

Supplemental Rider Plan

Offers additional coverage for base plans (Standard Gold Plan & Executive Gold Plan)

Schedule of Benefits

SUPPLEMENTAL RIDER

DIAGNOSTIC PROCEDURES

Laboratory & X-ray, Ultra-sound:

Annual Limit per Member

100% of Cost

CT Scan, MRI & Other Specialised Tests

100% of Cost

PRESCRIPTION DRUGS

Annual Limit per Member

Covered under Base Plan

HOSPITALISATION

Hospital R & B (Semi-private room)

100% of R&C

No. of Days per Disability

120 + MM

Public Hospital Ward

100% up to \$1,000

Hospital Miscellaneous

100% of R&C

Emergency Accident and Outpatient

100% of R&C

In Hospital Doctor's Visit (non-surgical)

100% of R&C

No. of Days per Disability

Unlimited

Private Nursing (per 8 hour shift)

80% of R&C

Intensive Care (per day)

80% of R&C

No. of Days per Annum

30

SURGERY

Maximum Surgeon's Fee

80% of R&C

Maximum Assistant Surgeon's Fee

33% of R&C

Maximum Anaesthetist's Fee

40% of R&C

Root Canal

80% of R&C

Permanent Crowning as a Result of Root Canal

Covered under Base Plan

MATERNITY - In lieu of all other Benefits

NORMAL DELIVERY

In- Hospital Expenses

\$15,000

Other Expenses including Pre & Post Natal Care

\$15,000

CAESAREAN SECTION

In- Hospital Expenses

\$15,000

Other Expenses including Pre & Post Natal Care

\$45,000

Miscarriage

\$15,000

Schedule of Benefits

SUPPLEMENTAL RIDER

MISCELLANEOUS

Physiotherapy (only if hospitalized)	Covered under Base Plan
Speech Therapy	Covered under Base Plan
Occupational Therapy - reimbursement only	Covered under Base Plan
Immunization (to age 13) - per contract year	80% of Cost
HPV Vaccine (ages 12-26 years) - reimbursement only	Covered under Base Plan
Tubal Ligation / Vasectomy	80% of cost up to \$10000
Radiotherapy	80% of R&C
Chemotherapy	80% of R&C
Renal Dialysis	80% of R&C
Hearing Aid - Each Ear - Once every 3 years	80% of cost to \$24,000
Local Ambulance	80% of R&C

ANNUAL MAJOR MEDICAL MAXIMUM

Local Deductible	\$2,500,000
Room & Board - Local	\$6,000
	N/A
	N/A

OVERSEAS EMERGENCY

OVERSEAS NON - EMERGENCY CARE

(Preauthorisation required)

Deductible - Overseas (Non - Emergency)	\$25,000
Daily Room & Board Maximum	US\$100
Other Medical Expenses	80% of R&C
Air Transportation	N/A

DENTAL/OPTICAL

	N/A
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Monthly Rates

SUPPLEMENTAL RIDER

Member Only	\$1,368
Member + One Dependent	\$2,734
Member + 2 or more Dependents	\$3,828

Rates include GCT

Rates seen are valid for June 1, 2021 - May 31, 2022



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