

# GeoBlue Xplorer Health Plans

Expatriate Health Insurance for Individuals and Families



Offered through the  
Global Citizens Association,  
Washington, D.C.





## Global Innovator

GeoBlue is an innovator and leader in helping world travelers and expatriates stay safe and gain easy access to quality healthcare all around the world.



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## What is GeoBlue Xplorer®?

International health insurance that covers you inside and outside the U.S.

The GeoBlue Xplorer health plan is designed to support the international lifestyles of those who travel to or from the United States for extended periods of business, leisure and study. If you leave home for six months or more, your health and financial security are at serious risk because of significant gaps in most available insurance coverage and services. This risk is only heightened by limited knowledge of health and safety hazards around the world, including medical treatment from unfamiliar providers.

GeoBlue Xplorer is the ultimate international health plan because it combines comprehensive worldwide benefits with a new generation of medical assistance services, which include an impressive array of online and mobile tools to help you identify, access and pay for quality healthcare all around the world.

GeoBlue Xplorer plans provide access to care inside and outside the U.S. that fit your health and travel needs. GeoBlue allows members to travel to other countries for high quality care, including covered elective treatments.







GeoBlue's Global Health and Safety Services — Because Insurance Isn't Enough.

## Meet GeoBlue, an experience well beyond traditional health insurance

GeoBlue provides unsurpassed service and the convenience of mobile technology to access the best medical care no matter the town, country or time zone.

### Easy Access to an Elite International Provider Community

GeoBlue has a network of doctors from almost every specialty in over 190 countries.

We seek professionals certified by the American or Royal Board of Medical Specialties who speak English, and we factor in recommendations by over 169 Physician Advisors from all over the world. Then we assemble in-depth profiles so our members can choose with confidence, and we put formal contracts in place to ensure patient access. Once they've seen you, GeoBlue doctors bill us directly so you don't have to file a claim.

### Strength of the Blue Brands in the U.S.

Certain GeoBlue plans allow members to access the Blue Cross and Blue Shield network within the U.S.

More than 95 percent of physicians and more than 96 percent of hospitals across the U.S. are a part of the BlueCard Network.

### Personal Safety Intelligence

GeoBlue maintains unsurpassed resources designed to promote personal safety by giving members convenient access to vital news, health and safety analysis and medical translation tools.

- Global Health and Safety news alerts published daily and delivered by email or smartphone.
- City and country level profiles on crime, terrorism and natural disasters.
- Brandname equivalents for more than 400 common over-the-counter and prescription drugs in 44 of the most frequently visited countries.
- Translation of hundreds of medical terms and phrases into the 14 most widely spoken languages.

### Around-the-Clock Assistance Call Center

GeoBlue maintains a 24/7, toll-free call center to assist GeoBlue members with everything from routine requests to medical emergencies. The GeoBlue staff has years of experience with international medical assistance and has close working relationships with the best doctors around the globe.

### Emergency Evacuation and Centers of Excellence

GeoBlue coordinates emergency services with a worldwide network of contracted Physician Advisors as well as air ambulance operators selected for their safety records. Members in need of life-saving medical intervention are treated in Centers of Excellence in the U.S. and around the world whenever possible.

## Personalized Member Services

### Informed Choice<sup>SM</sup>

When GeoBlue Xplorer members experience an unanticipated medical problem, they can request a second opinion and referral through the Informed Choice service. A GeoBlue Regional Physician Advisor is available to discuss the member's diagnosis and treatment plan directly with the attending physician.

### Personalized Recruitment

If GeoBlue Xplorer members need a physician or specialist in an area not currently covered by the GeoBlue network, GeoBlue will make every effort to recruit and contract with an appropriate, qualified doctor.

### Personal Solutions

GeoBlue Xplorer members enjoy a full range of Personal Solutions. Your online and mobile tools allow you to check medical symptoms, understand your health risks and access personalized prevention and wellness recommendations.

### Global TeleMD<sup>TM</sup>

In addition to the worldwide network of healthcare professionals available through the GeoBlue health plan, we've teamed up with Advance Medical to bring members Global TeleMD, a new telemedicine smartphone app that provides unlimited, 24/7/365 access to doctor consultations by telephone or video, at no additional cost. Doctors are available within and outside the U.S. Prescriptions may also be provided, as appropriate (subject to local regulations).

### Direct Pay

GeoBlue members can avoid paying out of pocket for care by using Direct Pay. Through this service participating providers outside the U.S. bill GeoBlue directly for covered medical treatment.





# Why Choose the GeoBlue Xplorer Plan?

## A Recognized Leader

GeoBlue is a recognized leader in international health insurance and medical assistance services, serving hundreds of thousands of world travelers annually.

## Highest Standards of Service

GeoBlue meets the highest expectations of quality. For medical care outside the U.S., members are free to see any provider and their benefits will remain the same.

## World-Class Healthcare

GeoBlue has the expertise and capability to meet any medical need efficiently and effectively. This can be a matter of support for a minor issue or help for a major issue no matter where you are. Members have the ability to access care locally, regionally and internationally.

## Top Advantages over Competing Plans

- Provides an unlimited annual and lifetime maximum.
- No waiting periods associated with any preventive services.
- The pre-existing condition exclusion can be waived with proof of prior creditable insurance.
- Covers injuries or illnesses that are a result of a terrorist act.
- Deductible is waived for office visits and a small copay applies.
- Plan options available for comprehensive worldwide coverage, worldwide coverage with basic benefits while traveling in the U.S. or no U.S. coverage – providing 40-50% in savings
- Access to our elite providers can lead to better diagnosis, treatment and medical outcomes.
- Our providers bill GeoBlue directly, which eliminates paperwork hassles.
- The strength of the Blue brand. GeoBlue is an independent licensee of the Blue Cross and Blue Shield Association.

### GeoBlue Xplorer Premier Options

Plan	Deductible			Coinsurance Maximum
	Outside U.S.	U.S. In-Network	U.S. Out-of-Network	
Elite	\$0	\$0	\$1,000	\$2,000
1000	\$500	\$1,000	\$2,000	\$4,000
2000	\$1,000	\$2,000	\$4,000	\$8,000
5000	\$2,500	\$5,000	\$10,000	\$10,000

### GeoBlue Xplorer Essential Options

Plan	Deductible		
	Outside U.S.	U.S. In-Network	U.S. Out-of-Network
Elite	\$0	n/a	n/a
1000	\$1,000	n/a	n/a
2500	\$2,500	n/a	n/a
5000	\$5,000	n/a	n/a

## How the Plan Works

GeoBlue Xplorer Premier and GeoBlue Xplorer Essential plans offer comprehensive benefits and a range of deductible options that allow members to select the right amount of insurance coverage for their budget and lifestyle. For detailed benefit schedules please see inserts.

For families, the deductible is a multiple of 2.5.

After 364 days of continuous coverage, GeoBlue Xplorer members may re-enroll in a plan that matches their existing benefits.

### Optional Benefit Upgrades

- **Basic U.S. Benefits Inside the U.S. – available for the Xplorer Essential Plan only:** Coverage is limited to emergency medical care, illness and accidental injuries or prescriptions needs when you are temporarily visiting the United States and to a combined maximum of 3 trips of 21 days for each trip per calendar year.
- **Enhanced Prescription Benefits Inside the U.S. – available on all Xplorer plans:** The Enhanced Prescription Medication Benefit provides a more accessible and efficient method for acquiring your prescriptions while traveling, as well as offers a higher limit than the basic benefit.
- **Dental/Vision Rider Benefits – available on Xplorer Elite and Xplorer 1000 plans only:** GeoBlue Dental and Vision benefits are designed to offer you coverage for common dental and vision care needs and to help you budget for dental services at all levels, preventive, basic and major.

More information is available on the Xplorer Benefits Schedule found on [www.geobluetravelinsurance.com](http://www.geobluetravelinsurance.com).





# How to Apply

Applications are available online or may be initiated by telephone or email. See back cover for details.

A personal check, money order or credit card number must accompany the application and must be sufficient to pay for one month of standard premium. GeoBlue will hold the form of payment until an underwriting decision is made. If your application is accepted, the payment will be applied to your account. Quotes obtained online or by telephone are advisory only. Actual premium is determined by the medical underwriting process.

GeoBlue will review your medical history as provided on the application and may request an Attending Physician's Statement. GeoBlue publishes standard premium rates for non-smokers. Smokers and other applicants with certain medical histories may be offered a plan at a higher rate. Not all applicants will be accepted. Your effective date of insurance will be on the 1st or 15th day of the month following underwriting approval.

## Member Welcome Kit

When your application is accepted, GeoBlue will mail you and any family members covered under the plan a Welcome Kit with identification cards, a certificate of insurance and instructions on how to register online. Procedures for filing a claim or requesting direct payment of participating providers will also be included.

## About the Global Citizens Association

The Global Citizens Association is a national organization dedicated to promoting the interests of international travelers. Established more than 24 years ago, the GCA, is a not for profit affinity association located in Washington D.C., established to enhance global learning and lifestyles through safe and healthy world travel; to provide its members with useful international travel services and to make group international travel and health insurance coverages available to its members.

Visit the GCA website (<https://www.gassociation.org/>) to learn about the association's programs. This insurance is available only to GCA members and by enrolling, you will become a member. Association enrollment fees are included in the amounts charged for the insurance. You are not obligated to purchase any services or products from the GCA. The GCA is not affiliated with any insurance company.

## Eligibility

GeoBlue Xplorer is designed for extended living abroad. You can choose to enroll in a new plan when your existing plan expires. When you do, there are no medical questions and premium rates do not change based on your individual claims history. Your new rate will be the same as all persons covered in your rating class.

## How Coverage Ends

Your coverage ends on the earlier of:

1. The last day of the month after the date the Insured Person is no longer eligible;
2. The end of the last period for which premium has been paid;
3. The date the Policy terminates;
4. The date of fraud or misrepresentation of a material fact by the Insured Person, except as indicated in the Time Limit on Certain Defenses provision.

## Extension of Benefits

If an Insured Person is Totally Disabled on the date of termination of the Policy, coverage will be extended until the earlier of:

1. The date payment of the maximum benefit occurs;
2. The date the Insured person ceases to be Totally Disabled; or
3. The end of 90 days following the date of termination.

### Pre-existing conditions

The GeoBlue Xplorer plan does not cover services for treatment of a medical condition for which medical advice, diagnosis, care, or treatment was recommended or received during 180 days immediately preceding the member's eligibility date.

### Prior Health Insurance coverage

The 180-day pre-existing conditions period can be reduced or eliminated if you have been covered by a creditable group or individual health insurance plan.

For benefits, exclusions, eligibility and other important information, please see inserts.



## Contact Us:

Mail **GeoBlue**

Attn: Individual Underwriting  
933 First Avenue  
King of Prussia, PA 19406

Visit [www.geobluetravelinsurance.com](http://www.geobluetravelinsurance.com)

Email [customerservice@geo-blue.com](mailto:customerservice@geo-blue.com)

Call 1.855.481.6647  
1.610.254.5850 outside the U.S.

Fax 610.672.9635





# GeoBlue Xplorer Premier Benefit Schedule

GeoBlue Xplorer Premier has three tiers of coinsurance: 100% outside the U.S.; 80% in-network inside the U.S.; 60% out-of-network inside the U.S. All plans have an unlimited lifetime maximum and a \$250,000 maximum benefit for emergency medical evacuation. The Out-of-Pocket Maximum is calculated by adding the deductible and coinsurance maximum together. Please refer to the chart on page 3 of the Brochure.

Benefits	Outside U.S.	U.S. (In-Network)	U.S. (Outside Network)
<b>Preventive and Office Visits – Insurer Waives Deductible</b>			
Physician Office Visits (Adult)	All except a \$10 copay per visit	All except a \$30 copay per visit	60% to Out-of-Pocket Maximum then 100%
Physician Office Visits (Children 0-18)	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Unlimited Well Baby Visits	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Child Immunizations, Lab and X-rays	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Women (19 and Older) Routine Pap Smears, Annual Mammogram	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
PSA for Men	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Immunizations as recommended by the Centers for Disease Control (CDC)	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
One Routine Physical Per Year	100%	80% to Coinsurance Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Travel Vaccinations	100% up to \$500 per Calendar Year	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
<b>Professional Services – Insurer Pays After Deductible is Met</b>			
Surgery, Anesthesia, Radiation Therapy, In-hospital Doctor Visits, Diagnostic X-ray and Lab Work	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
<b>Inpatient Hospital Services - Insurer Pays After Deductible is Met</b>			
Surgery, X-rays, In-hospital Doctor Visits, Organ/Tissue Transplant	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Inpatient Medical Emergency	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Inpatient Drugs	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
<b>Ambulatory and Therapeutic Services – Insurer Pays After Deductible is Met</b>			
Ambulatory Surgical Center	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Ambulance Service	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Accidental Dental	\$1,000 per year, \$200 per tooth	\$1,000 per year, \$200 per tooth	\$1,000 per year, \$200 per tooth
Acupuncture and Chiropractic Services	100% up to \$2,000	80% up to \$2,000	60% up to \$2,000
Durable Medical Equipment	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Infusion Therapy	100%	80% to Out-of-Pocket Maximum then 100%	60% to Out-of-Pocket Maximum then 100%
Physical/Occupational Therapy*	\$50 max each visit, 12 visits per year	\$50 max each visit, 12 visits per year	\$50 max each visit, 12 visits per year
Inpatient Mental Health	100% up to 60 days	80% up to 60 days	60% up to 60 days
Outpatient Mental Health	75% up to 40 visits/60% thereafter	75% up to 40 visits/60% thereafter	75% up to 40 visits/60% thereafter
Inpatient Substance Abuse	100% up to 60 days detox	80% up to 60 days detox	60% up to 60 days detox
Outpatient Substance Abuse	75% up to 40 visits/60% thereafter	75% up to 40 visits/60% thereafter	75% up to 40 visits/60% thereafter
<b>Prescription Drug Benefit Options – Insurer Waives Deductible</b>			
Basic Prescription Drug Benefit Subject to \$1000 Maximum per Insured Person per Coverage Period (Pay and claim benefit only)	100% of actual charges	100% of actual charges	100% of actual charges
Optional rider, subject to \$25,000 Maximum Benefit per Insured Person per Coverage Period. Max 90 day supply	100% of actual charges	Generics: 100% after \$10 copay Brand name: 100% after \$10 copay Injectables: 70%	Generics: 100% after \$10 copay Brand name: 100% after \$10 copay Injectables: 70%
<b>Global Travel Benefits – Insurer Waives Deductible</b>			
Emergency Medical Transportation	Up to \$250,000	n/a	n/a
Repatriation of Mortal Remains	Up to \$25,000	n/a	n/a
Accidental Death and Dismemberment	\$50,000	\$50,000	\$50,000
<b>Other Benefits</b>		<b>Limits</b>	
Home Health Care		100% Covered Expenses, as many as 30 visits per year	
Skilled Nursing Facilities		100% with a maximum Covered Expense of \$250 per day, as many as 50 days per year	
Hospice		100% with a maximum Covered Expense of \$5,000 per lifetime	

See other side for GeoBlue Xplorer Essential Benefit Schedule. This is intended to be a sample benefit schedule. Changes may occur to benefits, rates and terms annually.

\*Deductible is waived for this benefit.

- GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association. GeoBlue is the administrator of coverage provided under insurance policies issued by 4 Ever Life International Limited, Bermuda, an independent licensee of the Blue Cross Blue Shield Association.



# GeoBlue Xplorer Essential Benefit Schedule

GeoBlue Xplorer Essential covers most services outside the U.S. at 100%. All plans have an unlimited lifetime maximum and a \$250,000 maximum benefit for emergency medical evacuation.

Benefits	Outside U.S. Only
<b>Preventive and Office Visits – Insurer Waives Deductible</b>	
Physician Office Visits (Adult)	All except a \$10 copay per visit
Physician Office Visits (Children 0-18)	100%
Unlimited Well Baby Visits	100%
Child Immunizations, Lab and X-rays	100%
Women (19 and Older) Routine Pap Smears, Annual Mammogram	100%
PSA for Men	100%
Immunizations as recommended by the Centers for Disease Control (CDC)	100%
One Routine Physical Per Year	100%
Travel Vaccinations	100% up to \$500
<b>Professional Services – Insurer Pays After Deductible is Met</b>	
Surgery, Anesthesia, Radiation Therapy, In-hospital Doctor Visits, Diagnostic X-ray and Lab Work.	100%
<b>Inpatient Hospital Services – Insurer Pays After Deductible is Met</b>	
Surgery, X-rays, In-hospital Doctor Visits, Organ/Tissue Transplant	100%
Inpatient Medical Emergency	100%
Inpatient Drugs	100%
<b>Ambulatory and Therapeutic Services – Insurer Pays After Deductible is Met</b>	
Ambulatory Surgical Center	100%
Ambulance Service	100%
Accidental Dental	\$1,000 per year, \$200 per tooth
Acupuncture and Chiropractic Services	100% up to \$2,000
Durable Medical Equipment	100%
Infusion Therapy	100%
Physical/Occupational Therapy*	\$50 max each visit, 12 visits per year
Inpatient Mental Health	100% up to 60 days
Outpatient Mental Health	75% up to 40 visits/60% thereafter
Inpatient Substance Abuse	100% up to 60 days detox
Outpatient Substance Abuse	75% up to 40 visits/60% thereafter
<b>Prescription Drug Benefit Options – Insurer Waives Deductible</b>	
Basic Prescription Drug Benefit	100% of actual charges up to \$1000
Optional Enhanced Prescription Drug Rider	100% of actual charges up to \$25,000**
<b>Global Travel Benefits – Insurer Waives Deductible</b>	
Emergency Medical Transportation	Up to \$250,000
Repatriation of Mortal Remains	Up to \$25,000
Accidental Death and Dismemberment	\$50,000
<b>Other Benefits</b>	
Home Health Care	100% Covered Expenses, as many as 30 visits per year
Skilled Nursing Facilities	100% with a maximum Covered Expense of \$250 per day, as many as 50 days per year
Hospice	100% with a maximum Covered Expense of \$5,000 per lifetime
<b>Optional Basic U.S. Benefits - Deductible Applies***</b>	
Basic travel accident and sickness coverage inside the U.S. for short trips to the U.S. Covers incidental illness and injury. Not designed to cover preventive, elective care or extended stays in the U.S.	100%, 80%, or 60% (depending upon services received) of actual charges up to \$1,000,000 / \$500 maximum for pre-existing medical conditions

See other side for GeoBlue Xplorer Premier Benefit Schedule. This is intended to be a sample benefit schedule. Changes may occur to benefits, rates and terms annually.

\*Deductible is waived for this benefit.

\*\*Reflects maximum outside of the U.S.

\*\*\*Separate definitions, terms and exclusions apply to this rider. See full plan description online for details.



# GeoBlue Xplorer Frequently Asked Questions

## 1. Who is eligible to buy an Xplorer® plan?

All U.S. citizens living abroad who are 74 or younger at the time of application are eligible to apply for coverage or; All legal residents of the U.S. (citizens and foreign nationals) who are age 74 or younger at the time of application are eligible if they live in the U.S. or; An employee of a U.S. company, whereby the company is domiciled in the U.S. and the company pays the insurance premium.

## 2. How do I qualify for maternity benefits?

After 364 days of continuous coverage, Xplorer members may apply for a new plan that covers maternity costs in the same way as all other medical conditions.

## 3. Do all eligible family members have to apply for Xplorer?

Yes. The Xplorer plan is available to individuals and their dependents. All eligible family members must apply for coverage.

## 4. Will my policy automatically renew? At what rate?

You can enroll in an Xplorer plan up to age 84. The policy does not automatically renew upon your request. You will be notified of your new plan rate at least 30 days prior to your policy expiration date. You must confirm your new policy rate in writing or by accepting the rate when logged in to our secure website. Plan rates are based on age at time of enrollment and are impacted by medical inflation. You will not be asked any medical questions and your personal health history will not determine your new rate. Xplorer rates are standard rates for all members re-enrolling.

## 5. When does my coverage end?

We may terminate your coverage if:

- You no longer meet the eligibility requirements
- You fail to pay your premium
- We discover that you committed fraud or misrepresented a material fact to us, except as indicated in the time limit of certain defenses provision
- We terminate the plan in your geographic service area

## 6. Who is the insurer?

GeoBlue Xplorer is underwritten by 4 Ever Life International Limited (4ELI). 4ELI is an independent licensee of the Blue Cross and Blue Shield Association and a wholly owned subsidiary of BCS Financial Corporation. BCS is owned by a consortium of Blue Cross and Blue Shield plans and the Blue Cross Blue Shield Association. 4 Ever Life International Limited is an A.M. Best “A-” rated (Excellent) carrier.

## 7. Does my plan deductible apply to all services?

No. Your deductible is waived for office visits. You simply pay a small copay at time of service with the contracted provider. For non-contracted providers, you pay the provider directly and submit a claim for reimbursement.

*continued...*



**8. Will my pre-existing condition be covered under an Xplorer plan?**

If you were previously covered by a U.S. health plan that issues you a Certificate of Creditable Coverage, GeoBlue will credit you for this prior coverage. The number of months of coverage shown on the Certificate will reduce or eliminate the six-month pre-existing condition waiting period. If you have six or more months of creditable coverage, your waiting period will be eliminated. If you have less than six months creditable coverage, your waiting period will be reduced by the number of months you had creditable coverage. For example, if you have two months of creditable coverage, your waiting period will be reduced from six months to four months.

**9. Am I guaranteed to be issued Xplorer coverage if I apply?**

No, Xplorer is not a guaranteed issue plan. Each application is medically underwritten. Your application may be 1) accepted, 2) accepted with a rate increase due to your health status, or 3) denied.

**10. Is the quote I receive binding?**

No. The quote you receive may not apply if 1) you provided us with an inaccurate zip code, 2) you misstated a material fact on your application, or 3) we increase the rate due to your health status.

**11. When determining a rate while overseas, what zip code should I use?**

Policies for U.S. citizens residing overseas are issued through the Global Citizens Association office in Washington, D.C. The zip code that applies is 20036.

**12. What is the Global Citizens Association?**

The Global Citizens Association (GCA) is a non-profit association located in Washington, D.C. serving the needs of the globally mobile with the goal of helping its members successfully pursue international living experiences through safe and healthy world travel that increase cross-cultural understanding.

Founded in 1994 to serve international students, the GCA has grown to encompass world travelers and expatriates in all corners of the globe. The Association has sponsored GeoBlue and affiliated insurance programs for travelers for more than 25 years and is organized as a not-for-profit corporation under the laws of the District of Columbia. More information can be found here: <http://www.gcassociation.org>.

**13. Does this plan meet the Affordable Care Acts requirement for Minimum Essential Coverage?**

This plan does not provide Minimum Essential Coverage and therefore does not meet the requirements of the Affordable Care Act (ACA). Coverage by the insurer can be 1) accepted, 2) accepted with a rate increase, or 3) denied based on the health history of the applicant(s). A waiting period for pre-existing conditions applies unless you have 6 months of prior creditable coverage. There is no tax penalty for purchasing this policy if you are outside the U.S. for 330 days or more in a calendar year.

**14. What about accessing participating providers?**

GeoBlue's Global Health and Safety services help members identify, access and pay for quality healthcare all over the world, including a contracted community of elite providers in 180 countries. Members can access these carefully selected providers and arrange for the bills to be sent directly to GeoBlue. Please note that in the U.S. a member can simply show his/her ID card at time of service and participating providers will only bill the member for any applicable deductible or copayment. Members have access to the Blue Cross and Blue Shield Network. Whether overseas or in the U.S., members can choose to use any doctor or hospital. Members are never restricted to a network. Please see the benefit schedules to see how coinsurance may apply.

**15. Where can I read the fine print?**

To see plan definitions, limitations or to review a sample certificate, visit: [geobluetravelinsurance.com/products/longterm/xplorer-certs.cfm](http://geobluetravelinsurance.com/products/longterm/xplorer-certs.cfm)



## Xplorer Premier Excluded Services

The Plan does not provide benefits for:

1. Expenses incurred prior to the beginning of the current Period of Coverage or after the end of the current Period of Coverage except as described in the Extension of Benefits
2. Hospitalization, services and supplies that are not Medically Necessary.
3. Services or supplies that are not specifically mentioned in this Certificate
4. Services or supplies for any illness or injury arising out of or in the course of employment for which benefits are available under any Workers' Compensation Law or other similar laws whether or not you make a claim for such compensation or receive such benefits.
5. Services or supplies that are furnished to you by the local, state or federal government and for any services or supplies to the extent payment or benefits are provided or available from the local, state or federal government whether or not that payment or benefits are received.
6. Conditions caused by or contributed by: (a) An act of war; (b) The inadvertent release of nuclear energy when government funds are available for treatment of Illness or Injury arising from such release of nuclear energy; (c) A Covered Person participating in the military service of any country; (d) A Covered Person participating in an insurrection, rebellion, or riot; (e) Services received for any condition caused by a Covered Person's commission of, or attempt to commit a felony or to which a contributing cause was the Covered Person being engaged in an illegal occupation.
7. Services or supplies that do not meet accepted standards of medical and/or dental practice.
8. Investigational Services and Supplies and all related services and supplies.
9. Routine physical examinations, unless otherwise specified in this Certificate.
10. Services or supplies received during an Inpatient stay when the stay is primarily related to behavioral, social maladjustment, lack of discipline or other antisocial actions that are not specifically the result of Mental Illness.
11. Cosmetic Surgery and related services and supplies, whether or not for psychological purposes, except for the correction of congenital deformities or for conditions resulting from accidental injuries, scars, tumors or diseases that occur after your Coverage Date.
12. Services or supplies for which you are not required to make payment or would have no legal obligation to pay if you did not have this or similar coverage.
13. Charges for failure to keep a scheduled visit or charges for completion of a claim form.
14. Durable medical equipment not specifically listed as Covered Services in the Covered Services section of this Plan. Excluded durable medical equipment includes, but is not limited to: orthopedic shoes (except when joined to braces) or shoe inserts, including orthotics; air purifiers, air conditioners, humidifiers; exercise equipment, treadmills; spas; elevators; supplies for comfort, hygiene or beautification; disposable sheaths and supplies; correction appliances or support appliances and supplies such as stockings
15. Special braces, splints, specialized equipment, appliances, ambulatory apparatus, battery implants, except as specifically mentioned in this Certificate.
16. Blood derivatives that are not classified as drugs in the official formularies.
17. Eyeglasses, contact lenses or cataract lenses and the examination for prescribing or fitting of glasses or contact lenses or for determining the refractive state of the eye, except as specifically mentioned in this Certificate.
18. Treatment to change the refraction of one or both eyes (laser eye correction), including refractive keratectomy (RK) and photorefractive keratectomy (PRK).
19. Hearing aids, including but not limited to semi-implantable hearing devices, audiant bone conductors and Bone Anchored Hearing Aids (BA-HAs), except as covered under this Plan as shown in the Schedule of Benefits section. A hearing aid is any device that amplifies sound.
20. Treatment of flat foot conditions and the prescription of supportive devices for such conditions and the treatment of subluxations of the foot.
21. Routine foot care, except for persons diagnosed with diabetes, including the cutting or removal of corns or calluses; the trimming of nails, routine hygienic care and any service rendered in the absence of localized Illness, Injury or symptoms involving the feet.
22. Immunizations, unless otherwise specified in this Certificate.
23. Therapy or treatment intended primarily to improve or maintain general physical condition or for the purpose of enhancing job, school, athletic or recreational performance, including but not limited to routine, long term, or maintenance care which is provided after the resolution of the acute medical problem and when significant therapeutic improvement is not expected.



24. Non-medical counseling or ancillary services, including but not limited to Custodial Care services, education, training, vocational rehabilitation, behavioral training, gym or swim therapy, legal or financial counseling, biofeedback, neuro-feedback, hypnosis, sleep therapy, employment counseling, back to school, return to work services, work hardening programs, driving safety, and services, training, educational therapy or other non-medical ancillary services for learning disabilities, developmental delays or intellectual disabilities.
25. Diagnostic Service as part of routine physical examinations or check-ups, premarital examinations, determination of the refractive errors of the eyes, auditory problems, surveys, case-finding, research studies, screening, or similar procedures and studies, or tests which are Investigational unless otherwise specified in this Certificate.
26. Procurement or use of prosthetic devices, special appliances and surgical implants which are for cosmetic purposes, the comfort and convenience of the patient, or unrelated to the treatment of a disease or injury.
27. Services and supplies rendered or provided for human organ or tissue transplants other than those specifically named in this Certificate.
28. Investigational or experimental organ transplantation including animal to human organ transplants.
29. Consultations performed by you, your spouse, parents or children.
30. Medical and Hospital care and costs for the infant child of a Dependent, unless this infant child is otherwise eligible under this Plan.
31. Charges for the services of a standby Physician.
32. Medical and surgical services, initial and repeat, intended for the treatment or control of Obesity, except for treatment of clinically severe (Morbid) Obesity as shown in Covered Expenses, including: medical and surgical services to alter appearance or physical changes that are the result of any surgery performed for the management of Obesity or clinically severe (Morbid) Obesity; and weight loss programs or treatments, whether prescribed or recommended by a Physician or under medical supervision.
33. Treatment for hair loss.
34. Growth hormone treatment for children with familial short stature (short stature based upon heredity and not caused by a diagnosed medical condition).
35. Dental treatment, dental surgery, dental prostheses and orthodontic treatment unless otherwise specified in this Certificate.
36. Dental Implants: Dental materials implanted into or on bone or soft tissue or any associated procedure as part of the implantation or removal of dental implants.
37. Medical aids unless otherwise specified in this Certificate.
38. Services and treatment related to elective abortions.
39. Infertility, Assisted Reproduction And Sterilization Reversal
  - a. Treatment of infertility, including procedures, supplies and drugs;
  - b. Any assisted reproduction techniques, regardless of reason or origin of condition, including but not limited to, artificial insemination, in-vitro fertilization, and gamete intra-fallopian transplant (GIFT) and any direct or indirect complications thereof.

Please Note: This exclusion does not apply to the diagnosis of infertility or the surgical correction or a condition causing infertility. This would be treated the same as any other medical condition.
40. Expenses incurred for, or related to gender reassignment surgery.
41. Any services or supplies for the treatment of male or female sexual dysfunction such as, but not limited to, treatment of erectile dysfunction (including penile implants), anorgasmia, and premature ejaculation.
42. Non-prescription drugs.
43. Nutritional counseling or food supplements, except for treatment of Phenylketonuria (PKU) and other inherited metabolic diseases and diabetes.
44. Telephone, e-mail, and Internet consultations unless specifically approved by the Administrator due to limited resources while located in a country outside of the United States.
45. Whenever coverage provided by this Certificate would be in violation of any U.S. economic or trade sanctions, such coverage shall be null and void.