



TRINIDAD & TOBAGO POLICE CREDIT UNION
A DIVISION OF THE GENMED CREDIT UNION PORTFOLIO
SCHEDULE OF BENEFITS 71 & OVER

All benefits are quoted in TT dollars unless otherwise specified.

| BENEFITS | LIMITS |
|---|---------------------|
| Maximum 6 Year Renewable Benefit | \$500,000.00 |
| Calendar Year Deductible | |
| Deductible per Person | \$1,000.00 |
| Deductibles per Family | \$2,000.00 |
| Co-Insurance Factor | 70% - 30% |
| Eligible Expenses Per Calendar Year | |
| The Beacon Insurance Company Limited shall pay unless otherwise stated in the Schedule of Benefits 70% of eligible expenses per disability after satisfaction of the calendar year deductible and subject to usual, customary and reasonable charges, which shall include: | |
| Hospital Daily Room & Board Limit | |
| Locally (Caricom) | \$500.00 |
| Overseas (Non Caricom) | \$2,500.00 |
| Intensive Care – Locally/Caricom | \$1,000.00 |
| Intensive Care – Overseas (Non Caricom) | \$3,000.00 |
| Maximum no. of days per Disability | 31 |
| Co-Insurance Factor | 70% - 30% |
| Miscellaneous Hospital Expenses | |
| | 70% - 30% |
| Surgical Benefit | |
| | 70% of UCR |
| Anesthesia Benefit | |
| | 25% of Surgical R&C |
| Doctor's Visits Benefit | |
| Office Visit | \$200.00 |
| Home/Hospital Visit | \$250.00 |
| Maximum no. of Visits per Day | 1 |
| Maximum no. of Visits per Disability | 31 |
| Co-Insurance Factor | 70% - 30% |



TRINIDAD & TOBAGO POLICE CREDIT UNION
A DIVISION OF THE GENMED CREDIT UNION PORTFOLIO
SCHEDULE OF BENEFITS 71 & OVER

| BENEFITS | LIMITS |
|--|------------------------------------|
| Specialist Consultation Benefit (Upon Referral) | |
| Office Visit | \$250.00 |
| Home/Hospital Visit | \$250.00 |
| Maximum no. of Visits per Day | 1 |
| Maximum no. of Visits per Disability | 10 |
| Co-Insurance Factor | 70% - 30% |
| | |
| Prescribed Drugs Benefit | 70% up to \$50,000 per policy year |
| | |
| Diagnostic, X-ray and Lab Benefit | 70% up to \$50,000 per policy year |
| | |
| Psychologist/Psychiatrist Benefit (Upon Referral) | |
| Maximum per Visit | \$200.00 |
| Maximum Visit per Calendar Year | 20 |
| Co-Insurance Factor | 70% - 30% |
| | |
| Physiotherapy/Occupational/Speech Benefit (Upon Referral) | 70% up to |
| Maximum per Visit | \$150.00 |
| Maximum no. of Visits per Day | 1 |
| Maximum Visits per Calendar Year | 20 |
| | |
| Preventative Care Benefit - (Annual Maximum) | \$1,000.00 |
| | |
| Chiropractic Benefit (Upon Referral) | |
| <i>(Must be performed by a member of the Chiropractic Association of T&T and referred by a licensed physician)</i> | |
| Maximum per Consultation | \$200.00 |
| Maximum no. of Visits per Day | 1 |
| Maximum per Calendar Year | 20 |
| Co-Insurance Factor | 70% - 30% |



TRINIDAD & TOBAGO POLICE CREDIT UNION
A DIVISION OF THE GENMED CREDIT UNION PORTFOLIO
SCHEDULE OF BENEFITS 71 & OVER

| BENEFITS | LIMITS |
|---|---|
| Acupuncture (Upon Referral) | |
| <i>(Acupuncture shall only be covered when performed by a licensed physician)</i> | |
| Maximum per Consultation | \$200.00 |
| Maximum no. Visits per Day | 1 |
| Maximum Visits per Calendar Year | 20 |
| Co-Insurance Factor | 70% - 30% |
| | |
| Airfare Benefit | 70% up to |
| Maximum Benefit | \$5,000.00 |
| Maximum No. of Trips per Calendar Year | 2 |
| | |
| Emergency Air Ambulance Benefit | |
| Maximum Benefit per Trip | US\$18,000.00 |
| Maximum No. of trips per Calendar Year | 2 |
| Co-Insurance Factor | 100% |
| | |
| Local Ground Ambulance Benefit | 100% |
| | |
| Internal Lifetime Plan Limits (Not subject to Ded/Co-ins) | |
| Organ Transplants | 50% Major Medical Maximum subject to UCR |
| Mental/Nervous Disorder | \$25,000.00 |
| HIV/AIDS | \$50,000.00 |
| Covid 19 & Hospitalization | \$150,000.00 |
| | |
| Durable Medical Equipment Benefit | 70% subject to UCR to a maximum of \$20,000.00 |
| | |
| Radiotherapy/Chemotherapy/Dialysis Benefit - Per Calendar Year | Subject to Deductible and Co-Insurance up to a maximum of \$100,000 |
| | |
| Repatriation of Mortal Remains Benefit | \$20,000.00 |
| | |
| Private Duty Nursing Benefit | |
| Maximum per 8 hr shift - Private Residence -Day | \$250.00 |
| Maximum per 8 hr shift - Private Residence -Night | |
| Maximum per 8 hr shift - Hospital-Night | |
| Maximum no. of Days per Disability | 30 |
| Co-Insurance Factor | 70% - 30% |



TRINIDAD & TOBAGO POLICE CREDIT UNION
A DIVISION OF THE GENMED CREDIT UNION PORTFOLIO
SCHEDULE OF BENEFITS 71 & OVER

| BENEFITS | LIMITS |
|---|----------------------------|
| DENTAL CARE BENEFIT | |
| Maximum Benefit per Calendar Year | \$1,500.00 |
| Deductible per Calendar Year | \$150.00 |
| Co-Insurance Factor | 70% - 30% |
| Waiting Period | 3 Months |
| VISION CARE BENEFIT | |
| Maximum Benefit | \$1,250.00 |
| Deductible per Calendar Year | \$150.00 |
| Co-Insurance Factor | 70% - 30% |
| Contact Lenses (Not medically approved) | Inc. in Vision Max. |
| Waiting Period | 3 Months |
| <i>Exam and Lens (Conventional or Contacts) are payable once every twelve (12) consecutive months and Frames are payable once every twenty-four (24) consecutive months</i> | |

GROUP LIFE BENEFITS

| BENEFIT | SUM ASSURED |
|----------------|--------------------|
| Group Life | 6,000 |
| | |



**TRINIDAD & TOBAGO POLICE CREDIT UNION
A DIVISION OF THE GENMED CREDIT UNION PORTFOLIO
SCHEDULE OF BENEFITS 71 & OVER**

**MONTHLY MEDICAL & LIFE
PREMIUM RATES**

| | |
|----------------|------------|
| • MEMBER ONLY | \$577.25 |
| • MEMBER & ONE | \$1,076.25 |