



GLOBAL
peace of mind®



LIFETIME MEDICAL COVERAGE

International Medical Group® (IMG®) offers you lifetime medical coverage through the Global Senior Plan® if you are enrolled in Global Medical Insurance® or Global Mission Medical Insurance® by your 65th birthday and maintain continuous coverage to age 75. There is no additional medical underwriting to enroll in this plan. You simply need to review the benefits, and complete and return the enrollment form with your premium.

PLAN ADMINISTRATOR

International Medical Group, an award-winning provider of global insurance benefits and assistance services since 1990, enables its members to worry less and experience more by delivering the protection they need, backed by the support they deserve. IMG offers a full line of international medical insurance products, as well as trip cancellation programs, medical management services, and 24/7 emergency medical and travel assistance—all designed to provide members Global Peace of Mind® while they're away from home.

FINANCIAL STABILITY

Owned by SiriusPoint®, a multibillion-dollar, AM Best "A-" rated industry leader, IMG is uniquely positioned to deliver the Global Peace of Mind® our members need.

BENEFITS *(All amounts shown are in U.S. dollars)*

The Global Senior Plan covers the Usual, Reasonable, and Customary (URC) charges for eligible expenses in the area where you receive treatment. Each insured person will only need to satisfy their deductible once per period of coverage (12 months). **For eligible expenses incurred in the U.S.:** Once the deductible is met, the plan pays 80% out-of-network (OON) of the next \$5,000 in eligible expenses, then 100% of eligible expenses up to the maximum limit. For in-network expenses, once the deductible is met, the plan pays 100%.

For eligible expenses incurred outside of the U.S.: Once the deductible is met, the plan will pay 100% of eligible expenses up to the maximum limit.

BENEFIT	COVERAGE <i>Subject to deductible & coinsurance unless otherwise noted</i>
Maximum Limit per Individual	\$250,000 per period of coverage \$1,000,000 lifetime maximum
Deductible per Individual	\$5,000
Hospitalization <ul style="list-style-type: none">Semi-private room and boardNursing servicesPrescription medicationIncludes nursing, miscellaneous and ancillary servicesDiagnostic and laboratory testingX-raysChemotherapy and radiationDurable medical equipmentTreatment, services, and supplies routinely provided	\$400 per day 60-day maximum
Intensive Care Unit	\$800 per day 60-day maximum
Surgery <ul style="list-style-type: none">Surgical careSecond surgical opinionAnestheticsPhysician charges for surgeryTreatment, services, and supplies routinely provided	Up to the maximum limit
Outpatient Surgical/Hospital Facility Outpatient Treatment <ul style="list-style-type: none">Available for 90 days following eligible inpatient treatment	Up to the maximum limit
Inpatient Physical Therapy	\$50 maximum per visit Limited to 1 visit per day
United States Retail Pharmacy Prescriptions <ul style="list-style-type: none">Dispensing maximum per prescription: 90 days	Out-of-network covered at 80%
International Retail Pharmacy Prescriptions <ul style="list-style-type: none">Dispensing maximum per prescription: 90 days	Up to the maximum limit

*SiriusPoint is the DBA of SiriusPoint Ltd.

All coverage and benefits in the plan are in United States (U.S.) dollars. Benefits are subject to the exclusions and limitations and are payable only at Usual, Reasonable, and Customary charges. This is a summary of a selection of plan benefits offered only as an illustration and does not supersede in anyway the Certificate of Insurance and governing policy documents (together the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided.

BENEFIT	COVERAGE <i>Subject to deductible & coinsurance unless otherwise noted</i>
Eligible Medical Expenses	Up to the maximum limit
Local Ambulance	\$2,500 per period of coverage
Preventative Care	\$250 per period of coverage <i>Not subject to deductible or coinsurance</i>
Transplants <i>Limited to certain transplants and covered only within designated transplant facilities that are members of IMG's independently contracted PPO network</i>	\$250,000 lifetime maximum limit
Return of Mortal Remains	Up to \$25,000
Pre-Existing Conditions	\$5,000 per period of coverage \$50,000 lifetime maximum
Dental Treatment	Up to \$100
Extended Care Facility and Home Nursing Care Services	Limited to 30 days per period of coverage
Inpatient Hospice Care	Limited to the first 30 days of stay
Orphan Drugs or Biologic Drugs	\$250,000 per period of coverage maximum limit

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ANNUAL RATES		
Age	Male	Female
75+	\$16,703	\$15,119

The amount includes the base medical premium and a service fee (\$36 per member per year).

EXTENSIVE PROVIDER NETWORKS

With a Global Senior Plan, you may seek treatment with the hospital or doctor of your choice. When seeking treatment in the U.S., you can reduce your out-of-pocket costs by using the independent Preferred Provider Organization (PPO), a separately organized network of hundreds of thousands of established, highly qualified medical practitioners and many well-recognized hospitals in the U.S. contracted by IMG. You can quickly search the network through the online member portal, MyIMGSM. Additionally, to help you locate health care providers outside of the U.S., IMG provides its online International Provider AccessSM (IPA), a database of more than 18,550 physicians and facilities.

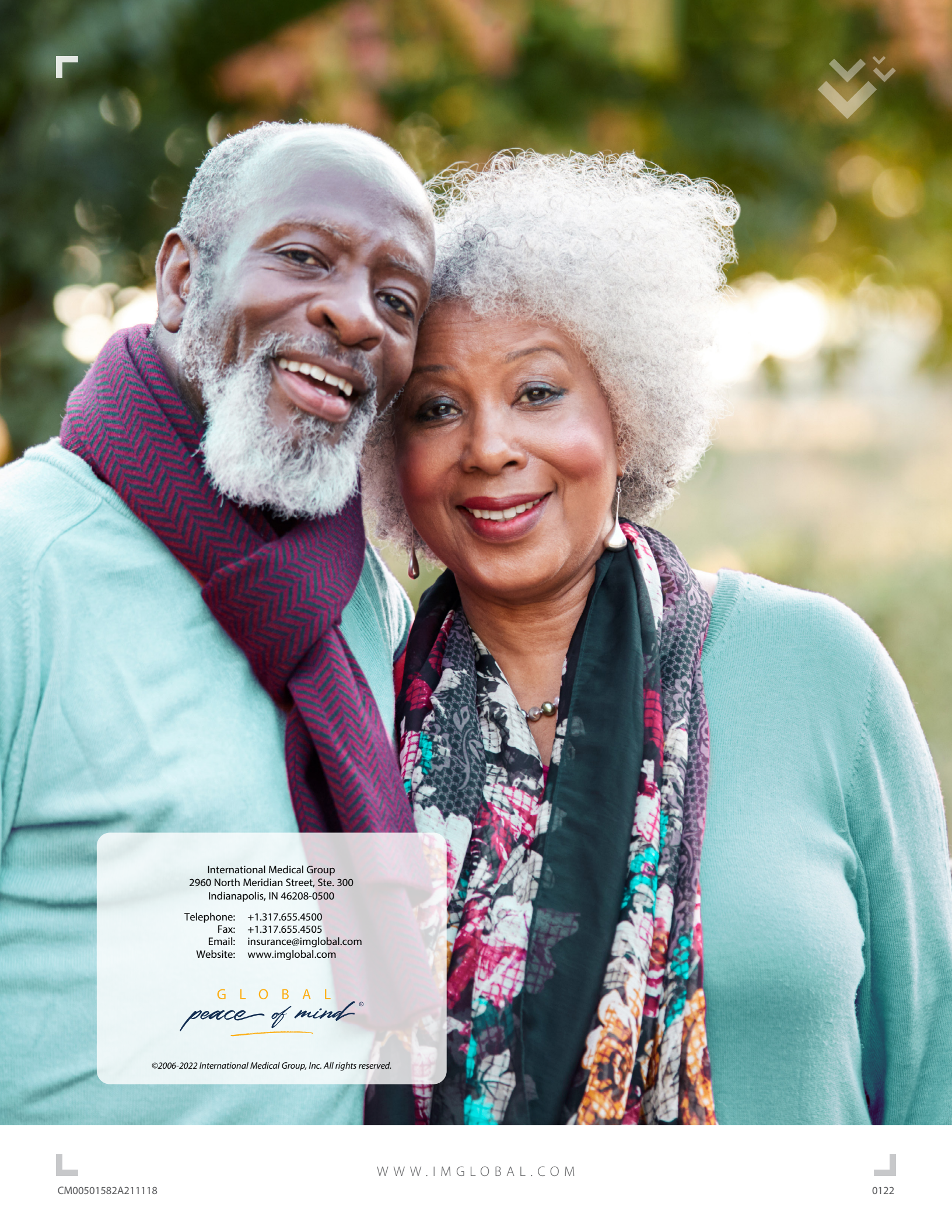
PRECERTIFICATION

Prior to receiving treatment, you may need to contact IMG to precertify your treatment for medical necessity. This means you or your attending medical practitioner must communicate with an IMG representative at the number listed on the IMG identification card prior to admission to a hospital or performance of a surgery. In case of an emergency admission, the precertification call must be made within 48 hours of admission, or as soon as reasonably possible.

It is important to note that precertification is only a determination of medical necessity, not an assurance of coverage, verification of benefits, or a guarantee of payment. All medical expenses eligible for reimbursement must be medically necessary and will be paid or reimbursed at usual, reasonable, and customary rates. Please refer to the Policy Wording for full details of the precertification requirements. You must follow precertification instructions carefully. Failure to do so may invalidate your claim, or, in certain circumstances, result in a loss or reduction of coverage.

Note: An insured person may begin the precertification process through MyIMG or the Client Resources section of our website, www.imgglobal.com. Simply look for the precertification option. You will be asked to provide the required information, which can then be submitted electronically to IMG. Once we have confirmed receipt of your request, our utilization management and review team will review the information provided and respond to the insured person or the provider within two business days. Please note that this online service will only initiate the precertification process, and it should not be used to precertify emergency admissions, procedures, or evacuations.

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