

(New Business Rates Effective 01/01/2018. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

ANNUAL PREMIUMS

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	343		298		232		204		186		166	
10 to 18*	351		313		258		239		225		199	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.												
19 to 24	794	990	688	975	536	748	466	651	367	522	325	450
25 to 29	838	1,128	731	1,096	569	844	497	733	389	610	346	480
30 to 34	938	1,248	807	1,175	626	910	549	794	430	637	382	542
35 to 39	1,072	1,503	868	1,333	673	1,035	589	895	460	745	411	582
40 to 44	1,356	1,650	1,101	1,435	730	1,125	639	984	612	762	543	679
45 to 49	1,510	1,820	1,239	1,548	958	1,197	836	1,043	682	823	607	733
50 to 54	1,843	2,025	1,563	1,746	1,208	1,355	1,053	1,205	896	998	796	890
55 to 59	2,271	2,271	1,975	1,975	1,528	1,527	1,333	1,333	1,122	1,130	997	1,007
60 to 64	3,344	3,146	3,046	2,851	2,569	2,162	2,325	2,087	1,944	1,726	1,730	1,536
65 to 69	6,983	6,058	6,683	5,794	6,251	5,276	4,806	3,922	4,202	3,763	3,740	3,349
70 to 74	Please contact IMG or your Producer for premium information											
Optional Dental & Vision Rider \$570 annual premium						Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10						

**Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.

Note: Choosing the semi-annual payment option (modal payment factor .55) results in total payments of 110% of the annual premium, choosing the quarterly payment option (modal payment factor .28) results in total payments of 112% of the annual premium, and choosing the monthly payment option (modal payment factor .10) results in total payments of 120% of the annual premium.

Global Mission Medical Insurance® - BRONZE

WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN

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ANNUAL PREMIUMS

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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	256		224		175		153		141		123	
10 to 18*	263		235		194		181		169		148	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.												
19 to 24	597	742	515	730	401	560	351	488	275	392	244	338
25 to 29	629	846	550	823	427	633	371	551	292	457	259	361
30 to 34	704	936	606	882	468	683	411	596	322	478	286	408
35 to 39	806	1,128	652	1,002	504	777	443	672	346	560	308	436
40 to 44	1,015	1,239	825	1,076	547	844	480	738	459	575	408	508
45 to 49	1,132	1,365	928	1,162	720	899	627	783	511	618	455	549
50 to 54	1,382	1,519	1,173	1,309	905	1,015	791	903	672	750	598	668
55 to 59	1,703	1,703	1,480	1,480	1,147	1,145	998	998	841	848	749	754
60 to 64	2,508	2,361	2,285	2,138	1,926	1,701	1,745	1,566	1,457	1,296	1,298	1,152
65 to 69	5,236	4,544	5,013	4,346	4,690	3,957	3,604	2,942	3,152	2,822	2,805	2,512
70 to 74	Please contact IMG or your Producer for premium information											
Optional Dental & Vision Rider \$460 annual premium						Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10						

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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	396		345		268		236		215		192	
10 to 18*	405		361		298		277		261		231	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.												
19 to 24	918	1,144	795	1,127	619	864	539	752	423	604	376	520
25 to 29	969	1,304	846	1,267	658	976	574	848	450	705	400	554
30 to 34	1,084	1,443	934	1,359	723	1,052	635	918	498	737	442	627
35 to 39	1,239	1,738	1,004	1,541	777	1,197	681	1,034	531	861	475	673
40 to 44	1,567	1,908	1,272	1,659	844	1,300	739	1,139	707	881	628	784
45 to 49	1,746	2,105	1,432	1,791	1,109	1,383	966	1,206	789	951	702	848
50 to 54	2,131	2,341	1,807	2,018	1,396	1,565	1,218	1,393	1,035	1,155	920	1,029
55 to 59	2,627	2,627	2,283	2,283	1,768	1,765	1,541	1,541	1,297	1,308	1,153	1,165
60 to 64	3,866	3,637	3,522	3,296	2,969	2,621	2,689	2,413	2,246	1,995	2,000	1,777
65 to 69	8,073	7,004	7,726	6,698	7,227	6,100	5,556	4,534	4,858	4,349	4,323	3,872
70 to 74	Please contact IMG or your Producer for premium information											
Optional Dental & Vision Rider \$570 annual premium							Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10					

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Global Mission Medical Insurance® - SILVER

WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN



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ANNUAL PREMIUMS

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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	297		260		201		177		163		143	
10 to 18*	305		270		224		208		196		171	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.												
19 to 24	690	858	596	844	463	646	405	565	317	454	282	391
25 to 29	727	979	636	951	492	730	430	637	337	528	300	417
30 to 34	813	1,082	700	1,020	542	790	475	688	373	553	331	472
35 to 39	932	1,304	753	1,158	583	899	512	776	400	646	357	504
40 to 44	1,174	1,432	952	1,244	633	975	554	853	530	665	472	588
45 to 49	1,309	1,578	1,073	1,342	833	1,040	725	905	590	714	527	635
50 to 54	1,599	1,756	1,356	1,513	1,047	1,174	915	1,044	776	867	691	772
55 to 59	1,969	1,969	1,711	1,711	1,325	1,324	1,155	1,155	972	980	865	873
60 to 64	2,899	2,729	2,642	2,471	2,228	1,967	2,017	1,811	1,685	1,498	1,501	1,333
65 to 69	6,054	5,252	5,795	5,024	5,421	4,576	4,166	3,401	3,644	3,263	3,243	2,903
70 to 74	Please contact IMG or your Producer for premium information											
Optional Dental & Vision Rider \$460 annual premium							Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10					

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Global Mission Medical Insurance® - GOLD

(For enhanced, long-term benefits, see Gold Plus plan option)

WORLDWIDE COVERAGE

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ANNUAL PREMIUMS

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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	551		470		352		320		282		255		230	
10 to 18*	610		497		389		352		315		282		254	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.														
19 to 24	1,272	1,674	1,095	1,587	875	1,173	757	1,014	590	818	466	618	420	557
25 to 29	1,301	1,848	1,119	1,724	895	1,271	775	1,099	604	858	477	633	430	569
30 to 34	1,381	1,988	1,187	1,829	950	1,388	826	1,208	650	980	513	734	461	660
35 to 39	1,434	2,205	1,234	1,937	987	1,440	859	1,254	674	1,018	532	761	480	684
40 to 44	1,884	2,463	1,724	2,241	1,379	1,655	1,186	1,565	925	1,194	730	935	658	758
45 to 49	2,182	2,638	1,984	2,420	1,528	1,834	1,375	1,651	1,120	1,289	886	1,018	797	917
50 to 54	2,593	2,796	2,335	2,544	1,866	2,034	1,727	1,883	1,381	1,505	1,091	1,189	982	1,071
55 to 59	3,441	3,344	3,062	2,970	2,496	2,422	2,109	2,046	1,771	1,718	1,401	1,357	1,260	1,221
60 to 64	4,832	4,557	4,518	4,234	3,616	3,343	3,398	3,143	2,854	2,525	2,340	2,084	2,107	1,875
65 to 69	9,667	8,691	9,376	8,129	8,720	7,455	6,757	6,217	5,947	5,472	4,876	4,486	4,388	4,038
70 to 74	Please contact IMG or your Producer for premium information													
Optional Dental & Vision Rider \$570 annual premium								Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10						

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Global Mission Medical Insurance® - GOLD

(For enhanced, long-term benefits, see Gold Plus plan option)

WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN

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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	406		347		260		237		209		190		170	
10 to 18*	450		367		288		261		233		209		189	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.														
19 to 24	942	1,240	810	1,174	649	867	560	751	437	605	345	458	311	412
25 to 29	963	1,367	828	1,277	664	942	573	813	447	635	353	468	319	421
30 to 34	1,021	1,472	879	1,354	703	1,027	612	892	480	725	380	543	342	489
35 to 39	1,061	1,631	913	1,433	729	1,066	636	928	499	753	393	562	354	506
40 to 44	1,394	1,822	1,277	1,658	1,020	1,225	877	1,158	684	882	541	692	486	623
45 to 49	1,615	1,953	1,469	1,791	1,130	1,357	1,018	1,221	830	953	656	753	590	679
50 to 54	1,919	2,069	1,727	1,883	1,381	1,505	1,278	1,393	1,022	1,114	807	880	727	792
55 to 59	2,547	2,475	2,267	2,199	1,848	1,792	1,561	1,515	1,311	1,272	1,035	1,005	932	905
60 to 64	3,577	3,372	3,343	3,133	2,675	2,475	2,515	2,325	2,113	1,869	1,732	1,542	1,559	1,388
65 to 69	7,154	6,432	6,938	6,016	6,453	5,517	5,001	4,600	4,401	4,049	3,609	3,320	3,248	2,989
70 to 74	Please contact IMG or your Producer for premium information													
Optional Dental & Vision Rider \$460 annual premium								Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10						

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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	737		621		473		429		384		332		299	
10 to 18*	799		652		505		460		408		371		334	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.														
19 to 24	1,448	2,032	1,204	1,689	934	1,311	821	1,153	673	944	514	721	462	649
25 to 29	1,458	2,186	1,254	1,880	972	1,458	854	1,282	699	1,049	534	803	481	722
30 to 34	1,685	2,606	1,403	2,169	1,087	1,681	957	1,479	782	1,211	598	923	538	831
35 to 39	1,880	2,930	1,564	2,439	1,212	1,891	1,067	1,663	874	1,362	667	1,041	600	936
40 to 44	2,424	3,233	2,018	2,691	1,564	2,086	1,377	1,835	1,127	1,502	860	1,147	774	1,033
45 to 49	3,031	3,486	2,522	2,900	1,955	2,248	1,722	1,979	1,408	1,619	1,075	1,237	968	1,113
50 to 54	5,338	5,766	5,137	5,541	4,563	4,928	4,015	4,336	3,286	3,549	2,509	2,711	2,259	2,439
55 to 59	7,175	7,043	6,976	6,843	6,245	6,179	5,496	5,437	4,497	4,448	3,435	3,398	3,091	3,058
60 to 64	8,949	8,224	8,687	7,979	7,706	7,175	6,782	6,314	5,549	5,166	4,238	3,946	3,815	3,551
65 to 69	20,064	17,406	19,266	16,728	18,602	15,945	15,440	13,234	11,533	9,885	10,232	8,770	9,208	7,892
70 to 74	Please contact IMG or your Producer for premium information													
Optional Dental & Vision Rider \$570 annual premium								Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10						

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Global Mission Medical Insurance® - GOLD PLUS

WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN



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Deductibles	\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	551		466		359		320		289		255		230	
10 to 18*	599		490		381		344		309		277		250	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.														
19 to 24	1,086	1,524	904	1,268	700	983	616	866	505	708	385	541	346	486
25 to 29	1,093	1,641	941	1,410	728	1,093	642	961	524	788	401	600	361	541
30 to 34	1,265	1,954	1,052	1,626	817	1,262	716	1,110	587	907	449	693	404	623
35 to 39	1,410	2,199	1,173	1,830	910	1,419	802	1,249	656	1,021	500	780	450	702
40 to 44	1,819	2,424	1,513	2,018	1,173	1,564	1,033	1,377	845	1,127	645	860	581	774
45 to 49	2,274	2,617	1,892	2,177	1,466	1,688	1,291	1,486	1,056	1,216	807	929	727	836
50 to 54	4,545	4,739	4,003	4,176	3,422	3,695	3,011	3,253	2,464	2,661	1,883	2,033	1,694	1,830
55 to 59	5,381	5,282	5,233	5,134	4,684	4,635	4,122	4,079	3,372	3,337	2,576	2,550	2,318	2,294
60 to 64	6,711	6,169	6,516	5,985	5,780	5,381	5,086	4,736	4,162	3,874	3,179	2,959	2,861	2,663
65 to 69	15,048	13,055	14,451	12,548	13,952	11,959	11,579	9,926	8,650	7,414	7,674	6,577	6,907	5,919
70 to 74	Please contact IMG or your Producer for premium information													
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Deductibles	\$100		\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	2,357		2,145		1,923		1,638		1,550		1,466		1,394		1,255	
10 to 18*	2,493		2,266		1,985		1,704		1,611		1,521		1,442		1,298	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.																
19 to 24	3,908	5,947	3,569	5,373	3,152	5,142	2,605	3,837	2,371	3,453	2,058	2,762	1,745	2,418	1,571	2,176
25 to 29	4,021	7,324	3,672	6,615	3,244	6,332	2,680	4,725	2,439	4,253	2,118	3,733	1,796	2,788	1,617	2,509
30 to 34	4,386	8,299	4,006	7,496	3,538	6,961	2,924	5,354	2,661	4,819	2,310	4,230	1,959	3,267	1,763	2,940
35 to 39	4,630	9,216	4,229	8,324	3,735	7,552	3,087	5,946	2,809	5,351	2,438	4,697	2,068	3,389	1,861	3,050
40 to 44	5,687	10,080	5,194	9,105	4,587	8,195	3,791	6,503	3,450	5,853	2,994	5,138	2,464	3,902	2,218	3,512
45 to 49	6,956	8,028	6,354	7,251	5,751	6,008	4,638	5,180	4,220	4,662	3,663	4,092	2,968	3,108	2,671	2,797
50 to 54	14,707	16,712	13,342	15,253	13,131	14,020	10,505	11,216	9,559	10,094	8,299	8,861	6,723	7,066	6,051	6,360
55 to 59	20,921	20,621	19,109	18,684	17,435	17,299	13,948	13,840	12,693	12,455	11,019	10,933	8,648	8,580	7,783	7,722
60 to 64	23,227	22,058	21,070	20,194	19,576	18,486	16,591	15,535	15,098	13,981	13,106	12,272	10,783	9,787	9,705	8,808
65 to 69	47,212	41,347	42,990	37,709	41,454	36,055	38,383	33,078	29,939	27,455	26,101	23,817	21,878	19,847	19,691	17,862
70 to 74	Please contact IMG or your Producer for premium information															
Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10																

**Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.

Note: Choosing the semi-annual payment option (modal payment factor .55) results in total payments of 110% of the annual premium, choosing the quarterly payment option (modal payment factor .28) results in total payments of 112% of the annual premium, and choosing the monthly payment option (modal payment factor .10) results in total payments of 120% of the annual premium.

Global Mission Medical Insurance® - PLATINUM

WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN



(New Business Rates Effective 01/01/2018. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

ANNUAL PREMIUMS

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$100		\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years*	1,971		1,790		1,625		1,414		1,344		1,281		1,230		1,107	
10 to 18*	2,068		1,880		1,673		1,462		1,392		1,324		1,265		1,139	
*Dependent child rates are only available when at least one parent or guardian is insured under the Global Mission Medical Insurance plan. Children applying with no parent or guardian insured by Global Mission Medical Insurance must use the Female 19 to 24 rates.																
19 to 24	3,169	4,825	2,894	4,358	2,556	4,171	2,112	3,113	1,923	2,801	1,669	2,241	1,415	1,961	1,273	1,765
25 to 29	3,257	5,935	2,975	5,440	2,627	4,516	2,171	3,726	1,976	3,353	1,716	2,910	1,455	2,474	1,310	2,227
30 to 34	3,531	6,682	3,224	6,034	2,848	5,604	2,353	4,311	2,142	3,879	1,860	3,405	1,577	2,629	1,420	2,366
35 to 39	3,704	7,373	3,382	6,659	2,988	6,041	2,469	4,757	2,246	4,280	1,950	3,757	1,655	2,711	1,489	2,440
40 to 44	4,493	7,964	4,103	7,193	3,624	6,474	2,995	5,137	2,725	4,624	2,366	4,058	1,947	3,083	1,752	2,774
45 to 49	5,496	6,343	5,019	5,729	4,543	4,747	3,663	4,092	3,334	3,683	2,894	3,233	2,345	2,456	2,110	2,210
50 to 54	11,471	13,034	10,406	11,897	10,242	10,935	8,194	8,748	7,457	7,873	6,474	6,911	5,244	5,511	4,720	4,960
55 to 59	16,256	16,022	14,848	14,517	13,548	13,442	10,838	10,753	9,862	9,678	8,562	8,495	6,720	6,668	6,048	6,001
60 to 64	17,884	16,985	16,224	15,550	15,074	14,234	12,774	11,962	11,625	10,766	10,091	9,450	8,304	7,536	7,473	6,783
65 to 69	35,881	31,424	32,672	28,658	31,505	27,402	29,172	25,139	22,754	20,866	19,837	18,101	16,628	15,083	14,965	13,575
70 to 74	Please contact IMG or your Producer for premium information															
Modal Payment Factors** Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10																

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Note: Choosing the semi-annual payment option (modal payment factor .55) results in total payments of 110% of the annual premium, choosing the quarterly payment option (modal payment factor .28) results in total payments of 112% of the annual premium, and choosing the monthly payment option (modal payment factor .10) results in total payments of 120% of the annual premium.