

Requested Effective Date: 04/25/2012

| Plan | Basic Rates | | Enhanced Rates | |
|--------------------------|-----------------------|--------------------|-----------------------|----------------------|
| Annual Deductible | Excluding US & Canada | World Wide | Excluding US & Canada | World Wide |
| \$ 250.00 | \$ 1,156.00 | \$ 1,541.00 | \$ 3,419.00 | \$ 4,372.00 |
| \$ 500.00 | \$ 1,075.00 | \$ 1,431.00 | \$ 3,208.00 | • \$ 4,093.00 |
| \$ 1,000.00 | \$ 833.00 | \$ 1,109.00 | \$ 2,531.00 | \$ 3,191.00 |
| \$ 2,500.00 | \$ 726.00 | \$ 969.00 | \$ 2,308.00 | \$ 2,891.00 |
| \$ 5,000.00 | \$ 475.00 | \$ 798.00 | \$ 2,043.00 | \$ 2,539.00 |
| \$ 10,000.00 | \$ 515.00 | \$ 686.00 | \$ 1,694.00 | \$ 2,073.00 |

Dental Rider : OYes ONO (Adults \$425.00 and Child(ren) \$285.00)

Sports Rider : ○Yes •No (\$ 250.00)

Maternity Rider : ○Yes ⊙No (Basic Only \$2200.00)

Please select Premium option here

•Annual(1.00) \$4,093.00 \(\circ\)Semi(0.55) \$2,251.15 \(\circ\)Quarterly(0.28) \$1,146.04 \(\circ\)Monthly (0.10) \$409.30

Please read and review all of the benefits, rates, and pre-existing condition exclusions carefully before purchasing coverage. Marketing Brochures and Evidence of Insurance containing complete terms of coverage are available upon request. Please contact Azimuth or your independent insurance agent/broker for additional details.

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