

With GlobalCare you can choose to get medical treatment in over **160 countries** across the world



Edging Forward!



Choose a Health Insurance Plan

Decide which plan fits you & your family's well being needs



Documentation & Evaluation

Our healthcare experts will help you go through the policy documentation and evaluation process



Activate your Coverage

Our 24/7 customer services team will make a personal contact with you for your card activation

Disclosure

- GlobalCare - International Health Insurance is an insurance product underwritten, issued and subject to Terms & Conditions set by Alfalah Insurance Company Limited. It is not guaranteed or insured by Bank Alfalah Limited or its affiliates and Bank Alfalah is acting in the capacity of a distributor only
- It is not a Bank product that pays interest or an investment that accumulated a cash value or other obligation of, or guarantee by Bank Alfalah and/or any member of Bank Alfalah
- Application process and claim settlement is solely at the discretion of Alfalah Insurance. Premium payments made by policyholder will be paid to Alfalah Insurance Company and used to pay for insurance coverage and no amount will be returned to the policy holder at the end of the term
- Bank Alfalah Pakistan PKR Bank account is required to purchase this product

Disclaimer

- GlobalCare - International Health Insurance premium (payable by client) at the time of buying policy and benefits (payable by Alfalah Insurance Company) at the time of claim reimbursement will be in PKR converted from USD prevailing rate of that specific time and date
 - Amount of premium payable under GlobalCare - International Health Insurance can fluctuate depending upon the prevailing rate of USD
 - Benefits/Claims under GlobalCare - International Health Insurance are payable at the prevailing rate of USD on the day of discharge/treatment from hospital and can fluctuate
- FLP Clause.** Policy holder will have a 14 day free look period from the date of deduction during which you can cancel the plan and claim a full refund. There is no refund after 14 days.



Get up to **USD 1,000,000** annual health coverage at hospitals anywhere in the world

Connect with our team for more assistance



☎ 042-111-234-222 📠 0092-345-2318318

✉ globalcare@alfalahinsurance.com

📍 Alfalah Insurance Company
5-Saintmary Park,
Gulberg III, Lahore



Bank Alfalah
The Way Forward

☎ From within Pakistan dial:
+21 111-225-111 or +42 111-225-111

☎ From outside Pakistan dial: +92 21
111-225-111 or +92 42 111-225-111

🌐 www.baf-staging.its.com.pk/contact-us/



☎ 021-111-134-211

✉ globalcare@fib.com.pk

📍 Fidelity Insurance Brokers Pvt Ltd
Office No-1501, 15th Floor, Emerald
Tower, G-19, Block-5, Clifton, Karachi

www.alfalahglobalcare.com

Scan code here for list of partner hospitals



Supported By



In collaboration with



You need global healthcare coverage now, more than ever before

GlobalCare is an international health insurance product re-insured by AXA, one of the world's leading insurance companies. Powered by Alfalah Insurance and in collaboration with Fidelity Insurance Brokers.

GlobalCare offers affordable medical treatments in more than 160 countries across the globe with the convenience of going cashless at more than 1 million healthcare facilities.

GlobalCare is exclusively designed to cater to you and your family's wellbeing needs inside and outside Pakistan. Our 24/7 call center team provides dedicated customer support to our clients during and after treatments.



Access to over 1.9 million hospitals facilities



Cashless payments at partner hospitals



24/7 personal support on call



Brought to you by the leading service providers in the industry



Alfalah Insurance Company Limited, is one of the ventures of the Abu Dhabi Group in Pakistan. Alfalah Insurance started operations towards the end of 2006 and since then has established offices in major cities of Pakistan.

Backed with the state-of-the-art IT Platform, the company offers first class security and service to the insuring public comparable to international standards.



Bank Alfalah is one of the largest private Banks in Pakistan with a network of over 700+ branches in more than 200 cities across Pakistan with an international presence in Afghanistan, Bangladesh, Bahrain, and a representative office in the UAE. The Bank is owned and operated by the Abu Dhabi Group.

Incorporated as a public limited company on 21st June 1992, under the Companies Ordinance, 1984, Bank Alfalah commenced banking operations from 1st November 1997.

The Bank provides financial solutions to consumers, corporations, institutions, and governments through a broad spectrum of products and services, including corporate and investment banking, consumer banking and credit, securities brokerage, commercial, SME, agri-finance, Islamic and asset financing.

JCR-VIS has assigned an entity rating of 'AA+' (double-A plus) for the long-term and 'A1+' (One plus) for the short-term, with a stable outlook. PACRA has assigned Bank Alfalah 'AA+' (double-A plus) entity rating for the long-term and 'A1+' (One plus) for the short-term, with a positive outlook.



As one of the world's leading insurers, AXA has the global setup to take care of you and your family.

For over 55 years, AXA has been helping people who live and work internationally to access the healthcare they need, wherever they find themselves.



Fidelity Insurance Brokers Private Limited is Pakistan's leading multi-line Insurance Brokerage firm with offices across Pakistan. FIB is the global network partner of Lockton, the world's largest independent, privately owned global Lloyds broker.

FIB provides bespoke services including detailed review, analysis and best fit programs customised to your needs and unique business requirements. Our experts provide advisory services, tailored placements and claims advocacy to help protect your business.



Your Choice to Premier Health Care



Diamond

USD 1,000,000

YEARLY MAXIMUM COVERAGE

AS LOW AS USD 775 P.A.



Sapphire

USD 750,000

YEARLY MAXIMUM COVERAGE

AS LOW AS USD 708 P.A.



Emerald

USD 500,000

YEARLY MAXIMUM COVERAGE

AS LOW AS USD 640 P.A.



Pearl

USD 250,000

YEARLY MAXIMUM COVERAGE

AS LOW AS USD 597 P.A.

The Most Comprehensive Health & Medical Coverage



Hospital Accommodation

In-patient or day-patient for eligible treatment as per plan coverage, along with companion accommodation



Hospital Charges

- Diagnostic procedures
- Surgical procedures
- Operating theatre charges
- Nursing care, drugs and dressings
- Surgeon and anaesthetist charges
- Intensive care unit charges
- Consultations and physiotherapy
- Computerised tomography, magnetic resonance imaging, x-rays and other such proven medical imaging techniques



Local Road Ambulance Transport



Inpatient / Day-care Benefits

- Organ Transplant
- Reconstructive Surgery
- Surgical Implants
- Companion Accommodation
- New Born Accommodation
- Inpatient Rehabilitation
- Psychiatric Treatment



Outpatient and Other Benefits

- Pre & Post Hospitalisation
- Radio and/or Chemotherapy
- Kidney Dialysis
- Outpatient Surgical procedures
- Emergency Outpatient Treatment due to accident
- Hormone Replacement Therapy
- Dental care for accidental damage to natural teeth
- Hospice and Palliative Care
- Hormone replacement therapy (HRT)



International Emergency Medical Assistance including Emergency Evacuation & Repatriation

Table of Benefits

The currency is in USD.

	Diamond	Sapphire	Emerald	Pearl
Overall Yearly Maximum Limit, up to	USD 1,000,000	USD 750,000	USD 500,000	USD 250,000
Area of Cover	Worldwide or Worldwide excluding USA (excluding Sanctioned countries)			
Outside area of cover	All areas covered (excluding Sanctioned countries)		Emergency treatment only and up to a maximum limit of USD 300,000 per policy year and subject to inner limits shown below	
Daily Accommodation Charges (per day/night)	Up to USD 240 in Pakistan & India Up to USD 750 Outside Pakistan & India	Up to USD 210 in Pakistan & India Up to USD 540 Outside Pakistan & India	Up to USD 180 in Pakistan & India Up to USD 360 Outside Pakistan & India	Up to USD 150 in Pakistan & India Up to USD 300 Outside Pakistan & India
Companion Accommodation (per night)	USD 100	USD 100	USD 100	USD 100
Congenital Birth Defect (in-patient and daycare treatment) This benefit is available only after 270 consecutive days from the insured person's Policy effective date	USD 6,000	USD 4,500	USD 3,000	USD 1,500
In-Hospital Cash Benefit (per night) This benefit is payable when no other benefit is claimed for under this policy for in-patient treatment	USD 180 per night up to a maximum of 30 days	USD 135 per night up to a maximum of 30 days	USD 90 per night up to a maximum of 30 days	USD 60 per night up to a maximum of 30 days
Psychiatric Treatment (In-patient and daycare treatment) This benefit is available only after 12 consecutive months from the insured person's Policy effective date	USD 2,400	USD 1,800	USD 1,200	USD 300
Hospice & Palliative care. This benefit is available only after 12 consecutive months from the insured person's Policy effective date	Lifetime Upto USD 72,000	Lifetime Upto USD 54,000	Lifetime Upto USD 36,000	Lifetime Upto USD 24,000
Pre-Existing Conditions. This benefit is only available after 12 consecutive months from the insured person's Policy effective date & up to	USD 10,000	USD 7,500	USD 5,000	USD 2,500
<ul style="list-style-type: none"> • Hospital Charges • Organ Transplant • Reconstructive Surgery • Surgical Implants • New Born Accommodation • In-patient Rehabilitation • Pre & Post Hospitalisation • Radio &/or Chemotherapy • Out-Patient Kidney Dialysis • Outpatient Surgical Procedures • Emergency out-patient treatment due to Accident • Hormone replacement Therapy • Local Road Ambulance Transport • International Emergency Medical Assistance (IEMA) • Accidental damage to natural teeth 	<ul style="list-style-type: none"> ✓ 	<ul style="list-style-type: none"> ✓ 	<ul style="list-style-type: none"> ✓ 	

Frequently Asked Questions (FAQ)

01 Who can apply?

You can apply if your principal of country of residence (usual country of residence) is in Pakistan. This means Pakistan is where you usually live or intend to live for at least 185 days in a year. You and/or your spouse must be between age 18 to 65 years old at the time of application and the cover may be renewable up to age 80 years old.

02 Can I also apply for my child(ren)?

Yes. You can apply for your child(ren) with you as the policyholder if their age is between 15 days old up to 18 years old if they are residing with you, is unmarried and not employed. For child(ren) age 19 to 25 years old, you can apply for them as the policyholder if they are full-time students with proof of educational certificate, unmarried and unemployed. For child(ren) above age 18 who does not meet the above conditions, they can apply for their own policy.

03 Do I have to undergo a medical examination at application?

No medical checkup will be required at application. We will assess your application after you have completed and signed the medical declaration application form.

04 Can my dependants (i.e. spouse and children) take up different plans under the same policy?

No. Your dependants must apply for the same plan as you under the same policy.

05 Can I pay the premium in Pakistani Rupees?

Yes, premium is only payable in Pakistani Rupees.

06 Can I change my plan?

Yes. You can do an upgrade or downgrade of your plan at the Policy Anniversary. This will be subject to our approval. For any plan upgrades such as increase in plan limits, expanded area of coverage, addition of new optional benefits, please submit your request with a new application for the requested plan upgrade. We will require you to declare again your health and for all insured persons on any changes to be made from the initial health declaration made.

07 When will my coverage begin?

The cover will take effect after the application has been accepted by us and our receipt of the premium due. We will inform you when your cover commences. If we have included any additional term(s), you must agree and confirm acceptance of these terms and the premium due had been received by us before the cover can commence. The commencement date (start date) of any cover cannot be backdated.

08 Can I maintain my policy when I reside out of Pakistan for more than one-hundred and eighty-five days?

Whenever you change or intend to change your principal country of residence, you must notify us of such changes soonest. If you are not a Pakistan national and you are returning to your home country to live, you will not be able to keep this policy. If you are a Pakistan national, we will review your request, as in some cases we may not be able to cover you when you reside outside of Pakistan because of international law or domestic law of the country.

09 How do I make a claim?

For all claims related queries, you can reach us at our 24/7 claims customer service team.

Alfalakh Insurance Contact Details:

UAN: 042-111-234-222

Cell No. 0092-345-2318318

Email: globalhealthcare@alfalahinsurance.com

You can write to us at the following address:

Alfalakh Insurance Company LTD

5-Saint Mary Park

Gulberg-III, Lahore, Pakistan

BAF Contact Details:

From within Pakistan dial:

+21 111-225-111 or +42 111-225-111

From outside Pakistan dial:

+92 21 111-225-111 or +92 42 111-225-111

Website: www.baf-staging.its.com.pk/contact-us/

10 Will I be covered when I am outside my area of cover?

You will be covered for emergency treatment only, or treatment of a Medical Condition which arises suddenly outside your selected Area of Cover provided it does not exceed 90 days per trip (inclusive of the days where treatment was given) up to the amount shown in your benefit table. However, you will not be covered for treatment if you travelled outside the area of cover to get treatment (whether that was the only reason) or for any Treatment which was or may have been reasonably known before your travel commenced. This is benefit subject to policy terms, limits and sub-limits applicable for the plan and does not cover any aspect of pregnancy, childbirth or any complications of pregnancy or childbirth or if you are able to benefit from free state-provided healthcare in that country.

11 What happens if I move to another country?

If you move to another country, please contact us as it would affect the eligibility of the cover.

If you are a Pakistan national, we may continue your cover under some circumstances provided there is no breach of any laws, regulations, or a violation of any sanctions. If cover can be continued, we will inform you we can insure you and may impose any additional premium adjustment to reflect the change in residence. If you did not inform us of the change in your principal country of residence, we can refuse to pay for the benefits and proceed to cancel the policy.

12 Will claims be settled through direct billing or on reimbursement basis?

We will settle the eligible in-patient treatment claims via direct billing to the hospitals on our panel in Pakistan and overseas within the agreed network of providers and in your chosen area of cover. If the hospital within your chosen area of cover is not on the panel of network providers, the reimbursement will be based on usual, reasonable and customary charges in respect of an eligible treatment and expenses incurred. For any reimbursement type claims you must present your treatment related invoices and reports and we will reimburse the claims once we have completed our assessment. Pre-notification for all eligible in-patient treatment or day-care treatment is required.

13 Can I make a claim immediately after my policy has been issued?

You can submit a claim to us arising from an insured event once the policy has been issued. However, some benefits are subject to a waiting period, examples Pre-existing conditions, Hospice and Palliative Care and Psychiatric treatment. For benefits with waiting periods, we will not be paying for any claims incurred within the waiting periods. In addition to the waiting periods, all claims are subject to the terms, conditions, and exclusions in the policy wording before we can confirm that the claim is eligible.

14 Am I covered in any hospital in and outside Pakistan?

Yes, you are covered in any recognised hospital located in your selected area of coverage. However, in case you visit a hospital that is not part of the Direct billing network, you may have to pay these costs and submit the claim to us. You can access the Direct-billing network in and outside Pakistan from our website:
<https://www.axaglobalhealthcare.com/find-AIC>

15 Will I be covered for my pre-existing medical illnesses and conditions?

If you have declared to us your pre-existing medical illnesses and conditions during your application and after our underwriting assessment, we will advise you on the terms we can offer. If there is no specific additional exclusion, we may be able to cover the declared illnesses or conditions if it does not fall under any other general exclusions and limitations as stated in the policy wordings. However, if you do not take reasonable care and the information provided by you is inaccurate or incomplete then depending on the circumstances, we may terminate your policy, declare your policy void (treating your policy as if it had never existed), impose different terms to your cover, or refuse to pay all, part of any claim or even reduce the amount of any claim payments.

16 How can I be sure that I am covered before I go ahead with the treatment?

For all claims related queries, you can reach us at our 24/7 claims customer service team.

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Website: www.baf-staging.its.com.pk/contact-us/

17 Can I use the membership card in Pakistan?

Yes, you can use this card at our listed Medical network hospitals and providers in Pakistan

18 Will my premium increase in the next year if I make a claim this year?

We will not change the terms of your policy. However, the premiums are re-calculated at renewal in accordance with the age and plans at the time you renew the policy. The premiums may also be revised if there are regulatory requirements and changes.

The premium payable is not guaranteed and shall be determined at each renewal based on the attained age of each insured, their medical conditions and if there are changes due to increased cost, regulations or benefit changes.

19 Can I choose my own medical provider/doctor?

Yes. You can choose your own medical providers or doctor, but they must be qualified and recognised by us within your chosen area of cover. The chosen treatment must be established as effective and not experimental or pioneering or surgical techniques including medicines and medical advice not approved by the relevant authorities and government regulatory board. We have contractual agreement through our partners with a list of medical network hospital and providers where we have preferred rates and direct billing arrangements. Use of the applicable network to your plan will minimise unnecessary delays in claims settlement.

20 Can I choose the doctor / country for my treatment?

Yes, you are free to choose any recognised doctor for your treatment in any country within your chosen area of cover, subject to reasonable and customary charges. We have contractual agreement through our partners with a list of medical centers where we have preferred rates and direct billing arrangements. Use of the applicable network to your plan will minimise delays in settling claims.

21 Can I choose any room type if I am hospitalised?

No, your plan provides cover only for the cost of a single room of a standard class up to the limits shown in the benefits table applicable to your plan. Please refer to the Table of Benefits for the limits stated. Should you choose to upgrade your hospital room & board type, you will have to self-pay for the difference for all increased costs.

22 Is long term treatment for cancer covered under my plan?

Yes. We will pay for active cancer treatment intended to treat, shrink, stabilise or slow the spread of cancer and not given solely to relieve the symptoms, this is limited to radiotherapy and chemotherapy for all plans up to the benefit limits stated in the benefit table, for which first symptoms become apparent after the member was accepted by us for cover on a particular plan. If there were any symptoms prior to your application and inception of your policy, such conditions must be declared in good faith to us at the time of insurance application.

23 How do I renew my policy?

We will notify you about the upcoming renewal of the insurance policy at least 30 days before your policy expires. You can either email or call us to inform us to renew the policy and pay the renewal premium before the policy expiry.