



### **IMPORTANT CONTACT INFORMATION**

FOR YOUR MARINESURE ESSENTIAL

For help in understanding your benefits, questions and general plan guidance, please contact our Member Care Team by calling us or messaging us via your member portal.

+44 (0)20 7590 8800 or +1-888-689-9661 (US Freephone)

https://members.hcigroupglobal.com/

CLAIMS – submit reimbursement requests to us via your member portal

https://members.hcigroupglobal.com/

FOR 24/7 PRE-AUTHORISATION AND GUARANTEE OF PAYMENT REQUESTS:

All hospital stays, outpatient surgery, medical transportation (except for local emergency transportation) or medical procedures must be pre-authorised. Pre-authorisations are easy and only take a few minutes of your time.

Please allow at least 2-5 business days for the pre-authorisation to be processed. You must notify us at least five business days prior to a scheduled or elective admission or treatment plan. For an emergency hospitalisation please notify us within 48 hours of admission.

Member Portal: <a href="https://members.hcigroupglobal.com/">https://members.hcigroupglobal.com/</a> +44 (0)20 7590 8800

If you have trouble accessing your member portal, please email us at <a href="mailto:policy.admin@healthcareinternational.com">policy.admin@healthcareinternational.com</a>

FOR EMERGENCY MEDICAL ASSISTANCE

+44 (0)20 7590 8800

# US CLAIMS AND PROVIDER INFORMATION

To find a provider in US, visit: www.whyuhc.com/us1 and select (United Healthcare Options PPO)

Utilising the UHC Network ensures that preauthorisation procedures are followed. If using hospital or provider outside of UHC Network in the US you or your provider must follow pre-authorisation procedures and contact: +1 800 268 5041







## CREW ASSISTANCE PROGRAMME (CAP)

## Connecting you to better health and well-being.

Professional counselling support and consultation available worldwide, day or night, 365 days a year. The Telus Health (formerly LifeWorks) benefit reflects our continuing commitment to your well-being and privacy. We encourage you to use the programme anytime you need it. Please note that any onward referral will be at your own cost.

 $Telus\ Health's\ Privacy\ Policy\ can\ be\ viewed\ on\ their\ website\ https://www.telus.com/en/health/about-telus-health/privacy?linktype=ge-footer$ 



CALL

Call Telus Health and identify yourself as part of the Healthcare International Group

https://wellbeing.lifeworks.com/world/#



ONLINE E-COUNSELLING

https://app.lifeworks.com

Log in using the following credentials:

Username: HCI

Password: lifeworks (lower case)



DOWNLOAD the Telus Health One app





**TABLE OF BENEFITS** CHANNELS \$1,500,000 Annual maximum plan benefit €1,250,000 £1,000,000 HOSPITALISATION BENEFITS Accommodation Semi-private room  $In patient \ treatment, \ day patient, \ operating \ the atreand \ recovery \ room, \ prescribed \ medicines, \ drugs \ and \ dressing \ for$ 100% inpatient or daypatient treatment Intensive care unit 100% Inpatient ancillary services including physical and occupational therapy as daypatient or inpatient 100% Surgeons' and anaesthetists' fees 100% Inpatient consultation by specialist 100% Emergency room 100% 100% Pathology, radiology, and diagnostic tests MRI, CT and PET scans 100% Private duty nursing \$7,500 / €6,000 / £5,000 (Lifetime maximum) Skilled nursing facility \$7,500 / €6,000 / £5,000 (Lifetime maximum) Home health care \$7,500 / €6,000 / £5,000 (Lifetime maximum) Hospice care services \$10,000 / €8,000 / £6,500 (Lifetime maximum) Emergency dental treatment 100%

100%

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(as a result of accident)

Cancer treatment

TABLE OF BENEFITS CHANNELS

**Essential** 

Child accompaniment 100%

If the insured person is a child under 16 who requires hospitalisation, we will pay for necessary overnight accommodation for one parent in the same hospital, or when no such accommodation is available, for necessary bed and breakfast accommodation in a nearby hotel. Pre-approval is necessary.

MANAGED TRANSPLANT PROGRAMME	
Organ transplants maximum lifetime	\$500,000
	€400,000
	£300,000
Tissue transplant	\$250,000
(as part of the overall organ max.)	€200,000
	£150,000

Transplant must be pre-certified and approved by us. Failure to comply will result in treatment not being covered by your policy. A 24-month waiting period applies for all transplants.

OUTPATIENT BENEFITS	
Surgery as outpatient	100%
Physician office visits and specialist fees	100%
Diagnostic and therapeutic services (as outpatient)	100%
Physical therapy (as outpatient)	100% \$75 / €60 /£50 per visit Max 30 visits per year
Occupational therapy (as outpatient)	100% \$75 / €60 /£50 per visit Max 30 visits per year
Chiropractic services	100%
Policy year maximum for chiropractic services Referral letter required from medical physician	\$750 / €600 / £500
Complementary medicine Including TCM, bonesetting, acupuncture, herbal medicine, homeopathy and osteopathy	N/A (option available at benefits below) 100% \$500 / €400 / £350
PRESCRIPTION PROGRAMME	
In US (no deductible applies)	90% generic 80% brand
All other countries (deductible applies)	100%

BLE OF BENEFITS	CHANNELS
	Essential
WELLNESS AND ROUTINE SERVICES	
ADULTS Per policy year	\$500 / €400 / £300
Routine physical exams in connection with overall health and well-being	100%
Pap smear	100%
Mammograms: ages 35-39 one baseline exam; ages 40-49 one exam every one or two years for asymptomatic women, but no sooner than two years after baseline; age 50 and over one exam annually; any age whenever prescribed by a physician	100%
Prostate cancer screening: one test per policy year for males age 50 or over	100%
Immunizations and vaccinations	100%
CHILD(REN)	
Maximum per policy year: birth to age 12 months	\$300 / €275 /£225
Maximum per policy year: 13 months and over	\$200 / €150 / £125
Routine medical exams and immunisations and vaccinations	100%
Child preventive care services	100%
Hearing tests	100%
Six-month waiting period applies to all wellness benefits, but waits are waived for policies that are paid annually or as per the terms and co Overall wellness benefit maximums apply to all routine and wellness benefits for adults and children.	nditions in your plan.
VISION CARE COVER	100%
Maximum per 24-month period  Not subject to deductible.	\$300 / €275 / £225
DENTAL PLAN	
Policy year maximum (per insured person)	\$1,500 / €1,200 / £1,000
CLASS I EXPENSES  No deductible applies Diagnostic – general preventive	100%
CLASS II EXPENSES  Restorative (basic); endodontics; periodontics; prosthodontics – removable (maintenance); fixed bridge (maintenance); oral surgery	80%
CLASS III EXPENSES Restorative (major); endodontics; prosthodontics – removable (installation); fixed bridge (installation). Orthodontic and Class III services are available after three months of continuous enrolment in the Dental Plan or as per the terms and conditions in your plan. Orthodontic services are only available for children under 18 years of age.	50%
Orthodontic lifetime maximum	\$1,500 / €1,200 / £1,000
Individual deductible	\$50 / €40 / £30

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TABLE OF BENEFITS	CHANNELS
	Essential
EMERGENCY EVACUATION, REPATRIATION AND AMBULANCE SERVICES	
Medical evacuation and assistance	100%
24/7 Emergency medical assistance hotline	YES
Repatriation of mortal remains	100%
Family emergency travel	N/A
Repatriation accompaniment	100% \$2,500 / €1,750 / £1,500
Repatriation family accompaniment	N/A
Crew Replacement	100%
Reasonable and necessary additional travel costs of sending a replacement person to occupy the same position as a primary insured who has been disabled or died while travelling with the vessel	\$5,000
	€5,000
	£5,000
MARINESURE SPECIALCARE BENEFITS - RETURN TO FITNESS	
Rejoin vessel or return to country of residence due to medical treatment received onshore. Max. benefit \$1,500 for transportation costs	100%
Long-term convalescence in home country. Repatriation and home country cover due to medical necessity.	100%

100%

\$2,500 / €1,750 / £1,500

One return trip, by first class rail or by economy/tourist class air travel.

for duration of five days or more.

Overnight accommodation up to \$100 /  $\ensuremath{\mathfrak{e}}$ 75 / \$65 each night up to a maximum of 15 nights.

 $Companion\ travel\ and\ accommodation\ expenses\ for\ one\ person\ to\ accompany\ you\ to\ hospital\ outside\ of\ home\ country$ 

**TABLE OF BENEFITS** CHANNELS MENTAL HEALTH BENEFITS 100% Lifetime maximum for mental health benefits (inpatient and outpatient) \$25,000 €20,000 £15,000 \$2,500 / €2,000 / £1,500 Policy year mental illness, maximum 15 visits (outpatient treatment) per policy year Lifetime mental illness, maximum per insured (in-hospital) 60 days 80 visits Lifetime maximum for mental health benefits (outpatient treatment) Mental health benefits do not count towards out of pocket maximum.

CREW ASSISTANCE PROGRAMME YES

Operated by Telus Health, formerly LifeWorks, it provides assistance for the types of issues often faced by marine professionals. It's a comprehensive well-being program that gives free, confidential support, 24 hours a day. You can talk to someone about any issues you're experiencing from work related issues to dealing with close quarter living; from culture shock to work stresses, conflicts and challenges and it's all totally confidential.

ACCIDENTAL DEATH AND DISMEMBERMENT	N/A Option available
Also available as an optional benefit on all plans.	
HIV/AIDS TREATMENT	YES
Lifetime maximum	\$25,000
	€20,000
	£15,000
DURABLE MEDICAL EQUIPMENT	YES
Lifetime maximum	\$15,000
	€12,000
	£10,000
CHRONIC CONDITIONS	YES

 ${\it Chronic conditions \ are \ treated \ like \ any \ other \ condition \ under \ the \ policy.}$ 

TABLE OF BENEFITS CHANNELS

Essential

### LIFE COVER (ADULTS ONLY)

Lump sum in case of death (all causes)

\$5,000 / €5,000 / £5,000

### DEDUCTIBLE OPTIONS

Individual deductible per policy year

Deductible per claim options also available upon request

\$0, \$50, \$100, \$200, \$500, \$1,000, \$5,000 €0, €40, €75, €150, €400, €750, €4,000 £0, £30, £65, £125, £300, £650, £3,000

# OUT OF POCKET MAXIMUM

INDIVIDUAL

\$1,000 / €750 / £650

An out of pocket maximum is protection for you against high medical costs from your benefits which are listed at 90%. The 10% that you pay yourself is your out of pocket expenses. Once your out of pocket costs equal the maximum indicated, your benefits that were at 90% are switched to 100% for the remainder of the policy year (unless where indicated). For Premier Plans out of pocket while technically possible is not practical due to the 100%. The only area where a maximum out of pocket could be reached is in the US prescriptions for brand name drugs. All other qualified benefits are at 100%.

#### OPTIONAL ADD-ONS

Complementary medicine Including TCM, bonesetting, acupuncture, herbal medicine, homeopathy and osteopathy	Option available 100% \$500 / €400 / £350
No wait on maternity benefits  12-month wait on maternity benefits waived and maternity benefit immediately available to staff and eligible dependents.	Option available
Private room upgrade	Option available
Accidental death and dismemberment	Option available

# GEOGRAPHICAL COVER REGION OPTIONS

Cover Region 1 – Worldwide including US and Canada and their territories.

For Cover Region 1 – please note that benefits listed above are only applicable when using our Preferred Provider Network. Benefits outside of network are reduced to 70% and co-insurance does not count toward out of pocket max.

Please note that Cover Region 1 is limited to 180 days in the US in any 12-month period.

Cover Region 2 – Worldwide but excluding US and Canada and their territories.

Cover Region 2 – does not include any cover for US and Canada and their territories.

Cover Region 3 — Mixed cover of both Cover Region 1 and Cover Region 2 due to the vessel's itinerary during the policy year. The maximum cover duration in Cover Region 1 is 6 months during each policy year. Cover Region 1 benefit limits and Preferred Provider Network rules apply as shown above while in Cover Region 1.

TABLE OF BENEFITS CHANNELS

Essential

# ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) OPTION

In the event of an accidental death or dismemberment of the primary insured the insurer pays a lump sum benefit equal to the principal sum subject to a maximum benefit multiplied by a percentage as shown below.

Loss of life	100%
Loss of sight of both eyes	100%
Loss of both hands or arms	100%
Loss of both feet or both legs	100%
Loss of one arm and one leg	100%
Loss of sight of one eye	50%
Loss of one foot or one leg	50%
Loss of one hand or arm	50%

N.B. Benefits cannot exceed two times annual salary.



### A better future

Good healthcare is an investment in the future. That's why we're proud to offer the kind of comprehensive care that will help your crew thrive for the long term. Enrolling your crew with MarineSure is easy. Get in touch today to find out more.

Our insurance partner

Your Integra Global health plan is underwritten by MGEN, SIREN number 775 685 399, regulated by the provisions of Tome II of the French mutual insurance companies code -3-7 square Max Hymans, 75748 PARIS Cedex 15

