



TABEL BENEFIT PERAWATAN RUMAH SAKIT & PEMBEDAHAN (Rp.000.-)

PLAN	HS80	HS90	HS100	HS125	HS150	HS175	HS200	HS250	HS300	HS350	HS400	HS450	HS500	HS600	HS700	HS800	HS900	HS1000	HS1500
H1 Biaya Kamar & Menginap (90 hari) per hari	80	90	100	125	150	175	200	250	300	350	400	450	500	600	700	800	900	1,000	1,500
H2 Unit Perawatan Intensif (15 hari) per hari	160	180	200	250	300	350	400	500	600	700	800	900	1,000	1,200	1,400	1,600	1,800	2,000	3,000
H3 Biaya Pembedahan (Daftar Pembedahan) :																			
Complex	7,500	8,000	9,000	10,000	12,000	13,500	15,000	17,000	20,000	23,000	25,000	27,000	28,000	30,000	33,000	35,000	40,000	45,000	50,000
Major	4,500	4,800	5,400	6,000	7,200	8,100	9,000	10,200	12,000	13,800	15,000	16,200	16,800	18,000	19,800	21,000	24,000	27,000	30,000
Intermediate	2,250	2,400	2,700	3,000	3,600	4,050	4,500	5,100	6,000	6,900	7,500	8,100	8,400	9,000	9,900	10,500	12,000	13,500	15,000
Minor	1,125	1,200	1,350	1,500	1,800	2,025	2,250	2,550	3,000	3,450	3,750	4,050	4,200	4,500	4,950	5,250	6,000	6,750	7,500
H4 Biaya Kamar Bedah (Daftar Pembedahan) :																			
Complex	3,000	3,200	3,600	4,000	4,800	5,400	6,000	6,800	8,000	9,200	10,000	10,800	11,200	12,000	13,200	14,000	16,000	18,000	20,000
Major	1,800	1,920	2,160	2,400	2,880	3,240	3,600	4,080	4,800	5,520	6,000	6,480	6,720	7,200	7,920	8,400	9,600	10,800	12,000
Intermediate	900	960	1,080	1,200	1,440	1,620	1,800	2,040	2,400	2,760	3,000	3,240	3,360	3,600	3,960	4,200	4,800	5,400	6,000
Minor	450	480	540	600	720	810	900	1,020	1,200	1,380	1,500	1,620	1,680	1,800	1,980	2,100	2,400	2,700	3,000
H5 Biaya Pembiusan (Daftar Pembedahan) :																			
Complex	3,000	3,200	3,600	4,000	4,800	5,400	6,000	6,800	8,000	9,200	10,000	10,800	11,200	12,000	13,200	14,000	16,000	18,000	20,000
Major	1,800	1,920	2,160	2,400	2,880	3,240	3,600	4,080	4,800	5,520	6,000	6,480	6,720	7,200	7,920	8,400	9,600	10,800	12,000
Intermediate	900	960	1,080	1,200	1,440	1,620	1,800	2,040	2,400	2,760	3,000	3,240	3,360	3,600	3,960	4,200	4,800	5,400	6,000
Minor	450	480	540	600	720	810	900	1,020	1,200	1,380	1,500	1,620	1,680	1,800	1,980	2,100	2,400	2,700	3,000
H6 Biaya Aneka Perawatan RS	2,300	2,400	2,500	3,000	3,500	4,000	4,500	5,000	5,500	6,000	6,500	7,000	7,500	8,000	8,500	9,000	9,500	10,000	15,000
H7 Konsultasi Dokter Ahli di RS	180	190	200	225	250	275	300	350	400	450	500	550	600	650	700	750	800	900	1,000
H8 Kunjungan Dokter di RS (90 hari) -per hari	65	70	75	80	90	100	110	120	140	150	160	170	180	190	200	225	250	275	400
H9 Perawatan Darurat -per tahun	600	750	1,000	1,200	1,500	1,600	1,700	2,000	2,200	2,500	2,700	2,900	3,200	3,500	3,750	4,000	4,250	4,500	6,000
H10 Perawatan Gigi Darurat -per tahun	300	375	500	600	750	800	850	1,000	1,100	1,250	1,350	1,450	1,600	1,750	1,875	2,000	2,125	2,250	3,000
H11 Perawatan oleh Jururawat Pribadi -per hari	45	50	50	55	60	65	70	75	85	960	100	120	125	140	150	160	170	180	200
H12 Biaya Ambulans	150	175	200	250	300	350	400	500	600	700	800	900	1,000	1,100	1,200	1,300	1,400	1,500	2,000
H13 Pengobatan Sebelum & Sesudah Perawatan di RS	300	350	400	500	600	700	800	1,000	1,100	1,200	1,300	1,400	1,500	1,650	1,800	2,000	2,200	2,400	3,000
H14 Santunan Duka -per tahun	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	10,000	10,000	10,000	10,000	10,000	10,000
Batasan Tahunan	Tidak Terbatas.....																		



TABEL BENEFIT BEROBAT JALAN (Rp.000.-)

PLAN	OP20	OP25	OP30	OP40	OP50	OP60	OP70	OP75	OP80	OP90	OP100	OP110	OP120
O1 Konsultasi - per hari	20	25	30	40	50	60	70	75	80	90	100	110	120
O2 Biaya dokter spesialis - per hari	60	75	90	120	150	180	210	225	240	270	300	330	360
O3 Konsultasi & obat-obatan - per hari	40	50	60	80	100	120	140	150	160	180	200	220	240
O4 Obat-obatan - per tahun	600	750	900	1,200	1,500	1,800	2,100	2,250	2,400	2,700	3,000	3,300	3,600
O5 Test-test diagnostik - per tahun	400	500	600	800	1,000	1,200	1,400	1,500	1,600	1,800	2,000	2,200	2,400
O6 Fisiotherapi - per hari	20	25	30	40	50	60	70	75	80	90	100	110	120
Batas tahunan	1,500	2,000	2,500	3,000	4,000	4,500	5,500	6,000	6,500	7,500	8,500	9,000	10,000
Deductible	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%

Deductible berlaku fleksibel sesuai dengan permintaan perusahaan ybs



TABEL BENEFIT GIGI (Rp. 000,-)

PLAN	DC15	DC20	DC25	DC30	DC35	DC40	DC50	DC60	DC70	DC80	DC90	DC100
D1 Perawatan dasar - per tahun	150	200	250	300	350	400	500	600	700	800	900	1,000
D2 Perawatan gusi - per tahun	100	150	200	250	300	350	400	450	500	550	600	650
D3 Perawatan pencegahan - per tahun	100	150	200	250	300	350	400	450	500	550	600	650
D4 Perawatan kompleks - per gigi	150	175	200	225	250	275	300	325	350	375	400	450
D5 Perawatan perbaikan - per gigi	150	175	200	225	250	275	300	325	350	375	400	450
D6 Gigi palsu - per set	250	300	350	400	450	500	600	750	900	1,000	1,100	1,200
Batas tahunan	1,000	1,250	1,500	1,750	2,000	2,250	2,500	2,750	3,000	3,250	3,500	4,000
Deductible	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%

Deductible berlaku fleksibel sesuai dengan permintaan perusahaan ybs



TABEL BENEFIT MELAHIRKAN (Rp.000,-)

PLAN	MA1	MA2	MA3	MA4	MA5	MA6	MA7	MA8	MA9	MA10	MA11	MA12	MA13	MA14
M1 Persalinan Normal	1,000	1,500	2,000	2,500	3,000	4,000	5,000	6,000	7,000	8,000	9,000	10,000	11,000	12,000
M2 Persalinan Abnormal	1,500	2,000	2,750	3,500	4,000	6,000	7,500	9,000	10,000	11,000	12,000	15,000	16,000	17,000
M3 Keguguran	750	1,000	1,350	1,750	2,000	3,000	3,750	4,500	5,000	5,500	6,000	7,000	8,000	8,500



TABEL BENEFIT KACAMATA (Rp.000,-)

PLAN	VC225	VC300	VC375	VC450	VC525	VC600	VC675	VC750	VC900	VC1050	VC1200	VC1350	VC1500	VC2250	VC3000
V1 Kacamata -Bingkai (Batas Dua Tahunan)	150	200	250	300	350	400	450	500	600	700	800	900	1,000	1,500	2,000
V2 Kacamata -Lensa (Batas Satu Tahunan)	75	100	125	150	175	200	225	250	300	350	400	450	500	750	1,000