

360 VIP CHOICE

PLAN OVERVIEW

JULY 2023 / JUNE 2024



VUMI®

ABOUT VUMI®

VUMI® Group offers exclusive major medical insurance plans and VIP medical services to individuals, corporate clients and expatriates residing around the world.

With a variety of plans to choose from, VUMI® helps protect both your physical and financial health by offering high quality medical insurance tailored to your needs. More importantly, VUMI's extensive global coverage gives you the peace of mind that comes with knowing you and your loved ones are covered at all times - anywhere in the world.

VUMI® is privately owned and part of a global healthcare management group with over 35 years of experience in the healthcare industry.

360 VIP CHOICE

360 VIP Choice covers all your essential health needs and provides an annual coverage of up to US\$5 million. Receive a full range of benefits, as well as free choice of doctors and hospitals anywhere outside the U.S. and 100% coverage in the U.S. within our USA Special Network®.

360 VIP Choice comes with these distinct advantages:

- A comprehensive network of domestic and international hospitals and healthcare providers across five continents
- Expertise in U.S. and international claims management
- Management and medical teams who fully understand your culture and speak your language
- Second Medical Opinion VIP® included in all plans
- In-house administration of benefits and cost control measures
- A strong, stable and well-managed company that cares for your health
- Renewal guaranteed for life

TABLE OF BENEFITS

Unless otherwise stated, the benefits are offered on a per insured / per policy year basis, in which the chosen deductible applies. All amounts are in U.S. Dollars (USD). The benefits are limited to the medical expenses covered under the policy and are subject to the usual, customary and reasonable expenses (UCR) for the geographic area where the expenses were incurred.

DEDUCTIBLE OPTIONS*

OPTION I	OPTION II	OPTION III	OPTION IV	OPTION V
US\$2,000	US\$5,000	US\$10,000	US\$20,000	US\$50,000

*Only one (1) deductible per person, per policy year applies. For family policies, a maximum of two (2) deductibles accumulated per policy, per policy year will be applied.

GENERAL PLAN INFORMATION

Lifetime coverage	Unlimited
Maximum coverage per person, per policy year	US\$5,000,000
Age limit to apply	Up to 75 years old
Waiting period	30 days
Coverage outside USA	• 100% UCR with free choice of hospitals and doctors

GENERAL PLAN INFORMATION

Coverage inside USA	<ul style="list-style-type: none"> • 100% UCR within the USA Special Network® • Outside the USA Special Network®, coverage will be at 80%, 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% UCR, up to the policy limits
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INPATIENT BENEFITS

BENEFIT	COVERAGE
Standard hospital room	100% UCR
Special benefit for suite accommodation (subject to availability)	Up to US\$2,000 per day within the USA Special Network®
Use of intensive care unit	100% UCR
Companion accommodation expenses of a hospitalized Insured	US\$300 per night, up to US\$3,000 per policy year
Prescribed medications while hospitalized	100% UCR
Physical therapy and rehabilitation	100% UCR
Private duty nursing	100% UCR, max. of 100 days per policy year
Inpatient mental health treatment (psychiatric hospitalization)	100% UCR, max. of 30 days per policy year

OUTPATIENT BENEFITS

BENEFIT	COVERAGE
Emergency room care	100% UCR
Physician and specialist visits	100% UCR
Physician and specialist home visits (where available)	100% UCR
Prescription medication following a hospitalization or outpatient surgery	100% UCR for up to 6 months
Outpatient prescription medication	US\$3,000
Complementary therapy: chiropractic, speech, occupational, osteopathy and/or acupuncture	100% UCR, max. of 80 visits combined per policy year
Nurse or therapist care at home	100% UCR, max. of 100 days per policy year
Preventive health checkup (all options)	<ul style="list-style-type: none"> • 100% UCR for insureds from 0 to 6 months of age, up to 5 visits • US\$600 per policy year for insureds from 6 months and older
Treatment for Alzheimer's disease	100% UCR
Allergy treatment	100% UCR
Physical therapy and rehabilitation	US\$10,000
Outpatient mental health	100% UCR, max. of 30 visits

GENERAL BENEFITS FOR INPATIENT AND OUTPATIENT PROCEDURES

The following benefits offer the same coverage for both inpatient and outpatient procedures.

BENEFIT	COVERAGE
Emergency medical services	100% UCR
Surgeon and anesthesiologist fees	100% UCR
Diagnostic study services (laboratory tests, pathology, X-rays, MRI/CT/PET scans)	100% UCR

GENERAL BENEFITS FOR INPATIENT AND OUTPATIENT PROCEDURES

The following benefits offer the same coverage for both inpatient and outpatient procedures.

BENEFIT		COVERAGE
Highly specialized prescription medication		100% UCR
Oncology: tests, treatment (chemotherapy and/or radiotherapy) and medication		100% UCR
Surgery to reduce the risk of cancer or prophylactic surgery		US\$30,000 per lifetime (after a 12-month waiting period)
Dialysis services		100% UCR
Prostheses and medical appliances implanted during surgery		100% UCR
Organ/tissue transplant		US\$750,000 per lifetime Includes US\$40,000 benefit for expenses of the live donor
Durable medical equipment		100% UCR
Specialized treatments: autism, sleep apnea and other sleep disorders		US\$2,000
Congenital and/or hereditary conditions	Diagnosed before age 18	US\$2,000,000 per lifetime
	Diagnosed after age 18	100% UCR
HIV-AIDS treatment		100% UCR (after a 24-month waiting period)
HPV treatment and vaccine		US\$5,000 per lifetime
Gastric bypass bariatric surgery and any type of surgical procedure for weight loss and its complications or treatments		US\$10,000 per lifetime (after a 24-month waiting period)
Surgical treatment of symptomatic foot disorders		100% UCR (after a 24-month waiting period)
Reconstructive surgery after an accident or illness (covered by this plan)		Up to the benefit limit

MATERNITY BENEFITS

10-month Waiting Period.

BENEFIT	COVERAGE
Maternity, cesarean or normal birth (options I and II)	Option I: • US\$8,500, no deductible applies Option II: • US\$8,500, after deductible
Maternity and newborn complications (options I, II, III and IV)	US\$1,000,000, per lifetime after deductible
Inclusion of the newborn within 90 days after the birth (options I and II)	Without underwriting, if born in the policy, after the 10-month waiting period
Free coverage for dependents (options I and II)	Up to 5 years old for children born from a covered maternity*
Provisional coverage for the newborn (born from a covered maternity) (options I and II)	Option I: • US\$5,000 per pregnancy, max. of 90 days, no deductible applies Option II: • US\$5,000 per pregnancy, max. of 90 days, after deductible

***Included in the policy within 90 days from birth. After 90 days, premium payment will be required.**

MEDICAL EVACUATION BENEFITS

BENEFIT		COVERAGE
Emergency transportation	Ground ambulance	100% UCR
	Air ambulance	100% UCR, no deductible applies
Cost of return ticket for the Insured and one companion after an evacuation by air ambulance		US\$2,000 per person
Repatriation or cremation of mortal remains		US\$20,000

OTHER BENEFITS

BENEFIT		COVERAGE
Treatment for injuries during the training or practice of hazardous hobbies and/or non-professional sports		US\$250,000
Emergency dental coverage		100% UCR for treatment within the first 180 days of the covered accident
Palliative care		100% UCR
Additional benefit for a covered critical illness		US\$2,500 per person, per lifetime
Free extended coverage for eligible dependents after the policyholder's death as a result of a covered accident or condition		2 years
Elimination/reduction of the policy deductible for no claims during the last 3 years		Options I & II: <ul style="list-style-type: none"> • Elimination for 1 year after the 3rd year without claims • Reduction of 50% of the deductible for 1 year after the 3rd year, if the deductible was not met in any of the years Options III & IV: <ul style="list-style-type: none"> • Reduction of 50% of the deductible for 1 year after the 3rd year without claims
Second Medical Opinion VIP®		Access to a second medical opinion of renowned experts from around the world, no deductible applies

OPTIONAL ADDITIONAL BENEFITS (RIDERS)

BENEFIT	COVERAGE
Travel VIP Light	Up to US\$5,000 for emergency medical treatment while traveling abroad

All benefits with 100% coverage are up to the policy limit. Benefits with established coverage will be up to the limits stated in each of them.

VUMI® GROUP

Administration services provided by VIP Administration Services, LLC.

General Telephone: +1.214.276.6376 • Toll Free Call: +1.855.276.VUMI (8864)

info@vumigroup.com • www.vumigroup.com