
SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

ZEKER IS ZEKER

INHOUDSOPGAVE

SUMMARY OF COVERAGES 2

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE PER 01-01-2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
CONSULTATIONS GENERAL PRACTITIONER	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
CONSULTATIONS BY HEALTHCARE PROVIDERS RELATED TO PREVENTIVE CARE, EXAMINATIONS AND MEDICATION	COSTS OF SPECIALIST MEDICAL TREATMENT BY FOREIGN MISSIONS WILL ONLY BE COMPENSATED IF THE HEALTHCARE INSURER HAS GRANTED PERMISSION IN ADVANCE	EQUALS THE COVERAGE OF THE AZPAS BASIC
INSURED SPECIALISMS (AT THE REQUEST OF THE GENERAL PRACTITIONER OR SPECIALIST)		
GENERAL SURGERY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
INTERNAL MEDICINE	<p>WITH REGARD TO HAEMODIALYSIS:</p> <ul style="list-style-type: none"> COSTS WILL BE COMPENSATED UP TO A MAXIMUM OF SRD 72,500 PER POLICY YEAR. THE COSTS INCLUDE MEDICINES AND THE COSTS RELATED TO THE PLACING A SHUNT COMPENSATION FOR THE PURCHASE OF A DIALYSIS CATHETER IN CONNECTION WITH HAEMODIALYSIS UP TO A MAXIMUM OF 50% OF SUCH COSTS TO AN ACCUMULATED MAXIMUM OF SRD 1.500, - PER INSURANCE YEAR 	<p>WITH REGARD TO HAEMODIALYSIS:</p> <ul style="list-style-type: none"> COSTS WILL BE COMPENSATED UP TO A MAXIMUM OF SRD 125,000 PER POLICY YEAR. THE COSTS INCLUDE MEDICINES AND THE COSTS RELATED TO THE PLACING A SHUNT COMPENSATION FOR THE PURCHASE OF A DIALYSIS CATHETER IN CONNECTION WITH HAEMODIALYSIS UP TO A MAXIMUM OF 75% OF SUCH COSTS TO AN ACCUMULATED MAXIMUM OF SRD 2.500, - PER INSURANCE YEAR
PAEDIATRICS	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
GYNAECOLOGIST/OBSTETRICIAN	PRENATAL CHECKUPS BY THE GENERAL PRACTITIONER, OBSTETRICIAN OR GYNAECOLOGIST INCLUDING THE ULTRASOUND SCANS AT TWELVE AND TWENTY WEEKS.	EQUALS THE COVERAGE OF THE AZPAS BASIC

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
	<p>COMPENSATION FOR DELIVERY IN A HOSPITAL:</p> <ul style="list-style-type: none"> • THE COSTS OF A STAY IN A HOSPITAL ON THE RECOMMENDATION OF THE ATTENDING MEDICAL SPECIALIST, COUNTING FROM THE DAY OF ADMISSION UNTIL DISCHARGE • DELIVERY IN THE HOSPITAL, AT HOME OR IN A NURSERY INSTITUTION BY A AUTHORIZED SERVICE PROVIDER ACCORDING TO THE AGREED RATES 	EQUALS THE COVERAGE OF THE AZPAS BASIC
	COMPENSATION FOR CONSULTATIONS AT A CHILD HEALTH CENTRE	EQUALS THE COVERAGE OF THE AZPAS BASIC
ANAESTHESIOLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
CARDIOLOGY AND CARDIAC SURGERY	COSTS RELATED TO INTERVENTIONAL CARDIAC THERAPY, INCLUDING PERCUTANEOUS ANGIOPLASTY AND / OR PLACEMENT OF STENTS AND VASCULAR SURGERY (INCLUDING BYPASS AND VALVE SURGERY, INSERTION AND POSSIBLY REPOSITIONING OF A PACEMAKER), ACCUMULATED MAXIMUM OF SRD 25.000,- PER POLICY PER YEAR	COSTS RELATED TO INTERVENTIONAL CARDIAC THERAPY, INCLUDING PERCUTANEOUS ANGIOPLASTY AND / OR PLACEMENT OF STENTS AND VASCULAR SURGERY (INCLUDING BYPASS AND VALVE SURGERY, INSERTION AND POSSIBLY REPOSITIONING OF A PACEMAKER), ACCUMULATED MAXIMUM OF SRD 50.000,- PER POLICY PER YEAR
	PACEMAKER, 50% OF THE PURCHASE COST, WITH AN ACCUMULATED MAXIMUM OF SRD 20.000,- PER POLICY YEAR, A MAXIMUM OF ONCE PER YEAR	PACEMAKER, AN ACCUMULATED MAXIMUM INDEMNITY OF SRD 50.000,- PER POLICY YEAR APPLIES FOR PURCHASE COSTS, A MAXIMUM OF ONCE PER POLICY YEAR
	CARDIAC CATHETERIZATION, UP TO A MAXIMUM OF ONCE PER POLICY YEAR	CARDIAC CATHETERIZATION, UP TO A MAXIMUM OF TWICE PER POLICY YEAR
DERMATOLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
ORAL SURGERY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
ENT [EAR, NOSE and THROAT]	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
	THE PURCHASE COSTS FOR A HEARING AID, UP TO A MAXIMUM OF SRD 2.000,- PER EAR ONCE EVERY 2 POLICY YEARS, IF THE STRENGTH HAS CHANGED.	THE PURCHASE COSTS FOR A HEARING AID, UP TO A MAXIMUM OF SRD 5.500,-, - PER EAR ONCE EVERY 2 POLICY YEARS, IF THE STRENGTH HAS CHANGED

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
NEUROLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
NEUROSURGERY	AN ACCUMULATED MAXIMUM OF SRD 15.000,- PER POLICY YEAR	AN ACCUMULATED MAXIMUM OF SRD 35.000,- PER POLICY YEAR
OPHTHALMOLOGY	AN ACCUMULATED MAXIMUM INDEMNITY OF SRD 5,000 PER POLICY YEAR APPLIES TO EYE SURGERY	UNLIMITED COVERAGE
ORTHOPAEDICS	COMPENSATION UP TO A MAXIMUM OF 75% OF THE PURCHASING COSTS OF ALL PROTHESES ON MEDICAL PRESCRIPTION UP TO AN ACCUMULATED MAXIMUM OF SRD 35.000, - PER POLICY YEAR	COMPENSATION UP TO A MAXIMUM OF 100% OF THE PURCHASING COSTS OF ALL PROTHESES ON MEDICAL PRESCRIPTION UP TO AN ACCUMULATED MAXIMUM OF SRD 75.000,- PER POLICY YEAR
	COMPENSATION UP TO A MAXIMUM OF 50% OF THE COSTS OF HIP LOC, PLATES AND SCREWS	UNLIMITED COVERAGE FOR (RECONSTRUCTION) SURGERIES WITH IMPLANTING AND/ OR REMOVING PROTHESES
	HIRING ORTHOPAEDIC DEVICES, THAT IS, SPLINTS, ORTHOPAEDIC CRUTCHES AND ORTHOPAEDIC NECK COLLARS, ONLY ON MEDICAL PRESCRIPTION	EQUALS THE COVERAGE OF THE AZPAS BASIC
		EXTRA: <ul style="list-style-type: none"> • ORTHOPAEDIC FOOTWEAR AND ARCH SUPPORT UP TO 1X PER INSURANCE YEAR ON PRESCRIPTION OF THE ORTHOPAEDIC SURGEON OR REHABILITATION SPECIALIST AND AFTER APPROVAL BY THE COMPANY UP TO A MAXIMUM OF SRD 2.000, -, PER INSURANCE YEAR. • THE HIRING OF ORTHOPAEDIC AIDS FOR REHABILITATION, E.G. SPLINTS, ORTHOPAEDIC CRUTCHES AND ORTHOPAEDIC COLLAR, ONLY ON PRESCRIPTION OF THE ORTHOPAEDIC SURGEON OR REHABILITATION SPECIALIST.
		EXTRA: PURCHASE OF LEG AND/ OR ARM PROTHESES IN CASE OF AMPUTATION AS A RESULT OF AN ACCIDENT OR AS A RESULT OF A CHRONIC ILLNESS THAT WAS NOT PRESENT AT THE TIME OF THE INSURANCE, UP TO AN ACCUMULATED MAXIMUM OF SRD 25.000,- PER INSURED PERSON PER INSURANCE YEAR ON PRESCRIPTION OF THE ORTHOPAEDIC SURGEON AND AFTER APPROVAL BY THE COMPANY.
PARASITOLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
PLASTIC SURGERY	THE COSTS OF PLASTIC SURGERY WILL BE COMPENSATED UP TO AN ACCUMULATED MAXIMUM OF SRD 7.500, - PER POLICY YEAR, IF MEDICALLY NECESSARY, IN CASE OF MUTILATION AS A RESULT OF AN ACCIDENT OR DISEASE AND A CONGENITAL DEFECT	UNLIMITED COVERAGE, IF MEDICALLY NECESSARY, IN CASE OF MUTILATION AS A RESULT OF AN ACCIDENT OR DISEASE
CONGENITAL ANOMALIES	INDEMNITY FOR HYPOSPASDIAS FOR AN ACCUMULATED MAXIMUM OF SRD 5.000, - PER POLICY YEAR	CONGENITAL DISORDERS: UNLIMITED COVERAGE IN CASE OF NEWBORN INFANTS WHO HAVE BEEN INSURED FROM BIRTH. DE MAXIMUM COMPENSATION FOR INFANTS WHO HAVE NOT BEEN INSURED FROM BIRTH, THE MAXIMUM COMPENSATION IS SRD 20.100, - PER POLICY YEAR.
PSYCHIATRY	OUTPATIENT: UP TO A MAXIMUM OF 10 CONSULTATIONS PER POLICY YEAR	OUTPATIENT: UP TO A MAXIMUM OF 20 CONSULTATIONS PER POLICY YEAR
	CLINICAL: UP TO A MAXIMUM OF 6 WEEKS PER POLICY YEAR, WHETHER A CONTINUOUS PERIOD OR NOT	EQUALS THE COVERAGE OF THE AZPAS BASIC
PULMONOLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
REHABILITATION MEDICINE	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
UROLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
PARASITOLOGY	UNLIMITED COVERAGE	EQUALS THE COVERAGE OF THE AZPAS BASIC
RADIOLOGY	ECHOGRAPHY, X-RAY AND MICROSCOPY CT-SCAN AND/OR MRI SCAN: A MAXIMUM OF 3 PER POLICY YEAR, WITH THE FIRST SCAN BEING FULLY INDEMNIFIED AND 50% OF THE COSTS ARE COMPENSATED IN CASE OF A SECOND AND THIRD SCAN	ECHOGRAPHY, X-RAY AND MICROSCOPY CT-SCAN AND/OR MRI SCAN: UP TO A MAXIMUM OF 4 PER POLICY YEAR.
PSYCHOLOGY	UP TO A MAXIMUM OF 5 CONSULTATIONS PER POLICY YEAR	UP TO A MAXIMUM OF 10 CONSULTATIONS PER POLICY YEAR

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
ORTHOPEDEGOGICS	UP TO A MAXIMUM OF 5 CONSULTATIONS PER POLICY YEAR	UP TO A MAXIMUM OF 10 CONSULTATIONS PER POLICY YEAR
OCCUPATIONAL THERAPY	UP TO A MAXIMUM OF 5 CONSULTATIONS PER POLICY YEAR	UP TO A MAXIMUM OF 15 CONSULTATIONS PER POLICY YEAR
PHYSIOTHERAPY	UP TO A MAXIMUM OF 10 CONSULTATIONS PER POLICY YEAR	UP TO A MAXIMUM OF 18 CONSULTATIONS PER POLICY YEAR
SPEECH THERAPY	UP TO A MAXIMUM OF 10 CONSULTATIONS PER POLICY YEAR	UP TO A MAXIMUM OF 15 CONSULTATIONS PER POLICY YEAR
DIETICIAN	UP TO A MAXIMUM OF 10 CONSULTATIONS PER POLICY YEAR, SOLELY IF IT IS A QUESTION OF (AT LEAST 1 CONDITION APPLIES): <ul style="list-style-type: none"> - BMI > 27 - DIABETES MELLITUS - HYPERTENSION - HAEMODIALYSIS • CLINICAL PATIENTS 	UP TO A MAXIMUM OF 18 CONSULTATIONS PER POLICY YEAR, SOLELY IF IT IS A QUESTION OF (AT LEAST 1 CONDITION APPLIES): <ul style="list-style-type: none"> - BMI > 27 - DIABETES MELLITUS - HYPERTENSION - HAEMODIALYSIS • CLINICAL PATIENTS
MEDICAL CHIROPODY	UP TO A MAXIMUM OF 2 VISITS PER POLICY YEAR IF DIABETES MELLITUS IS CONCERNED	UP TO A MAXIMUM OF 4 VISITS PER POLICY YEAR IF DIABETES MELLITUS IS CONCERNED
SKIN THERAPY	UP TO A MAXIMUM OF 6 VISITS PER POLICY YEAR	UP TO A MAXIMUM OF 8 VISITS PER POLICY YEAR
PHARMACEUTICAL AID	REGISTERED MEDICINES LISTED IN AZPAS GENEESMIDDELEN KLAPPER PROVIDED BY A PHARMACY ON PRESENTATION OF A PRESCRIPTION	REGISTERED MEDICINES LISTED IN THE AZPAS GENEESMIDDELEN KLAPPER PROVIDED BY A PHARMACY ON PRESENTATION OF A PRESCRIPTION
	NO DEDUCTIBLE PER MEDICINE	NO DEDUCTIBLE PER MEDICINE

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
	BLOOD PRODUCTS: UP TO A MAXIMUM OF 10 BOTTLES PER HOSPITALIZATION	BLOOD PRODUCTS: UNLIMITED
	THE MAXIMUM COMPENSATION FOR CHEMOTHERAPEUTICS IS SRD 15.000,- PER POLICY YEAR	THE MAXIMUM COMPENSATION FOR CHEMOTHERAPEUTICS IS SRD 50.000,- PER POLICY YEAR
	HORMONE PREPARATIONS UP TO AN ACCUMULATED MAXIMUM OF SRD 3.350,- PER POLICY YEAR	HORMONE PREPARATIONS UP TO AN ACCUMULATED MAXIMUM OF SRD 7.500,- PER POLICY YEAR
	COMPENSATION FOR BANDAGING AIDS LISTED IN THE MVK (LIST OF MEDICAL CONSUMABLES INDEX)	COMPENSATION FOR BANDAGING AIDS LISTED IN THE MVK (LIST OF MEDICAL CONSUMABLES INDEX)
	COMPENSATION FOR AP COLOSTOMY BAGS AND STICKERS	COMPENSATION FOR AP COLOSTOMY BAGS AND STICKERS
LABORATORY TESTS	IMMUNO-HISTOCHEMICAL TESTS, WITH A MAXIMUM OF 1 PER POLICY YEAR	NO LIMITATIONS IN THE NUMBER OR KINDS OF TESTS
HOSPITAL ADMISSION	<p>COMPENSATION FOR COSTS OF A MEDICALLY NECESSARY STAY IN ANY HOSPITAL FACILITY IN THE THIRD-CLASS INCLUDING LUNG PAVILION AND PSYCHIATRIC CENTRE SURINAME, UP TO A MAXIMUM OF 120 DAYS PER 2 POLICY YEARS.</p> <p>THIS ALSO INCLUDES ADMISSION IN CONNECTION WITH NEONATAL CARE, ADMISSION TO THE INTENSIVE CARE UNIT AND ADMISSION TO A NURSING HOME.</p> <p>FOR ADMISSION IN AN LUNG PAVILJOEN UP TO A MAXIMUM OF 90 DAYS PER POLICY YEAR</p>	<p>COMPENSATION FOR COSTS OF A MEDICALLY NECESSARY STAY IN ANY HOSPITAL FACILITY IN THE THIRD-CLASS INCLUDING LUNG PAVILION AND PSYCHIATRIC CENTRE SURINAME</p> <p>THIS ALSO INCLUDES ADMISSION IN CONNECTION WITH NEONATAL CARE, ADMISSION TO THE INTENSIVE CARE UNIT AND ADMISSION TO A NURSING HOME</p> <p>IN CASE OF ADMISSION TO A NURSING HOME, THERE IS A MAXIMUM COMPENSATION OF 120 DAYS PER POLICY YEAR.</p>

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
		EXTRA: AS TO COSTS FOR ADMISSION OF CHILDREN NOT OLDER THAN 5 YEARS THE FOLLOWING APPLIES: COMPENSATION FOR ROOMING-IN COSTS OF A TOTAL OF 7 DAYS PER POLICY YEAR FOR ONE PARENT, PROVIDED THAT ONE OF THE PARENTS IS INSURED WITH ASSURIA MEDISCHE VERZEKERING N.V.
AMBULANCE TRANSPORT	MAXIMUM SRD 500, - WITH AN OWN CONTRIBUTION OF SRD 125,- PER POLICY YEAR. THE COSTS OF AMBULANCE TRANSPORT OVER LAND FROM AND/OR TO A HEALTHCARE FACILITY AT THE INSTIGATION OF THE GENERAL PRACTITIONER OR ATTENDING SPECIALIST, IF IT IS FOLLOWED BY ADMISSION OR DISCHARGE RESPECTIVELY	NO LIMITATIONS IN THE COSTS OF AMBULANCE TRANSPORT OVER LAND FROM AND/OR TO A HEALTHCARE FACILITY AT THE INSTIGATION OF THE GENERAL PRACTITIONER OR ATTENDING SPECIALIST, IF IT IS FOLLOWED BY ADMISSION OR DISCHARGE RESPECTIVELY IN THE EVENT OF EMERGENCY AIR TRANSPORT FOR MEDICAL REASONS THE MAXIMUM COMPENSATION WILL AMOUNT TO SRD 3.350, - PER POLICY YEAR
HOME CARE	ONLY IF IT IMMEDIATELY FOLLOWS DISCHARGE FROM A HOSPITAL AND ON THE RECOMMENDATION OF THE ATTENDING MEDICAL SPECIALIST; UP TO A MAXIMUM OF 90 DAYS PER POLICY YEAR.	IN ORDER TO PREVENT OR SHORTEN A STAY IN HOSPITAL. COMPENSATION UP TO AN CUMULATED MAXIMUM OF 120 DAYS PER POLICY YEAR, WHETHER AS A CONTINUOUS PERIOD OR NOT.
STERILISATION	STERILISATION IS COMPENSATED PER INSURED PERSON ONCE IN A LIFETIME IN THE FOLLOWING WAY: THE FULL COSTS OF STERILISATION ARE COMPENSATED ON THE UNDERSTANDING THAT IN CASE OF STERILISATION OF THE MAN, THE COSTS ARE COMPENSATED TO A MAXIMUM OF TREATMENT ON AN OUTPATIENT BASIS.	EQUALS THE COVERAGE OF THE AZPAS BASIC

SUMMARY OF COVERAGES AZPAS BASIC & AZPAS PLUS INSURANCE

JANUARY 2022

A1.5.52D1 Azpas List of Coverages_Basic-Plus_January 2022

COVERAGE	COMPENSATIONS AZPAS BASIC	COMPENSATIONS AZPAS PLUS
EYE CARE	<p>COMPENSATION FOR OPTICAL CARE UP TO A MAXIMUM OF SRD 300, - ONCE PER 24 MONTHS WHEN PRESCRIBED BY THE OPHTHALMOLOGIST, OPTICIAN OR OPTOMETRIST.</p> <p>AN ADDITIONAL COVERAGE IS POSSIBLE AT AN ADDITIONAL PREMIUM, WHICH GIVES AN EXTRA COMPENSATION:</p> <ul style="list-style-type: none"> • EXTRA: SRD 515, - PER 24 MONTHS IN ADDITION TO THE OPTICAL COVERAGE WHICH IS A REGULAR COMPONENT OF THE AZPAS BASIC HEALTH INSURANCE. • EXTRA⁺: SRD 1.030, - PER 24 MONTHS IN ADDITION TO THE OPTICAL COVERAGE WHICH IS A REGULAR COMPONENT OF THE AZPAS BASIC HEALTH INSURANCE. 	<p>THE FOLLOWING COMPENSATIONS APPLY TO OPTICAL CARE CLASSIC:</p> <ul style="list-style-type: none"> • UP TO A MAXIMUM OF SRD 1.275, -(OF WHICH SPECTACLE FRAME UP TO A MAXIMUM OF SRD 675, -; • ONCE EVERY 2 POLICY YEARS IF THE STRENGTH HAS CHANGED AT LEAST 0.5; <ul style="list-style-type: none"> • PRESCRIBED BY THE OPHTHALMOLOGIST, OPTICIAN OR OPTOMETRIST; • FOR CONTACT LENSES THE SAME CONDITIONS APPLY <p>THE FOLLOWING COMPENSATIONS APPLY TO:</p> <p>- OPTICAL CARE SUPREME: UP TO A MAXIMUM OF SRD 1.650,- (OF WHICH SPECTACLE FRAME UP TO A MAXIMUM OF SRD 1.050,- ONCE EVERY 2 POLICY YEARS IF THE STRENGTH HAS CHANGED AT LEAST 0.5); PRESCRIBED BY THE OPHTHALMOLOGIST, OPTICIAN OR OPTOMETRIST; FOR CONTACT LENSES THE SAME CONDITIONS APPLY.</p> <p>- OPTICAL CARE SUPREME⁺: UP TO A MAXIMUM OF SRD 3.300,-(OF WHICH SPECTACLE FRAME UP TO A MAXIMUM OF SRD 2.100,-); ONCE EVERY 2 POLICY YEARS IF THE STRENGTH HAS CHANGED AT LEAST 0.5); PRESCRIBED BY THE OPHTHALMOLOGIST, OPTICIAN OR OPTOMETRIST; FOR CONTACT LENSES THE SAME CONDITIONS APPLY..</p>
DENTAL TREATMENT	<p>NO COVERAGE</p> <p>COVERAGE FOR DENTAL TREATMENT IS POSSIBLE AT AN ADDITIONAL PREMIUM.</p>	<p>ONLY COMPENSATION WHEN THE COSTS ARE A DIRECT RESULT OF AN ACCIDENT UP TO A MAXIMUM OF SRD 3.350, - PER POLICY YEAR</p> <p>AN ADDITIONAL COVERAGE IS POSSIBLE AT AN ADDITIONAL PREMIUM.</p>