



IMPORTANT CONTACT INFORMATION FOR YOUR MARINESURE COMPLETE	
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/
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.	https://members.hcigroupglobal.com/ Member Portal: https://members.hcigroupglobal.com/ +44 (0)20 7590 8800 If you have trouble accessing your member portal, please email us at policy.admin@healthcareinternational.com
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.

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





DOWNLOAD the Telus Health One app





TABLE OF BENEFITS	CHANNELS
	Complete
Annual maximum plan benefit	\$1,500,000 €1,250,000 £1,000,000
HOSPITALISATION BENEFITS	
Accommodation	Semi-private room
Inpatient treatment, daypatient, operating theatre and recovery room, prescribed medicines, drugs and dressing for inpatient or daypatient treatment	100%
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%
Pathology, radiology, and diagnostic tests	100%
MRI, CT and PET scans	100%
Private duty nursing (Lifetime maximum)	\$7,500 / €6,000 / £5,000
Skilled nursing facility (Lifetime maximum)	\$7,500 / €6,000 / £5,000
Home health care (Lifetime maximum)	\$7,500 / €6,000 / £5,000
Hospice care services (Lifetime maximum)	\$10,000 / €8,000 / £6,500
Emergency dental treatment (as a result of accident)	100%
Cancer treatment	100%

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TABLE OF BENEFITS CHANNELS

	Complete
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	100%
(deductible applies)	

TABLE OF BENEFITS CHANNELS Complete MATERNITY AND NEWBORN COVER 100% Pregnancy, normal delivery \$20,000 €15,000 £13,000 Complicated pregnancy and caesarean section (non-elective) 100% as any other condition Routine nursery, included under maternity benefits as any other treatment including room and board, physician charges and circumcision for males prior to discharge. In the case of an elective caesarean section, which is not medically necessary, benefit will be paid at the cost of a normal delivery, up to the Pregnancy, normal delivery limit. \$25,000 New born cover €20,000

Included in New Born Cover are premature births, congenital conditions and birth anomalies. New Born Cover is only available for a covered pregnancy. A 12-month waiting period applies for all maternity and new born care benefits unless maternity waiting period waiver option is chosen.

£15,000

WELLNESS AND ROUTINE SERVICES	
ADULTS	\$500 / €400 / £300
Per policy year	
Routine physical exams in connection with overall health and well-being	100%
Pap smear 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%
Immunisations 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%
5ix-month waiting period applies to all wellness benefits, but waits are waived for policies that are paid annually or as per the terms and cor	nditions in vour plan.

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 conditions in your plan. Overall wellness benefit maximums apply to all routine and wellness benefits for adults and children.

VISION CARE COVER	100%
Maximum per 24-month period	\$300 / €275 / £225
Not subject to deductible.	

TABLE OF BENEFITS	CHANNELS
	Complete
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 enrollment 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
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 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	100% \$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 on shore. Max. benefit $$1,500$ for transportation costs	100%
Long-term convalescence in home country. Repatriation and home country cover due to medical necessity	100%
Companion travel and accommodation expenses for one person to accompany you to hospital outside of home country for duration of five days or more	100% \$2,500 / €2,000 / £1,500
One return trip, by first class rail or by economy/tourist class air travel.	
Overnight accommodation up to \$100 / €75 / £65 each night up to a maximum of 15 nights	

TABLE OF BENEFITS

CHANNELS

	Complete
MENTAL HEALTH BENEFITS	100%
Lifetime maximum for mental health benefits (inpatient and outpatient)	\$25,000 €20,000 £15,000
Policy year mental illness, maximum 15 visits (outpatient treatment)	\$2,500 / €2,000 / £1,500 per policy year
Lifetime mental illness, maximum per insured (in-hospital)	60 days
Lifetime maximum for mental health benefits (outpatient treatment)	80 visits

Mental health benefits do not count towards out of pocket maximum.

CREW ASSISTANCE PROGRAMME

YES

Operated by Telus Health, formerly LifeWorks, 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.	Орноп ачанале
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

Chronic conditions are treated like any other condition under the policy.

TABLE OF BENEFITS CHANNELS

Complete

LIFE COVER (ADULTS ONLY)

Lump sum in case of death (all causes) \$5,000 / €5,000 / €5,000

DEDUCTIBLE OPTIONS

Individual deductible

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

TABLE OF BENEFITS CHANNELS

Complete

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.

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

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.

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%

 ${\it N.B. Benefits\ cannot\ exceed\ two\ times\ annual\ salary.}$



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

