Global Medical Insurance®

The flexible, long-term, worldwide medical insurance program for individuals and families

Four plan options: **Silver, Gold, Gold Plus & Platinum**

IMG®
INTERNATIONAL MEDICAL GROUP

Security rated A (excellent) A.M. Best
Version 0113FL

Global Medical Insurance®

Flexible Worldwide Coverage. Comprehensive World-class Services.

Being a citizen of the global community can be an exciting experience, yet one that can pose potential complications. Your health care while abroad should not be one of those concerns. Global Medical Insurance is a revolutionary program from International Medical Group® (IMG®) that offers the flexible worldwide coverage you need, backed by the world-class services you expect. Unlike other health care programs on the market, Global Medical Insurance allows you to custom build a plan that is specifically tailored for you. With this booklet, you can easily create the blueprint for your own benefits package. You can conveniently compare the benefits of several plan options, and learn about the unique services and the dynamic company that provides them. Choosing and applying for the best coverage available is easy.

Global Medical Insurance is designed to meet your total needs. The program offers you the flexibility to select from an assortment of unique benefit options. From the scheduled benefits of the Silver plan option to the benefit-rich Platinum plan option, there are a large variety of specialized coverages to meet any need. To accommodate your financial means, you can customize your length and area of coverage with the flexibility to select from multiple deductibles and modes of payment. With your medical history in mind, the program also provides flexible underwriting methods to extend coverage to you that may be declined by other companies.

Additionally, the program provides world-class services. To maximize the outcome of your medical care, our on-site clinical staff is ready to assist you at a moment's notice, and our extensive global provider networks are quickly and easily accessible. You also have direct access to our *Medical Concierge*, an unequalled service that provides you with personalized assistance in locating the best provider for your specific needs, while saving you on out-of-pocket and medical expenses. You can also efficiently save time managing routine areas of your account by utilizing our secure, online service tools. In addition, IMG is available for service at your convenience - via phone, email or Live Chat.

You need to know that you have the proper worldwide coverage. When you select Global Medical Insurance, you receive IMG's commitment to deliver exceptional health benefits, medical assistance and service - all designed to give you Global Peace of Mind®.

A Company and a Program

Designed to Meet Your Total Needs

The IMG **Advantage**

For more than 20 years, IMG has dedicated its efforts to providing international medical insurance, travel insurance and world-class services to the international community. It's our specialty. We understand the intricacies of international health care. Our team of quality assured professionals is committed to helping you solve any problems, while making sure you receive superior service.

Many companies claim to offer great service. At IMG, we have set a higher industry standard by integrating independent credentialing services with in-house, fully owned and operated service divisions. These accreditations promote continuous improvement in quality and efficiency while ensuring ongoing compliance. This allows us to deliver the world-class service you deserve. We've served over a million people worldwide in more than 170 countries and we're with you, wherever you go - bringing support for all your insurance needs.

■ ***International Service Centers*** - To ensure that we are available when and where needed, we maintain multiple international service and assistance centers. From our offices, we provide administrative support and marketing services to our international producers, and claims administration and emergency medical assistance to those living and traveling worldwide. Our offices offer the benefit of multiple time zones and services in tune with local practices.

■ ***Single Resource*** - All IMG service centers are designed to have the necessary services, staff and capabilities to provide international service to you, regardless of your location. Every department and service division is integrated on the same proprietary system and in real-time. One call. One company. We are your single international resource.

■ ***Service Without Obstacles*** - Working in multiple time zones, languages, and with numerous currencies are not obstacles for us. We maintain an international staff for our international client base. Our claims specialists and multilingual customer service professionals work seamlessly with you in order to communicate without barriers. We back up what we promise - Coverage Without Boundaries® that provides Global Peace of Mind.

■ ***International Provider Access℠ (IPA)*** - In addition to our extensive PPO network available for treatment received within the U.S., our proprietary IPA network of over 17,000 accomplished physicians and facilities allows you to access quality care worldwide. Our direct billing arrangements can also ease the time and up front expense at select providers.

■ ***International Emergency Care*** - When you're overseas and a medical emergency occurs, you may not be able to wait for regular business hours. With our on-site physician and registered nurses, you have 24 hour access to highly qualified coordinators of emergency medical services and international treatment.

■ ***Accessible Technology*** - Through technology we make it easy for you to reach us and vice versa. We provide you with a secure member Web site to quickly and easily access real-time information, view the status of your claims and manage your accounts. You also have access to Live Chat to speak directly to a Customer Care representative online, and you can easily reach us via email. We will respond to all inquiries promptly. Of course, the phone and fax lines are open as well.

■ ***Financial Stability*** - Our globally recognized underwriter, Sirius International Insurance Corporation (publ), offers the financial security and reputation demanded by international consumers. Rated A (excellent) by A.M. Best and A- by Standard & Poor's*, Sirius International shares our vision of the international marketplace and offers the stability of a well-established insurance company.

**Sources: A.M. Best affirmed their rating in a press release dated October 7, 2011; Standard & Poor's affirmed their rating in a press release dated September 13, 2011.*

Flexible Worldwide Coverage

Global Medical Insurance is versatile and tailored for you so you can easily design the benefits package that you need. The program provides comprehensive benefits suitable for individuals and families, fully portable 24 hour coverage and the peace of mind you need. On the following pages, you can build your plan by reviewing and choosing from the coverage options and services available. More detailed benefit and service descriptions are provided as an insert in the pocket in the back of this booklet. Please refer to the Supplemental Brochure Inserts while reviewing the information herein.

Flexible Benefits

❑ ***Silver plan option*** - Affordable medical security designed for the more budget-conscious consumer and those planning to receive care in lower cost areas of the world. Silver offers a wide range of scheduled benefits equipped to meet your essential needs.

❑ ***Gold plan option*** - Ideally suited for those who desire full major medical coverage, but for a limited period of time. Gold provides comprehensive benefits for the first three years of coverage. After three years, certain benefits and lifetime maximums are reduced *(see Summary Schedule of Benefits - pages 5 & 6)*. As a result, Gold is priced more competitively than the Gold Plus option.

❑ ***Gold Plus plan option*** - Comprehensive major medical plan designed for people who need long-term coverage. Benefit levels continue beyond year three as long as the plan remains in effect.

❑ ***Platinum plan option*** - Provides the superior benefits package for the most discerning global consumer. Platinum offers a package of enhanced benefits and services. It is designed for the consumer who wants the convenience of comprehensive medical, dental, and vision benefits in one plan.

❑ ***Optional Riders*** - All plan options offer additional, optional coverages *(see page 7 for more information)*.

- Global Term Life Insurance℠ *(including AD&D)*
- Global Daily Indemnity℠
- Maternity *(Silver, Gold & Gold Plus plan options)*
- Terrorism *(Platinum plan option)*
- Sports *(Gold Plus and Platinum plan options)*

Coverage Area Options/Budget

❑ ***Two coverage areas*: *Worldwide or Worldwide Excluding the U.S., Canada, China, Hong Kong, Japan, Macau, Singapore, and Taiwan*** - You have the opportunity to select the coverage area that best reflects your geographic area of need. Each provides full coverage, but premiums reflect the cost of care in different parts of the world. Regardless of the coverage area you choose, you maintain the freedom to choose your own provider.

❑ ***Multiple deductible options*** - To accommodate your financial resources, you can select from seven different deductible options - all providing different premium levels. Additionally, your deductible can be reduced up to 50% to a $2,500 maximum *(see the Summary Schedule of Benefits, page 5, for more about this savings)*.

- $100* *(Platinum plan option)*
- $250
- $500
- $1,000
- $2,500
- $5,000
- $10,000

❑ ***No additional cost for children*** - No matter the plan option or coverage area you choose, for families the first two children between 14 days and 9 years are covered at no additional cost for the first year *(see page 9 for further details)*. This is a valuable savings for any budget.

❑ ***Four premium modes*** - Schedule the frequency of payment that meets your means.

- Annual
- Semi-annual
- Quarterly
- Monthly

Underwriting to Fit Your Needs

We have earned our reputation for excellence in the international community by maintaining the ability to be flexible and respond to our clients' needs. Understanding that everyone has a unique medical background, with Global Medical Insurance we have developed multiple ways to administer coverage to you - including situations where you may have been declined by other companies.

Your application will be reviewed based on the full disclosure of your medical history that you provide.

❑ ***Standard underwriting*** - Standard underwriting provides the full **pre-existing conditions** benefit as outlined on page 8.

❑ ***Exclusionary rider(s)*** - With an exclusionary rider, we are able to extend coverage for your medical needs, with the exception of the specific excluded condition named in the rider. This allows standard **pre-existing condition** benefits for non-ridered conditions that may otherwise have been declined.

❑ ***Flexible underwriting rider*** - The flexible underwriting rider will allow us to extend coverage to you even if you have significant, ongoing and/or chronic **pre-existing conditions**. For a nominal annual administration fee, coverage is extended for a **pre-existing condition** following 24 months of continuous coverage, during which you are symptom, advice or treatment free for that particular condition.

For further underwriting information, please refer to page 8.
** For convenience, all amounts listed in this booklet are in U.S. dollars.*

Comprehensive **World-class Services**

From routine care to complex case management to emergency medical situations, you're never far from IMG's support services. Global Medical Insurance not only provides flexible coverage, it also provides you with prompt access to the invaluable international services and IMG resources - regardless of your location. *For a further description of services, please refer to the Supplemental Brochure Insert included in the back of this booklet.*

Routine Care

❑ ***Freedom to choose your provider*** - Global Medical Insurance allows you the freedom to choose your own health care provider no matter where you are in the world. With open access to health care providers, you have improved access to quality care.

❑ ***Locating a provider*** - For your convenience and to help you reduce your out-of-pocket expenses, we provide you access to two extensive provider networks that include established, globally credentialed physicians and hospitals.

- The independent Preferred Provider Organization (PPO) - when seeking care within the U.S.
- The International Provider Access (IPA) - when seeking care outside the U.S.

Emergency Care

❑ ***Emergency Medical Treatment*** - The ability to access quality health care is of paramount importance when a life-threatening medical emergency arises abroad. Global Medical Insurance provides you with important emergency benefits backed by the services of an accredited 24/7/365 clinical staff with over 250 years of combined experience.

- Emergency Medical Evacuation benefit
- Return of Mortal Remains benefit
- Remote Transportation benefit *(Platinum plan option)*
- Political Evacuation benefit *(Platinum plan option)*

Medical Concierge

❑ ***Unique medical service*** - Whether you are seeking care in a local facility or in a location you are not familiar with, the quality of the care you are receiving is a primary concern. Our Medical Concierge program is designed to provide you critical information on provider ratings, treatment outcome and cost of care prior to receiving medical treatment. Your personal Medical Concierge will review your specific non-emergency medical condition and provide you with complete information on provider ratings, past outcomes and general costs - all in the area where you are planning treatment.

IMG's Medical Concierge helps you make an informed decision when seeking medical care within the U.S. Also, you can receive a reduction in your deductible for utilizing this unique medical service. This level of individualized service is unmatched in the international arena. *Please note due to the high level of data required for this service, Medical Concierge service is restricted to facilities within the U.S.*

Clinical Staff Available for You

❑ ***Medical professionals to coordinate your care*** - In the event you need medical care, our on-site clinical staff coordinates with the medical provider and treating facility to respond to the unique needs and circumstances you may face. Having provided services in more than 170 countries, we are experts at assessing the need for services and ensuring they are delivered in a timely, cost-effective manner.

This individualized approach gives you peace of mind knowing that you have experienced, knowledgeable professionals ready to help at a moment's notice, anywhere around the globe.

Managing Your Plan

❑ ***International service assistance*** - IMG's international services are designed to help you maximize the outcome of your medical care.

- Access to quality health care worldwide
- Professionally trained multilingual claims administrators and service professionals with proven international experience
- Claim inquiries, status of claim information and reimbursement options available online, by phone, fax, email and Live Chat
- Experienced international currency conversion
- Claim settlement directly to providers or to you via check or direct deposit
- Verification of benefits and explanation of benefits to providers

❑ ***24/7/365 access to information*** - To help you save time managing routine areas of your account, we make it easy for you to get the information you need.

- My*IMG*℠ - secure member Web site
- Online renewals
- Easy online U.S. and international provider searches
- Retrieve explanation of benefits
- Check the status of claims - real time information available
- Update address information & request ID cards
- Change your mode of payment
- Multiple international service and assistance centers
- Live Chat, email, phone, fax

Summary **Schedule of Benefits**

The following is a summary schedule of benefits. Benefits are subject to the deductible and coinsurance unless otherwise noted. ***NA*** *(Not Applicable);* ***URC*** *(Usual, Reasonable and Customary);* ***SAAI*** *(Same As Any Illness). For a further description of benefits, please refer to the Supplemental Brochure Insert included in the back of this booklet.*

Benefit	Silver	Gold *(1st 36 months of continuous coverage)*	Gold *(Beginning the 1st day of the 37th month)*	Gold Plus	Platinum *(See page 7 for Platinum Advantages)*
Lifetime Maximum Limit	$5,000,000 per individual	$5,000,000 per individual	$5,000,000 per individual	$5,000,000 per individual	$8,000,000 per individual
Deductible *(Per Period of Coverage)*	$250 to $10,000	$250 to $10,000	$250 to $10,000	$250 to $10,000	$100 to $10,000
Family Deductible	3 times the individual deductible	3 times the individual deductible	3 times the individual deductible	3 times the individual deductible	2 times the individual deductible
Treatment outside the U.S. and Canada	Subject to deductible No coinsurance	Subject to deductible No coinsurance	Subject to deductible No coinsurance	Subject to deductible No coinsurance	Subject to deductible No coinsurance
Treatment inside the U.S. *(Out-patient/In-patient Emergency)*	PPO Network - deductible 50% waived (to a $2,500 maximum). No coinsurance.	PPO Network - deductible 50% waived (to a $2,500 maximum). No coinsurance.	PPO Network - deductible 50% waived (to a $2,500 maximum). No coinsurance.	PPO Network - deductible 50% waived (to a $2,500 maximum). No coinsurance.	PPO Network - deductible 50% waived (to a $2,500 maximum). No coinsurance.
Treatment inside the U.S. *(In-patient Non-emergency)*	Medical Concierge - deductible 50% waived (to a $2,500 maximum). No coinsurance. PPO Network - subject to deductible. No coinsurance.	Medical Concierge - deductible 50% waived (to a $2,500 maximum). No coinsurance. PPO Network - subject to deductible. No coinsurance.	Medical Concierge - deductible 50% waived (to a $2,500 maximum). No coinsurance. PPO Network - subject to deductible. No coinsurance.	Medical Concierge - deductible 50% waived (to a $2,500 maximum). No coinsurance. PPO Network - subject to deductible. No coinsurance.	Medical Concierge - deductible 50% waived (to a $2,500 maximum). No coinsurance. PPO Network - subject to deductible. No coinsurance.
Treatment inside the U.S.-Non-PPO Network and Canada	Subject to deductible Plan pays 80% of the next $5,000 of eligible expenses, then 100% to the overall maximum per period of coverage	Subject to deductible Plan pays 80% of the next $5,000 of eligible expenses, then 100% to the overall maximum per period of coverage	Subject to deductible Plan pays 80% of the next $5,000 of eligible expenses, then 100% to the overall maximum per period of coverage	Subject to deductible Plan pays 80% of the next $5,000 of eligible expenses, then 100% to the overall maximum per period of coverage	Subject to deductible Plan pays 90% of the next $5,000 of eligible expenses, then 100% to the overall maximum per period of coverage
Hospitalization/Room & Board	In U.S./Canada – URC of average semi-private room rate. Outside of U.S./Canada - URC of private room rate (not to exceed 150% of semi-private room rate) All subject to $600 per day - 240 day max.	In U.S./Canada – URC of average semi-private room rate. Outside of U.S./Canada - URC of private room rate (not to exceed 150% of semi-private room rate)	Up to a limit of $2,250 per day - semi-private room rate	In U.S./Canada – URC of average semi-private room rate. Outside of U.S./Canada - URC of private room rate (not to exceed 150% of semi-private room rate)	Private room rate
Intensive Care Unit	$1,500 per day - 180 day per event	URC	Up to a limit of $4,500 per day	URC	URC
Surgery	URC	URC	URC	URC	URC
Anesthetist's Charges Associated with Surgery	20% of surgery benefit	URC	20% of surgery benefit	URC	URC
Transplants	$250,000 per transplant	$1,000,000 lifetime maximum	$500,000 lifetime maximum	$1,000,000 lifetime maximum	$2,000,000 lifetime maximum
Out-patient	25 visits: $70 doctor/specialist; $60 psychiatrist; $50 chiropractor; $250 X-ray per exam maximum limit; $500 surgery intervention consultation; $300 lab tests per exam maximum limit	URC	Physician Charges - limit of $150 per visit; Hospital Charge - $100 co-pay unless admitted; Urgent Care Facility - $25 co-pay; Diagnostic Lab and X-Rays limited to $5,000 per certificate period	URC	URC
Emergency Room Illness *(Additional $250 deductible if not admitted)*	URC	URC	URC	URC	URC
Emergency Room Accident	URC	URC	URC	URC	URC
Supplemental Accident	NA	$300 per occurrence	$300 per occurrence	$300 per occurrence	$500 per occurrence
Local Ambulance	$1,500 per event - not subject to deductible or coinsurance	URC	$100 per event - not subject to deductible or coinsurance	URC	URC
Mental/Nervous	Out-patient only after 12 months of continuous coverage	$10,000 per period - $50,000 maximum - Available after 12 months of continuous coverage	$2,500 maximum per certificate period; In-patient limited to 25 days per certificate period; Out-patient limited to max of 20 visits per certificate period at 70% eligible expenses, up to $75 maximum per visit; Lifetime maximum of $30,000	$10,000 per period - $50,000 maximum - Available after 12 months of continuous coverage	SAAI - $50,000 lifetime maximum - Available after 12 months of continuous coverage

Benefit	Silver	Gold *(1st 36 months of continuous coverage)*	Gold *(Beginning the 1st day of the 37th month)*	Gold Plus	Platinum *(See page 7 for Platinum Advantages)*
Emergency Evacuation	$50,000 per period of coverage - not subject to deductible or coinsurance	Up to maximum limit - not subject to deductible or coinsurance	$250,000 limit per person per certificate period	Up to maximum limit - not subject to deductible or coinsurance	Up to maximum limit - not subject to deductible or coinsurance
Emergency Reunion	NA	$10,000 lifetime maximum	$10,000 lifetime maximum	$10,000 lifetime maximum	$10,000 lifetime maximum
Return of Mortal Remains	$25,000 lifetime maximum per insured - not subject to deductible or coinsurance	$25,000 lifetime maximum per insured - not subject to deductible or coinsurance	$15,000 lifetime maximum per insured - not subject to deductible or coinsurance	$25,000 lifetime maximum per insured - not subject to deductible or coinsurance	$50,000 lifetime maximum per insured - not subject to deductible or coinsurance
Remote Transportation	NA	NA	NA	NA	Limited to $5,000 per certificate period up to $20,000 lifetime maximum
Political Evacuation and Repatriation	NA	NA	NA	NA	Limited to $10,000 lifetime maximum
Child Wellness *(Under 18 years of age)*	3 visits per period of coverage - $70 maximum per period - Available after 12 months of continuous coverage	$200 maximum per period of coverage - not subject to deductible or coinsurance. Available after 12 months of continuous coverage	$200 maximum per period of coverage - not subject to deductible or coinsurance. Available after 12 months of continuous coverage	$200 maximum per period of coverage - not subject to deductible or coinsurance. Available after 12 months of continuous coverage	$400 maximum per period of coverage - not subject to deductible or coinsurance. Available after 6 months of continuous coverage
Adult Wellness	NA	$250 per period of coverage - not subject to deductible or coinsurance - Available for those 30 years of age and over after 12 months of continuous coverage	$250 per period of coverage - not subject to deductible or coinsurance - Available for those 30 years of age and over after 12 months of continuous coverage	$250 per period of coverage - not subject to deductible or coinsurance - Available for those 30 years of age and over after 12 months of continuous coverage	$500 per period of coverage - not subject to deductible or coinsurance - Available for those 18 years of age and over after 6 months of continuous coverage
Rx Coverage	URC	URC	$5,000 per certificate period for each insured person, out-patient only	URC	Outside U.S. - URC. Inside U.S. - Rx drug card co-pay: $20 for generic / $40 for brand name where generic is not available *(Certain monthly per prescription amount limits may apply and require pre-approval by the Company.)*
Other Services	Extended care: first 30 days; Radiation: URC; Home nursing: 30 days per covered event; Hospice: 30 days; Prosthetic Devices: all URC	URC	URC - Radiation & Chemotherapy treatments (in and out-patient) limited to $10,000 per year; $50,000 lifetime maximum	URC	URC
Physical Therapy	Maximum $40 per visit - 30 visit maximum	Maximum $50 per visit	Maximum $50 per visit - $1,000 max per certificate period. $10,000 lifetime maximum	Maximum $50 per visit	Maximum $50 per visit
Complementary Medicine	NA	Acupuncture $150; Aroma Therapy $50; Herbal Therapy $50; Magnetic Therapy $75; Massage Therapy $150; Vitamin Therapy $100. Each per period of coverage	Acupuncture $150; Aroma Therapy $50; Herbal Therapy $50; Magnetic Therapy $75; Massage Therapy $150; Vitamin Therapy $100. Each per period of coverage	Acupuncture $150; Aroma Therapy $50; Herbal Therapy $50; Magnetic Therapy $75; Massage Therapy $150; Vitamin Therapy $100. Each per period of coverage	Acupuncture $150; Aroma Therapy $50; Herbal Therapy $50; Magnetic Therapy $75; Massage Therapy $150; Vitamin Therapy $100. Each per period of coverage
Recreational Scuba	NA	URC	URC	URC	URC
Non-emergency Dental	NA	NA	NA	NA	Calendar year maximum: $750; Individual deductible - $50 Schedule of Benefits - Class I 90%; Class II 70%; Class III 50%; 6 month waiting period
Emergency Dental due to Accident	$1,000 per period of coverage	URC	$500 per period of coverage	URC	URC
Emergency Dental due to Sudden Unexpected Pain	NA	$100 per period of coverage	$100 per period of coverage	$100 per period of coverage	See Non-emergency Dental benefits
High School Sports Injury	NA	NA	NA	NA	Up to $20,000 per certificate period
Vision	NA	NA	NA	NA	Exams - up to $100 Materials - up to $150 per 24 months
Maternity *Delivery, wellness, new born care & congenital disorders, Family Matters Maternity Program (*not subject to deductible or coinsurance - available after 10 months of coverage)*	**Optional Rider*** - $50,000 lifetime maximum, maximum of $5,000 for normal delivery, $7,500 for C-section, $200 child wellness benefit for the first 12 months, new born care & congenital disorders maximum of $250,000 for the first 31 days *(Benefits reduced by 50% for births that occur in the 11th or 12th month of continuous coverage)*	**Optional Rider*** - $50,000 lifetime maximum, maximum of $5,000 for normal delivery, $7,500 for C-section, $200 child wellness benefit for the first 12 months, new born care & congenital disorders maximum of $250,000 for the first 31 days *(Benefits reduced by 50% for births that occur in the 11th or 12th month of continuous coverage)*	**Optional Rider*** - $50,000 lifetime maximum, maximum of $5,000 for normal delivery, $7,500 for C-section, $200 child wellness benefit for the first 12 months, new born care & congenital disorders maximum of $250,000 for the first 31 days *(Benefits reduced by 50% for births that occur in the 11th or 12th month of continuous coverage)*	**Optional Rider*** - $50,000 lifetime maximum, maximum of $5,000 for normal delivery, $7,500 for C-section, $200 child wellness benefit for the first 12 months, new born care & congenital disorders maximum of $250,000 for the first 31 days *(Benefits reduced by 50% for births that occur in the 11th or 12th month of continuous coverage)*	SAAI - $1,000 additional deductible, $50,000 lifetime maximum, $200 child wellness benefit for the first 12 months, new born care & congenital disorders maximum of $250,000 for the first 31 days

The Advantages of the **Platinum Plan Option**

The Platinum plan option is the complete international protection plan. It offers enhanced and additional benefits, access to a dedicated service team ready to assist you, and access to our exclusive Global Concierge and Assistance Services℠. *For a further description of Platinum benefits and services, please refer to the Supplemental Brochure Insert included in the back of this booklet.*

■ ***Comprehensive Major Medical Plan*** - The Platinum plan option offers higher benefit maximums and additional coverages - Lifetime Maximum of $8,000,000, Transplants up to $2,000,000, as well as increased benefits for Hospital Room & Board, Return of Mortal Remains, Supplemental Accident, Mental & Nervous and Adult & Child Wellness. The plan also includes benefits for Remote Transportation, Political Evacuation & Repatriation and High School Sports Injuries.

■ ***One Plan with Medical, Dental and Vision Benefits***- In addition to the medical benefits, the Platinum plan option includes a dental plan with coverage for Class I Diagnostic & Preventive Services, Class II Basic Services and Class III Major Services. It also includes a vision benefit that provides coverage for exams and materials.

■ ***Remote Transportation Benefit*** - If you experience a medical problem that is not immediately life-threatening, but severe enough to result in death or permanent disability if not treated right away, Remote Transportation will provide for eligible charges arising out of the transportation for you to a qualified facility for further treatment.

■ ***Political Evacuation and Repatriation Benefit***-In the event the U.S. Department of State issues an evacuation order of the host country, IMG will coordinate the evacuation of any covered insured(s) to the nearest place of safety or repatriation to the insured's home country of residence.

■ ***Mental & Nervous and Maternity Coverage*** - Expenses associated with these conditions are covered the same as any illness.

■ ***High School Sports Injury Benefit*** - Protection is available for your children while participating in sanctioned, organized sports at the high school level or below.

■ ***Consultation for care and advice*** - The Platinum plan option offers you direct access to a medical information service which allows you to communicate with licensed physicians, psychologists, pharmacists, dentists, dieticians and fitness trainers. They are available to assist you with routine health related questions 24 hours a day.

■ ***Global Concierge and Assistance Services*** - The Platinum plan option provides you with more than insurance protection - you also have exclusive access to a list of additional services handled by a dedicated service team available 24/7. *Please refer to the Supplemental Brochure Insert for an extensive list*.

Optional **Riders**

Global Medical Insurance is designed to protect individuals and families from the high cost of medical expenses. In addition to tailored benefits packages, the program offers several optional coverages. You may review and choose any from the following list that meet your needs. To apply, simply add in the appropriate premiums, as outlined in the application, into the calculation for the total premium due. *For a further description of optional riders, please refer to the Supplemental Brochure Insert included in the back of this booklet.*

Rider	Description
Global Term Life Insurance *(Amounts shown are the Principle Sums per unit)*	**Age 31 days - 18 years**: $5,000 **Age 19 - 29 years**: $75,000 **Age 30 - 39 years**: $50,000 **Age 40 - 44 years**: $35,000 **Age 45 - 49 years**: $25,000 **Age 50 - 54 years**: $20,000 **Age 55 - 59 years**: $15,000 **Age 60 - 64 years**: $10,000 **Age 65 - 69 years**: $7,500
Accidental Death & Dismemberment (AD&D) - included with Global Term Life Insurance *(* Benefit based on age at time of death; ** "Member" means hand, foot or eye)*	Accidental Loss of Life: Principle Sum* Accidental Total Loss of 2 Members**: Principle Sum* Accidental Total Loss of 1 Member**: 50% of Principle Sum*
Global Daily Indemnity *(Amount shown is the Principle Sum per unit. Available between age 31 days - 69 years up to two units)*	$100 per day
Maternity *(Silver, Gold, Gold Plus plan options)*	$50,000 lifetime maximum, $5,000 maximum for normal delivery, $7,500 for C-section *(Newborn covered for first 31 days only without additional premium. Refer to page 6 for more information)*
Terrorism *(Platinum plan option)*	$50,000 lifetime maximum
Sports *(Gold Plus and Platinum plan options)*	$25,000 lifetime coverage for some adventure sports including mountaineering, parachuting, and whitewater rafting *(Refer to Certificate Wording for a comprehensive list)*

Pre-existing Conditions* **- covered as provided herein**

Global Medical Insurance provides flexible underwriting methods so your application may be underwritten by Standard Underwriting or the Flexible Underwriting Rider.

■ ***Standard Underwriting*** - There are two levels of underwriting when all medical conditions have been disclosed and they have not been specifically excluded or restricted by a rider *(subject to the foregoing limits and the other terms of the plan❖)*.

The Silver, Gold and Gold Plus plan options provide a $50,000 lifetime benefit for eligible **pre-existing conditions** that existed at or prior to the effective date, subject to a maximum of $5,000 per period of coverage after coverage has been in effect for 24 continuous months. This benefit is payable whether or not you have received consultation or treatment for the condition(s) during the 24-month period of continuous coverage.

The following illnesses which exist, manifest themselves, or are treated or have treatment recommended prior to or during the first 180 days of coverage from the initial effective date are considered **pre-existing conditions** and are subject to the waiting period and other limitations of coverage described above: acne, asthma, allergies, tonsillectomy, back conditions, adenoidectomy, hemorrhoids or hemorrhoidectomy, disorders of the reproductive system, hysterectomy, hernia, gall bladder or gall stones and kidney stones, any condition of the breast, and any condition of the prostate.

On the Platinum plan option, conditions that are fully disclosed on the application and have not been excluded or restricted by a rider will be covered the same as any illness. Conditions, including any complications therefrom, that are not fully disclosed on the application will not be covered.

■ ***Flexible Underwriting Rider*** - Where you may have otherwise been declined for coverage, the Flexible Underwriting Rider allows us to extend coverage to you. After 24 months of continuous coverage, a disclosed **pre-existing condition** which has not been specifically excluded by a rider will be covered the same as any other **pre-existing condition**, so long as in that 24 month period no treatment has been received for that condition. If treatment has been sought or should have been sought, then the 24 month period starts over from the treatment date.

Other Exclusions and Limitations❖

■ Adult routine physical examinations are excluded under the Silver plan option, and for the first 12 months for the Gold and Gold Plus plan option, and for the first 6 months for the Platinum plan option ■ Out-patient mental and nervous is excluded for the first 12 months on all plan options ■ In-patient mental and nervous is excluded under the Silver plan option and for the first 12 months for the Gold, Gold Plus and Platinum plan options ■ Maternity, newborn and congenital disorders (unless the maternity rider or Platinum plan option is purchased - see the Summary Schedule of Benefits on page 6) *Note: all Maternity expenses including prenatal, delivery, postnatal, newborn and congenital disorders are excluded when the pregnancy is a result of fertility treatment even if you have Maternity coverage* ■ Organ transplants not specifically listed ■ Devices to correct sight are excluded under the Silver, Gold and Gold Plus plan options ■ Devices to correct hearing ■ Treatment or supplies not medically necessary ■ Treatment not ordered or received by a physician ■ Treatment by a relative or family member ■ Treatment as a result of war, riot or terrorism ■ Treatment resulting from illegal activities ■ Organized amateur or professional sports ■ Services and treatment eligible for payment by any government or other insurance ■ Investigational, experimental or research procedures ■ Routine foot care ■ Elective cosmetic or plastic surgery ■ Drug and alcohol abuse treatment ■ Speech therapy ■ Custodial care ■ Weight modification ■ Treatment of impotency ■ Contraceptive medication or treatment ■ Persons HIV+ at effective date

❖This brochure contains only a consolidated and summary description of some of the current Global Medical Insurance benefits, conditions, limitations and exclusions. A certificate containing the complete Certificate Wording with all terms, conditions and exclusions will be included in the fulfillment kit. IMG reserves the right to issue the most current Certificate Wording for this insurance program in the event this application and/or brochure has expired, is modified, or is replaced with a newer version. Current Certificate Wordings are available upon request.

**Pre-existing Condition: Any Illness, Injury or Mental or Nervous Disorder that, with reasonable medical certainty, existed on or at any time prior to the Initial Effective Date of this insurance, whether or not previously manifested or symptomatic, diagnosed, treated or disclosed on the Application or on any Claim Form or otherwise, including any chronic, subsequent or recurring complications or consequences associated therewith or arising or resulting therefrom. For examples of how the pre-existing condition provision applies, please see Appendix A.*

Eligibility & **Enrollment**

Eligibility

Global Medical Insurance is available to individuals and families of all nationalities. U.S. citizens must reside abroad or plan to leave the U.S. on their effective date and plan to reside abroad for at least six of the next 12 months. Coverage for non-U.S. citizens is worldwide, although certain eligibility restrictions may apply. Persons from the ages of 14 days to 74 years old may apply for coverage. Persons 75 years of age and older are not eligible and coverage ends at age 75. Certain other restrictions may also apply. Please ask your independent insurance agent or broker for further details.

For families, when both parents are covered under Global Medical Insurance, the first two eligible dependent children from the ages of 14 days to 9 years are covered at no additional cost*. Children under the age of 19 applying individually should use the male 19-24 age bracket when applying for coverage *(please see the rate sheet inserts)*. Each person requesting coverage must complete the information required in the application.

Renewal of Coverage

Subject to the terms of the plan, Global Medical Insurance is annually renewable and coverage is continuous when renewed. Prior to the end of each period of coverage *(12 months)* you will receive renewal information. You must continue to meet the eligibility requirements outlined above in order to renew. You have the option to renew online or you may complete a paper renewal form. There are no additional medical questions at renewal, and we can work with you to provide flexible renewal options. Please select your deductible and plan option carefully, as you will be unable to select a lower deductible or increase your plan option when you renew your coverage.

Lifetime Coverage

Lifetime medical coverage is available if you are enrolled in the Global Medical Insurance program by your 65th birthday and maintain continuous coverage to age 75. Prior to your 75th birthday you will receive a summary of benefits for a new plan, Global Senior Plan®, and an enrollment form for coverage. There is no additional medical underwriting. You simply need to review the benefits, and complete and return the enrollment form with your premium.

How to Apply

To apply for Global Medical Insurance, simply complete and return the application. If you are applying as a family, you may include yourself, your spouse and dependents on one application. If you or a dependent are 19 years of age or older, you must complete a separate application. You must accurately complete all questions outlined in the application in order to be considered for coverage. An attending physician statement may be required depending upon your answers to the medical questions, and IMG reserves the right to request additional medical information.

When we receive your completed application with premium, we will promptly evaluate it based on the information provided. If approved, you or your agent/broker will be mailed or emailed a fulfillment kit which includes an identification card, declaration of insurance and a Certificate of Insurance *(containing a complete description of benefits, exclusions and terms of the plan)*, claim filing information, and claim forms. You are required to notify IMG, as required by the terms of the plan, if you or any family member suffers from or is treated for any illness, injury or other medical condition between the time of your application and the issuance of the certificate. If your application is not approved, you will receive a full refund of premium. For additional information, please contact your independent insurance agent or broker.

We are confident that you will be pleased with the full terms of coverage. To ensure your satisfaction, once you are accepted in the plan we provide a 15 day period to review the fulfillment kit contents. If during that 15 day period you find that you are not satisfied with the plan for any reason, you may submit a written request for cancellation and full refund of your premium. See the Certificate of Insurance for full details.

Cancellation requests received after this 15 day period will be granted at the sole discretion of IMG as the plan administrator. Any refund you may receive will be based on an established refund schedule, not a pro-rated basis. See the Certificate of Insurance for full details.

** For families, the first two eligible dependent children from the ages of 14 days to 9 years are covered at no additional cost for the first year of coverage. On the first renewal date, premium will be 50% of the published rate. For subsequent renewals, the regular renewal premium will apply.*

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Please refer to the Certificate Wording for specific terms, conditions and other details regarding the benefits, limitations, eligibility and exclusions outlined in this booklet. Certificate Wording is available upon request prior to purchase.

The summary description of coverages, benefits and eligibility in this booklet is accurate at the date of printing, subject to the terms of the plan. Any updates or changes made subsequent to printing will be included in the fulfillment kit sent upon approval of your application, and/or from time to time thereafter.

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APPENDIX A

Pre-existing Condition Exclusion

Unless the coverage you purchase provides otherwise, there is no coverage for any Illness, Injury or Mental or Nervous Disorder that, with reasonable medical certainty, existed on or at any time prior to the Initial Effective Date of this insurance, whether or not previously manifested or symptomatic, diagnosed, treated or disclosed on the Application or on any Claim Form or otherwise. Pre-existing condition also excludes any chronic, subsequent or recurring complications or consequences associated with or arising or resulting from these conditions. Following are a few examples of how this provision may be applied:

Example of Illness Covered:

- Your effective date is January 1, 2013.
- You see a doctor on February 1, 2013 for abdominal pain.
- Your doctor diagnoses you with appendicitis.
- This condition began after the effective date of coverage and may be covered.

Example of Illness Not Covered:

- Your effective date is January 1, 2013.
- You see your doctor on February 1, 2013 for chest pain.
- Your doctor diagnoses you with angina (heart pain).
- A cardiac cauterization reveals obstructed coronary arteries.
- Coronary artery by-pass surgery is recommended on an emergency basis.
- A medical review of the case, including possibly an independent peer review, is conducted.
- The review concludes that the condition began prior to the effective date of coverage; this condition would not be covered.

Another Example of Illness Not Covered:

- Your effective date is January 1, 2013.
- You see your doctor on February 1, 2013 concerning a lump in your breast that you had never before noticed and had never before bothered you.
- Your doctor diagnoses you with breast cancer.
- A medical review of the case, including possibly an independent peer review, is conducted.
- The review concludes that the condition began prior to the effective date of coverage; this condition would not be covered.

These examples are intended to outline how the Pre-existing Condition clause applies to a given situation. Please keep in mind that each medical situation is different and will be handled accordingly.

This information summarized above is provided to help you understand various provisions of the coverage you are purchasing, and in no way represents all the provisions, conditions and exclusions which may apply. Please refer to your Declaration of Insurance for more details. The Declaration of Insurance is not an insurance policy. It is an outline of the insurance provided to you by the Master Policy identified in your Certificate of Insurance. It does not extend or change the coverage provided by such Master Policy.

Once again we thank you for the opportunity to serve your International Insurance needs.