

Steve's wife - Age 41 to 45

"HIGH-COVERAGE" MEDICAL INSURANCE COSTS FOR THAILAND

Insurance Company Insurance Plan	High-End Insurance Coverage Comparisons*								All figures are in Thai Baht					
	NZI-IG Comprehensive	NZI-IG Select	NZI-IG Standard	LMG Ultra Care* 1	LMG Ultra Care* 2	LMG Maxi Care* 1	LMG Maxi Care* 2	AXA Optimum Deluxe	BUPA Platinum 3	AXA Optimum Classic	BUPA Platinum 2	THI WH 12000	AXA Optimum Basic	BUPA Platinum 1
Benefit Maximum Per Disability	80,000,000	80,000,000	34,000,000	20,000,000	20,000,000	5,000,000	5,000,000	N/A	5,000,000	N/A	2,000,000	2,400,000	N/A	1,000,000
Benefit Maximum Per Year	80,000,000	80,000,000	34,000,000	N/A	N/A	N/A	N/A	5,000,000	N/A	2,500,000	N/A	2,400,000	1,500,000	N/A
Lifetime Maximum	N/A	N/A	N/A	80,000,000	80,000,000	20,000,000	20,000,000	25,000,000	N/A	15,000,000	N/A	N/A	10,000,000	N/A
Room and Board and Nursing Services	100%	100%	100%	16,000/day	16,000/day	8,000/day	8,000/day	12,000/day	12,000/day	10,000/day	10,000/day	12,000	8,000	8,000/day
Hospital General Expenses.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	120,000**	100%	100%
Emergency OPD for accident within 24 hours	100%	100%	100%	100%	100%	100%	100%	70,000	20,000	50,000	15,000	24,000**	30,000	10,000
Actual Surgical Expenses	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	180,000**	100%	100%
In-Patient Physician's fees	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	3,000**	100%	100%
Supplemental Major Medical	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	90%/10%	N/A	N/A
Emergency Evacuation and Repatriation	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide	Worldwide
Maternity Coverage	Optional	Optional	Optional	Included	Included	Included	Included	No benefit	Optional	No benefit	Optional	No benefit	No benefit	Optional
Dental Coverage	No benefit	No benefit	No benefit	Included	Included	Optional	Optional	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit
Minimum age for enrollment	15 days	15 days	15 days	15 days	15 days	15 days	15 days	6 months	15 days	6 months	15 days	15 days	6 months	15 days
Maximum age for enrollment	74	74	74	66+	66+	66+	66+	60	60 / 65	60	60 / 65	65	60	60 / 65
Renewable to Age:	life	life	life	life	life	life	life	life/75	life / 70	life/75	life / 70	80	life/75	life / 70
Physical Exam Required	No	No	No	Age 60+	Age 60+	Age 60+	Age 60+	Yes, for life option	No	Yes, for life option	No	No	Yes, for life option	No
Minimum payment option	Monthly	Monthly	Monthly	Semi-Annual	Semi-Annual	Semi-Annual	Semi-Annual	Annual	Annual/Monthly	Annual	Annual/Monthly	Annual	Annual	Annual/Monthly
Optional Deductibles (excess) to Reduce Premium	Yes	Yes	Yes	Yes	40,000 Bt.	Yes	40,000 Bt.	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit
Hospital In-patient (IP) coverage only -Annual Pay	100,303	91,157	65,116	54,148	40,611	35,441	26,580	38,952	39,240	32,640	33,421	43,251	30,389	30,290
Out Patient Coverage (OP)	Deductible	Deductible	No benefit	Optional	Optional	Optional	Optional	3 Options	3 Options	3 Options	3 Options	7 Options	3 Options	3 Options
Cost for <u>both</u> Inpatient (IP) and Outpatient (OP) cover	110,150	100,089	No OPD	67,685	50,763	44,301	33,226	50,651	57,770	44,338	51,952	54,470	42,086	47,899

*NZI-IAG (InterGlobal) offers 1 additional plan with slightly more coverage

*Treatment Area Limitations for elective medical treatment - Acute illness & accidents covered worldwide

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The information shown above is not intended to tell you everything about each plan. It is only intended to provide a simple basis for comparison.

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ALL OF THE PLANS ON THIS PAGE WILL COVER THE COST OF A PRIVATE HOSPITAL ROOM AT ANY HOSPITAL IN THAILAND

The amount of coverage each plan provides is shown at the top of that plan. All figures shown on these sheets are in Thai baht.

The figure in Blue below each plan is the annual premium for Inpatient (IP) hospital care. IP + OP premiums are shown in red below

Keep it simple. Don't try to analyze each plan. Call me and I will assist you. It only takes about 5 minutes. My name is Tony

Steve's wife - Age 41 to 45

"MID-RANGE COVERAGE" MEDICAL INSURANCE COSTS FOR THAILAND

All figures are in Thai Baht												
Insurance Company	THI	AXA	AXA	AXA	AXA	THI	AXA	BUPA	AXA	THI	AXA	BUPA
Insurance Plan	WH 6000	Exec Plus 5	Exec Plus 4	Exec 5	Exec 4	WH 4000	Exec Plus 3	Diamond	Exec 3	WH 3000	Exec Plus 2	Emerald
Benefit Maximum Per Disability	1,200,000	875,000	750,000	700,000	600,000	800,000	625,000	600,000	500,000	600,000	500,000	500,000
Benefit Maximum Per Year	1,200,000	875,000	750,000	700,000	600,000	800,000	625,000	N/A	500,000	600,000	500,000	N/A
Lifetime Maximum	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
E-Insure's Coverage Rating	850	775	750	600	550	500	500	450	400	375	400	350
Room and Board and Nursing Services	6,000	6,000	5,000	6,000	5,000	4,000	3,000	5,000	3,000	3,000	2,000	4,000
Hospital General Expenses.	60,000+	100%	100%	70,000+	60,000+	40,000+	100%	50,000+	40,000+	30,000+	100%	40,000
Additional Hospital General Exp. Coverage (Major Medical)	90% / 10%	Not Needed	Not Needed	90% / 10%	90% / 10%	90% / 10%	Not Needed	80% / 20%	90% / 10%	90% / 10%	Not Needed	80% / 20%
Emergency OPD for accident within 24 hours	12,000	100%	100%	10,000	8,000	8,000	100%	7,000	7,000	6,000	100%	5,000
Surgery Coverage (basic maximum)	120,000+	120,000+	100,000+	70,000+	60,000+	60,000+	80,000	70,000+	40,000+	45,000+	60,000	50,000+
Actual expenses or by Surgery Schedule?	Actual	Actual	Actual	Actual	Actual	Actual	Actual	%Schedule	Actual	Actual	Actual	%Schedule
Additional Surgery Coverage (Major Medical)	90% / 10%	90% / 10%	90% / 10%	90% / 10%	90% / 10%	90% / 10%	90% / 10%	80% / 20%	90% / 10%	90% / 10%	90% / 10%	80% / 20%
In-Patient Physician's fees	1,500	2,500	2,000	2,500	2,000	1,000	1,500	1,200	1,500	750	1,000	900
Post-Hospitalization OPD follow up	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days
Emergency Evacuation and Repatriation	Worldwide	No benefit	No benefit	No benefit	No benefit	Worldwide	No benefit	No benefit	No benefit	Worldwide	No benefit	No benefit
Maternity Coverage	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	Optional	No benefit	No benefit	No benefit	Optional
Dental Coverage	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit
Minimum age for enrollment	15 days	6 months	6 months	6 months	6 months	15 days	6 months	15 days	6 months	15 days	6 months	15 days
Maximum Age for Enrollment	65	59	59	59	59	65	59	60 / 65	59	65	59	60 / 65
Renewable to Age:	80	65	65	65	65	80	65	Life / 70	65	80	65	Life / 70
Minimum payment option	Annual	Annual	Annual	Annual	Annual	Annual	Annual	Annual/Monthly	Annual	Annual	Annual	Annual/Monthly
Physical Exam Required	No	No	No	No	No	No	No	No	No	No	No	No
Hospital In-patient (IP) coverage only - Annual Pay	31,089	31,872	24,850	26,192	21,797	20,955	17,257	20,870	14,316	15,888	12,296	16,736
Out Patient Coverage (OPD) options	7	5	5	5	5	7	3	3	3	7	2	3
Daily Coverage for OPD (30 visits)	600 - 3,000	800 - 2,500	800 - 2,500	800 - 2,500	800 - 2,500	600 - 3,000	800 - 1,500	1,500 - 2,500	800 - 1,500	600 - 3,000	800 - 1,000	1,000-1,500
X-ray and laboratory tests (Per year)	6,000 - 30,000	No benefit	No benefit	No benefit	No benefit	6,000 - 30,000	No benefit	No benefit	No benefit	6,000 - 30,000	No benefit	No benefit
Cost for both Inpatient (IP) and Outpatient (OP) cover	42,308	41,482	34,460	35,802	31,407	32,174	26,867	34,647	23,926	27,107	21,906	25,921

*Up to the benefit maximum

We have given each plan a “**Coverage Rating.**” This rating is shown **in Blue** above each plan. The Coverage Rating tells you how we rate each plan in terms of the amount of “real” health insurance cover that plan provides in relationship to the other plans on these sheets. If the Coverage Rating we show for one plan is higher than the Coverage Rating for another plan, this means that we consider the higher rated plan to provide better health coverage than the lower rated plans – even if the lower rated plan provides more Daily Room & Board coverage than the higher rated plan.

Steve's wife - Age 41 to 45

"LOW COVERAGE" MEDICAL INSURANCE COSTS FOR THAILAND

Insurance Company	THI	AXA	AXA	THI	BUPA	LMG	LMG	AXA	LMG	THI
Insurance Plan	SP 12000	Exec 2	Exec Plus 1	WH 2000	Ruby	Premier X	Executive X	Exec 1	Standard X	WH 1500
Benefit Maximum Per Disability	1,200,000	400,000	375,000	400,000	400,000	2,500,000	1,250,000	300,000	750,000	300,000
Benefit Maximum Per Year	1,200,000	400,000	375,000	400,000	N/A	N/A	N/A	300,000	N/A	300,000
Lifetime Maximum	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
E-Insure's Coverage Rating	300	300	300	250	250	350	325	200	200	177
Room and Board and Nursing Services	12,000	2,000	1,500	2,000	2,500	5,000	3,000	1,500	1,500	1,500
Hospital General Expenses.	120,000	30,000	100%	20,000	30,000	100%	100%	20,000	100%	15,000
Additional Hospital General Exp. Coverage (Major Medical)	None	90% / 10%	Not Needed	90% / 10%	80% / 20%	Not Needed	Not Needed	90% / 10%	Not Needed	90% / 10%
Emergency OPD for accident within 24 hours	24,000	6,000	100%	4,000	4,000	10,000	6,000	5,000	4,000	3,000
Surgery Coverage (basic maximum)	180,000	30,000	40,000	30,000	40,000	120,000	75,000	20,000	60,000	22,500
Actual expenses or by Surgery Schedule?	Actual	Actual	Actual	Actual	%Schedule	%Schedule	%Schedule	Actual	%Schedule	Actual
Additional Surgery Coverage (Major Medical)	None	90% / 10%	90% / 10%	90% / 10%	80% / 20%	None	None	90% / 10%	None	90% / 10%
In-Patient Physician's fees	3,000	1,000	1,000	500	600	1,200	800	750	500	375
Post-Hospitalization OPD follow up	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days
Emergency Evacuation and Repatriation	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>Worldwide</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>Worldwide</i>
Maternity Coverage	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>Optional</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>
Dental Coverage	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>	<i>No benefit</i>
Minimum age for enrollment	<i>15 days</i>	<i>6 months</i>	<i>6 months</i>	<i>15 days</i>	<i>15 days</i>	<i>15 days</i>	<i>15 days</i>	<i>6 months</i>	<i>15 days</i>	<i>15 days</i>
Maximum Age for Enrollment	<i>65</i>	<i>59</i>	<i>59</i>	<i>65</i>	<i>60 / 65</i>	<i>50</i>	<i>50</i>	<i>59</i>	<i>50</i>	<i>65</i>
Renewable to Age:	<i>80</i>	<i>65</i>	<i>65</i>	<i>80</i>	<i>Life / 70</i>	<i>Life</i>	<i>Life</i>	<i>65</i>	<i>Life</i>	<i>80</i>
Physical Exam Required	<i>No</i>	<i>No</i>	<i>No</i>	<i>No</i>	<i>No</i>	<i>Age 60 +</i>	<i>Age 60 +</i>	<i>No</i>	<i>Age 60 +</i>	<i>No</i>
Minimum payment option	<i>Annual</i>	<i>Annual</i>	<i>Annual</i>	<i>Annual</i>	<i>Annual/Monthly</i>	<i>Annual</i>	<i>Annual</i>	<i>Annual</i>	<i>Annual</i>	<i>Annual</i>
Hospital In-patient (IP) coverage only -Annual Pay	29,352	10,166	9,029	10,820	12,614	24,342	13,941	7,101	8,985	8,287
Out Patient Coverage (OPD) options	<i>7</i>	<i>2</i>	<i>2</i>	<i>7</i>	<i>3</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>7</i>
Daily Coverage for OPD (30 visits)	<i>600 - 3,000</i>	<i>800 - 1,000</i>	<i>800 - 1,000</i>	<i>600 - 3,000</i>	<i>500 - 1,000</i>	<i>1,000-Special</i>	<i>750-Special</i>	<i>800 - 1,000</i>	<i>500-Special</i>	<i>600 - 3,000</i>
X-ray and laboratory tests (Per year)	<i>6,000 - 30,000</i>	<i>No benefit</i>	<i>No benefit</i>	<i>6,000 - 30,000</i>	<i>No benefit</i>	<i>2,000</i>	<i>1,500</i>	<i>No benefit</i>	<i>1,000</i>	<i>6,000 - 30,000</i>
Cost for both Inpatient (IP) and Outpatient (OP) cover	40,571	19,776	18,639	22,039	17,206	31,239	19,874	16,711	12,947	15,960

*Up to the benefit maximum

Steve's wife - Age 41 to 45

THE "LOWEST-RANGE COVERAGE" MEDICAL INSURANCE COSTS FOR THAILAND

All figures are in Thai Baht									
Insurance Company	THI	LMG	BUPA	THI	THI	LMG	THI	LMG	THI
Insurance Plan	SP 6000	Premier	Sapphire	SP 4000	SP 3000	Executive	SP 2000	Standard	SP 1500
Benefit Maximum Per Disability	600,000	593,000	300,000	400,000	300,000	340,000	200,000	200,000	150,000
Benefit Maximum Per Year	600,000	N/A	N/A	400,000	300,000	N/A	200,000	N/A	150,000
Lifetime Maximum	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
E-Insure's Coverage Rating	150	120	125	100	75	70	50	50	38
Room and Board and Nursing Services	6,000	5,000	1,400	4,000	3,000	3,000	2,000	1,500	1,500
Hospital General Expenses.	60,000	50,000	16,000	40,000	30,000	30,000	20,000	20,000	15,000
Additional Hospital General Exp. Coverage (Major Medical)	None	None	80% / 20%	80% / 20%	None	None	None	None	None
Emergency OPD for accident within 24 hours	12,000	10,000	2,200	8,000	6,000	6,000	4,000	4,000	3,000
Surgery Coverage (basic maximum)	90,000	80,000	22,000	60,000	45,000	50,000	30,000	40,000	22,500
Actual expenses or by Surgery Schedule?	Actual	%Schedule	%Schedule	Actual	Actual	%Schedule	Actual	%Schedule	Actual
Additional Surgery Coverage (Major Medical)	None	None	80% / 20%	None	None	None	None	None	None
In-Patient Physician's fees	1,500	1,200	300	1,000	750	800	500	500	375
Post-Hospitalization OPD follow up	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days	30 days
Emergency Evacuation and Repatriation	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit
Maternity Coverage	No benefit	No benefit	Optional	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit
Dental Coverage	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit
Minimum age for enrollment	15 days	15 days	15 days	15 days	15 days	15 days	15 days	15 days	15 days
Maximum Age for Enrollment	65	80+	60 / 65	65	65	80+	65	80+	65
Renewable to Age:	80	Life	Life / 70	80	80	Life	80	Life	80
Physical Exam Required	No	Age 60 +	No	No	No	Age 60 +	No	Age 60 +	No
Minimum payment option	Annual	Annual	Annual/Monthly	Annual	Annual	Annual	Annual	Annual	Annual
Hospital In-patient (IP) coverage only -Annual Pay	21,090	13,966	7,094	14,205	10,762	8,639	7,320	5,437	5,598
Out Patient Coverage (OPD) options	7	2	3	7	7	2	7	2	7
Daily Coverage for OPD (30 visits)	600 - 3,000	1,000-Special	400 - 600	600 - 3,000	600 - 3,000	1,000-Special	600 - 3,000	1,000-Special	600 - 3,000
X-ray and laboratory tests (Per year)	6,000 - 30,000	2,000	No benefit	6,000 - 30,000	6,000 - 30,000	2,000	6,000 - 30,000	2,000	6,000 - 30,000
Cost for both Inpatient (IP) and Outpatient (OP) cover	32,309	20,863	10,770	25,424	21,981	14,573	18,539	9,397	16,817

*Up to the benefit maximum