International Healthcare Worldwide Plans

First Class Health Plans

Your Health First





Only for use in Hong Kong Special Administrative Region

www.aplusii.com

www.aplusii.com



Welcome3
About A+ International Healthcare4
Our commitments6
A+ International Healthcare plan features8
Why choose A+ International Healthcare10
Select your plan12
Tailor your plan16
How to apply18
Manage your plan online20
Reimbursement and claims management22
Your coverage24
Frequently asked questions26

Disclaimers:

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

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.

Welcome

A+ International Healthcare is about people and excellence. We dedicate ourselves to providing you and your family with first class healthcare and services. Our comprehensive healthcare plans and guaranteed lifetime renewability assure that you can trust us for life. We put your health first - anywhere, any time.

What we do is worldwide

- We offer international healthcare plans for globally mobile people.

What we do is local

- We support you with network providers and assistance teams in 150 countries.

About A+ International Healthcare

A⁺ International Healthcare is a partnership between leading European medical insurance providers and healthcare investment specialists from Europe and Asia. Our European and Asian approach allows us to offer comprehensive and worldwide health cover to our customers according to each of their specific needs. Years of combined **experience** from A⁺ International Healthcare and partners

A network of over **10,000 first class** medical providers in **150** countries

Assisting you 24 hours a day, 7 days a week, 365 days a year

Our partners combine years of experience in providing international medical insurance. The combined experience and financial strength of A⁺ International Healthcare and partners presents the best protection for your health. Hand in hand, we provide you with the best available guarantees for your medical cover.

We share corporate values with our partners:

- A focus on our customers;
- A mutual trust and feedback;
- A high performance culture.

We have selected the most efficient administration procedures to handle your policy and claims. Our claim handling processes are second to none.

Moreover, to support you anywhere, A⁺ International Healthcare and partners offer international assistance. Together, we provide an international network to assist you wherever you are. Find more on page 8.



redefining / standards

Our commitments

When you do not live and work in your home country, you need to feel safe and secure. With our experience and expertise, we understand your concerns. There is nothing more important than your health.

Our service promise

- Customer service response within 2 working days
- Sales response within 2 working days
- Underwriting completed within 3 working days
- Claims reimbursement processed within 5 working days
- Guarantee of payment issued within **2** working days
- Emergency guarantee of payment issued within 2 hours

We put our knowledge and our expertise at your disposal. We make it our duty to stand by you, to help you and to make life easier for you.

A⁺ International Healthcare plans are specifically designed for people concerned with their own protection and that of their family and who want lasting peace-of-mind with a cover that leaves nothing to chance.

Our plans ensure that your health and the health of your family come first. Through our first class health cover, we support your international mobility around the world and around the clock.

When subscribing to an A⁺ International Healthcare plan, you are provided with much more than just health insurance. All our plans include worldwide, reliable and flexible cover:

Worldwide

- Worldwide cover with no restriction on most risk areas.
- Free choice of medical providers: hospitals, clinics, doctors and specialists, with a
 private room in any licensed hospital or clinic.
- 10,000 medical providers available in 150 countries.

Reliable

- Cover for life, once enrolled, regardless of age or health condition.
- Medical evacuation and repatriation included. *
- Coverage of chronic conditions and AIDS and AIDS / HIV-related diseases.

Flexible

- Entry into the plan up to 70 years old.
- Various options to personalise your plan according to your needs, including Dental and Optical. Find more on page 16.

^{*} This service is provided by AXA Assistance. For terms and conditions of this service, kindly refer to Emergency Evacuation and Repatriation Membership General Conditions.

A+ International Healthcare plan features





Evacuation and repatriation *

Medical evacuation and repatriation is included for all core plans. Emergency medical evacuation and repatriation benefits, transportation of mortal remains or burial at the place of death, compassionate visit and return of minor children are included in coverage.

A⁺ International Healthcare and partners provide you with one of the best and the most extensive international assistance services. Wherever you are, as long as you need medical assistance or advice, refer to your A⁺ Medicard and send the team an e-mail or simply make a phone call - we are only one simple step away.

* This service is provided by AXA Assistance. For terms and conditions of this service, kindly refer to Emergency Evacuation and Repatriation Membership General Conditions.



Plan portability

You may remain covered by A⁺ International Healthcare when you move to another country or another region of coverage (restrictions may apply).

Plan design flexibility

Optional coverage can be easily added to your plan. Several options, including deductible, area of cover and enrolment methods, are available as well. 'Semi-private room restriction' option can be chosen for significant premium reduction.





Lifetime renewability

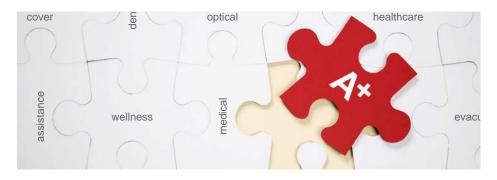
With us, renewability is guaranteed regardless of age or health condition. You can rest assured that you and your loved ones will be well covered for life.

Swift reimbursement

Claims are generally reimbursed within 5 working days, with a maximum of 15 days. You may check the claim process and reimbursement record on your personalised 'My A⁺ Page'. Large claims may be settled directly with the service providers involved by direct billing, making life easier for you.



Why choose A+ International Healthcare



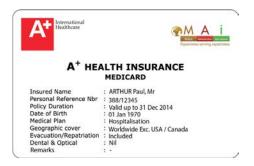
Our experience with individuals and families has shown that some features are particularly important when selecting a health insurance plan. Because **your health comes first**, we have included, in our health plans, major features such as lifetime insurability, worldwide cover, and 100% in- and out-of-hospital coverage. We are committed to providing you with outstanding plans and services.

The A⁺ Benefits

Features	Market norms	A+ International Healthcare
Renewability	Not guaranteed	Guaranteed
Chronic conditions	Limited cover	Covered
Traditional Chinese Medicine	Limited or not covered	Covered
Congenital conditions	Limited or excluded	Covered
Complication of pregnancy	Waiting period	No waiting period
Claims reporting	Max 180 days	Up to 2 years
Age limit for group enrolment	Entry age limit or renewal limit 64 years	No entry or renewal age limit
AIDS / HIV	Limited cover	Covered

Your A⁺ Medicard

Once enrolled into an A⁺ International Healthcare plan, we send you your own A⁺ Medicard which attests that you are enrolled in an A⁺ International Healthcare plan. Keep this card with you. In case of emergency, present it to medical providers. If in need of assistance, make contact with us or our partners. Details on the back of your Medicard include your personal assistance number, the emergency contacts and instructions.



The A⁺ GOLD PASS Medicard

For our clients who have chosen Global 100 or Global 100 Plus with nil deductible, we offer a Direct Billing service for outpatient treatments. With our GOLD PASS Medicard, selected medical providers enable cashless outpatient treatments at designated centres. You can consult the list of centres on 'My A⁺ Page'. Find more on page 21.



Select your plan

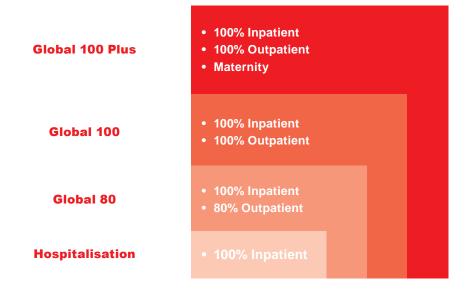
You are currently working abroad, or planning to do so in the future. And you are looking for the best health insurance plan for yourself and your family.

We have the best for you.

You need insurance that is **worldwide**, **reliable**, **flexible** and guaranteed to deliver first class coverage and support whenever needed.

Everyone has different needs and a different budget depending on age and occupation. We offer a flexible approach to your requirements. Whatever your needs, you can find the best health cover with our customisable plans.

We propose to you four health plans. Each plan can be shaped by adding optional covers and choosing from several plan options:



Optional coverage

· Dental and Optical

Plan options

- Currency
- Deductible
- Area of cover
- Moratorium enrolment (Find more on page 19)

Significant premium reduction

• Hong Kong Residents can choose 'Semi-private room option' under any of the four plans.

100% Inpatient

Hospitalisation, for your important needs

Hospitalisation is our first level of cover for your essential needs. This plan covers 100% of the costs of inpatient and day-patient care including hospital accommodation, doctors' fees and medical expenses ranging from lab exams, medical imaging to physiotherapy and more. Oncology treatments, organ transplant, HIV / AIDS treatments and palliative care are also covered.

100% Inpatient + 80% Outpatient

Global 80, for your extra comfort

Global 80 provides extra security and reassurance for you. With our Global 80 plan, you are fully covered for inpatient expenses. This plan also offers a higher reimbursement overall limit than the Hospitalisation plan, including 80% reimbursement for out-patient care.

100% Inpatient + 100% Outpatient

Global 100, for your peace of mind

Global 100 is your peace-of-mind cover for you and your family. With Global 100, you are fully insured for inpatient and outpatient care, including treatments performed by complementary medical practitioners such as chiropractors, osteopaths, acupuncturists and homeopaths. Preventive care and wellness benefits including vaccinations and check-ups are covered as well.

100% Inpatient + 100% Outpatient + Maternity

Global 100 Plus, for your A+ future

Global 100 Plus leaves nothing to chance. On top of having inpatient and outpatient care fully insured, you enjoy attractive maternity extras including pregnancy, childbirth and prescribed caesarean. The covered amount includes doctors' fees, hospital accommodation and other related medical expenses during hospital stay.

	Hospitalisation	Global 80	Global 100	Global 100 Plus
Overall limit (USD)	\$1,350,000	\$2,025,000	\$4,050,000	\$4,050,000
Inpatient care	100%	100%	100%	100%
Outpatient care		80%	100%	100%
Organ transplant	\checkmark	\checkmark	\checkmark	\checkmark
Cancer treatment	\checkmark	\checkmark	\checkmark	\checkmark
Chronic conditions	\checkmark	\checkmark	\checkmark	\checkmark
Complication of pregnancy	\checkmark	\checkmark	\checkmark	\checkmark
Congenital conditions	\checkmark	\checkmark	\checkmark	\checkmark
AIDS / HIV	\checkmark	\checkmark	\checkmark	\checkmark
Evacuation and repatriation	\checkmark	\checkmark	\checkmark	\checkmark
Kidney dialysis	\checkmark	\checkmark	\checkmark	\checkmark
Rehabilitation and convalescence	\checkmark	\checkmark	\checkmark	\checkmark
Palliative care	\checkmark	\checkmark	\checkmark	\checkmark
GP / Specialists		\checkmark	\checkmark	\checkmark
Diagnostic tests, CT & MRI Scans		\checkmark	\checkmark	\checkmark
Traditional Chinese Medicine		\checkmark	\checkmark	\checkmark
Physiotherapy		\checkmark	\checkmark	\checkmark
Complementary medical treatment		\checkmark	\checkmark	\checkmark
Wellness		\checkmark	\checkmark	\checkmark
Maternity				\checkmark

Tailor your plan



Optional coverage

Dental and Optical

The Dental and Optical option is proposed to accepted applicants of the Medical Insurance Plan (only with Global 80, Global 100 & Global 100 Plus).

Cover includes basic dental care, major dentistry such as orthodontic treatment, and vision care.

Plan options

Area of cover

To better define your health plan, A⁺ International Healthcare delimits three geographical areas of residence. Premiums are set according to where you live. First, you select your area of residence at the time of policy inception:

- Area 1: Worldwide (excluding USA / Canada / Hong Kong / China)
- Area 2: Hong Kong / China
- Area 3: Canada

Next, you choose your geographical coverage for treatment:

- Worldwide cover
- · Worldwide cover excluding USA and Canada

If you opt for a cover without USA and Canada, we cover medical expenses incurred due to medical emergencies whilst visiting these countries for temporary stays of up to 90 days in aggregate per year.

Currency

Plans can be subscribed in Euro, US dollars or Swiss Francs. Claims are reimbursed in the currency of the policy.

Deductible

You can reduce your premium by choosing an annual deductible that applies on all benefits. There are different levels of deductible, depending on your plan.

The higher the deductible, the lower your premium. Deductibles are applied per insured, per insurance year.

€	US\$	CHF
0	0	0
500	675	750
1,000	1,350	1,500
2,000 *	2,700 *	3,000 *
5,000 *	6,750 *	7,500 *

*Only available with Global 80, Global 100 and Global 100 Plus



How to apply



You can apply for an A+ International Healthcare plan by taking four simple steps:

	Co to youry only all core for alon descriptions, the Deposite Table and
Step 1	Go to <u>www.aplusii.com</u> for plan descriptions, the Benefits Table and the General Conditions.
	¥
Step 2	Complete the online Quick Quote on the website to look into choices and indicative premiums.
	↓
Step 3	Download and fill in an application form (see more about enrolment process below) and sign it.
	¥
Step 4	Send your completed and signed application to us or your insurance intermediary.

Enrolment process

Specific Application Forms are available for enrolment. You may choose either Full Medical Underwriting or Moratorium enrolments.

Full Medical Underwriting enrolment

Complete the full Medical Questionnaire included in the application form. Once accepted, your policy is set and claims will be processed swiftly.

Moratorium enrolment

Under Moratorium enrolment, the questionnaire is limited to a few questions related to major illnesses. Enrolment is fast and simple.

Find more on page 26.

Switch to A+ International Healthcare

Continued personal medical exclusions (CPME Transfer)

You can switch from any insurance company to us as long as the previous coverage is of a similar benefit level. Contact us or your insurance intermediary for more details.

Manage your plan online



'My A+ Page' - your personalised online tool

Once enrolled into an A⁺ International Healthcare plan, you will have access to your own web page, a personalised online tool, to help you better manage your health, and where you can find all the necessary information about your medical plan.

To access this tool, go to <u>www.aplusii.com</u> and click 'My A+ Page' or 'Clients'. Enter your personal reference number which is given to you upon enrolment.

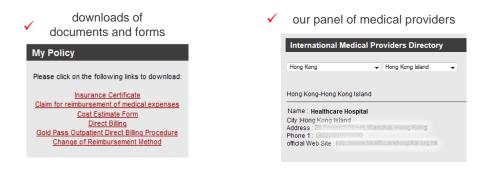
'My A+ Page' offers you access to:

 \checkmark

🗸 уо	ur cover deta	ails	
My personal data			
Plan details :	Member Since:	Insurance period Start date:	Insurance period End date
GLOBAL 100 USD INDIV DEDUCTIBLE NIL	01/09/2013	01/09/2013	31/08/2014

status of your claims and related reimbursements

Reimbursement	details			
Statement number	Statement Date	Total Reimbursed	Deductible	Method of payment
1200009831	04/10/2013	835.00 HKD	0.00 HKD	Cheque



... and much more

How to file a claim reimbursement

Step 1	Go to <u>www.aplusii.com</u> . Go to the Downloads page or 'My A ⁺ Page' to download claim form.
	↓
Step 2	Fill in and sign the claim form. Prepare original supporting documentation (e.g. receipted bills) for reimbursement. Keep copies of the documents for your own reference.
	↓
Step 3	Send the completed and signed claim form to the claims manager with the original supporting documents by post.

Easy reimbursement of claims

We help you save valuable time in the reimbursement process. If the claim is less than €500, US\$ 675 or CHF 750, we allow submission by e-mail alongside scanned claim forms and scanned copies of documents.



Claims reporting

Claims should be reported as soon as possible after their occurrence. In any case, claims must be sent no later than two years after the event giving rise to the claim occurred.

How to manage your claims

Claims are generally reimbursed within 5 working days, with a maximum of 15 days. You may check the claim process and reimbursement on your personalised 'My A⁺ Page'.

An e-mail notification is sent to you once the claim has been processed and a settlement note has been issued.

If you have not provided us with your e-mail address, you will receive the settlement notes by regular mail instead.

The higher expenses may be settled directly with the hospitals, clinics or doctors involved, helping to make life easier for you.

Guarantee of payment and direct payment

A⁺ International Healthcare and its partners have agreements with a wide range of health care providers and facilities located all over the world. You may consult the list of providers on your 'My A⁺ Page'.

How does it work?

Step 1

You obtain a Cost Estimate Form from our website. The hospital fills in the form, which needs to be signed by you.

ᡟ

Step 2You send the Cost Estimate Form to the claims manager at least 15
days prior to the admission to ensure a smooth process.

And we will do the rest...

¥

The claims manager issues a guarantee of payment and settles payment with hospital.

♦

The claims manager sends a settlement note to the patient and the hospital.

What if it is an emergency admission?

In the event of an emergency admission, show the provider your Medicard upon admission. Send the claims manager the completed Cost Estimate Form before discharge. The claims manager will deal directly with the facility (hospital, clinic, etc.).

Your coverage



At A⁺ International Healthcare, we have included in our health plans the most important features. Whatever your choice...

you are covered for:

- Inpatient and day-patient care;
- Organ transplant;
- Cancer treatment;

- · Chronic conditions;
- Psychiatric care;
- AIDS / HIV.
- Note: For more details, please refer to page 14 and page 15, or the Benefits Table enclosed.

What is not covered

This is a summary of major exclusions applicable to A⁺ International Healthcare plans. For full details, please refer to the General Conditions.

Medical Plans

- Pre-existing conditions unless accepted at time of enrolment.
- Non prescribed medical treatments.
- Periodic preventive health examinations except those explicitly mentioned in the table of medical benefits.
- Complementary (and / or alternative) medical treatments other than those explicitly mentioned in the table of medical benefits.
- Expenses resulting from maternity and childbirth during the first 12 months after the individual inception date of cover.
- Non prescribed drugs.
- OTC ('over-the-counter') medicines: lifestyle products, dietary products, etc.
- · Contraceptive and birth control drugs, even if prescribed by a Doctor.
- · Costs related to abortion except in the case of absolute medical necessity.
- · Cosmetic / aesthetic treatment except restorative treatment following an accident.
- Elective caesarean delivery expenses.
- · Consequences of drug-addiction and alcoholism.
- Expenses resulting from any kind of competition with motor vehicles.
- Consequences of the insured participating in any sport as a professional or under a contract providing compensation, as well as any preparatory training to such activities.

Evacuation / Repatriation *

- Costs incurred without the prior agreement of our Assistance service.
- The consequences of illnesses or benign lesions that can be treated on the spot.
- Evacuation / repatriation as a consequence of psychiatric conditions.
- The Insured's participation in any sport as a professional or under a contract providing for compensation, as well as any preparatory training.
- The consequences of an accident during the Insured's participation in an air sport (including hang gliding, paragliding, gliding) or in any of the following sports: skeleton, bobsleigh, ski-jumping, mountain-climbing with roping, rock-climbing, skin diving with self-contained apparatus, spelunking, bungee-jumping, skydiving.

* This service is provided by AXA Assistance. For terms and conditions of this service, kindly refer to Emergency Evacuation and Repatriation Membership General Conditions.

Frequently asked questions

1) Can I subscribe to an A+ International Healthcare plan?

a) Are any age limits applicable for enrolment?

The age limit set for enrolment is 70 years.

b) What minimum period of time can I be covered for?

The duration of insurance policy is 12 months.

c) Do I need to have a medical examination to join the plan?

No. You only need to complete a medical questionnaire. On occasions, our medical adviser may define partial exclusions, total exclusions or propose an additional premium to waive exclusions.

d) Which form do I complete to enrol?

There are two enrolment processes available for enrolment - Full Medical Underwriting enrolment and Moratorium enrolment - and thus two specific application forms.

For Full Medical Underwriting enrolment, it is very important that the detailed Medical Questionnaire included in the application form must be completed fully and accurately, failing to do so may invalidate the policy.

For Moratorium enrolment, the questionnaire is limited to a few questions related to major illnesses. After two years' continuous membership, pre-existing Medical Conditions will become eligible for benefit (conditions apply, please contact us or your insurance intermediary for more information).

2) How can I manage my plan?

a) How can I renew my plan?

Renewal information will be sent to you six weeks before the renewal date. Cancellation of your policy is possible on the policy anniversary date with one month's notice, through notification by registered letter.

b) Can I change my level of cover?

Downgrading or upgrading plans and options is possible, but only at the renewal date of the policy. In the case of upgrading, a new medical questionnaire must be completed. Changing the geographical scope of cover is always possible in relation to the country of expatriation. However, it is not possible to change to the worldwide cover for short periods (with the objective of getting treatment in USA or Canada).

c) How can I pay my premium?

Premiums are payable annually in advance, by bank transfer, credit card or cheque. Semi-annual and quarterly payments are available. Administrative charge applies.

d) How does the deductible work?

The deductible is a fixed amount per year per person of covered expenses for which you are responsible. Once your annual deductible has been met, your expenses will be reimbursed according to the conditions of your plan.



e) When do new dependants need to be added?

Addition of a legal partner / domestic partner is possible, provided that the application is based on the same procedure and conditions of acceptance, and within two months after becoming eligible for the insurance.

Addition of a new-born is possible, provided that the application is made within two months following the date of birth. The birth certification is a required supporting document. Premiums for new-born babies are to be paid as from the birth date.

A medical questionnaire must be completed when the baby is declared to the insurer more than two months after birth.

Adopted children may also be included in the policy, enrolment of whom is subject to full underwriting.

f) Am I able to access my personal information online?

Our online service - My A⁺ Page - helps you to better manage your health plan. It does not only give you access to our panel of medical providers, hospitals and clinics, grouped by countries, towns and specialities, it also allows you to consult your plan coverage, monitor your own personal reimbursement information and download all forms. Access to this personalised section is password-protected and you are required to enter your personal reference number.

g) How do I log in to 'My A+ Page'?

The first time you use 'My A⁺ Page', you need to enter your personal reference number and your password, which is sent to you by our claims manager upon enrolment.

h) What do I do in case of emergency?

Our emergency helpline is available in a variety of languages and is staffed by medical professionals ready to assist you 24/7 every day of the year. Telephone numbers are stated on your Medicard provided upon enrolment.

i) How do I claim?

Claims should be reported as soon as possible after their occurrence. In any case, claims must be sent no later than two years after the event giving rise to the claim occurred.

Claim forms may be downloaded from 'My A+ Page'.

You should complete the form and send:

• By mail:

Claim forms can be completed directly on 'My A⁺ Page' or filled out by hand. They must be signed and returned to the claims manager together with the supporting documents.

• By e-mail:

If the claim is less than \in 500, US\$ 675 or CHF 750, we allow scanning of the claim forms available on our website. You should send scanned copies of receipts and keep the originals for a minimum of 12 months.

Claims are reimbursed within 5 working days, at a maximum of 15 days.

3) What is covered?

a) Which practician can I consult?

You can consult any doctor of your choice provided this doctor has graduated from a recognised medical school as listed in the WHO Directory of Medical Schools and who is licensed and is registered to practice medicine in the country where the treatment is received.

b) Are complications of pregnancy covered?

The following complications of pregnancy are covered in the same way as any other medical condition, so the rules and limits for the maternity benefits do not apply:

- miscarriage or when the foetus has died and remains with the placenta in the womb;
- stillbirth;
- abnormal cell growth in the womb (hydatidiform mole);
- foetus growing outside the womb (ectopic pregnancy);
- heavy bleeding in the hours and days immediately after childbirth (post-partum haemorrhage);
- afterbirth left in the womb after delivery of the baby (retained placental membrane);
- complications following any of the above conditions.

Complications of pregnancy are not subject to the waiting period for all medical expenses related to Delivery and Maternity care.

c) Are complementary therapies covered?

A⁺ International Healthcare plans offer a wide range of complementary therapies as standard. These include Chiropractors, Osteopaths, Acupuncturists, and Homeopaths who are legally qualified, registered and allowed to practice complementary medicine by the authorities in the country in which the treatment is received. These treatments must always be prescribed by a doctor.

d) Are maternity, pregnancy and child-delivery expenses covered?

Child-delivery is only covered under Global 100 Plus. Pregnancy cost is reimbursed according to the type of outpatient treatment. Elective caesarean surgery is excluded from cover.

There is a twelve month waiting period for all medical expenses related to Delivery and Maternity care, meaning that only expenses incurred as from the thirteenth month after acceptance into the insurance plan are eligible for reimbursement.

e) Do I need to wait to get certain treatments?

The insurance cover takes effect on the day immediately following your acceptance by the insurer.

Once enrolled, you may have to wait to get certain treatments:

- Waiting period of twelve months for all medical expenses related to delivery and maternity care;
- Waiting period of twelve months for preventive and wellness benefits;
- Waiting period of six months for all basic dental care and twelve months for all major dentistry: orthodontic treatment and dental prostheses.

f) Am I covered if I travel away from my area of residence?

Yes. You can choose to be covered worldwide or worldwide excluding USA and Canada. If you opt for a cover without USA and Canada, we cover medical expenses incurred due to accidents and medical emergencies whilst visiting these countries for temporary stays of up to 90 days in aggregate per year.

g) Will I be covered for any chronic conditions I have when joining the plan?

Upon acceptance, your medical expenses for chronic conditions will be covered subject to the terms of your policy. However, prior to the acceptance, the medical consultant can define partial or total exclusions of cover of specific conditions, or propose an additional premium to waive exclusions.

h) Are pre-existing conditions covered?

The A⁺ International Healthcare plans do not generally cover the treatment of pre-existing medical conditions and related conditions. A pre-existing condition means any disease, illness or injury for which you have received medication, advice or treatment, or which you have experienced symptoms, whether the condition has been diagnosed or not, at any time before the date on which your A⁺ International Healthcare plan starts, except where such Medical Conditions have been declared in the application form and subsequently accepted in writing by us.

i) Is preventive care covered?

Preventive care & wellness benefits:(A waiting period of 12 months applies) • well baby care

- medically required vaccinations (adults & children)
- one routine eye test per insurance year
- one adult physical examination every 2 years including:
 - one (bilateral) mammogram and one pap-smear test every 2 years (females as of age 35)
 - one PSA-test every 2 years (males as of age 50)

If you have any more questions, contact us or your insurance intermediary.

Notes







redefining / standards

Connect with us on social media













Administrators

A Plus International Services Limited Room 4, 17th Floor, Westlands Centre, 20 Westlands Road, Quarry Bay, Hong Kong China S.A.R. Tel: + 852 2891 3608 Fax: + 852 2891 3229 Email: cs@aplusii.com

Concepts and trademarks are licensed from A Plus International Insurance Development AG CH-8032 Zurich, Switzerland This A⁺ International Healthcare plan is insured by AXA General Insurance Hong Kong Limited.

AXA General Insurance Hong Kong Limited is the insurance underwriter of this policy and is solely responsible for all content, coverage and benefit payment of the plan.

AXA General Insurance Hong Kong Limited is an authorised insurer in Hong Kong with its Hong Kong office at

21/F, Manhattan Place, 23 Wang Tai Road, Kowloon Bay, Kowloon, Hong Kong

www.aplusii.com