



HEALTH INSURANCE PROGRAM

# Perfect Care



Insurance Company, Ltd

BENEFITS	COVERAGE
MAXIMUM BENEFIT PER INSURED PER POLICY YEAR	
Worldwide Coverage	\$2,000,000
Renewal Guaranteed	, ,,
DEDUCTIBLE PER POLICY YEAR	
One (1) deductible per insured, two (2) deductibles maximum per family policy	
Deductible waived for Intra-hospital Surgery in the country of residence up to \$1,000 option	
Deductible is waived for hospitalization in case of serious accident up to \$5,000 option  Deductible is waived or reduced for not submitting claims in the last 3 years	100%
Deductible is waived of reduced for not submitting claims in the last 3 years  Deductible options of \$5,000 or less	100%
Deductible options greater than \$5,000	50%
ORGAN AND TISSUE TRANSPLANT	3070
Lifetime limit	\$300,000
MEDICAL SERVICES	<b>4300,000</b>
Standard Room	100%
Hospital Accommodation for Companion of a Hospitalized Minor, maximum 10 nights	\$100 per night
Intensive Care Unit	100%
Other Hospital Services and Supplies	100%
Physicians and Specialists	100%
Hospital and Intensive Care Unit Visits	100%
Office Visits	100%
Telemedicine	100%
House Calls	100%
Surgeons	100%
Assistant Surgeon	100%
Anesthesiologist Reconstructive Surgery	100%
Surgical Implants or Prosthesis	100%
Emergency Room	100% 100%
Emergency Hospitalization - Out of Network of Providers	100%
Second Medical Opinion	100%
Inpatient Rehabilitation, maximum 30 days	100%
Medical Diagnostic Services	100%
Home Health Care, maximum 30 days	\$5,000
Dialysis	100%
Radiotherapy and Chemotherapy	100%
Ambulatory Therapy, maximum 30 visits	\$4,000
Prescribed Medications	\$5,000
Allergy Treatment	\$2,000
Durable Medical Equipment	\$5,000
External Prosthesis, lifetime limit	\$5,000
OTHER BENEFITS	1000/
Dental Benefit as direct consequence of a covered accident	100% 100%
Human Papilloma Virus (HPV)	
Acquired Immune Deficiency Syndrome (AIDS), lifetime limit Alzheimer's Disease	\$100,000
Palliative Care / Hospice, maximum 30 days, lifetime limit	100% \$10,000
Prophylactic Surgery to prevent the high risk of Cancer, lifetime limit	\$15,000
Aviation Accident Injuries in a private or commercial aircraft	100%
Recreational Sports Accident Injuries, non-professional	100%
MATERNITY CARE	
No deductible applies, except in policies with a deductible of \$5,000 or more	
Natural birth or cesarean, prenatal and postnatal care, 2 pediatric visits, collection and shipment of	\$5,000
umbilical cord stem cells	. ,
MATERNITY COMPLICATIONS	
In Latin America	100%
Outside Latin America	\$300,000

A newborn of a covered maternity is automatically covered, provided it is enrolled in the policy within 60 days of childbirth

### **Schedule of Benefits**

BEN	IEFITS	COVERAGE
CONGENITAL / HEREDITARY CONDITIONS AND	PERINATAL COMPLICATIONS	
Conditions that manifest before the age of 18 years, lifetime limit		\$250,000
Conditions that manifest at the age of 18 years or later, lifetime limit		\$1,000,000
In multiple births under covered maternity, the I	penefit will be proportionately distributed	<del>+ -//</del>
among all newborns		
PREVENTIVE MEDICAL CHECK UP. No deductible	applies	
Principal Insured and Dependent Spouse		\$200
Dependent children		\$100
EMERGENCY TRANSPORTATION. No deductible	applies	
Ground Ambulance		100%
Air Ambulance and Repatriation of Mortal Rema	ins	\$25,000
PROVIDERS NETWORK		
Inside Network in USA: Solutions Network		100%
utside Network in USA:		80%
Outside USA:		Free Choice
LATIN AMERICA		
	ral and South America and the Caribbean; except	
Puerto Rico, U.S. Virgin Islands and Cuba		
SERVICES WITH PRE-CERTIFICATION REQUIREM	ENT:	
Hospitalization	Organ and Tissue Transplant	
Surgeries with General Anesthesia	Home Health Care	
Cardiac Procedures	Air Ambulance	
Radiotherapy & Chemotherapy	Repatriation of Mortal Remains	
Palliative Care / Hospice	Durable Medical Equipment	
Ambulatory Therapies		
	he insured responsible for payment of 30% of all	
covered charges		
WAITING PERIODS		
Any Illness or Injury; except Infectious diseases and Injuries resulting from a covered accident		30 days
Maternity Care		10 months
Congenital and Hereditary Conditions for insured born under non-covered maternity		12 months
Acquired Immune Deficiency Syndrome (AIDS)		48 months
Prophylactic Surgery		24 months
Organ and Tissue Transplant		12 months
Preventive Medical Check up		10 months



#### TRAVEL ASSISTANCE

Assistance Services for emergencies occurring for the 1st time during a trip abroad.

The benefits, terms and conditions are specified in the Travel Assistance Rider. The benefit amount decreases to 50% at age 75, to 25% at age 85, and ends at age 86.

All benefits require Notification and Pre-certification within 24 hours of the event.

- Limit US \$10,000
- No deductible applies
- Eligible up to 74 years



Funeral Services coordinated by the Company for the Principal Insured and Dependent Spouse from ages 18 to 74.

180 days Waiting Period.

The benefits, terms and conditions are specified in the Funeral Assistance Rider.

All services require Notification and Pre-Certification within 24 hours of the event.

- Limit US \$2,500
- No deductible apply
- Eligible up to 74 years



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