

Company: IMG Europe Ltd.

Product: GlobalSelect Executive

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This document provides a summary of the key information relating to a private medical insurance policy. The full terms and conditions of the cover and other important information are included in the policy documentation.

What is this type of insurance?

This insurance is designed to meet the general demands and needs of individuals and families who require international medical insurance and purchase their coverage in the United Kingdom. The cover is for treatment of conditions related to disease, illness or injury.



What is covered?

In-patient and day-patient treatment

- ✓ Hospital charges
- ✓ Accidents, emergencies, intensive care including surgical care
- ✓ Surgeons, consultants, anaesthetists, nurses and ancillary charges
- ✓ Medical practitioners
- ✓ Drugs, dressings and durable medical equipment
- ✓ Reconstructive surgery following an accident of following surgery for an eligible condition
- ✓ Diagnostic tests and procedures, x-rays, pathology, MRI and CT scans
- ✓ Physiotherapy
- ✓ Parental hospital accommodation
- ✓ Post hospitalization treatment received within 90 days of being discharged from hospital
- ✓ Organ transplant 350,000 USD/200,000 GBP/240,000 EUR lifetime limit
- ✓ Psychiatric treatment after 12 months continuous cover under the policy maximum 30 days

Out-patient treatment and wellness benefits

- ✓ Family doctor, treatment and referrals
- ✓ Specialists and consultants
- ✓ X-rays, pathology, diagnostic tests and procedures
- ✓ Prescribed drugs, medicines, dressings and durable medical equipment
- ✓ Out-patient surgery
- ✓ MRI and CT scans
- ✓ Physiotherapy, homeopathic and osteopathic therapy 4,375 USD/2,500 GBP/3,000 EUR up to 20 visits
- ✓ Hormone replacement therapy 18-month limit
- ✓ Home nursing care immediately after or instead of in-patient/day-patient treatment 132 USD/75 GBP/90 EUR maximum 60 visits
- ✓ Adult wellness and health check after 12 months of continuous coverage 875 USD/500 GBP/600 EUR

- ✓ Child wellness and health check after 12 months of continuous coverage 875 USD/500 GBP/600 EUR
- ✓ Psychiatric treatment after 12 continuous months 4,375 USD/2,500 GBP/3,000 EUR

Travel Transportation and out of area benefits

- ✓ Emergency local ambulance
- ✓ Emergency medical evacuation and transportation to the nearest suitable hospital facility
- ✓ Accompanying relative, travel and accommodation
- ✓ Cremation/burial or repatriation of remains 20,000 USD/14,285 GBP/17,140 EUR lifetime limit
- ✓ Compassionate visit after 12 months continuous cover under policy 5,250 USD/3,000 GBP/3,600 EUR
- ✓ Worldwide accident and emergency out of area cover 60 days maximum up to 35,000 USD/20,000 GBP/24,000 EUR
- ✓ USA Elective treatment within network (excludes non-emergency travel & accommodation) applicable to those who have not selected worldwide cover 875,000 USD/500,000 GBP/600,000 EUR with 20% co-insurance

Cancer treatment

- ✓ Consultations
- ✓ Testing
- ✓ Drugs
- ✓ Chemotherapy and radiotherapy

Pre-Existing conditions and underwriting/coverage options

- ✓ Full medical underwriting 24 months continuous coverage for non-declared or accepted conditions 5,250 USD/3,000 GBP/ 3,600 EUR per period of coverage and 52,500 USD/ 30,000 GBP/36,000 EUR lifetime limit
- ✓ Moratorium Enrolment after 24 months continuous coverage subject to 24 months without treatment, symptoms, medication or consultation, full cover (refer to your policy for further details)
- ✓ Chronic Conditions and palliative care up to 5,250 USD/3,000 GBP/ 3,600 EUR with lifetime limit of 52,500 USD/30,000 GBP/36,000 EUR

- ✓ Stabilisation of acute chronic episode – full cover

Additional benefits

- ✓ Prosthetic devices
- ✓ Hospital cash benefit 525 USD/300 GBP/360 EUR up to 60 nights total
- ✓ AIDS/HIV treatment 15,000 USD/8,750 GBP/10,285 EUR with lifetime limit of 100,000 USD/57,140 GBP/68,570 EUR
- ✓ Complementary medicine therapies such as acupuncture, aroma, chiropractic therapy, herbal, magnetic, massage, vitamin and traditional Chinese medicine 4,375 USD/2,500 GBP/3,000 EUR
- ✓ Rehabilitation and extended care facility up to 180 days
- ✓ Hospice care up to 180 days
- ✓ Out of country legal expenses 17,500 USD/10,000 GBP/12,000 EUR see policy for applicable excess
- ✓ Vision contribution due to accident benefit 350 USD/200 GBP/240 EUR subject to 50% co-insurance
- ✓ Security & political evacuation & repatriation 17,500 USD/10,000 GBP/12,000 EUR lifetime limit
- ✓ Identity theft cover & assistance 875 USD/500 GBP/600 EUR
- ✓ Out of country criminal assault benefit (when admitted to hospital for 48 hours or more) 1,750 USD/ 1,000 GBP/1,200 EUR per admitted night to a maximum of 8,750 USD/5,000 GBP/6,000 EUR
- ✓ Natural disaster evacuation & accommodation 438 USD/250 GBP/300 EUR per 24 hours for up to 5 days

Dental Treatment

- ✓ Emergency dental treatment (in-patient or day-patient)
- ✓ Accidental dental damage caused to sound natural teeth lost or damaged in an accident (out-patient treatment/dental surgery must be received within 5 days from the date of the accident occurring)
- ✓ Emergency dental treatment (outpatient/dental surgery) for the immediate relief of severe pain, treatment of an abscess, cracked or broken tooth rebuild or temporary filling within 24 hours from the onset of pain and no more than 5 days from event – up to 438 USD/250 GBP/300 EUR in aggregate subject to 25% co-insurance
- ✓ Routine dental treatment (out-patient) for the restoration of natural teeth 700 USD/400 GBP/480 EUR in aggregate (see wording for further benefit breakdown) subject to 25% co-insurance and incurred after 180 days from the effective date
- ✓ Major restorative dental treatment incurred 1,313 USD/ 750 GBP/900 EUR in aggregate subject to 50% co-insurance and incurred after 180 days from the effective date

Options to increase your cover* (which will increase your premium)

- ✓ Daily Indemnity
- ✓ Dental
- ✓ Maternity optional add on rider
- ✓ Life
- ✓ Accidental death and dismemberment

*Available only at inception

Options to decrease your cover (which will reduce your premium)

- ✓ Reduced cover options available via sub-plans HeadStart, Basic and Standard
- ✓ Excess options are available which apply to each member on every policy
- ✓ Optional geographic area of cover other than worldwide are available



What is not covered?

These are some of the core exclusions which may change if you select options to increase or decrease your cover. Please refer to the terms and conditions for full details.

- ✗ Pre-existing conditions – subject to underwriting type
- ✗ Maternity
- ✗ Treatment for infertility
- ✗ Cosmetic treatment
- ✗ Any non-disclosed condition
- ✗ Any chronic condition which is a pre-existing condition
- ✗ Amateur athletics, professional athletics injuries and illness
- ✗ Treatment required as a result of war, terrorism, contamination by radioactivity, biological or chemical agents
- ✗ Birth control, sterilisation, vasectomy
- ✗ Elective termination of pregnancy
- ✗ Self-inflicted injury or suicide
- ✗ Sleep disorders
- ✗ Weight loss modification or surgery
- ✗ Sexual dysfunction
- ✗ Treatment of alcohol and substance abuse
- ✗ Any venereal disease or any other sexually transmitted disease
- ✗ Any medical condition resulting from or occurring during the commission of a violation of law by the insured person

- ✘ Hair loss, wigs, hair treatments, hair transplants or any drug that promotes hair growth
- ✘ Charges incurred for surgeries or treatment or supplies which are investigational, experimental or for research purposes

Are there any restrictions on cover?

- ! Cover for pre-existing conditions under this product is dependent on the underwriting type that applies to each member
- ! Some benefits have specific limits. Please refer to your terms and conditions for full details.
- ! If you select an excess, eligible benefits will only be paid once the excess amount has been deducted.
- ! Coverage areas based on the option you choose at time of application
- ! Failure to comply with Pre-Certification for specific services and treatment may reduce eligible charges by 50%
- ! Limitations on treatment of the feet
- ! Serving in the military, navy or air force in time of declared war, or while under orders for war-like operations or any medical conditions sustained whilst on military training exercise
- ! Treatment of any condition of acne, allergies, asthma, breast, prostate, tonsillectomy, adenoidectomy, hemorrhoids or hemorrhoidectomy, reproductive system or hysterectomy, diverticulitis, intervertebral disc disease, hernia, gall stones or kidney stones which manifest themselves during the first 180 days of cover

Where am I covered?

Based on the option chosen at the time of application by each member:

- ✓ Area 1: Europe (see your policy terms and conditions for the details of countries included)
- ✓ Area 2: Worldwide excluding USA, Canada, China, Hong Kong, Macau, Japan, Singapore and Taiwan
- ✓ Area 3: Worldwide

What are my obligations?

- 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.

When and how do I pay?

You can pay your premium annually, semi-annually, quarterly or monthly by direct debit, credit card, bank transfer or money order.

When does coverage start and end?

From the start date (shown on your certificate of insurance) for a period of 12 months – and then for the period specified when you renew and pay your premium (usually 12 months).

How do I cancel the contract?

- If you are not satisfied, or this cover is not suitable for you and you want to cancel, please provide written cancellation instructions (by email, fax or post) and return the policy wording with the certificate of insurance to the plan manager within 30 days after receipt.
- If you cancel your cover after 30 days from the date you receive the policy wording, subject to the plan terms and that no claim have been paid or are in progress, you will be eligible to receive a pro-rata refund of premium paid, based on the number of days cover remaining from the date the plan manager receives your written request.