

SELECT

Comprehensive medical protection for you and your family



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

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 sensible medical plan that will give you the best care possible. We offer you value-packed medical plans specifically designed to give you superior medical coverage:

Select Plus

With an aggregate limit per year of up to PhP 1,500,000 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 of up to PhP 1,500,000 for each disability per lifetime.

SELECT

*A Product of Pacific Cross Insurance, Inc.
and Pacific Cross Health Care, Inc.*

- **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 PhP 1,500,000.
- **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 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 medically determined given its natural history or the manner of development of a disease, which means you may or may not be aware of its presenting symptoms. Pre-Existing Conditions are also those that are known to you because you have felt its signs and symptoms regardless if this prompted you to seek for treatment, medication, advice, or diagnosis. When you answer our Medical Questionnaire, please ensure that you tell us about all your medical conditions and symptoms happening at any time in the past and/or present, known and/or suspected, whether or not treatment or professional advice was sought. We will then notify you accordingly of the Company's decision to insure or not to insure or to impose special terms.
3. While your Policy is issued in the Philippines, it can provide Emergency Confinement Coverage when you are overseas. The maximum period of cover should not exceed more than 30 days per trip during the Policy year.
4. Certain conditions are permanently excluded from being covered. These conditions include:
 - Congenital conditions, birth defect and abnormalities
 - 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)
 - 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 65. However, we reserve the right to adjust your premium and other Policy conditions upon written advice 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.

	WARD	SEMI-PRIVATE	PRIVATE
Maximum Coverage	PhP 500,000	PhP 750,000	PhP 1,500,000
BASIC HOSPITAL BENEFITS			
Room and Board including General Nursing Care	As Charged	As Charged	As Charged
Miscellaneous Hospital Expenses for required diagnostic laboratory tests, prescribed medicines, physiotherapies, blood and components, anesthesia, and surgical appliances	As Charged	As Charged	As Charged
Physician's Visit (non-surgical) daily visit fee to a limit of	PhP 1,500	PhP 2,000	PhP 3,000
Specialist's Fee for 10 days for each disability per year to a daily limit of	PhP 1,500	PhP 2,000	PhP 3,000
Private Duty Nurse 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
Procedure Done on an Out-Patient Basis for selected procedures as approved by Pacific Cross	Subject to the limits of the Basic Hospital Benefits		
CRITICAL CARE BENEFITS			
Intensive Care Unit, Coronary Care Unit & Telemetry maximum of 10 days per disability, per year	As Charged	As Charged	As Charged

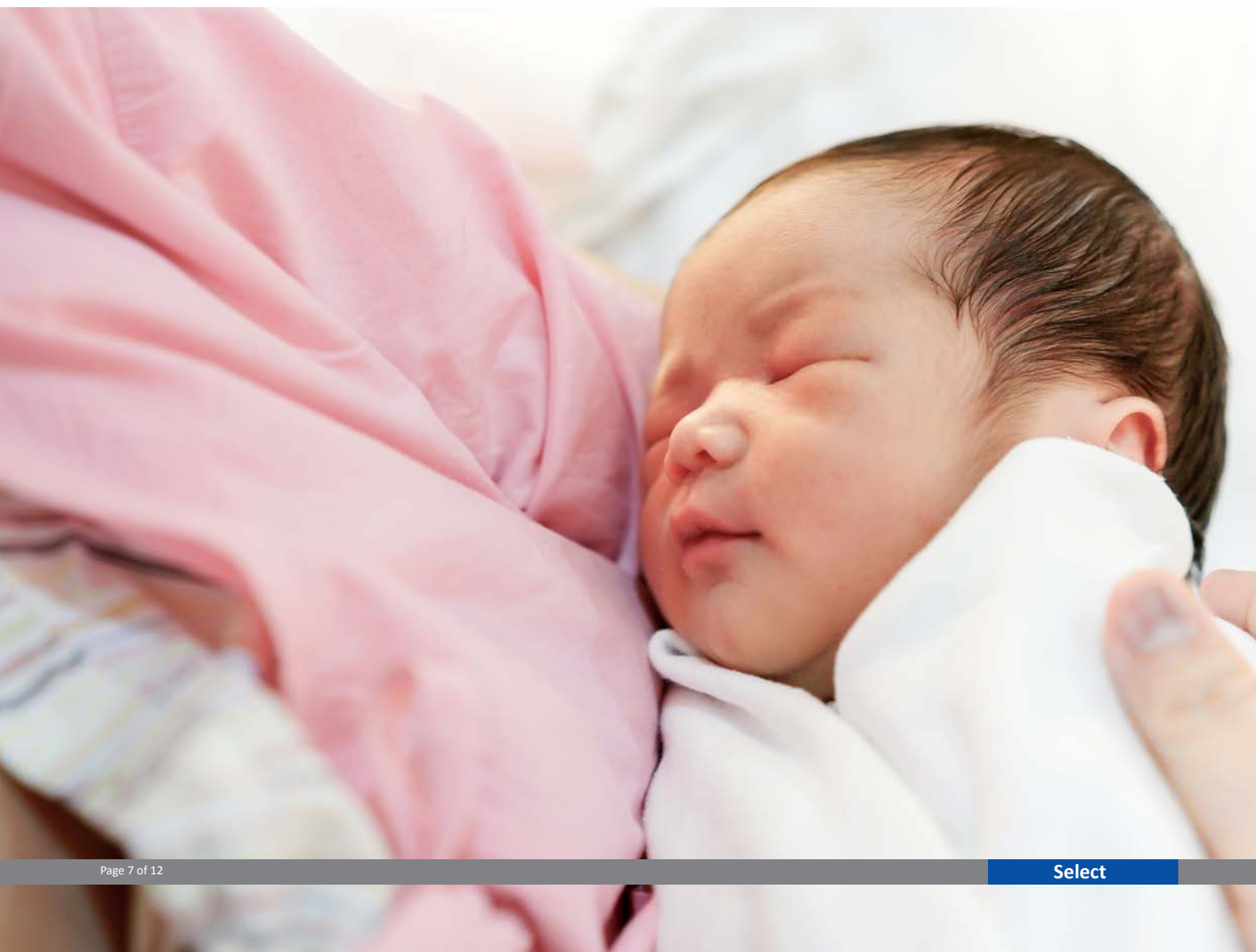
	WARD	SEMI-PRIVATE	PRIVATE
SURGICAL BENEFITS			
Operating Theater & Recovery Room	As Charged	As Charged	As Charged
Surgeon's Fee per disability, per year limit of	PhP 60,000	PhP 90,000	PhP 180,000
Anesthetist's Fee not to exceed 40% of the approved Surgeon's Fee	PhP 24,000	PhP 36,000	PhP 72,000
Artificial Limb including rental of mechanical devices (as approved by Pacific Cross) excluding implantable devices	As Charged	As Charged	As Charged
Medical Implant Due to Accident Covers the cost of implantable devices necessary for a surgical procedure to treat a covered Injury resulting from Accident wholly occurring during the Period of Insurance. Per disability, per year limit of	PhP 25,000	PhP 25,000	PhP 25,000
EMERGENCY BENEFITS			
Emergency Out-Patient 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
Emergency Dental Services due to a covered accident	As Charged	As Charged	As Charged
Emergency Local Ambulance Service 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
Emergency Overseas Confinement Coverage worldwide cover is included for no more than 30 days per trip for travel overseas during the Policy year. Reimbursement of overseas medical expenses is for emergency leading to confinement cases only.	Up to Maximum Coverage subject to the limits of the Basic Hospital Benefits that are based on currently applicable medical rates of the Company's pre-determined Philippine tertiary hospital		



	WARD	SEMI-PRIVATE	PRIVATE
Worldwide Emergency Assistance Services	Included	Included	Included
Pacific Cross, through our 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 91 days unless otherwise endorsed in the Policy.			
Services* include but not limited to the following:			
<ul style="list-style-type: none"> • Emergency Medical Evacuation: Evacuation under appropriate medical supervision to the nearest medical facility • Medical Repatriation: Repatriation under medical supervision to the Insured Person's legal residence or to a medical or rehabilitation facility near the Insured Person's residence • Return of Mortal Remains: The return of mortal remains will be arranged and paid for. • Compassionate Visit: When an Insured Person is traveling alone and will be hospitalized for more than 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. • Care of Minor Child(ren): 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. 			
*Availment of services through our designated assistance provider, limit per year of	As Charged and on top of the Maximum Coverage Limit		
*Availment of services <i>not</i> through our designated assistance provider, limit per year of	PhP 50,000 combined limit	PhP 50,000 combined limit	PhP 50,000 combined limit
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.			
ANNUAL PHYSICAL EXAMINATION			
<i>(to be done in accredited Pacific Cross clinics or laboratories with prior appointment, i.e., via no-cash-outlay only)</i>			
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 and Electrocardiogram (ECG) for clients 40 years old and above.	Included	Included	Included



	WARD	SEMI-PRIVATE	PRIVATE
VALUE ADDED BENEFITS			
Elective Surgery 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		
Companion Allowance allowance given to companion (maximum of 5 days per given Policy year)	Not Available	Not Available	PhP 100 (per day)
Sports Coverage for recreational sports including skiing and scuba; excluding contact sports (subject to Policy limits)	Included	Included	Included
Free Child Coverage free coverage for a newborn of a female Insured as early as the infant's 15th day up to the female Insured's Policy renewal. Effective date of the infant's coverage is upon submission of application form and is subject to 30 Days Qualifying Period. In-Patient/Hospitalization Benefits will be provided to the newborn.	Included	Included	Included
PERSONAL ACCIDENT BENEFIT			
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





COVERAGE ENHANCEMENT

Enhance your coverage! Add the **ACCESS** facility to your Select Plus and 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 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
<p>Pacific Cross pays 80% of eligible claimed amount for reasonable, normal, and customary fees. Reimbursement only. Aggregate limit per year.</p> <p>Includes:</p> <ul style="list-style-type: none"> a. Consultation in Doctor’s Office covers Physician’s and Specialist’s fee b. Physiotherapist or Chiropractor c. Diagnostic, X-rays and Laboratory Tests necessary for the treatment of a covered disability d. Medicines and Drugs prescribed by a Doctor for a covered condition or disability and procured from a recognized pharmacy 	PhP 25,000	PhP 50,000



DENTAL BENEFITS

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

BENEFITS	LIMIT	BENEFITS	LIMIT
Over-all Limit per year (excluding dentures) Includes: X-rays, Amalgam Fillings, Anterior Fillings, Root Canal Fillings, Extractions, Routine Oral Examination (twice per year) and Oral Prophylaxis (twice per year)	PhP 10,000	Dentures (as a result of accident only) i) Complete Set ii) Partial Sets	PhP 4,000 PhP 7,000

ANNUAL PREMIUMS

As of 1 August 2018

CORE BENEFITS (In-Patient & Emergency)

Select Plus

AGE	WARD	S-PRIVATE	PRIVATE
0 - 20	PhP 5,328	PhP 8,590	PhP 14,056
21 - 25	8,627	14,473	23,559
26 - 30	9,393	15,759	25,652
31 - 35	9,777	16,403	26,700
36 - 40	10,543	17,689	28,795
41 - 45	11,888	20,801	34,720
46 - 50	13,405	23,455	41,679
51 - 55	14,536	25,447	48,268
56 - 60	15,799	27,660	53,632
61 - 65	17,379	30,427	58,995

Select Standard

AGE	WARD	S-PRIVATE	PRIVATE
0 - 20	PhP 4,482	PhP 7,113	PhP 12,163
21 - 25	7,058	11,591	19,808
26 - 30	7,684	12,741	21,774
31 - 35	8,000	13,386	22,875
36 - 40	8,626	14,436	24,670
41 - 45	9,668	16,698	28,417
46 - 50	10,902	18,829	32,741
51 - 55	12,206	21,749	35,658
56 - 60	13,267	23,418	39,620
61 - 65	14,594	25,517	43,582

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, and then add the premium for any applicable optional benefits (e.g., optional Out-Patient and Dental benefits). The DST amounts are as follows: PhP 50 (Ward), PhP 100 (Semi-Private), PhP 200 (Private). For Select Plus and Select Standard only.

If you are paying on semi-annual mode, please note that 8% surcharge and DST charge will apply. The amounts of your first and second installment will vary with the former being slightly higher than the latter due to DST.

Select Plus with ACCESS

AGE	S-PRIVATE	PRIVATE
0 - 20	PhP 10,959	PhP 17,932
21 - 25	18,465	30,049
26 - 30	20,104	32,719
31 - 35	20,925	34,056
36 - 40	22,568	36,726
41 - 45	26,536	44,698
46 - 50	29,642	53,161
51 - 55	33,666	63,807
56 - 60	36,593	69,467
61 - 65	40,254	76,413

Select Standard with ACCESS

AGE	S-PRIVATE	PRIVATE
0 - 20	PhP 9,074	PhP 15,517
21 - 25	15,068	25,750
26 - 30	16,406	28,040
31 - 35	17,076	29,183
36 - 40	18,416	31,472
41 - 45	21,302	35,464
46 - 50	23,795	41,768
51 - 55	28,145	47,174
56 - 60	31,274	51,892
61 - 65	34,400	57,080

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



OPTIONAL BENEFITS (Available for all Select Plans)

Out-Patient Benefits

AGE	STANDARD	EXECUTIVE
Child - 20	PhP 5,962	PhP 12,308
21 - 40	5,600	11,900
41 - 50	8,137	18,964
51 - 65	10,164	24,693

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

Dental Benefits

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

Premiums are applicable to:

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

(2) Group Accounts with at least 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
PhP 500,000	PhP 835	PhP 835	PhP 835
1,000,000	1,670	1,670	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
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 1 Policy only.

- Notes:**
1. Premiums are inclusive of all applicable taxes.
 2. Premiums are available in annual and semi-annual modes of payment (except for Additional Personal Accident Coverage).
 3. Premiums may change subject to the results of medical evaluation of application form.

Our Companies

**Pacific Cross Insurance, Inc. and
Pacific Cross Health Care, Inc.**

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 65 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!

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