



## Global Medical Insurance® - Silver Plan Option

### Plan Information & Benefits

Global Medical Insurance provides comprehensive benefits suitable for individuals and families, fully portable 24 hour coverage and the Global Peace of Mind® you need. On the following pages, you will find a summary of the Silver plan option. The Silver plan option offers 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.

■ **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 six different deductible options - all providing different premium levels. Additionally, your deductible can be reduced up to 50% to a \$2,500 maximum.

- ▶ \$250      ▶ \$500      ▶ \$1,000
- ▶ \$2,500    ▶ \$5,000    ▶ \$10,000

■ **No additional cost for children** - No matter the 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. 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

■ **Optional Riders** - The Silver plan option offers additional, optional coverages.

- ▶ Global Term Life Insurance<sup>SM</sup> (including AD&D)
- ▶ Global Daily Indemnity<sup>SM</sup>
- ▶ Maternity

### Underwriting to Fit Your Needs

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** - The Silver plan option provides 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.

□ **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 of the Global Medical Insurance brochure or visit [www.imglobal.com](http://www.imglobal.com).

The following is a summary schedule of benefits\*. Benefits are subject to the deductible and coinsurance unless otherwise noted.

**URC** (Usual, Reasonable and Customary); **SAAI** (Same As Any Illness).

| Silver - Benefits  |   |
|--|---|
| <b>Lifetime Maximum Limit</b>  | \$5,000,000 per individual  |
| <b>Deductible</b> <i>(Per Period of Coverage)</i>                                  | \$250 to \$10,000   |
| <b>Family Deductible</b>   | 3 times the individual deductible   |
| <b>Treatment outside the U.S. and Canada</b>                                       | Subject to deductible. No coinsurance.  |
| <b>Treatment inside the U.S.</b> <i>(Out-patient/In-patient Emergency)</i>         | <u>PPO Network</u> - deductible 50% waived <i>(to a \$2,500 maximum)</i> .<br>No coinsurance.   |
| <b>Treatment inside the U.S.</b> <i>(In-patient Non-emergency)</i>                 | <u>Medical Concierge</u> - deductible 50% waived <i>(to a \$2,500 maximum)</i> .<br>No coinsurance. <u>PPO Network</u> - subject to deductible.<br>No coinsurance.  |
| <b>Treatment inside the U.S.- Non-PPO Network and Canada</b>                       | Subject to deductible. Plan pays 80% of the next \$5,000 of eligible expenses, then 100% to the overall maximum per period of coverage.   |
| <b>Hospitalization/Room &amp; Board</b>  | <u>In U.S./Canada</u> – URC of average semi-private room rate. <u>Outside of U.S./Canada</u> - URC of private room rate <i>(not to exceed 150% of semi-private room rate)</i> . All subject to \$600 per day - 240 day max. |
| <b>Intensive Care Unit</b>   | \$1,500 per day - 180 day per event   |
| <b>Surgery</b>   | URC   |
| <b>Anesthetist's Charges Associated with Surgery</b>                               | 20% of surgery benefit  |
| <b>Transplants</b>   | \$250,000 per transplant  |
| <b>Out-patient</b>   | 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                                |
| <b>Emergency Room Illness</b> <i>(Additional \$250 deductible if not admitted)</i> | URC   |
| <b>Emergency Room Accident</b>   | URC   |
| <b>Local Ambulance</b>   | \$1,500 per event - not subject to deductible or coinsurance  |
| <b>Mental/Nervous</b>  | Out-patient only after 12 months of continuous coverage   |
| <b>Emergency Evacuation</b>  | \$50,000 per period of coverage.<br>Not subject to deductible or coinsurance.   |
| <b>Return of Mortal Remains</b>  | \$25,000 lifetime maximum per insured.<br>Not subject to deductible or coinsurance.   |
| <b>Child Wellness</b> <i>(Under 18 years of age)</i>                               | 3 visits per period of coverage - \$70 maximum per period.<br>Available after 12 months of continuous coverage.   |
| <b>Rx Coverage</b>   | URC   |

## Silver - Benefits

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| <b>Other Services</b>  | Extended care: first 30 days; Radiation: URC; Home nursing: 30 days per covered event; Hospice: 30 days; Prosthetic Devices: all URC   |
| <b>Physical Therapy</b>  | Maximum \$40 per visit - 30 visit maximum  |
| <b>Emergency Dental due to Accident</b>  | \$1,000 per period of coverage   |
| <b>Maternity</b><br><i>(Delivery, wellness, new born care &amp; congenital disorders, Family Matters Maternity Program. *Not subject to deductible or coinsurance - available after 10 months of coverage)</i> | <b>Optional Rider*</b> - \$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 <i>(Benefits reduced by 50% for births that occur in the 11<sup>th</sup> or 12<sup>th</sup> month of continuous coverage)</i> |

*For more information, please contact:*

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\*This sheet contains only a consolidated and summary description of some of the current Global Medical Insurance - Silver plan option 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 sheet has expired, is modified, or is replaced with a newer version. Current Certificate Wordings are available upon request. For convenience all amounts listed are in U.S. dollars. For Florida residents seeking international coverage, please see the Florida specific brochure located in the Forms Library at [www.imglobal.com](http://www.imglobal.com).