

PilotCare

Health insurance for pilots and cabin crew



The sky's the limit

PilotCare is a new international healthcare plan designed specifically for airline pilots and cabin crew.

HCI Group provides accesss to private medical care across the globe, meaning wherever the plane lands we can provide health cover.

PilotCare shares all the flexibility on offer from NIMBL Health which comes with a core set of benefits and an overall cap chosen by the customer. Your customers can then choose to add outpatient cover, routine dental cover, and emergency assistance. Maternity cover is available for group schemes.

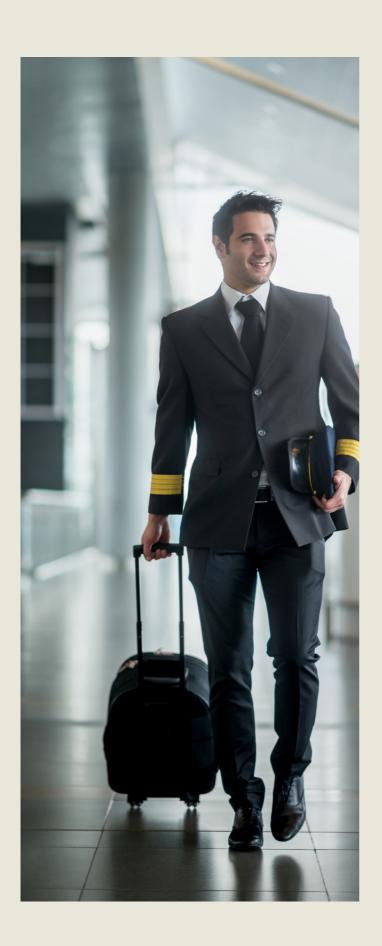
We know that life's priorities can change at short notice and that is why we have made it possible to change levels of cover at each renewal. This means your clients, pilots or cabin crew will have a policy that can continue to serve them year after year.

No hidden limits, no maximum age limit once accepted, and no medical exclusions – even chronic conditions are covered.





Key features



Worldwide private hospital network

Modular plan to suit a range of needs

No upper age limit once accepted

All cancer care covered

Pre-existing conditions covered

24/7 emergency assistance

Private rooms in a selected hospital

Direct settlement of inpatient claims

Chronic conditions covered

Simplified underwriting

Policy changes at renewal

Inpatient (Core)

Benefit cap	CORE 1	CORE 2	CORE 3	CORE 4
Total annual limit	\$250,000	\$1,000,000	\$2,000,000	\$3,000,000
Room and board	\checkmark	\checkmark	\checkmark	\checkmark
Nursing	\checkmark	\checkmark	\checkmark	\checkmark
Prescription drugs and medicines	\checkmark	\checkmark	\checkmark	\checkmark
Physician, specialist, surgeon, and anaesthetist fees	\checkmark	\checkmark	\checkmark	\checkmark
Medical second opinion	\checkmark	\checkmark	\checkmark	\checkmark
Hospital cash benefit	\checkmark	\checkmark	\checkmark	\checkmark
Eye surgery	\checkmark	\checkmark	\checkmark	\checkmark
Organ transplant	\checkmark	\checkmark	\checkmark	\checkmark
Parent & child accommodation	\checkmark	\checkmark	\checkmark	\checkmark
Day patient treatment	\checkmark	\checkmark	\checkmark	\checkmark
Renal dialysis	\checkmark	\checkmark	\checkmark	\checkmark
Hospice or terminal care	\checkmark	\checkmark	\checkmark	\checkmark
Rehabilitation following inpatient treatment	\checkmark	\checkmark	\checkmark	\checkmark
Elective home country treatment	\checkmark	\checkmark	\checkmark	\checkmark
Medical treatment outside the area of cover	\checkmark	\checkmark	\checkmark	\checkmark
Road ambulance transport	\checkmark	\checkmark	\checkmark	\checkmark
Accident and emergency medical treatment outside the area of cover	\checkmark	\checkmark	\checkmark	\checkmark
Emergency care	\checkmark	\checkmark	\checkmark	/



Full cover



Covered with limits



Cancer Treatment (Core)

Benefit cap	CORE 1	CORE 2	CORE 3	CORE 4
Total annual limit	\$250,000	\$1,000,000	\$2,000,000	\$3,000,000
Chemotherapy	\checkmark	\checkmark	\checkmark	\checkmark
Radiotherapy	\checkmark	\checkmark	\checkmark	\checkmark
Oncology	\checkmark	\checkmark	\checkmark	\checkmark
Diagnostic tests	\checkmark	\checkmark	\checkmark	\checkmark
Prescription drugs and medicines	\checkmark	\checkmark	✓	\checkmark

All the above cancer treatment is covered whether inpatient, day patient or outpatient.





Emergency Dental Treatment (Core)

Benefit cap	CORE 1	CORE 2	CORE 3	CORE 4
Total annual limit	\$250,000	\$1,000,000	\$2,000,000	\$3,000,000
Emergency dental treatment, specifically pain relief	\checkmark	\checkmark	\checkmark	\checkmark





Outpatient (Optional)

Benefit cap	STANDARD	OUTPATIENT 1	OUTPATIENT 2	OUTPATIENT 3
Total annual limit	\$0	\$2,500	\$7,500	Full refund*
Alternative medicine	×	\checkmark	\checkmark	\checkmark
Physician and paramedic fees	×	\checkmark	\checkmark	\checkmark
Diagnostics	×	\checkmark	\checkmark	\checkmark
Physiotherapy	\times	\checkmark	\checkmark	\checkmark
Hormone replacement therapy	\times	\checkmark	\checkmark	\checkmark
Prescription Drugs and Medicines	×	\checkmark	\checkmark	\checkmark
Annual Health Checks	×	\checkmark	\checkmark	\checkmark
Vaccinations	×	\checkmark	\checkmark	\checkmark
Wellbeing tests	×	\checkmark	\checkmark	\checkmark
Home nursing	×	$\overline{}$	\checkmark	\checkmark
Prescribed medical aids	×	\checkmark	\checkmark	\checkmark
Psychiatric, drug and alcohol abuse	×	\checkmark		√
Speech therapy	×	\checkmark		
Well-child care	×			



Full cover



Covered with limits



No cover



Deductible options: \$0 | \$100 | \$300 | \$500

Routine Dental Cover (Optional)

Benefit cap	STANDARD	DENTAL 1	DENTAL 2	DENTAL 3
Total annual limit	\$0	\$1,000	\$2,000	\$3,000
Check-ups	\times	\checkmark	\checkmark	\checkmark
X-rays	×	\checkmark	\checkmark	\checkmark
Scale and polishing	×	\checkmark	\checkmark	\checkmark
Fillings and extractions (including wisdom teeth)	×	\checkmark	\checkmark	\checkmark
Fixed bridge work	×	\checkmark	\checkmark	\checkmark
Partial and full removal dentures	×	\checkmark	\checkmark	\checkmark
Crowns, inlays, onlays	×	\checkmark	\checkmark	\checkmark
Gold fillings, but only when the tooth / teeth in question cannot be restored with amalgam, silicate acrylic or plastic	×	✓	✓	✓
Implants	×	\checkmark	\checkmark	✓
Orthodontic treatment for children under 18	×	\checkmark	\checkmark	\checkmark



Full cover



Deductible does not apply



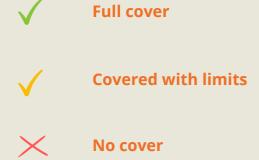
Covered with limits



No cover

Assistance & Evacuation (Optional)

Benefit cap	STANDARD	ASSISTANCE 1	ASSISTANCE 2	ASSISTANCE 3	ASSISTANCE 4
Total annual limit	\$0	\$250,000	\$1,000,000	\$2,000,000	\$3,000,000
Emergency medical evacuation	×	\checkmark	\checkmark	\checkmark	\checkmark
Medically necessary treatment *	×	\checkmark	\checkmark	\checkmark	\checkmark
Return trip to country of residence	×	\checkmark	\checkmark	\checkmark	\checkmark
Evacuation or transport costs following inpatient treatment	×	✓	\checkmark	\checkmark	\checkmark
Accompanying person's travel expenses	×	\checkmark	\checkmark	\checkmark	\checkmark
Compassionate travel and accommodation expenses	×	✓	\checkmark	✓	\checkmark
Repatriation of mortal remains	×	\checkmark	\checkmark	\checkmark	\checkmark





Maternity (Optional) Groups only

Benefit cap	STANDARD	MATERNITY 1	MATERNITY 2	MATERNITY 3
Total annual limit	\$5,000	\$0	\$10,000	\$15,000
Antenatal care	\checkmark	×	\checkmark	\checkmark
Hospital charges, obstetricians' and midwives' fees for pregnancy and childbirth including elective caesarean section	✓	×	✓	✓
Postnatal care required by the mother immediately following normal childbirth	✓	×	\checkmark	\checkmark
Complications of pregnancy and complications of childbirth	\checkmark	×	\checkmark	\checkmark
Congenital defects	\checkmark	×	\checkmark	\checkmark
Newborn care, including premature newborns	\checkmark	×	\checkmark	\checkmark

Maternity cover is added to group schemes as standard. It can be removed for a discount or increased as per the table above.

The chosen level of maternity cover will be subject to the selected overall core benefit cap of either \$250k, \$1m, \$2m or \$3m.



Our insurance partner

MGEN

MGEN was established in 1946, and is part of the largest mutual health insurance group in France. The group has 9,500 employees, with a turnover of €2.4bn in 2016, with 4m people covered, and €2.2bn of net equity and reserves.

A.M. Best has assigned a Financial Strength Rating of A (Excellent) to MGEN, and the outlook assigned to this rating is stable. MGEN's specialist international mobility division is highly experienced in the provision of health, life and disability insurance protection for expatriates, groups and individuals worldwide.

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