




WORLDWIDE MEDICAL INSURANCE FOR INTERNATIONAL
VOLUNTEERS AND SOCIAL GOOD WORKERS


Understanding Your Market. **Exceeding Your Expectations.**

At International Medical Group® (IMG®), we understand the intricacies of worldwide health care delivery and are especially sensitive to the needs of those in the humanitarian and global development community. IMG provides specialized products and services exclusive to the international aid community. Over time, we have earned a reputation for excellence by providing quality, dependable medical insurance programs to non-government organizations and other humanitarian organizations.

NGO+International™ was designed to provide medical insurance to humanitarian and global development focused non-governmental organizations, by offering coverage while outside their country of residence. We recognize that stable premiums are important within

the global development community. Our attention to this fact begins with our unique plan design. NGO+International offers a wide range of worldwide benefits that follow global development professionals wherever they go. At the same time, it is designed to encourage them to receive medical care overseas when feasible, where the cost of medical care is comparatively less expensive than in the U.S. Combined with other cutting-edge services like our Medical Travel Management program, NGO+International benefits and services are positioned to help you and your members take more control of your health care costs, which lends itself to greater premium stability.



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Benefit Summary

The following benefits are offered to eligible insureds. The plan covers charges for Eligible Medical Expenses within the area of coverage. All amounts shown are in U.S. dollars.



Coverage Limit / Maximum Amount for Eligible Medical Expenses				
Period of Coverage	Maximum Limit: 365 days			
Lifetime Maximum	\$1,000,000 standard, \$5,000,000 option available			
Extension of Benefits	Maximum Limit beginning on the first day of Total Disability: 90 days Maximum Limit for a Spouse and/or Dependent in the event of the death of an Employee or Associated Representative: 60 days			
Bridge Coverage	Maximum Limit when an Employee, Associated Representative and/or Dependent no longer meets the eligibility requirements: 90 days			
Medical Concierge » Non-emergency services only	The Medical Concierge Service is a proprietary service of IMG that helps an Insured Person navigate the United States healthcare system to identify the highest quality providers for scheduled Inpatient and certain Outpatient Treatments. Refer to the MEDICAL CONCIERGE provision for further details.			
Benefit Plan Features				
Benefit Levels	United States	United States	United States	International
	Medical Concierge	In-Network	Out-of-Network	International
Deductible for Eligible Medical Expenses				
Deductible	All deductibles apply worldwide and are per insured person			
Family Deductible	Maximum Accumulative Deductibles per Family: 2			
Coinsurance for Eligible Medical Expenses				
Coinsurance » In addition to Deductible	Plan pays 85% Insured pays 15%	Plan pays 80% Insured pays 20%	Plan pays 60% Insured pays 40%	Plan pays 100% Insured pays 0%
Out of Pocket Maximum	\$750	\$2,000	\$4,000	\$0
Precertification				
» Transplants: No coverage if Precertification requirements are not met. » Interfacility Ambulance Transfer: No coverage if Precertification requirements are not met. » All other Treatments & supplies: 50% reduction of Eligible Medical Expenses if Precertification requirements are not met. Maximum Penalty: \$1,000 » Deductible is taken after reduction. » Coinsurance is applied to remainder of the reduced amount. » Refer to PRECERTIFICATION REQUIREMENTS provision for a complete list of services that require Precertification.				
Inpatient or Outpatient Services Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Benefit	Medical Concierge (Non-emergency)	In-Network	Out-of-Network	International
Eligible Medical Expenses	Not Applicable	80%	60%	100%
Outpatient Physician / Specialist Visit » Office visit charge only	Not Applicable	Copayment: \$25.00	Not Applicable	Not Applicable
Physician Visits / Services	Not Applicable	80%	60%	100%
Teladoc Consultation (<i>optional buy-up</i>) » Not subject to Deductible and Coinsurance <i>Coverage for a Teladoc Consultation is not a determination that any specific condition discussed, raised or identified during such consultation is covered under this insurance. The Company reserves the right to decline future claims relating to or arising from any condition discussed, raised or identified during a Teladoc Consultation where the Illness or Injury is directly or indirectly related to any Pre-existing Condition or is otherwise excluded under this Certificate of Insurance</i>	Not Applicable	80%	Not Applicable	Not Applicable
Hospital Emergency Room: United States » Injury: Not subject to Emergency Room Deductible » Illness: Subject to a \$250 Deductible for each Emergency Room visit for Treatment that does not result in a direct Hospital admission	Not Applicable	80%	60%	Not Applicable
Hospital Emergency Room: International	Not Applicable	Not Applicable	Not Applicable	100%
Hospitalization / Room & Board » Average semi-private room rate » Includes nursing, miscellaneous and Ancillary Services	85%	80%	60%	100%
Intensive Care » 3 times the average semi-private room rate	85%	80%	60%	100%
Outpatient Surgical / Hospital Facility	85%	80%	60%	100%
Laboratory	Not Applicable	80%	60%	100%
Radiology / X-ray	85%	80%	60%	100%
Chemotherapy / Radiation Therapy	85%	80%	60%	100%

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Inpatient or Outpatient Services Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Benefit	Medical Concierge (Non-emergency)	In-Network	Out-of-Network	International
Pre-admission Testing	Not Applicable	80%	60%	100%
Surgery	85%	80%	60%	100%
Second Surgical Opinion » Payable at 100% if requested by the Company » 50% reduction of Eligible Medical Expenses for failure to obtain a Second Surgical Opinion when required by the Company	Not Applicable	80%	60%	100%
Reconstructive Surgery » Surgery is incidental to or follows Surgery that was covered under the plan	85%	80%	60%	100%
Assistant Surgeon » 20% of the primary surgeon's eligible fee	85%	80%	60%	100%
Anesthesia	85%	80%	60%	100%
Pregnancy and Newborn Care » Result of Natural Insemination » Dependent Child's Pregnancy not covered » Newborn routine care, diagnostic tests and routine immunizations for the first 31 days of life	Not Applicable	80%	60%	100%
Pregnancy Complications	Not Applicable	80%	60%	100%
Durable Medical Equipment	Not Applicable	80%	60%	100%
Sleep Disorders » Maximum Limit: \$2,500	Not Applicable	80%	60%	100%
Podiatry Care » Maximum Limit: \$750	Not Applicable	80%	60%	100%
Chiropractic Care » Maximum Limit: \$500	Not Applicable	50%	50%	50%
Physical Therapy: United States » Maximum Benefit: \$2,500 combined United States and International » Medical order and Treatment plan required	Not Applicable	80%	60%	Not Applicable
Physical Therapy: International » Maximum Benefit: \$2,500 combined International and United States » Medical order and Treatment plan not required for Eligible Medical Expenses under \$1,000 » Medical order and Treatment plan required for all expenses over \$1,000	Not Applicable	Not Applicable	Not Applicable	100%
Extended Care Facility » Maximum Days: 60 » Upon direct transfer from an acute care Facility	85%	80%	60%	100%
Home Nursing Care » Maximum Days: 30 » Provided by a Home Health Care Agency » Upon direct transfer from an acute care Facility	85%	80%	60%	100%
Hospice » Lifetime Maximum: \$7,500 » Terminally ill - 6 months to live » Inpatient Hospice Facility » Insured Person's home	Not Applicable	80%	60%	100%
Transplant » Lifetime Maximum: \$250,000 » Per Period of Coverage Transplant Maximum: 1 » Organ procurement & harvesting costs Lifetime Maximum: \$10,000 » Travel & lodging Lifetime Maximum Expense: \$5,000 » Covered Transplants: cornea, heart, heart/lung, lung, kidney, kidney/pancreas, liver, allogeneic or autologous bone marrow » Subject to the TRANSPLANT PRECERTIFICATION provision and only when Treatment is provided within the Company's approved independent Managed Transplant System Network	85%	80%	Not Applicable	100%
Preventative Care NOT Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Benefit	Medical Concierge (Non-emergency)	In-Network	Out-of-Network	International
Adult or Child Preventative Care » Maximum Limit: \$1,000 » Refer to the PREVENTATIVE CARE provision for further details and requirements	Not Applicable	100%	100%	100%

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Prescription and Medication Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limit Annual				
\$250,000 limit per person annually				
Prescription and Medication	Outside the US: Covered at 100% Inside the US: » Must utilize the Universal Rx card. Copay: » Tier 1 - \$15; Tier 2 - \$30; Tier 3 - \$60 » Maximum limit of 90-day supply per prescription » Not subject to Deductible and Coinsurance » Copayments are per 30-day supply Expatriate Prescription Services Program: » Maximum limit of 180-day supply per prescription » Copayments are per 30-day supply Inpatient/Outpatient Medication is subject to Maximum Limit			
Mental or Nervous and Counseling Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Benefit	Medical Concierge (Non-emergency)	In-Network	Out-of-Network	International
Lifetime Maximum	Up to the Lifetime Maximum Limit			
Inpatient Mental or Nervous » Maximum Days: 30	85%	80%	60%	100%
Outpatient Mental or Nervous » Maximum Visits: 40	Not Applicable	50%	50%	50%
Bereavement Counseling » Not subject to Deductible and Coinsurance » Lifetime Maximum: \$300 » Counseling 6 months before or after a Family member's death	Not Applicable	100%	100%	100%
Emergency Services NOT Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Emergency Local Ambulance » Subject to Deductible and Coinsurance » Injury » Illness resulting in an Inpatient Hospital admission	Not Applicable	100%	80%	100%
Interfacility Ambulance Transfer » Transfer from one licensed health care Facility to another licensed health care Facility resulting in an Inpatient Hospital admission	Not Applicable	100%	100%	100%
Other Services NOT Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Hospital Indemnity » International only » Inpatient Hospitalization only » Benefit is not available when the Inpatient Hospital Treatment is part of the Medical Travel Management benefit	Private Hospital » Overnight Maximum Limit: \$400 » Maximum Limit: \$4,000 Public Hospital (state, government or charitable Hospital) » Overnight Maximum Limit: \$500 » Maximum Limit: \$5,000 Treatment received by the Insured Person at a Public Hospital and no Charges are incurred by the Insured Person or the Company will be subject to the Public Hospital Maximum Limit. Treatment received by the Insured Person at a Public Hospital and Charges are submitted to the Company for reimbursement will be subject to the Private Hospital Maximum Limit.			
Other Services NOT Subject to Deductible and Coinsurance unless otherwise noted Eligible Medical Expenses are limited to Usual, Reasonable and Customary Maximum Limits per Calendar Year or if indicated, per Lifetime				
Benefit	Medical Concierge (Non-emergency)	In-Network	Out-of-Network	International
Medical Travel Management » Must be approved in advance by the Company	Medically Necessary non-emergency Treatment, including hospitalization and surgery for approved procedures, the Company will offer Medical Travel as a means to manage the costs. If Medical Travel is approved, the Company will reimburse 10% of the cost savings, up to a maximum of \$7,500 back to the Insured where such savings arise from Treatment outside of their country of service and excluding the United States. Meal allowance Maximum: \$100 per day Refer to the MEDICAL TRAVEL MANAGEMENT provision for further details and requirements.			
Benefits only available with purchase of NGO+International Assistance Services				
Emergency Hospital Admission Direct Transfer from Emergency Medical Evacuation / Emergency Reunion				
Emergency Hospital Admission directly following an approved Emergency Medical Evacuation where the Illness or Injury is not otherwise eligible for benefits under this insurance. » Maximum Limit: \$20,000 » The Maximum Limit is not in addition to any other Maximum Limit for any other covered Illness or Injury				
Emergency Reunion: » Maximum Limit: \$15,000 » Day Maximum: 15 » Meal Maximum per day: \$25 » Reasonable and necessary travel costs and accommodations » Approved in advance by the Company				

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Optional Supplemental Programs

As a complement to the medical benefits, NGO+International offers the following optional supplemental dental benefits. All amounts shown are in U.S. dollars.

Dental Benefits

Group Dental Insurance	Plan I	Plan II	Plan III
Calendar Year Maximum per Person	\$1,000	\$1,000	\$1,500
Individual Deductible	\$50	\$50	\$50
Family Deductible	\$150	\$150	\$150

Schedule of Benefits

Class I, Diagnostic, Preventive <i>Emergency Palliative Treatment - Not subject to deductible</i>	100%	100%	100%
Class II, Basic Service <i>X-Rays, oral surgery, extractions, endodontics, periodontics, anesthesia</i>	80%	80%	80%
Class III, Major Services <i>Prosthodontics (bridges, partial dentures), Major restorative services (crowns, inlays)</i>	50%	50%	50%
Orthodontia <i>Separate lifetime maximum of \$1,000 for Plan II and \$1,500 for Plan III to age 19</i>	0%	50%	50%

Teleconsultation



Teladoc provides access to a national network of board-certified doctors and pediatricians in the U.S. who are available 24 hours a day, seven days a week, 365 days a year to help diagnose, treat and prescribe medication (when necessary and available) for many non-emergent medical issues via phone or online video consultations. Teladoc does not replace existing primary care physician relationships, but supplements them as a convenient, affordable alternative for non-emergency medical care. The use of Teladoc will be considered as treatment inside the U.S. - PPO Network.

Employee Life Insurance

Employee Term Life and Accidental Death and Dismemberment benefits are available for principal amounts of \$10,000 and greater. Dependent Life Insurance is available as an optional coverage. It provides \$10,000 of coverage for the dependent spouse and \$5,000 of coverage for each dependent child over the age of six months.



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WORLDWIDE MEDICAL INSURANCE FOR INTERNATIONAL VOLUNTEERS AND SOCIAL GOOD WORKERS



Benefits are subject to exclusions and limitations and are payable only at Usual, Reasonable, and Customary charges. This is a summary of a selection of plan benefits offered only as an illustration and does not supersede in any way the Certificate of Insurance or the Application, Master Policy and any riders or other governing documents (the "Insurance Contract"). The Insurance Contract is the only source of the actual benefits provided.

Optional Supplemental Programs (continued)

As a complement to the medical benefits, NGO+International offers the following optional supplemental assistance services. All amounts shown are in U.S. dollars.

NGO+International Assistance Services

In the event that a member requires an evacuation, whether for a medical emergency or a political or natural disaster, IMG's staff will coordinate all aspects of the transfer. Because each evacuation is unique, a tailored action plan is developed to assure the best outcome.

ADDITIONAL FEES MAY APPLY



EMERGENCY MEDICAL TRANSPORT SERVICES

In a medical emergency, IMG provides Emergency Medical Transport Services that have a proven track record of helping travelers get the care they need. IMG also helps contain program costs and coordinates communications across borders and constituents every step of the way home. The transportation services outlined under Emergency Medical Transport are included at no additional cost.

Emergency Medical Evacuation
Medial Repatriation
Repatriation of Mortal Remains
Vehicle Return
Dispatch of Physician



SECURITY ASSISTANCE SERVICES

Security and safety may be a traveler's biggest concern while away from home. Give your travelers hands-on guidance and peace of mind in the event of safety threats. Security evacuation services outlined in this section are offered to the member for up to 4 days of security evacuation coordination.

Political Evacuation
Natural Disaster Evacuation



ADDITIONAL OPTIONAL SERVICES

Mental Health Services

This service provides access to master's-level counselors through the telephone or a messaging service. Mental health consults are available 24/7, for a variety of mental health needs, including depression, anxiety, and workplace or financial stress.

Travel Intelligence Portal

This web-based portal allows the user to subscribe for location-specific alerts for ten threat categories, including Security, Transportation, Health, Entry/Exit, Financial, Language, Cultural, Environmental, Legal, and Technology. Prior to travel, the portal can also be accessed to provide information such as visa, passport, immunization requirements, local customs and medical referrals.



This document is for informational purposes only and describes IMG's general capabilities and a broad overview of the services it offers. The actual services and payments that IMG arranges or provides for you will be determined by your services contract. IMG has procured first-dollar insurance, underwritten by a licensed third-party insurance company, to cover the cost of all services, including any medical transportation or political, natural disaster, or security evacuations. All services must be arranged and paid by IMG.



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Medical Management Without BoundariesSM

The ability to access quality health care is of paramount importance when a medical emergency arises abroad. From routine medical care to complex case management, from check-ups to emergency medical evacuations, IMG is there to offer our expertise in cost containment and a unique blend of valuable services including.

International Utilization Management

Utilization Management is the process of determining whether the services delivered or scheduled to be delivered to a patient are medically necessary and appropriate. By using established national medical guidelines, evaluation is provided for the medical necessity for hospitalizations and out-patient services and the appropriateness of the overall treatment plan.

The key to successfully managing rising health care costs is early identification of catastrophic cases, and then taking action to manage those cases. Precertification is used as a key tool for this early identification of a patient's entry into the health care system. This allows our medical staff to be proactive in working with both the patient and the providers assuring delivery of health care in the most appropriate and cost-effective manner. Precertification is not a guarantee of payment. It is only a review of medical necessity.

Prior to receiving treatment, members will need to precertify the following procedures to avoid a reduction in benefits:

- Chemotherapy
- Extended Care Facility
- Home Nursing Care
- Hospice Care
- Inpatient Hospitalization
- Interfacility Ambulance Transfer
- Radiation Therapy
- Surgery or Surgical Procedure
- Transplant
- Maternity

International Comprehensive Care Management

Our medical staff will coordinate care for your members who have highly complex cases requiring detailed management. These services may include:

- Concurrent review and monitoring of medical services for medical necessity
- Coordination of the hospitalization and any necessary post-discharge care
- Transition of patient to a U.S.-based care manager upon return to the U.S.

Medical Claim Review

If your members have received a hospital bill, there is a possibility that they have been overcharged. Most claim administrators have invested significant amounts of money incorporating claims auditing software in the claims system. IMG takes the claim review process one step further by examining the details behind documents submitted by the medical provider. Our auditors review medical records to assure that all the services billed were actually delivered and delivered in the quantities billed.

Our goal is to assure that your members only pay for the services that were actually rendered.



Medical Travel Management

IMG's cutting-edge services are aimed at providing needed premium stability. Claim costs drive premiums. Where your members receive their medical care can, in large part, significantly impact your organization's claim costs. Encouraging your members to receive their medical care overseas whenever feasible can help you take control and manage your claim costs. As a rule, medical care received in the U.S. will be considerably more costly than the same care received overseas. The more your members receive medical care overseas, the greater the savings in claim cost to your medical plan. The greater the savings, the more stable the premium.

We offer Medical Travel Management, an industry unique service designed to assist your members who are considering expensive medical procedures in the U.S. by incentivizing them to consider receiving that care with qualified providers overseas. The value to your medical plan can be quite substantial when thousands of dollars in cost savings can be realized. And the benefit for your members? **They can be paid a percentage of the realized savings** when the cost of the procedure performed in the U.S. is greater than the cost of the same procedure incurred overseas. It's a win-win situation for everyone!

The entire process is managed and coordinated for the benefit of your members by an experienced Case Manager with the full resources of IMG, including our in-house physician – IMG's Chief Medical Officer. Your members are presented with access to their options so they can make an informed decision. Participants are assigned a designated case manager to help with the preparation of their treatment including:

- Assistance in locating an accredited and qualified medical provider(s) to provide the necessary medical services
- Coordination of the necessary services with the participant and with the medical provider, including patient care, travel, scheduling, and housing
- Providing assistance with transfer and receipt of medical records before and after the services provided to the participant
- Providing follow up services to monitor medical needs after return of participant to residence

Do you have everything you need?

We are confident that NGO+International will provide the quality medical coverage specific to your organization and group members' needs. For groups of a certain size, NGO+International also offers the flexibility to customize benefits. Please do not hesitate to contact your insurance producer and/or IMG for more information. Our reputation for excellence has been built on providing top-tier programs to organizations like yours around the world, and we will work closely with you to design the benefits package to meet your specific needs.





I N T E R N A T I O N A L



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