











ABSOLUTE VIP

UNIVERSAL VIP

SPECIAL VIP

| BENEFITS | | | |
|--|--|--|--|
| Maximum coverage per person, per policy year | Unlimited | US\$5,000,000 | US\$2,000,000 |
| Age limit to apply | 75 | 75 | 75 |
| Waiting period | 30 days | 30 days | 30 days |
| Coverage outside USA | 100% worldwide without restrictions of doctors and hospitals | 100% worldwide without restrictions of doctors and hospitals | 100% worldwide without restrictions of doctors and hospitals |
| Coverage inside USA | 100% without restrictions of doctors and hospitals | 100% without restrictions of doctors and hospitals | • 100% through the "USA Special Network" • Outside the "USA Special Network" the coverage will be at 60% with a maximum daily room rate of up to US\$700 for a standard room and up to US\$1,400 for intensive care • Emergency medical treatment will be covered 100% up to the policy limits |
| INPATIENT BENEFITS | | | |
| Special benefit for suite | Up to US\$3,000 per day within the | Up to US\$2,000 per day within the | N/A |

| Special benefit for suite | Up to US\$3,000 per day within the ''USA Special Network'' | Up to US\$2,000 per day within the ''USA Special Network'' | N/A |
|--|---|---|--------------------------------------|
| Intensive care unit | 100% | 100% | 100% |
| Adult companion accommodation (related to a hospitalization of a child under age 18) | 100% | US\$350 per night, max. of 30 nights | US\$150 per night, max. of 30 nights |
| Prescribed medications while in a hospital | 100% | 100% | 100% |



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DESCRIPTION

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| OUTPATIENT BENEFITS | | | |
|---|--|--|---|
| Emergency room | 100% | 100% | 100% |
| Physician and specialist visits | 100% | 100% | 100% |
| Physician and specialist home visits | 100% | 100% | 100% |
| Prescription medication | 100% | 100% | US\$10,000 |
| Complementary therapy: chiropractor psychologist, psychiatrist, osteopathy and/or acupuncture | ; US\$5,000 | US\$2,500 | N/A |
| Nurse care at home | 100% | 100% | US\$10,000 |
| Preventive health checkup, per insured, no deductible | All options: • US\$300 per visit, up to 6 visits from 0 to 12 months of age • US\$500 from 12 months of age and older, including up to US\$75 for preventive dental checkup in options I, II & III | Options I & II: • US\$150 up to 17 years old • US\$350 at 18 years and older Options III, IV & V: • US\$100, all ages (after a 10-month waiting period) | Options I & II: • US\$100 up to 17 years old • US\$150 at 18 years and older (after a 10-month waiting period) |
| Hearing aids (per lifetime) | US\$3,000 | US\$2,000 | US\$1,000 |
| Specialized treatments (occupational therapist, sleep apnea and other sleep disorders) | US\$4,000 | US\$3,000 including autism | US\$2,000 including autism |
| Alzheimer's | US\$20,000 | US\$10,000 | US\$5,000 |
| Autism | US\$10,000 including therapy and medication | Included in the Specialized Treatments benefit | Included in the Specialized Treatments benefit |
| GENERAL BENEFITS | т) | he following benefits offer the same coverage t | for both inpatient and outpatient procedures) |
| Surgeon and anesthesiologist fees | 100% | 100% | 100% |



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US\$1,000,000 (after a 24-month

US\$15,000 (after a 24-month waiting

waiting period)

period)



US\$700,000 (after a 24-month

US\$10,000 (after a 24-month waiting

waiting period)

period)



US\$250,000 (after a 48-month

US\$5,000 (after a 24-month waiting

waiting period)

period)

(continued)

DESCRIPTION

| GENERAL BENEFITS | (The followir | ng benefits offer the same coverage for both in | patient and outpatient procedures) (continued) |
|---|--|---|--|
| Diagnostic study services (laboratory tests, pathology, X-rays, MRI/CT/PET scans) | 100% | 100% | 100% |
| Cancer tests, medication and treatment (chemotherapy and/or radiotherapy) | 100% | 100% | 100% |
| Surgery to reduce the risk of cancer or prophylactic surgery (per lifetime) | US\$30,000 (after a 12-month waiting period) | US\$25,000 (after a 12-month waiting period) | US\$20,000 (after a 12-month waiting period) |
| Dialysis | 100% | 100% | 100% |
| Prostheses and medical appliances implanted during surgery | 100% | 100% | 100% |
| Organ transplant (per organ/tissue, per lifetime) | US\$2,100,000 | US\$1,100,000 | US\$500,000 (with rider) |
| Benefits for live donors (per lifetime) | US\$80,000 | US\$60,000 | US\$30,000 (with rider) |
| Durable medical equipment | 100% | 100% | US\$10,000 |
| Physical therapy and rehabilitation | 100% | 100% | US\$10,000 |
| Congenital conditions diagnosed before age 18 (per lifetime) | US\$2,000,000 | US\$2,000,000 | US\$500,000 |
| Congenital conditions diagnosed after | 100% | 100% | US\$2,000,000 (per lifetime) |



HIV-AIDS (per lifetime)

Bariatric surgery (per lifetime)

age 18

| V | M |
|---|---|
| | |







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| GENERAL BENEFITS (The following benefits offer the same coverage for both inpatient and outpatient procedures) (cont | | | |
| Surgical treatment of symptomatic foot disorders | 100% (after a 24-month waiting period) | 100% (after a 24-month waiting period) | 100% (after a 24-month waiting period) |
| MATERNITY BENEFITS | | (10 | 0-month waiting period, no deductible applies) |
| Maternity (natural or cesarean delivery) | Options I, II & III: • 100% normal delivery in a hospital within the "Special Maternity Network" • US\$8,000 for normal delivery in hospitals outside the "Special Maternity Network" • US\$10,000 for cesarean delivery whether or not the hospital is within the "Special Maternity Network" | Options I, II & III: • US\$8,500 in a hospital within the "Special Maternity Network" • US\$7,000 in a hospital outside the "Special Maternity Network" | Options I & II: • US\$4,000 • Includes extraction and storage of umbilical cord blood stem cells for I year |
| Extraction and storage of stem cells | Options I, II & III: • US\$2,000 per covered pregnancy | Options I & II: • US\$1,000 per covered pregnancy | Options I & II: • Included in the maternity benefit |
| Maternity and newborn complications (per lifetime) | Options I, II & III: • US\$1,000,000 | Options I & II: • US\$ I ,000,000 Option III: • US\$500,000 (with rider, after deductible) | Options I & II: • U\$\$500,000 (with rider, after deductible) |
| Inclusion of the newborn | Options I, II & III: • Without underwriting if born from a covered maternity | Options I, II & III: • Without underwriting if born from a covered maternity | Options I & II: • Without underwriting if born from a covered maternity |
| Fertility treatment (per lifetime) | Options I & II: • US\$5,000 after deductible (after a 24-month waiting period) | N/A | N/A |











(continued)

| DESCRIPTION | ABSOLUTE VIP | UNIVERSAL VIP | SPECIAL VIP |
|--|---|--|-----------------------------------|
| MEDICAL EVACUATION BEN | IEFITS | | |
| Emergency transportation by ground ambulance | 100%, no deductible applies | 100%, no deductible applies | 100%, no deductible applies |
| Emergency transportation by air ambulance | 100%, no deductible applies | 100%, no deductible applies | US\$60,000, no deductible applies |
| Insured's and companion's return ticket after an evacuation by air ambulance | US\$2,000 per person | US\$1,000 per person | US\$500 per person |
| Repatriation of mortal remains | 100% | 100% | US\$20,000 |
| OTHER BENEFITS | | | |
| Non-professional hazardous hobbies and sports | 100% | 100% | US\$250,000 |
| Professional sports | 100% | US\$500,000 | N/A |
| Emergency dental coverage | 100% for the first 180 days | 100% for the first 180 days | 100% for the first 180 days |
| Palliative care for terminal cases | 100% | 100% | 100% |
| Temporary coverage for accidents while application is being underwritten | US\$50,000 | US\$30,000 | US\$30,000 |
| Free extended coverage for eligible dependents after policyholder's death | 2 years | 2 years | l year |
| Free coverage for dependents | Options I & II: • Up to 10 years old, max. of 2 children born in the policy from a covered maternity | Options I & II: • Up to 5 years old, max. of 2 children born in the policy from a covered maternity | N/A |



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| OTHER BENEFITS | | | (continued) |
| Deductible elimination/reduction for no claims made | Elimination for I year after the 3rd year without claims (options I, II, III & IV) Reduction of up to 50% for I year after the 3rd year without claims (options V & VI) | Elimination for I year after the 3rd year without claims (options I, II & III) Reduction of up to 50% for I year after the 3rd year without claims (options IV & V) | Elimination for I year after the 3rd year without claims (options I, II & III) Reduction of up to 50% for I year after the 3rd year without claims (options IV & V) |
| Second Medical Opinion VIP, no deductible | Access to the medical opinion of internationally renowned experts from around the world regarding a condition | Access to the medical opinion of internationally renowned experts from around the world regarding a condition | Access to the medical opinion of internationally renowned experts from around the world regarding a condition |

Effective July 2017

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All contents of this comparative are only for informational purposes. The benefits are governed by the terms described in the Conditions of Coverage of each policy.

