



Looking After Life since 1847
A Member of the Guardian Holdings Group

Mission Statement

Guardian Life of the Caribbean Limited (“GLOC”), an AM Best A- rated (excellent) company is a public company established on 1st January, 1960.

Our Mission is as follows:

We commit to build on our tradition of integrity by being the dominant provider of personal financial services in the markets where we operate in terms of financial strength, quality service and professionalism, in a manner beneficial to our customers, agents, employees, shareholders and the wider community.

Access and affordability of quality Health care is a growing concern for everyone. As part of its mission to alleviate the worry and stress associated with health care, GLOC has formulated a plan specifically for residents.

This comprehensive medical plan is tailored to allow employers to give workers control over the maintenance or recovery of their health while taking care of the financial burdens which inevitably arise.

- ◆ A choice of Major Medical Maximum Benefit
- ◆ Preventative Care
- ◆ Immunizations
- ◆ Maternity and Postnatal Care
- ◆ In-Patient services
- ◆ Outpatient Services Including Surgery
- ◆ Doctor/ Specialists’ visits
- ◆ Emergency Treatment
- ◆ Ground and Emergency Air Ambulance
- ◆ Durable Medical Equipment and Prosthesis
- ◆ Laboratory Services
- ◆ Prescription Drugs
- ◆ Chemo/ Radiation and Renal Dialysis Therapy
- ◆ Psychiatric Care, Substance Abuse and Mental Illness Treatment
- ◆ Private Nursing
- ◆ Dental
- ◆ Vision
- ◆ Emergency Overseas Benefit

Submit claims to:

ALLIANCE INSURANCE SERVICES LIMITED
P.O. Box PW 5236, Edwin Wallace Rey Drive
George Hill, Anguilla, B.W.I.

Tel: (264) 498 7788 ◆ Fax: (264) 498 7780 ◆ Cell: (264) 235 2475
Email: info@aisanguilla.com
www.aisanguilla.com



Health Insurance Policy

Provided by:



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Presented by:

Alliance Insurance Services Limited

CorCare network and claims handled by:
CorVel Corporation

Subject to the definitions, benefit limitations, and exclusions detailed in the Policy wording and Schedule of Benefits. Covered medical expenses are based on usual customary and reasonable charges for medically necessary treatment.		NEMWIL			NEMWIL FIRST CHOICE			NEMWIL SMART CHOICE			
		Lifetime Maximum - \$2,000,000.00			Lifetime Maximum - \$1,000,000.00			Lifetime Maximum - \$500,000.00			
PPO – (Preferred Provider Organization) WW – (Worldwide)	PR – (Puerto Rico) USA – (United States of America)	NON-PPO	PPO USA/WW	PPO ANG/BVI/PR	NON-PPO	PPO USA/WW	PPO ANG/BVI/PR	NON-PPO	PPO USA/WW	PPO ANG/BVI/PR	
POLICY YEAR DEDUCTIBLE	Individual	\$500	\$250	\$250 *	\$2,000	\$1,000	\$500 **	\$2,000	\$1,000	\$500 **	
	Family	\$1,000	\$500	\$500	\$4,000	\$2,000	\$1,000	\$4,000	\$2,000	\$1,000	
MAXIMUM OUT OF POCKET CAP	Individual	No Cap	\$2,000	\$1,000	No Cap	\$2,000	\$1,000	No Cap	\$2,000	\$1,000	
	Family	No Cap	\$4,000	\$2,000	No Cap	\$4,000	\$2,000	No Cap	\$4,000	\$2,000	
NON PRECERTIFICATION PENALTY - %		50%	35%	35%	50%	35%	35%	50%	35%	35%	
HOSPITALISATION – ROOM & BOARD		70%	90%	90%	50%	80%	80%	50%	80%	80%	
REHABILITATION		70%	90%	90%	50%	80%	80%	50%	80%	80%	
SURGEON'S FEES		70%	90%	90%	50%	80%	80%	50%	80%	80%	
EMERGENCY ROOM		70%	90%	90%	50%	80%	80%	50%	80%	80%	
DIAGNOSTIC TESTING BENEFIT MRI, CT SCANS, ENDOSCOPY, CARDIOVASCULAR STUDIES		70%	90%	90%	50%	80%	80%	50%	80%	80%	
		NO ANNUAL MAXIMUM			NO ANNUAL MAXIMUM			\$1,500 (ANNUAL MAXIMUM)			
PRESCRIPTION DRUGS		70%	80%	80%	50%	60%	60%	50%	60%	60%	
Annual Maximum		\$2,500			\$1,500			\$1,000			
SECOND SURGICAL OPINION		70%	90%	90%	50%	80%	80%	50%	80%	80%	
DOCTORS & SPECIALIST VISITS		70%	80%	80%	50%	60%	60%	50%	60%	60%	
Annual Maximum		No Maximum			\$1,500			\$1,000			
ANNUAL PHYSICAL		100%	100%	100%	100%	100%	100%	100%	100%	100%	
Annual Maximum		AS PER POLICY SCHEDULE OF BENEFITS			AS PER POLICY SCHEDULE OF BENEFITS			AS PER POLICY SCHEDULE OF BENEFITS			
CHIROPRACTIC SERVICES		70%	90%	90%	50%	80%	80%	NOT COVERED			
Annual Maximum		\$320			\$320						
PRIVATE DUTY NURSING		70%	90%	90%	50%	80%	80%	50%	80%	80%	
Annual Maximum		\$1,500			\$1,500			\$1,500			
ORGAN TRANSPLANTS		Lifetime Maximum \$250,000	70%	90%	90%	50%	80%	80%	50%	80%	80%
GROUND, AIR AMBULANCE & AIRFARE BENEFIT (AIRFARE BENEFIT - MAXIMUM 2 TRIPS PER YEAR)			100%	100%	100%	100%	100%	100%	100%	100%	
GROUND Annual Maximum			\$150			\$150			\$150		
AIR Annual Maximum			\$20,000			\$15,000			\$15,000		
AIRFARE Annual Maximum			\$200			\$200			\$200		
RADIOTHERAPY & CHEMOTHERAPY		70%	90%	90%	50%	80%	80%	50%	80%	80%	
Annual Maximum		\$100,000			\$50,000			\$50,000			
AIDS-HIV		70%	90%	90%	50%	50%	80%	50%	50%	80%	
Annual Maximum		\$5,000			\$5,000			\$5,000			
Lifetime Maximum		\$15,000			\$15,000			\$15,000			
PHYSICAL THERAPY		70%	90%	90%	50%	80%	80%	50%	80%	80%	
Annual Maximum		\$600			\$600			\$600			
MATERNITY subject to 12 months waiting period		90%	90%	90%	80%	80%	80%	80%	80%	80%	
Maximum Per Pregnancy		\$6,000			\$4,000			\$4,000			
BIRTH ABNORMALITIES		70%	90%	90%	50%	80%	80%	50%	80%	80%	
Maximum		\$10,000			\$10,000			\$10,000			
PSYCHIATRIC CARE		50%	50%	50%	50%	50%	50%	50%	50%	50%	
Annual Maximum		\$10,000			\$10,000			\$10,000			
Lifetime Maximum		\$25,000			\$25,000			\$25,000			
ALCOHOLISM & SUBSTANCE ABUSE		70%	90%	90%	50%	80%	80%	50%	80%	80%	
Annual Maximum		\$5,000			\$2,500			\$2,500			
Lifetime Maximum		\$25,000			\$15,000			\$10,000			
VISION		Annual Maximum \$400	80%			80%			80%		
DENTAL – Diagnostic/ preventative or basic restoration		80%			80%			80%			
DENTAL – Major or replacement		80% (ANNUAL MAXIMUM \$1,500)			80% (ANNUAL MAXIMUM \$1,000)			80% (ANNUAL MAXIMUM \$1,000)			
Orthodontic		80% (LIFETIME MAX IS \$1,500)			80% (LIFETIME MAX IS \$1,000)			80% (LIFETIME MAX IS \$1,000)			

* WAIVED IN ANGUILLA, ST. MAARTEN/ST. MARTIN, BVI AND PUERTO RICO

** WAIVED IN ANGUILLA, ST. MAARTEN/ST. MARTIN ONLY