

ABC Insurance Company

Policy Number: POL12345678

Policy Holder: John Doe

Coverage Period: Jan 1, 2024 to Dec 31, 2024

Premium: \$1200 per year

Coverage Areas:

- Hospitalization: Up to \$50,000
- Dental: Up to \$2,000
- Vision: Up to \$500
- Emergency Services: Up to \$10,000

Exclusions:

- Cosmetic procedures
- Pre-existing conditions for 12 months
- Elective surgeries

Deductibles:

- \$500 per year

Copayments / Coinsurance:

- 20% copay on specialist visits
- 10% coinsurance on hospital bills

Out-of-Pocket Maximum:

- \$5,000 annually

Special Conditions:

- Includes maternity rider
- Covers chiropractic care up to \$300 annually