

EVERMORE

BENEFITS

#foreverwithyou

2026



ever®

SUMMARY OF BENEFITS

Unless otherwise stated, benefits are offered on a per insured, per policy year basis, with the chosen deductible applied. All amounts are in U.S. Dollars (USD). Benefits are limited to covered medical expenses under the policy and are subject to usual, customary, and reasonable (UCR) charges for the geographic area where the expenses were incurred.

■ DEDUCTIBLE OPTIONS

	I	II	III	IV	V
Outside the U.S.	US\$500	US\$2,000	US\$5,000	US\$10,000	US\$20,000
Inside the U.S.*	US\$1,000				

*For plans that exclude coverage in the U.S., this deductible does not apply.

■ PLAN INFORMATION

BENEFIT	COVERAGE
Maximum coverage per insured, per policy year	US\$ 5,000,000
Age limit	Up to 79 years old
Waiting period	30 days
Coverage outside the U.S.	100%* with free choice of doctors and hospitals
Coverage inside the U.S.	<ul style="list-style-type: none"> • 100%* within the EVER® Network • Outside the EVER® US Network: Coverage 70%, with a daily maximum rate of US\$800 for a standard room and US\$1,500 for intensive care • Emergency medical treatment: 100%* up to policy limits

■ HOSPITAL BENEFITS

BENEFIT	COVERAGE	
Standard private room	100%*	
Intensive Care Unit	100%*	
Expenses for an accompanying adult of a hospitalized insured	Under 18 years old	US\$150 per night, up to 45 nights
	Over 18 years old	100%*, up to 30 nights
Prescribed medications during hospitalization	100%*	
Physical therapy and rehabilitation	100%*	
Psychiatric treatments	US\$2,000	

(*)These benefits are subject to the usual, customary and reasonable (UCR) charges of the geographic area.

■ OUTPATIENT BENEFITS

BENEFIT	COVERAGE
Emergency room care	100%*
Visits to doctors and specialists	100%*
Home visits by doctors and specialists	100%*
Prescribed medications	US\$55,000
Home nurse or therapist care	US\$12,000
Preventive medical check-up per insured, no deductible (after a 10-month waiting period)	OPTIONS I & II • US\$200 up to 17 years old • US\$250 from 18 years old
Hearing aids	US\$1,200 lifetime
Alzheimer's disease	100%*
Allergy treatment	100%*
Physical therapy and rehabilitation	US\$12,500

■ GENERAL BENEFITS

These benefits apply equally to both inpatient and outpatient procedures.

BENEFIT	COVERAGE	
Surgeon and anesthesiologist fees	100%*	
Laboratory tests and diagnostic services (blood tests, pathology, X-rays, MRI/CT/PET scans)	100%*	
Oncology (cancer tests, chemotherapy/radiotherapy, medications)	100%*	
Cancer risk-reduction surgery or prophylactic surgery	US\$35,000 lifetime (after a 12-month waiting period)	
Dialysis services	100%*	
Prosthetics and implanted medical devices during surgery	100%*	
Organ transplant (per organ/tissue)	US\$500,000 lifetime, with an additional US\$500,000 available (with rider). Includes live donor expenses	
Durable medical equipment	US\$12,000	
Specialized treatments (occupational therapy, speech therapy, sleep apnea, and other sleep disorders)	US\$3,500	
Congenital conditions	Diagnosed before 18 years old	US\$500,000 lifetime
	Diagnosed after 18 years old	100%*
HIV/AIDS	US\$250,000 lifetime (after a 48-month waiting period)	
Bariatric surgery	US\$5,000 lifetime (after a 24-month waiting period)	
Surgical treatment for symptomatic foot disorders	100%* (after a 24-month waiting period)	
Reconstructive surgery after an accident or illness	Up to the benefit limit	

(*)These benefits are subject to the usual, customary and reasonable (UCR) charges of the geographic area.

■ MATERNITY BENEFITS

10-month waiting period, no deductible

BENEFIT	COVERAGE
Maternity (options I & II)	<ul style="list-style-type: none"> • US\$5,000, no deductible • Includes stem cell extraction and storage
Maternity and newborn complications (options I & II)	US\$500,000 lifetime
Newborn inclusion within 90 days after birth (options I & II)	No medical evaluation if born in a covered maternity

■ MEDICAL EVACUATION BENEFITS

BENEFIT	COVERAGE	
Emergency transportation	Ground ambulance	100%*, no deductible applies
	Air ambulance	US\$65,000, no deductible applies
Return ticket cost for insured and companion after an air ambulance evacuation	US\$550 per insured	
Repatriation or cremation of mortal remains	US\$45,000	

■ OTHER BENEFITS

BENEFIT	COVERAGE
High-risk activities and sports	100%*
Emergency dental treatment due to an accident	100% (treatment within the first 180 days of a covered accident)
Palliative care	100%*
Temporary accident coverage while application is being processed	US\$35,000
Extended free coverage for policy dependents after the policyholder's death	1 year
Deductible waiver/reduction after 3 years without claims	<p>OPTIONS I, II & III</p> <ul style="list-style-type: none"> • Elimination for 1 year if the deductible has not been reached in previous years <p>OPTIONS IV & V</p> <ul style="list-style-type: none"> • 50% reduction if the deductible has not been reached in previous years
Executive check-up	Up to US\$750 (after a 24-month waiting period within the EVER® Prevent network)
ForEVER® Fit	Up to US\$50 per insured, per policy year, via reimbursement
EVER® Expert Medical Review	Unlimited access to world-renowned medical expert second opinions, no deductible applies

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