

DEDUCTIBLE OPTIONS*

OPTION I	OPTION II	OPTION III	OPTION IV	OPTION V
US\$2,000	US\$5,000	US\$10,000	US\$20,000	US\$50,000

*Only one deductible per person, per policy year applies. For family policies, a maximum of two deductibles accumulated per policy, per policy year will be applied. For more information, please refer to the Conditions of Coverage of the policy.

GENERAL PLAN INFORMATION

DESCRIPTION	COVERAGE
Lifetime coverage	Unlimited
Maximum coverage per person, per policy year	US\$5,000,000
Age limit to apply	75
Waiting period	30 days
Geographical coverage	Worldwide without restrictions of doctors and hospitals

INPATIENT BENEFITS

DESCRIPTION	COVERAGE
Standard private/semi-private hospital room	<ul style="list-style-type: none"> • 100% UCR • Outside of "USA Special Network": US\$2,000 per day
Special benefit for suite	Up to US\$2,000 per day within the "USA Special Network"
Intensive care unit	<ul style="list-style-type: none"> • 100% UCR • Outside of "USA Special Network": US\$4,000 per day
Emergency room	100% UCR (if admitted immediately as an inpatient)
Surgeon and anesthesiologist fees	100% UCR
Companion during hospitalization	100% UCR, max. of 21 nights
Prescribed medications while in a hospital	100% UCR
Prescribed medications following a hospitalization or outpatient surgery	100% UCR for up to 6 months after discharge, max. of US\$3,500 per policy year
Dialysis / hemodialysis	100% UCR
Laboratory tests and X-rays	100% UCR
Cancer treatment (chemotherapy and radiotherapy)	100% UCR
Physician and specialist visits	100% UCR
Physical therapy and rehabilitation	100% UCR (during a hospitalization)
Prostheses and medical appliances implanted during surgery	100% UCR
Organ transplant (per organ/tissue, per lifetime)	US\$1,100,000
Benefits for live organ donor	US\$60,000
HIV/AIDS	US\$50,000 per policy year (only if admitted as an inpatient and after a 12-month waiting period)
Bariatric surgery (per lifetime)	US\$10,000 (after a 24-month waiting period)

OUTPATIENT BENEFITS

DESCRIPTION	COVERAGE
Cancer tests, medication and treatment	100% UCR
Diagnostic study services (pathology, X-rays, MRI/CT/PET scans, etc.) Pre-surgical testing only. Pre-authorization required	US\$15,000 per policy year
Dialysis / hemodialysis	100% UCR
Physician visits for pre-hospitalization and as a follow up to a covered hospitalization	US\$6,000 per policy year; up to 10 months from the date of discharge
Outpatient surgery	100% UCR
Physical therapy and rehabilitation	100% UCR, max. of 60 visits (following a covered hospitalization)

OTHER BENEFITS

DESCRIPTION	COVERAGE
Preventive health checkup per insured, no deductible applies (after a 3-month waiting period)	Options I & II: <ul style="list-style-type: none"> • 100% UCR from 0 to 6 months of age, up to 5 visits • US\$300 per policy year from 6 months to 17 years of age • US\$600 per policy year from 18 years of age and older Options III & IV: <ul style="list-style-type: none"> • US\$300 per policy year for all ages
Durable medical equipment	100% UCR (as follow-up care to a covered hospitalization)
Emergency dental coverage	100% UCR for the first 180 days
Emergency transportation by air ambulance	100% UCR, no deductible applies
Emergency transportation by ground ambulance	100% UCR, no deductible applies (if admitted immediately as an inpatient)
Nurse care at home	100% UCR (as follow-up care to a covered hospitalization)
Palliative care for terminal cases	100% UCR
Repatriation of mortal remains	US\$25,000
Temporary coverage for accidents while application is being underwritten	US\$30,000
Non-professional hazardous hobbies and sports	100% UCR
Deductible elimination/reduction for no claims made	<ul style="list-style-type: none"> • Elimination for 1 policy year after the end of the 3rd year without claims (options I & II) • Reduction of up to 50% for 1 policy year after the end of the 3rd year without claims (options III & IV)
Second Medical Opinion VIP	Access to the medical opinion of internationally renowned experts from around the world regarding a condition, without deductible

All benefits with 100% coverage are up to the policy limit.

All contents of this book are for informative purposes only. The benefits are governed by the terms described in the Conditions of Coverage of the policy. Unless otherwise stated, the benefits are offered on a per insured / per policy year basis in which the chosen deductible applies. All amounts are in US Dollars (USD). The benefits are limited to the medical expenses covered under the policy and are subject to the usual, customary and reasonable expenses (UCR) for the geographic area where the expenses were incurred, and to the policy exclusions, limitations and conditions.