

UnitedHealthOne 

GLOBAL MEDICAL INSURANCE®

THE LONG-TERM, WORLDWIDE
MEDICAL INSURANCE PROGRAM
FOR INDIVIDUALS AND FAMILIES



**Three Plan Options:
Silver Gold Platinum**



Security rated A (excellent) by A.M. Best
Version 0109FL

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All amounts shown in this booklet are in U.S. dollars.
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 Wordings are available upon request and prior to application.

With Global Medical Insurance® you can choose any doctor or hospital for treatment.

Worldwide Coverage for Non-U.S. Citizens and U.S. Expatriates

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. Whether you are working or living abroad for extended periods, traveling frequently between countries, maintaining multiple countries of residence, or exploring private health care alternatives, Global Medical Insurance is designed to meet your needs.

Global Medical Insurance offers worldwide coverage to a wide variety of international clientele, including expatriates, international executives, diplomats, students, entertainers and other international travelers. Global Medical Insurance can help eliminate the obstacles of time, currency and language when you are seeking medical treatment and need assistance and administration of your global health care benefits.

You have a choice of three plan options: Silver, Gold and Platinum. You also have the opportunity to select a coverage area: worldwide or worldwide excluding the U.S. and Canada. Simply choose the plan option and coverage area that best fits your needs. Each one offers a full range of benefits suited for individuals and families, provides coverage 24 hours a day, and you have the freedom to choose any doctor or hospital for treatment. When you select Global Medical Insurance, you receive IMG's commitment to deliver world-class health benefits, medical assistance and Global Peace of Mind®.



Custom Fit Products & The Best Service

At International Medical Group® (IMG®), we know that the reasons to travel abroad are many and varied - that's why our products are too. Our full-service approach to providing international medical insurance products includes servicing vacationers, those working or living abroad for short or extended periods, people traveling frequently between countries, and those who maintain multiple countries of residence. To meet all of these needs, we have developed a comprehensive range of major medical, life, dental and disability products that can be tailored to meet individual specifications.



But providing insurance products - no matter how comprehensive - is not enough. It's how we administer your benefits and support your international needs that sets us apart. Since 1990, we've served more than a million people around the globe with customer service that's second to none. We provide on-site medical staff who are available 24 hours a day for emergencies, multilingual customer service professionals and dedicated claims administrators who process tens of thousands of claims each year from all over the world. We maintain IMG Europe Ltd. to provide the same world-class services abroad, with the added benefits of similar time zones and swift postal delivery. We've set the benchmark for industry service levels by integrating independent credentialing services with in-house, fully owned and operated service divisions. At IMG, we're with you, wherever you go - bringing support for all your insurance needs around the globe - providing you Global Peace of Mind®.

The IMG Advantage

International Service Centers

To ensure that we are available when and where needed, IMG maintains international service and assistance centers in the United States and in the United Kingdom. From our office in the UK, IMG Europe provides administrative support and marketing services to our producers overseas, and claims administration and emergency medical assistance to those living and traveling worldwide. IMG Europe offers the same administrative services as IMG, with the added benefit of similar time zones and services in tune with local practices.

Multilingual Services

If you have a problem or question with your policy or claim, our international claims specialists and multilingual customer service professionals can help. You can easily submit claims from any country and communicate with us without language barriers.

Medical Management Services

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

International Currency Conversions

To help eliminate costly conversion fees and to expedite the receipt of funds, we provide international currency conversions and claim reimbursements via check, direct deposit and electronic transfers.

Leading-edge Technology

Technology has always been at the forefront of our expertise. Our proprietary online service, MyIMGSM, allows you to access information and manage accounts, 24 hours a day, seven days a week, from anywhere in the world. MyIMG provides a wealth of information at your fingertips.

Accessibility

Phone, fax, email, Live Chat - no matter where you are or what you may need, we provide you with all the necessary channels of communication for the convenience of contacting us from anywhere at anytime.



Strength & Financial Stability

When deciding which company will insure your health, there are many important factors to consider. In addition to comprehensive benefits and experienced administration, there must be the commitment and financial stability of an established international insurance company.



While IMG provides complete plan administration expertise, 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 IMG's vision of the international marketplace and offers the stability of a well-established insurance company. Sirius International is a White Mountains Re company.

Growing year by year, expanding globally, building upon a solid reputation, remaining stable but never standing still - these characteristics make IMG and Sirius International the team to choose for your Global Peace of Mind®.

**Sources: A.M. Best affirmed their rating in a press release dated October 31, 2008; Standard & Poor's affirmed their rating in a press release dated December 12, 2007. Ratings are accurate as of the date of printing and are subject to change.*

Global Medical Insurance Plan Options

IMG truly understands the needs of global citizens. It is through this understanding that we have developed the three plan options of Global Medical Insurance. Each one provides an assortment of benefits all designed to accommodate your individual needs.

Silver

This option provides affordable medical security designed for the more budget-conscious consumer. With \$5,000,000 of lifetime coverage, Silver offers a wide range of scheduled benefits equipped to meet your essential needs.

Gold

This option provides comprehensive coverage to fit the needs of the global consumer who demands a full range of benefits. With its complete benefits package, Gold is the most popular option and it extends to its members \$5,000,000 of lifetime coverage. Its extensive benefits provide first-rate international medical coverage and aid in reducing out-of-pocket expenses.

Platinum

This option provides *the* superior benefits package for the most discerning global consumer. Platinum offers enhanced benefits and services with \$8,000,000 of lifetime coverage. It is designed for the client who wants the convenience of comprehensive medical, dental, and vision benefits in one plan. The elite Platinum option also offers members access to our exclusive Global Concierge and Assistance ServicesSM (see page 5).

*IMG's World Headquarters
Indianapolis, Indiana USA*



Silver - Gold - Platinum

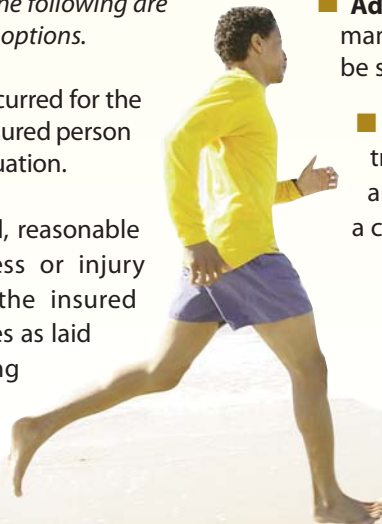
The following is a partial list of benefits and terms that are offered on all three plan options. Please see the Summary Schedule of Benefits on pages 6 and 7 for further comparison of specific benefit levels. Please refer to the Certificate Wording for specific terms, conditions and other details regarding the benefits.

- **Hospitalization** - Offers benefits for the following: room and board ■ nursing services ■ prescription medication ■ physician charges ■ diagnostic and laboratory testing ■ X-rays, chemotherapy and radiation ■ durable medical equipment ■ treatment, services and supplies routinely provided.
- **Surgery** - Offers benefits for the following: surgical care ■ second surgical opinion ■ physician charges for surgery ■ treatment, inpatient and outpatient services and supplies routinely provided.
- **Outpatient** - Medically necessary treatment by a physician or other health care provider that does not require an overnight stay.
- **Rx Coverage** - Medication prescribed by a physician for treatment of a covered illness or injury. These plan options also include a discount drug card administered by Universal Rx.
- **Emergency Room Accident** - Charges incurred for the use of the emergency room are covered up to the policy maximum.
- **Emergency Room Illness** - Services received in the emergency room are covered up to the policy maximum. Emergency room charges that do not require admittance to the hospital will be subject to an additional \$250 deductible.
- **Emergency Medical Evacuation** - This coverage is available when there is not a qualified facility in the immediate area to treat your life-threatening illness or injury. See page 8 for additional information.
- **Return of Mortal Remains** - Covers expenses for repatriation of bodily remains or ashes to the insured person's home country for death resulting from a covered injury or illness.
- **Transplants** - The plan options will reimburse an insured person with respect to a covered transplant incurred up to the benefit limit for each plan option. These are limited to certain transplants and covered only within designated transplant facilities that are members of the independently contracted PPO network.
- **Child Wellness** - Routine physical exams, inoculations, vaccinations, and other related well child care for eligible children.
- **Other Services** - Chiropractor when referred by a physician, radiation treatment, home nursing care, hospice care, physical therapy and prosthetic devices.
- **Mental / Nervous** - Charges for the diagnosis, treatment, and prescribed medication by a licensed physician for a mental or nervous state of health; physical, emotional, or behavioral illness. This benefit is part of the Silver plan option as outpatient only.
- **Maternity** - Coverage for pre- and post-natal care, normal delivery or C-section for each pregnancy, well baby care and treatment of newborn for the first 31 days. **Coverage may be purchased as a rider at the time of initial application under the Silver and Gold plan options.** Under the Platinum plan option, Maternity is covered the same as any illness. See Summary Schedule of Benefits for additional information.

Gold - Platinum

In addition to the benefits listed above, the following are included on the Gold and Platinum plan options.

- **Emergency Reunion** - Expenses incurred for the travel of a relative or friend of the insured person during an emergency medical evacuation.
- **Recreational Scuba** - Covers usual, reasonable and customary charges for illness or injury incurred while scuba diving if the insured person is using safe diving practices as laid down by an authoritative diving body.
- **Adult Wellness** - Includes routine physicals, mammograms and ob/gyn visits. Visits must be separated by at least 12 months.
- **Complementary Medicine** - Alternative treatments deemed medically necessary and prescribed by a licensed physician for a covered illness.



Platinum

The Platinum plan option is the complete international protection program. 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 ServicesSM.

- **Remote Transportation** - In addition to Emergency Medical Evacuation, the Platinum plan option provides Remote Transportation. In the event of a diagnosis of a critical medical condition which is not necessarily immediately life-threatening, but severe enough to result in death or a permanent disability if not treated right away, Remote Transportation will provide for eligible charges arising out of the transportation of an insured person to a qualified facility for further treatment (if the current facility is unable to provide such treatment).

To be eligible, Remote Transportation must be recommended by the attending physician in critical medical situations, and approved in advance and coordinated by IMG.

- **Political Evacuation** - If the United States Department of State, Bureau of Consular Affairs issues a mandatory evacuation order of the host country that becomes effective on or after the insured person's date of arrival in the host country, the Company will pay up to \$10,000 lifetime maximum for transportation to the nearest place of safety or for repatriation to the insured person's home country or country of residence provided that **1)** the evacuation order must apply specifically to the insured person **2)** the insured person contacts the Company within 10 days of the United States

Department of State, Bureau of Consular Affairs issuance of the evacuation order **3)** there is not a travel advisory in effect on or within six (6) months prior to the insured person's date of arrival or return in the host country and **4)** Political Evacuation and repatriation is approved and coordinated by IMG.

- **Vision** - The Platinum plan option provides coverage for the cost of vision exams and materials (includes frames, lenses and contacts).
- **Dental** - Provides coverages for Class I (Diagnostic and Preventive Services), Class II (Basic Services) and Class III (Major Services) as defined by the Certificate. These benefits are available after a six month waiting period and exclude orthodontia care.
- **High School Sports Injury** - Covers up to \$20,000 per certificate period for injuries incurred during sanctioned, organized sports at the high school level and below.
- **Two Tier U.S. Prescription Drug Card** - Provides additional Rx coverage for medication prescribed by a physician for the treatment of a covered illness or injury beyond the Universal Rx discount program. In addition to the extra savings, Platinum members can help control their health care costs by choosing effective, low cost generic drugs over the more expensive brand name versions.

Global Concierge and Assistance ServicesSM

The Platinum plan option provides clients more than insurance protection. IMG's Global Concierge and Assistance Services offers the knowledge and information they need to keep them healthy and safe. Below is a list of services handled by a dedicated service team that is available 24 hours a day, seven days a week, exclusively for our Platinum members.*

- **Dedicated Service Line** - An international toll-free number accessible worldwide 24/7.
- **Dedicated Claims Team** - Provides members with expedited claims processing.
- **Bag Tracking** - Assistance in locating lost checked baggage and arranging the delivery of it to you anywhere in the world.
- **Drug Translation Service** - 24/7 online access that provides country specific brand names of common prescription and over-the-counter medications.
- **Embassy & Consulate Referral** - Provides the location and contact information of the nearest U.S. Embassy or Consulate.
- **Emergency Cash Transfers** - Assists in arranging and obtaining cash transfers anywhere in the world.
- **Emergency Message Relay** - Relay messages to your family, friends and co-workers, helping you maintain contact during an emergency.
- **Emergency Travel Arrangements** - Assists in making the appropriate travel arrangements in the event you must interrupt your travel and return home.
- **Legal Referrals** - Provides the contact information for an attorney located in your country of travel.
- **Lost Passport/Travel Documents Assistance** - Assists in reporting, retrieval or replacement of lost or stolen travel documents.
- **Prescription Drug Replacement Assistance** - Assists in the replacement and shipment of lost or damaged medication.
- **Pre-trip Health and Safety Advisories** - 24/7 online access to information concerning current passport and visa requirements; information regarding inoculations and vaccinations; and up-to-date travel safety advisories.
- **Security Updates and Country Profiles** - 24/7 online access to the latest advisories and travel warnings.

* Global Concierge and Assistance Services are additional services offered under the Platinum plan option. They are not insurance benefits.

Summary Schedule of Benefits

Benefit Description <i>Subject to deductible & coinsurance unless otherwise noted</i>	SILVER	GOLD	PLATINUM
Coverage Area	Two options: worldwide or worldwide excluding the U.S. and Canada	Two options: worldwide or worldwide excluding the U.S. and Canada	Two options: worldwide or worldwide excluding the U.S. and Canada
Policy Maximum	\$5,000,000 lifetime per individual	\$5,000,000 lifetime per individual	\$8,000,000 lifetime per individual
Deductible	Ranges from \$250 to \$10,000 per period of coverage, 50% reduction within PPO	Ranges from \$250 to \$10,000 per period of coverage, 50% reduction within PPO, Carry forward deductible - last 30 days of certificate year	Ranges from \$100 to \$10,000 per period of coverage, 50% reduction within PPO, Carry forward deductible - last 30 days of certificate year
Family Deductible	Three times the individual deductible	Three times the individual deductible	Two times the individual deductible
Coinsurance within the U.S. and Canada	80% of the next \$5,000 of eligible expenses after the deductible, then 100% to the overall maximum per period of coverage	80% of the next \$5,000 of eligible expenses after the deductible, then 100% to the overall maximum per period of coverage	90% of the next \$5,000 of eligible expenses after the deductible, then 100% to the overall maximum per period of coverage
Coinsurance within the PPO network & outside the U.S. & Canada	100%	100%	100%
Hospitalization / Room & Board	\$600 per day (maximum of 240 consecutive days per covered event)	Average semi-private room rate	Private room rate
Intensive Care Unit	\$1,500 per day (maximum of 180 consecutive days per covered event)	Usual, Reasonable and Customary (URC)	Usual, Reasonable and Customary (URC)
Surgery	URC	URC	URC
Anesthetist's Charges Associated with Surgery	20% of surgery benefit	URC	URC
Transplants	\$250,000 per transplant	\$1,000,000 lifetime maximum	\$2,000,000 lifetime maximum
Outpatient	Visits/Exams - 25 visits per insured person per period of coverage to the maximum limit as outlined: <i>physician \$70; specialist \$70; psychiatrist \$60; chiropractor \$50; surgical intervention consultation \$500; X-rays</i> - \$250 per exam maximum limit; Lab Tests - \$300 per exam maximum limit	URC	URC
Rx Coverage	URC	URC	Prescription drug card - Copay: \$20 for generic / \$40 for brand name when a generic is not available
Emergency Room Illness	URC - subject to an additional \$250 deductible if not admitted	URC - subject to an additional \$250 deductible if not admitted	URC - subject to an additional \$250 deductible if not admitted
Emergency Room Accident	URC	URC	URC
Local Ambulance	\$1,500 per covered event - not subject to deductible or coinsurance	URC	URC
Emergency Evacuation	\$50,000 per period of coverage - not subject to deductible or coinsurance	Limited to policy maximum -not subject to deductible or coinsurance	Limited to policy maximum - not subject to deductible or coinsurance
Emergency Reunion	NA (Not Applicable)	\$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	\$50,000 lifetime maximum per insured - not subject to deductible or coinsurance
Maternity	Optional Rider - \$50,000 lifetime maximum, maximum of \$5,000 for normal delivery, \$7,500 for C-section, \$200 child wellness benefit for first 12 months - not subject to deductible or coinsurance - <i>Available after 10 months of coverage - benefits reduced by 50% for births that occur in 11th or 12th month of continuous coverage</i>	Optional Rider - \$50,000 lifetime maximum, maximum of \$5,000 for normal delivery, \$7,500 for C-section, \$200 child wellness benefit for first 12 months - not subject to deductible or coinsurance - <i>Available after 10 months of coverage - benefits reduced by 50% for births that occur in 11th or 12th month of continuous coverage</i>	Same As Any Illness (SAI) \$1,000 additional deductible, \$50,000 lifetime maximum, \$200 child wellness benefit for first 12 months <i>Available after 10 months of coverage</i>

Benefit Description <i>Subject to deductible & coinsurance unless otherwise noted</i>	SILVER	GOLD	PLATINUM
Supplemental Accident	NA	\$300 per occurrence - not subject to deductible or coinsurance	\$500 per occurrence - not subject to deductible or coinsurance
Mental/Nervous	Outpatient only - (see <i>Outpatient page 6</i>) - Available after 12 months of continuous coverage	\$10,000 per period of coverage up to a \$50,000 lifetime maximum - Available after 12 months of continuous coverage	SAAI \$50,000 lifetime maximum Available after 12 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	\$500 per period of coverage - not subject to deductible or coinsurance Available for those 18 years of age and over after 12 months of continuous coverage
Child Wellness	Three visits per period of coverage - maximum \$70 per visit Available for children under 18 years of age after 12 months of continuous coverage	\$200 maximum per period of coverage - not subject to deductible or coinsurance - Available for children under 18 years of age after 12 months of continuous coverage	\$400 maximum per period of coverage - not subject to deductible or coinsurance - Available for children under 18 years of age after 12 months of continuous coverage
Other Services	Extended Care - limited to first 30 days of confinement Radiation Treatment - URC Home Nursing Care - limited 30 days per covered event Hospice Care - limited 30 days per covered event Prosthetic Devices - all URC	URC	URC
Physical Therapy	Maximum \$40 per visit - 30 visit maximum per period of coverage	Maximum \$50 per visit	Maximum \$50 per visit
High School Sports Injury	NA	NA	Up to \$20,000 per certificate period
Recreational Scuba	NA	URC	URC
Remote Transportation	NA	NA	Limited to \$5,000 per certificate period up to a \$20,000 lifetime maximum
Political Evacuation and Repatriation	NA	NA	Limited to \$10,000 lifetime maximum
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
Non-emergency Dental	NA	NA	Calendar year maximum - \$750 Individual deductible - \$50 Schedule of benefits - Class I: 90% Class II: 70% Class III: 50% Ortho 0% (6 month waiting period)
Emergency Dental due to Accident	\$1,000 per period of coverage	URC	URC
Emergency Dental due to Sudden Unexpected Pain	NA	\$100 per period of coverage	See non-emergency dental benefits
Vision	NA	NA	Exams - up to \$100 per 24 months Materials - up to \$150 per 24 months
Global Concierge & Assistance Services	NA	NA	Included (see page 5)
Pre-existing Conditions (see page 9)	\$5,000 per period of coverage up to a \$50,000 lifetime maximum Available after 24 months of continuous coverage	\$5,000 per period of coverage up to a \$50,000 lifetime maximum Available after 24 months of continuous coverage	SAAI

Global Term Life InsuranceSM (Including AD&D)

While Global Medical Insurance is designed to protect individuals and families from the high cost of medical expenses, Global Term Life Insurance provides protection for families following a traumatic loss. Global Term Life Insurance also includes Accidental Death and Dismemberment (AD&D) coverage at no additional cost. AD&D is paid in addition to any amount paid by Global Term Life Insurance and can double the amount of the benefit.

Those approved for Global Medical Insurance and under age 70 are automatically eligible for Global Term Life Insurance at the time of application. Global Term Life Insurance is an optional program purchased in units. The number of units applicants may purchase is based upon their age at the time of application and each subsequent renewal. Applicants from age 31 days through 18 years and from 65 through age 69 are eligible for one unit of coverage. Applicants from age 19 through age 64 are eligible for two units of coverage.

Global Term Life Insurance		Accidental Death & Dismemberment <i>Included with Global Term Life Insurance</i>	
Age	Principal Sum <i>(per unit)</i>		
31 days - 18	\$5,000	Accidental Loss of Life	Principal Sum*
19-29	\$75,000	Accidental Loss of 2 Members**	Principal Sum*
30-39	\$50,000	Accidental Loss of 1 Member**	50% of Principal Sum*
40-44	\$35,000		
45-49	\$25,000		
50-54	\$20,000		
55-59	\$15,000		
60-64	\$10,000		
65-69	\$7,500		

*Benefit based on age at time of death.
** "Member" means hand, foot or eye.

Global Daily IndemnitySM

Insuring your life and health reduces the burden of unforeseen financial liabilities due to an illness or accident. Unfortunately, obligations and bills continue even during a hospital stay. The Global Daily Indemnity plan is an excellent way to offset these expenses. Global Daily Indemnity will pay directly to you \$100 for each required overnight stay in a hospital. The hospital stay must be eligible for coverage under your Global Medical Insurance plan. Hospital stays related to maternity are not eligible.

Age	Principal Sum
31 days - 69 years <i>(only available between these ages)</i>	\$100 per day

How to Apply

Global Term Life Insurance and Global Daily Indemnity are available with no additional medical underwriting. Simply complete and return the health and life portions of the application with the appropriate premiums as outlined in the application.

Emergency Medical Evacuation

During a medical emergency, access to qualified treatment is an immediate concern. For these situations, Global Medical Insurance includes Emergency Medical Evacuation. This coverage is available when there is not a qualified facility in the immediate area to treat your life-threatening illness or injury.

Global Medical Insurance covers Emergency Medical Evacuation to the nearest qualified medical facility or to the nearest qualified medical facility in the insured's home country provided that any additional travel time to the insured's home country will not cause detriment to his/her health as determined by the treating physician.

Emergency Medical Evacuation benefits under Global Medical Insurance provide access to care when you or your family need it most. During the emergency, IMG will coordinate evacuation to a qualified facility equipped to handle your illness or injury. A team of independent pilots and medical professionals will transport you and a family member (if there is room available), while arrangements for your arrival are being made with the receiving hospital. Once at the receiving hospital, IMG will continue to monitor your treatment and communicate with the physicians and your family members.

To be eligible, the evacuation must be recommended by the attending physician in life-threatening situations, and approved in advance and coordinated by IMG. IMG is available 24 hours a day, 7 days a week to arrange emergency medical evacuations.

Platinum Optional Riders

If you elect the Platinum plan option, in addition to the many benefits offered, you may add optional Terrorism and Sports benefits. Simply figure in the appropriate premiums, as outlined in the application, into the calculation for the total premium due.

Terrorism Rider - If an insured person is injured as a result of an act of Terrorism*, and the insured person has no direct or indirect participation in the act, the plan will reimburse eligible medical claims subject to a \$50,000 lifetime maximum.

This benefit does not cover an act of Terrorism in the event that an advisory to leave a certain country or location is issued by the United States government after the insured person's arrival date, and the insured person unreasonably fails or refuses to depart the country or location.

* For limitations and the definition of Terrorism, please see the Certificate Wording.

Sports Rider - Provides up to \$25,000 of lifetime coverage for extreme sports such as mountaineering, parachuting, and whitewater rafting. Also provides up to \$10,000 of lifetime coverage for amateur sports when not engaged for wage, reward, or profit including contact sports such as soccer and hockey.

Global Medical Insurance effectively handles pre-existing conditions based on the plan option you choose.

Pre-existing Conditions* - are covered as provided herein

Silver and Gold:

On the Silver and Gold plan options, conditions that are fully disclosed on the application and have not been excluded or restricted by a rider, will be covered after coverage has been in effect for 24 continuous months (subject to the foregoing limits and the other terms of the plan❖). The Silver and Gold 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. This benefit is payable whether or not you have received consultation or treatment for the condition(s) during the 24-month period.

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: asthma, allergies, tonsillectomy, back conditions, adenoidectomy, hemorrhoids or hemorrhoidectomy, disorders of the reproductive system, hysterectomy, hernia, gall stones or kidney stones, any condition of the breast, and any condition of the prostate.

Platinum:

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.

Other Exclusions and Limitations❖

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

❖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 plan 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.



As an accommodation, IMG works with the hospital or clinic for direct payment of eligible expenses.

Precertification

Prior to receiving treatment you may need to contact IMG to precertify your treatment and/or for verification of benefits. Precertification means calling IMG's Utilization Management and Review company to receive a determination of medical necessity for the proposed treatment or services. 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. Precertification may be undertaken by you, the doctor, a hospital administrator or a relative. The following treatments and services must be precertified or certain reductions in benefits may result:

- Any surgery or treatment requiring hospitalization
- Outpatient surgery
- Within 48 hours after an emergency admission to the hospital
- Care in an extended care facility
- Home nursing care
- Durable medical equipment including artificial limbs
- Transplants

Verification of Benefits

Verification of benefits is the process of verifying your general coverage and the available benefits under the plan. You may do this by contacting IMG's Customer Care department whether or not your treatment or services require precertification. Verification of benefits is not a guarantee of payment or assurance of coverage, and all medical expenses must meet eligible payment guidelines in accordance with the terms and conditions of the plan. While precertification and verification of benefits are separate determinations, both are made in reliance on the completeness and accuracy of the information provided by you and your health care providers to IMG.

Claims Procedures

When you receive treatment, original itemized bills must be received by IMG within 90 days of services. As a courtesy, claims may be paid in selected alternate currencies by electronic bank wire. Please see the Claim Form for more information and conditions of this service.

Claim Filing Alternatives

Direct Payment to providers

In many cases IMG works with the hospital or clinic as an accommodation, including those outside the independent PPO, for direct payment of eligible medical expenses on your behalf. To be eligible to have a claim paid in this fashion, you or the provider must complete a Claim Form and submit it with original itemized bills. In this case, you will be responsible for direct payment of your deductible, coinsurance amounts and non-eligible expenses and charges.

Reimbursement

If you have received treatment and need to be reimbursed for out-of-pocket medical expenses, complete the Claim Form and submit your original itemized bills and paid receipts within 90 days. We will reimburse your eligible medical expenses after applying the deductible and coinsurance, subject to the terms of the plan.

Please remember to submit your bills and receipts as soon as you receive them. Do not hold them until the end of the year. IMG will apply eligible medical expenses to your deductible and coinsurance throughout the year.



MyIMGSM

Service at your fingertips anytime, anywhere - that's what MyIMG provides. MyIMG is our proprietary online service that allows you to access information and manage accounts, 24 hours a day, seven days a week, from anywhere in the world.

Our service centers in the U.S. and Europe are always available to help or handle emergencies 24 hours a day, but through MyIMG you have immediate access to a wealth of information about your account and can manage routine areas to help you save time when you may need it most. Some features include:

- Immediate claim status check
- Get explanation of benefits
- Obtain certificate documents
- Recommend provider/facility
- Locate a provider
- Request ID cards
- Initiate precertification

eDocAmerica

For Platinum plan members, you can access eDocAmerica through MyIMG and communicate with experienced health care professionals 24 hours a day, regardless of your location.

eDocAmerica allows you to consult with board-certified physicians, licensed psychologists, pharmacists and dentists to assist you with any routine health related questions you have. It is not meant to replace your family physician; instead eDocAmerica focuses on addressing your concerns in a convenient manner and providing you with support to make informed decisions. eDocAmerica professionals will quickly respond to your questions, refer you to specialists and get you the information you need – saving you time and possibly preventing unnecessary office visits. Email responses are normally received within two to four hours and guaranteed within 24 hours.

Akeso Care Management[®] (ACM[®])

The ability to access quality health care is of paramount importance when a medical emergency arises abroad. To coordinate care and provide U.S. and internationally based medical management services, IMG formed ACM, an on-site specialized division devoted entirely to medical management.

The clinical staff consists of qualified physicians and registered nurses who are experts at assessing the need for services and ensuring those services are delivered in a timely, cost-effective manner. ACM has international medical experience, providing services in more than 170 countries worldwide.



ACM is accredited by URAC, an independent, nonprofit organization that is internationally recognized for promoting continuous improvement in the quality and efficiency of health care management. Through a rigorous and comprehensive review that ensures ongoing compliance, ACM earned its URAC accreditation in Health Utilization Management.

From routine medical care to complex case management, from check-ups to emergency medical evacuations, ACM is there for you. They are committed to consumer protection and empowerment, quality operations and regulatory compliance. This translates into better care for you - around the world, around the clock.

Locating a Provider

Whenever or wherever you travel within the U.S., it's comforting to know that the extensive Preferred Provider Organization (PPO) Network is there to serve you. The independent PPO includes hundreds of thousands of established, highly qualified physicians and hospitals, including some of the most well-recognized university medical centers and transplant facilities in the U.S.

Of course, you have the freedom to choose any physician or health care facility you wish. However, choosing a provider in the PPO network can significantly reduce your out-of-pocket costs. **Your deductible will be reduced by 50% and any coinsurance for that charge is waived when eligible treatment is received from a network provider.**

Additionally, if you are seeking treatment outside the U.S., we provide you access to our International Provider AccessSM (IPA), a database that includes more than 16,000 highly qualified physicians and facilities that encompass a comprehensive array of specialties to handle any health care emergency.

You can instantly access a list of providers and facilities within the PPO and IPA network online at www.imglobal.com. The directories allow you to search by physician or facility name, specialty, or location.

Our goal is to provide quality medical coverage wherever you may be. The PPO and our IPA enable us to do just that, and our online directories put the information at your fingertips - anytime, anywhere.



IMG helps you manage your care and guides you through the claims process to ensure your Global Peace of Mind[®].

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. Non-U.S. citizens may reside anywhere, including their country of citizenship, although certain eligibility restrictions may apply to non-U.S. citizens residing in the United States. Persons between the ages of 14 days and 74 years old may apply for coverage. Persons older than 74 years of age are not eligible. Certain other restrictions may also apply. Please ask your independent insurance agent or broker for further details.

Families applying for Global Medical Insurance will receive free coverage for the first two eligible dependent children between the ages of 14 days to 9 years when both parents are insured under the Global Medical Insurance plan. Children under the age of 19 applying individually should use the male 19-24 age bracket when applying for coverage. 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 a renewal form. You must continue to meet the eligibility requirements outlined above in order to renew. There are no additional medical questions at renewal, and we can work with you to provide flexible renewal options. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Lifetime Coverage

Lifetime medical coverage is available if you are enrolled in the Global Medical Insurance plan by your 65th birthday and maintain continuous coverage to age 75. Prior to your 75th birthday you will receive a summary of benefits of 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 are 19 years of age or older, you must complete your own 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 process it as quickly as possible. Once accepted, 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 accepted, you will receive a full refund of premium. For additional information, please contact your independent insurance agent or broker.

Once you are accepted in the plan, we are confident that you will be pleased with the full terms of coverage. To ensure your satisfaction, we provide a 15 day period to review the fulfillment kit contents. If, during that 15 day period, you find that you are not happy 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.





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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 brochure 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, 2009.
- You see a doctor on February 1, 2009 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, 2009.
- You see your doctor on February 1, 2009 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, 2009.
- You see your doctor on February 1, 2009 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.