# Global Medical Insurance<sup>®</sup>- BRONZE WORLDWIDE COVERAGE



(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

## **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	:50	\$5	00	\$1,0	000	\$2,	500	\$5,	000	\$10,	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**		additional Then 298		additional Then 259	First 2 no a cost* - Tł			additional Then 177		additional Then 162	First 2 no cost* - T	additional hen 144
10 to 18**	30	05	27	72	22	.4	20	08	1	96	17	73

\*The first two Dependent Children from the ages of 14 days to 9 years are covered at no additional cost for the first year of coverage only when both parents or guardians are insured under the Global Medical Insurance plan. On the first renewal date, premium will be 50% of the published rates. For subsequent renewals, the renewal premium will apply. \*\*Dependent child rates are only available when at least one parent or guardian is insured under the Global Medical Insurance plan. Children applying with no parent or guardian insured by Global Medical Insurance must use the Male 19 to 24 rates.

19 to 24	690	861	598	848	466	650	405	566	319	454	283	391
25 to 29	729	981	636	953	495	734	432	637	338	530	301	417
30 to 34	816	1,085	702	1,022	544	791	477	690	374	554	332	471
35 to 39	932	1,307	755	1,159	585	900	512	778	400	648	357	506
40 to 44	1,179	1,435	957	1,248	635	978	556	856	532	663	472	590
45 to 49	1,313	1,583	1,077	1,346	833	1,041	727	907	593	716	528	637
50 to 54	1,603	1,761	1,359	1,518	1,050	1,178	916	1,048	779	868	692	774
55 to 59	1,975	1,975	1,717	1,717	1,329	1,328	1,159	1,159	976	983	867	876
60 to 64	2,908	2,736	2,649	2,479	2,234	1,880	2,022	1,815	1,690	1,501	1,504	1,336
65 to 69	6,072	5,268	5,811	5,038	5,436	4,588	4,179	3,410	3,654	3,272	3,252	2,912
70 to 74				Please conta	ct IMG or your a	gent for prem	um informatior	o concerning th	is age bracket			
	Optional	Dental & Visio	n Rider \$570 a	annual premi	um	Мо	dal Payment F	actors* Annua	l 1.00 Semi /	Annual .55 Q	uarterly .28 M	lonthly .10

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.



# **Global Medical Insurance®- BRONZE** WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	50	\$5	00	\$1,0	000	\$2,	500	\$5,	000	\$10	,000			
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE			
14 days to 9 years**	First 2 no cost* - T		First 2 no cost* - T	additional Then 195	First 2 no a cost* - T			additional Then 133		additional Then 123		additional Then 107			
10 to 18**	22	29	20	04	16	59	1	57	1	47	1	29			
Global Medical	Insurance plan hen at least on	. On the first re	enewal date, p	remium will be	covered at no ac e 50% of the put lobal Medical Ins	olished rates. F	or subsequent	renewals, the re	enewal premiu	m will apply. *	*Dependent	child rates are			
19 to 24	519 645 448 635 349 487 305 424 239 341 212 294														
25 to 29	547	736	478	716	371	550	323	479	<b>254 397</b> 225 314						
30 to 34	612	814	527	767	407	594	357	518	280	416	249	355			
35 to 39	701	981	567	871	438	676	385	584	301	487	268	379			
40 to 44	883	1,077	717	936	476	734	417	642	399	500	355	442			
45 to 49	984	1,187	807	1,010	626	782	545	681	444	537	396	477			
50 to 54	1,202	1,321	1,020	1,138	787	883	688	785	584	652	520	581			
55 to 59	1,481	1,481	1,287	1,287	997	996	868	868	731	737	651	656			
60 to 64	2,181	2,053	1,987	1,859	1,675	1,479	1,517	1,362	1,267	1,127	1,129	1,002			
65 to 69	4,553	3,951	4,359	3,779	4,078	3,441	3,134	2,558	2,741	2,454	2,439	2,184			
70 to 74				Please contac	t IMG or your ag	jent for premiu	m information of	concerning this	age bracket						
	Optional	Dental & Visio	n Rider \$460	annual premi	um	Мо	lal Payment Fa	ctors* Annual	1.00 Semi A	nnual .55 Qua	arterly .28 N	lonthly .10			

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.

# Global Medical Insurance<sup>®</sup>- SILVER WORLDWIDE COVERAGE

GE SILVER

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

#### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	250	\$5	500	\$1,	000	\$2,	.500	\$5,	000	\$10	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**		additional Then 344		additional Then 300		additional hen 233		additional Then 205		additional Then 187		additional Then 167
10 to 18**	3	52	3	14	25	59	2	41	2	27	2	01
Global Medical	Insurance plan /hen at least or	. On the first re	enewal date, p	oremium will be	covered at no a e 50% of the pul lobal Medical In:	olished rates. Fo	or subsequent	renewals, the re	enewal premiu	m will apply. *	*Dependent of	child rates are
19 to 24	798	995	691	980	538	751	469	654	368	525	327	452
25 to 29	843	1,134	736	1,102	572	849	499	737	391	482		
30 to 34	943	1,255	812	1,182	629	915	552	798	433	641	384	545
35 to 39	1,077	1,511	873	1,340	676	1,041	592	899	462	749	413	585
40 to 44	1,363	1,659	1,106	1,443	734	1,130	643	990	615	766	546	682
45 to 49	1,518	1,830	1,245	1,557	964	1,203	840	1,049	686	827	610	737
50 to 54	1,853	2,036	1,571	1,755	1,214	1,361	1,059	1,211	900	1,004	800	895
55 to 59	2,284	2,284	1,985	1,985	1,537	1,535	1,340	1,340	1,128	1,137	1,003	1,013
60 to 64	3,362	3,163	3,063	2,866	2,582	2,279	2,338	2,098	1,953	1,735	1,739	1,545
65 to 69	7,020	6,090	6,718	5,824	6,284	5,304	4,831	3,943	4,224	3,782	3,759	3,367
70 to 74				Please contac	t IMG or your ag	, gent for premiur	n information of	concerning this	age bracket			
70 to 74	Optiona	l Dental & Visi	on Rider \$57(			<u> </u>		ctors* Annual		nnual .55 Qu	arterly .28	v

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.



## **Global Medical Insurance®- SILVER** WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	50	\$5	00	\$1,	000	\$2,	500	\$5,	000	\$10	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**	First 2 no a cost* - T			additional Then 226	First 2 no cost* - T	additional hen 175		additional Then 154		additional Then 142		additional Then 124
10 to 18**	26	55	2	35	19	95	1	81	1	70	1	49
*The first two D Global Medical only available w use the Male 19	Insurance plan. when at least on	. On the first re	enewal date, p	remium will be	50% of the pu	blished rates. Fo	or subsequent i	renewals, the re	newal premiu	m will apply. *	*Dependent o	child rates are
19 to 24	600	746	518	734	403	562	352	491	276	395	245	340
25 to 29	632	851	553 827 428 635 374 554 293 459 261									363
30 to 34	707								324	481	288	410
35 to 39	810	1,134	655	1,007	507	782	445	675	348	562	310	438
40 to 44	1,021	1,245	828	1,082	550	848	482	742	461	578	410	511
45 to 49	1,138	1,372	933	1,167	724	904	630	787	513	621	458	552
50 to 54	1,390	1,527	1,179	1,316	910	1,021	796	908	675	754	601	671
55 to 59	1,712	1,712	1,488	1,488	1,152	1,151	1,004	1,004	845	852	752	759
60 to 64	2,521	2,373	2,297	2,149	1,937	1,710	1,754	1,575	1,465	1,303	1,305	1,159
65 to 69	5,264	4,567	5,039	4,369	4,714	3,979	3,623	2,957	3,169	2,837	2,820	2,524
70 to 74			1	Please contac	t IMG or your ag	gent for premiur	n information of	concerning this	age bracket			1
I	Optional I	Dental & Visio	n Rider \$460 a	annual premiu	ım	Moda	al Payment Fac	tors* Annual	1.00 Semi Ar	nnual .55 Qua	rterly .28 M	onthly .10

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.

## Global Medical Insurance<sup>®</sup> - GOLD (For enhanced, long-term benefits, see Gold Plus plan option) WORLDWIDE COVERAGE

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	250	\$5	00	\$1,	000	\$2,	500	\$5,	000	\$10,	,000	\$25,	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**		additional Then 479	First 2 no cost* - T		First 2 no cost* - T	additional hen 306		additional hen 278	First 2 no cost* - T		First 2 no cost* - T		First 2 no cost* - T	
10 to 18**	5	30	43	32	33	38	30	06	27	74	24	45	22	21
Global Medical Ir	<b>1,106 1,456 952</b> 1,38				m will be 509	% of the publ	ished rates.	For subsequ	ent renewals,	the renewal	premium wi	ill apply. **[	Dependent ch	nild rates are
19 to 24	1,106	1,456	952	1,380	761	1,020	658	882	513	711	405	537	365	484
25 to 29	1,131	1,607	973	1,499	778	1,105	674	956	525	746	415	550	374	495
30 to 34	1,201	1,729	1,032	1,590	826	1,207	718	1,050	565	852	446	638	401	574
35 to 39	1,247	1,917	1,073	1,684	858	1,252	747	1,090	586	885	463	662	417	595
40 to 44	1,638	2,142	1,499	1,949	1,199	1,439	1,031	1,361	804	1,038	635	813	572	659
45 to 49	1,897	2,294	1,725	2,104	1,329	1,595	1,196	1,436	974	1,121	770	885	693	797
50 to 54	2,255	2,431	2,030	2,212	1,623	1,769	1,502	1,637	1,201	1,309	949	1,034	854	931
55 to 59	2,992	2,908	2,663	2,583	2,170	2,106	1,834	1,779	1,540	1,494	1,218	1,180	1,096	1,062
60 to 64	4,202	3,963	3,929	3,682	3,144	2,907	2,955	2,733	2,482	2,196	2,035	1,812	1,832	1,630
65 to 69	8,406	7,557	8,153	7,069	7,583	6,483	5,876	5,406	5,171	4,758	4,240	3,901	3,816	3,511

Please contact IMG or your agent for premium information concerning this age bracket

Optional Dental & Vision Rider \$570 annual premium

70 to 74

Modal Payment Factors\* Annual 1.00 Semi Annual .55 Quarterly .28 Monthly .10

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# **Global Medical Insurance®- GOLD** (For enhanced, long-term benefits, see Gold Plus plan option) WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN



(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

## **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	50	\$!	500	\$1,	000	\$2,	500	\$5,0	000	\$10	,000	\$25	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**	First 2 no cost* - T	additional Then 353		additional Then 302	First 2 no cost* - T	additional hen 226		additional Then 206	First 2 no a cost* - T			additional Then 165		additional Then 148
10 to 18**	39	91	3	19	2	50	2	27	20	)3	1	82	1	64
*The first two Dep Medical Insurance at least one paren	plan. On the	e first renewal	l date, premiu	um will be 50%	of the publis	hed rates. Fo	r subsequen	t renewals, the	e renewal pre	mium will app	oly. **Depen	dent child rate	es are only av	ailable when
19 to 24	819													358
25 to 29	9 837 1,189 720 1,110 577 819 498 707 389 552 307									407	277	366		
30 to 34	888	1,280	764	1,177	611	893	532	776	417	630	330	472	297	425
35 to 39	923	1,418	794	1,246	634	927	553	807	434	655	342	489	308	440
40 to 44	1,212	1,584	1,110	1,442	887	1,065	763	1,007	595	767	470	602	423	542
45 to 49	1,404	1,698	1,277	1,557	983	1,180	885	1,062	722	829	570	655	513	590
50 to 54	1,669	1,799	1,502	1,637	1,201	1,309	1,111	1,211	889	969	702	765	632	689
55 to 59	2,215	2,152	1,971	1,912	1,607	1,558	1,357	1,317	1,140	1,106	900	874	810	787
60 to 64	3,110	2,932	2,907	2,724	2,326	2,152	2,187	2,022	1,837	1,625	1,506	1,341	1,356	1,207
65 to 69	6,221	5,593	6,033	5,231	5,611	4,797	4,349	4,000	3,827	3,521	3,138	2,887	2,824	2,599
70 to 74				Plea	se contact IN	lG or your age	ent for premi	um informati	on concernin	g this age bra	icket			
	Optiona	l Dental & Vi	ision Rider \$	460 annual p	remium		M	odal Paymen	t Factors* A	nnual 1.00	Semi Annua	1.55 Quarte	rly.28 Mon	thly .10

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# Global Medical Insurance®- GOLD PLUS WORLDWIDE COVERAGE



(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

#### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	50	\$5	00	\$1,	000	\$2,	500	\$5,	000	\$10	,000	\$25	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**	First 2 no a cost* - T			additional hen 540		additional Then 411	First 2 no a cost* - T			additional hen 334	First 2 no cost* - T	additional hen 289		additional hen 260
10 to 18**	69	95	50	57	43	39	40	0	3	55	3	23	29	90

\*The first two Dependent Children from the ages of 14 days to 9 years are covered at no additional cost for the first year of coverage only when both parents or guardians are insured under the Global Medical Insurance plan. On the first renewal date, premium will be 50% of the published rates. For subsequent renewals, the renewal premium will apply. \*\*Dependent child rates are only available when at least one parent or guardian is insured under the Global Medical Insurance plan. Children applying with no parent or guardian insured by Global Medical Insurance must use the Male 19 to 24 rates.

19 to 24	1,259	1,767	1,047	1,469	812	1,140	714	1,003	585	821	447	627	402	564
25 to 29	1,268	1,901	1,090	1,635	845	1,268	743	1,115	608	912	464	698	418	628
30 to 34	1,465	2,266	1,220	1,886	945	1,462	832	1,286	680	1,053	520	803	468	723
35 to 39	1,635	2,548	1,360	2,121	1,054	1,644	928	1,446	760	1,184	580	905	522	814
40 to 44	2,108	2,811	1,755	2,340	1,360	1,814	1,197	1,596	980	1,306	748	997	673	898
45 to 49	2,636	3,031	2,193	2,522	1,700	1,955	1,497	1,721	1,224	1,408	935	1,076	842	968
50 to 54	4,642	5,014	4,467	4,818	3,968	4,285	3,491	3,770	2,857	3,086	2,182	2,357	1,964	2,121
55 to 59	6,239	6,124	6,066	5,950	5,430	5,373	4,779	4,728	3,910	3,868	2,987	2,955	2,688	2,659
60 to 64	7,782	7,151	7,554	6,938	6,701	6,239	5,897	5,490	4,825	4,492	3,685	3,431	3,317	3,088
65 to 69	17,447	15,136	16,753	14,546	16,176	13,865	13,426	11,508	10,029	8,596	8,897	7,626	8,007	6,863
70 to 74				Pleas	se contact IMC	or your agen	t for premium	information	concerning tl	nis age bracke	et			
	Optic	onal Dental 8	Vision Ride	r \$570 annua	al premium		Moda	al Payment F	actors* Ann	ual 1.00 Sei	ni Annual .5	55 Quarter	ly.28 Mon	hly .10

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.



# **Global Medical Insurance®- GOLD PLUS** WORLDWIDE COVERAGE EXCLUDING THE U.S., CANADA, CHINA, HONG KONG, JAPAN, MACAU, SINGAPORE, AND TAIWAN

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$2	50	\$5	00	\$1,0	000	\$2,5	500	\$5,	000	\$10,	,000	\$25,	,000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**		cost* - Then 479 cost* - Then 405 cost* - Then 312 cost* - Then 278 cost* - Then 251 cost*								First 2 no a cost* - T		First 2 no cost* - T		
10 to 18**	52	521 426 331 299 269 241 2									17			
*The first two E Global Medical only available v use the Male 19	Insurance pl vhen at least	an. On the f	irst renewal	date, premiu	im will be 50%	6 of the publis	hed rates. Fo	or subsequer	nt renewals, t	ne renewal pr	emium will	apply. **De	ependent chi	ild rates are
19 to 24	944	1,325	786	1,103	609	855	536	753	439	616	335	470	301	423
25 to 29	950	1,427	818	1,226	633	950	558	836	456	685	349	522	314	470

25 to 29	950	1,427	818	1,226	633	950	558	836	456	685	349	522	314	470
30 to 34	1,100	1,699	915	1,414	710	1,097	623	965	510	789	390	603	351	542
35 to 39	1,226	1,912	1,020	1,591	791	1,234	697	1,086	570	888	435	678	391	610
40 to 44	1,582	2,108	1,316	1,755	1,020	1,360	898	1,197	735	980	561	748	505	673
45 to 49	1,977	2,276	1,645	1,893	1,275	1,468	1,123	1,292	918	1,057	702	808	632	727
50 to 54	3,952	4,121	3,481	3,631	2,976	3,213	2,618	2,829	2,143	2,314	1,637	1,768	1,473	1,591
55 to 59	4,679	4,593	4,550	4,464	4,073	4,030	3,584	3,547	2,932	2,902	2,240	2,217	2,016	1,995
60 to 64	5,836	5,364	5,666	5,204	5,026	4,679	4,423	4,118	3,619	3,369	2,764	2,573	2,488	2,316
65 to 69	13,085	11,352	12,566	10,911	12,132	10,399	10,069	8,631	7,522	6,447	6,673	5,719	6,006	5,147
70 to 74				Pleas	se contact IMC	or your agen	t for premiun	n informatior	o concerning	this age brack	ket			
	Option	nal Dental &	Vision Ride	r \$460 annu	al premium		Moda	l Payment F	actors* Ann	ual 1.00 Ser	ni Annual .	55 Quarte	rly.28 Mon	thly .10

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.

# **Global Medical Insurance®- PLATINUM** WORLDWIDE COVERAGE

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

#### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	10	00	25	50	50	00	1,0	000	2,5	00	5,0	000	10,	000	25,0	000
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**		additional nen 2,357	First 2 no cost* - Th			additional nen 1,923	First 2 no cost* - Tł		First 2 no cost* - Th	additional nen 1,550	First 2 no cost* - Tl	additional nen 1,466	First 2 no cost* - Tł	additional nen 1,394	First 2 no a cost* - Th	additional nen 1,255
10 to 18**	2,4	193	2,2	66	1,9	985	1,7	704	1,6	511	1,5	521	1,4	142	1,2	98

\*The first two Dependent Children from the ages of 14 days to 9 years are covered at no additional cost for the first year of coverage only when both parents or guardians are insured under the Global Medical Insurance plan. On the first renewal date, premium will be 50% of the published rates. For subsequent renewals, the renewal premium will apply. \*\*Dependent child rates are only available when at least one parent or guardian is insured under the Global Medical Insurance plan. Children applying with no parent or guardian insured by Global Medical Insurance must use the Male 19 to 24 rates.

19 to 24	3,908	5,947	3,569	5,373	3,152	5,142	2,605	3,837	2,371	3,453	2,058	2,762	1,745	2,418	1,571	2,176
25 to 29	4021	7,324	3,672	6,615	3,244	6,332	2,680	4,725	2,439	4,253	2,118	3,733	1,796	2,788	1,617	2,509
30 to 34	4,386	8,299	4,006	7,496	3,538	6,961	2,924	5,354	2,661	4,819	2,310	4,230	1,959	3,267	1,763	2,940
35 to 39	4,630	9,216	4,229	8,324	3,735	7,552	3,087	5,946	2,809	5,351	2,438	4,697	2,068	3,389	1,861	3,050
40 to 44	5,687	10,080	5,194	9,105	4,587	8,195	3,791	6,503	3,450	5,853	2,994	5,138	2,464	3,902	2,218	3,512
45 to 49	6,956	8,028	6,354	7,251	5,751	6,008	4,638	5,180	4,220	4,662	3,663	4,092	2,968	3,108	2,671	2,797
50 to 54	14,707	16,712	13,342	15,253	13,131	14,020	10,505	11,216	9,559	10,094	8,299	8,861	6,723	7,066	6,051	6,360
55 to 59	20,921	20,621	19,109	18,684	17,435	17,299	13,948	13,840	12,693	12,455	11,019	10,933	8,648	8,580	7,783	7,722
60 to 64	23,227	22,058	21,070	20,194	19,576	18,486	16,591	15,535	15,098	13,981	13,106	12,272	10,783	9,787	9,705	8,808
65 to 69	47,212	41,347	42,990	37,709	41,454	36,055	38,383	33,078	29,939	27,455	26,101	23,817	21,878	19,847	19,691	17,862
70 to 74			1		Please cor	ntact IMG or	your agent	t for premiu	ım informa	tion conce	rning this a	ge bracket				
				Mod	al Payment	Factors*	Annual 1.0	0 Semi An	nual .55	Quarterly	.28 Month	ly .10				

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.



# **Global Medical Insurance®- Platinum** Worldwide Coverage Excluding The U.S., Canada, China, Hong Kong, JAPAN, MACAU, SINGAPORE, AND TAIWAN

(New Business Rates Effective 2/1/2016. IMG reserves the right to issue the most current rates online in the event these expire, are modified or replaced with a newer version.)

### **ANNUAL PREMIUMS**

All amounts shown are in U.S. dollars. Please select your deductible carefully, as you will be unable to select a lower deductible when you renew your coverage.

Deductibles	\$100		\$250		\$500		\$1,000		\$2,500		\$5,000		\$10,000		\$25,000	
AGE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
14 days to 9 years**	First 2 no additional cost* - Then 1,971		First 2 no additional cost* - Then 1,790		First 2 no additional cost* - Then 1,625		First 2 no additional cost* - Then 1,414		First 2 no additional cost* - Then 1,344		First 2 no additional cost* - Then 1,281		First 2 no additional cost* - Then 1,230		First 2 no additional cost* - Then 1,107	
10 to 18**	2,068		1,880		1,673		1,462		1,392		1,324		1,265		1,139	

\*The first two Dependent Children from the ages of 14 days to 9 years are covered at no additional cost for the first year of coverage only when both parents or guardians are insured under the Global Medical Insurance plan. On the first renewal date, premium will be 50% of the published rates. For subsequent renewals, the renewal premium will apply. \*\*Dependent child rates are only available when at least one parent or guardian is insured under the Global Medical Insurance plan. Children applying with no parent or guardian insured by Global Medical Insurance must use the Male 19 to 24 rates.

19 to 24	3,169	4,825	2,894	4,358	2,556	4,171	2,112	3,113	1,923	2,801	1,669	2,241	1,415	1,961	1,273	1,765
25 to 29	3257	5,935	2,975	5,440	2,627	4,516	2,171	3,726	1,976	3,353	1,716	2,910	1,455	2,474	1,310	2,227
30 to 34	3,531	6,682	3,224	6,034	2,848	5,604	2,353	4,311	2,142	3,879	1,860	3,405	1,577	2,629	1,420	2,366
35 to 39	3,704	7,373	3,382	6,659	2,988	6,041	2,469	4,757	2,246	4,280	1,950	3,757	1,655	2,711	1,489	2,440
40 to 44	4,493	7,964	4,103	7,193	3,624	6,474	2,995	5,137	2,725	4,624	2,366	4,058	1,947	3,083	1,752	2,774
45 to 49	5,496	6,343	5,019	5,729	4,543	4,747	3,663	4,092	3,334	3,683	2,894	3,233	2,345	2,456	2,110	2,210
50 to 54	11,471	13,034	10,406	11,897	10,242	10,935	8,194	8,748	7,457	7,873	6,474	6,911	5,244	5,511	4,720	4,960
55 to 59	16,256	16,022	14,848	14,517	13,548	13,442	10,838	10,753	9,862	9,678	8,562	8,495	6,720	6,668	6,048	6,001
60 to 64	17,884	16,985	16,224	15,550	15,074	14,234	12,774	11,962	11,625	10,766	10,091	9,450	8,304	7,536	7,473	6,783
65 to 69	35,881	31,424	32,672	28,658	31,505	27,402	29,172	25,139	22,754	20,866	19,837	18,101	16,628	15,083	14,965	13,575
70 to 74					Please co	ntact IMG o	r your ager	nt for prem	ium informa	ation conce	rning this ag	ge bracket				
				Moda	al Payment	Factors* A	nnual 1.0	0 Semi Aı	nnual .55	Quarterly .2	28 Monthl	y .10				

\*Except for Global Group, IMG will not accept checks, money orders or wire transfers for semi-annual, quarterly, or monthly payment modes. These alternative payment modes are only accepted with pre-authorization to debit your credit card on the due date(s) of your future premium installment(s) prior to the expiration date.