

Max Limit: \$50,000 - \$0 In-Network Deductible

Premium Rates

Out of Network Deductible	\$0	\$50	\$100	\$250	\$500	\$1,000	\$2,500	\$5,000
Up to age 21	\$1.24	\$1.14	\$0.90	\$0.95	\$0.86	\$0.76	\$0.67	\$0.54
22-29	\$1.26	\$1.20	\$1.07	\$0.97	\$0.87	\$0.78	\$0.68	\$0.60
30-39	\$1.69	\$1.60	\$1.43	\$1.30	\$1.17	\$1.04	\$0.91	\$0.85
40-49	\$2.60	\$2.45	\$2.20	\$2.00	\$1.80	\$1.60	\$1.40	\$1.25
50-59	\$4.43	\$4.23	\$3.75	\$3.41	\$3.07	\$2.73	\$2.39	\$2.17
60-64	\$5.10	\$5.00	\$4.39	\$3.90	\$3.50	\$3.10	\$2.60	\$2.50
65-69	\$6.00	\$5.92	\$4.80	\$4.50	\$4.00	\$3.65	\$3.00	\$2.90
70-79	\$8.50	\$8.25	\$7.20	\$6.50	\$5.90	\$4.90	\$4.55	\$4.00
80-89	\$24.00	\$22.00	\$20.00	\$18.00	\$16.00	\$14.50	\$12.40	\$10.40

Max Limit: \$100,000 - \$0 In-Network Deductible

Out of Network Deductible	\$0	\$50	\$100	\$250	\$500	\$1,000	\$2,500	\$5,000
Up to age 21	\$1.39	\$1.38	\$1.18	\$1.07	\$0.96	\$0.86	\$0.75	\$0.40
22-29	\$1.66	\$1.64	\$1.41	\$1.28	\$1.15	\$1.02	\$0.90	\$0.67
30-39	\$2.15	\$2.10	\$1.82	\$1.65	\$1.49	\$1.32	\$1.16	\$0.92
40-49	\$3.30	\$3.00	\$2.70	\$2.45	\$2.21	\$1.96	\$1.72	\$1.31
50-59	\$5.59	\$5.36	\$4.73	\$4.30	\$3.87	\$3.44	\$3.01	\$2.76
60-64	\$6.40	\$6.20	\$5.60	\$5.15	\$4.91	\$4.36	\$3.50	\$3.34
65-69	N/A	N/A	N/A	\$5.75	\$5.15	\$4.15	\$4.00	\$3.55
70-79	N/A	N/A	N/A	\$8.50	\$7.50	\$7.00	\$5.50	\$4.50

Max Limit: \$250,000 - \$0 In-Network Deductible

Out of Network Deductible	\$0	\$50	\$100	\$250	\$500	\$1,000	\$2,500	\$5,000
Up to age 21	\$1.56	\$1.54	\$1.32	\$1.20	\$1.08	\$0.96	\$0.84	\$0.66
22-29	\$1.89	\$1.84	\$1.60	\$1.45	\$1.31	\$1.16	\$1.02	\$0.76
30-39	\$2.65	\$2.55	\$2.35	\$2.10	\$1.79	\$1.62	\$1.39	\$1.19
40-49	\$3.70	\$3.60	\$3.30	\$2.90	\$2.70	\$2.39	\$2.15	\$1.56
50-59	\$7.00	\$6.37	\$5.75	\$5.14	\$4.63	\$4.11	\$3.70	\$3.33
60-64	\$8.00	\$7.35	\$6.90	\$6.35	\$5.65	\$5.25	\$4.60	\$3.75

Max Limit: \$500,000 - \$0 In-Network Deductible

Out of Network Deductible	\$0	\$50	\$100	\$250	\$500	\$1,000	\$2,500	\$5,000
Up to age 21	\$1.82	\$1.78	\$1.54	\$1.40	\$1.26	\$1.12	\$0.98	\$0.73
22-29	\$2.01	\$1.96	\$1.70	\$1.55	\$1.40	\$1.24	\$1.09	\$0.89
30-39	\$2.73	\$2.65	\$2.31	\$2.10	\$1.89	\$1.68	\$1.47	\$1.23
40-49	\$3.90	\$3.77	\$3.41	\$3.10	\$2.85	\$2.48	\$2.17	\$2.00
50-59	\$7.09	\$6.74	\$6.00	\$5.45	\$4.91	\$4.36	\$3.82	\$3.09
60-64	\$8.10	\$8.00	\$7.35	\$6.68	\$6.01	\$5.34	\$4.68	\$4.00

Max Limit: \$1,000,000 - \$0 In-Network Deductible

Out of Network Deductible	\$0	\$50	\$100	\$250	\$500	\$1,000	\$2,500	\$5,000
Up to age 21	\$2.08	\$2.00	\$1.76	\$1.60	\$1.44	\$1.28	\$1.12	\$0.88
22-29	\$2.21	\$2.14	\$1.87	\$1.70	\$1.53	\$1.36	\$1.19	\$0.88
30-39	\$2.96	\$2.81	\$2.51	\$2.28	\$2.05	\$1.82	\$1.60	\$1.37
40-49	\$4.28	\$4.05	\$3.91	\$3.55	\$3.20	\$2.84	\$2.49	\$2.10
50-59	\$7.79	\$7.29	\$6.59	\$5.99	\$5.39	\$4.79	\$4.19	\$3.64
60-64	\$9.50	\$9.25	\$8.42	\$7.65	\$6.89	\$6.12	\$5.36	\$4.60

Optional Upgrades

Return to Home Coverage: 1.10 x the daily base plan rate
Athletic Sports Coverage: 1.20 x the daily base plan rate + monthly Sports Class rate
•Class 1 Sports: Rate \$0 per month Archery, Tennis, Swimming, Cross Country, Track, Volleyball & Golf
•Class 2 Sports: Rate \$26 per month Ballet, Basketball, Cheerleading, Equestrian, Fencing, Field Hockey, Football (no division 1) Gymnastics, Hockey, Karate, Lacrosse, Polo Rowing, Rugby & Soccer
AD&D: 1. \$50,000 - \$0.25 per day - All Ages 2. \$100,000 - \$0.50 per day- Ages 19-79 3. \$250,000 - \$1.75 per day - Ages 19-69 4. \$500,000 - \$4.00 per day - Ages 19-69

Other Details

- The effective date is based on the date requested and once payment has been received.
- Plan rates are per person and based on age of traveler at the time of enrollment.
- Rates are subject to change prior to enrollment.
- Coverage from 5 days to 364 days; extendable up to 2 years.
- Apply Online - accepting Visa, Mastercard, American Express or Discover

Travel Assistance Services

24-hour travel assistance services are provided by On Call International.

This is brief summary of the features available in this plan. It is not a contract of insurance. This plan includes both insurance and non-insurance benefits. Limitations and exclusions apply. The terms and conditions of coverage may be viewed using these links:

[Link to Description of Coverage, Exclusions and Limitations](#)

[Link to **Telemedicine Coverage](#)
[Link to Purchase Coverage](#)