







Coverage

It is a major medical expenses insurance from Plan Seguro insurance company called **"Plan Esencial**", which offers people financial protection in case they suffer an accident or illness in the place where they are, with a national coverage in high quality hospitals.

Plan	Essential
Sum insured	1,000 UMAM (Approx. \$2.925 million)
Deductible	7 UMAM (Approx. \$120,475 Mxn)
Coinsurance	10% (with a maximum cap of \$50,000 Mxn)
Medical Tabulator	Base 21 UMAM (Approx. \$61,427 Mxn)
Hospitals included:	This is most of the hospitals, excluding Angeles de las Lomas, and ABC's in CDMX, Hospital Zambrano and San Jose Tec in Mty. and Angeles del Carmen in Gdl.

*UMAM (unit of measurement and monthly update=\$2,925 Mxn. as of 1/Jan/2022)

Special Benefits



- ☐ Elimination of the deductible for an accident, when the amount of expenses exceeds the deductible.
- □ Reduction 1 UMAM of deductible and 5% coinsurance with physician and hospital of agreement and direct payment.
- ☐ Maternity benefit of 10 UMAM (approx. \$29,925) with no deductible or coinsurance.
- □ Refractive surgery up to 5 UMAM (\$14,962 Mxn. approx.) with no deductible or coinsurance for insureds with a minimum of 5 diopters per eye.
- ☐ Dental care (1 check-up, 2 cleanings, radiographic series 18 (Rx)

Covered expenses and waiting period

What expenses are covered



Main covered conditions with waiting period

10 months of continuous validity in the policy

 Maternity, complications of pregnancy and congenital conditions of the newborn. Newborn complications and congenital malformations are covered if the mother complies with the waiting period.

1 year, of continuous policy term

• Tonsillectomy and adenoidectomy, eventrations, hernias of any type, hemorrhoids, any anorectal ailment, cholecystitis, biliary tract lithiasis, gallbladder lithiasis, peripheral venous insufficiency, varicocele and varicose veins of the lower limbs, renal lithiasis, acid peptic disease, diverticular disease, colon polyps and diverticula, nasal or sinus conditions, varicocele and varicose veins of lower limbs, renoureteral lithiasis, acid peptic disease, diverticular disease, colon polyps and diverticula, nose or sinus conditions, lipomas of any region, tumors, refractive surgery.

2 <u>years,</u> continuous policy term Prostate conditions and prostatectomy, cataracts, conditions related to the perineal floor, hallux valgus, prolapses of any kind, gynecological conditions, any spine condition, any knee condition, cancer, and any other conditions related to the perineal floor.

Exclusions and considerations

Main Exclusions

Aesthetic treatments.

Dietary treatments, check ups, compatibility studies, eyeglasses, contact lenses, hearing aids, purchase or rental of orthopedic shoes, dental or alveolar or gingival treatments, infertility treatments, birth control, sexual impotence, myopia, presbyopia, hyperopia, astigmatism, medical fees when the physician is a parent, sibling, child or spouse of the Insured.

Treatments for any pre-existing condition or disease

Any type of psychological, psychiatric or psychiatric studies and/or treatments to correct sleep disorders, sleep apnea and hoarseness, behavioral, learning or language disorders, mental derangement, dementia, psychic or nervous depression, hysteria, neurosis or psychosis, regardless of their origins or consequences.

Considerations

Hiring

•To contract, you must fill out the insurance company's application form, the company will carry out its selection process and will confirm if it accepts to issue the policy.

Continuity benefit

•Once the Accenture employee retires from the company, his or her family member or friend can continue with the plan without any restrictions.

Means of payment

•Direct debit to a bank account (Credit or Debit Card).



Information subject to change without notice.

For more information

www.planseguro.com.mx



General Conditions Essential Plan



Cash cost by age and gender of each insured

	Total cost	
Age	Man	Woman
18	9,403	9,554
19	9,479	9,780
20	9,568	10,032
21	9,669	10,310
22	9,781	10,611
23	9,905	10,934
24	10,040	11,276
25	10,186	11,633
26	10,343	12,004
27	10,511	12,386
28	10,688	12,775
29	10,877	13,169
30	11,342	14,095
31	11,558	14,511
32	11,785	14,923
33	12,023	15,330
34	12,272	15,728
35	12,533	16,116
36	12,808	16,492

	Total cost	
Age	Man	Woman
37	13,096	16,854
38	13,400	17,203
39	13,721	17,537
40	14,060	17,856
41	14,420	18,162
42	14,804	18,456
43	15,213	18,740
44	15,650	19,015
45	16,120	19,287
46	16,627	19,558
47	17,173	19,834
48	17,764	20,121
49	18,405	20,426
50	19,102	20,757
51	19,859	21,122
52	20,685	21,532
53	21,586	21,998
54	22,568	22,531
55	23,641	23,146

Total cost	
Man	Woman
24,814	23,857
26,094	24,680
27,492	25,632
29,019	26,733
31,309	27,926
34,375	31,011
37,455	34,104
40,567	37,209
43,726	40,336
79,521	70,254
85,280	75,581
91,525	81,529
98,234	88,087
105,363	95,218
112,844	102,857
	Man 24,814 26,094 27,492 29,019 31,309 34,375 37,455 40,567 43,726 79,521 85,280 91,525 98,234 105,363

Payment in a single exhibition once the policy has been issued.

Example Quote:
Dad 55 years and Mom 52
years Dad 23,641
Mom 21,532

Total \$45,173

Costs include VAT

Monthly cost by age and gender of each insured

	Total cost	
Age	Man	Woman
18	10,601	10,775
19	10,689	11,034
20	10,791	11,324
21	10,907	11,644
22	11,036	11,990
23	11,178	12,362
24	11,334	12,755
25	11,502	13,166
26	11,682	13,593
27	11,875	14,032
28	12,079	14,479
29	12,296	14,933
30	12,832	15,997
31	13,080	16,475
32	13,340	16,950
33	13,614	17,417
34	13,901	17,875
35	14,201	18,321
36	14.517	18.753

	Total cost	
Age	Man	Woman
37	14,849	19,170
38	15,198	19,571
39	15,567	19,955
40	15,957	20,323
41	16,371	20,675
42	16,812	21,012
43	17,282	21,338
44	17,786	21,655
45	18,326	21,967
46	18,908	22,279
47	19,537	22,597
48	20,216	22,927
49	20,954	23,278
50	21,755	23,658
51	22,626	24,079
52	23,576	24,550
53	24,611	25,085
54	25,741	25,699
55	26,975	26,406

	Total cost	
Age	Man	Woman
56	28,323	27,223
57	29,796	28,169
58	31,404	29,265
59	33,160	30,530
60	35,793	31,903
61	39,319	35,451
62	42,862	39,007
63	46,440	42,578
64	50,073	46,174
65	91,236	80,580
66	97,860	86,706
67	105,042	93,546
68	112,757	101,087
69	120,955	109,288
70	129,558	118,073

The total is divided into 12 monthly payments.
The first payment includes the policy fee.

Example Quote:

Dad 58 years old and Mom 55 years old

Dad 31,404 Mom <u>26,4 0 6</u> Total \$57,810

The monthly payment is approximately \$4,817

Fees include VAT and monthly payment surcharge.

Contact



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Service Hours Monday to Thursday

Friday9

:00am - 6:00 pm :00 am - 3:30 pm

Frequently Asked Questions

What is Major Medical Insurance?
It is an insurance that seeks to protect you from a major economic imbalance in the event of an illness or accident that requires expensive medical attention.
What is deductible and coinsurance?
The deductible is a fixed amount that we as policyholders will pay for each covered condition before the insurer begins to cover our claim. In some circumstances, when medical expenses are the result of an accident, this deductible may be eliminated or lowered.
After our deductible has been met, the insurance company will begin to cover the medical expenses, minus a percentage called coinsurance. That is to say, if the coinsurance is 10%, the insurance company covers 90% of the expenses and we, as insured, cover the other 10%. The policy has a limit so that you do not pay more than 50,000 Mxn. for coinsurance.
Can I choose additional coverages and/or different deductibles in this policy?
Yes, you can contact us and we will help you configure the coverages and deductibles in the way that suits you best, these changes have an impact on the cost of the policy.
Can I choose an option where higher-end hospitals such as ABC's are offered in this policy?
Yes, you can contact us and we will help you set up the hospital options that best suit your needs, these changes have an impact on the cost of the policy.
If I am already pregnant, can I take out insurance to cover my pregnancy?
No, in order to enjoy the insurance benefits for maternity and newborn coverage, the mother must have been a member of the policy for at least 10 months at the time of the baby's birth.
Does the insurance cover pre-existing conditions?
No, the insurance covers illnesses acquired and accidents occurring after the date of contracting the policy. There are ailments and accidents that are only covered after a certain period of time under the policy (waiting periods).
What are waiting periods?
It is the period of time that has to elapse once I am insured, for the insurance company to offer coverage for some conditions and accidents (see list in the product presentation).

Frequently Asked Questions

Can seniority from another policy be recognized?
Yes, seniority may be recognized to reduce some waiting periods for this policy. Not to be confused with acceptance of pre-existing conditions that began prior to the inception of this policy.
Do you cover COVID-19 and do you have waiting periods?
Yes, it is covered as an illness, so it is necessary to have a definitive diagnosis corroborated with medical tests and that the expenses exceed the deductible. Coverage begins 30 days after the policy is contracted.
How is the insurance contracted?
All you need to do is fill out an insurance application and send it to us, along with a recent proof of address and identification. in force.
The insurer will carry out an underwriting process and will confirm the issuance of the policy or will ask for specific requirements.
Once the application is submitted, when does my coverage begin?
Usually the insurer considers the effective date as the day the application was received. The policy offers coverage against accident expenses as of this effective date; on the other hand, sickness expenses are covered after 30 days have elapsed from the effective date (this only applies to initial issuances, not to renewals).
Should I declare in my application all the medical conditions that are in question?
Yes, it is very important to state truthfully all the questions on the insurance application. Mexican law empowers insurance companies to not pay and cancel the policy if they discover any omission or misstatement on the application with which the policy was underwritten, even if the omission or misstatement has nothing to do with the medical claim that is not paid.