

AON

Standard & Poor's

**Benefit Program for
Employees**

Vigency:

January 1st 2025 – January 1st 2026



Major Medical Expenses Insurance



Definition



Benefits and Coverages



Procedures



Medical network



Definition

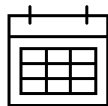


The Major Medical Expenses Insurance offers you the facility to receive private medical attention without causing a major loss in your economy, as a result of any sudden illness or accident.

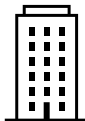
- Participants:
- ✓ Employee
 - ✓ Spouse
 - ✓ Children under 25 years
They have to be single and economically dependent on the employee

January 1st
2025 to 2026

VIGENCY




INSURER



1 UMAM
(\$ 3,439.46 MXN)

CURRENCY



UMAM: Unidad de Medida y Actualización Mensual

How do I register my beneficiaries?



It's very easy, just follow these steps:

1. **Go to your Human Resources area** and request the registration of any of your eligible beneficiaries (spouse and children under 25 years of age) by uploading a ticket in [My Solutions Portal](#)
1. **Have on hand the documents that prove the relationship** as they will be requested, for example:
 - Marriage certificate
 - Birth Certificate (in the case of children)
3. S&P will request the corresponding registration, which we will be sending to the insurer and **within a period of 5 to 7 business days you'll be receiving your certificate and digital credential.**



Newborns will need to be reported to Human Resources **within 30 days of birth.**

IMPORTANT INFORMATION!



The **Insurance Company** is the only institution that can determine if the diagnosis proceeds or not.



General Concepts



Assured Sum

Maximum amount that the insured may have due to illness.



Deductible

Amount that the insured must pay for each illness that proceeds.



Coinsurance

Amount that the insured will pay out of the total expenses generated from an event.



Basic

• **1,617 UMAM** for:

(\$5,561,606 MXN)

Excess:

• **43,298 UMAM**

(\$148,921,739 MXN)

Refund and Direct Payment
1 UMAM (**\$3,439.46 MXN**)

Refund 10%
(Maximum amount to
\$25,000 MXN)

Direct Payment 10%
(Maximum amount to
\$25,000 MXN)

How to use the policy?



Refund



Recovery of Expenses Made.

We will proceed to enter it once we have the following requirements:

- Definitive diagnosis
- Expenses exceed deductible
- Covered by the contracted conditions

Surgery schedule



Authorization prior to hospitalization.

Main Condition:

- Network hospital mainly and network doctor preferably.
- Applies for outpatient and hospital stays.

Direct Payment



Medical emergencies or cases that could not be scheduled.

Main Conditions:

- Network hospital mainly and network doctor preferably.
- Minimum stay of 24 hours

Direct contact with the Insurance Module at the hospital.

***In any of the cases, the fees will be subject to the policy tabulator and any excess is not refundable.**

The hospital may request a guarantee deposit



Refund Example



1. The employee Jose presents for the first time expenses that apply to a refund. The amount is \$20,000.00 Mexican pesos for suffering from arterial hypertension.

	Reclaimed amount	\$20,000
(-)	Deductible	\$3,439
(=)	Subtotal	\$16,561
(-)	Coinsurance (10%)	\$1,656
(=)	Final amount refunded	\$14,905

2. The following month, the employee Jose make expenses to refund. Now the amount is \$5,000 for the same condition:

	Reclaimed amount	\$5,000.00
(-)	Deductible	\$0.00
(=)	Subtotal	\$5,000.00
(-)	Coinsurance 10%	\$500.00
(=)	Subsequent amount refunded	\$4,500.00

Benefits and Coverages



Nose and Sinus Surgery

It will proceed as long as it is not cosmetic surgery.

Preoperative radiographs are required.

Deductible and coinsurance apply in case of Illness or Accident



Rehabilitation Therapies

Radiotherapy, inhalation therapy, physiotherapy and chemotherapy treatments prescribed by the treating doctor are covered.



Complements Payment

Covered according to conditions contracted at the beginning of the incident.



Congenital Disorders

For those born during the policy as long as they are registered within the first 30 days of birth or as long as the signs and symptoms are diagnosed after 5 years of age.



Emergency abroad

Assured Sum 75,000 DLLS and Deductible 75 DLLS.

Medical expenses incurred by the insured or their dependents abroad that put their life or physical integrity at risk for which immediate medical attention is required are covered.



Sight correction

Treatment to correct myopia, astigmatism or hyperopia myopia, and keratokonos is covered with 15 UMAM (51,585 MXN)

- The Medical Report and the medical examination must specify that the insured has a minimum visual deviation of 5 diopters per eye.

For purposes of this coverage, the sum of the diopters of both eyes is not considered.

Benefits and Coverages



Natural childbirth or Cesarean

Participants:

Insured Holder and/or Spouse

Natural Childbirth (No waiting period)

Assured Sum: 808.46 UMAM (**\$2,780,665 MXN**)

No deductible or coinsurance

Cesarean

Assured Sum: 808.46 UMAM (**\$2,780,665 MXN**)

Deductible 1.8 UMAM (**\$6,191 MXN**) and 10% Coinsurance

The insured sum is intended to cover medical fees according to the tabulator and hospital expenses.

Pre and post natal expenses are not covered.

UMAM: Unidad de Medida y Actualización Mensual
\$ 3,439.46 MXN



Healthy Newborn*

Assured Sum 8.98 UMAM (\$30,886 MXN)

For nursery expenses.

No deductible or coinsurance.



Pregnancy complications

Those without verifiable pathology are excluded.

Necessary histopathological study.



Prematurity*

Expenses derived from the premature birth of the baby.

It is covered with Assured Sum, Deductible and Coinsurance.

* Independent Maternity Event



Covered Expenses

- ✓ Medical Fees (according to tabulation, in case of two procedures under the same incision, the tabulation of the higher procedure will be covered).
- ✓ Laboratory and/or cabinet exams related to the condition.
- ✓ Medications prescribed by the doctor and directly related to the treatment of the covered condition.
- ✓ Operating room, healing and recovery expenses.
- ✓ The cost of a standard private room, patient meals, and admission packet.
- ✓ Treatment of hernias and eventrations.



Expenses Not Covered

- × Treatments and conditions resulting from alcoholism or drug addiction.
- × Treatments for baldness, obesity, weight loss and sterility.
- × Experimental treatments.
- × Professional practice of any sport.
- × Fees and any type of medical or surgical treatment by acupuncturists, naturists, vegetarians and homeopaths.
- × Hearing aids and prostheses.
- × Medical fees for a second procedure in the same incision.
- × Treatments and/or aesthetic procedures.

Medical Network – Premier 100 Plan



1 Go to the official website of the insurer:
<https://www.gnp.com.mx/>

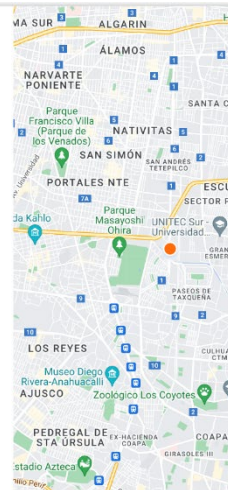
2 In the middle part of the main page you will find the “Soy Cliente GNP” section and you must select the option: “DIRECTORIO”

3 Select in “tipo de búsqueda”, as you want to search for doctors or hospitals.

4 You will be able to view all the options within the Network. As well as the address and contact information.

Encuentra lo que necesitas.

← Selecciona el servicio del panel izquierdo.





Orientación médica telefónica

El servicio se brinda para resolver dudas o inquietudes sobre síntomas o padecimientos que el paciente manifieste, en caso de ser necesario, el médico podrá recetar medicamentos, referenciar con médicos especialistas o instituciones médicas, activar el servicio de consulta médica a domicilio, videoconsulta médica o ambulancia por emergencia



Videoconsulta médica

Se proporciona para atender casos que no se catalogan como urgencias pero requieren asesoría de un Médico General que puede resolverlos por medio de valoración médica en línea, la prescripción de un tratamiento y receta de medicamentos.



Consulta médica a domicilio

El servicio se brinda para la atención en casos en los que se requiera la presencia física de un Médico general para resolver problemas que no se catalogan como urgencias pero que requieren la valoración y la prescripción de un tratamiento.



Ambulancia por emergencia

En caso de que urgencia médica, se enviará una ambulancia acondicionada con equipo especializado para cada necesidad, la tripulación a bordo es un técnico en urgencias médicas (TUM), un operador paramédico y en caso de ser necesario un médico general o urgenciólogo.

Dental and Vision Plan



How to use the Benefit?



Coverages



Medical Network

How do I use my Dental and Vision Insurance?

Plan Dental Premier / Plan Visión Platino 150



1

Locate a dentist or optician at:

www.centauro.com.mx/seguros/directorio/



2

Call **55 4329 8183** or **800 800 8040** an operator will recommend a dentist / optician near your home or office.



3

Schedule an appointment with the dentist of your choice.

Or go to the nearest optician mentioning the following guide:

NO. DE CONVENIO DEVLYN VISIÓN PLATINO 150
6752 v/s 6753 BIF 6755 6757 6772 y 6795.



4

Show up at the office with your GNP digital credential and an official photo ID.



Dental Plan Coverage – Adult



MODULO 1. BÁSICO PACIENTE ADULTO	
PAQUETE ANUAL DE DIAGNOSTICO (PAD)	Coaseguro
Consulta oral detallada y extensiva	Sin Costo
Diagnóstico y Plan de tratamiento	
Profilaxis primera cita	
4 radiografías de diagnostico	
Consulta de emergencia en horario normal (No incluye tratamiento)	Sin costo
RADIOGRAFÍAS	
PACIENTE ADULTOS	Coaseguro
Radiografía Periapical	Sin Costo
Radiografía Oclusal	
Radiografía de aleta de mordida	
MODULO 2. OPERATORIA DENTAL	
PACIENTE ADULTOS	Coaseguro
Amalgama simple (una superficie del diente permanente)	Sin Costo
Amalgama compuesta diente permanente (dos superficies del diente, aun cuando no exista comunicación entre sí)	
Amalgama compleja diente permanente (tres superficies del diente, aún cuando no exista comunicación entre sí)	
Amalgama complementaria clase I diente posterior permanente	
Resina simple (una superficie en diente anterior permanente)	
Resina compuesta (más de una superficie del diente anterior permanente, excluye ángulo o borde incisal)	
Resina una superficie diente posterior permanente (cara oclusal)	
Resina compuesta en diente posterior, dos superficies	
Resina diente posterior por reposición de amalgama previa	
Resina diente posterior, post fisurotomía	
Resina complementaria clase I diente posterior permanente	

MODULO 3. ENDODONCIA	
PACIENTE ADULTOS	Coaseguro
Recubrimiento pulpar indirecto (no incluye restauración)	Sin Costo
Tratamiento de conductos en diente anterior permanente.	
Tratamiento de conductos en premolar	
Tratamiento de conductos en molar permanente	
Retratamiento en diente anterior	
Retratamiento en premolar	
Retratamiento en molar	
Apexificación (apicoformación) con dos citas incluidas para su control	
Apicectomía-Cirugía periradicular en diente anterior	
Apicectomía, Cirugía periradicular en premolar	
Apicectomía, Cirugía periradicular en molar	
Obturación retrógrada (por raíz)	
Radicectomía ó amputación radicular	
MODULO 4. CIRUGÍA	
PACIENTE ADULTOS	Coaseguro
Extracción simple (incluye alveoloplastía)	Sin Costo
Extracción de restos radiculares o raíces expuestas	
Biopsia de tejidos orales duros (No incluye costo de laboratorio)	
Biopsia de tejidos orales blandos (No incluye costo de laboratorio)	
Incisión y drenaje de absceso intraoral, involucra incisión a través de la mucosa	
Frenilectomía lingual o labial	
MODULO 5. TERCEROS MOLARES	
PACIENTE ADULTOS	Coaseguro
Extracción de diente impactado en tejido blando (tercer molar erupcionado)	Sin Costo
Extracción de diente impactado parcialmente cubierto por hueso	
Extracción de diente impactado totalmente cubierto por hueso	

Dental Plan Coverage – Child



MODULO 1. BÁSICO PACIENTE INFANTIL	
PAQUETE ANUAL ODONTOPEDIATRICO (PAO)	Coaseguro
Consulta oral detallada y extensiva	Sin Costo
Diagnóstico y Plan de tratamiento	
Profilaxis primera cita (niños menores de 14 años)	
4 radiografías de diagnostico	
Consulta de emergencia en horario normal (No incluye tratamiento)	Sin costo
RADIOGRAFÍAS	
PACIENTE NIÑOS	Coaseguro
Radiografía Periapical	Sin Costo
Radiografía Oclusal	
Radiografía de aleta de mordida	
MODULO 2. OPERATORIA DENTAL	
PACIENTE INFANTIL	Coaseguro
Amalgama simple en diente temporal (una superficie)	Sin Costo
Amalgama compuesta (dos superficies aun cuando no exista comunicación)	
Amalgama compleja (tres o más superficies aun cuando no exista comunicación)	
Amalgama complementaria clase I diente posterior	
Resina simple (una superficie en diente anterior)	
Resina compuesta (más de una superficie del diente anterior)	
Resina una superficie diente posterior temporal	
Resina dos superficies diente posterior temporal	
Resina diente posterior por reposición de amalgama previa	
Resina diente posterior, post fisurotomía	
Resina complementaria clase I diente posterior	
MODULO 3. ENDODOCIA	
PACIENTE INFANTIL	Coaseguro
Pulpotomía en dientes temporales.	Sin Costo
MODULO 4. CIRUGIA	
PACIENTE INFANTIL	Coaseguro
Extracción de diente temporal	Sin Costo
Recolocación de dientes accidentalmente desplazados (no incluye ferulización)	

Vision Plan Coverage



SERVICIOS	PLATINO 150
CONSULTA OPTOMÉTRICA	Incluida
ESCOGER	
MODELO DE ARMAZÓN OFTÁLMICO	Armazón hasta \$2,000.00
PLÁSTICOS CR-39 Monofocal o Bifocal Flat – Top L-28 Sin tratamiento.	Incluidos
Estuche	Incluido
ó	
LENTE DE CONTACTO Graduados (No cosméticos)	2 pares de Suaves Devlyn ó 1 par de Tórico Devlyn ó 4 cajas de Frequent
ESTUCHE	Incluido
JUEGO DE SOLUCIONES (En Caso de Lentes de Contacto)	Incluido
BENEFICIOS ADICIONALES (Una vez al año)	
REPOSICIONES En Plástico Oftálmicos Cr-39 Blancos	30% en plásticos CR-39 Sin tratamientos y lentes de contacto graduados
DESCUENTO EN MODELOS DE NIVEL MAYOR AL PLAN ELEGIDO O EN PRODUCTOS NO CUBIERTOS	10% (Aplican restricciones en algunas marcas)
REPOSICIÓN DE ARMAZÓN	20%
SUMA ASEGURADA ANUAL	\$2,000.00
DEDUCIBLE	\$150.00 + I.V.A.

Plan Limitations:

- Provision of contact lenses or glasses once per person and per policy year, and may not be combined with other Devlyn promotions.
- At no time can the insurance be used to change lenses for already existing frames.



Directorio de Odontólogos

Centauro.com.mx » Directorio de Odontólogos

Dental

Visión

Estado Ciudad de México ▾

Delegación / Municipio Miguel Hidalgo ▾

Especialidad Endodoncia ▾

Búsqueda por Nombre

Buscar Limpiar

You can locate the dentist or optician of your choice through the following link:

www.centauro.com.mx/seguros/directorio/

Nombre	Colonia	Especialidades	Ubicación
Alma Verónica Carrillo Barrera	Bosque De Chapultepec	Endodoncia, Odontólogo General	Ver Más...
Alma Verónica Carrillo Barrera	Polanco	Endodoncia	Ver Más...
Araceli Carbajal Osorio	Lomas De Chapultepec	Endodoncia	Ver Más...
Brenda Xoyoco De la Cruz Lugardo	Veronica Anzures	Endodoncia	Ver Más...
Carlos Guillermo Serrano Pieretti	10 de Abril	Endodoncia	Ver Más...
Cynthia Mercado Velazquez	Polanco	Endodoncia	Ver Más...
Diego Lopez Duran	Granada	Endodoncia	Ver Más...
German Federico De Jesús Valle Amaya	Polanco	Endodoncia	Ver Más...
Hector González Ortega	Los Morales	Endodoncia	Ver Más...
Ingrid Alejandra Sánchez Carrasco	Lomas De Chapultepec	Endodoncia	Ver Más...
José Luis Jácome Musule	Polanco	Endodoncia	Ver Más...
Luis Fernando Villarroel Rivera	Granada	Endodoncia	Ver Más...
Ma. Rosario Cruz Franco	Chapultepec Morales	Endodoncia	Ver Más...

Life insurance



General Concepts



Coverages



Recommendations

General Concepts



The objective of Life Insurance is to guarantee the economic security of the people who depend economically on the insured in the event of his death.

Beneficiaries are the people you name to receive the money from the life policy after you die. It can be one or more people.

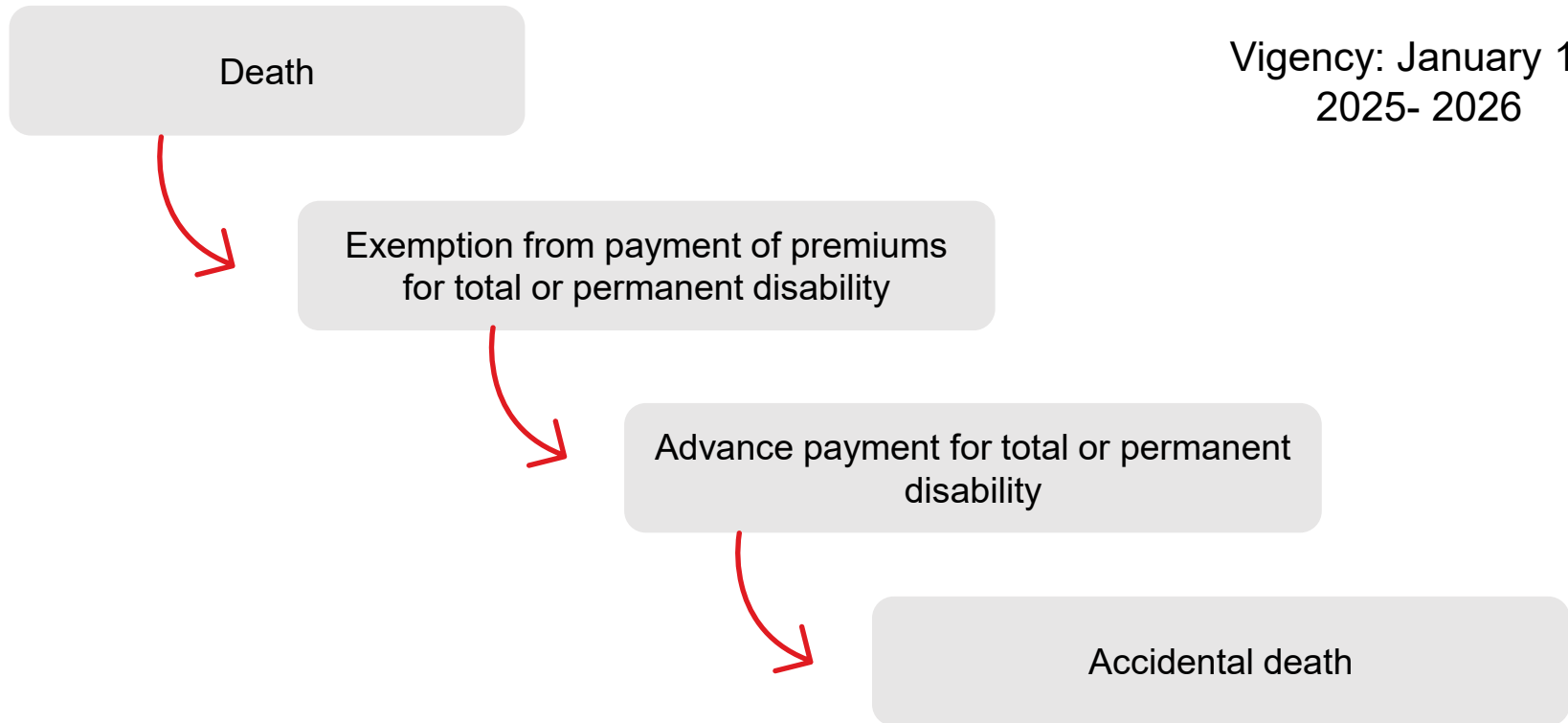


Coverages



Insured Sum Rule: 36 months salary

Vigency: January 1st
2025- 2026



DO NOT forget to update your life consent. Protect your family!

[Actualiza aquí tu poliza de vida](#)

Main Recommendations



To fill out the Consent, it is recommended:

- Clear and precise writing
- Name more than one beneficiary,
- That the beneficiary is of legal age,
- Specify relationship and percentages,
- Signature the same as in official documents,
- Preferably designate direct family members (when the beneficiaries are persons other than those indicated, the Insurer is obliged to withhold 20% of the Insured Sum for income tax, this is an obligation established by the SHCP-Mexican government).





Example Designation Beneficiaries



Nombre Completo	Porcentaje	Parentesco
Carlos Perez Lopez	50%	Hijo
Juan Perez Garcia	50%	Padre

In the event of the death of either of the two, give 100% to the survivor.

In the event of the death of the two main beneficiaries, the following will remain as substitute beneficiary:

Nombre Completo	Porcentaje	Parentesco
Veronica Perez Fuentes	100%	Hermana

You can update your beneficiaries whenever you want. You only have to request the format corresponding to your Human Resources area.



At Aon we have a 24/7 **Specialized Attention Center** that will provide you with immediate and personalized attention. Call our AON Call Center, who will gladly answer questions about:

Red de proveedores



To consult hospitals and medical network:

Telephone assistance 24/7:

Call the GNP Call Center

(55) 5227 9000



Coberturas de tu póliza

Do you have basic questions about the coverage of the policy, deductible, coinsurance and assured sums?

Call our Call Center AON

(55) 5448 4815



Llenado de formatos

Advice for filling formats

Call our Call Center AON

(55) 5448 4815



Cómo proceder ante un siniestro

Requirements or formats to process a refund or scheduled surgery

Call our Call Center AON

(55) 5448 4815



You need to send a process for refunds and/or schedule a surgery.

Send your request by email to your Account Executive.

Attention Schedule:

Monday – Thursday 8:00 a.m. to 5:00 p.m.

Friday 8:00 a.m. to 2:00 p.m.

Maximum response time 48 hours



If you entered the Hospital for urgency, Contact your

Account Executive.

Aon Team



Mariana Vela

Executive Account Sr. GB

Cellphone: (93) 8124 7797

mariana.vela@aon.com

Yazmin Lara

Manager GB

yazmin.lara@aon.com

Thank you

AON

This document is an Informative Summary, the policy conditions will always prevail.