

PassportCard



Baby
Shield

Planning to have a
baby via surrogacy?

CONGRATS!
THAT'S GREAT NEWS!

As you're preparing for this exciting journey, we want to let you know that we're right there with you and will be a trustworthy partner for your future newborn's health insurance needs during this special time. We also want you to be fully prepared by explaining to you everything that you need to know regarding this process.

Keep in mind, in order to maintain insurability for the newborn, the coverage must consecutively remain active from one month prior to the transfer

Your newborn's coverage can stay in force for a maximum period of 6 months from the date of birth and may be extended, subject to Medical Underwriting.

You will be asked to complete a medical questionnaire on behalf of your baby within 15 days after birth, to determine any congenital disorders. Congenital disorders will be covered up to \$500,000.

1 A baby that is born via surrogacy can be added to the insurance of the intended parents, as long as the pregnancy developed from one transferred embryo and if the parents' policy started at least one month prior to the embryo transfer. Even better- there will be no waiting period to your newborn's coverage under the policy!

2 Your newborn's policy will be issued from the time of birth until your family returns to your Country of Origin. At that time your baby will be registered in your home country's social medical services, or under any other health insurance solutions.

3 The newborn's routine medical or non-medical expenses are excluded from the period after childbirth and until discharge from the hospital. Special tests or procedures which are not standard to newborns after birth will be covered.

Confused? Don't worry, we've got answers!

Q: What is the policy's territory of coverage?

A: For the Intended Parents, coverage is "Worldwide excl. USA and Country of Origin". The newborn's cover is extended to include the Intended Parents' country of origin for up to 6 months. Emergency USA coverage (Non-elective) is granted only for non-American citizens/residents Intended Parents and their newborn, once enrolled.

Q: How does the maternity waiting period effect the insurability of the newborn?

A: It doesn't apply to babies born via surrogacy.

Q: Does the policy cover normal childbirth expenses or childbirth complications for babies born to the surrogate?

A: Premature births and other complications will be covered for the direct expenses for the newborn only and not for the surrogate. However, the newborn's routine medical or non-medical expenses are excluded from the period after childbirth and until discharge from the hospital.

Q: What is the policy maximum?

A: The policy maximum is \$5,000,000 USD. The benefit for congenital anomalies is separate and limited to \$500,000 USD.

Q: How is the insurability guaranteed in the case of premature birth?

A: Premature birth is covered and any missing premium due to this gap must be bridged according to individual rates.

Q: Will any additional premiums apply to the newborn?

A: An additional monthly premium will be required upon addition of the newborn to the policy within 15 days of birth.

Q: How is the newborn's insurability guaranteed?

A: There are a few simple conditions for insurability guarantee: • Both intended parents need to be insured from one month prior to the embryo transfer. Single intended parents can also be guaranteed insurability under different rules.

- Insurability is guaranteed for one embryo transfer only. **A single embryo that splits is guaranteed insurability up to the cap under the certificate of coverage.**
- Eligibility for the policy will be determined upon activation of the insurance policy and you will receive a document which confirms and guarantees the newborn's insurability.

Q: How do we enroll the baby once born?

A: The Intended Parent may contact our Customer Service Department within 15 days of birth, and a representative will contact you to add the newborn for an additional premium.

Q: How are claims paid for newborn outpatient services such as doctor's visits and medications?

A: After discharge from the hospital, claims can be paid using your PassportCard, via the smartphone app or on a reimbursement basis.

Q: How are claims paid for inpatient services / hospitalizations?

A: DavidShield will work directly with any hospital to provide a Guarantee of Payment and avoid any interim financing.

Q: Is NICU covered?

A: Yes, NICU is covered when medically necessary.

Q: Where can I find a list of the benefits covered under this policy?

A: You can access the Table of Benefits for all covered expenses.

Q: Can the newborn's coverage be extended after the Intended Parents

A: Should the newborn need coverage after the family's return to their country of origin, until they organize their health solutions, they may extend the coverage for up to 6 months after the newborn's date of birth.

Q: Can my policy be cancelled at any time between transfers?

A: Yes, policies can be canceled at any time in between transfers. Policies cannot be put on hold until the next transfer. Canceling your policy may disrupt the continuity of the insurability since your insurance will not be in place for 10 consecutive months. Please contact our Baby Shield representative to discuss options.

Subject to policy terms, conditions and exclusions. Purchasing insurance coverage is subject to medical underwriting. Via David Shield Life Insurance Agency (2000), Ltd., License Number 512900432. The insuring company is "David Shield Insurance Company, Ltd."

What's next?

For additional information about the policy and the insurance solutions available to you, contact the insurance broker- BabyShield at:

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