

Family Medical Care, the medical expenses insurance plan provided by **Pan-American Life Insurance de Panama**, was created with the goal of serving the health needs of its members.

Family Medical Care does not place age limits or pre-existing conditions restrictions on any of its members, and it offers a guaranteed lifetime renewal.



BENEFITS OF THE FAMILY MEDICAL CARE PLAN

EMERGENCIES

- Outpatient emergency care for accidents is covered at 100%, up to a maximum of USD 500.00; any amount over that will be covered at 70%.
- Emergencies due to a listed critical illness are covered at 70% of eligible charges.
- Ambulance service is covered at 100%, up to a maximum of USD 300.00 per event.
- Emergency care outside of Panama is reimbursed at 70%, after payment of the deductible of USD 3,500.

SPECIALIST DOCTOR VISITS

- The insured is entitled to 12 doctor visits per year.
- Copayment of USD 15.00 (affiliated physician).
- Maximum reimbursement of USD 35.00 (unaffiliated physician).

BASIC DENTAL EMERGENCY PLAN

Dental emergencies are covered at 100%.

FUNERAL SERVICES

Funeral expenses are covered at 100%, up to a maximum of USD 1,000.00.

LABORATORY TESTS, CLINICAL TESTS, AND ANATOMIC PATHOLOGY TESTS

(Beginning 30 days after the policy comes into effect, one per month.) 70% of eligible expenses are reimbursed.

X-RAYS

(Beginning 60 days after the policy comes into effect, one per month.) 70% of eligible expenses are reimbursed.

DIAGNOSTIC TESTS

Beginning six months after the policy comes into effect, one per month. There is a copayment of 50% of eligible expenses, subject to approval by the Medical Committee.

OUTPATIENT SURGERY

(Beginning 12 months after the policy comes into effect.) The insured must make a copayment of USD 200.00 and pay 30% coinsurance of eligible expenses.

LOCAL COVERAGE

SURGERY AND HOSPITALIZATION

(Beginning 12 months after the policy comes into effect.) The insured must make a copayment of USD 500.00 and 30% of eligible expenses. A semi-private room is covered, with a maximum stay of 20 days, including a stay in intensive care.

MATERNITY

(Beginning 12 months after the policy comes into effect.) A maximum of USD 3,500.00 of eligible expenses, covered at 70%.

PREVENTIVE MEDICINE

(Beginning 12 months after the policy comes into effect.) 50% of eligible expenses are covered, with a maximum of one per year.

PRE-EXISTING CONDITIONS

(Beginning 24 months after the policy comes into effect.) Covered at 50%.

EYE SURGERY

(Beginning 36 months after the policy comes into effect.) 30% copayment.

HIP AND KNEE REPLACEMENT

(Beginning 36 months after the policy comes into effect.) Covered at 70% of eligible expenses.

RATES YOU CAN AFFORD



| INDIVIDUAL PLAN | | |
|-----------------|----|-----------------|
| AGE | | MONTHLY PREMIUM |
| 0.2 | 18 | USD. 32.00 |
| 19 | 29 | USD. 40.00 |
| 30 | 39 | USD. 46.00 |
| 40 | 49 | USD. 63.00 |
| 50 | 59 | USD. 82.00 |
| 60 | 69 | USD. 102.00 |
| 70 | 79 | USD. 125.00 |
| 80 | + | USD. 180.00 |



| FAMILY PLAN | | | |
|-------------|-----|----|-----------------|
| BENEFICIARY | AGE | | MONTHLY PREMIUM |
| SPOUSE | 19 | 29 | USD. 32.00 |
| SPOUSE | 30 | 39 | USD. 36.00 |
| SPOUSE | 40 | 49 | USD. 50.00 |
| SPOUSE | 50 | 59 | USD. 65.00 |
| SPOUSE | 60 | 69 | USD. 80.00 |
| SPOUSE | 70 | 79 | USD. 100.00 |
| SPOUSE | 80 | + | USD. 180.00 |
| CHILD | 0.2 | 18 | USD. 26.00 |

* These rates do not include the 5% tax

ELIGIBLE EXPENSES OF **USD. 50,000.00**
RENEWABLE ANNUALS

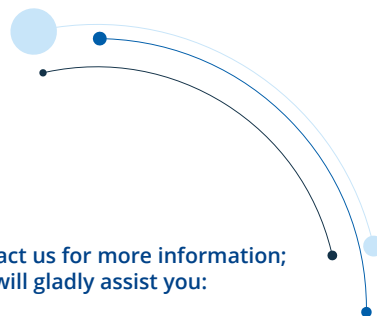
REQUIREMENTS FOR APPLYING FOR THE FAMILY MEDICAL CARE INSURANCE PLAN:

- Fill out and submit the application
- Pay the initial premium
- Laboratory tests only for individuals over 50 years old
- Medical interview only for individuals over 50 years old
- Copy of I.D. card or passport
- Pediatric report only for children younger than 12

COMPLEMENTARY PLAN:

FLEXI CÁNCER

- Family: USD 100.80 (annual payment)
- Individual: USD 63.00 (annual payment)



Please contact us for more information;
we will gladly assist you:

PANAMA

PLAZA COMERCIAL SAN FERNANDO
LOCAL No. 33 2DA. PLANTA
TELÉFONOS: 229-1200 - 229-1210

CHIRIQUÍ

TORRE HOSPITAL CHIRIQUÍ
OFICINA No. 14 1ER. PISO
TELÉFONOS: 775-1068

CHITRÉ

PLAZA AZUERO, CHITRÉ LOCAL B-16
TELÉFONOS: 996-4589 996-9161



PAN AMERICAN LIFE
INSURANCE DE PANAMÁ, S.A.

Compañía miembro de Pan-American Life Insurance Group

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 Pan-American Life Insurance Group

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Regulado y Supervisado por la Superintendencia de Seguros y Reaseguros de Panamá.



**FAMILY —
MEDICAL CARE**
Health Care Coverage for the Whole Family

HEALTH INSURANCE



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