



“FOR YOUR PROTECTION AND OUR ECONOMY”

State Insurance Corporation

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LEVEL 1
Medical Plan



State Insurance Corporation
Tel: 268.481.7802-05

LEVEL 1 BENEFITS

MAXIMUM BENEFIT (ACTIVE UNDER AGE 65)
\$500,000.00

MAXIMUM BENEFIT (RETIREEES AND OVER 65)
\$250,000.00

DEDUCTIBLE OUTSIDE OF NETWORK

Individual—\$150.00 per insured

CO-INSURANCE

80% to \$25,000.00; 100% thereafter

MEDICAL

	In-Patient
Room and Board/ Semi-Private	Local & Caricom \$400 Overseas \$2000
Hospital Services	80% of RCC
Intensive Care	2.5 times average semi-private room
Surgery	80% of RCC
Pre-Existing Condition (Maximum per disability)	\$750

Out-Patient

Doctor Visit	80% up to \$90
Home Visits	80% up to \$100
Specialist Benefit (By Referral Only) Pediatrician and Gynecologist— no referral necessary	
Specialist Visit	80% up to \$150
Hospital Visits	80% up to \$200
Emergency Doctor Visits	80% up to \$250
Prescription & Drugs per illness	80% of RCC
Diagnostic, Xray & Lab	Pre-certification necessary - 80% of RCC
Maternity	80% - Caesarian \$4,000; Normal delivery \$3,000; Miscarriage \$1,500
Air Ambulance (Pre-approval Mandatory)	100% in Network
Air Transportation (Referral Only)	Two tickets per annum; 100% Economy under Major Medical
Physiotherapy	80% to \$60; Maximum visits 10 per annum
Preventative Care	Annual Exam & Mammogram \$200; Pap Smear and Prostate Tests \$100
Psychiatric	80% to \$60; Maximum visits 20 per annum

DENTAL

MAXIMUM NUMBER OF SESSIONS FOR PREVENTATIVE TREATMENT ALLOWED DURING A POLICY YEAR: 2

CO-INSURANCE 80%

Preventative, Basic Restorative and Major Restorative Combined-

Up to Annual Maximum amount \$1,500

Orthodontic up to age 25-

Up to Annual Maximum amount \$1,500

Annual Deductible \$25

VISION

CO-INSURANCE 80%

Lenses and Frames-

Up to Annual Maximum amount \$1,000

Eye Examinations-

Maximum \$100

Annual Deductible \$35

VISION BENEFITS ALLOWED

- ONE COMPLETE EYE EXAMINATION FOR MEMBER/DEPENDENT DURING ANY POLICY YEAR
- 2 LENSES FOR MEMBER/DEPENDENT DURING ANY POLICY YEAR
- ONE SET OF FRAMES FOR MEMBER/DEPENDENT DURING TWO CONSECUTIVE POLICY YEARS

EXCLUSIONS

- CHARGES IN CONNECTION WITH ORTHOPTIC VISION TRAINING OR SUBNORMAL VISION AIDS
- CHARGES FOR LENSES OBTAINABLE WITHOUT A PRESCRIPTION