



Affordable monthly premium with no loading!

Meet GeoBlue, an experience well beyond that of traditional health insurance.

GeoBlue provides unsurpassed service and the convenience of mobile technology to access the best medical care no matter what town, country or time zone.

Easy Access to an Elite International Provider Community

GeoBlue has a network of doctors that includes almost every speciality you may need in over 190 countries. Only a small fraction of doctors around the world meet GeoBlue standards – participation is by invitation only. We seek out professionals certified by the American or Royal Board of Medical Specialties who speak English, and we factor in recommendations from over 165 Physician Advisors from all over the world. Then we assemble in-depth profiles so our members can choose with confidence, and we put formal contracts in place to ensure patient access. Once they've seen you, GeoBlue doctors bill us directly so you don't have to file a claim.

In the U.S. you have cashless access to the Blue Cross and Blue Shield network in all fifty states.

Strength of the Blue Brands in the U.S.

GeoBlue members have access to the Blue Cross and Blue Shield network within the U.S. 92% of physicians and more than 96% of hospitals across the U.S. are a part of the BlueCard Network.

Emergency Evacuation and Centers of Excellence

GeoBlue coordinates emergency services with a worldwide network of contracted Regional Physician Advisors as well as air ambulance operators selected for their safety records. Members in need of life-saving medical intervention are treated in Centers of Excellence in the U.S. and around the world whenever possible.

Around-the-Clock Assistance Call Center

GeoBlue maintains a 24/7, toll-free call center to assist GeoBlue members with everything from routine requests to medical emergencies. The GeoBlue staff has years of experience with international medical assistance and has close working relationships with its International Provider Community.

Unsurpassed Member Services

Direct Pay—Paperless, Cashless, Convenient

GeoBlue members can avoid paying out of pocket for care by using Direct Pay. Through this service participating providers outside the U.S. bill GeoBlue directly for covered medical treatment.

Personal Solutions

GeoBlue Navigator members enjoy a full range of Personal Solutions. Your online tool kit allows you to check medical symptoms, understand your health risks and access personalized prevention and wellness recommendations.

Informed Choice—To Get the Care You Need

If members experience unanticipated medical problems, they can request local, regional or global treatment alternatives through the Informed Choice service.

GeoBlue Travels with You

While traveling across the globe with the GeoBlue Mobile app, members can quickly and conveniently find and access quality care using your mobile device.





Why Choose the GeoBlue Navigator Plan?

A Recognized Leader

GeoBlue is a recognized leader in international health insurance and medical assistance services, serving hundreds of thousands of world travelers annually.

Highest Standards of Service

GeoBlue meets the highest expectations of quality. GeoBlue has set new standards for international assistance services and for applying stringent criteria when contracting with doctors and hospitals outside the U.S.

World-Class Healthcare

GeoBlue has the expertise and capability to meet any medical need efficiently and effectively. This can be a matter of support for a minor issue or help for a major issue, no matter where you are.

Group Quotes Available

Missionary or volunteer organizations can cover groups of any size with Global Navigator.

- Group plan designs can be customized and are HIPAA compliant.

Top 10 Advantages over Competing Plans

1. Plan provides an unlimited annual and lifetime maximum.
2. For medical care outside the U.S., members are free to see any provider and their benefits will remain the same.
3. Deductible is waived for outpatient office visits with contracted physicians.
4. The pre-existing conditions exclusion can be waived with proof of prior creditable coverage.
5. No waiting period associated with any preventive services.
6. No pre-certification requirements.
7. No exclusion for terrorism.
8. No exclusion for specified conditions in the first 6 months.
9. Our providers bill GeoBlue directly, which eliminates paperwork hassles.
10. The strength of the Blue brand. GeoBlue is an independent licensee of the Blue Cross and Blue Shield Association.

How the Plan Works

GeoBlue Navigator offers comprehensive benefits and a range of deductible options that allow members to select the right amount of insurance coverage for their budget and lifestyle. For a detailed benefit schedule, please see insert. To calculate your total out-of-pocket expense, add the deductible and coinsurance maximum.

For families, the deductible and coinsurance maximum is a multiple of 2.5.

After 364 days of continuous coverage, Navigator members may re-enroll in a plan that matches their existing benefits.

GeoBlue Navigator Options

Plan	Deductible			Coinsurance Maximum
	Outside U.S.	U.S. In-Network	U.S. Out-of-Network	
0	\$0	\$0	\$0	\$1,000
250	\$125	\$250	\$500	\$2,000
500	\$500	\$500	\$500	\$3,000
1000	\$500	\$1,000	\$2,000	\$4,000
2500	\$1,250	\$2,500	\$5,000	\$8,000
5000	\$2,500	\$5,000	\$10,000	\$10,000

Amounts paid to satisfy a deductible are credited to all other deductibles. For a detailed benefit schedule, please see insert.



How to Apply

Applications are available online or may be initiated by telephone or email. See back cover for details.

A personal check, money order or credit card number must accompany the application and must be sufficient to pay for one month of standard premium. GeoBlue will hold the form of payment until an underwriting decision is made. If your application is accepted, the payment will be applied to your account. Quotes obtained online or by telephone are advisory only. Actual premium is determined by the medical underwriting process.

GeoBlue will review your medical history as provided on the application and may request an Attending Physician's Statement. GeoBlue publishes standard premium rates for non-smokers. Smokers and other applicants with certain medical histories may be offered a plan at a higher rate. Not all applicants will be accepted. Your effective date of insurance will be on the 1st or 15th day of the month following underwriting approval.

Member Welcome Kit

When your application is accepted, GeoBlue will mail you and any family members covered under the plan a Welcome Kit with identification cards, a certificate of insurance and instructions on how to register online. Procedures for filing a claim or requesting direct payment of participating providers will also be included.

About the Global Citizens Association

The Global Citizens Association is a national organization dedicated to promoting the interests of international travelers. Established more than 24 years ago, the GCA, is a not for profit affinity association located in Washington D.C., established to enhance global learning and lifestyles through safe and healthy world travel; to provide its members with useful international travel services and to make group international travel and health insurance coverages available to its members.

Visit the GCA website (<https://www.gcassociation.org/>) to learn about the association's programs. This insurance is available only to GCA members and by enrolling, you will become a member. Association enrollment fees are included in the amounts charged for the insurance. You are not obligated to purchase any services or products from the GCA. The GCA is not affiliated with any insurance company.

Eligibility

GeoBlue Navigator is designed for extended living abroad. You can choose to enroll in a new plan when your existing plan expires. When you do, there are no medical questions and premium rates do not change based on your individual claims history. Your new rate will be the same as all persons covered in your rating class.

How Coverage Ends

Your coverage ends on the earlier of:

1. The last day of the month after the date the Insured Person is no longer eligible;
2. The end of the last period for which premium has been paid;
3. The date the Policy terminates;
4. The date of fraud or misrepresentation of a material fact by the Insured Person, except as indicated in the Time Limit on Certain Defenses provision.

Extension of Benefits

If an Insured Person is Totally Disabled on the date of termination of the Policy, coverage will be extended until the earlier of:

1. The date payment of the maximum benefit occurs;
2. The date the Insured person ceases to be Totally Disabled; or
3. The end of 90 days following the date of termination.

Pre-existing conditions

The GeoBlue Navigator plan does not cover services for treatment of a medical condition for which medical advice, diagnosis, care, or treatment was recommended or received during 365 days immediately preceding the member's eligibility date.

Creditable coverage

The 365-day pre-existing conditions period can be reduced or eliminated if you have been covered by a creditable group or individual health insurance plan.

For benefits, exclusions, eligibility and other important information, please see inserts.

- ● GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association. GeoBlue is the administrator of coverage provided under insurance policies issued by 4 Ever Life International Limited, Bermuda, an independent licensee of the Blue Cross Blue Shield Association.

Contact Us:

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Monument, CO 80132

Visit www.missiontripinsurance.com

Email orders@missiontripinsurance.com

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GeoBlue 
Cover Your World

GeoBlue Navigator Benefit Schedule

GeoBlue Navigator has three tiers of coinsurance: 100% outside the U.S., 80% in-network in the U.S., 60% out-of-network inside the U.S. All GeoBlue Navigator plans have an unlimited lifetime maximum and a \$250,000 maximum benefit for emergency medical evacuation. The Out-of-Pocket Maximum is calculated by adding the deductible and coinsurance maximum together. Please refer to the chart on page 3 of brochure.

Benefits	Outside the U.S.	In-Network, U.S.	Out-of-Network, U.S.
Primary and Preventive Care – Deductible is Waived			
Primary Care Office Visits - as many as 8 visits per Calendar Year	All except a \$10 copay per visit	All except a \$30 copay per visit	60% to Coinsurance Maximum then 100%
Preventive Care for Babies/Children: (Birth to Age 18) for Office Visits/Examination and Immunizations, Lab work & X-rays	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Preventive Care For Adults: (Age 19 and Older) for Routine Pap Smears, Annual Mammogram and PSA For Men	100%	80% to Coinsurance Maximum then 100%	80% to Coinsurance Maximum then 100%
Annual Physical Examination Health Screening	100% Maximum Covered Expense of \$250 and limited to one per Calendar Year.	80% to Coinsurance Maximum then 100% Maximum Covered one per Calendar Year.	60% to Coinsurance Maximum then 100% Maximum Covered Expense of \$250 and limited to one per Calendar Year.
Outpatient Services – Insurer pays after the Deductible is Met			
Outpatient Medical Care	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Inpatient Hospital Services – Insurer pays after the Deductible is Met			
Surgery, X-rays, In-hospital doctor visits, Organ/Tissue Transplant	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Inpatient Medical Emergency	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Professional Services-Surgery, Anesthesia, Radiation Therapy, In-Hospital Doctor Visits, Diagnostic X-ray and Lab Work.	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Other Services – Insurer pays after the Deductible is Met, unless noted			
Ambulatory Surgical Center	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Physical/Occupational Therapy/Medicine	Deductible is waived. Covered Expenses up to \$50 per visit, and as many as 6 visits per Calendar Year		
Ambulance Service	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Durable Medical Equipment	100%	80% to Coinsurance Maximum then 100%	60% to Coinsurance Maximum then 100%
Mental, Emotional or Functional Nervous Disorders, Alcoholism or Drug Abuse			
Inpatient Mental Health	100% up to 60 days	80% up to 60 days	60% up to 60 days
Outpatient Mental Health	75% up to 40 visits/ 60% thereafter	75% up to 40 visits/ 60% thereafter	75% up to 40 visits/ 60% thereafter
Inpatient Substance Abuse	100% up to 60 days detox	80% up to 60 days detox	60% up to 60 days detox
Outpatient Substance Abuse	75% up to 40 visits/ 60% thereafter	75% up to 40 visits/ 60% thereafter	75% up to 40 visits/ 60% thereafter
Outpatient Prescription Drugs	100% of actual charge up to an annual maximum of \$5,000. Maximum 90 - day supply	100% of actual charge up to an annual maximum of \$5,000. Maximum 90 - day supply	100% of actual charge up to an annual maximum of \$5,000. Maximum 90 - day supply
Dental Care Required Due to an Injury	100% of Covered Expenses up to \$500 per Calendar Year maximum	100% of Covered Expenses up to \$500 per Calendar Year maximum	100% of Covered Expenses up to \$500 per Calendar Year maximum
Global Travel Benefits – Insurer Waives Deductible			
Accidental Death and Dismemberment	Deductible is waived. Maximum Benefit: Principal Sum up to \$10,000		
Repatriation of Mortal Remains	Deductible is waived. Maximum Benefit up to \$25,000		
Emergency Medical Transportation	Deductible is waived. Maximum Lifetime Benefit for all Evacuations up to \$250,000		

This is intended to be a sample benefit schedule.

- GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross and Blue Shield Association. GeoBlue is the administrator of coverage provided under insurance policies issued by 4 Ever Life International Limited, Bermuda, an independent licensee of the Blue Cross Blue Shield Association.

GeoBlue Navigator Missionary Frequently Asked Questions

1. Who is eligible to buy a GeoBlue NavigatorSM plan?

All U.S. citizens and U.S. permanent residents living abroad who are 75 or younger at the time of application are eligible to apply for coverage. All legal residents of the U.S. (citizens and permanent residents) are eligible if they apply from the U.S.. The Eligible Member must be scheduled to reside outside of his/her country for at least 3 months per year of coverage and must be involved in Missionary activity.

2. How do I qualify for maternity benefits?

After 364 days of continuous coverage, GeoBlue Navigator members may apply for a new plan that covers maternity costs in the same way as all other medical conditions.

3. Will my policy automatically renew? At what rate?

You can enroll in a GeoBlue Navigator plan up to age 75. The policy does not automatically renew upon your request. You will be notified of your new plan rate at least 30 days prior to your policy expiration date. You must confirm your new policy rate in writing or by accepting the rate when logged in to our secure website. Plan rates are based on age at time of enrollment and are impacted by medical inflation. You will not be asked any medical questions and your personal health history will not determine your new rate. GeoBlue Navigator rates are standard rates for all members re-enrolling.

4. When does my coverage end?

We may terminate your coverage if:

You no longer meet the eligibility requirements; or you fail to pay your premium; or we discover that you committed fraud or misrepresented a material fact to us, except as indicated in the time limit of certain defenses provision; or we terminate the plan in your geographic service area.

5. Who is the insurer?

GeoBlue Navigator is underwritten by 4 Ever Life International Limited (4ELI). 4ELI is an independent licensee of the Blue Cross and Blue Shield Association and a wholly owned subsidiary of BCS Financial Corporation. BCS is owned by a consortium of Blue Cross and Blue Shield plans and the Blue Cross Blue Shield Association. 4 Ever Life International Limited is an A.M. Best "A-" rated (Excellent) carrier.

6. Will my pre-existing condition be covered under a GeoBlue Navigator plan?

If you were previously covered by a primary health plan that issues you a Certificate of Creditable Coverage, GeoBlue will credit you for this prior coverage. The number of months of coverage shown on the Certificate will reduce or eliminate the 12-month pre-existing condition waiting period. If you have 12 or more months of creditable coverage, your waiting period will be eliminated. If you have less than 12 months creditable coverage, your waiting period will be reduced by the number of months you had creditable coverage. For example, if you have 2 months of creditable coverage, your waiting period will be reduced from 12 months to 10 months.

continued...

7. **Am I guaranteed to be issued GeoBlue Navigator coverage if I apply?**

No, GeoBlue Navigator is not a guaranteed issue plan. Each application is medically underwritten.

Your application may be

- 1) accepted,
- 2) accepted with a rate increase due to your health status, or
- 3) denied.

8. **Is the quote I receive binding?**

No. The quote you receive may not apply if 1) you misstated a material fact on your application, or 2) we increase the rate due to your health status.

9. **What is the Global Citizens Association?**

The Global Citizens Association (GCA) is a non-profit association located in Washington, D.C. serving the needs of the globally mobile with the goal of helping its members successfully pursue international living experiences through safe and healthy world travel that increase cross-cultural understanding.

Founded in 1994 to serve international students, the GCA has grown to encompass world travelers and expatriates in all corners of the globe. The Association has sponsored GeoBlue and affiliated insurance programs for travelers for more than 25 years and is organized as a not-for-profit corporation under the laws of the District of Columbia. More information can be found here: <http://www.gcassociation.org>.

10. **Does this plan meet the Affordable Care Acts requirement for Minimum Essential Coverage?**

This plan does not provide Minimum Essential Coverage and therefore does not meet the requirements of the Affordable Care Act (ACA). Coverage by the insurer can be 1) accepted, 2) accepted with a rate increase, or 3) denied based on the health history of the applicant(s). A waiting period for pre-existing conditions applies unless you have 12 months of prior creditable coverage. There is no tax penalty for purchasing this policy if you are outside the U.S. for 330 days or more in a calendar year.

11. **What about accessing participating providers?**

GeoBlue's Global Health and Safety services help members identify, access and pay for quality healthcare all over the world, including a contracted community of elite providers in 180 countries. Members can access these carefully selected providers and arrange for the bills to be sent directly to GeoBlue. Please note that in the U.S. a member can simply show his/her ID card at time of service and participating providers will only bill the member for any applicable deductible or copayment. Members have access to the Blue Cross and Blue Shield Network. Whether overseas or in the U.S., members can choose to use any doctor or hospital. Members are never restricted to a network. Please see the benefit schedules to see how coinsurance may apply.

12. **How do I order my prescriptions when I need them?**

Your GeoBlue Navigator plan comes with outpatient prescription drug coverage up to 100% of actual charges up to an annual max of \$5,000 (90 day Max – Insurer waives deductible).

To access prescription drugs at a retail pharmacy inside of the U.S.;

Locate a participating pharmacy online at www.universalrx.com. Present your medical ID card to the participating pharmacy and pay your copay.

To access mail order prescription drugs outside the U.S.;

Outside of the U.S. your benefit is pay and claim. To obtain a claim form, you may:

Visit Online: www.expatps.com to download a claim form.

Email: Email an EPS representative at eps@universalrx.com and request an electronic order form be emailed directly to you.

Phone: Call an EPS representative to order within the U.S. at 1.540.777.1450; Hours: 8:30a.m.–5:00p.m. EST, USA.

Navigator Excluded Services

The plan does not provide benefits for:

1. Hospitalization, services and supplies that are not Medically Necessary.
2. Services or supplies that are not specifically mentioned in this Certificate
3. Services or supplies for any illness or injury arising out of or in the course of employment for which benefits are available under any Workers' Compensation Law or other similar laws whether or not you make a claim for such compensation or receive such benefits. This exclusion does not apply to Protection and Indemnity Insurance for Marine crew members.
4. Services or supplies that are furnished to you by the local, state or federal government and for any services or supplies to the extent payment or benefits are provided or available from the local, state or federal government whether or not that payment or benefits are received.
5. Conditions caused by or contributed by: (a) An act of war; (b) The inadvertent release of nuclear energy when government funds are available for treatment of Illness or Injury arising from such release of nuclear energy; (c) An Insured Person participating in the military service of any country; (d) An Insured Person participating in an insurrection, rebellion, or riot; (e) Services received for any condition caused by an Insured Person's commission of, or attempt to commit a felony or to which a contributing cause was the Insured Person being engaged in an illegal occupation; (f) An Insured Person voluntarily using illegal drugs; intentionally taking over the counter medication not in accordance with recommended dosage and warning instructions; and intentionally misusing prescription drugs.
6. Services or supplies that do not meet accepted standards of medical and/or dental practice.
7. Investigational Services and Supplies and all related services and supplies.
8. Custodial Care Service.
9. Routine physical examinations, unless otherwise specified in this Certificate.
10. Services or supplies received during an Inpatient stay when the stay is primarily related to behavioral, social maladjustment, lack of discipline or other antisocial actions that are not specifically the result of Mental Illness.
11. Cosmetic Surgery and related services and supplies, whether or not for psychological purposes, except for the correction of congenital deformities or for conditions resulting from accidental injuries, scars, tumors or diseases that occur after your Coverage Date.
12. Services or supplies for which you are not required to make payment or would have no legal obligation to pay if you did not have this or similar coverage.
13. Charges for failure to keep a scheduled visit or charges for completion of a Claim form.
14. Personal hygiene, comfort or convenience items commonly used for other than medical purposes, such as air conditioners, humidifiers, physical fitness equipment, televisions and telephones.
15. Special braces, splints, specialized equipment, appliances, ambulatory apparatus, battery implants, except as specifically mentioned in this Certificate.
16. Care and treatment by a Chiropractor.
17. Care and treatment by an Acupuncturist.
18. Orthopedic shoes (except when joined to braces) or shoe inserts, including orthotics.
19. Blood derivatives that are not classified as drugs in the official formularies.
20. Eyeglasses, contact lenses or cataract lenses and the examination for prescribing or fitting of glasses or contact lenses or for determining the refractive state of the eye, except as specifically mentioned in this Certificate.
21. Treatment to change the refraction of one or both eyes (laser eye correction), including refractive keratectomy (RK) and photorefractive keratectomy (PRK).
22. Treatment of flat foot conditions and the prescription of supportive devices for such conditions and the treatment of subluxations of the foot.
23. Routine foot care, except for persons diagnosed with diabetes, including the cutting or removal of corns or calluses; the trimming of nails, routine hygienic care and any service rendered in the absence of localized Illness, Injury or symptoms involving the feet.

24. Immunizations, unless otherwise specified in this Certificate.
25. Maintenance Occupational Therapy, Maintenance Physical Therapy and Maintenance Speech Therapy.
26. Hearing aids or examinations for the prescription or fitting of hearing aids unless otherwise specified in this Certificate.
27. Services and supplies to the extent benefits are duplicated because the spouse, parent and/or child are employees of the Group and each is covered separately under this Certificate.
28. Diagnostic Service as part of routine physical examinations or check-ups, premarital examinations, determination of the refractive errors of the eyes, auditory problems, surveys, case finding, research studies, screening, or similar procedures and studies, or tests which are Investigational unless otherwise specified in this Certificate.
29. Procurement or use of prosthetic devices, special appliances and surgical implants which are for cosmetic purposes, the comfort and convenience of the patient, or unrelated to the treatment of a disease or injury.
30. Services and supplies rendered or provided for human organ or tissue transplants other than those specifically named in this Certificate.
31. Investigational or experimental organ transplantation including animal to human organ transplants.
32. Consultations performed by you, your spouse, parents or children.
33. Charges for the services of a standby Physician.
34. Treatment for overweight conditions other than for morbid obesity.
35. Treatment for hair loss.
36. Growth Hormone treatment.
37. Dental treatment, dental surgery, dental prostheses and orthodontic treatment unless otherwise specified in this Certificate.
38. Dental Implants: Dental materials implanted into or on bone or soft tissue or any associated procedure as part of the implantation or removal of dental implants.
39. Medical aids unless otherwise specified in this Certificate.
40. Services and treatment related to elective abortions.
41. Sterilization or the reversal of sterilization, unless otherwise specified in this Certificate.
42. All services related to the evaluation or treatment of fertility and/or Infertility, including, but not limited to, all tests, consultations, examinations, medications, invasive, medical, laboratory or surgical procedures including sterilization reversals and In vitro fertilization.
43. Cryopreservation of sperm or eggs.
44. Sex change operations.
45. Treatment of sexual dysfunction or inadequacy.
46. Non-prescription drugs.
47. Educational services except as specifically provided or arranged by the Insurer.
48. Nutritional counseling or food supplements, except for treatment of Phenylketonuria (PKU) and other inherited metabolic diseases and diabetes.
49. Charges by a provider for telephone consultations.
50. Loss arising from:
 - a. Participating in any professional sport, contest or competition;
 - b. Skin/scuba diving.

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