

Services	Maximum Benefit
OVERSEAS EMERGENCY	US\$100,000
MAJOR MEDICAL	
Lifetime Maximum (LTM)	J\$4,000,000
Local Deductible	J\$8,000
LTM - Lifetime Benefit is the maximum amount payable from Major Medical over the lifetime of the covered person	
MM - Major Medical provides the extra coverage for large expenses resulting from catastrophic illnesses, accidents or costly diagnostic services. These payments are in addition to the basic benefits.	
UCR - Usual Customary & Reasonable relates to a charge which is reasonable for a particular service or supply as determined by the general charges being observed for similar services or supplies being rendered by Professionals in the same geographic area.	
DENTAL & OPTICAL BENEFITS COMBINED	
80% of Cost per policy year	J\$17,000

DENTAL
Some charges not covered under this benefit include: <ul style="list-style-type: none"> (a) Orthodontics (b) Fixed bridgework including inlays and crowns used as abutments (c) Replacement of existing bridgework or addition of teeth to existing bridgework
OPTICAL
The Optical payments are subject to the following provisions: Lenses: one set in a 12 month period Frames: one set in a 24 month period CONTACT LENSES: (In lieu of lenses and frames) All lenses must be prescribed by a licensed ophthalmologist or optometrist, and purchased from and dispensed by a licensed optometrist or optician.

PREMIUM RATES			
	INDIVIDUAL	INDIVIDUAL + 1	FAMILY
Quarterly with Maternity	J\$13,532.00	J\$24,359.00	J\$37,891.00
Quarterly without Maternity	J\$13,267.00	J\$23,881.00	J\$37,148.00
Half yearly with Maternity	J\$26,022.00	J\$46,840.00	J\$72,863.00
Half yearly without Maternity	J\$25,512.00	J\$45,922.00	J\$71,434.00
Annually with Maternity	J\$50,315.00	J\$90,566.00	J\$140,880.00
Annually without Maternity	J\$49,328.00	J\$88,790.00	J\$138,118.00

IMPORTANT INFORMATION

WHO IS ELIGIBLE TO JOIN?

Any adult between the ages of 18 and 64 who resides in Jamaica for at least 9 months in any Policy year.

WHO ARE DEPENDENTS?

Your dependents are your spouse (married or common law) and/or children between the ages of 14 days and 25 years who reside in Jamaica for at least 9 months in any Policy year, except in the case of a student in full time attendance at an accredited institution overseas.

HOW SOON MAY I ADD MY CHILDREN AS DEPENDENTS ON MY PLAN?

New-born babies may be added 14 days after birth. Should the baby be in the hospital on the date of eligibility, coverage will be effected the first of the month following the date of discharge from the hospital. Coverage may continue up to your child’s 25th birthday. CONDITIONS APPLY.

HOW CAN I MAKE A CLAIM?

If your Health Care Provider does not accept the Guardian Health card, you will be required to pay up-front and request reimbursement from Guardian Life. Your Medical Provider must complete the relevant sections of the Claim form, ensuring that diagnosis, his/her name & address, charges, amount paid, name of referring doctor (if any) are included. The Provider must stamp, date and sign the Claim form. Original receipts must accompany the Claim form. You are required to complete Section 1 of the Claim form. Note that all claims must be submitted within ninety (90) days of the date of service.

USEFUL TIPS

1. Keep your cards in a safe place so that others cannot gain easy access to them. Your cards must be used by you only.
2. Ensure that your card, and not someone else's card, is returned to you by your health care provider.
3. Report abuse or loss of cards to Guardian Life immediately.
4. Coordinate your benefits with NHF/JADEP.
5. Use benefits only when necessary and for required medical treatment. Careless use of the plan and rushing to finish benefits unnecessarily will contribute to increased premiums.

WAITING PERIODS

- There is a 12 month waiting period for Hospitalization, Surgery, major Diagnostic services, UNLESS the service is necessitated by an emergency.
- Maternity benefits are not available for a pregnancy that had its inception prior to the effective date of the Policy.

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Email: guardian@myguardiangroup.com



TAKE CHARGE OF YOUR HEALTH

GUARDIAN ESSENTIAL

is an Individual Health solution underwritten by Guardian Life Limited to assist in covering financial expenses that may arise from accident or illness. This information summarizes the benefits and terms of coverage; please note that all the details are outlined in the policy.

We know that it is important for you to make the right choice, the **GUARDIAN ESSENTIAL** financially protects you in illness and ensures that you have access to quality health care.

And when you need medical care, worrying about your health coverage should be the last thing on your mind. The **GUARDIAN ESSENTIAL** gives you the flexibility to get the care you need and you choose the doctors you want to see. You get both local and overseas coverage. Conditions Apply.

CONVERSION PRIVILEGE

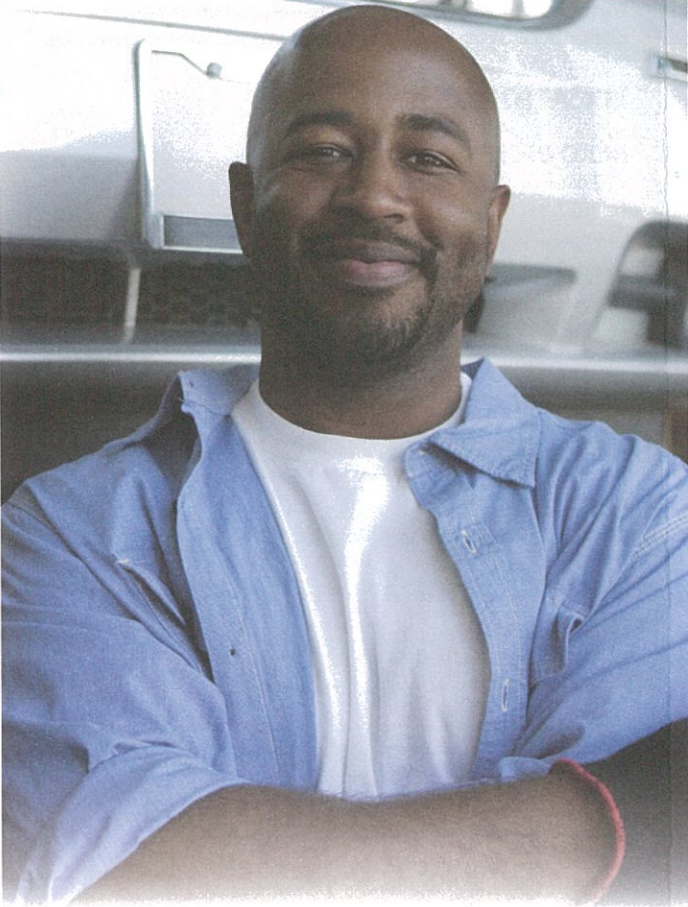
If you are enrolled on a Guardian Health Group Policy from which you terminate, you may continue coverage by transferring to this Individual Policy, if the request and applicable payment is done within 31 days of the date of termination. You will not be required to provide any medical evidence of health, and any applicable waiting period for pre-existing conditions will be waived.

COORDINATION OF BENEFITS

If you or your family members have coverage from more than one medical, vision, or dental plan, for example, National Health Fund (NHF) and JADEP, or another insurance plan, your benefits may be coordinated; this means you pay less out-of-pocket for your medical expenses.

CLAIMS & EXCLUSIONS

Your electronic health card allows access to over 2,000 Medical Providers island-wide, at point of service. Should you need to submit a claim for reimbursement please note that all claims must be submitted within ninety (90) days of the date of service. Claims must be submitted to any Guardian Life office for the attention of the Health Claims Department. Benefits will be subject to exclusions. See Policy for details.



LIFE WITHOUT WORRY

PLAN OPTIONS WITH AND WITHOUT MATERNITY

- Individual
- Individual + 1 (spouse or child)
- Family

PAYMENT

- Quarterly, semi-annually or annually

START TODAY

Services	Maximum Benefit
DOCTORS' VISITS	
Doctors' Office Visits	J\$1,200
Home Visit	J\$1,200
Routine Medical - 1 per policy year	J\$1,200
Specialist Consultation - with referral	J\$2,400
Specialist Consultation - without referral	J\$1,200
*Paediatrician - up to age 12	J\$2,400
*Gynaecologist - 2 visits per year	J\$2,400
<i>*No referral is required for these Specialists</i>	
Physiotherapy/Speech Therapy	J\$2,000
Dietician (on referral only) - 2 visits per policy year	J\$2,400
Podiatrist/Chiropractor (reimbursement only) - 2 visits each per policy year	J\$2,400
Psychiatric Care - 1st 4 visits - Next 20 visits	J\$2,400 J\$1,200
PRESCRIPTION DRUGS	
Annual Limit per person	80% of Cost up to J\$12,000 + MM
<i>Please remember to use your NHF and JADEP cards where applicable so you pay less out of pocket for prescription drugs.</i>	
MATERNITY	
- Normal Delivery - In Hospital Expenses	J\$15,000
- Other Expenses incl. pre & post natal costs	J\$15,000
- Caesarean - In Hospital Expenses	J\$15,000
- Other Expenses incl. pre & post natal costs	J\$45,000
- Miscarriage	J\$15,000
<i>The amounts listed above are the maximums payable and do not include payments under any other benefit. Maternity benefit is optional for females 50 years and over.</i>	
DIAGNOSTIC SERVICES	
Laboratory & X-Ray/Ultra Sound per person	80% of Cost up to J\$6,000 + MM
CT Scans/MRI/Specialized Tests (Preauthorization Required)	80% of UCR
HOSPITALIZATION	
Room & Board (Semi Private Room per day)	100% of Cost up to J\$4,000
Intensive Care (30 days per annum)	80% of UCR up to J\$30,000

Services	Maximum Benefit
HOSPITALIZATION	
Hospital Miscellaneous	80% of Cost up to J\$40,000 + MM
Out-Patient Services	80% of Cost up to J\$20,000 + MM
<i>Hospital Miscellaneous includes drugs, dressing, operating theatre fees, lab, X-ray and all other medical services related to in-hospital confinement.</i>	
Doctor's In-Hospital Visit (non surgical)	J\$2,400
Private Nursing (per 8hr shift)	J\$2,000
Emergency Accident/Outpatient	80% of cost up to J\$20,000 +MM
SURGERY	
Surgeon	J\$45,000 + MM
Assistant Surgeon	J\$13,500 + MM
Anaesthetist	J\$18,000 + MM
Root Canal	80% of UCR
<i>We recommend that the surgical fees (Surgeon, Anaesthetist & Asst. Surgeon) if applicable; are sent directly to Guardian Life in advance, so that we may advise of the amount covered by your plan.</i>	
MISCELLANEOUS SERVICES	
Tubal Ligation/Vasectomy	80% of Cost up to J\$6,000
Radiotherapy	80% of UCR
Chemotherapy	80% of UCR
Renal Dialysis	80% of UCR
Local Ambulance	80% of UCR
HPV Vaccine (ages 12-26) - reimbursement only	80% of Cost up to J\$5,000
Hearing Aid (each ear) - once every 3 years	80% of Cost up to J\$24,000
Immunization (to age 12) per contract year	J\$3,000
OVERSEAS NON-EMERGENCY Reimbursable & Pre-authorization Required	
Deductible	US\$1,000
Daily Room & Board Maximum	J\$10,000
Other Medical Expenses	80% of UCR
<i>Non-Emergency refers to a condition for which no form of treatment is available in Jamaica and treatment is being sought overseas.</i>	
Air Transportation (2 trips per policy year)	J\$10,000

Services	Maximum Benefit
OVERSEAS EMERGENCY	US\$100,000
MAJOR MEDICAL	
Lifetime Maximum (LTM)	J\$5,000,000
Local Deductible	J\$8,500
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DENTAL & OPTICAL BENEFITS COMBINED	
80% of Cost per policy year	J\$20,000

DENTAL
Some charges not covered under this benefit include:

- (a) Orthodontics
- (b) Fixed bridgework including inlays and crowns used as abutments
- (c) Replacement of existing bridgework or addition of teeth to existing bridgework

OPTICAL
The Optical payments are subject to the following provisions:
Lenses: one set in a 12 month period
Frames: one set in a 24 month period

CONTACT LENSES: (In lieu of lenses and frames)
All lenses must be prescribed by a licensed ophthalmologist or optometrist, and purchased from and dispensed by a licensed optometrist or optician.

PREMIUM RATES			
	INDIVIDUAL	INDIVIDUAL + 1	FAMILY
Quarterly with Maternity	J\$14,267.00	J\$25,678.00	J\$39,948.00
Quarterly without Maternity	J\$13,555.00	J\$24,400.00	J\$37,956.00
Half yearly with Maternity	J\$27,435.00	J\$49,378.00	J\$76,818.00
Half yearly without Maternity	J\$26,067.00	J\$46,921.00	J\$72,987.00
Annually with Maternity	J\$53,051.00	J\$95,484.00	J\$148,543.00
Annually without Maternity	J\$50,401.00	J\$90,721.00	J\$141,121.00

IMPORTANT INFORMATION

WHO IS ELIGIBLE TO JOIN?

Any adult between the ages of 18 and 64 who resides in Jamaica for at least 9 months in any Policy year.

WHO ARE DEPENDENTS?

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HOW CAN I MAKE A CLAIM?

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USEFUL TIPS

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2. Ensure that your card, and not someone else's card, is returned to you by your health care provider.
3. Report abuse or loss of cards to Guardian Life immediately.
4. Coordinate your benefits with NHF/JADEP.
5. Use benefits only when necessary and for required medical treatment. Careless use of the plan and rushing to finish benefits unnecessarily will contribute to increased premiums.

WAITING PERIODS

- There is a 12 month waiting period for Hospitalization, Surgery, major Diagnostic services, UNLESS the service is necessitated by an emergency.
- Maternity benefits are not available for a pregnancy that had its inception prior to the effective date of the Policy.

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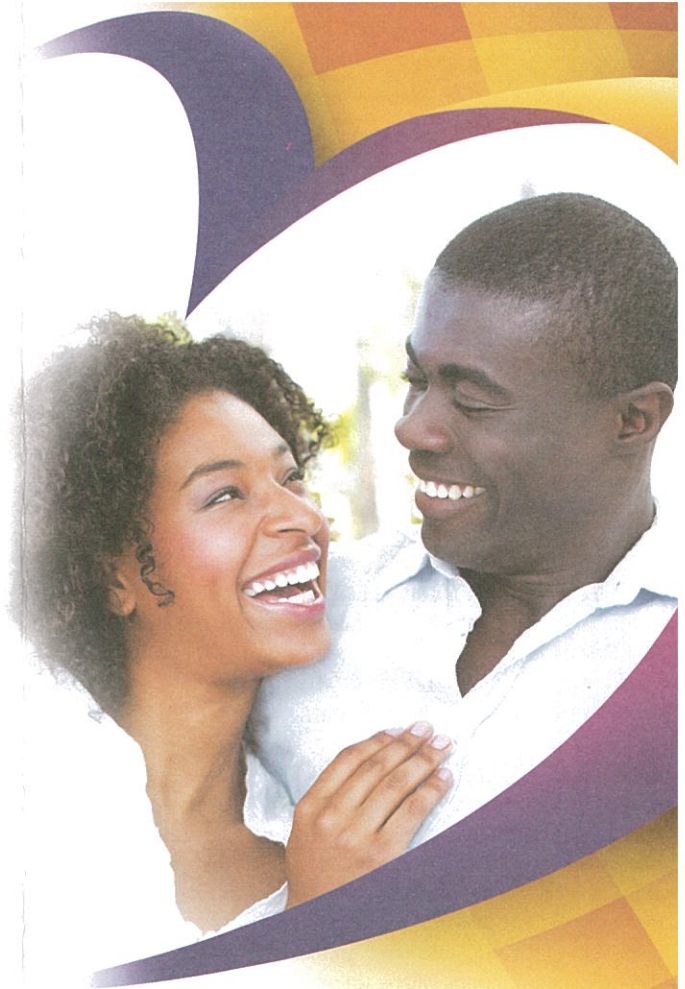
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Guardian
HEALTH
Edge



YOUR HEALTH. YOU CHOOSE.

GUARDIAN EDGE

is an Individual Health solution underwritten by Guardian Life Limited to assist in covering financial expenses that may arise from accident or illness. This information summarizes the benefits and terms of coverage; please note that all the details are outlined in the policy.

We know that it is important for you to make the right choice, the **GUARDIAN EDGE** financially protects you in illness and ensures that you have access to quality health care.

And when you need medical care, worrying about your health coverage should be the last thing on your mind. The **GUARDIAN EDGE** gives you the flexibility to get the care you need and you choose the doctors you want to see. You get both local and overseas coverage. Conditions Apply.

CONVERSION PRIVILEGE

If you are enrolled on a Guardian Health Group Policy from which you terminate, you may continue coverage by transferring to this Individual Policy, if the request and applicable payment is done within 31 days of the date of termination. You will not be required to provide any medical evidence of health, and any applicable waiting period for pre-existing conditions will be waived.

COORDINATION OF BENEFITS

If you or your family members have coverage from more than one medical, vision, or dental plan, for example, National Health Fund (NHF) and JADEP, or another insurance plan, your benefits may be coordinated; this means you pay less out-of-pocket for your medical expenses.

CLAIMS & EXCLUSIONS

Your electronic health card allows access to over 2,000 Medical Providers island-wide, at point of service. Should you need to submit a claim for reimbursement please note that all claims must be submitted within ninety (90) days of the date of service. Claims must be submitted to any Guardian Life office for the attention of the Health Claims Department. Benefits will be subject to exclusions. See Policy for details.



LIFE WITHOUT WORRY

PLAN OPTIONS WITH AND WITHOUT MATERNITY

- Individual
- Individual + 1 (spouse or child)
- Family

PAYMENT

- Quarterly, semi-annually or annually

CHOOSE GUARDIAN EDGE

Services	Maximum Benefit
DOCTORS' VISITS	
Doctors' Office Visits	J\$1,500
Home Visit	J\$1,500
Routine Medical - 1 per policy year	J\$1,500
Specialist Consultation - with referral	J\$3,000
Specialist Consultation - without referral	J\$1,500
*Paediatrician - up to age 12	J\$3,000
*Gynaecologist - 2 visits per year	J\$3,000
<i>*No referral is required for these Specialists</i>	
Physiotherapy/Speech Therapy	J\$2,500
Dietician (on referral only) - 2 visits per policy year	J\$3,000
Podiatrist/Chiropractor (reimbursement only) - 2 visits each per policy year	J\$3,000
Psychiatric Care - 1st 4 visits - Next 20 visits	J\$3,000 J\$1,500
PRESCRIPTION DRUGS	
Annual Limit per person	80% of Cost up to J\$14,000 + MM
<i>Please remember to use your NHF and JADEP cards where applicable so you pay less out of pocket for prescription drugs.</i>	
MATERNITY	
- Normal Delivery - In Hospital Expenses	J\$17,500
- Other Expenses incl. pre & post natal costs	J\$17,500
- Caesarean - In Hospital Expenses	J\$17,500
- Other Expenses incl. pre & post natal costs	J\$42,500
- Miscarriage	J\$17,500
<i>The amounts listed above are the maximums payable and do not include payments under any other benefit. Maternity benefit is optional for females 50 years and over.</i>	
DIAGNOSTIC SERVICES	
Laboratory & X-Ray/Ultra Sound per person	80% of Cost up to J\$7,000 + MM
CT Scans/MRI/Specialized Tests (Preauthorization Required)	80% of UCR
HOSPITALIZATION	
Room & Board (Semi Private Room per day)	100% of Cost up to J\$4,500
Intensive Care (30 days per annum)	80% of UCR up to J\$30,000

Services	Maximum Benefit
HOSPITALIZATION	
Hospital Miscellaneous	80% of Cost up to J\$45,000 + MM
<i>Hospital Miscellaneous includes drugs, dressing, operating theatre fees, lab, X-ray and all other medical services related to in-hospital confinement.</i>	
Doctor's In-Hospital Visit (non surgical)	J\$3,000
Private Nursing (per 8hr shift)	J\$2,500
Emergency Accident/Outpatient	80% of cost up to J\$22,500 +MM
SURGERY	
Surgeon	J\$50,000 + MM
Assistant Surgeon	J\$15,000 + MM
Anaesthetist	J\$20,000 + MM
Root Canal	80% of UCR
<i>We recommend that the surgical fees (Surgeon, Anaesthetist & Asst. Surgeon) if applicable; are sent directly to Guardian Life in advance, so that we may advise of the amount covered by your plan.</i>	
MISCELLANEOUS SERVICES	
Tubal Ligation/Vasectomy	80% of Cost up to J\$7,000
Radiotherapy	80% of UCR
Chemotherapy	80% of UCR
Renal Dialysis	80% of UCR
Local Ambulance	80% of UCR
HPV Vaccine (ages 12-26) - reimbursement only	80% of Cost up to J\$5,000
Hearing Aid (each ear) - once every 3 years	80% of Cost up to J\$24,000
Immunization (to age 12) per contract year	J\$3,000
OVERSEAS NON-EMERGENCY Reimbursable & Pre-authorization Required	
Deductible	US\$1,000
Daily Room & Board Maximum	J\$10,000
Other Medical Expenses	80% of UCR
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Air Transportation (2 trips per policy year)	J\$10,000

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OVERSEAS EMERGENCY	US\$100,000
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Lifetime Maximum (LTM)	J\$6,500,000
Local Deductible	J\$12,000
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Quarterly with Maternity	J\$17,189.00	J\$30,943.00	J\$48,132.00
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Half yearly with Maternity	J\$33,054.00	J\$59,501.00	J\$92,555.00
Half yearly without Maternity	J\$30,233.00	J\$54,415.00	J\$84,652.00
Annually with Maternity	J\$63,916.00	J\$115,059.00	J\$178,975.00
Annually without Maternity	J\$58,456.00	J\$105,212.00	J\$163,656.00

IMPORTANT INFORMATION

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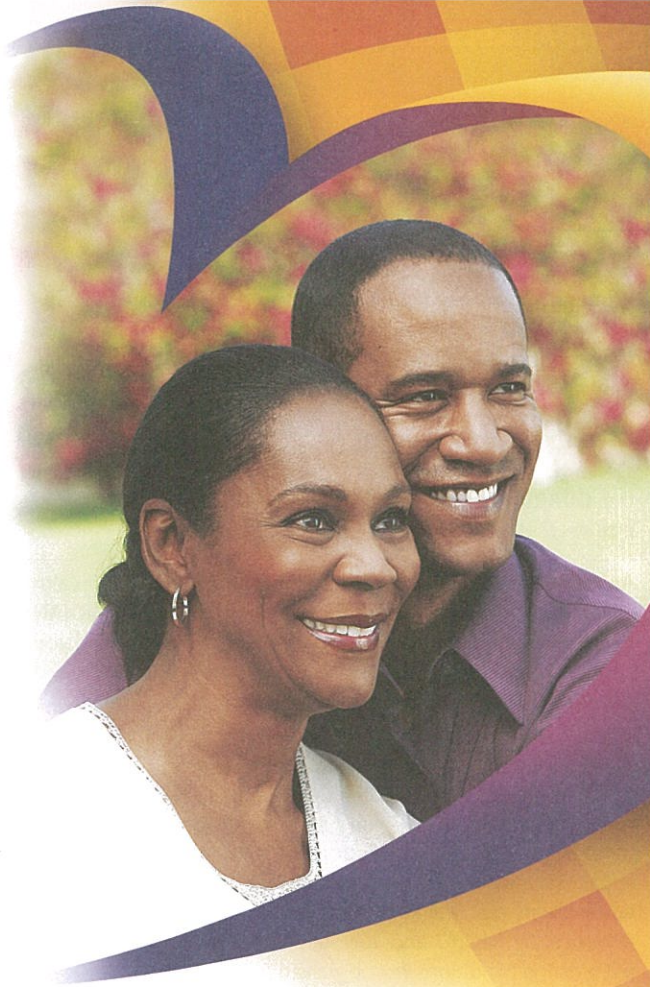
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Guardian Group

Guardian Life Limited

live well. live easy.



Guardian
HEALTH

Elite



Guardian Group

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live well. live easy.

UNPARALLELED CHOICE & FLEXIBILITY

GUARDIAN ELITE

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And when you need medical care, worrying about your health coverage should be the last thing on your mind. The **GUARDIAN ELITE** gives you the flexibility to get the care you need and you choose the doctors you want to see. You get both local and overseas coverage. Conditions Apply.

CONVERSION PRIVILEGE

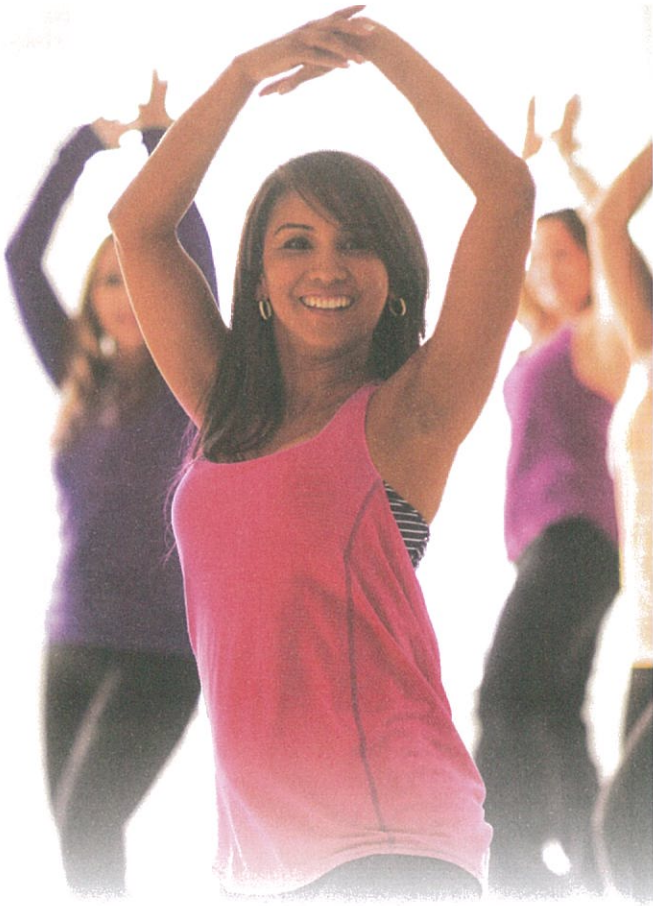
If you are enrolled on a Guardian Health Group Policy from which you terminate, you may continue coverage by transferring to this Individual Policy, if the request and applicable payment is done within 31 days of the date of termination. You will not be required to provide any medical evidence of health, and any applicable waiting period for pre-existing conditions will be waived.

COORDINATION OF BENEFITS

If you or your family members have coverage from more than one medical, vision, or dental plan, for example, National Health Fund (NHF) and JADEP, or another insurance plan, your benefits may be coordinated; this means you pay less out-of-pocket for your medical expenses.

CLAIMS & EXCLUSIONS

Your electronic health card allows access to over 2,000 Medical Providers island-wide, at point of service. Should you need to submit a claim for reimbursement please note that all claims must be submitted within ninety (90) days of the date of service. Claims must be submitted to any Guardian Life office for the attention of the Health Claims Department. Benefits will be subject to exclusions. See Policy for details.



LIFE WITHOUT WORRY

PLAN OPTIONS WITH AND WITHOUT MATERNITY

- Individual
- Individual + 1 (spouse or child)
- Family

PAYMENT

- Quarterly, semi-annually or annually

YOU ARE PROTECTED

Services	Maximum Benefit
DOCTORS' VISITS	
Doctors' Office Visits	J\$2,000
Home Visit	J\$2,000
Routine Medical - 1 per policy year	J\$2,000
Specialist Consultation - with referral	J\$4,000
Specialist Consultation - without referral	J\$2,000
*Paediatrician - up to age 12	J\$4,000
*Gynaecologist - 2 visits per year	J\$4,000
<i>*No referral is required for these Specialists</i>	
Physiotherapy/Speech Therapy	J\$3,000
Dietician (on referral only) - 2 visits per policy year	J\$4,000
Podiatrist/Chiropractor (reimbursement only) - 2 visits each per policy year	J\$4,000
Psychiatric Care - 1st 4 visits	J\$4,000
- Next 20 visits	J\$2,000
PRESCRIPTION DRUGS	
Annual Limit per person	80% of Cost up to J\$15,000 + MM
<i>Please remember to use your NHF and JADEP cards where applicable so you pay less out of pocket for prescription drugs.</i>	
MATERNITY	
- Normal Delivery - In Hospital Expenses	J\$20,000
- Other Expenses incl. pre & post natal costs	J\$20,000
- Caesarean - In Hospital Expenses	J\$20,000
- Other Expenses incl. pre & post natal costs	J\$40,000
- Miscarriage	J\$20,500
<i>The amounts listed above are the maximums payable and do not include payments under any other benefit. Maternity benefit is optional for females 50 years and over.</i>	
DIAGNOSTIC SERVICES	
Laboratory & X-Ray/Ultra Sound per person	80% of Cost up to J\$12,000 + MM
CT Scans/MRI/Specialized Tests (Preauthorization Required)	80% of UCR
HOSPITALIZATION	
Room & Board (Semi Private Room per day)	100% of Cost up to J\$5,000
Intensive Care (30 days per annum)	80% of UCR up to J\$30,000

Services	Maximum Benefit
HOSPITALIZATION	
Hospital Miscellaneous	80% of Cost up to J\$50,000 + MM
<i>Hospital Miscellaneous includes drugs, dressing, operating theatre fees, lab, X-ray and all other medical services related to in-hospital confinement.</i>	
Doctor's In-Hospital Visit (non surgical)	J\$3,500
Private Nursing (per 8hr shift)	J\$3,000
Emergency Accident/Outpatient	80% of cost up to J\$25,000 +MM
SURGERY	
Surgeon	80% of UCR
Assistant Surgeon	30% of Surgeon Fees
Anaesthetist	40% of Surgeon Fees
Root Canal	80% of UCR
<i>We recommend that the surgical fees (Surgeon, Anaesthetist & Asst. Surgeon) if applicable; are sent directly to Guardian Life in advance, so that we may advise of the amount covered by your plan.</i>	
MISCELLANEOUS SERVICES	
Tubal Ligation/Vasectomy	80% of Cost up to J\$12,000
Radiotherapy	80% of UCR
Chemotherapy	80% of UCR
Renal Dialysis	80% of UCR
Local Ambulance	80% of UCR
HPV Vaccine (ages 12-26) - reimbursement only	80% of Cost up to J\$5,000
Hearing Aid (each ear) - once every 3 years	80% of Cost up to J\$24,000
Immunization (to age 12) per contract year	J\$4,000
OVERSEAS NON-EMERGENCY Reimbursable & Pre-authorization Required	
Deductible	US\$1,000
Daily Room & Board Maximum	J\$15,000
Other Medical Expenses	80% of UCR
<i>Non-Emergency refers to a condition for which no form of treatment is available in Jamaica and treatment is being sought overseas.</i>	
Air Transportation (2 trips per policy year)	J\$15,000