Expatriate Insurance

Proposed Group Insurance Medical Plan

Tanisha Systems, Inc. Effective Date: 12/01/2019

Plan Name	Choice Plus Expatriate Insurance Plan 1968A MOD				
Medical Expenses					
Eligibility Provision	Active full-time Expatriate employees of working a minimum of 30 hours per week.				
Dependent	Spouse; domestic partr	ner; children under the a	ge of 26.		
Lifetime Maximum	Unlimited				
Plan Highlights	Outside the U.S.	U.S. In-Network	U.S. Out of Network		
Deductible (Single/Family)	\$250 / \$750	\$3,000 / \$6,000	\$5,000 / \$10,000		
Out-of-Pocket Maximum (Includes Deductible. Combined International & U.S. In-Network)	\$500 / \$1,500	\$5,000 / \$10,000	\$10,000 / \$20,000		
Coinsurance (covered expenses after deductible)	90%	100%	20%		
Pharmacy - Mail Order Pharmacy coverage is included in the United States.	90%	\$10 / \$25 / \$60 (2.5x MO)	\$10 / \$25 / \$60		
Preventive Care					
Physician Office Services: Includes: routine physical examinations, well baby and well child care, immunizations and hearing screenings.	100% not subject to deductible	100% not subject to deductible	20% after deductible		
Lab, X-ray or other preventive tests: Includes: Screening mammography, screening colonoscopy or sigmoidoscopy, cervical cancer screening, prostate cancer screening and bone mineral density tests.	100% not subject to deductible	100% not subject to deductible	20% after deductible		
Frequently Accessed Services					
Primary Physician Office Visit	100% not subject to deductible	100% after a \$30 Copay	20% after deductible		
Specialist Physician Office Visit	100% not subject to deductible	100% after a \$45 Copay	20% after deductible		
Urgent Care Center Services	100% not subject to deductible	100% after a \$45 Copay	20% after deductible		
Emergency Services – Outpatient	100% not subject to deductible	100% after a \$250 Copay	100% after a \$250 Copay		
Hospital – Inpatient Stay	100% not subject to deductible	100% after deductible	20% after deductible		



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Additional Core Benefits			
Acupuncture - \$2,500 per year	100% not subject to deductible	100% after a \$30 Copay	20% after deductible
Ambulance Services (Air and Ground)	90% after deductible	100% after deductible	100% after deductible
Durable Medical Equipment (limited to a single purchase of each type every 3 years)	90% after deductible	100% after deductible	20% after deductible
Hearing Aids - \$5,000 per year and are limited to a single purchase (including repair/replacement) per hearing impaired ear every three years.	90% after deductible	100% after deductible	20% after deductible
Home Health Care (up to 120 visits per year)	90% after deductible	100% after deductible	20% after deductible
Hospice Care	90% after deductible	100% after deductible	20% after deductible
Lab, X-Ray and Diagnostics – Outpatient	100% not subject to deductible	100% not subject to deductible	20% after deductible
Lab, X-Ray and Major Diagnostics – CT, PET, MRI, MRA & Nuclear Medicine – Outpatient	90% after deductible	100% after deductible	20% after deductible
Pregnancy-Maternity Services	90% after deductible	100% after deductible	20% after deductible
Prosthetic Devices - A single purchase of each type of prosthetic device every three years.	90% after deductible	100% after deductible	20% after deductible
Rehabilitation Services	100% not subject to deductible	100% after a \$30 Copay	20% after deductible
Physical Therapy	up to 20 visits	up to 20 visits	up to 20 visits
Occupational Therapy	up to 20 visits	up to 20 visits	up to 20 visits
Manipulative Treatment	up to 20 visits	up to 20 visits	up to 20 visits
Speech Therapy	up to 20 visits	up to 20 visits	up to 20 visits
Skilled Nursing Facility (up to 120 days per year)	90% after deductible	100% after deductible	20% after deductible
Surgery - Outpatient	90% after deductible	100% after deductible	20% after deductible
Temporomandibular Joint Disorder	90% after deductible	100% after deductible	20% after deductible
Virtual Visits	100%	100%	Not covered
Medical Evacuation and Repatriation			
Emergency Evacuation	100%	N/A	N/A
Emergency Family Reunion	100%	100%	N/A
Medical Repatriation		•	
Would Repair and Park	100%	100%	N/A



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Mental Health and Substance Use Disorders / Neurobiological Disorders				
Inpatient	90% after deductible	100% after deductible		20% after deductible
Outpatient	100% not subject to deductible	100% after a \$30 Copay		20% after deductible
Vision Benefits				
Eye Exam (1 exam every 12 months)	100% not subject to deductible	100% after a \$30 Copay		20% after deductible
Vision Materials (\$300 maximum reimbursement per year)	Excluded	Excluded		Excluded
Additional Member Benefits and Tools				
Assistance Services	referrals - Monitoring of treatment - Relaying of medical and insurance information - Facilitation of hospital		Travel Assistance: - Destination Intelligence - Help with emergency travel planning - Transfer of funds - Lost document assistance - Legal referrals - Emergency translation	
International Employee Assistance Program	Included for members is five hours of face-to-face counseling and reintegration support for employees and their families returning to their home country. Members also have access to unlimited telephonic counseling and a specialist network of counselors 24/7/365.			



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Additional Member Benefits and Tools Continued				
Digital Tools and Wellbeing Services	■ My Wellbeing is our online portal which provides members with ready access to an extensive array of health content, screeners, tools, resources and self-help programs ■ My Wellbeing is our wellness portal we offer to members where they can take an online health survey and access personalized activities, individual goals and more ■ Our new Health Management Program provides personal support if members or their family members are living with chronic health conditions or have a child with special needs. The program provides direct access to a clinician with whom a relationship is built to help manage: medication management, durable medical equipment and supplies assistance, dietary management, assistance in finding specialty providers for complex issues and action planning for urgent needs			
Onboarding Services for Members	■ Pre-departure outreach calls and emails including an assessment for the employee and spouse and a follow-up outreach call and assessment six to eight weeks into the assignment ■ Custom webinars (either live or recorded) for employees – these can be provided to the employer to save on intranet sites ■ Evaluation of ongoing clinical needs for enrollment into our Health Management programs ■ Follow-up emails and assessments ■ Online health risk assessment			
Optional Coverage				
Enhanced Physical Examination / Ningen Dock	Excluded	Excluded	Excluded	
Private Room - Hospital (Inpatient Stay)	Excluded	Excluded	Excluded	
Infertility Services	Excluded	Excluded	Excluded	
Infertility RX Services	Excluded	Excluded	Excluded	
Obesity Surgery	Excluded	Excluded	Excluded	
Private Duty Nursing	Excluded	Excluded	Excluded	
Urinary Catheters	Excluded	Excluded	Excluded	
Vision Therapy Prior authorization may be required for certain be	Excluded	Excluded	Excluded	

