

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
Preventive and Office Visits – Insurer Waives Deductible	
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%
One Routine Physical Per Year	100%
Professional Services – Insurer Pays After Deductible is Met	
Surgery, Anesthesia, Radiation Therapy, In-hospital Doctor Visits, Diagnostic X-ray and Lab Work.	100%
Inpatient Hospital Services – Insurer Pays After Deductible is Met	
Surgery, X-rays, In-hospital Doctor Visits, Organ/Tissue Transplant	100%
Inpatient Medical Emergency	100%
Inpatient Drugs	100%
Ambulatory and Therapeutic Services – Insurer Pays After Deductible is Met	
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
Prescription Drug Benefit Options – Insurer Waives Deductible	
Basic Prescription Drug Benefit (Pay and claim benefit only)	100% of actual charges up to \$1000
Optional Enhanced Prescription Drug Rider	100% of actual charges up to \$25,000**
Global Travel Benefits – Insurer Waives Deductible	
Emergency Medical Transportation	Up to \$250,000
Repatriation of Mortal Remains	Up to \$25,000
Accidental Death and Dismemberment	\$50,000
Other Benefits	
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
Optional Basic U.S. Benefits - Deductible Applies***	
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.

*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.