

EMPLOYEE HEALTHCARE PROGRAM

SCHEDULE OF BENEFITS



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Printed in the Republic of the Philippines





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WELCOME TO MARINE BENEFITS

CONGRATULATIONS!

Your employer has provided you with a private medical insurance. The plan provides for a comprehensive medical coverage.

In order for Marine Benefits to evaluate coverage, support you in receiving the best potential assistance and to cover your medical expenses we need to obtain and store certain personal and sensitive data about you.

To obtain and store the required personal and sensitive data as described below, you need to give an active consent to Marine Benefits. We are not allowed to support you until you have given your active consent.

We will only collect the personal and sensitive data that is required to support you under the insurance agreement and it will only be stored for as long as it is required to fulfill our obligations by law and under the insurance agreement.

This will be for a maximum of ten years, and/or two years after you are no longer a member of the plan.

You are the owner of this data and may therefore at any time ask to view or correct the data we have stored about you. You are also entitled to be forgotten, meaning that you may ask us to delete all the data we have stored on you at any time.

For full details of your rights – please see the Data Protection Notice at www.marinebenefits.no

The data that we need to obtain to confirm your coverage under the insurance agreement are:

■ PERSONAL DATA

- 1. Full name, Date of birth, home address, dependents (if any), MBAS ID, client ID, rank, employer, manning company, vessel and effective date enrolled under the plan.
- 2. Mobile number, e-mail address.

The data mentioned under 1) are required to identify you as a member, validate coverage as a member, allocate insurance premium and for your employer to confirm coverage. The details under 1) above is also shared with your employer.

The data collected is required to communicate with you in the event of a personal data breach, changes in the Data Protection Notice and to confirm whether you are still covered by your employer under the plan.

■ SENSITIVE DATA

1. Medical data, treatments, ICD 10 diagnostics and financial data related to the medical treatments received.

This is required to evaluate whether treatment is covered, to pay for the treatment, perform statistical analysis on medical cost and to perform cost containment towards the treating medical facilities. We are also obliged to obtain this information for sanction, corruption and bribery control.

All personal and sensitive data will be stored and managed by Marine Benefits AS in a secure location in accordance with the Data Protection Notice. The data will be shared and obtained from the treating doctor, hospitals and/or medical providers whom are handling your insurance claim. All third parties are obliged to follow the obligations under the GDPR.

Personal and sensitive data will not be shared with your employer or any other entity unless specifically requested by law or ordered by a competent court.

In the event that your employer has implemented a deductible or co-payment scheme, we will share an overview of the deductibles to be collected by your employer. This information will not contain any Sensitive Data.

By accepting this consent form you expressly and voluntarily accept that Marine Benefits AS can obtain the above mentioned personal and sensitive data in accordance with the Data Protection Notice, and the General Data Protection Regulation

(and the RA 10173 for the Philippines) as long as you are a member of the Marine Benefits AS medical Plan. The Data will be anonymized when you are no longer a member.

Marine Benefits AS and Norwegian Hull Club in all of its businesses strictly comply with applicable International and National Privacy and Data Protection Laws pertaining to:

- 1. Data collection
- 2. Data Storage and retention
- 3. Data use, disclosure and exchange for business, research and study
- 4. Data owner's access and rectification of personal and sensitive data

To be an eligible member and to claim under the plan, we need you to provide an active consent for MB AS to receive, handle and store your sensitive data according to Data Protection Laws.

For the full text of the Data Privacy and Protection policy and to give your active consent, please log on to our website at www.marinebenefits.no In order to actively accept the consent;

- 1. Please log in at www.marinebenefits.no, OR;
- 2. Download Marine Benefits Mobile App



SCAN QR CODE TO DOWNLOAD MOBILE APP









If there are any questions regarding your data privacy rights, please contact our Data Protection Officer(s) at DPO@marinebenefits.no





WHERE TO GIVE YOUR ACTIVE CONSENT

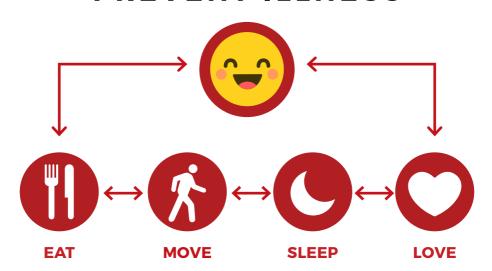
We know that all of you are different; hence we have made multiple ways where it is possible to give your active consent in the most simple way.





- For members 16 years old and above, individual active consent is required.
- For members below 16 years old, a parent or guardian will give active consent on their behalf.
- One active consent is only valid for ONE person.

STAY HEALTHY & PREVENT ILLNESS



- Eat real food.
- 3 servings of vegetables/ day & 2 fruits/day.
- Skip processed food.
- 30 minutes walk/day will take you a
 - long way.
- Have consistent sleep patterns.

■ 6-8 hours per

night.

Maintain positive relationships at work and at home.

HOW TO USE MOBILE APP

STEP 1

Search and download Marine Benefits mobile app on the App Store or Google Play.

SEARCH: MARINE BENEFITS





OR SIMPLY
SCAN QR CODE
TO DOWNLOAD
MOBILE APP









STEP 2

Login the mobile app using your MBAS ID and password.

• You can sign-up if you are not yet registered.

STEP 3

Select your preferred language from the list (16 available languages).



CONTACTS

List of available healthcare providers based in your country of residence including MBAS hotline number.

POLICY

Check the following information for Membership, Insurance certificate, Booklet, SOB and Availment Procedure.

CLAIMS

Submit claims reimbursement and check all previous claims.

ACCREDITED HOSPITALS

Find accredited hospitals and check their website and contact information.

HEALTH TIPS

Healthy tips and personalized health information.

FAQ's

Frequently asked questions.



DEFINITION OF TERMS

APPROVED FACILITY

means a medical service provider (Hospital, Clinic, Institution, Physician or Specialist) that has been approved and contracted by the Underwriters or their designated representatives, or has been approved by the Underwriters or their designated representatives prior to admission or treatment of the insured person.

APPROVED NETWORK

means a member of a network of healthcare providers or approved facilities such as hospitals and physicians contracted to Underwriters through the Assistance Company.

CHARGE

means the usual and customary fees Incurred for a service or item provided in the geographical area under similar or comparable circumstances, as determined solely by Underwriters. Charges for hospital or confinements are incurred on the date of admission. All others are incurred on the date the service or item is received.

CLINIC

means a licensed medical facility devoted to the diagnosis and care of outpatients, and which:

- provides, as its chief function, diagnostic and therapeutic services and care of injured or sick persons.
- has a professional staff of one or more licensed Physicians and surgeons to provide or supervise its services at all times.
- is operated in accordance with the laws of the jurisdiction in which it is located, and
- is legally licensed as a medical or surgical hospital in the country in which it is located.
- * a clinic cannot be a health resort, spa or sanatorium.

COUNTRY OF RESIDENCE

means the country in which the insured person normally resides as set forth on the schedule provided by the Assured.

COVERAGE PERIOD

means the period that begins on the effective date and continues for as long as the premium is paid and accepted by Underwriters or the expiry date, whichever first occurs.

COVERED TRANSPLANT

means a transplant involving the heart, heart/lung, kidney, kidney/pancreas, liver or allogeneic and autologous bone marrow.

DEDUCTIBLE

means the amount of charges which must be borne by the insured person in respect of each claim.

DEPENDENT CHILDREN

means the primary insured person's unmarried child residing at the domicile of the primary insured person or eligible spouse.

HOSPITAL

means an institution or an approved facility which:

- provides 24-hour continuous service to confined patients,
- provides, as its chief function, diagnostic and therapeutic services and care of injured or sick persons,
- has a professional staff of one or more licensed Physicians and surgeons to provide or supervise its services at all times,
- provides general hospital and major surgical facilities and services either;
 (1) on its own premises, or (2) in a facility available to it on a pre-arranged basis.
- provides 24-hour nursing services by or under the supervision of a registered graduate nurse on a regular and continuous basis,
- is operated in accordance with the laws of the jurisdiction in which it is located, and
- is legally licensed as a medical or surgical hospital in the country in which it is located

A hospital cannot be:

- a convalescent or extended care facility unit within or affiliated with the hospital,
- a nursing, rest or convalescent home, or extended care facility,
- an institution operated mainly for care of the aged.
- a health resort, spa or sanatorium.

INITIAL VISIT

means the first visit by an insured person to a Physician, hospital or clinic for a general consultation during the period of insurance.

INPATIENT (HOSPITALIZATION)

means medically necessary services provided to an insured person, who is a registered patient in an approved facility, to treat sickness or Injury and any condition requiring treatment and/or observation beyond what would normally be expected to be received at an outpatient facility.

LIFE THREATENING CONDITION

means a health condition involving a serious, extreme or life threatening sickness, Injury, impairment or condition that without immediate medical treatment could put the insured person's life at risk. This definition is extended to include the immediate medical treatment of severe injuries following an accident.

MEDICALLY NECESSARY/MEDICAL NECESSITY

means services or supplies provided by a hospital, Physician or other providers which are required to identify and treat a sickness or injury and which, as determined by Underwriters, are

- consistent with the symptom or diagnosis and treatment of the patient's condition, disease, ailment or injury,
- appropriate with regard to local standards of acceptable medical practice,
- not solely for the convenience of the assured/insured person, the Physician, the hospital, or other providers, and
- the most appropriate supply or level of service which can safely be provided to the patient.

MENTAL DISORDER

means a disease commonly understood to be a mental disorder whether or not it has a physiological or organic basis and for which treatment is generally provided by or under the direction of a mental health professional such a psychiatrist, a psychologist or a psychiatric social worker. A mental disorder includes but is not limited to:

- Schizophrenia
- Bipolar disorder

- Pervasive Mental development Disorder (Autism)
- Panic disorder
- Major depressive disorder
- Psychotic depression
- Obsessive compulsive disorder

OUTPATIENT SERVICES

means medically necessary services provided to an insured person, who is not a registered patient in a hospital, to treat sickness or injury. Outpatient services shall include, but are not limited to:

- diagnostic and evaluation services
- outpatient care and treatment, pre-care, aftercare, emergency care, rehabilitation and habilitation and supportive transitional services,
- professional consultation.

PER CAUSE

means each separate sickness or injury or each separate medical diagnosis.

PRE-EXISTING MEDICAL CONDITION

means any sickness or injury:

- for which the insured person is already receiving medical care or treatment (including prescription drugs) on the effective date, or
- that has been diagnosed but for which the insured person has not started to receive treatment on the effective date, or
- that would have induced a rational person to seek medical care or treatment.

PRESCRIPTION DRUGS

are medications whose sale and use are legally restricted to the order of a Physician and which can only be obtained with a Physician's written prescription.

ROUTINE EXAMINATION

is a medical examination given by a Physician for a reason other than to diagnose or treat a suspected or identified injury or disease. Included as part of the examination are X-rays, laboratory and other tests given in connection with the examination.

SPOUSE

means a person who is the primary insured's legal wife or husband. Where used it can also mean cohabiter, being a person who:

- is enrolled by name as a member through the usual approval process by the employer, and they have been entered on the schedule of insured persons by the assured and the appropriate premium has been paid, and
- has resided at the domicile of the primary insured person continuously for the prior 365 days.
- A Primary Insured may have one legal wife covered under the Policy.

USUAL AND CUSTOMARY

means the reasonable, usual and customary Charges in the geographic area in which such charges were incurred. At no time will the policy pay any amount higher than the usual and customary rates for a specific geographic area.

WHAT IS COVERED UNDER THE PLAN?

ROOM ACCOMODATION

Semi-private hospital room and board charges, not exceeding the usual or customary charge for such accommodation

SURGICAL PROCEDURES

wherever they may be performed (inpatient/outpatient), including any required second opinion

CONSULTATION OR TREATMENT

by a physician for sickness or injury

MEDICALLY NECESSARY NURSING CARE

for up to 6 months by a licensed resident or daily nurse employed by an approved medical services provider and who is not an immediate family member

ANESTHESIA

as part of a surgical, obstetric, or other medically necessary procedure

RADIATION THERAPY

for benign or malignant conditions, including charges for X-rays, radium and radioactive isotopes, and nuclear medicine procedures

INPATIENT HOSPITAL TREATMENT

for sickness or injury

OUTPATIENT TREATMENT

for sickness or injury

MATERNITY SERVICES

for prenatal care, delivery, postnatal treatment, and routine care of a healthy new-born infant during the initial confinement.



PRESCRIPTION DRUGS, DRESSINGS, OR USE OF SURGICAL OR MEDICAL APPLIANCES

that are medically necessary and prescribed by a physician while the insured person is an inpatient of an approved facility only

SERVICES AND SUPPLIES PROVIDED IN CONNECTION WITH A COVERED TRANSPLANT PROCEDURE

EMERGENCY TRANSPORTATION

by local road ambulance to the nearest available suitable hospital when necessitated by life-threatening conditions

HOW TO CLAIM



CASHLESS/ ACCREDITED FACILIT

STEP 1

Marine Benefits 24/7 Local Call Center



STEP 2

Cashless MBAS approved network



STEP 3

• MBAS confirms coverage • MBAS pre-authorize treatment to hospital/clinic



STEP 4

Member is treated



STEP 5

MBAS pays hospital/clinic



REIMBURSEMENT

STEP 1

Marine Benefits 24/7 Local Call Center



STEP 2

MBAS confirms coverage and benefits/limits



STEP 3

Member selects medical facility and pays for the treatment.



STEP 4

Medical practitioner completes medical information form in English. Member completes & guarantees content.



STEP 5

Member applies for reimbursement at www.marinebenefits.no

FREQUENTLY ASKED QUESTIONS

■ WHERE CAN I FIND THE LIST OF ACCREDITED PROVIDERS?

The list can be accessed via our website at www.marinebenefits.no or mobile app. Just have your MBAS card ID number and your birthdate handy.

HOW DO I KNOW IF A CERTAIN ILLNESS AND/OR DIAGNOSTIC PROCEDURE REQUESTED BY ACCREDITED DOCTOR IS COVERED?

- **a**. The schedule of benefits and the MBMP info summary are included in the welcome package for guidance.
- **b**. Our MBAS hotline is 24/7 and a call may be made to them.
- **c**. Schedule of benefits is also accessible via our website or mobile app.

■ SHOULD I HAVE DIFFICULTIES DURING AVAILMENT WHO SHOULD I CALL?

Our MBAS hotline [+(63) 2 7534442] are manned by registered nurses and can provide assistance 24/7, 365 days (calls are handled in English only).

■ CAN I HAVE HEALTH COVERAGE WHEN I TRAVEL OVERSEAS?

Your health plan only gives cover in your country of residence. Thus, it won't cover you travelling outside of your country of residence unless specifically provided by your employer & included in the schedule of benefits.

■ SHOULD I LOSE MY HMO ACCESS CARD OR MBAS CARD SHALL IT BE REPLACED?

Yes, but the card production cost will be charged to you.

WEBSITE GUIDE FOR LOG-IN AND REGISTRATION

STEP 1

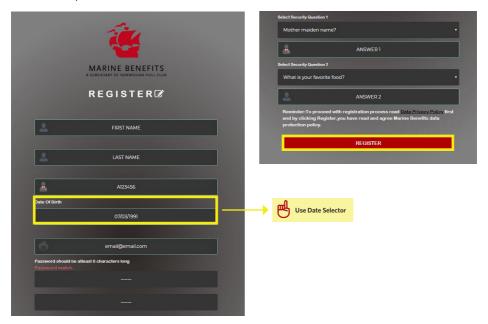
Go to www.marinebenefits.no

*If not yet registered, click **REGISTER** button on the upper right side of the Marine Benefits website.



■ REGISTRATION • STEP 1

Fill in all required fields

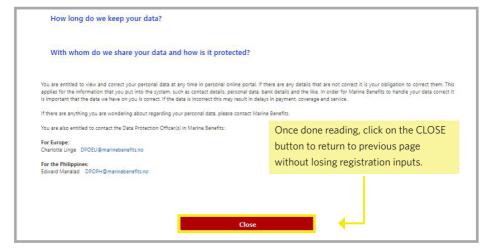


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■ REGISTRATION • STEP 2

Click and read the **DATA PROTECTION DECLARATION**





■ REGISTRATION · STEP 3

Click Register after closing Data Privacy page. A confirmation mail will be sent to the registered email address. Check mailbox and follow instructions.



■ MEMBER LOG-IN • STEP 1

Click LOGIN button on the upper right side of the page.

■ MEMBER LOG-IN • STEP 2

Click MEMBER LOGIN and enter Registered Email Address and Password.

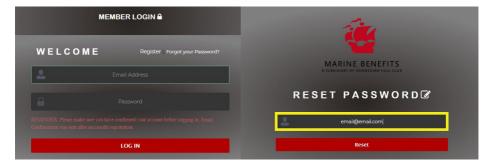
*Successful login will redirect to MEMBER Dashboard with the following Menu:

- 1. Hospital Search (List of accredited HOSPITALS)
- 2. Plan Coverage (Schedule of Benefits Plan Benefits Information)
- 3. Claims Procedure (Online Reimbursement Processing)



■ RESET PASSWORD • STEP 1

Click 'Forgot your Password?' link under Member Login Portion.





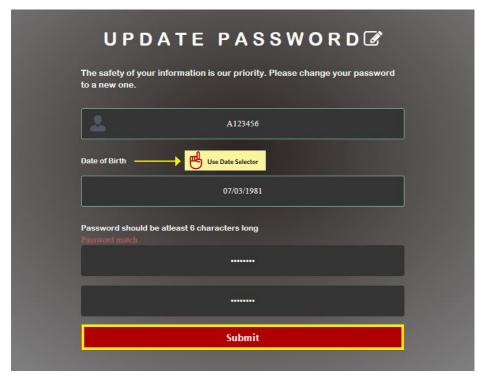
Enter registered email address to request reset password link.

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■ RESET PASSWORD · STEP 2

Enter all required fields to successfully reset password and click SUBMIT.





COUNTRY CONTACT DETAILS

COUNTRY	HOTLINE NUMBER	E-MAIL
ANGOLA	+244225000003 +63 2 7534442	mbasmanila@marinebenefits.no
AUSTRALIA	+61291919712	mbasmanila@marinebenefits.no
BANGLADESH	+8801787664488	operator@ap-companies.com/ info@ap-companies.com/ travelhealth@paramount.healthcare
BELARUS	+74 951 252 693	operator@ap-companies.com/ info@ap-companies.com
BELGIUM	31 (85) 0090511	mbasmanila@marinebenefits.no
BOSNIA AND HERZEGOVINA	+38521770715	operator@ap-companies.com/ info@ap-companies.com
BRAZIL	+551331135308	mbasmanila@marinebenefits.no
BULGARIA	+35952919518	operator@ap-companies.com/ info@ap-companies.com
CANADA	+16042484828	mbasmanila@marinebenefits.no
CAMEROON	+63 2 7534442	mbasmanila@marinebenefits.no
CROATIA	+38521770716	operator@ap-companies.com/ info@ap-companies.com
CYPRUS	+357-22-030145	mbasmanila@marinebenefits.no
CZECH REPUBLIC	420 234 09 3802	operator@ap-companies.com/ info@ap-companies.com
DENMARK	+4578772154	mbasmanila@marinebenefits.no
DOMINICAN REPUBLIC	+18292343416	mbasmanila@marinebenefits.no

ESTONIA	+3726681352	operator@ap-companies.com/ info@ap-companies.com
FRANCE	31 (85) 0090511 (Netherland)	mbasmanila@marinebenefits.no
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JORDAN	+63 2 7534442	mbasmanila@marinebenefits.no
LATVIA	+37167661079; 37167869798	operator@ap-companies.com/ info@ap-companies.com
LITHUANIA	+37052058984	operator@ap-companies.com/ info@ap-companies.com
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PAKISTAN	+92518108810	mbasmanila@marinebenefits.no
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RUSSIA	+74951252693	operator@ap-companies.com/ info@ap-companies.com
SERBIA	+38521770715	operator@ap-companies.com/ info@ap-companies.com
SEYCHELLES	+34 931 702 286	operator@ap-companies.com/ info@ap-companies.com
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SOUTH AFRICA	+27213001892	mbasmanila@marinebenefits.no
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SWEDEN	+46812111119	mbasmanila@marinebenefits.no
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TURKEY	+390699268232	mbasmanila@marinebenefits.no
UKRAINE	+380443610547 (AP Kiev, Ukraine) +380482399605 (AP Odessa, Ukraine) +380487737898(AP Odessa)	operator@ap-companies.com/ info@ap-companies.com
UNITED KINGDOM	+442033937316	mbasmanila@marinebenefits.no
UNITED STATES	1-786-5159729	mbasmanila@marinebenefits.no
VIETNAM	+63 2 7534442	mbasmanila@marinebenefits.no



NOTE:

Countries not in the list, please call +632 753 4442. You will be handled by English speaking representatives.





HEAD OFFICE, SALES & MARKETING

Marine Benefits AS, P.O. Box 75 Sentrum NO-5803 Bergen,Norway

Visiting Address: Olav Kyrresgate 11, NO-5014 Bergen, Norway



SUPPORT & OPERATIONS

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FOR INQUIRIES AND FURTHER INFORMATION, PLEASE CONTACT US:

mbasbergen@marinebenefits.no www.marinebenefits.no

TELEPHONE: +47 55 55 95 00