

This Benefit Comparison provides a summary of the optional Maternity Dental and Optical modules that we provide. All limits and monetary amounts shall in all instances be in US\$. Cover is subject to our policy terms and conditions. In the event of any discrepancy, the policy terms and conditions, endorsements and *benefit schedules* shall prevail.

## Maternity Benefits – Optional

Available to females between 19 to 45 years of age who have selected a Hospital & Surgical and Outpatient module with nil deductible.

	Maternity 1	Maternity 2
Delivery including pre and post natal treatment, vitamins and supplements prescribed by the attending <i>physician</i> , elective and <i>emergency</i> caesarean sections and up to seven (7) days of nursery care.	\$10,000 per pregnancy	\$5,000 per pregnancy

## Dental and Optical Benefits – Optional

### Dental – treatment performed or directed by a registered *dentist*

	Dental & Optical 1	Dental & Optical 2
<i>Minor dental treatment</i>	\$1,000 per <i>period of insurance</i>	\$1,000 per <i>period of insurance</i>
<i>Major dental treatment, dental prostheses, dental surgery, periodontics</i>	\$2,500 per <i>period of insurance</i>	80% up to \$2,500 per <i>period of insurance</i>

### Optical

Eye examinations, prescription contact lenses & prescription lenses	\$300 per <i>period of insurance</i>	\$300 per <i>period of insurance</i>
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A 10-month waiting period applies on *major dental treatment, dental prostheses, dental surgery, periodontics* from the time Dental and Optical benefits are added to the policy.