



EASY CARE+

- + accessible
- + affordable
- + efficient
- + transparent

**INTERNATIONAL
HEALTHCARE**

www.aplusii.com

For more than a decade we've been taking care of our clients and their families when they need it most.

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Disclaimers:

The information provided on the brochure and leaflets is for indication only. For your detailed cover, please refer to the General Conditions.

These plans are not designed to replace local healthcare coverages as required by law, and applicants remain personally responsible for ensuring compliance with any relevant social security, insurance contract and other applicable legislation in their countries of residence.

ABOUT US

EXPERIENCE YOU CAN TRUST

A+ International Healthcare was formed in 2008 by people with decades of experience within the sectors to act as a product provider in the international health insurance market.

CLOSER TO YOU

We are not an insurer, but we act on behalf of insurers in terms of product design and administration, but with a fair amount of authority.

MORE CONTROL

The products we sell are our products and the clients who buy them are our clients. We choose the most appropriate partners to provide the best service to our clients without compromising quality.

ALWAYS THERE FOR YOU

We pride ourselves in looking after you during your time of need. Hospital procedures and medical bills can all be very confusing and a heavy burden on you and your family.

GLOBAL REACH

A+ International Healthcare offers best-in-class medical health plans to clients around the world. We protect you, wherever you go.

24/7/365 SUPPORT

With our plans you can rest assured that you and your company or your family's wellbeing is well protected. Together with our trusted partners we work tirelessly to serve you.

OUR SERVICE PROMISE



ALL-YEAR SUPPORT



SWIFT REIMBURSEMENT



EMERGENCY GUARANTEE



FAST UNDERWRITING



COVER WITHOUT BORDER



CONTINUOUS SERVICE

SERVICE	MAX RESPONSE TIME
Customer service response	2 Working days
Sales response	2 Working days
Underwriting completed	3 Working days
Claims reimbursement processed	5 Working days
Guarantee of payment issued (treatment preapproved)	2 Working days
Emergency guarantee of payment issued	2 Hours

Whenever and wherever you are, Easy Care+ provides you coverage even if you move to another continent, get married, change your occupation, or wish to add a beneficiary.



OUR OFFER

Our Standard Plans (Worldwide and SEA Plans) offer all the benefits and much more. Lifetime insurability, 100% in and out of hospital coverage, optional maternity, dental, and wellness coverage. This is part of our commitment to providing you with outstanding plans and services.

When you live and work outside of your home country, you might not feel the same level of safety and security. We've been there, we understand, and we can help -- from one expat to the other.

You may not need all these healthcare benefits for now, which is why we also offer plans like **Easy Care+**, which cover the essentials.

That way, you never end up paying for things you know you won't use.

Who is this policy designed for?

Employees and Individuals of any nationality looking for comprehensive and flexible international health insurance, and having no more than 50 years of age.

Can people with pre-existing conditions be covered?

Yes, but all pre-existing conditions will be excluded from coverage.

What is the currency of the policy?

The currency of the policy is in US dollars.

What are the payment options?

You may pay for your insurance premiums by bank transfer, cheque, or credit card -- quarterly, semi-annually, or annually.

Out patient Co-payment

A fee of \$10 shall apply for any and all outpatient visits.

What kind of hospitalization room you will be cover for?

In case of hospitalization you will be covered in a standard ward room with corresponding Treatment rates & charges.

How do I reduce my premium?

If you want to reduce the amount you regularly pay, you can choose a higher deductible to have a lower premium. A deductible is the amount you are responsible for paying before the insurance plan starts to pay for medical expenses.

For instance, if your deductible is \$500, you must pay that amount out of your own pocket and we pay the rest (up until your plan's limit). The annual deductible is per person per year.

Choose from 5 levels of deductibles: **Nil** **\$250** **\$500** **\$1,000** **\$5,000**

Which plan should I choose?

You are concerned about your health but you want an affordable plan which covers only the most important risks.

PLAN 1

You are in good health and only want to be covered in case of hospitalization.

PLAN 2

You are in good health, but you'd still prefer to be covered for certain diseases (e.g cancer or kidney dialysis) and you want a strong hospitalization cover to protect you if you ever need it.

PLAN 3

You are in good condition but you want to be fully covered in case of hospitalization and for any general practitioner and specialist consultations. Also includes prescribed drugs.

PLAN 4

You are looking for a comfort guarantee, which offers you comprehensive level of cover and includes all benefits.

PLAN COVERAGE

Choose the level of coverage best suited to your country of expatriation.

To be eligible for zones 2 or 3, your country of residence (location of work) must be within the zone.

ZONE 1

Worldwide cover,
excluding USA, Canada
and Caribbean Island

ZONE 2

EEC countries
(excluding UK), and
Africa (excluding
South Africa)

ZONE 3

Bangladesh, Brunei,
Burma/Myanmar,
Cambodia, India,
Indonesia, Laos,
Malaysia, Philippines,
Sri Lanka, Taiwan,
Thailand, Vietnam



WHAT'S NOT COVERED?

We take the time to thoroughly analyze and optimize insurance provider packages so that you don't have to. We choose to keep only the terms that matter most to you and exclude everything else.

This process results in the creation of the most beneficial plans at the most affordable prices. Here's what we removed from our basic plans:

- Complication of Pregnancy
- Congenital conditions
- Dental care
- Developmental disorders
- Donor costs (e.g. search, removal, acquisition)
- Expenses related to sterilisation
- Eyes and ears care
- Home nursing, convalescent homes,
- Hormone replacement therapy
- Hospital accommodation in a standard single bed room
- Infertility treatment
- Parental accommodation
- Pre-existing medical conditions
- Pregnancy or maternity
- Preventive and wellness treatment
- Psychiatric treatment
- Routine examinations, health screening
- Treatment charges outside of our reasonable and customary range
- USA, Canada, and Caribbean Island treatment

If you want more comprehensive coverage, please consider our Worldwide and SEA plans which offer more coverage and more benefits.

HOW TO APPLY

STEP 1: Underwriting terms - 1 easy way to apply

Moratorium:

The A+ Plans do not cover the Treatment of Pre-existing Medical Conditions and related conditions. A pre-existing condition means any disease, illness or injury for which the Insured has received medication, advice or Treatment, or which the Insured has experienced symptoms, whether the condition has been diagnosed or not, at any time before the date on which the Insured's Plan starts.

After two years continuous membership, any pre-existing medical conditions (and related conditions) will become eligible for benefit, subject to the terms and conditions of the Insured's plan, provided the Insured has not during that period:

- a) consulted any Medical Practitioner or Specialist for Treatment or advice (including check-ups), or
- b) experienced further symptoms, or
- c) taken medication or been advised to follow special Treatment (including drugs, medicine, special diets, injections, etc.)

Examples of pre-existing conditions that will **never** be covered include diabetes, hypertension (raised blood pressure), hyperlipidemia (raised cholesterol level), ischemic heart disease, cancer, thyroid disease, and auto-immune disorders. If the Insured has suffered from any of these conditions, or any other condition for which it is generally accepted medical advice that it be monitored in any way, then the condition - and any related conditions - will never be covered.

Examples of related conditions are **raised** cholesterol levels and heart disease and stroke. If the Insured has suffered from high cholesterol before the Insured's date of entry to the plan the Insured will never be covered for cardiac problems or strokes.

STEP 2: Fill in the application form or apply via our website

STEP 3: Email, post, or fax the filled in application form to your Insurance advisor

Payments can be made annually, semi-annually, and quarterly by transfer, credit card, or cheque.

For semi-annual and quarterly payment, charges apply.

If you need help with any of our products, or if you have any questions about applying for one of the A+ Plans, please do not hesitate to contact us. Alternatively, if you would like one of our advisors to contact you, send us an email which includes the most convenient time and telephone number for us to contact you on.

Did you know?

Over 60% of expats regret not getting health insurance sooner.

THE MY A+ PAGE

Where you can:

- Download your claims online
- Download your pre-certification forms
- Check your latest reimbursements
- Process for filing a claim
- See the benefits table
- Edit your personal information
- Access our global network of healthcare professionals
- Request a certificate of insurance or a new insurance card



YOUR WELCOME PACKAGE

Faster and Greener Alternative

At A+ International Healthcare we are committed to reducing the direct impact we have on the environment by actively managing energy, paper and water consumption.

A+ will be sending the policy package via email. Only the medicard will be sent by post.

Which includes:

- Medicard (Which identifies you as an A+ member)
- Welcome letter
- Policy schedule
- Insurance certificate
- Claims form
- Pre-certification form
- General conditions
- Your login and password for the “My A+ Page”



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