International Private Medical Insurance

Insurance Product Information Document

Company: IMG Limited **Product: Global Prima Medical Insurance Bronze - Private Client**

International Medical Group Limited is authorised and regulated by the Financial Conduct Authority (311496). Registered in England & Wales (4163178). Registered office: 254 Upper Shoreham Road, Shoreham-By-Sea, West Sussex, BN43 6BF.

This is your Insurance Product Information Document only and is a summary of cover. Full terms and conditions can be found in your certificate of insurance and on your declaration of insurance.

What is this type of insurance?

IMG's GPMI Plans are International Private Medical Insurance policies providing cover for the treatment of eligible medical conditions.

What is insured?

In -Patient and Day-Patient Treatment (Overall Annual maximum £1,000,000: €1,000,000: US$1,000,000 unless a sublimit applies)

- ✓ Accommodation
- ✓ Evacuation or Repatriation
- ✓ Professional Fees, Medication and Diagnostics
- ✓ Surgical Treatment
- ✓ Chronic Conditions (Acute)
- ✓ Oncology

Out-Patient Treatment (Out-patient limit of £2,500: €2,500: US$2,500 unless a sublimit applies)

- ✓ Diagnostics
- ✓ Surgical Treatment
- ✓ Oncology (up to the overall annual maximum)

Optional Benefits Available (subject to an additional premium)

- ✓ Dental Treatment
- ✓ Routine Pregnancy & Childbirth

What is not covered?

These are some of the core exclusions for the plan. Please refer to the Policy Wording for full exclusions and terms and conditions of this policy.

- ✗ Pre-existing conditions
- ✗ Treatment outside your area of cover
- ✗ Experimental, unlicensed or unproven treatment
- ✗ Psychiatric Illness
- ✗ Cosmetic surgery
- ✗ Sexually transmitted diseases/infections
- ✗ The standard exclusions that apply to the policy in additional to any personal exclusions

Are there any restrictions on cover?

- ! Cover is always subject to our eligibility criteria
- ! Some benefits have specific monetary limits we will only reimburse up to these limits. Please refer to your policy wording for full details
- ! If you select an excess, eligible benefits will only be paid once the excess amount has been deducted
- ! Eligible costs will be reimbursed subject to charges being reasonable and customary
- ! There are waiting periods for Complications of Pregnancy and any optional benefits purchased

Where am I covered?

Depending on what area of cover you have chosen you will be covered in one of the following regions (Please refer to your Declaration of Insurance):

- ✓ Area 1: Europe (see your policy wording for the details of countries included)
- ✓ Area 2: Worldwide excluding United States of America and any USA territories
- ✓ Area 3: Worldwide

What are my obligations?

- You must pay your full annual premium, even if we agree you can pay by instalment
- You must take reasonable care to provide complete and accurate answers to the questions we ask when you take out, make changes to and renew your policy. All members must also take reasonable care to provide complete and accurate answers to the questions we ask when making a claim
- You must also tell us about changes to your circumstances, for example, a change of name, address or residence
- The provision of insurance under this policy is conditional on you observing and fulfilling the terms, provisions, conditions and riders of this policy
- You must follow the Assistance & Claims Procedures detailed in the policy wording and obtain pre-authorisation for treatment where required.

When and how do I pay?

You can pay Annually, Quarterly or Monthly by one of the following methods:

Credit/Debit Card, Bank Transfer or SEPA Direct Debit.

When does the cover start and end?

From the start date (shown on your declaration of insurance) for a period of 12 months. Your policy will automatically renew (if you pay by credit/debit card), and payment will be taken unless you inform us otherwise. Your period of cover is detailed on your declaration of insurance.

How do I cancel the contract?

By taking out the insurance, regardless of the frequency you have selected for payment, you have agreed to be covered for the whole of the policy year. You have the right to cancel within the first 14 days of inception or renewal or 14 days from when you have received the documentation whichever is the latter.

You may ask us to consider cancellation after this time if your circumstances have changed and your policy is no longer required.

Cancellation by us; we may at any time cancel this policy if you have:

a. Relocated to a territory where we are unable to provide cover under this policy.

b. Been accepted into a recognised state or public insurance scheme in your country of residence which means this policy is no longer needed.

c. Failed to pay any premium on the due date.

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