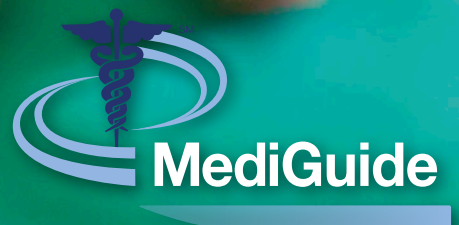


M

MEDICAL

S O

SECOND OPINION



We hope that you'll never need to worry about getting a Medical Second Opinion for a serious medical condition, but just in case, MediGuide makes it easy to get one.

Did you know that the original diagnosis can be wrong between 1% and 18% of the time.

As found by a Harvard study, their scientists performing Medical Second Opinions enhanced the original treatment plan 67% to 90% of the time.

This is why MediGuide says that we put our members "Closest to the Cure"

As opposed to having a single doctor review the medical file, MediGuide's hospitals employ the "Consultative Team" approach. This approach joins together a number of different specialists at the WLMC (World Leading Medical Center), each of whom brings separate specializations to the review of a single patient.

Our Medical Second Opinion Program

Why and how does it work?

When one of your Insured, your Employees or your Members is facing a serious illness, the feeling is nothing short of overwhelming. So that person and his/her doctor want to be certain they're looking at every available option when they're making critical decisions about the health of your customer.

Our Medical Second Opinion program is a unique service available through all of MediGuide companies, a global leader in Second Opinion services.

Members who have been diagnosed with certain illnesses (any medical condition which is life threatening) can have their diagnoses and perhaps even more importantly, their treatment plans evaluated by researchers that are at the cutting edge of the science across the globe.

Giving your Insured, your Employees or your Member access to an independent review from a World Leading Medical Center (WLMC) - at no cost to them -, is the right thing to do and a critical first step.

The program provides them with comprehensive information and advice to help make critical decisions about their health. And since time is of the essence, Second Opinions are typically provided by the WLMC in writing within ten business days.

Because with a serious illness at hand, peace-of-mind may often be one of the best medicines.

Recently, a Life Assurance Company asked us to analyze a number of cases going back to the early years of our 10 year collaboration in order to find out to what extent the Medical Second Opinion Service has impacted their claims.

Was the MSO program capable of extending the lives of their insureds?
Let's analyze one of the cases together:

MediGuide Member CASE #7

A 43 Year Old Female Who Had An Excision of A Melanoma in 2005. In 2008 A Large Lymph Node In The Neck Was Found To Be Metastatic Melanoma.

Her Treating Physician Recommended Radical Neck Dissection Which Is Extensive And A Very Disfiguring Surgery With High Mortality.

The MediGuide Medical Second Opinion From University Of Pennsylvania Medical Center Recommended Not Proceeding With The Radical Neck Surgery.

Instead The MediGuide MSO Recommended She Proceed With Systemic Medical Therapy. In Fact The Patient Was Offered A Position In One Of Seven Medical Trials For Stage 4 Melanoma Being Conducted At Penn.

A Recent Contact With The Patient Indicates She Is Alive And Doing Very Well 6 ½ Years Later.

(See Email From P. Girard below)



Date: October 31, 2008
Nawal Khafaji, M.D.
Medical Director, PIM

Dear Dr. Khafaji,

CASE SUMMARY:

Fine needle aspiration done on September 18, 2008 was consistent with S100+ metastatic melanoma. This node was excised and was confirmed to be metastatic melanoma on September 26, 2008.

IMPRESSIONS:

43 year old female with likely Stage IV M1a Metastatic Melanoma involving the axillary lymph nodes. I would consider this PET scan negative melanoma.

TREATMENT ALTERNATIVE:

I would recommend systemic medical therapy for treatment, but further workup prior to this. If this diagnosis is correct, then I would suggest a clinic appointment with the University of Penn melanoma group or similar academic university practice (Johns Hopkins, Memorial Sloan Kettering) to discuss clinical trials.

However, since there is no proven standard of care established for Stage IV melanoma, we highly recommend patients to consider a clinical trial before any other treatment that gives them access to new therapeutic strategies. We have at least 7 clinical trials that might be appropriate for this patient. The pace of this disease suggests that the patient should consider starting systemic therapy in the next few months without delay.



Date: October 31, XXXX

USF10-7698JOF

Nawal Khafaji, M.D.
Medical Director, PIM
1835 Market Street 10th floor
Philadelphia, PA. 19104

Dear Dr. Khafaji,

Thank you for the referral and the copy of the medical records for this patient. I had the opportunity to do a case review of XXXXX XXXXXX'X medical records. All opinions stated in the enclosed report are based solely on the records received by the physician without benefit of physical examination or contact with the patient.

I have carefully reviewed the available case material, scan reports, pathology reports, and laboratory reports. I have personally reviewed the CT scan and PET scan.

CASE SUMMARY:

43 year old female with past medical history significant for lupus, was diagnosed with a dysplastic nevus on the right shoulder in XXXX. The initial diagnosis was a shave biopsy followed by wide excision with negative margins. In February of XXXX, the patient self-palpated a 2 cm right cervical lymph node. Fine needle aspiration done on September 18, XXXX was consistent with S100+ metastatic melanoma. This node was excised and was confirmed to be metastatic melanoma on September 26, XXXX. A CT scan of the neck and chest in May XXXX before the excision of this lymph node demonstrated the cervical node and raised concern about 2 other nonspecific nodes near the great vessels of the neck. There was no mention of axillary adenopathy at that time.

The patient had complete ophthalmological exam to rule out ocular melanoma. A CT scan of the neck and chest done October 1, XXXX and October 9, XXXX found new bilateral axillary adenopathy with the largest node measuring 3.5 cm. There were no findings of increased neck nodes. The PET scan demonstrated borderline increased uptake at the site of the axillary nodes.

Past Medical History: Lupus, no other information available
Medications: Microgestin, nasonex, vitamins, oscal
All: not available
Social: Not available
Review of Systems: Not available
Physical Exam: Not available
Laboratory data: elevated IgG, ANA, RA latex, otherwise unremarkable.
Imaging: as above.



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IMPRESSIONS: 43 year old female with likely Stage IV M1a Metastatic Melanoma involving the axillary lymph nodes. I would consider this PET scan negative melanoma.

TREATMENT ALTERNATIVE: I would recommend systemic medical therapy for treatment, but further workup prior to this. To be extremely cautious I would recommend a fine needle aspiration of the large axillary lymph node to confirm this is metastatic melanoma, and not lymphoma or breast cancer. If this diagnosis is correct, then I would suggest a clinic appointment with the University of Penn melanoma group or similar academic university practice (Johns Hopkins, Memorial Sloan Kettering) to discuss clinical trials.

I would be happy to see this patient in the office. There are a few off-trial treatment options such as dacarbazine, temozolomide, and IL-2 that can be started through the local oncologist. However, since there is no proven standard of care established for Stage IV melanoma, we highly recommend patients to consider a clinical trial before any other treatment that gives them access to new therapeutic strategies. We have at least 7 clinical trials that might be appropriate for this patient. The pace of this disease suggests that the patient should consider starting systemic therapy in the next few months without delay. If the patient opts to hold off on systemic therapy I would suggest getting a CT of the chest abdomen and pelvis every 2 months to follow the course of the disease.

I would not recommend surgery or radiation for this problem.

COMMENTS: See above.

If I can be of any further help to the patient, please have the patient contact me through Philadelphia International Medicine.

Sincerely,

Ravi Amaravadi, M.D.
Assistant Professor of Medicine
University of Pennsylvania



From: Polly Girard
Sent: Tuesday, February 03, 2015 12:46 PM
To: Jack Owens
Subject: Case 6 Metastatic Melanoma Case

Dear Jack,

I have just had the most amazing conversation with Xxxxx Xxxxxxx. She is wonderfully happy and absolutely enjoying life. She and I worked very closely together during her second opinion and became quite friendly so talking with her was just great. I can't believe she had stage IV metastatic melanoma.

She hasn't required any additional treatment since her surgery in 2008. At one point one of her doctors was suggesting a radical neck dissection which is very extensive surgery and can be disfiguring. She is very grateful that the MediGuide MSO found that this was not the proper treatment.

I so enjoyed being able to talk with her again and to hear how totally happy she is.

Sincerely,

Polly

Polly Girard, R.N.,B.S.



MediGuide Member **CASE #7**

Q&A for our members

Why would I request a Medical Second Opinion, am I second guessing my doctor?

As found by a Harvard study, 90% of the time, Harvard's scientists changed or enhanced the treatment the patient was originally told to follow. That is a staggering fact.

The secret is that the WLMC's attract the most research funds. Those funds allow those Centers to purchase the most up to date scientific equipment, to attract the most dedicated scholars, and to hire the most highly regarded and focused scientists.

When can I access the Medical Second Opinion service provided by MediGuide?

You can access the service if your membership with MediGuide is still active and in force. You can request a Medical Second Opinion for any medical condition you are diagnosed with.

Who is covered by MediGuide?

In addition to you having access, the Medical Second Opinion service can be accessed by your wider family, so that means your spouse / partner, your children, your parents and your spouse's / partner's parents, if that option is made available by your insurer, your employer, your membership organization.

What conditions are covered by the Medical Second Opinion service?

The Medical Second Opinion service covers any medical condition.

MediGuide's Remote Medical Second Opinion Services empower Members to confirm their diagnoses and provide them with the most appropriate recommended treatment option for their specific condition.

The research done by our World Leading Medical Centers and the technological progress is making it possible to do remote MSOs for more medical conditions than in the past.

Is there a cost to me?

There is no cost to you for requesting or receiving a review from MediGuide, MediGuide will cover all costs associated with the service.

Is any treatment recommended in my Medical Second Opinion covered?

The Medical Second Opinion report will provide you with a treatment plan that can differ from the treatment plan offered by your attending physician.

The main reason for this is the fact that in the WLMCs MediGuide uses a team of doctors which will re-study your medical records. MediGuide is not referring from a doctor to another doctor, instead from a doctor to a research team composed of doctors of multiple specialties.

Will I be seen by the doctor at the medical center I select for my Medical Second Opinion?

No - within 10 business days of receipt of your medical files by the center you choose, you and your doctor if you so authorize (subject to data protection) will receive an independent written review of your diagnosis and treatment plan.

Will I be in contact with my insurer/my employer/my membership organization for the Medical Second Opinion service?

No, you can contact MediGuide directly. All of your contact with the Medical Second Opinion service will be directly with MediGuide, your insurer, employer, membership organization have no involvement in the Medical Second Opinion process nor will they have access to your medical records or the Medical Second Opinion.

What is the next step after I receive my Medical Second Opinion?

You should discuss the Medical Second Opinion service recommendations with your doctor. The information contained in the Medical Second Opinion can provide important peace of mind to patients and their families and can enable you to make informed decisions about your health and treatment plan. In consultation with your doctor, it may even lead to the pursuit of a new treatment plan administered locally.

What if the Medical Second Opinion differs from the original diagnosis and treatment?

You should discuss the outcome of the Medical Second Opinion with your doctor. If you and your doctor have questions after receiving a Medical Second Opinion with a differing diagnosis or treatment plan, MediGuide is happy to submit those questions to the medical center who provided the review. In certain cases, MediGuide will go so far as providing a third opinion from another leading medical center to provide clarification and most importantly, peace of mind for you.

Will my medical records remain private?

All of your discussions and ongoing correspondence with MediGuide will remain strictly confidential. MediGuide adhere to all applicable data protection laws when transferring medical records and details.

Is it my responsibility to collect my medical records?

No, once you contact MediGuide and start the Medical Second Opinion process and have consented to share your data, MediGuide will then work with you and your doctor to collect relevant medical records.

Can I use MediGuide for a condition that was present before I became a member of MediGuide?

Yes, you and/or your family can use the Medical Second Opinion service for conditions which were diagnosed before you became a member of MediGuide.

How many times can I use the Medical Second Opinion service?

As long as you are a member and you or your family want a Medical Second Opinion on a diagnosed condition covered, you can use the MediGuide service as often as you need to. There is no limit on usage.

How do MediGuide choose their medical centers?

MediGuide assess the panel of medical centers on an ongoing basis to ensure they are capable of providing quality Medical Second Opinion services. Typically these WLMC are research centers.

How does it work

Giving someone access to an independent review from a World Leading Medical Center(WLMC) - at no cost to them -, is the right thing to do and a good first step.

The program provides them with comprehensive information and advice to help them make critical decisions about their health. And since time is of the essence, Second Opinions are typically provided by the WLMC in writing within ten business days. But is it difficult to obtain a MSO?

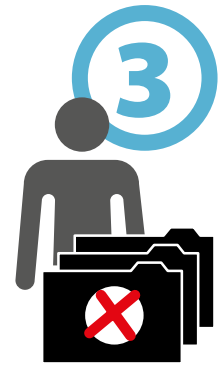
Let's go through the six easy steps:



Patient is diagnosed with a condition which is covered under Medical Second Opinion.



The member calls MediGuide's local service center to establish eligibility and then initiates the Medical Second Opinion service through MediGuide.



Patient must sign a form consenting to the release of their medical records and details. The doctor will then prepare the relevant patient medical records for MediGuide.



MediGuide will identify three medical centers available to provide the review and gives the names to the patient and doctor.



Patient and doctor choose the medical center they wish to use for the Medical Second Opinion from the list of 3 provided.



Within 10 business days of receipt, both the patient and/or doctor will receive a written review from the selected medical center of the original diagnosis and a proposed treatment plan, subject to data protection.

Next Steps



Whether you are representing an insurance company, a bank or an affinity group, whether you are an employer or a HR manager; adding Medical Second Opinion as a service for your clients, employees or members is the right thing to do.

Not only will Medical Second Opinions typically lower the cost for medical treatment in most cases, the enhanced treatment plan will get people back to work sooner. But most importantly, it will provide your insured, client or member with the peace of mind that MediGuide will bring them 'Closest to the Cure'.

A local program can be set up quickly, service will be provided in the local language of your constituents, with compliance of all privacy regulations in your market.

When it comes to health and recovery, your policyholders, customers, employees or members will thank you for the peace of mind that comes with the record of success like MediGuide's on your side.

So don't hesitate and contact one of our offices listed on the back cover of this brochure. MediGuide the world first choice for Medical Second Opinions.





MSO Medical Second Opinion

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