

ImmigrantSecureSM

Health Coverage that Goes Far & Beyond

ImmigrantSecureSM is your cost effective insurance plan when you have relatives visiting the US or for travel abroad. ImmigrantSecureSM provides protection while immigrating or traveling to the US and internationally.

- Easy online enrollment
- Major medical coverage for individuals of any age
- Astonishing travel assistance services included

What is ImmigrantSecureSM?

Individuals from around the globe live and work in the US. While traditional domestic plans are available to permanent residents, family, friends and others who visit these individuals often need insurance protection while they are in the US. ImmigrantSecureSM is designed to protect these international visitors. The plan also provides an additional, economical option for US citizens traveling abroad. ImmigrantSecureSM provides quality insurance at a price that does not break the bank. It provides both inpatient and outpatient hospital benefits and many other valuable emergency travel features, giving you protection you can rely on.

Whether you are looking for coverage for one individual or a group of family members, ImmigrantSecureSM has the features you need. Each plan includes coverage for Medical Expenses, Emergency Medical Evacuation, and Common Carrier AD&D. In addition, the plan offers a choice of deductibles and coverage options assuring that the plan will meet almost any budget.

About the Plan Administrator

MultiNational Underwriters[®] (MNU), headquartered in Indianapolis, Indiana, is a full service organization offering a comprehensive portfolio of insurance products designed specifically to address the insurance needs of consumers worldwide. Our international claims specialists, medical professionals and client relations specialists are available 24 hours a day, 7 days a week to answer your questions and respond to your needs. You will find our service team to be prompt, compassionate, and highly professional. MNU is a subsidiary of HCC Insurance Holdings, Inc. (HCC), which is a leading international specialty insurance group headquartered in Houston, Texas. HCC has assets of more than \$8.0 billion, shareholders' equity in excess of \$2.3 billion and is rated AA (Very Strong) by Standard & Poor's, AA (Very Strong) by Fitch Ratings and A+ (Superior) by A.M. Best Company.

About the Insurer

Lloyd's, the largest and oldest insurance market in the world, is the insurer of ImmigrantSecureSM. Rated 'A' (Excellent) by AM Best Company and 'A' (Strong) by Standard and Poor's, Lloyd's provides financial strength and security that is unparalleled in the worldwide insurance market. Lloyd's is recognized as a market leader in the accident and health insurance arena and is well-known for its innovative products and services. Presently, Lloyd's provides accident and health insurance to millions of individuals in almost every country of the world.

Privacy Policy

MNU respects individual privacy and values the confidence of its customers, employees, consumers, business associates, and others. Please contact us or visit www.mnui.com to obtain a full version of our Privacy Policy.

Schedule of Benefits and Limits

All benefits, except Common Carrier Accidental Death and Dismemberment, are subject to Deductible and are per Certificate Period unless stated otherwise. Coinsurance does not apply.

	Plan A	Plan B	Plan C	Plan D
Deductible				
Ages 70 and above	\$200 per Injury or Illness		Not available	
All others	\$0, \$50, or \$100 per Injury or Illness		\$0, \$50, or \$100 per Injury or Illness	
Overall Policy Maximum				
Ages 80 and above	\$10,000 Lifetime	Not available	Not available	Not available
Ages 70-79	\$25,000 Lifetime	\$50,000 Lifetime	Not available	Not available
Maximum per Injury / Illness				
Ages 14 days through 69 years	\$50,000 Lifetime	\$75,000 Lifetime	\$100,000 Lifetime	\$130,000 Lifetime
Penalty for failure to Pre-certify	50% of Eligible Medical Expenses			
Inpatient Treatment				
Hospital Room and Board, including miscellaneous	\$1,400 per day, maximum 30 days	\$1,675 per day, maximum 30 days	\$1,950 per day, maximum 30 days	\$2,535 per day, maximum 30 days
Intensive Care Unit, including miscellaneous	\$2,060 per day, maximum 8 days	\$2,430 per day, maximum 8 days	\$2,800 per day, maximum 8 days	\$3,640 per day, maximum 8 days
Surgery	\$3,300 per session	\$4,400 per session	\$5,500 per session	\$7,150 per session
Consultant physician	\$450 maximum	\$475 maximum	\$500 maximum	\$650 maximum
Private duty nurse	\$550 maximum	\$550 maximum	\$550 maximum	\$700 maximum
Physician visits	\$55 maximum per visit, 30 visits maximum	\$70 maximum per visit, 30 visits maximum	\$85 maximum per visit, 30 visits maximum	\$110 maximum per visit, 30 visits maximum
Outpatient Treatment				
Surgery	\$3,300 per session	\$4,400 per session	\$5,500 per session	\$7,150 per session
Outpatient Surgical Facility	\$1,000 maximum	\$1,050 maximum	\$1,100 maximum	\$1,400 maximum
Pre-admission Testing	\$1,100 maximum	\$1,100 maximum	\$1,100 maximum	\$1,450 maximum
Diagnostic X-ray and Labs	\$450 maximum, plus \$250 for one CAT Scan, MRI or PET	\$475 maximum, plus \$375 for one CAT Scan, MRI or PET	\$500 maximum, plus \$500 for one CAT Scan, MRI or PET	\$650 maximum, plus \$600 for one CAT Scan, MRI or PET
Emergency Room (all expenses incurred therein)	75% of URC to \$330 maximum	75% of URC to \$440 maximum	75% of URC to \$550 maximum	75% of URC to \$700 maximum
Outpatient Prescription Drugs	\$100 maximum	\$125 maximum	\$150 maximum	\$200 maximum
Office Visits, including Urgent Care	\$55 allowable per visit, 10 visits maximum	\$70 allowable per visit, 10 visits maximum	\$85 allowable per visit, 10 visits maximum	\$110 allowable per visit, 10 visits maximum
Miscellaneous Inpatient & Outpatient Treatment				
Anesthesiologist	25% of Surgeon benefit			
Assistant Surgeon	25% of Surgeon benefit			
Local Ambulance	\$450 maximum			
Dental Accident	\$550 maximum			
Physical Therapy	\$40 maximum per visit, 1 visit per day, maximum 12 visits			
Durable Medical Equipment	\$1,100 maximum	\$1,200 maximum	\$1,300 maximum	\$1,700 maximum
Chemotherapy and Radiation	\$1,100 maximum	\$1,225 maximum	\$1,350 maximum	\$1,750 maximum
Other Benefits				
Emergency Medical Evacuation	\$50,000 Lifetime Maximum. Available only to Members under age 70. Accrues toward Maximum per Injury / Illness			
Repatriation of Remains	\$7,500 per Member			
Common Carrier Accidental Death & Dismemberment	\$25,000 Lifetime Maximum Principal Sum per Member Not Subject to Deductible Death or Loss of Two Limbs – Principal Sum Loss of One Limb – One-half the Principal Sum			

Covered Expenses

Medical

Subject to the coverage outlined in the Schedule of Benefits and Limits, ImmigrantSecureSM will provide benefits for the following:

- Inpatient and Outpatient charges made by a Hospital
- Charges made by a Physician, surgeon, radiologist, anesthesiologist, and any other medical specialist to whom the Physician has referred the case
Charges made for dressings, sutures, casts or other supplies prescribed by the attending Physician or specialist, but excluding nebulizers, oxygen tanks, diabetic supplies and all devices for repeat use at home
- Charges for diagnostic testing using radiology, ultrasonographic or laboratory services
Charges for oxygen and other gases and anesthetics and their administration
- Charges for prescription drugs for treatment of a covered Injury or Illness, but not for the replacement of lost, stolen, damaged, expired or otherwise compromised drugs
Charges made by a licensed Extended Care Facility upon direct transfer from an acute care Hospital
- Emergency local ambulance transport incurred in connection with Injury or Illness resulting in Inpatient hospitalization

Emergency Medical Evacuation

If recommended by your attending Physician, who certifies that Evacuation is necessary to safeguard your life and that Medically Necessary treatment is not available locally, and if approved in advance and coordinated by MNU, the plan will provide the following benefits: Emergency air and/or ground transportation to the nearest Hospital that is qualified to provide the Medically Necessary treatment.

Repatriation of Remains

In the event of a covered Injury or Illness resulting in your death, ImmigrantSecureSM will provide the following benefit: Air and/or ground transportation of bodily remains or ashes to the area of your Principal Residence, and reasonable costs of preparation of your remains necessary for transportation.

Common Carrier Accidental Death & Dismemberment

In the event of your Accidental Death or Dismemberment while traveling on board a commercial common carrier (airplane or cruise line), ImmigrantSecureSM will provide the following benefit, subject to a maximum of \$125,000 per family:

- Accidental Death – \$25,000 to the Beneficiary designated on your Application
- Loss of 2 eyes or 2 or more limbs – \$25,000 to you
- Loss of 1 eye or 1 limb – \$12,500 to you

Exclusions

Pre-existing Conditions

This plan does not provide any coverage for Pre-existing Conditions. A Pre-existing Condition is a condition that meets any of the following descriptions. A condition:

- that would have caused a person to seek medical advice, diagnosis, care or Treatment within the 6 months (or 12 months for persons age 70 and older) prior to your Effective Date
- for which medical advice, diagnosis, care or Treatment, including medication, was sought, recommended or received within the 6 months (or 12 months for persons age 70 and older) prior to your Effective Date
- for which the symptoms that occurred within the 6 months (or 12 months for persons age 70 and older) prior to your Effective Date would have allowed a person trained in medicine to make a diagnosis of the condition producing the symptoms
- which manifested within the 6 months (or 12 months for persons age 70 and older) prior to your Effective Date

Home Country Coverage

ImmigrantSecureSM is designed to cover you during a single trip outside of your Home Country. Coverage will end upon return to your Home Country. Contact your agent or MNU for other plan options providing Home Country coverage and/or allowing visits to your Home Country without terminating coverage.

Other exclusions include:

- Charges related to Pregnancy, childbirth, care of newborns, congenital conditions, birth control, artificial insemination, infertility, impotency or sexual dysfunction, sterilization or reversal thereof
- Charges that are not incurred during the Certificate Period or which exceed Usual, Reasonable and Customary Services that are not Medically Necessary, not administered or ordered by a Physician, or are provided at no cost to you or by your Relative or a person who resides with you
- Venereal disease, and treatment of individuals who are HIV+ or who have AIDS or ARC
- Services related to vision correction, hearing correction, or hair loss
- All cosmetic surgeries, unless reconstructive surgery is directly relating to a covered Illness or Injury
- Speech, acupuncture or sleep therapy and treatment by a chiropractor
- Self-inflicted Injury or Illness
- Dental Treatment, except for Emergency Treatment following a covered Accident
- Charges for travel or accommodations, except as specifically provided by the plan
- Organ and tissue transplants
- Treatment of the temporomandibular joint
- Charges resulting from or occurring during the commission of a violation of law by the Member
- Injury sustained while under the influence of or due wholly or partly to the effects of intoxicating liquor or drugs
- Home nursing care and charges Incurred while confined primarily to receive Custodial, Educational or Rehabilitative Care
- Surgeries, treatments, services or supplies which are Investigational, Experimental or for Research Purposes
- Immunizations and Routine Physical Exams
- Foot care, unless related to a covered accidental Injury
- Diseases of the skin
- Injury sustained while taking part in contact sports, non-recreational athletics, and thrill-seeking activities

This is a partial list of exclusions. Please see the Certificate of Insurance for detailed information about these and other plan benefits, provisions, exclusions and limitations.

Pre-certification

Hospitalizations, Surgeries, Emergency Evacuations, Repatriation of Remains, Computerized Tomography (CAT Scan) and Magnetic Resonance Imaging (MRI) must be Pre-certified. Simply call, or have your Physician call, MNU with the information relative to your claim. You may also Pre-certify by submitting details through Client Zone. Be sure to have your ID number available. If you do not Pre-certify, medical expenses will be reduced by 50% and all other expenses will be forfeited.

Policy Administration

Enrollment Procedures

For quick and easy enrollment, contact your producer or MNU for online application instructions. Online applications are processed in real-time, and you will be able to print your fulfillment immediately. You may also obtain and complete an application form to be returned to MNU by e-mail, fax, or postal mail. Applications submitted by e-mail, fax, or postal mail will be processed within two business days of receipt by MNU.

Stan Patterson
The Patterson Agency, Inc.
1607 Skyview Dr. Branson, MO 65616
Phone: 417-335-6777
Fax: 775-796-2582
Email: info@internationalhealthins.com

Eligibility

To be eligible for ImmigrantSecureSM, you must be traveling outside of your Home Country and be at least 14 days of age. US citizens must be traveling outside of the US in order to be eligible. For individuals coming to the US who are over age 65, coverage must be effective within 30 days of arrival.

Home Country – For US Citizens, Home Country is the United States of America, regardless of the location of the Member's Principal Residence. For non-US Citizens, Home Country is the country where the Member principally resides and receives regular mail. For non-US citizens listed as a Spouse or Child on an Application, Home Country will be the same as that of the Primary Applicant.

Individuals ages 80 and above must select Plan A. Individuals ages 70 to 79 may select Plan A or Plan B. Individuals age 69 and under may select any plan. If an individual reaches age 70 while covered under the plan, the Deductible changes to \$200 as of the date of the 70th birthday. Overall Policy Maximums and other benefit limits, as applicable, reduce in accordance with the Schedule of Benefits on the dates of the 70th and 80th birthdays if those dates occur while an individual is covered under the plan.

Certificate Effective & Termination Dates

Insurance hereunder is effective for a Member on the later of:

- the moment MNU receives Application and correct premium if Application and payment is made online or by fax
- 12:01am* on the date MNU receives Application and correct premium if Application and payment is made by mail
- the moment the Member departs from his or her Home Country
- 12:01am* on the date requested on the Application

Insurance hereunder terminates for a Member on the earlier of:

- 12:01am* on the last day of the period for which premium has been paid
- 12:01am* on the date requested on the Application
- the moment of the Member's arrival upon return to his or her Home Country

*Times expressed above are based on US Eastern Time

Extending / Renewing

After your initial purchase, you may extend your coverage up to a maximum of 12 months from the initial effective date. You may renew your coverage for an additional year as long as you continue to meet the eligibility requirements. Renewal may be completed within the last 30 days of your first Certificate Period. For an ongoing condition, the Deductible must be re-satisfied as of the renewal date. After 2 years of continuous coverage or any break in coverage, a new plan must be purchased. A new Application is required and you must re-satisfy your Deductible, Pre-existing Condition provisions, and all other benefit limits.

Extensions and renewals must be made online with payment by credit card. For additional information on extending or renewing your plan, please visit Client Zone (<https://zone.mnui.com/clientzone/>).

Cancellation

To be eligible for a full refund, the request for cancellation must be received prior to the effective date. Cancellation requests received after the effective date will be subject to the following conditions:

- A \$25 cancellation fee will apply
- Only the unused portion of the plan cost will be refunded
- Only members who have no claims are eligible for premium refund

Assistance Services

All Travel Assistance Services are available to you 24 hours a day, 7 days a week while your plan is in effect:

Pre-Trip Health and Safety Advisories – Contact us for current passport, visa, inoculation and vaccine requirements as well as for up-to-date travel safety advisories.

Livetravel Services – We will make emergency travel and itinerary changes for you including rebooking flights, hotel reservations and ground transportation arrangements.

BagTrak – We are the industry leaders in tracking lost, checked baggage. We will help track your lost, checked baggage and deliver it to you.

Emergency Message Relay – We will relay messages to your family, friends and co-workers, helping you to maintain contact during an emergency.

Emergency Cash Transfers – We will assist you in arranging and obtaining cash transfers.

Travel Assistance Services also include:

- Medical referrals
- Assistance with prescription drug replacement
- Dispatch of a doctor or specialist
- Emergency travel arrangements for family members
- Lost passport or travel documents assistance
- Embassy and consulate referrals
- Legal and accounting referrals
- Bail bond assistance
- Translation and interpretation assistance

ImmigrantSecureSM assistance services are provided by AIG Travel Assist and are not insurance benefits. Any assistance service provided by AIG Travel Assist is not a guarantee of any insurance benefit under the plan.

Customer Service

Whether you have misplaced your ID card or benefit booklet, need assistance with a claim, or have a question about benefits, MNU is ready to respond. Frequently, these and other issues can be addressed with a short visit to Client Zone. Client Zone is an online account management and resource tool that allows you to:

- Change personal information
- Extend and renew coverage
- Obtain details about claim filing, including downloading necessary forms
- Pre-certify for certain medical procedures and hospitalizations
- Replace a lost ID card or reprint your fulfillment
- Locate doctors and hospitals within the PPO Network
- Study destination, weather and travel security information using our Travel Intelligence & Planning System (TIPS)
- Access health and wellness information
- View and download brochures, obtain policy information, or get quotes for other products offered by MNU

You may access Client Zone by logging in at <https://zone.mnui.com/clientzone/>

At times, there is simply no substitute for human intervention. MNU's World Service Center is available 24 hours a day, 7 days a week to answer your questions and may be reached at no cost through our worldwide toll-free numbers. Immediate support is available in several languages and can be provided in many others with the assistance of a translator. If a translator is needed, the MNU service representative will arrange one.

ImmigrantSecureSM Rates

	Plan A		Plan B		Plan C		Plan D	
\$0 Deductible	Monthly	Daily	Monthly	Daily	Monthly	Daily	Monthly	Daily
14 days to 29 years	\$37.00	\$1.20	\$45.00	\$1.50	\$53.00	\$1.80	\$72.00	\$2.45
30 to 49	\$44.00	\$1.45	\$52.00	\$1.70	\$60.00	\$2.00	\$79.00	\$2.60
50 to 59	\$61.00	\$2.00	\$71.00	\$2.35	\$81.00	\$2.70	\$107.00	\$3.55
60 to 69	\$71.00	\$2.30	\$82.00	\$2.70	\$94.00	\$3.10	\$122.00	\$4.00
Dependent Child	\$33.00	\$1.10	\$42.00	\$1.40	\$50.00	\$1.65	\$66.00	\$2.20
\$50 Deductible	Monthly	Daily	Monthly	Daily	Monthly	Daily	Monthly	Daily
14 days to 29 years	\$29.00	\$1.00	\$36.00	\$1.20	\$42.00	\$1.40	\$58.00	\$1.95
30 to 49	\$36.00	\$1.20	\$43.00	\$1.40	\$49.00	\$1.60	\$65.00	\$2.15
50 to 59	\$50.00	\$1.65	\$59.00	\$1.95	\$67.00	\$2.20	\$89.00	\$2.95
60 to 69	\$59.00	\$1.95	\$69.00	\$2.25	\$78.00	\$2.55	\$102.00	\$3.35
Dependent Child	\$27.00	\$0.90	\$34.00	\$1.15	\$41.00	\$1.35	\$54.00	\$1.80
\$100 Deductible	Monthly	Daily	Monthly	Daily	Monthly	Daily	Monthly	Daily
14 days to 29 years	\$26.00	\$0.90	\$32.00	\$1.10	\$39.00	\$1.30	\$53.00	\$1.80
30 to 49	\$33.00	\$1.10	\$39.00	\$1.30	\$46.00	\$1.50	\$60.00	\$2.00
50 to 59	\$46.00	\$1.50	\$56.00	\$1.85	\$66.00	\$2.20	\$86.00	\$2.85
60 to 69	\$55.00	\$1.80	\$66.00	\$2.15	\$77.00	\$2.50	\$99.00	\$3.25
Dependent Child	\$25.00	\$0.85	\$31.00	\$1.05	\$37.00	\$1.20	\$50.00	\$1.65
\$200 Deductible	Monthly	Daily	Monthly	Daily	Monthly	Daily	Monthly	Daily
70 to 74	\$84.00	\$2.80	\$118.00	\$3.90	N/A	N/A	N/A	N/A
75 to 79	\$92.00	\$3.05	\$129.00	\$4.20	N/A	N/A	N/A	N/A
80+	\$175.00	\$5.75	N/A	N/A	N/A	N/A	N/A	N/A

Rates valid through 12/31/08

Rates include Surplus Lines taxes and fees when applicable

MultiNational Underwriters, LLC, a Lloyd's Coverholder, is located at 107 S Pennsylvania St, Ste 500, Indianapolis, IN 46204. Phone: 800-605-2282 / 317-262-2132 / Fax: 317-262-2140 / www.mnui.com / insurance@mnui.com

ImmigrantSecureSM Application for Insurance
MultiNational Underwriters[®]
Lloyd's Coverholder

Personal Details					
Please provide the following details for all individuals to be covered. Missing or illegible information will delay processing.					
Name (First and Last)	Date of Birth (MM/DD/YY)	Citizenship	Home Country	Premium	
				Monthly	Daily
Primary				1M	1D
Spouse				2M	2D
Child 1				3M	3D
Child 2				4M	4D
Complete Mailing Address			Subtotals (add lines 1 through 4 above)	A	
			Trip Duration (# of months / # of days)	B	
E-mail Address		Phone Number		Multiply line A by line B	C
Select a Plan Level			Plan A <input type="checkbox"/> Plan B <input type="checkbox"/> Plan C <input type="checkbox"/> Plan D	Add the monthly and daily amounts from line C	D
Select a Deductible			\$0 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200	OPTIONAL Express Delivery Charge	E
Date of Departure from Home Country			Date of Return to Home Country	Requested Effective Date	Total Amount Due (add lines D and E)
____ / ____ / ____			____ / ____ / ____		
Florida Surplus Lines question			<input type="checkbox"/> Yes		Destination(s)
Are you traveling to Florida to work?			<input type="checkbox"/> No / Not traveling to Florida		

Payment Information		Check/Money Order (Single Up-Front Payment Only) <input type="checkbox"/> MasterCard VISA <input type="checkbox"/> Discover <input type="checkbox"/> American Express			
Credit Card Number	Exp Date	Check or Money Orders should be made payable, in US dollars, to MultiNational Underwriters [®] . If paying by credit card, I authorize MultiNational Underwriters [®] to debit my Discover, VISA, MasterCard or American Express account for the amount specified in the Rate Calculation section. If I have selected a monthly plan, I hereby request and authorize MultiNational Underwriters [®] to debit my Credit Card account for the proper installment amounts on the due dates of the installments. This authorization will remain in effect for the duration of the Coverage Period elected or until revoked by me in writing. Coverage purchased by credit card is subject to validation and acceptance by the credit card company.			
Name on Card	Phone #				
Billing Address					
City	State	Zip	Cardholder Signature		Date

Authorization			
<p>I hereby apply for membership in the Atlas/International Citizen Group Insurance Trust, Hamilton, Bermuda and for the insurance provided to members by Lloyd's. I understand that the insurance applied for is not a general health insurance policy, but is intended for use in the event of a sudden and unexpected event while traveling outside my Home Country. I understand this insurance contains a Pre-existing Condition exclusion, a Pre-notification Penalty and other restrictions and exclusions. I understand that if I am eligible for Extensions and Renewals of this insurance that they may only be transacted online and will not be effective unless such transaction is confirmed in writing by MultiNational Underwriters[®], and I understand that Extensions may be transacted after my Effective Date and Renewals may be transacted only within the thirty (30) days immediately preceding my current coverage expiration date. I understand that the information contained herein is a summary of the Master Policy and that I may obtain a complete copy of the Master Policy upon request to MultiNational Underwriters[®]. I understand that Lloyd's, as underwriter of the plan, is solely liable for the coverage and benefits provided under the insurance. I understand that Lloyd's operates as an approved, non-admitted insurer in all states of the United States except Illinois and Kentucky where they are admitted. As such, claims under this insurance may not be made against any state guaranty fund. I understand and agree that the insurance agent/broker, if any, assisting with this Application is a representative of the Applicant. If signed by a representative of the Applicant, the undersigned warrants his/her capacity to so act. If signed as guardian or proxy of the Applicant, the undersigned warrants his/her capacity to so act. By acceptance of coverage and/or submission of any claim for benefits, the Applicant ratifies the authority of the signer to so act and bind the Applicant.</p>			
Applicant Signature	Date	Spouse Signature	Date

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Producer ID Number: 22324029	Producer Name: Stan Patterson
Company Name & Address: The Patterson Agency, Inc. 1607 Skyview Dr. Branson, MO 65616	Telephone: 417-335-6777
	Fax: 775-796-2582
Signature:	E-Mail Address: info@internationalhealthins.com