

MERIDIAN BASIC AND ENHANCED



Going Your Way



Does International Medical Insurance Make Sense for Me?

If it matters to you to have flexibility and security in where, when and how you receive your health care services, the Meridian Series can offer you peace of mind. This peace comes from the knowledge that you will have the ability to choose access to the best medical care available, either in your country of residence, or anywhere you may elect to go for its delivery in the world. The Meridian Series of plans provides vou with a private medical care alternative that allows you to choose from any provider, no matter where they practice in the world and know that you have the ability to positively impact the quality of your medical services. Whether you are seeking the richest schedule of benefits in the market today with our Meridian Enhanced Plan or need an essential set of affordable, predictable benefits with our Meridian Basic Plan. Azimuth Risk Solutions. LLC has created a plan to make what is important to you important to us.

Who Is Eligible for the Meridian Series?

Clients who qualify medically and are more than 14 days old and under the age of 65 whom either live outside of the United States, or who would not qualify for a US domestic health insurance plan as a result of their citizenship status would be able to apply for the plan and once accepted, would be able to renew indefinitely with no medical questions at their renewal period subject to the terms of the Evidence of Insurance. Those clients who qualify medically and are accepted on the plan after the age of 65 would be able to renew their plan up to their 75th birthday. If you are a US citizen, you must leave the US within 30 days of your effective date of insurance and within 30 days of your renewal date. If you are in the US at that time you will receive notice of your renewal approximately 60 days in advance of your date of renewal.

Who Insures This Plan?

The preeminent name in international insurance is Lloyd's, London. This largest, oldest and most respected insurance market is the insurer on all Azimuth Risk plans. You will have the security of knowing that you are working with an insurer which has paid every valid claim presented to it for more than 320 years. Lloyd's is 'A' rated by AM Best and Standard & Poor's for their superior ability to pay claims.

Who Is Azimuth Risk Solutions?

Headquartered in Indianapolis, Indiana, Azimuth Risk Solutions, LLC (Azimuth) is a service-first organization formed by professionals with nearly 30 years in the international insurance industry to provide simply the best value combination of product offering, administration and support after the sale of international health, travel and life insurance products If it's important to you to do business with an organization that is committed both to service excellence, ethical conduct and philanthropic pursuits, Azimuth is the choice to meet your requirements. Azimuth is a Managing Agency for our insurer, Lloyd's, London and the scheme Administrator for the Meridian Series.

The Meridian Difference

There are different choices available to you in the international medical insurance market; the key is selecting an insurance provider which you can be confident will be available to you at your time of need, which understands the culture of international living and has the security to weather the financial environment in the world as it is today. By choosing the either the Meridian Basic or Meridian Enhanced, you can be certain that you have made the correct selection on all counts. 3

The Meridian Speed Underwriting

The Meridian Series plans involve a review of your application by underwriters to determine your eligibility for coverage and acceptance on the plan. Even though no one likes to wait, rest assured that Meridian underwriting is extraordinary in its speed, accuracy and efficiency. Meridian Basic plans are routinely reviewed and processed within 2 business days and Meridian Enhanced are regularly reviewed and processed within 3 business days, provided we receive all necessary information. Once accepted on the plan, you will receive confirmation of coverage via email if you provide the information, followed by a complete fulfillment kit containing your evidence of insurance, identification card(s), sample claim form, welcome letter and receipt for the transaction. If your application is declined, your premium will be refunded in total

Your full satisfaction is our goal and after receiving your fulfillment you have the opportunity for a 7 day review of the plan. If for any reason you are not completely satisfied you may cancel your plan, via written notice to Azimuth Risk Solutions, LLC and receive a full refund of your paid premium amount. After this 7 day period has elapsed, you may cancel at any time by providing 60 days written notice to Azimuth Risk Solutions, LLC.

Your unearned premium amount will be returned, less a Short Rate Cancellation Fee which is indicated on the Lloyd's, London jacket which contains your Evidence of Insurance.

Meridian Basic

The Meridian Basic provides a premium menu of essential, generous, yet affordable benefits. If great value at a price which will still allow room for the rest of life's expenses is vital to you, the Meridian Basic is the right fit for you.

Meridian Enhanced

The Meridian Enhanced plan offers the premier benefits available in the international medical insurance market today. If it is important to you that only the best medical insurance plan will be sufficient for you, the Meridian Enhanced provides the richest in benefits while still offering you the kind of quality premium value that only Azimuth is able to provide.

Emergency Medical Evacuation

In the event you suffer a life threatening injury or illness, the Meridian Series provides benefits that are prepared to respond in a time of crisis. Emergency medical evacuation provides transportation to the nearest facility that is equipped to properly care for your condition. This does not necessarily mean a return to your home country or any specific country or territory, as the condition may demand treatment in a timely fashion which would not be the case if it was necessary for you to be repatriated. All emergency medical evacuations must be precertified and coordinated by Azimuth Risk Solutions, LLC to be eligible for coverage.

Emergency Reunion

We know it's important not to feel alone at a time of crisis, so the Meridian Series provides coverage to transport an immediate family member or friend to your bedside in the event you are evacuated. The Meridian Series will pay for round trip air or ground travel as well as lodging and meals for up to 15 days so that you will have companionship during your recovery.

Family Friendly Rates

International living can be financially challenging for a family and the Meridian Series helps make insurance affordable, thanks to our First Two Free feature. Families enjoy the benefit of having the first two children under age 10 covered at no extra charge if their parents are insured on the plan!

Optional Dental Rider

Azimuth wants to make you smile and the optional dental rider can help keep that smile looking great. By selecting this optional benefit plan, you can protect yourself from high dental costs with dental benefits that increase over a 3 year time horizon.

Optional Term Life and Accidental Death & Dismemberment (AD&D)Rider

If you reside outside of the US, you may have access to this valuable and easily added benefit. So long as you are accepted on your chosen version of the Meridian Basic or Enhanced plan, you would be able to add up to a total of \$100,000 of term life and AD&D to your plan with no additional medical questions.

This powerful benefit allows you to have additional security for anyone who would suffer financially in the event of your passing.

Preferred Provider Network

Taking advantage of Azimuth's broad selection of quality US preferred providers benefits you by allowing cost advantaged access to US medical care and the significant ease of finding a qualified health care provider virtually anywhere in the US. For providers outside the US, you may access care anywhere of your choosing, or simply contact Azimuth for a suggested referral.

What If I have a Claim?

The claim process is quite simple. In the event that you have a claim for eligible expenses you have already incurred, simply complete our Claim Form, which is included in your plan fulfillment or you may download one at AzimuthRisk.com and return completed to Azimuth with your original receipts and your eligible expenses will be promptly refunded. As with every aspect of Azimuth's operations, if you have any difficulty, simply contact Azimuth and we will gladly help you with completing the process. In the event that you have a large or ongoing claim your precertification through Azimuth will in many cases allow us to arrange for your care and payment directly to your healthcare provider.

Precertification:

In order to receive complete benefits, hospital admissions, trip interruptions, repatriation of mortal remains, emergency reunions, emergency medical evacuations, any eligible inpatient or outpatient procedure as indicated in the Certificate Wording, must be precertified by contacting Azimuth Risk Solutions through the contact information indicated on the member's insurance card prior to receiving service. In the case of emergency hospital admission, Azimuth must be contacted within the first 48 hours of admission or as soon as possible. Precertification is **not a guarantee of coverage**.

The ARS Service Center

The ARS Service Center is a tremendous online resource which allows you to access information about your insurance on a round the clock basis. Whether you need to print a replacement identification card, to find a nearby doctor, check on a claim or much more, you can do so from any computer in the world. Azimuth recognizes that there are times that nothing substitutes for a caring human being. That is why the service first corporate culture is embodied in every phone call and every contact Azimuth makes with our valued clients.

International Client Assistance

If it matters to you to know that someone is always by your side while traveling in a distant land, the Meridian Series can ease your mind while you are away from the familiar surroundings of home. For no extra charge, each Meridian Series Plan includes the following key services to help you when you are in the greatest need:

- 24/7 Live Call Center never worry about getting lost in voicemail while you are many time zones away. A caring, helpful voice on the other end of the phone is always ready to help
- Lost Baggage Tracking if you've ever had to chase down your airline baggage department to find out where your luggage may have gone, you will appreciate our ability to do so on your behalf. Enjoy your travel without having to make multiple phone calls to get updates on your baggage delivery
- Medical Referrals need a doctor or the nearest hospital? One free call gets you the information you need

- Travel Advisories get in the know, before you go; call us to learn areas to avoid, travel delays, weather alerts and more
- Crisis Cash Advance we'll help you get to your money so you can stay on the go
- Much, much, more

While the Meridian Series provides the most thorough and expansive coverage available in the international market today, it is important to recognize that there are some conditions and circumstances where your plan would not provide coverage. Please take note of pre-existing condition criteria and information on what the Meridian Series would not cover:

Meridian Basic:

After coverage has been in effect for 24 continuous months, the Basic plan option provides a \$50,000 lifetime benefit, if you properly disclose any pre-existing condition on the application and it's not excluded or limited by a rider, subject to a maximum of \$10,000 per period of coverage.

Meridian Enhanced:

After coverage has been in effect for 12 continuous months, the Enhanced plan option provides you with coverage that is equal to any other illness or condition as long as you properly disclose any pre-existing condition on the application and it's not excluded or limited by a rider, subject to deductible and co-insurance.

Illness or Surgery within 180 Days:

Illness waiting period – for 180 days from your Effective Date, the following are ineligible for coverage: asthma, allergies, any condition of the breast, any condition of the prostate, tonsillectomy, adenoidectomy, hemorrhoids or hemorrhoidectomy, disorders of the reproductive system, diverticulitis, hysterectomy, hernia, intervertebral disc disease, gall stones or kidney stones.

Note: Coverage and/or benefits for these Illnesses or Surgeries (or for similar or different Illnesses or Surgeries) may be separately or further limited and/or excluded under the Pre-existing Conditions exclusion and definition.

Other Exclusions and Limitations*

- Investigational, experimental or research procedures
- Charges for cosmetic surgery or weight modification
- Treatment for sleep disorders/hair growth/exercise programs
- Contraceptive medication or treatment
- · Drug and alcohol abuse treatment
- Organ transplants not specifically listed
- · Treatment resulting from illegal activities
- · Speech therapy
- · Persons HIV+ at effective date
- Adult routine physical examinations are excluded under the Basic and Enhanced plan for the first 12 months
- · Treatment as a result of terrorism, war or riot
- Charges which are not medically necessary, or are not performed by order of a physician

*This is only a consolidated and summary description of some of the current Azimuth Risk Solutions benefits, conditions, limitations and exclusions. A Specimen Master Policy containing the complete terms, conditions and exclusions will be included in the fulfillment kit. ARS reserves the right to issue the most current Specimen Master Policy for this plan in the event this application and/or brochure has expired, is modified, or is replaced with a newer version. Current Specimen Master Policy is available upon request. 3

THE MERIDIAN SERIES BASIC SCHEDULE OF BENEFITS

| Maximum Limit | \$2,000,000 Maximum Limit | | |
|---|--|---|--|
| Deductibles | \$250, \$500, \$1,000, \$2,500, \$5,000, \$10,000 per Member per Coverage Period | | |
| Family Deductible | Maximum of 2 Deductibles per Family per Coverage Period | | |
| Coverage Area | Area 1- Worldwide- Including U.S. & Canada | Area 2- Worldwide- Excluding US & Canada | |
| Coinsurance-(Claims incurred in US or Canada) | After the Deductible the Plan will pay 80% of the next \$5,000 of Eligible Expenses, then 100% to the Overall Maximum Limit. The Coinsurance will be waived if expenses are incurred within the PPO. | | |
| Coinsurance- (Claims incurred outside US or Canada) | The Plan will pay 100% of Eligible Expenses to the Overall Maximum Limit. | | |
| Benefit Period | 6 months | | |
| Pre-certification Penalty | 50% | | |
| Pre-existing Condition | \$10,000 per Coverage Period (after24 months of continuous coverage). \$50,000 Maximum Limit | | |
| Maternity- Normal Delivery & Complicated Delivery | OPTIONAL RIDER- \$10,000 per Coverage Period (\$50,000 Maximum Limit) | | |
| Newborn Care | Included as part of Maternity benefits for first 31 days of life | | |
| Human Organ/ Tissue Transplant | \$500,000 Maximum Limit, covered Transplants | | |
| Hospital Room and Board (Coverage Area 1) | Average Semi-Private room rate | | |
| Hospital Room and Board (Coverage Area 2) | Average Semi-Private room rate | | |
| Intensive Care Unit (Coverage Area 1) | Usual, Reasonable and Customary (URC) | | |
| Intensive Care Unit (Coverage Area 2) | Usual, Reasonable and Customary (URC) | | |
| Emergency Dental Due to Accident | \$500 per Coverage Period | \$500 per Coverage Period | |
| Local Ambulance | \$1,500 per covered event (not subject to Deductible or Coinsurance) | | |
| Surgery | Usual, Reasonable and Customary (Subject to deductible and co-insurance) | | |
| Prescription Medications | Usual, Reasonable and Customary | | |
| Mental & Nervous Disorders | \$10,000 per Coverage Period for Outpatient treatment only (after 24 months of continuous coverage). | | |

| Mental & Nervous Disorders | \$10,000 per Coverage Period for Outpatient treatment only (after 24 months of continuous coverage). |
|------------------------------|---|
| Wellness (Adult) | \$150 per Males age 30 and over, per Coverage Period (after 12 months continuous coverage). Not subject to Deductible or Coinsurance. |
| Wellness (Child) | \$100 per Member age 18 and under, per Coverage Period (after 12 months continuous coverage). Not subject to Deductible or Coinsurance. |
| All Other Medical Expenses | Usual, Reasonable, and Customary (URC) |
| Emergency Room Illness | Usual, Reasonable and Customary (subject to additional \$250 Deductible if not admitted). |
| Emergency Room Accident | Usual, Reasonable, and Customary (URC) |
| Emergency Medical Evacuation | \$50,000 Maximum Limit, \$25,000 Maximum Limit for ages 65 and older. |
| Return of Mortal Remains | \$25,000 Maximum Limit per Member (not subject to Deductible). |
| Emergency Reunion | \$7,500 Maximum Limit |

With regard to the foregoing Schedule of Benefits/Limits, the references to "continuous coverage" mean continuous unbroken coverage under the Beacon/Axis Series Group Insurance Trust (Anguilla). The applicable benefits described will become first available to the Participating Member only at the end of the continuous Coverage Period so specified.



THE MERIDIAN SERIES ENHANCED SCHEDULE OF BENEFITS

| Maximum Limit | \$5,000,000 Maximum Limit | | |
|---|--|--|--|
| Deductibles | \$250, \$500, \$1,000, \$2,500, \$5,000, \$10,000 per Member per Coverage Period | | |
| Family Deductible | Maximum of 3 Deductibles per Family per Coverage Period | | |
| Coverage Area | Area 1- Worldwide- Including U.S. & Canada | Area 2- Worldwide- Excluding US & Canada | |
| Coinsurance- (Claims incurred in US or Canada) | After the Deductible the Plan will pay 90% of the next \$5,000 of Eligible Expenses, then 100% to the Overall Maximum Limit. The Coinsurance will be waived if expenses are incurred within the PPO. | | |
| Coinsurance- (Claims incurred outside US or Canada) | The Plan will pay 100% of Eligible Expenses to the Overall Maximum Limit. | | |
| Benefit Period | 6 months | | |
| Pre-certification Penalty | 50% | | |
| Pre-existing Condition | Same As Any Other Injury or Illness if fully disclosed on Application and not excluded or limited by a Rider (after 12 months of continuous coverage) | | |
| Maternity- Normal Delivery | Same As Any Other Illness; \$5,000 additional Deductible, \$100,000 Maximum Limit (after 12 months of continuous coverage) | | |
| Maternity- Complicated Delivery | Same As Any Other Illness; \$5,000 additional Deductible, \$100,000 Maximum Limit (after 12 months of continuous coverage) | | |
| Newborn Care | Included as part of Maternity benefits for first 60 days of life | | |
| Human Organ/ Tissue Transplant | \$2,000,000 Maximum Limit | | |
| Hospital Room and Board (Coverage Area 1) | Usual, Reasonable and Customary (URC) | | |
| Hospital Room and Board (Coverage Area 2) | Usual, Reasonable and Customary (URC) | | |
| Intensive Care Unit (Coverage Area 1) | Usual, Reasonable and Customary (URC) | | |
| Intensive Care Unit (Coverage Area 2) | Usual, Reasonable and Customary (URC) | | |

| Emergency Room | Usual, Reasonable and Customary for covered Illness if hospitalized as Inpatient and for covered Injuries | |
|-------------------------------------|--|--|
| Local Ambulance | Usual, Reasonable and Customary (URC) | |
| Surgery | Usual, Reasonable and Customary (Subject to deductible and co-insurance) | |
| Prescription Medications | Usual, Reasonable and Customary | |
| Vision Care | \$100 maximum limit per Coverage period for exams and materials after 12 months of continuous coverage. | |
| Dental Coverage (Optional Rider) | \$750 Maximum per Calendar Year. \$50 Individual Deductible. Schedule of Benefit payout: Class A=90%; Class B=\$70%; Class C=\$50%; Ortho= no coverage (6 month waiting period). Including Emergency Dental, subject to the overall Maximum Limit, and (after 6 month waiting period). | |
| Mental & Nervous Disorders | \$50 per visit, per day for outpatient care. \$15,000 per Coverage Period (after 12 months continuous coverage). \$30,000 Maximum Limit. | |
| Wellness (Adult) | \$250 per Males age 25 and over/Woman age 30 and over, per Coverage Period (after 12 months continuous coverage). Not subject to Deductible or Coinsurance. | |
| Wellness (Child) | \$150 per Member age 18 and under, per Coverage Period (after 10 months continuous coverage). Not subject to Deductible or Coinsurance. | |
| Complementary Medicine | \$175 Acupuncture; \$175 Aroma Therapy; \$175 Herbal Therapy; \$175 Massage Therapy; \$175 Vitamin Therapy (after 12 months of continuous coverage); per Coverage period. | |
| | Maximum Limit of one service per Coverage Period. | |
| High School Sports Injury | \$7,000 Maximum Limit (subject to an additional \$250 deductible) for medical benefits only | |
| All Other Medical Expenses | Usual, Reasonable, and Customary (URC) | |
| Emergency Room Illness | Usual, Reasonable and Customary (subject to additional \$250 Deductible if not admitted) | |
| Emergency Room Accident | Usual, Reasonable, and Customary (URC) | |
| Emergency Medical Evacuation | \$110,000 Maximum Limit, \$55,000 Maximum Limit for ages 60 and older. | |
| Return of Mortal Remains | \$30,000 Maximum Limit per Member (not subject to Deductible) | |
| Emergency Reunion | \$10,000 Maximum Limit | |
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