

International Health Plan



'Far from home'

We'll help connect your employees
to the right medical expertise.

Protect your employees across the world, for health peace of mind from the number one biggest global insurance brand

When you've got staff working overseas, you want to know they're looked after. Illness or an accident can strike at any time, and in some parts of the world, access to medical facilities can be basic, inaccessible or non-existent.

With our International Health Plan you can help connect them to the appropriate care and treatment available – giving them (and you) ultimate peace of mind.

Our International Health Plan

Round-the-clock support

- **Access to care** – at over 11,000 hospitals all over the world
- **Second opinion service** for serious diagnoses, with help in finding the right treatment, and full support throughout
- **24-hour information and medical telephone helplines**, offering immediate access to qualified health care professionals
- **Expert information on MyGlobe online**, giving you access to our global database of healthcare providers, as well as a variety of country specific information and access to quick links for embassies, vaccinations, airports and emergency numbers.

Peace of mind far from home, on all plans

- **Emergency medical evacuation and repatriation**
- **Interpretation service** over-the-phone
- **A 24-hour telephone claims service**, with empathetic, trained personal advisers who will be able to confirm if the treatment is covered
- **Secure online access** to their Customer Online account, anytime.

Four levels of cover

On our Standard plan

Active treatment of cancer, in-patient and day-patient treatment, non-routine dental care, medical conditions during pregnancy and out-of-area cover.

Extra cover with our Comprehensive, Prestige and Prestige Plus plans

Follow-up cancer and heart surgery consultations, intravenous chemotherapy and antibiotics at home, cover for chronic conditions, kidney dialysis, optical and out-patient cover, including Chinese herbal medicine.

Even more cover with our Prestige and Prestige Plus plans

Routine pregnancy, annual health check, international travel insurance, disability compensation and palliative care for cancer.

Our top-level of cover with the Prestige Plus plan

Cover for out-patient treatment, palliative care for all terminal diagnoses, plus routine dental and HIV/AIDS treatment – as well as out-of-area cover for emergency out-patient treatment.

Tailored to you

Once you've selected the level of cover that's right for your employees, you can tailor it by choosing from a range of options:

- **Two geographical areas** of cover
- **A range of options** to give you extra peace of mind
- **Excess levels** to suit your budget.

Why an International Health Plan is good for business

Having employees working and living abroad can be expensive, and good management makes sure your company is getting good return on your investment. So it makes perfect sense to protect your overseas staff and ensure they're properly looked after.



24-hour support

Expert care when they're far from home

With services such as our 24-hour medical information helplines and secure online member accounts, your employees can find the nearest doctors and hospitals that speak their language. We even have over-the-phone interpreters so your employees will always be able to understand their diagnosis and treatment plans.

Their online member account will also give them access to:

- **Policy details** where they can make claims and get membership documents
- **Information** on the security risks wherever they are in the world
- **Vaccinations** and medical outbreak information
- **Emergency** telephone numbers for their location.

Second Medical Opinion and Personal Medical Case Management

We've joined forces with an independent and objective provider of medical case management, to ensure your employees have access to the support they need, if they're diagnosed with an eligible condition.

When a member registers for the service, they'll be assigned a Case Manager, who will then approach top medical professionals to co-ordinate the best medical care plan available – and provide ongoing clinical support throughout your employee's treatment.

Because this service is independent and always gives objective recommendations for the best treatments, they'll need to make sure the treatment recommended is covered by their plan.

All from a name you can trust

AXA PPP International is part of the AXA Group, one of the world's leading insurance companies with a strong presence in 64 countries – so you can feel reassured that whatever happens, we have the global and local knowledge to help.

103 million customers worldwide have placed their trust in the AXA Group, and with 75 years in the health care market (and more than 40 years internationally) we're a safe pair of hands for your employees' health.

Access, view and update your scheme online – instantly

Important information on your employees can change rapidly and our Corporate Services Online tool makes updating these changes as straightforward as possible. This personalised account allows you to quickly access your company's membership details and directly make any necessary amendments, at any time.

When you log in to your account, you'll be able to:

- Add a new employee
- Search for an employee
- Add a family member
- Amend or lapse an employee
- Download a report or membership listing.



Choice

Select the type of cover to suit your business and budget

Whether you need to cover three or 3,000 employees overseas, we've got a plan to suit your company's needs and budget.

Less than 150 employees

If you're a small company, you'll still benefit from a choice of four levels of cover, and two geographical regions. A range of excesses is also available to help manage the cost of premiums.

Choose your level of cover

Standard

If you want to contain your costs, you can opt for no out-patient cover, with wide-ranging in-patient and day-patient cover.

Your optional upgrades:

- Out-patient treatment
- International Travel Plan

Comprehensive

This is our most popular plan, and provides essential cover for in-patient, day-patient, out-patient and non-routine dental treatment.

Your optional upgrades:

- Dental care or routine pregnancy
- International Travel Plan

Prestige

For more extensive cover, our Prestige plan provides the additional benefits of:

- Routine pregnancy cover
- Health check
- Disability compensation cover
- Palliative care for cancer
- International Travel plan.

Your optional upgrade:

- Dental care

Prestige Plus

For the gold standard in cover for your employees, choose our top-of-the-range plan – which includes the additional benefits of:

- Dental care
- HIV/AIDS treatment
- Out-of-area cover for emergency out-patient treatment
- Cover for out-patient treatment, session limits apply
- Palliative care for all terminal diagnoses.

Choose to disregard existing medical conditions

If you have more than five employees on your scheme, you can opt to have their medical history ignored. This means that they will be eligible to claim for any condition or diagnosis they currently have or have had in the past.

Choose the location

Decide where you need cover:

- Area 1: Worldwide cover
- Area 2: Worldwide cover, excluding the USA

Choose how much excess members will pay

You can control the cost of your company's premium, depending on the level of excess you choose.

We offer five levels of excess, per person, per policy year:

£100	€125	\$160
£250	€320	\$400
£500	€640	\$800
£1,000	€1,275	\$1,600
£2,000	€2,550	\$3,200

If a member's treatment continues beyond their policy's renewal date, we'll apply the excess again against the costs incurred on or after the renewal date. We'll do this irrespective of whether the costs relate to treatment for the same medical condition.

More than 150 employees

If you wish to cover a large number of employees we have the ability to tailor the plan to suit your needs, as well as offering:

Dedicated support for you

- Your own dedicated account management team
- Corporate Services Online tool
- Tailored management information reporting.

Bespoke service for your members

- 24/7 dedicated support helpline
- Bespoke member site and handbooks
- Customer Online where members can view policy details, pre-authorise treatment or submit claims online.

A global network of hospitals

Access to our international network of over 11,000 private healthcare facilities.

Cost containment

We contain medical procurement costs through:

- Active management before, during and after claims
- Our international global network of hospitals and our purchasing power to negotiate on their costs
- Personal Medical Case Management
- Offering excesses, co-payment options and benefit limits.

Cover

Wide-ranging cover as standard

The following is covered in our Standard plan:

Hospital charges, including accommodation

If a member has to spend time in hospital, we'll settle their in-patient or day-patient bills directly with our preferred list of hospitals. That means they won't have to worry about making a pre-payment on admission. If the member chooses to receive treatment in a hospital not in our preferred network, we will do our best to arrange direct settlement if they let us know beforehand.

Surgical procedures and charges

Whether or not a member needs to stay in hospital overnight, there can still be a lot of costs incurred in treatment. So our International Health Plan will cover the following in-patient, day-patient and out-patient charges:

- Hospital stays and standard accommodation
- Nursing care
- Operating theatre charges
- Surgeons' and anaesthetists' bills
- Stays in intensive care
- Drugs, dressings and surgical appliances (subject to policy limits).

Emergency cover for out-of-area cover

This gives members both in-patient and day-patient cover for emergency treatment if they fall ill suddenly while travelling out of their specified area.

Cash benefit for each night of free in-patient treatment and free hospital accommodation

If a member obtains free in-patient hospital treatment and free hospital accommodation – through a state system for example – we'll pay a cash sum for every night they have to stay in a hospital bed.

Cancer

The plan covers the investigation and active treatment of cancer, including:

- Radiotherapy
- Chemotherapy
- Brain and body scanning
- Bisphosphonate drugs to help protect bones and reduce raised blood calcium
- Biological therapies to destroy cancer cells (also known as immunotherapy including monoclonal antibodies and other targeted therapies).

Cash benefit for cancer treatment

If for any reason a member receives free day-patient or out-patient radiotherapy or chemotherapy for cancer, we'll pay them a corresponding cash benefit. This is only payable if the treatment they receive would have been eligible for benefit under their policy.

Second Opinion Service

When a member registers for this service, they'll be offered a dedicated Case Manager who will create a care plan, find them the treatment they need, and provide clinical support throughout.

Cancer drug treatments

Treatments for cancer are constantly evolving, and we cover drugs to prevent its recurrence, along with experimental drug treatments when you are a participant in an approved randomised clinical trial and we agree costs in advance.

Emergency evacuation or repatriation

If a member can't get the emergency in-patient treatment they need locally, we'll arrange to get them evacuated to an appropriate facility. Our International Health Plan provides access to the overseas evacuation service, which delivers emergency medical advice and assistance wherever a member is in the world, 24 hours a day, 365 days a year.

In the unfortunate event that one of our members dies abroad, we will arrange and pay for the cost of bringing the body back to a port or airport in their home country.

Dental care and accidental damage to teeth

We'll pay towards dental costs, and our plans cover all dental treatment except routine check-ups, cosmetic work and treatment as a result of neglect. We also cover the cost of accidental damage to teeth.

Pregnancy

All our plans provide cover for medical conditions which may arise during pregnancy and childbirth. More routine costs are covered by our Prestige and Prestige Plus plans.

All cover is subject to an overall annual policy limit and individual benefit limits.

Prostheses

Spinal supports, knee braces or aircasts will be included in the plan if they're part of a surgical procedure and/or integral to the treatment of an eligible medical condition based on the member's plan. Members will also have cover for prostheses and wigs needed during active treatment of cancer.

Brain and body scanning

The following are covered if a member is treated as an in-patient, day-patient or out-patient in one of our preferred hospitals:

- Computerised tomography (CT)
- Magnetic resonance imaging (MRI)
- Positron emission tomography (PET).

Ambulance transport

We'll cover the cost of a road ambulance for emergency transport to or between hospitals, if the member's medical practitioner says it's necessary.

Parent accommodation

Being in hospital can be traumatic, especially for children. So if a member's child is covered on their policy, is receiving eligible treatment and is under 18, the plan will cover accommodation expenses for them to stay in the same hospital with their child.

Optional upgrades for our Standard plan

You can extend your cover by choosing from a range of optional upgrades:

Out-patient treatment

With our standard plan, out-patient cover is for surgical procedures only. You can boost your employees' cover with our out-patient optional upgrade that includes:

- Medical practitioner charges for consultations
- Consultations and treatment for psychiatric illness
- Complementary practitioner charges including Chinese herbal medicine
- Diagnostic tests and physiotherapy
- Vaccinations administered by a medical practitioner or nurse.

International Travel Plan

Annual business travel and holiday cover that takes into account the medical cover you already have – so you don't end up paying twice.

In-patient, day-patient and out-patient explained

In-patient

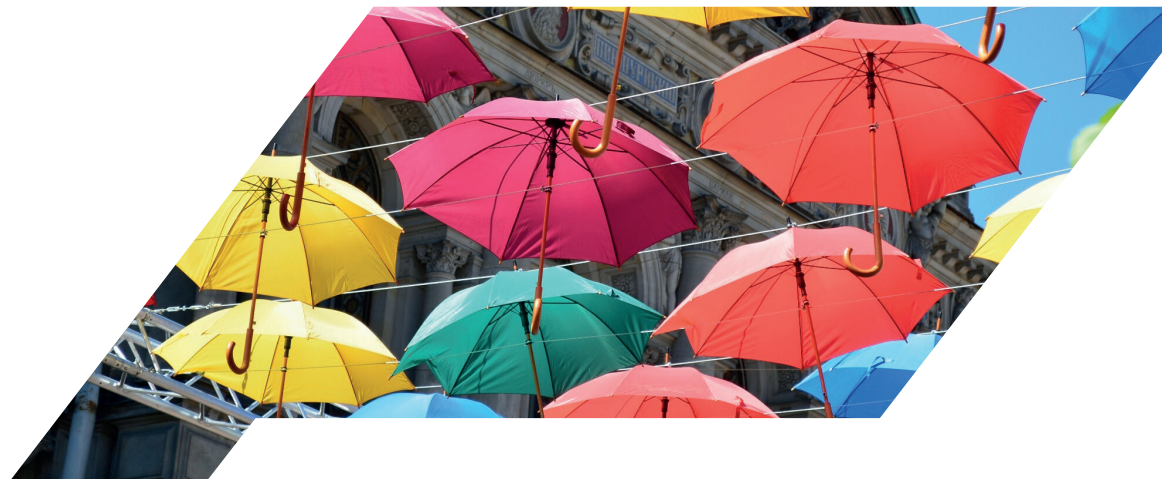
When a member is admitted to hospital, and needs to occupy a bed overnight or longer for medical reasons.

Day-patient

When a member is admitted to a hospital or day-patient unit because they need a period of medically supervised recovery, but don't need to occupy a bed overnight.

Out-patient

When a member attends a hospital, consulting room or out-patient clinic, and is not admitted either as a day-patient or an in-patient.



Extend

You can extend the amount of cover you offer with our Comprehensive, Prestige and Prestige Plus plans

Comprehensive plan

This offers all the cover provided by our Standard plan, as well as:

Chronic conditions

We can offer cover for chronic conditions with a 120 day limit on in-patient stays.

Kidney dialysis

Ongoing kidney dialysis treatment administered as an in-patient, day-patient or out-patient.

Out-patient cover

With our Standard plan, out-patient cover is for surgical procedures only. By extending your plan, you can cover your employees for a range of out-patient benefits, including:

- Medical practitioners' consultation charges
- Diagnostic tests
- Physiotherapy
- Vaccinations and the costs of their administration by a medical practitioner or nurse
- Heart surgery follow-ups for as long as necessary (after coronary heart bypass, cardiac valve surgery or the implantation of cardiac devices such as defibrillators and pacemakers, and coronary angioplasty)
- Cancer follow-ups, with no time limit, as long as you're a member with this level of cover.

Optical cover

If a member needs prescription glasses or contact lenses, we'll contribute towards the cost – as well as one eyesight test each year.

Chinese herbal medicine

We'll provide cover for Chinese herbal medicine treatments as part of their out-patient complementary practitioner benefit.

Out-patient drugs and dressings

You can choose to cover the costs of medicines that have been prescribed by a member's medical practitioner, such as:

- Antibiotics
- Ointments
- Eye-drops
- Steroids.

Hospital-at-home

With Hospital-at-home, members can be treated in the comfort of their own homes, or another appropriate setting. It covers home administration of intravenous chemotherapy, or intravenous antibiotics which otherwise would require members to be admitted for in-patient or day-patient treatment.

Optional upgrades for our Comprehensive plan

You could boost the level of cover for your employees by choosing from the optional upgrades below:

Dental care or Routine pregnancy and childbirth cover

- Boost the dental allowance and we'll cover routine care such as check-ups, scale and polish or;
- extend your cover to include day-to-day routine pregnancy and childbirth costs.

International Travel Plan

Annual business travel and holiday cover that takes into account the medical cover already included – so you don't end up paying twice.

Prestige plan

Your employees will enjoy all the cover provided by our Standard and Comprehensive plans, as well as:

Annual health check

We'll contribute towards the cost of an annual health check. All members need to do is arrange the screen themselves, send us the receipt and we'll reimburse them.

A health check may include:

- Assessment of body mass index
- Resting blood pressure
- Urine analysis
- Cholesterol test
- Instruction in self-examination
- Advice about diet and lifestyle.

Palliative care for cancer

Our cover can provide much-needed care for a member in a recognised facility, even if their cancer is diagnosed as terminal.

Disability compensation

If a member has an accident or injury that leaves them with a permanent disability, we can provide a generous cash sum.

Travel insurance

Members can be covered for additional holidays they may take. The International Travel Plan takes into account the cover for medical costs which members already enjoy under their International Health Plan – so they won't end up paying twice for health cover.

Routine pregnancy costs

While all our plans cover the treatment of medical conditions that may arise during pregnancy, extending yours means your employees will be covered for day-to-day routine costs such as antenatal consultations.

Optional upgrade for our Prestige plan

If you'd like to tailor your Prestige cover even further you can choose to add this optional upgrade:

Dental care

Add a higher dental benefit limit that includes routine care such as check-ups, scale and polish.

Prestige Plus plan

For the ultimate in protecting your employees overseas, our Prestige Plus plan contains all the benefits of the Standard, Comprehensive and Prestige plans, plus:

Routine dental

Cover for routine dental work, including check-ups, scale and polish.

HIV/AIDS

Prestige Plus covers your employees for HIV/AIDS treatment including Antiretroviral Treatment.

Chinese herbal medicine

We'll provide cover for up to 15 Chinese herbal therapy treatments a year with a registered therapist.

Out-of-area cover for out-patient treatment

Your employees will be covered for emergency out-patient consultations or treatments if they travel outside their specified area. These include physiotherapy consultations and diagnostic tests.

Palliative care for all illnesses

If a member is diagnosed with a terminal illness, Prestige Plus will provide up to 30 days palliative care a year in a recognised facility.

Out-patient treatment

Out-patient treatment on Prestige Plus is covered from their overall policy benefit allowance. Session limits apply.

All cover is subject to an overall annual policy limit and individual benefit limits.



Exclusions

What's not included in the health plans

Are there any general exclusions on our International Health Plans?

Our International Health Plans are designed to cover treatment of medical conditions that respond quickly to treatment – known as acute conditions. There are a few things that our policies aren't designed to cover. We've listed the most significant things here:

- Treatment of medical conditions that existed, or the member had symptoms of, before joining [unless they have added existing medical condition as detailed on page 03]
- If members have our Standard plan without the Out-patient optional upgrade, there is no cover for out-patient physiotherapy, medical practitioner charges for out-patient consultations and complementary practitioner charges
- Treatment costs incurred as a result of engaging in, or training for, any sport for which members receive a salary or monetary reimbursement.
- The following dental treatments:
 - Routine check-ups including scale and polish (covered on Prestige Plus plan and on the Dental Care optional upgrade)
 - Cosmetic treatment
 - Dental treatment made necessary as a result of neglect.

- If members have Comprehensive (without the Routine pregnancy optional upgrade) or Standard, routine pregnancy and childbirth
- Ongoing, recurrent or long-term treatment of long term illnesses (usually referred to as 'chronic conditions') if members have standard cover
- Out-patient psychiatric treatment if members have Standard cover without the Out-patient optional upgrade
- For treatment in UK, any in-patient or day-patient treatment, MRI, CT or PET scans or cataract surgical procedures not received in a hospital, scanning centre or facility listed on our preferred list of hospitals
- We pay most fees in full, but we only pay charges up to the usual amount charged for that treatment if the person treating has in the past charged fees outside the range that is usual for the treatment they provide
- Claims if your employee has travelled outside your area of cover to get treatment or travelled against medical advice.

Please see the membership handbook for full details.



Contact us

**Wherever they are, we'll help
connect your employees to
the right medical expertise.**
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global and regional health plans visit:
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