



THE MERIDIAN SERIES
ESSENTIAL AND ENHANCED



Coverage Anywhere.
Value Everywhere.

www.azimuthrisk.com

 **Azimuth**
Risk Solutions™

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 access the best medical care available, either in your country of residence, or anywhere you may elect to go in the world. The Meridian Series of plans provides you 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 Essential Plan, Azimuth Risk Solutions 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 who 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 continue indefinitely with no medical questions 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 continue on their plan up to their 75th birthday. If you are a US citizen, you must depart the US within 30 days of your Effective Date for each Coverage Period of insurance and within 30 days of your continuation of coverage date.

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 Solutions 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 325 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 (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 Coverholder for our insurer, certain Underwriters at 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 either Meridian Essential or Meridian Enhanced, you can be certain that you have made the correct selection on all counts.

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 Essential applications are routinely reviewed and processed within 48 business hours and Meridian Enhanced are regularly reviewed and processed within 72 business hours, 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), Azimuth 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 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. Your unearned premium amount will be returned, less a Short Rate Cancellation Fee which is included in the fulfillment kit.

Meridian Essential

The Meridian Essential plan 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 Essential plan 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 plan provides the richest in benefits while still offering you the kind of quality premium value that only Azimuth is able to provide.



| | | |
|--|--|---|
| Maximum Limit | \$5,000,000 Maximum Limit | |
| Deductibles | \$250; \$500; \$1,000; \$2,500; \$5,000; \$10,000 per Member per Coverage Period per Participating Member | |
| Family Deductible | Maximum of 2 Deductibles per Family per Coverage Period | |
| Coverage Area | Area 1: Worldwide - Including US & Canada | Area 2: Worldwide - Excluding US & Canada |
| Coinsurance - Claims incurred in the US or Canada | After the Deductible the Plan will pay 80% of the next \$5,000 of Eligible Expenses, then 100% to the Maximum Limit. The Coinsurance will be waived if expenses are incurred within the PPO network | |
| Coinsurance - Claims incurred outside the US or Canada | After the Deductible the plan pays 100% of Eligible Expenses to the Maximum Limit | |
| Pre-Notification Penalty | 50% of Eligible Expenses | |
| Pre-existing Condition | \$10,000 Sub-Limit per Coverage Period, \$50,000 Maximum Sub-Limit (After 728 days of continuous coverage**) | |
| Human Organ/Tissue Transplant | \$500,000 Maximum Sub-Limit for Covered Transplants | |
| Hospital Room and Board - Coverage Area 1 & 2 | Average Semi-Private room rate | |
| Intensive Care Unit - Coverage Area 1 & 2 | Up to \$4,500 Maximum Sub-Limit per day, 30 day Maximum per incident | |
| Emergency Dental Due to Accident | \$500 Sub-Limit per Coverage Period | |
| Local Ambulance | \$1,500 Sub-Limit per Coverage Period when covered Illness or Injury results in Hospitalization | |
| Surgery | Usual, Reasonable and Customary | |
| Prescription Medications | Reimbursement Only. Usual, Reasonable and Customary charges. Subject to 20% Co-pay in the US | |
| Mental & Nervous Disorders | \$40 per day, \$10,000 Sub-Limit per Coverage Period for Outpatient treatment only, \$25,000 Maximum Sub-Limit. Prescriptions are subject to benefit waiting period (After 728 days of Continuous Coverage**) | |
| Wellness - Adult | \$250 Sub-Limit per Coverage Period for Participating Members age 25 and over. Not subject to Deductible or Coinsurance (After 180 days continuous coverage**) | |
| Wellness - Dependant Child | \$175 Sub-Limit per Coverage Period for Participating Members age 18 and under. Not subject to Deductible or Coinsurance (After 90 days of continuous coverage**) | |
| All Other Medical Expenses | Usual, Reasonable, and Customary | |
| Emergency Room | Usual, Reasonable, and Customary. Subject to \$350 Co-pay | |
| Urgent Care Facility | Usual, Reasonable, and Customary. Not Subject to Deductible | |
| Emergency Medical Evacuation | \$50,000 Maximum Sub-Limit. \$25,000 Maximum Sub-Limit for Participating Members age 65 and older | |
| Return of Mortal Remains | Reimbursement up to \$25,000 for the return of a Participating Members mortal remains to his/her home country. Not subject to Deductible or Coinsurance | |
| Emergency Reunion | Reimbursement up to \$7,500 for travel expense related to the Emergency Reunion of a relative or friend resulting from a Emergency Medical Evacuation of a Participating Member | |
| Extreme Sports | Optional Rider - \$50,000 Sub-Limit per Coverage Period | |
| Dental Coverage | Optional Rider - \$750 Maximum Limit per Participating Member per Calendar Year. \$50 Deductible per Participating Member. Schedule of Benefit payout: Class A=90%; Class B=70%; Class C=50%; Ortho=No coverage (After 90 days of continuous coverage**) | |

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

** 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 Participating Member per Coverage Period | |
| Family Deductible | Maximum of 2 Deductibles per Family per Coverage Period | |
| Coverage Area | Area 1: Worldwide - Including US & Canada | Area 2: Worldwide - Excluding US & Canada |
| Coinsurance - Claims incurred in the US or Canada | After the Deductible the Plan will pay 90% of the next \$5,000 of Eligible Expenses, then 100% to the Maximum Limit. The Coinsurance will be waived if expenses are incurred within the PPO network | |
| Coinsurance - Claims incurred outside the US and Canada | After the Deductible the plan pays 100% of Eligible Expenses to the Maximum Limit | |
| Pre-Notification Penalty | 50% Eligible Expenses | |
| Pre-existing Condition | Same as any other Injury or Illness if fully disclosed on the Application and not excluded or limited by a medical rider (After 364 days of continuous coverage**) | |
| Maternity - Normal/Complicated Delivery | \$2,500 Co-pay per Pregnancy, \$50,000 Maximum Sub-Limit (After 364 days of Continuous Coverage) | |
| Newborn Wellness Care | \$500 Maximum Sub-limit for the first 60 days of life, per Eligible Pregnancy | |
| Human Organ/Tissue Transplant | \$2,000,000 Maximum Sub-Limit for Covered Transplants | |
| Hospital Room and Board - Coverage Area 1 & 2 | Usual, Reasonable and Customary | |
| Intensive Care Unit - Coverage Area 1 & 2 | Usual, Reasonable and Customary | |
| Local Ambulance | Usual, Reasonable and Customary when covered Illness or Injury results in Hospitalization | |
| Surgery | Usual, Reasonable and Customary | |
| Prescription Drugs | Reimbursement Only. Usual, Reasonable and Customary. Subject to 20% Co-pay in the US | |
| Vision Care | \$250 Sub-Limit per Coverage Period for exams and materials (After 364 days of continuous coverage**) | |
| Dental Coverage - Optional Rider | Optional Rider - \$750 Maximum Limit per Participating Member per Calendar Year. \$50 Deductible per Participating Member. Schedule of Benefit payout: Class A=90%; Class B=70%; Class C=50%; Ortho=No coverage (After 90 days of continuous coverage**) | |
| Mental & Nervous Disorders | \$50 per day for Outpatient care, \$15,000 Sub-Limit per Coverage Period, \$30,000 Maximum Sub-Limit. Prescriptions are subject to benefit waiting period (After 364 days of continuous coverage**) | |
| Wellness - Adult | \$350 Sub-Limit per Coverage Period, Participating Members age 25 and over. Not subject to Deductible or Coinsurance. (After 90 days of continuous coverage**) | |
| Wellness - Dependet Child | \$200 Sub-Limit per Coverage Period. Participating Members age 18 and under. Not subject to Deductible or Coinsurance (After 60 days of continuous coverage**) | |
| Complimentary Medicine | \$175 Maximum Sub-Limit per Coverage Period, One service per Coverage Period for Acupuncture, Aroma Therapy, Herbal Therapy, Massage Therapy or Vitamin Therapy (After 364 days of continuous coverage**) | |
| High School Sports Injury | \$10,000 Maximum Sub-Limit. Subject to additional \$250 Deductible | |
| All Other Medical Expenses | Usual, Reasonable and Customary | |
| Emergency Room | Usual, Reasonable, and Customary. Subject to a \$350 Co-pay | |
| Urgent Care Facility | Usual, Reasonable, and Customary. Not Subject to Deductible | |
| Emergency Medical Evacuation | \$110,000 Maximum Sub-Limit, \$55,000 Maximum Sub-Limit for ages 60 and older | |
| Return of Mortal Remains | Reimbursement up to \$30,000 for the return of a Participating Members mortal remains to his/her home country. Not subject to Deductible or Coinsurance | |
| Emergency Reunion | Reimbursement up to \$10,000 for travel expense related to the Emergency Reunion of a relative or friend resulting from a Emergency Medical Evacuation of a Participating Member | |

**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.

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

Key Benefits

Emergency Medical Evacuation

In the event you suffer a life threatening injury or illness, the Meridian Series providers 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, any specific country or territory as the condition may demand treatment in the most timely manner possible, which would not be the case if it was necessary for you to be repatriated. To be eligible for coverage all emergency medical evacuations must be pre-notified and arranged by Azimuth Risk Solutions.

Emergency Reunion

We know it is 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 you bedside in the event you are medical 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 that 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 both parents are insured on the same plan!

Optional Dental Rider

Azimuth wants to make you smile and the optional dental rider can help keep that smile looking great. By selecting the optional benefit plan, you can protect yourself from high dental costs.

Optional Extreme Sports Rider

If your lifestyle often takes you on the path less traveled Azimuth Risk Solutions has an optional rider designed just for you. The optional extreme sports rider provides coverage for extreme sports and hazardous activities from four different elements: Earth, Water, Wind and Snow. The optional extreme sports rider provides coverage up to \$50,000 for eligible sports and activities.

What if I have a Claim?

The claim process is quite simple. In the event that you have a claim for eligible expense you have already incurred, simply complete the Azimuth Claim Form, which is included in your plan fulfillment or you may download one at www.azimuthorisk.com. Submit the completed Azimuth Claim Form, original itemized bill and receipts of payment to our office, in which all eligible expenses will be promptly reimbursed. With every aspect of Azimuth's operations, if you have questions or difficulty with the claim submission process, simply contact our office and we will be happy to assist. In the event that you have a large or ongoing claim your pre-notification through Azimuth will in many cases allow us to arrange direct billing and payment to your healthcare provider.

Pre-notification

In order to receive complete benefits, hospital admissions, trip interruptions, repatriation of mortal remains, emergency medical evacuations, any Inpatient or Outpatient Surgery or procedure indicated in the Evidence of Insurance, must be pre-notified by contacting Azimuth Risk Solutions prior to receiving services. In the case of emergency hospital admission, Azimuth must be contacted within the first 48 hours of admission or as soon as reasonably possible. Pre-notification is not a guarantee of benefits.

Preferred Provider Network

Taking advantage of Azimuth's Preferred Provider Network (PPO), provides the benefit of an extensive network of licensed physicians, hospitals and facilities to meet your healthcare needs throughout the US, as well as reducing your out-of-pocket expenses. When traveling outside of the US, you may access care anywhere of your choosing.



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 Emergency 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



Much, much, more



Pre-existing Coverage - Meridian Essential:

After 728 days of continuous coverage, the Essential plan provides \$10,000 Sub-Limit per coverage period, \$50,000 Maximum Sub-Limit for treatment of a pre-existing condition if properly disclosed at the time of application and has not been excluded or limited by a medical rider.

Pre-existing Coverage - Meridian Enhanced:

After 364 days of continuous coverage the Enhanced plan provides you with coverage that is equal to any other Illness or Condition if properly disclosed at the time of application and is not excluded or limited by a medical rider.

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 pro-state, 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

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:

- 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
- Occupational or Speech Therapy
- Persons HIV+ at effective date
- Adult and child wellness/routine care are excluded until the waiting period for each plan is satisfied
- Treatment as a result of terrorism, war or riot
- Charges which are not medically necessary, or are not performed by order of a physician

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MERIDIAN ESSENTIAL RATES

| THE MERIDIAN SERIES - ESSENTIAL | | | | | | | | | | | | |
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| WORLDWIDE COVERAGE EXCLUDING US AND CANADA (New Business Rates valid through 12/31/2020) Rates Do Not include surplus lines taxes (if applicable) | | | | | | | | | | | | |
| Deductible | US \$250 | | US \$500 | | US \$1,000 | | US \$2,500 | | US \$5,000 | | US \$10,000 | |
| AGE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE |
| 14 days to 9 years | First 2 Free; thereafter \$577.00 | First 2 Free; thereafter \$577.00 | First 2 Free; thereafter \$506.00 | First 2 Free; thereafter \$506.00 | First 2 Free; thereafter \$393.00 | First 2 Free; thereafter \$393.00 | First 2 Free; thereafter \$343.00 | First 2 Free; thereafter \$343.00 | First 2 Free; thereafter \$315.00 | First 2 Free; thereafter \$315.00 | First 2 Free; thereafter \$279.00 | First 2 Free; thereafter \$279.00 |
| 10-18 | \$593.00 | \$593.00 | \$528.00 | \$528.00 | \$437.00 | \$437.00 | \$407.00 | \$407.00 | \$378.00 | \$378.00 | \$334.00 | \$334.00 |
| 19-24 | \$945.00 | \$1,337.00 | \$819.00 | \$1,313.00 | \$637.00 | \$1,010.00 | \$557.00 | \$879.00 | \$388.00 | \$708.00 | \$357.00 | \$611.00 |
| 25-29 | \$999.00 | \$1,524.00 | \$872.00 | \$1,482.00 | \$676.00 | \$1,138.00 | \$591.00 | \$991.00 | \$463.00 | \$821.00 | \$410.00 | \$650.00 |
| 30-34 | \$1,117.00 | \$1,685.00 | \$963.00 | \$1,589.00 | \$744.00 | \$1,230.00 | \$653.00 | \$1,072.00 | \$510.00 | \$734.00 | \$455.00 | \$637.00 |
| 35-39 | \$1,253.00 | \$1,990.00 | \$1,016.00 | \$1,767.00 | \$787.00 | \$1,371.00 | \$689.00 | \$1,186.00 | \$540.00 | \$988.00 | \$480.00 | \$771.00 |
| 40-44 | \$1,581.00 | \$2,185.00 | \$1,283.00 | \$1,903.00 | \$853.00 | \$1,488.00 | \$748.00 | \$1,304.00 | \$715.00 | \$1,016.00 | \$636.00 | \$898.00 |
| 45-49 | \$1,762.00 | \$2,125.00 | \$1,444.00 | \$1,808.00 | \$1,122.00 | \$1,399.00 | \$977.00 | \$1,220.00 | \$795.00 | \$963.00 | \$709.00 | \$855.00 |
| 50-54 | \$2,242.00 | \$2,464.00 | \$1,829.00 | \$2,124.00 | \$1,469.00 | \$1,646.00 | \$1,285.00 | \$1,468.00 | \$1,089.00 | \$1,216.00 | \$970.00 | \$1,082.00 |
| 55-59 | \$2,711.00 | \$3,389.00 | \$2,353.00 | \$2,943.00 | \$1,810.00 | \$1,823.00 | \$1,588.00 | \$1,731.00 | \$1,337.00 | \$1,349.00 | \$1,194.00 | \$1,200.00 |
| 60-64 | \$4,536.00 | \$4,205.00 | \$4,070.00 | \$3,809.00 | \$3,433.00 | \$3,030.00 | \$3,110.00 | \$2,790.00 | \$2,597.00 | \$2,307.00 | \$2,307.00 | \$2,054.00 |
| 65-69 | \$9,288.00 | \$8,093.00 | \$8,931.00 | \$7,847.00 | \$8,354.00 | \$7,051.00 | \$6,420.00 | \$5,238.00 | \$5,615.00 | \$5,027.00 | \$4,998.00 | \$4,475.00 |
| 70-74 | Please Contact Azimuth Risk Solutions For Rates | | | | | | | | | | | |
| OPTIONAL RIDERS: EXTREME SPORTS RIDER= \$285.00 DENTAL RIDER (ADULT)= \$490.00 (CHILD)= \$325.00 ALL OPTIONAL RIDERS ARE IN ADDITON TO THE BASE PREMIUM COST | | | | | | | | | | | | |

| THE MERIDIAN SERIES - ESSENTIAL | | | | | | | | | | | | |
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| WORLDWIDE COVERAGE INCLUDING US AND CANADA (New Business Rates valid through 12/31/2020) Rates Do Not include surplus lines taxes (if applicable) | | | | | | | | | | | | |
| Deductible | US \$250 | | US \$500 | | US \$1,000 | | US \$2,500 | | US \$5,000 | | US \$10,000 | |
| AGE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE |
| 14 days to 9 years | First 2 Free; thereafter \$768.00 | First 2 Free; thereafter \$768.00 | First 2 Free; thereafter \$671.00 | First 2 Free; thereafter \$671.00 | First 2 Free; thereafter \$524.00 | First 2 Free; thereafter \$524.00 | First 2 Free; thereafter \$459.00 | First 2 Free; thereafter \$459.00 | First 2 Free; thereafter \$421.00 | First 2 Free; thereafter \$421.00 | First 2 Free; thereafter \$375.00 | First 2 Free; thereafter \$375.00 |
| 10-18 | \$789.00 | \$789.00 | \$702.00 | \$702.00 | \$579.00 | \$579.00 | \$542.00 | \$542.00 | \$508.00 | \$508.00 | \$448.00 | \$448.00 |
| 19-24 | \$1,261.00 | \$1,783.00 | \$1,091.00 | \$1,753.00 | \$853.00 | \$1,344.00 | \$741.00 | \$1,171.00 | \$580.00 | \$942.00 | \$516.00 | \$811.00 |
| 25-29 | \$1,329.00 | \$2,029.00 | \$1,162.00 | \$1,973.00 | \$905.00 | \$1,521.00 | \$789.00 | \$1,319.00 | \$617.00 | \$1,098.00 | \$551.00 | \$860.00 |
| 30-34 | \$1,488.00 | \$2,245.00 | \$1,281.00 | \$2,115.00 | \$994.00 | \$1,639.00 | \$872.00 | \$1,431.00 | \$683.00 | \$1,147.00 | \$605.00 | \$977.00 |
| 35-39 | \$1,668.00 | \$2,652.00 | \$1,352.00 | \$2,353.00 | \$1,047.00 | \$1,829.00 | \$918.00 | \$1,580.00 | \$716.00 | \$1,314.00 | \$638.00 | \$1,028.00 |
| 40-44 | \$2,111.00 | \$2,910.00 | \$1,715.00 | \$2,533.00 | \$1,135.00 | \$1,986.00 | \$996.00 | \$1,737.00 | \$952.00 | \$1,347.00 | \$847.00 | \$1,197.00 |
| 45-49 | \$2,449.00 | \$2,951.00 | \$2,008.00 | \$2,510.00 | \$1,555.00 | \$1,941.00 | \$1,355.00 | \$1,692.00 | \$1,107.00 | \$1,335.00 | \$984.00 | \$1,190.00 |
| 50-54 | \$2,989.00 | \$3,283.00 | \$2,534.00 | \$2,832.00 | \$1,960.00 | \$2,196.00 | \$1,711.00 | \$1,954.00 | \$1,452.00 | \$1,619.00 | \$1,292.00 | \$1,442.00 |
| 55-59 | \$3,613.00 | \$4,281.00 | \$3,141.00 | \$3,940.00 | \$2,432.00 | \$3,313.00 | \$2,118.00 | \$2,886.00 | \$1,784.00 | \$2,432.00 | \$1,587.00 | \$2,164.00 |
| 60-64 | \$5,955.00 | \$5,605.00 | \$5,429.00 | \$5,088.00 | \$4,576.00 | \$5,079.00 | \$4,143.00 | \$3,718.00 | \$3,461.00 | \$3,076.00 | \$3,083.00 | \$2,741.00 |
| 65-69 | \$12,439.00 | \$10,792.00 | \$11,904.00 | \$10,323.00 | \$11,136.00 | \$9,400.00 | \$8,561.00 | \$6,988.00 | \$7,486.00 | \$6,703.00 | \$6,661.00 | \$5,967.00 |
| 70-74 | Please Contact Azimuth Risk Solutions For Rates | | | | | | | | | | | |
| OPTIONAL RIDERS: EXTREME SPORTS RIDER= \$285.00 DENTAL RIDER (ADULT)= \$490.00 (CHILD)= \$325.00 ALL OPTIONAL RIDERS ARE IN ADDITON TO THE BASE PREMIUM COST | | | | | | | | | | | | |

MERIDIAN ENHANCED RATES

| THE MERIDIAN SERIES - ENHANCED | | | | | | | | | | | | |
|---|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------|-----------------------------------|
| WORLDWIDE COVERAGE EXCLUDING US AND CANADA (New Business Rates valid through 12/31/2020) Rates Do Not include surplus lines taxes (if applicable) | | | | | | | | | | | | |
| Deductible | US \$250 | | US \$500 | | US \$1,000 | | US \$2,500 | | US \$5,000 | | US \$10,000 | |
| AGE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE |
| 14 days to 9 years | First 2 Free; thereafter \$1,419.00 | First 2 Free; thereafter \$1,419.00 | First 2 Free; thereafter \$1,287.00 | First 2 Free; thereafter \$1,287.00 | First 2 Free; thereafter \$1,112.00 | First 2 Free; thereafter \$1,112.00 | First 2 Free; thereafter \$1,065.00 | First 2 Free; thereafter \$1,065.00 | First 2 Free; thereafter \$1,015.00 | First 2 Free; thereafter \$1,015.00 | First 2 Free; thereafter \$803.00 | First 2 Free; thereafter \$803.00 |
| 10-18 | \$1,489.00 | \$1,489.00 | \$1,328.00 | \$1,328.00 | \$1,161.00 | \$1,161.00 | \$1,104.00 | \$1,104.00 | \$1,048.00 | \$1,048.00 | \$1,003.00 | \$1,003.00 |
| 19-24 | \$1,792.00 | \$4,266.00 | \$1,597.00 | \$4,090.00 | \$1,337.00 | \$3,088.00 | \$1,227.00 | \$2,802.00 | \$1,077.00 | \$2,465.00 | \$937.00 | \$2,006.00 |
| 25-29 | \$1,838.00 | \$4,691.00 | \$1,658.00 | \$4,467.00 | \$1,377.00 | \$3,373.00 | \$1,261.00 | \$3,038.00 | \$1,109.00 | \$2,723.00 | \$960.00 | \$2,059.00 |
| 30-34 | \$1,989.00 | \$5,184.00 | \$1,797.00 | \$4,895.00 | \$1,488.00 | \$3,795.00 | \$1,366.00 | \$3,425.00 | \$1,194.00 | \$2,980.00 | \$1,028.00 | \$2,377.00 |
| 35-39 | \$2,047.00 | \$5,678.00 | \$1,864.00 | \$5,216.00 | \$1,537.00 | \$4,145.00 | \$1,409.00 | \$3,711.00 | \$1,227.00 | \$3,257.00 | \$1,051.00 | \$2,428.00 |
| 40-44 | \$2,519.00 | \$6,165.00 | \$2,275.00 | \$5,575.00 | \$1,856.00 | \$4,454.00 | \$1,693.00 | \$4,026.00 | \$1,457.00 | \$3,320.00 | \$1,239.00 | \$2,737.00 |
| 45-49 | \$2,786.00 | \$3,280.00 | \$2,532.00 | \$2,998.00 | \$2,053.00 | \$2,423.00 | \$1,870.00 | \$2,193.00 | \$1,603.00 | \$1,785.00 | \$1,347.00 | \$1,492.00 |
| 50-54 | \$3,434.00 | \$3,672.00 | \$3,134.00 | \$3,380.00 | \$2,534.00 | \$2,728.00 | \$2,347.00 | \$2,516.00 | \$2,000.00 | \$2,138.00 | \$1,660.00 | \$1,772.00 |
| 55-59 | \$4,235.00 | \$4,130.00 | \$3,918.00 | \$3,819.00 | \$3,152.00 | \$3,076.00 | \$2,829.00 | \$2,763.00 | \$2,452.00 | \$2,400.00 | \$2,008.00 | \$1,960.00 |
| 60-64 | \$8,988.00 | \$8,636.00 | \$8,364.00 | \$7,884.00 | \$7,108.00 | \$6,634.00 | \$6,549.00 | \$6,107.00 | \$5,547.00 | \$4,983.00 | \$4,674.00 | \$4,235.00 |
| 65-69 | \$17,854.00 | \$15,652.00 | \$17,227.00 | \$15,027.00 | \$15,976.00 | \$13,771.00 | \$12,571.00 | \$11,422.00 | \$10,994.00 | \$9,962.00 | \$9,177.00 | \$8,331.00 |
| 70-74 | Please Contact Azimuth Risk Solutions For Rates | | | | | | | | | | | |
| OPTIONAL RIDERS: EXTREME SPORTS RIDER= \$285.00 DENTAL RIDER (ADULT)= \$490.00 (CHILD)= \$325.00 ALL OPTIONAL RIDERS ARE IN ADDITON TO THE BASE PREMIUM COST | | | | | | | | | | | | |

| THE MERIDIAN SERIES - ENHANCED | | | | | | | | | | | | |
|---|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| WORLDWIDE COVERAGE INCLUDING US AND CANADA (New Business Rates valid through 12/31/2020) Rates Do Not include surplus lines taxes (if applicable) | | | | | | | | | | | | |
| Deductible | US \$250 | | US \$500 | | US \$1,000 | | US \$2,500 | | US \$5,000 | | US \$10,000 | |
| AGE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE |
| 14 days to 9 years | First 2 Free; thereafter \$1,696.00 | First 2 Free; thereafter \$1,696.00 | First 2 Free; thereafter \$1,524.00 | First 2 Free; thereafter \$1,524.00 | First 2 Free; thereafter \$1,296.00 | First 2 Free; thereafter \$1,296.00 | First 2 Free; thereafter \$1,229.00 | First 2 Free; thereafter \$1,229.00 | First 2 Free; thereafter \$1,162.00 | First 2 Free; thereafter \$1,162.00 | First 2 Free; thereafter \$1,108.00 | First 2 Free; thereafter \$1,108.00 |
| 10-18 | \$1,797.00 | \$1,797.00 | \$1,575.00 | \$1,575.00 | \$1,360.00 | \$1,360.00 | \$1,283.00 | \$1,283.00 | \$1,215.00 | \$1,215.00 | \$1,155.00 | \$1,155.00 |
| 19-24 | \$2,252.00 | \$5,491.00 | \$1,993.00 | \$5,254.00 | \$1,643.00 | \$3,920.00 | \$1,496.00 | \$3,541.00 | \$1,303.00 | \$3,091.00 | \$1,112.00 | \$2,475.00 |
| 25-29 | \$2,315.00 | \$6,063.00 | \$2,074.00 | \$5,756.00 | \$1,701.00 | \$4,298.00 | \$1,544.00 | \$3,849.00 | \$1,343.00 | \$3,435.00 | \$1,141.00 | \$2,542.00 |
| 30-34 | \$2,516.00 | \$6,712.00 | \$2,257.00 | \$6,329.00 | \$1,692.00 | \$4,859.00 | \$1,685.00 | \$4,364.00 | \$1,456.00 | \$3,775.00 | \$1,233.00 | \$2,971.00 |
| 35-39 | \$2,555.00 | \$7,371.00 | \$2,352.00 | \$6,756.00 | \$1,908.00 | \$5,331.00 | \$1,739.00 | \$4,745.00 | \$1,496.00 | \$4,139.00 | \$1,264.00 | \$3,039.00 |
| 40-44 | \$3,224.00 | \$8,023.00 | \$2,898.00 | \$7,234.00 | \$2,337.00 | \$5,742.00 | \$2,123.00 | \$5,169.00 | \$1,807.00 | \$4,231.00 | \$1,517.00 | \$3,446.00 |
| 45-49 | \$3,580.00 | \$4,235.00 | \$3,240.00 | \$3,577.00 | \$2,603.00 | \$3,094.00 | \$2,353.00 | \$2,786.00 | \$1,998.00 | \$2,244.00 | \$1,666.00 | \$1,849.00 |
| 50-54 | \$4,109.00 | \$4,752.00 | \$4,036.00 | \$4,361.00 | \$3,233.00 | \$3,495.00 | \$2,987.00 | \$3,214.00 | \$2,523.00 | \$2,706.00 | \$2,071.00 | \$2,220.00 |
| 55-59 | \$5,504.00 | \$5,363.00 | \$5,080.00 | \$4,949.00 | \$4,058.00 | \$3,958.00 | \$3,630.00 | \$3,541.00 | \$3,126.00 | \$3,050.00 | \$2,534.00 | \$2,473.00 |
| 60-64 | \$11,764.00 | \$11,126.00 | \$10,930.00 | \$10,292.00 | \$9,258.00 | \$8,621.00 | \$8,507.00 | \$7,921.00 | \$7,172.00 | \$6,425.00 | \$6,007.00 | \$5,420.00 |
| 65-69 | \$23,595.00 | \$20,649.00 | \$22,744.00 | \$19,814.00 | \$21,080.00 | \$18,139.00 | \$16,538.00 | \$15,008.00 | \$14,436.00 | \$13,060.00 | \$12,012.00 | \$10,888.00 |
| 70-74 | Please Contact Azimuth Risk Solutions For Rates | | | | | | | | | | | |
| OPTIONAL RIDERS: EXTREME SPORTS RIDER= \$285.00 DENTAL RIDER (ADULT)= \$490.00 (CHILD)= \$325.00 ALL OPTIONAL RIDERS ARE IN ADDITON TO THE BASE PREMIUM COST | | | | | | | | | | | | |