CARICARE Advantage

SCHEDULE OF MEDICAL BENEFITS LAW ASSOCIATION OF TRINIDAD AND TOBAGO MEMBERS AGE 61-99

CARICARE ADVANTAGE	Benefit <u>Maximums</u>
Maximum Benefit Benefit Period Deductible per Calendar Year Deductibles per Family Co-Insurance Percentage Carry Over Provision	\$500,000.00 LIFETIME \$300.00 3 80% Last 3 months of Cal Yr
Daily Room & Board: (quoted in TT dollars) Overseas (Non-Caricom) Locally (Caricom) Intensive Care Benefit (Non-Caricom) Intensive Care Benefit (Caricom)	\$4,000.00 \$600.00 \$4,000.00 \$600.00
Private Duty Nursing Maximum Per 8-hour shift - Private Residence (Day) Maximum Per 8-hour shift - Private Residence (Night) Maximum Per 8-hour shift - Hospital (Night)	\$75.00 \$100.00 \$120.00
Doctor's Visits (Office, Home, Hospital) Specialist & Psychiatrist Visits (Office, Home, Hospital)	\$150.00 \$250.00
Psychologist Benefit: Maximum per treatment Maximum number of treatments per calendar year Co-Insurance Percentage	\$150.00 20 80%
Physiotherapy Benefit: Maximum per treatment Maximum number of treatments per calendar year Co-Insurance Percentage	\$150.00 20 80%
Airfare Benefit: Maximum per calendar year Maximum Number of Trips per Calendar Year Co-Insurance Percentage	\$4,000.00 2 80%
Emergency Air Ambulance Benefit Maximum Number of Trips per Calendar Year Benefit Payment	TTD\$100,000.00 2 100%
Emergency Local Ground Ambulance Benefit Benefit Payment	100%
Repatriation of Mortal Remains Benefit Payment	100%
Radiotherapy/ Chemotherapy Benefit/ Dialysis	\$250,000.00
Congenital Birth Defects	\$250,000.00
Surgical Benefit (Reasonable & Customary fees apply) Anaesthetic Benefit Prescribed Drugs Durable Medical Equipment (On initial equipment only) Miscellaneous Benefit Diagnostic Benefit	80% after Deductible 25% of Surgical R&C 80% after Deductible 80% after Deductible 80% after Deductible 80% after Deductible
Internal Plan Limits Mental & Nervous Acquired Immune Deficiency Syndrome Transplants	<u>Lifetime Maximums</u> \$25,000.00 \$50,000.00 \$250,000.00
AGE LIMIT FOR COVERAGE:	99TH BIRTHDAY

Effective: April 01, 2019

CARICARE Advantage

SCHEDULE OF MEDICAL BENEFITS LAW ASSOCIATION OF TRINIDAD AND TOBAGO MEMBERS AGE 61-99

Preventative Care Benefits

Male Wellness* \$750.00

Female Wellness* \$750.00

Benefits are provided for routine examinations that may include any of the following:

- 1. Annual Physical Examination including:
 - Medical Exam
 - Chest X-Ray
 - Complete Urinalysis
 - ➤ Blood Profile HBA1C, CBC, Lipid Profile, Kidney Function, Liver Function
- 2. Annual Gynecological and Pap Smear test
- 3. Annual Mammogram
- 4. Prostate Examination and PSA
- 5. Annual CA 125 Test (Women age 35 & over)

 6. Colonoscopy (over age 50, and every 10 years) and Annual Fecal immunochemical blood test (FiT)

 7. Immunizations:

 \$350.00 limit
 \$750.00 limit
 \$300.00 limit
 - > Adult Immunizations Yellow Fever, Chicken Pox and Tetanus
- 8. Doctor's visit One Doctor's visit is payable on ONE Preventative Care Benefit per Annum.

All services are subject to overall Annual Wellness Benefit of TT\$750.00

Effective: April 01, 2019

^{*} Available to all full time employees and their covered spouses

CARICARE Advantage **SCHEDULE OF MEDICAL BENEFITS**

LAW ASSOCIATION OF TRINIDAD AND TOBAGO **MEMBERS AGE 61-99**

Benefit DENTAL: **Maximums** Maximum Benefit per Calendar Year: \$1,500.00 \$100.00 Deductible per Calendar Year: Level 1 - Preventative 80% Level 2 - Restorative 80% 80% Level 3 - Major Restorative VISION: Maximum Benefit per Calendar Year: \$1,000.00 Deductible per Calendar Year: \$100.00 Co-Insurance Percentage 80% Contacts Paid under Vision Max AGE LIMIT FOR COVERAGE: 99TH BIRTHDAY

CARICARE Advantage PROPOSED SCHEDULE OF BENEFITS LAW ASSOCIATION OF TRINIDAD AND TOBAGO

OVERSEAS TREATMENT BENEFIT

Percentag		paid by Sagicor Life Inc.
Type of Eligible Expense	Core Network or Other Provider	
	% Paid	Comment
Emergency Treatment	Co-ins. on plan	R & C for the nearest location for treatment
Pre - Certified	Co-ins. on plan	R & C for the nearest location for treatment
Referred overseas and Pre - Certified	Co-ins. on plan	R & C for the nearest location for treatment
Not Approved	60%	R & C for the nearest location for treatment
 Not pre-certified & Non-Emergency use of the ER All Procedures that can be performed locally 	Reasonable and Customary charges within the locality of the Group Plan.	