

# SELECT

Comprehensive medical protection for you and your family



Make the most out of life's most precious moments. With Pacific Cross, you can enjoy medical coverage that helps secure your peace of mind, wherever life takes you.



FORMERLY BLUE CROSS PHILIPPINES

Here for You



Medical costs are one of the most pressing concerns in today's times. When your family's health is at stake, we know you need a no-nonsense medical plan that will give you the best care possible. We offer you value-packed medical plans especially designed to give you superior medical coverage:

### Select Plus

*With an aggregate limit **per year** of up to PHP 3,000,000 and still with your own choice of medical provider, this plan provides added and superior protection.*

### Select Standard

*Allows you to choose your own hospital and doctor and reimburse medical benefits up to PHP 3,000,000 **for each disability per lifetime.***

# SELECT

- **Swift reimbursement of medical expenses based on your coverage**  
When you choose Select, you are assured of swift reimbursement of eligible medical charges! Select provides a maximum coverage limit of up to PHP 3,000,000.
- **Your own choice of doctor, hospital and specialist**  
Select offers you complete freedom of choice. This means you can avail of the best medical treatment with your own choice of doctor, hospital or specialist.
- **Comprehensive range of medical insurance benefits**  
Select offers a comprehensive range of in-patient and out-patient medical benefits, all designed to provide you the financial security and assistance you need in times of illness.
- **Emergency overseas coverage**  
Select also covers you for emergencies and accidents when you travel, so you can receive the best medical assistance anytime, anywhere in the world.
- **24-hour worldwide customer assistance and emergency hotline**  
Pacific Cross, with its emergency assistance partner, has a worldwide network of alarm centers and full time medical professionals ready to help you 24 hours a day, 7 days a week, 365 days a year.
- **Coverage flexibility**  
You can opt to use our accredited network and avail of no-cash-outlay in-patient and emergency out-patient medical treatment through our *ACCESS* facility.



## Some things all applicants should know:

**As with all insurance, there are some important points you should know before entering into a contract. In this section, we identify some key Policy provisions.**

1. Your coverage begins thirty (30) days after the date shown on your Policy. However, you already have immediate coverage for accidental injury.
2. A pre-existing condition is a disability or illness which existed before the commencement of cover. The existence of a pre-existing condition can be clinically determined given its natural history, irrespective of whether or not the insured is aware of the illness or condition. Providing cover for a pre-existing condition is subject to evaluation by our Medical Director, and if it is excluded from cover we will notify the insured accordingly.
3. While your Policy is issued in the Philippines, it can provide Emergency Coverage when you are overseas. However, please note that the maximum period of cover is for ninety (90) days only of accumulated stay or travel abroad during the Policy year, with each trip not exceeding thirty (30) days.
4. Certain conditions are permanently excluded from being covered. These conditions include:
  - Congenital conditions, birth defect and abnormalities
  - Artificial implants, durable medical equipment, grafts, prosthetic devices and corrective devices other than artificial limbs
  - Cosmetic surgery or related complications, contact lenses, hearing aids and prescriptions thereof, except those that may be required for reconstructive surgery due to or as a result of an accident
  - Suicide, attempted suicide or intentional self-inflicted injury
  - Pre-existing conditions unless such have been declared and approved by the Company
  - Acquired Immune Deficiency Syndrome (AIDS), Aids Related Complex (ARC), and Sexually Transmitted Diseases (STDs)
  - Osteoporosis/Benign Prostatic Hypertrophy (for age 50 and above)
  - All contraceptive methods of birth control; or screening and/or treatment pertaining to infertility
  - Pregnancy related expenses and screening, childbirth (including surgical delivery); miscarriage and abortion, including their complications; pre-natal or post-natal care as well as nursing care for the newborn
5. Your contract is guaranteed renewable up to age sixty-five (65). However, we reserve the right to adjust your premium and other Policy conditions upon written advice forty-five (45) days prior to each renewal.
6. For full details, please refer to the Policy.







# CORE BENEFITS

(In-Patient & Emergency)

**Select Plus** and **Select Standard** provide the same benefit limits but at different maximum coverage levels. Under these plans, you can choose your own doctor and hospital. Claims will be paid via **reimbursement** of all eligible expenses based on coverage. All benefits shown in the table below are applicable for each disability per year, unless indicated otherwise.

Maximum Coverage	WARD	SEMI-PRIVATE	PRIVATE	SUITE
	PHP 500,000	PHP 750,000	PHP 1,500,000	PHP 3,000,000
<b>BASIC HOSPITAL BENEFITS</b>				
<b>Room and Board</b> including general nursing care for a maximum of 60 days per disability, per year for emergency confinement abroad. Unlimited number of days for confinement in the Philippines.	As Charged	As Charged	As Charged	P 6,000 (per day)
<b>Miscellaneous Hospital Expenses</b> for required diagnostic laboratory tests; prescribed medicines; physiotherapies; blood and components; anesthesia; and surgical appliances	As Charged	As Charged	As Charged	As Charged
<b>Physician's Visit (non-surgical)</b> limit of 60 days per disability per year for emergency confinement abroad. Unlimited number of days for confinement in the Philippines. Daily visit fee to a limit of	PHP 900	PHP 1,200	PHP 2,400	PHP 4,200
<b>Specialist's Fee</b> for 10 days for each disability per year to a daily limit of	PHP 900	PHP 1,200	PHP 2,400	PHP 4,200
<b>Private Duty Nurse</b> at home only when certified necessary by attending physician to a maximum of 5 days, immediately after hospitalization. Daily visit fee to a limit of	PHP 600	PHP 900	PHP 1,800	As Charged
<b>Procedure Done on an Out-Patient Basis</b> for selected procedures as approved by Pacific Cross	Subject to the limits of the Basic Hospital Benefits			
<b>CRITICAL CARE BENEFITS</b>				
<b>Intensive Care Unit, Coronary Care Unit &amp; Telemetry</b> maximum of 10 days per disability, per year	As Charged	As Charged	As Charged	As Charged

SURGICAL BENEFITS	WARD	SEMI-PRIVATE	PRIVATE	SUITE
<b>Operating Theater &amp; Recovery Room</b>	As Charged	As Charged	As Charged	As Charged
<b>Surgeon's Fee</b> <ul style="list-style-type: none"> <li>• <b>Select Standard:</b> for each disability based on the Basic Surgical Schedule (BSS). The BSS is an index set by Pacific Cross that assigns a weight for each surgical service in order to calculate the maximum amount payable for the surgical procedure. In effect, this means that the payment you receive from us may be less than the professional fee charged by the surgeon. A copy of the BSS is available upon request from our Customer Service Department.</li> <li>• <b>Select Plus:</b> per disability, per year limit of</li> </ul>	PHP 60,000	PHP 90,000	PHP 180,000	PHP 360,000
<b>Anesthetist's Fee</b> not to exceed 40% of the approved Surgeon's Fee	PHP 24,000	PHP 36,000	PHP 72,000	PHP 144,000
<b>Artificial Limb</b> including rental of mechanical devices (as approved by Pacific Cross) excluding implantable devices	As Charged	As Charged	As Charged	As Charged
EMERGENCY BENEFITS				
<b>Emergency Out-Patient</b> for treatment of emergency cases/conditions not leading to confinement provided by the out-patient department of a hospital or a licensed doctor in his clinic for a covered disability. Maximum limit per disability, per year.	PHP 5,000	PHP 6,000	PHP 7,000	As Charged
<b>Emergency Dental Services</b> due to a covered accident	As Charged	As Charged	As Charged	As Charged
<b>Emergency Local Ambulance Service</b> from place of occurrence to the nearest hospital facility or from hospital to hospital using land transportation service.  <i>(If local land transportation facility is not available, other transportation facilities are allowed subject to the approval of Pacific Cross. Maximum limit per disability, per year is PHP 15,000.)</i>	As Charged	As Charged	As Charged	As Charged
<b>Emergency Overseas Confinement Coverage</b> worldwide cover is included for 90 days only of accumulated stay (no more than 30 days per trip) or travel overseas during the Policy year. Reimbursement of medical expenses for overseas treatment of confinement will be based on currently applicable Philippine medical rates.	Included	Included	Included	Included



	WARD	SEMI-PRIVATE	PRIVATE	SUITE
<p><b>Worldwide Emergency Assistance Services</b></p> <p>Pacific Cross, through our emergency assistance partner, will provide the assistance and advice (24 hours a day, 7 days a week) for free but the client will be responsible for any third party charges incurred as a result of such advice or assistance unless otherwise specified elsewhere in the Policy. Insured Person must be traveling 100 miles (or 150 kilometers) or more from his primary and legal address or in another country which is not his Country of Residence for less than ninety-one (91) days unless otherwise endorsed in the Policy.</p> <p><b>Services* include but not limited to the following:</b></p> <ul style="list-style-type: none"> <li>• <b>Emergency Medical Evacuation:</b> Evacuation under appropriate medical supervision to the nearest medical facility</li> <li>• <b>Medical Repatriation:</b> Repatriation under medical supervision to the Insured Person's legal residence or to a medical or rehabilitation facility near the Insured Person's residence</li> <li>• <b>Return of Mortal Remains:</b> The return of mortal remains will be arranged and paid for.</li> <li>• <b>Compassionate Visit:</b> When an Insured Person is traveling alone and will be hospitalized for more than seven (7) consecutive days, an economy, round- trip, common carrier transportation will be provided to a family member or a friend to accompany the Insured Person.</li> <li>• <b>Care of Minor Child(ren):</b> One-way economy common carrier transportation will be provided to the place of residence of minor child(ren) when they are left unattended as a result of medical emergency or death of an Insured Person.</li> </ul>				
<p><b>*Availment of services through our designated assistance provider, limit per year of</b></p>	As Charged and on top of the Maximum Coverage Limit			
<p><b>*Availment of services <i>not</i> through our designated assistance provider, limit per year of</b></p>	PHP 50,000 combined limit	PHP 50,000 combined limit	PHP 50,000 combined limit	PHP 50,000 combined limit
<p>The actual cost will be paid via reimbursement by the Company subject to the limits specified which will form part of the Maximum Coverage Limit of the plan provided that such assistance is a result of a covered illness, accidental injury or death occurring during the Period of Insurance.</p>				



	WARD	SEMI-PRIVATE	PRIVATE	SUITE
<b>VALUE ADDED BENEFITS</b>				
<b>Elective Surgery</b> scheduled surgery arranged by Pacific Cross within accredited network only. Direct settlement of covered portion of confinement and treatment cost by Pacific Cross (10 days notice must be given to Pacific Cross by the Client).	Direct Settlement of covered portion of confinement & treatment cost by Pacific Cross.			
<b>Companion Allowance</b> allowance given to companion (maximum of 5 days per given Policy year)	Not Available	Not Available	PHP 100 (per day)	PHP 200 (per day)
<b>Sports Coverage</b> for recreational sports including skiing & scuba; excluding contact sports (subject to Policy limits)	Included	Included	Included	Included
<b>Free Child Coverage</b> free coverage for infant from 15 days old up to Policy renewal (for a newborn of a female insured)	Included	Included	Included	Included
<b>PERSONAL ACCIDENT BENEFIT</b>				
coverage for accidental death. Covers new business clients age 16 to 60, renewable until age 65	PHP 25,000	PHP 50,000	PHP 75,000	PHP 100,000







# COVERAGE ENHANCEMENT

**Enhance your coverage!** Add the **ACCESS** facility to your Select Plus & Select Standard Plan. Available under **Semi-Private** and **Private**, and sharing the same inner benefit limits as those of Select Plus and Select Standard, **ACCESS** allows you to avail of **no-cash-outlay in-patient and emergency out-patient medical treatment** using our accredited network of hospitals. However, in the event that you choose not to go to an accredited medical provider, you still retain the option of filing your eligible claims for **reimbursement** with Pacific Cross.

*Payment of Professional Fees (Attending Physician’s Visit, Specialist’s Fee, Surgeon’s Fee, Anesthetist’s Fee) will be based on the Company’s PhilHealth Relative Value Scale if claims are directly settled by the Company to the Physician or Hospital. The PhilHealth Relative Value Scale shows the values per procedure as provided by the PhilHealth that the Company will apply for the payment of a particular Professional fee in an Accredited Network.*

# OPTIONAL BENEFITS

OUT-PATIENT BENEFITS	STANDARD	EXECUTIVE
<b>Pacific Cross pays 80% of eligible claimed amount for reasonable, normal and customary fees. Reimbursement only.</b>		
<b>Consultation in Doctor’s Office</b> covers Physician’s and Specialist’s fee, maximum of 20 visits per year	PHP 500 (per visit)	PHP 900 (per visit)
<b>Physiotherapist or Chiropractor</b> maximum of 10 treatments per year, limit of one per day	PHP 400 (per visit)	PHP 800 (per visit)
<b>Medicines and Drugs prescribed by a Doctor</b> for a covered condition or disability and procured from a recognized pharmacy	PHP 7,500 (limit per year)	PHP 15,000 (limit per year)
<b>Diagnostic, X-rays and Laboratory Tests</b> necessary for the treatment of a covered disability	PHP 6,000 (per year)	PHP 12,000 (per year)





## DENTAL PLAN

Pacific Cross pays 80% of eligible claimed amount for reasonable, normal and customary fees. Reimbursement only.

BENEFITS	LIMIT	BENEFITS	LIMIT
<b>Over-all Limit per year</b> (excluding dentures)	PHP 9,000	<b>Root Canal Fillings</b> (per tooth)	PHP 1,500
<b>X-rays</b> (required prior to the performance of dental service. Limit per year.)	450	<b>Extractions</b> (per tooth)	
<b>Amalgam Fillings</b> (per surface)		i) Simple	300
i) Pre-Molar	300	ii) Surgical: Impacted Wisdom Teeth	1,500
ii) Molar	350	iii) Apicoectomy	1,500
iii) Cusp Restoration	600	<b>Dentures</b> (as a result of accident only)	
iv) Amalgam Cores	500	i) Complete Set	4,000
v) Amalgam Pins	100	ii) Partial Sets	7,000
<b>Anterior Filling</b> (per surface)		<b>Routine Oral Examination</b> (not to exceed 2 per year)	200
i) Composite	500	<b>Oral Prophylaxis</b> (not to exceed 2 per year)	400
ii) Acid Etch	500		

## ANNUAL PHYSICAL EXAMINATION (To be done in accredited Pacific Cross clinics or laboratories with prior appointment)

- Includes:**
- Taking of medical history
  - Comprehensive physical examination
  - Complete blood count
  - Chest x-ray
  - Stool analysis
  - Urinalysis
  - Pap smear for female clients 35 years old and above
  - Electrocardiogram (ECG) for clients 40 years old and above

- Notes:**
1. Issue age is up to 65 years old.
  2. Available only for Group Accounts with at least 4 employees, or Families with at least 4 members (all members should enroll).
  3. Premium quotations are available upon request from our Account Executives.

# ANNUAL PREMIUMS

As of 1 July 2013

## CORE BENEFITS (In-Patient & Emergency)

### Select Plus

AGE	WARD	S-PRIVATE	PRIVATE	SUITE
0 - 20	P 4,568	P 7,365	P 12,051	P 25,129
21 - 25	7,396	12,408	20,198	33,364
26 - 30	8,053	13,511	21,993	36,330
31 - 35	8,382	14,063	22,891	37,813
36 - 40	9,039	15,166	24,687	40,778
41 - 45	10,192	17,833	29,767	48,169
46 - 50	11,493	20,109	35,733	54,318
51 - 55	12,462	21,817	41,382	58,800
56 - 60	13,545	23,714	45,981	63,913
61 - 65	14,900	26,086	50,579	70,305

### Select Standard

AGE	WARD	S-PRIVATE	PRIVATE	SUITE
0 - 20	P 3,843	P 6,098	P 10,428	P 17,717
21 - 25	6,051	9,937	16,982	24,912
26 - 30	6,588	10,923	18,668	27,127
31 - 35	6,858	11,476	19,612	28,233
36 - 40	7,395	12,377	21,151	30,448
41 - 45	8,289	14,316	24,363	35,246
46 - 50	9,346	16,143	28,070	39,746
51 - 55	10,465	18,646	30,571	43,540
56 - 60	11,374	20,077	33,968	47,326
61 - 65	12,512	21,877	37,365	52,059

The Documentary Stamp Tax (DST) should be deducted from the Core Benefits Premium before applying any discount and/or loading (i.e., additional premium). The DST should be added back after all discounts and loadings have been applied. The DST amounts are as follows: PHP 25 (Ward), PHP 50 (S-Private), PHP 100 (Private and Suite). For Select Plus and Select Standard only.

### Select Plus with ACCESS

AGE	S-PRIVATE	PRIVATE
0 - 20	P 9,757	P 15,965
21 - 25	16,439	26,753
26 - 30	17,899	29,130
31 - 35	18,630	30,320
36 - 40	20,092	32,698
41 - 45	23,625	39,795
46 - 50	26,390	47,330
51 - 55	29,973	56,809
56 - 60	32,579	61,847
61 - 65	35,838	68,032

### Select Standard with ACCESS

AGE	S-PRIVATE	PRIVATE
0 - 20	P 8,079	P 13,815
21 - 25	13,415	22,926
26 - 30	14,607	24,964
31 - 35	15,203	25,982
36 - 40	16,396	28,020
41 - 45	18,965	31,574
46 - 50	21,185	37,187
51 - 55	25,058	42,000
56 - 60	27,843	46,200
61 - 65	30,627	50,819

ACCESS premiums are subject to PHP 250 Annual Access Fee per member.



### OPTIONAL BENEFITS (Available for all Select Plans)

#### Out-Patient

AGE	STANDARD	EXECUTIVE
Child - 20	P 5,733	P 11,835
21 - 40	5,385	11,442
41 - 50	7,824	18,592
51 - 65	9,773	24,209

Pacific Cross pays 80% of reasonable, normal and customary fees. Reimbursement only.

#### Dental Plan

PREMIUMS (Per Annum)	INDIVIDUAL (1)	GROUP (2)
Adult (19 - 65 yrs old)	P 3,808	P 2,232
Child (15 days - 18 yrs old)	P 2,770	P 1,623

Premiums are applicable to:

(1) Individual policies, or Families with less than 4 members\*, or Groups with less than 4 employees

(2) Group Accounts with at least four (4) employees, or Families with at least 4 members\* (all members should enroll)

\* Members mean Principal and eligible Dependents.

#### Additional Personal Accident Coverage

	WARD	S-PRIVATE	PRIVATE	SUITE
P 500,000	P 835	P 835	P 835	P 835
P 1,000,000	P 1,670	P 1,670	P 1,670	P 1,670

Coverage for accidental death. Occupational Class I (Standard Risk). Premiums of other occupational classifications are available upon request.

### DISCOUNTS

#### Co-Payment

(Available for Select Plus & Select Standard Plans only)

WARD	S-PRIVATE	PRIVATE	SUITE
25% Discount	25% Discount	25% Discount	25% Discount

Pacific Cross pays 80% of claimed amount (80/20 co-payment option). Applied to the premiums of Core Benefits only.

#### Group Discount

(Available for all Select Plans)

NO. OF MEMBERS*	DISCOUNT
7 - 15	5 %
16 or more	10 %

Group Discounts apply to New Business only. Applied to the premiums of Core Benefits & Optional Out-Patient Benefits only.

\* Members mean Principal and eligible Dependents.

\* Members must be under **one Policy** only.

- Notes:**
- Premiums are inclusive of all applicable taxes.
  - Premiums are available in annual and semi-annual modes of payment (except for Personal Accident & Annual Physical Exam).
  - Premiums may change subject to the results of medical evaluation of application form.



**Pacific Cross is EXCELLENCE.**

We are committed to bringing nothing but the best to our clients. Our decisions are based on an intricate understanding of our clients' needs, demands and expectations. We strive to create and innovate programs that will best serve our customers.

**Pacific Cross is STABILITY.**

We are one of the leading and most financially stable companies in the industry today. Our Premiums Earned in recent years put us in the top 10 non-life insurance companies in the Philippines.

**Pacific Cross is EXPERIENCE.**

We draw from more than sixty-five years of experience in the insurance industry. Our actions are guided by a deep insight brought about by the knowledge we have gained through the years.

**Pacific Cross is CUSTOMER SERVICE.**

We are rooted in a commitment to ever improving customer service. We aim to be continuously progressive and professional. Our commendable track record and competent support staff ensure that you are given immediate and excellent service at all times.

**Pacific Cross is a  
PARTNERSHIP OF TRUST.**

We build and value enduring relationships. We consistently prove that we are worthy of the highest confidence — by our strict standards, the integrity of our promises and the results we deliver. In the event of a crisis, we assure you that Pacific Cross will be your friend and ally.



**Get in touch with us today!**

**Call +63 2 899-8001**

**Email [medical\\_sales@pacificcross.com.ph](mailto:medical_sales@pacificcross.com.ph)**

**HEAD OFFICE**

Pacific Cross Center, 8000 Makati Avenue, 1200 Makati City,  
Metro Manila, Philippines

Tel. No.: +63 2 899-8001 Fax No.: +63 2 325-0638

Email: [medical\\_sales@pacificcross.com.ph](mailto:medical_sales@pacificcross.com.ph)

**CEBU**

Unit 202, Avagar Building, No. 09, Escario corner Molave Street,  
Lahug, Cebu City

Tel. Nos.: +63 32 233-5812; +63 32 233-5816; +63 32 416-4468

Fax No.: +63 32 233-5814 Email: [cebu@pacificcross.com.ph](mailto:cebu@pacificcross.com.ph)

**SUBIC**

Suite 64, West Gate Bldg., Sampson Road,  
Subic Bay Freeport Zone, Zambales

Tel. No.: +63 47 250-0197 Telefax: +63 47 250-0199

Email: [subic@pacificcross.com.ph](mailto:subic@pacificcross.com.ph)

**DAVAO**

2<sup>nd</sup> Floor, Left Wing, Door No. 6, Matina Town Square,  
Mac Arthur Highway, Matina, Davao City

Tel. No.: +63 82 297-7314 Telefax: +63 82 297-7151

Email: [davao@pacificcross.com.ph](mailto:davao@pacificcross.com.ph)