



Best Doctors®
I N S U R A N C E

MEDICAL ELITE™

SUMMARY OF BENEFITS



EFFECTIVE APRIL 1, 2020

Benefit

Coverage

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| Maximum Benefit | <ul style="list-style-type: none"> ● \$10,000,000 per Insured, per Policy Year |
| Eligibility to Apply | <ul style="list-style-type: none"> ● From 18 to 74 years old |
| Renewal | <ul style="list-style-type: none"> ● Lifetime guarantee |
| Coverage | <ul style="list-style-type: none"> ● Worldwide. Flexibility to choose doctors and hospitals anywhere in the world |
| Private and Semi-Private room | <ul style="list-style-type: none"> ● 100% |
| Intensive Care Unit | <ul style="list-style-type: none"> ● 100% |
| Surgery (Including outpatient surgery) | <ul style="list-style-type: none"> ● 100% |
| Emergency Room | <ul style="list-style-type: none"> ● 100% |
| Hospital Accommodation for Companion of Hospitalized Child under 18 | <ul style="list-style-type: none"> ● \$500 per day, up to 20 nights |
| Surgeon and Anesthetist Fees | <ul style="list-style-type: none"> ● 100% |
| Major Diagnostic Services | <ul style="list-style-type: none"> ● 100% |
| Cancer Treatment | <ul style="list-style-type: none"> ● 100% |
| Dialysis | <ul style="list-style-type: none"> ● 100% |
| Maternity (Available in deductibles \$500/\$1000, \$1000/\$2000 and \$2000/\$3000) | <ul style="list-style-type: none"> ● 100% for normal delivery within the Maternity Hospital Network^(*), including up to \$7,000 for pre- and post-natal care ● Up to \$7,000 for normal delivery outside the Maternity Hospital Network^(*), including pre- and post-natal care ● Up to \$10,000 for elective cesarean delivery at any hospital ● No deductible applies ● 10-month Waiting Period |
| Stem Cells (Available in deductibles \$500/\$1000, \$1000/\$2000 and \$2000/\$3000) | <ul style="list-style-type: none"> ● \$2,000 per covered pregnancy for extraction and preservation of stem cells ● No deductible applies ● 10-month Waiting Period |
| Complications of Maternity and Birth (Available in deductibles \$500/\$1000, \$1000/\$2000 and \$2000/\$3000) | <ul style="list-style-type: none"> ● \$1,000,000 lifetime per Policy ● No deductible applies ● 10-month Waiting Period |
| Inclusion of Newborn | <ul style="list-style-type: none"> ● Automatic without underwriting if born from a Covered Maternity |
| Routine Health Checkups for Minor Children | <ul style="list-style-type: none"> ● Before 12 months of age: up to \$300 per visit ● From 12 months of age and until the age of 18: one annual checkup, up to \$100 ● No deductible applies |
| Congenital and or Hereditary Disorders | <ul style="list-style-type: none"> ● 100% |
| Organ and Tissue Transplants | <ul style="list-style-type: none"> ● \$3,000,000 per organ or tissue, lifetime per Insured, after Deductible, including \$50,000 for living donor |
| Outpatient Physical Therapy, Rehabilitation and Home Health Care (Private Nurse) | <ul style="list-style-type: none"> ● 100% |
| Surgical treatment for symptomatic disorders of the feet | <ul style="list-style-type: none"> ● 100% |
| Emergency Dental Coverage | <ul style="list-style-type: none"> ● 100% |
| Physician and Specialist Visits | <ul style="list-style-type: none"> ● 100% |
| Reconstructive Surgery in case of Illness or Accident | <ul style="list-style-type: none"> ● 100% |
| Prophylactic surgery for reduction in cancer risk | <ul style="list-style-type: none"> ● \$35,000 per Insured, per lifetime after Deductible ● 12-month Waiting Period |
| Bariatric Surgery, gastric bypass and any type of surgical procedure for loss of weight, its complications or treatments | <ul style="list-style-type: none"> ● \$15,000 per Insured, per lifetime after Deductible ● 24-month Waiting Period |
| Durable Medical Equipment, Special Devices (External prosthesis, Orthotic devices) | <ul style="list-style-type: none"> ● 100% |
| Surgical Implants or Prosthesis (Excluded dental) | <ul style="list-style-type: none"> ● 100% |
| Prescribed Medications | <ul style="list-style-type: none"> ● 100% |
| Treatment of Allergies | <ul style="list-style-type: none"> ● 100% |
| HIV/AIDS | <ul style="list-style-type: none"> ● \$1,000,000 per Insured, per lifetime ● 24-month Waiting Period |
| Palliative/Hospice Care | <ul style="list-style-type: none"> ● 100%, per Insured |
| Preventive Care (Available in deductibles \$500/\$1000, \$1000/\$2000, \$2000/\$3000 and \$5000/\$5000) | <ul style="list-style-type: none"> ● Colon cancer screening (50 years or older): \$1,200 per insured every ten years ● Mammogram (from 40 years or older): \$400 per insured per policy year ● Pap Smear (Papanicolaou) (21 to 65 years old): \$150 per insured every three years ● Prostate cancer screening (50 years or older): \$300 per insured per policy year ● No deductible applies ● No waiting period |
| Emergency Transportation | |
| Air Ambulance | <ul style="list-style-type: none"> ● 100% to the closest hospital of qualified treatment ● No deductible applies ● Coverage of the cost of a return air ticket up to \$2,000 after deductible |
| Ground Ambulance | <ul style="list-style-type: none"> ● 100% to the closest hospital of qualified treatment ● No deductible applies |

Summary of Benefits

Benefit

Coverage

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| Routine Health Checkup (age 18 and over) (includes laboratory tests, X-rays, chiropractic, nutritionist treatments, therapies for quitting smoking, sterilization procedure and any other medical expense related to the checkup) | <ul style="list-style-type: none"> For deductibles \$500/\$1000, \$1000/\$2000, \$2000/\$3000 and \$5000/\$5000: \$750 per insured, per policy year For deductibles \$10000/\$10000 and \$20000/\$20000: \$500 per insured, per policy year No deductible applies No waiting period |
| Specialized Treatments (Psychiatry, occupational therapies, sleep apnea and any other sleep disorder) | <ul style="list-style-type: none"> \$5,000 per Insured, per Policy Year after Deductible |
| Autism | <ul style="list-style-type: none"> 100% Dependents born from a Covered Maternity \$10,000 after Deductible for Dependents not born from a Covered Maternity who develop the condition while covered by the Policy |
| Repatriation of Mortal Remains or Cremation Services | <ul style="list-style-type: none"> 100% per Insured in the event of death resulting from a Covered Accident or condition |
| Illness or Injury in Private Aircraft | <ul style="list-style-type: none"> 100% |
| Coverage for accidents that occurred during the practice of sports professionally or high risk activities | <ul style="list-style-type: none"> 100% |
| Temporary Emergency coverage while application is evaluated | <ul style="list-style-type: none"> \$30,000 |
| Coverage Alzheimer disease | <ul style="list-style-type: none"> 100% |
| Alternative and/or Complementary Treatment (Acupuncture, Hypnosis, Massage Therapy, and Reflexology) | <ul style="list-style-type: none"> \$200 per insured, per policy year No deductible applies |
| Additional Benefits | <ul style="list-style-type: none"> In the event of death of the Primary Insured, his/her Insured Dependents will have free coverage for two years after the last paid period. In case of serious accident, as defined in this Policy, deductible will be waived for the first Medically Necessary Hospitalization, following said Serious Accident. Any subsequent treatment will incur the Deductible. Deductible will be waived up to a \$5,000 maximum in case of an Accident or Emergency that occurs while the Insured is travelling outside of his/her country of residence. The Insurer will reimburse up to a maximum of \$2,000 for the cost of a ticket in economy class to travel from the country of residence to one of the providers included in the Centers of Excellence Network in Latin America, previously approved by the Insurer. |

Unique Services



InterConsultation®

Confirmation of diagnosis and recommendation of the best treatment and specialists. Immediate access to this benefit available regardless of any exclusion applicable under this Policy.



Best Doctors Concierge™

Coordination of medical appointments, hospital admission, travel arrangements, accommodation and transportation when services are rendered outside of the Insured's Country of Residence.



Elite Navigator™

Your personal physician advocate will help you understand your diagnostic tests, medical checkup results, and will provide support to empower you to have more effective conversations with your own treating physician.



Individual Case Management

A program to coordinate, supervise and manage complex cases of long duration.

Things You Should Know

- Unless otherwise stated, the benefits are on a per Insured, per Policy Year basis in which the chosen Deductible applies. All benefits are in US Dollars (USD).
- Cumulative Deductible per Insured, per Policy Year. Maximum two Deductibles per family per Policy Year.
- In the case of a serious Accident, No deductible will apply for the first Hospitalization.
- Costs are subject to being usual, customary and reasonable.

Additional Coverage Available (Rider)

CriticalSelect™

Eligibility: Age 3–59, renewable cover up to age 65

- Cash payment to cover immediate or unexpected expenses, existing debts and lifestyle changes you might need to make if faced with a critical illness
- Covered conditions and surgeries: Cancer, stroke, heart attack, (myocardial infarction), coronary artery by-pass surgery, kidney/renal failure, multiple sclerosis, benign brain tumor, paralysis (paraplegia), organ transplant (kidney, heart, lung, liver, pancreas or bone marrow), blindness, deafness

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Best Doctors Insurance

5201 Blue Lagoon Drive, Suite 300
Miami, FL 33126

Call USA 1.305.269.2521

USA Toll Free 1.866.902.7775

Fax 1.800.476.1160

www.BestDoctorsInsurance.com

Best Doctors Insurance Services, LLC., and its affiliate, Best Doctors Insurance Limited, were founded with one goal: to facilitate access to the best and most advanced medical care. This goal is the starting point for every health plan, benefit and service we offer. Our undisputable medical expertise allows our members to be absolutely sure that they are receiving the right diagnosis and the right treatment when most needed.



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