Treatment Services performed in a Hospital casualty ward or emergency room for a period of not more than 24 hours	5,000,000	10,000,000	15,000,000	Fully Covered	Fully Covered
Nursing at Home Max 182 days per policy year	6,000,000	8,000,000	10,000,000	Fully Covered	Fully Covered
Emergency Dental Treatment Immediately following an accident and the teeth repaired must have been sound and natural. Max per policy year	Not Applicable	Not Applicable	Not Applicable	50,000,000	100,000,000
Public Hospital Cash - per day Applicable to all inpatient treatments in public hospitals in Vietnam. Max 30 days per policy year	100,000	200,000	300,000	500,000	1,000,000
Emergency Medical Evacuation/Repatriation	Not Applicable	Not Applicable	Not Applicable	Fully Covered	Fully Covered
Repatriation of Mortal Remains	Not Applicable	Not Applicable	Not Applicable	Fully Covered	Fully Covered
Final Tribute Cost	500,000	1,000,000	2,000,000	3,000,000	5,000,000
Medical/Legal information and assistance	24/7	24/7	24/7	24/7	24/7

OPTIONAL BENEFIT SCHEDULE (Unit: VND)

1. Outpatient Services	Plan 01	Plan 02	Plan 03	Plan 04	Plan O5
Outpatient Overall Annual Limit	10,000,000	15,000,000	20,000,000	35,000,000	100,000,00
General Outpatient Services	Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Covere
Specialist Outpatient Services (Limit per visit)	1,000,000	2,000,000	3,000,000	Fully Covered	Fully Covere
Laboratory and x-ray Services (upon referral)	1,000,000	2,000,000	3,000,000	Fully Covered	Fully Covere
Prescribed Drugs (upon referral)	Fully Covered	Fully Covered	Fully Covered	Fully Covered	Fully Cover
Chinese Herbalist, Bonesetter & Acupuncture (Limit per visit, max 10 visits per policy year)	250,000	350,000	450,000	750,000	1,250,000
Physiotherapy and Chiropractor Treatment (upon referral (Limit per visit, max 15 visits per policy year)	⁽⁾ 250,000	350,000	450,000	750,000	1,250,000
Annual Medical Examination/ Work Permit Medical Check-up (Max per policy year)	Not Applicable	Not Applicable	Not Applicable	1,000,000	2,000,000
Annual Vaccination (Max per policy year)	500,000	500,000	500,000	1,250,000	1,250,000
(Once per year, max per policy year) and a pair of glasses	Not Applicable	Not Applicable	Not Applicable	1,000,000	2,000,000
(Once per year, max per policy year) and a pair of glasses or contact lenses (per policy year) 2. Dental Services (Available when applying t	Applicable	Applicable	Applicable		o-payment)
(Once per year, max per policy year) and a pair of glasses for contact lenses (per policy year) 2. Dental Services (Available when applying to Dental Overall Annual Limit	Applicable cogether with	Applicable optional outpa	Applicable		o-payment) 10,000,00
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Optical Care: Eye check-up (Once per year, max per policy year) and a pair of glasses or contact lenses (per policy year) 2. Dental Services (Available when applying to Dental Overall Annual Limit Routine Oral Examination (including scaling and polishing, Basic Dental Services (Extraction, amalgam fillings, x-rays,	Applicable Together with	Applicable optional outpa	Applicable		
Once per year, max per policy year) and a pair of glasses or contact lenses (per policy year) 2. Dental Services (Available when applying to Dental Overall Annual Limit Routine Oral Examination (including scaling and polishing, Basic Dental Services (Extraction, amalgam fillings, x-rays,	Applicable Fogether with I, once per year, ma	Applicable optional outpa ax per policy year)	Applicable	ect to 20% co	2,000,000 Fully Cover
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^(*) The waiting period for Maternity benefit is 12 consecutive months starting from the first effective date of the Maternity benefit of the Insured. Under any circumstances, conception date of the Insured as confirmed by OB/GYN shall be after the period of 12 consecutive months from the first effective date of the Insured's Maternity benefit.

ANNUAL PREMIUM (Unit: 1000 VND)

				Z	one 0					
Age	Inpatient				Optional Outpatient					
	C/T F1 Bronze	C/T F2 Silver	C/T F3 Gold	C/T F4 Platinum	C/T F5 Diamond	Outpatient 01	Outpatient 02	Outpatient O3	Outpatient O4	Outpatient O5
15 days - 01 year	2,043	3,268	5,106	6,638	8,936	4,437	5,119	6,826	8,988	11,919
02 - 05	1,634	2,614	4,085	5,311	7,149	3,549	4,095	5,461	7,500	10,036
06 - 17	1,389	2,222	3,472	4,514	6,077	2,916	3,364	4,485	6,437	8,690
18 - 24	1,307	2,092	3,268	4,249	5,719	2,408	2,779	3,705	5,586	7,613
25 - 29	1,471	2,353	3,677	4,780	6,434	2,535	2,925	3,900	5,799	7,883
30 - 34	1,634	2,614	4,085	5,311	7,149	2,535	2,925	3,900	5,799	7,883
35 - 39	1,804	2,887	4,510	5,863	7,893	2,799	3,230	4,306	6,242	8,443
40 - 44	1,992	3,187	4,980	6,474	8,714	3,090	3,566	4,755	6,730	9,061
45 - 49	2,199	3,519	5,498	7,147	9,622	3,412	3,937	5,249	7,269	9,744
50 - 54	2,428	3,885	6,070	7,891	10,623	3,767	4,347	5,796	7,865	10,498
55 - 59	2,681	4,289	6,702	8,713	11,729	4,159	4,799	6,399	8,523	11,331
60 - 64	2,960	4,736	7,400	9,619	12,949	4,592	5,299	7,065	9,249	12,250
65 - 69	3,268	5,229	8,170	10,621	14,297	5,070	5,850	7,800	10,050	13,265
70 - 74	3,608	5,773	9,020	11,726	15,785	5,598	6,459	8,612	10,935	14,385
Optional Dental Benefit (to be taken with optional Outpatient)					Zone 0					
Premium									3,518	
Optional Maternity Benefit (to be taken with Inpatient): for each female insured Age Zone 0										
							18 - 24		5,364	
							25 - 29		5,364	
							30 - 34		5,364	
							35 - 39		5,364	
							40 - 44		5,364	

Zone 0: Vietnam

Zone 5: Vietnam, Thailand, Malaysia, Indonesia, Philippines, Laos, Cambodia, Myanmar, Brunei, Timor-Leste (loading 15% on total premium of Zone 0)

Eligility

	Plan F	1 & F2	Plan F3, F4 & F5		
Insured	Individual	Family	Individual	Family	
Eligible age	New customer: 18-49 years old. Renewal customer: up to 74 years old.	New customer: 15 days to 49 years old. Renewal customer: up to 74 years old.	New customer: 18 - 64 years old. Renewal customer: up to 74 years old.	New customer: 15 days to 64 years old. Renewal customer: up to 74 years old.	

Family means wife and/or husband and child(ren) (up to 18 years old or up to 23 as full time student)

Discount

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	Number of insured members	Discount
Family discount	3 or more insured family members	5% 🙋
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Important note:

- The premium rates are effective from March 25, 2021 and are applicable to Occupation I and II and for standard risks. The summary in this brochure supports customers to evaluate the benefits of Liberty FamilyCare Insurance. Reasonable and customary charges will apply to any benefit payment.
- This insurance policy to only available to Vietnamese citizens and permanent residents in Vietnam, excluding citizens of countries under sanctions or embargoes by the United Nations, the United States of America, the European Union or the United Kingdom.
- This brochure is for reference only. For complete details of plan benefits, conditions, limitations and exclusions, please refer to the policy schedule, wording and endorsement (if any), copies of which will be provided upon request.

Liberty Insurance Vietnam (LIV), a leading non-life insurance company, a subsidiary of the Liberty Mutual Insurance, a group with over 100-year history in the general insurance industry in the United States and across the world. Inheriting from the group's expertise, LIV brings international standard products to the Vietnamese.

Liberty Mutual Insurance is the world-acclaimed group:

- The 3rd largest P&C insurer in the US and the 6th in the world.
- Ranked 75th in the Fortune 500 list.

In Vietnam, Liberty Insurance positions with a unique proposition in the non-life insurance market with **advanced technology**, easy and safe online insurance purchasing platform as well as fast and efficient claim process. At every Liberty Insurance office, anywhere in the world, customers are always served by a qualified, experienced and dedicated team.

Each and every Liberty's insurance product has been developed from thorough studies and diligently designed for the Vietnamese people. Liberty insurance products help ensure a better life, serving all lifestyle needs with a wide range of products such as comprehensive auto, home, medical, travel, property and liability insurance products...via traditional, direct and online channels at a reasonable premium. Liberty Insurance has always been highly recognised for our service quality and is the first choice for customers in seeking for practical insurance solutions to protect against unexpected risks and the joy of life.

Liberty Insurance is honoured to be awarded the "Top 10 Most Reputable Non-Life Insurance Companies in Vietnam 2020" accoladed in 2018, 2019, 2020 – a testament to the Liberty team efforts.

Head Office

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Tel: (84-28) 38.125.125 - Fax: (84-28) 38.125.018

Hanoi Branch

Floor 10, East Tower, Hanoi Lotte Center | 54 Lieu Giai Street, Ba Dinh District, Hanoi City, Vietnam. DT: (84-24) 37.557.111 - Fax: (84-24) 37.557.066

Hai Phong Branch

Floor 3, Seabank Tower | No 17, Block 7B, Le Hong Phong Street, Ngo Quyen District, Hai Phong City, Vietnam.

Tel: (84-225) 3.999.366 - Fax: (84-225) 3.999.368

Thai Nguyen Office

Floor 3, Dong A Plaza Tower, 668 Phan Dinh Phung Street, Thai Nguyen City, Vietnam.

Tel: 0938.731.371

Nghe An Office

Floor 3, Nha Viet Building Office, 8 V.I Lenin Boulevard, Vinh City, Nghe An Provice, Vietnam. Tel: 0904.757.333

Danang Office

Floor 2, SAVICO Building, 66 Vo Van Tan, Danang, Vietnam.

Tel: (84-236) 374.9999 | (84-236) 374.9998 Fax: (84-236) 374.9996

Dong Nai Office

101 Vu Hong Pho Street, Area 2, Binh Da Ward, Bien Hoa City, Dong Nai Province, Vietnam.

Tel: (84-251) 2682.555 - Fax: (84-251) 268.2333

Can Tho Office

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24/7 Customer Service Hotline





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