

CANCER GUARDIAN 3 (CG3)

Brand-new approach for cancer protection



AIA Vitality

AIA International Limited
(Incorporated in Bermuda with limited liability)



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**HEALTHIER, LONGER,
BETTER LIVES**

CANCER IS COMMON AND MOSTLY TREATABLE – BUT AT A HIGH COST

The new challenge for patients lies in getting timely treatment while reducing financial burdens.

Cancer risks are soaring as life expectancy continues to rise, becoming a concern to many. Cancer is now a chronic disease¹ with prolonged treatment and recovery periods. It also carries recurrence risk, which can cause long-term financial stress to the patients. In addition, cancer patients face a new set of challenges amid limited public healthcare resources, expensive public and private healthcare, as well as experimental drugs that provide alternative treatment choice to late stage cancer patients which can be costly.

Cancer Guardian 3 is a one-stop cancer care solution. Combining protection with value-added services, the plan covers different medical expenses for covered cancer from prevention and prediction[†] to diagnosis, treatment and recovery, while providing personalised support. With Cancer Guardian 3, you can plan a happy future with confidence and peace of mind.



Why do you need cancer protection#?



Rising cancer risks call for early preparation

- 1 in **4** men and 1 in **5** women will develop cancer before age **75**²
- From 2009 to 2019, new cancer cases jumped by **35%**² and are projected to increase a further **35%** by 2030¹



Longer treatment and recovery periods with higher medical expenses

- Experimental drugs can be more effective³ but more **costly**, and is generally not covered by other medical products, including high-end medical plans*
- Late stage cancer patients can survive for over **10** years³
- High recurrence rates:
ovarian cancer is high at **85%**⁴ ;
prostate cancer is high at **48%**⁴



Public healthcare resources are limited and both public and private healthcare are expensive

- Around 10% of cancer patients had to wait at least **2-2.5** months before receiving their first treatment at a public hospital⁵
- At public hospitals, self-financed cancer drugs cost **19** times more than citizens' expectations⁶
- At private hospitals, treatments for common cancers like colorectal cancer can cost over HK\$/MOP **1 million**⁶

[†] Expense for predictive purpose is referring to pap smear that is covered under Prevention and Early Detection Benefits. For the avoidance of doubt, except for pap smear as mentioned, Cancer Guardian 3 does not cover any other expenses for predictive purpose.

* Cancer Guardian 3 offers the first-in-market benefit for experimental drug in comparison against similar cancer protection insurance products provided by major Hong Kong insurance companies as of 1 September 2022.

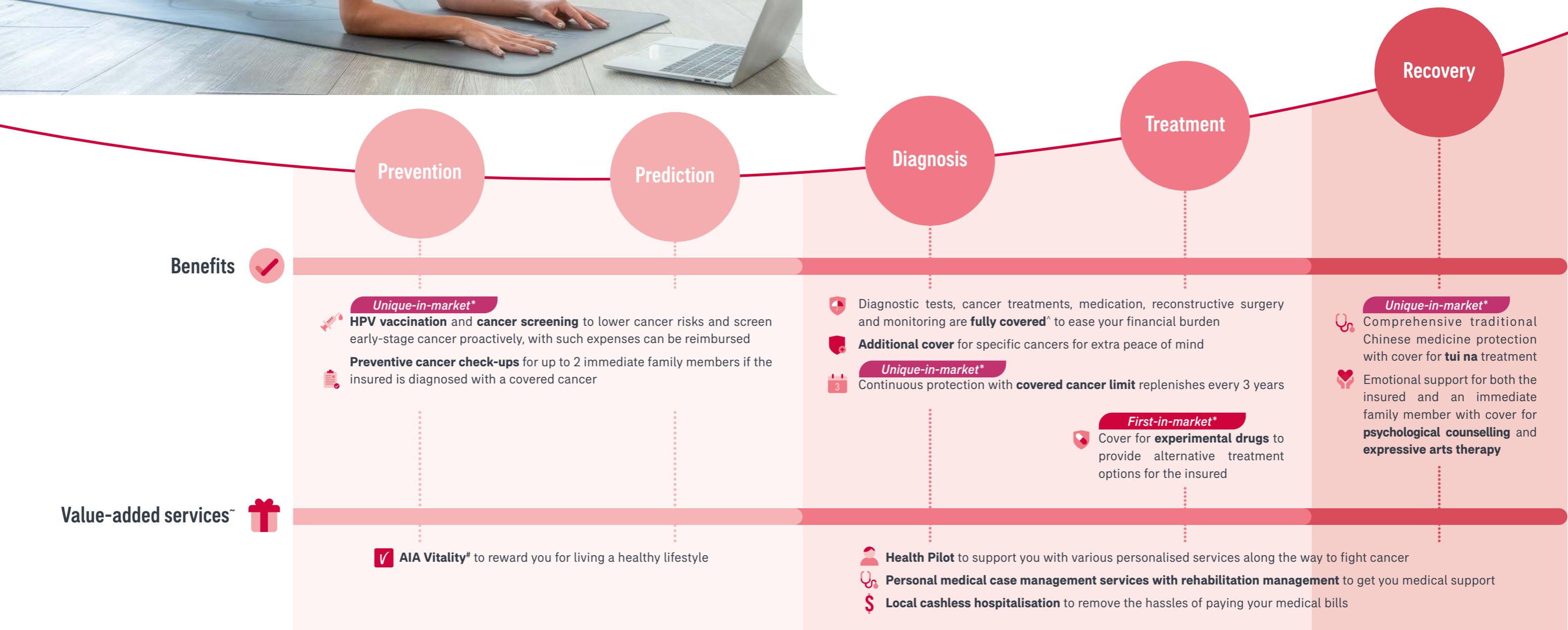
The statistics on this page are from Hong Kong.

"AIA", "the Company", "We", "our", or "us" herein refers to AIA International Limited (Incorporated in Bermuda with limited liability).



Proactive cancer prevention and solutions for safeguarding your wellbeing

Cancer Guardian 3 provides you with integrated and diversified protection and value-added services for prevention and prediction[†], helping you to manage cancer risks and proactively screen for early-stage cancer. After a covered cancer is diagnosed, it also offers financial assistance and one-stop personalised services for the insured, so the insured can focus on treatment and recovery.



Please refer to the **AIA "Health and Wellness 360"** section, the **Benefit schedule for Cancer Guardian 3**, and the **AIA Vitality** section for the detailed protection and services.

[†] Expense for predictive purpose is referring to pap smear that is covered under Prevention and Early Detection Benefits. For the avoidance of doubt, except for pap smear as mentioned, Cancer Guardian 3 does not cover any other expenses for predictive purpose.
^{*} As of 1 September 2022, compared against similar cancer protection insurance products provided by major Hong Kong insurance companies.
[^] Fully covered shall mean no itemised benefit sublimit under Diagnostic Benefit, Cancer Treatment Benefits, Reconstructive Surgery Benefit and Monitoring Benefit.
⁻ Value-added services are not contractual services and non-guaranteed, but the administrative arrangements offered in our absolute discretion. Please refer to the "Product Limitation" section under "Important Information" for details.
[#] AIA Vitality is not an insurance product and annual membership fee is required for joining. For further details, please refer to the remarks in the AIA Vitality section.



Covered cancer includes all stages of malignant cancer and carcinoma-in-situ, which (a) have been occurring for more than 90 days after the policy is issued or commences, whichever is later, and (b) have been investigated, diagnosed, or treated or when its signs or symptoms have manifested. For details of the definition of "covered cancer", please refer to the policy contract.

Proactive defence to reduce the risk

Cancer is common, but luckily studies show that some cancers can be prevented¹. That's why, **Cancer Guardian 3** facilitates proactive action through vaccinations and cancer screenings to safeguard the health of the insured.



Prevention

Prediction†

Diagnosis

Treatment


Recovery



- HPV vaccine can prevent **70%** of cervical cancers caused by HPV⁸
- Over **60%** of the positive cases in a colorectal cancer screening programme discovered an adenoma and got proper treatments to prevent cancer from developing⁹

The lifetime risk of contracting colorectal cancer for people with a related gene is as high as **80%**, with an average early-onset age of **44** years old¹¹

Vaccinations and cancer screenings to safeguard you across different life stages Unique-in-market



Some cancers have no symptoms during the early stages¹ while many people are unaware of the importance of vaccinations or cancer screenings. That's why, when they are diagnosed with cancer, it is typically already in the late stage¹⁰, posing more stress on their wellbeing and finances. Starting from the 4th policy year, **Cancer Guardian 3** provides the insured with the **Prevention and Early Detection Benefits**. Depending on the attained age of the insured, the insured can choose to receive HPV vaccination or designated cancer screening selection and choose to screen for cancer on every 5 years. Early detection allows treatment to begin before abnormal growths develop into cancer, or slower the progression of cancer.

Reduce cancer risk and act early



The family members of a cancer patient may be at a higher risk of getting cancer as it can be hereditary. Therefore, if the insured is unfortunately diagnosed with a covered cancer, **Cancer Guardian 3** also offers preventive screening for the directly related covered cancer to 2 immediate family members of the insured within 120 days from the insured's first diagnosis of such covered cancer. This **preventive check-up for immediate family members** can allow for timely action, bringing peace of mind to the family.

"I've considered cancer screening after my mom had cancer."⁷

"Many friends or friends of friends have cancer. Even for medical examinations, the cost is not low. You must have enough insurance coverage."⁷

More about vaccination and cancer screenings*

| | Male & Female | Male | | Female | |
|---|---------------|-----------|-----------|-----------|-----------|
| | Age 9-34 | Age 30-49 | Age 50-79 | Age 30-49 | Age 50-79 |
| HPV vaccination | ★ | | | | |
| Blood test (including but not limited to complete blood count, liver and renal function, hepatitis B and C) | | | | ★ | |
| Faecal immunochemical test | | ★ | | ★ | |
| Colonoscopy | | | ★ | | ★ |
| Chest x-ray | | | | ★ | |
| Urea Breath Test | | | | ★ | |
| Ultrasonography on abdomen and pelvis | | | | ★ | |
| Breast examination, ultrasonography on breast or mammography† | | | | | ★ |
| Pap smear (HPV test would also be covered if the HPV test is done together with Pap smear procedure) | | | | | ★ |

* This table is not a medical advice and shall not be used as a substitute for advice from your medical practitioner or other health professional. You should obtain professional advice from a medical practitioner or other appropriate health professional in relation to your own personal circumstances or in relation to the diagnosis or treatment of any medical condition. AIA does not have relevant licenses and/or qualifications to provide medical services and medical advice.
 † Being one of the benefit items under Prevention and Early Detection Benefits, this item is also applicable to insured male aged between 30 and 79, and it is payable in form of reimbursement.

† Expense for predictive purpose is referring to pap smear that is covered under Prevention and Early Detection Benefits. For the avoidance of doubt, except for pap smear as mentioned, Cancer Guardian 3 does not cover any other expenses for predictive purpose.



“Today cancer may not cost your life but you need to prepare for the expensive medical expenses. You don’t want to have no choice because you cannot afford the medication.⁷”



Multidisciplinary treatment for better outcomes

Getting the right cancer diagnosis is important for ensuring better outcomes. That’s why, **Cancer Guardian 3** covers diagnostic tests and cancer treatments along with additional coverage for specific cancers, the first-in-market cover for experimental drugs, as well as continuous protection for your peace of mind.

Maximum more than
HK\$/MOP **1 million** for
Colorectal cancer⁹, Lung cancer¹² treatments



Comprehensive coverage to ease your financial burden

To help reduce financial stress, diagnostics testing, cancer treatments, medication, reconstructive surgery and monitoring are fully covered under **Cancer Guardian 3**, along with a covered cancer limit of up to HK\$/MOP3 million, and a lifetime cancer limit of up to HK\$/MOP9 million.

Benefit, providing an additional 50% of the covered cancer limit for certain types of cancers including stage IV covered cancer, liver cancer, brain cancer, blood cancer and lymphoma for extra protection. This benefit does not count towards the covered cancer limit or lifetime cancer limit and is only offered once per policy.

What’s more, **Cancer Guardian 3** offers the **Target Protection**

An experimental immunotherapy drug produced **optimistic** outcomes in a cancer trial in the US¹³



Benefit from the latest treatment options *First-in-market*

Experimental drugs take time in terms of discover, develop, trial and register as investigational new drug, and are sometimes listed as self-financed drugs under public healthcare³ as approved drug with off label use. They can be more effective³ yet more costly and unaffordable to many.

To enable the insured to access the latest treatment, the **Experimental Drugs Benefit** offers financial support for local and overseas experimental drugs of up to HK\$/MOP1.5 million. With additional financial support, you will not have to worry about burdening your family.

Benefit overview

The Experimental Drugs Benefit is available for Plus and Mega plans only.

For the Experimental Drugs Benefit to be payable, the insured must be diagnosed with a Stage III or IV covered cancer, or terminal blood cancer¹⁴ and with a medical certificate issued by a registered medical practitioner to certify that (a) such prescribed experimental drug is related to his/her active or palliative treatment for the covered cancer, and (b) effective preliminary review for the covered cancer must have been carried out on such prescribed drug

at the time of prescription and have obtained approval from one of the following regulatory authorities to be on a clinical trial for testing and/or treatment in humans, and such experimental drug must be in active phase III of a clinical trial:

- United States Food and Drug Administration (FDA)
- European Medicines Agency (EMA)
- National Medical Products Administration (NMPA) of China
- Department of Health of Hong Kong

Chances of recurrence of stage II and III colorectal cancers 3 years after surgery can be as high as¹⁵:
10%-20% and **40%-50%**



Continuous coverage that keeps on protecting *Unique-in-market*

Cancer Guardian 3 offers continuous protection against any covered cancer, regardless of whether it is recurrence or metastasis of a covered cancer, or a new covered cancer.

Up to HK\$/MOP3 million, the covered cancer limit (which is shared by all covered cancers) will be replenished after 3 years from the initial diagnosis date of the covered cancer on the insured, and every 3 years afterwards, restoring your claim limit for each subsequent 3-year period until all claims paid out in total have reached the lifetime cancer limit of up to HK\$/MOP9 million. It helps you offset the ongoing medical costs.

For the avoidance of doubt, any unused covered cancer limit cannot be carried forward to the covered cancer limit for the subsequent 3-year period, and the total claims paid out within each 3-year period cannot be higher than the covered cancer limit.



Prevention

Prediction

Diagnosis

Treatment

Recovery

“Cancer patients need different medical service during recovery.”⁷”

Cover for rehabilitation for support on the road to recovery

Body and mind are connected, so taking the insured’s physical and mental wellbeing into consideration is important in cancer rehabilitation.



- Research has demonstrated that Chinese medicine can **enhance life expectancy** of cancer patients¹⁶
- Clinical trials have proven that acupuncture and tui na are effective for **relieving discomfort** caused by cancer, including pain, sleep disorders, etc.¹⁷

Chinese medicine for improving the quality of life Unique-in-market

In addition to prescribed Chinese medicine and acupuncture, **Cancer Guardian 3** also extends coverage to **tui na**, helping the insured overcome discomfort for a better quality of life.

- Over **60%** of recovered patients experience moderate to severe mental issues 6 months after starting treatment¹⁸
- 30%** of caregivers experience depression, anxiety and overwhelming stress¹⁹

Emotional support boosts mental health²⁰

Cancer may change the lives of both the patients and their caregivers, bringing stress upon the family. In addition to psychological counselling, **Cancer Guardian 3** also covers the latest **expressive arts therapy** (for example, art therapy or music therapy), allowing the insured and an immediate family member to express themselves through creative mediums for stronger emotional wellbeing.

Other plan features

1-year waiver of premium

We will waive the insured’s premiums for **Cancer Guardian 3** upon the initial diagnosis of the first covered cancer for 1 year. At the end of the waiver period, the policy owner shall pay the premium based on the premium rates applicable for the insured’s attained age. This premium waiver is not applicable to carcinoma-in-situ, and will only be activated once per policy.

Lifetime renewal

We will not raise your renewal premium after any claim you make, or any changes in your health condition. You can renew your cover every year for life, based on the prevailing premium rates at the time of renewal (for first-year premium details, please refer to the Annual Premium Table provided by your financial planner).

Flexibility to suit your needs

You have the option to take up **Cancer Guardian 3** as either a stand-alone insurance plan or as an add-on plan of a specified basic plan. You can also choose over 3 different plan levels to suit your budget and medical needs.

“One-stop is critical as we are feeling lost after diagnosis.”⁷”

“Follow-through service is good as you want to have someone to rely on and we usually have no knowledge and experience in cancer management.”⁷”



AIA “Health and Wellness 360” Taking care of your needs comprehensively from prevention, protection, treatment to recovery

AIA understands that health has become more and more important to you. We strive to do more for you to look out for your health. As your all-round health guardian, we offer an array of extra health and medical services and are there with you to live Healthier, Longer, Better Lives.

We encourage you to build a healthy lifestyle to prevent getting sick. Even if you feel unwell, AIA offers you diverse value-added medical services from treatment to recovery, partnering with top medical specialists and professional service providers around the globe to support you for faster recovery.



Dedicated Health Pilot for your peace of mind*

Should cancer strike, rest easy knowing that Health Pilot is there to support you every step of the way to recovery. Upon the diagnosis of a covered cancer, Health Pilot will help coordinate cancer care professionals across different disciplines and specialities based on your needs, supporting a holistic care plan. Contact Health Pilot through the dedicated hotline to receive healthcare advice with empathy throughout your recovery journey.

For more information of service details, please refer to our Health Pilot leaflet.



For more information, please refer to the Personal Medical Case Management Services with Rehabilitation Management leaflet.



Hassle-free medical payment at home

When you are facing a health challenge, the last thing you want is the hassle of paying your medical bills. Through AIA, you can enjoy the total convenience of cashless hospitalisation. This service covers designated private hospitals locally in Hong Kong, Macau and China.

Once this service has been approved, we will settle the medical expenses incurred during your hospital stay on your behalf, allowing you to focus on your recovery without the stress of paying hospital bills and making subsequent claims. You can settle the shortfall payment resulting from your hospital stay after your treatment. Once the final claim amount has been settled, any related benefit limits will be reduced accordingly.

For more information and the list of designated hospitals, please refer to our Credit Facility Service for Hospitalisation leaflet.



Personal Medical Case Management Services with Rehabilitation Management*

If you are unfortunately diagnosed with a covered cancer, an expert team is here to help. Through Personal Medical Case Management Services with Rehabilitation Management, our designated service provider will get you the medical support you need with ongoing updates on your condition, and tailor a personalised rehabilitation plan for you.

Your diagnosis and treatment will be assessed by a specialist, so you can count on additional medical expertise to help you overcome your health challenges with confidence.



* This service is provided in Hong Kong by the designated service provider engaged by AIAHK and is not applicable to Macau Region.



Worldwide emergency assistance

A worldwide assistance hotline is open 24/7 for any emergency support you might need, especially while you are abroad. Help is always just one call away.

For more information on the services under AIA "Health and Wellness 360", please refer to the "Product Limitation" section under "Important Information".

Join **AIA Vitality** and enjoy an instant 10% premium discount for the first year

We are excited to introduce **AIA Vitality**, a game changing wellness programme which redefines the traditional concept of insurance, aims to reward customer to live a healthy lifestyle.

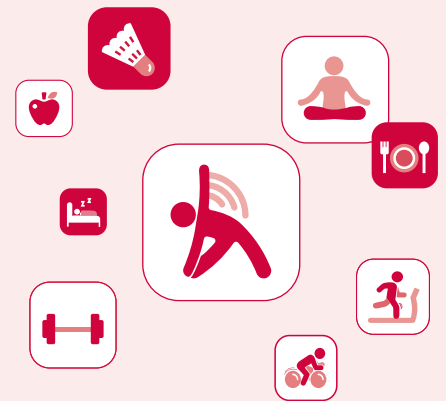
Once you join **AIA Vitality**, you can enjoy an instant 10% premium discount for the first year of your **Cancer Guardian 3**. As long as you keep up a healthy lifestyle, you can even enjoy a minimum 10% premium discount each year, while at the same time earning **AIA Vitality** Points and enjoying an array of rewards and offers to help you live a healthier lifestyle.

For more information, please refer to the **AIA Vitality** leaflet.

Note: AIA Vitality is not an insurance product and annual membership fee is required for joining.



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Remarks

1. Source: Hong Kong Cancer Strategy 2019, Food and Health Bureau, July 2019
2. Source: Hong Kong Cancer Registry. Overview of Hong Kong Cancer Statistics of 2019. Hong Kong Hospital Authority; Oct 2021
3. Source: Healthcare Thinker, 26 December 2021 <https://www.healthcarethinkers.com/2021/12/藥物進步助與癌共存>
4. Source: Cancer Recurrence Statistics, Cancer Therapy Advisor, 30 November 2018 <https://www.cancertherapyadvisor.com/home/tools/fact-sheets/cancer-recurrence-statistics/>
5. Source: Statistical Highlight – Cancer Prevention and Treatment, Research Office, Legislative Council Secretariat, 24 February 2022
6. Source: Cancerinformation.com.hk, 18 July 2018 <https://cancerinformation.com.hk/web/?xinwengao=本港癌症治療政府欠規劃-調查：誤以為政府醫癌>
7. Source: AIA commissioned international research and data analysis firm Qualitative Consultancy Limited to conduct focus groups in Hong Kong in July 2021.
8. Source: Family Health Service – Department of Health, March 2017 https://www.fhs.gov.hk/english/health_info/faq/women_health/WH2_5_2.html
9. Source: The Government of the Hong Kong Special Administrative Region – Press Releases, 30 December 2021 <https://www.info.gov.hk/gia/general/202112/30/P2021122800287.htm?fontSize=1>
10. Source: Hong Kong Economic Times, 15 January 2022 <https://wealth.hket.com/article/3155536/【健康增值】早期肺癌無明顯徵狀%E3%80%80可透過篩查及早發現>
11. Source: LKS Faculty of Medicine, The University of Hong Kong, 17 October 2020 <https://www.med.hku.hk/en/about-hkumed/knowledge-exchange/newspaper-columns/2020/oct/prevention-of-hereditary-colon-cancer-dna-testing-and-colonoscopy-screening>
12. Source: Union Hospital (data collection date: July 2022) and Hong Kong Sanatorium & Hospital (data collection date: July 2022)
13. Source: Ming Pao Health Net, 14 June 2022 <https://health.mingpao.com/免疫藥物療法治直腸癌-18患者全康復-或可避免手術>
14. Terminal blood cancer refers to any haematological malignancy deemed incurable with existing non-experimental treatment by a haematologist.
15. Source: healthnews.com.tw, 15 December 2020 <https://www.healthnews.com.tw/article/48383>
16. Source: Unlocking the Mystery of the Therapeutic Effects of Chinese Medicine on Cancer, Frontiers in Pharmacology, 15 January 2021
17. Source: Effects of Acupuncture, Tuina, Tai Chi, Qigong, and Traditional Chinese Medicine Five-Element Music Therapy on Symptom Management and Quality of Life for Cancer Patients: A Meta-Analysis, Journal of Pain and Symptom Management Vol 51 No.4, 4 April 2016
18. Source: Oriental Net, 7 December 2021 https://hk.on.cc/hk/bkn/cnt/news/20211207/bkn-20211207134955139-1207_00822_001.html
19. Source: Psychological Distress Is Interdependent in Patients With Cancer and Their Caregivers, ONS VOICE, 12 February 2019 <https://voice.ons.org/news-and-views/psychological-distress-is-interdependent-in-patients-with-cancer-and-their>
20. Source: University of Maryland Medical System (data collection date: July 2022) <https://health.umms.org/2020/12/18/caring-for-mental-health-and-cancer/>

Cover at a glance

| | |
|------------------------------|--|
| Product Nature | Medical protection insurance plan (Reimbursement) |
| Plan Type | Basic plan and add-on plan |
| Insured's Age at Application | 15 days to age 70 |
| Renewal | Whole life |
| Policy Currency | HK\$/MOP/US\$ |
| Geographical Cover | Worldwide |
| Room Type | Semi-private room |
| Plan Level | <ul style="list-style-type: none"> • Standard plan • Plus plan • Mega plan |
| Premium Payment Mode | <ul style="list-style-type: none"> • Basic plan: Annually / semi-annually / quarterly / monthly • Add-on plan: Follow the corresponding basic plan |



EXAMPLE

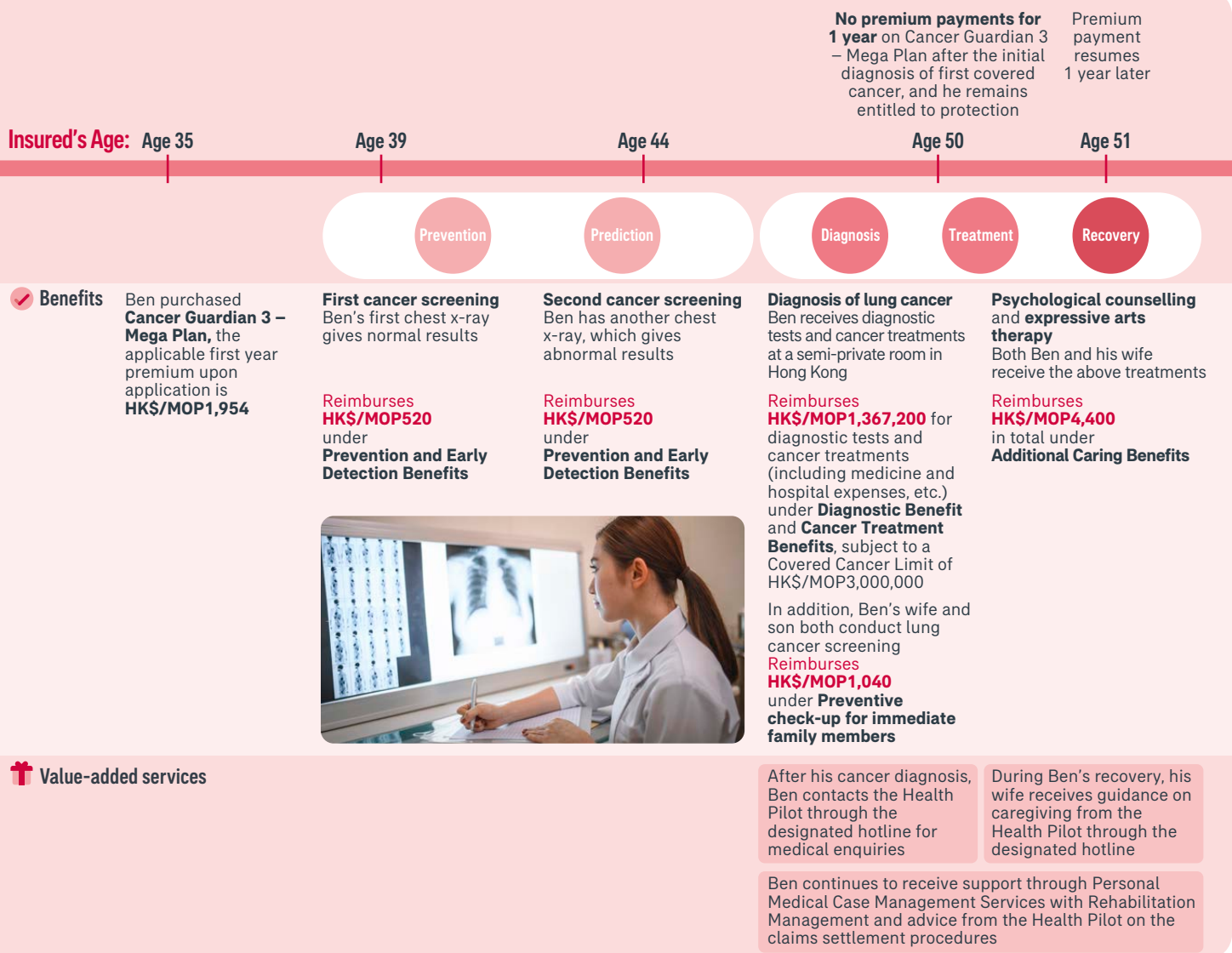
(The following example is hypothetical and for illustrative purposes only. It assumes no previous claim has been made. It does not constitute medical advice. You should seek independent professional advice before making any decision on this matter.)

Policy owner and insured: Ben (age 35, non-smoker)
Occupation: Senior Account Manager
Family status: Married with 1 son



Ben is worried about the long treatment period and enormous expenses that come with cancer. That is why he decides to purchase **Cancer Guardian 3 – Mega Plan** for a lifetime cancer limit of up to HK\$/MOP9 million, which will help him receive timely treatment in case of cancer, along with comprehensive services to support him and guard his family from the heavy financial burdens from cancer.

Lifetime renewal



- Notes:**
- The above first year premium is calculated on the basis of standard premium rates, and is assumed the insured is a male non-smoker and the attained age is 35 upon application, the plan level is Mega and the premium payment mode is annual. The figure is for reference only and does not include the AIA Vitality premium discount.
 - Expense for predictive purpose is referring to pap smear that is covered under Prevention and Early Detection Benefits. For the avoidance of doubt, except for pap smear as mentioned, Cancer Guardian 3 does not cover any other expenses for predictive purpose.
 - The eligible medical expenses for a covered cancer can be reimbursed under Cancer Guardian 3 - Mega Plan, with a lifetime cancer limit of HK\$/MOP9 million, covering the Diagnostic Benefit, Cancer Treatment Benefits, Experimental Drugs Benefit, Reconstructive Surgery Benefit and Monitoring Benefit.
 - The Prevention and Early Detection Benefits is available from the 4th policy year and every five years thereafter.
 - Claims amounts are subject to the benefit limits as set out in the benefit schedule, which is subject to both the covered cancer limit and lifetime cancer limit if applicable.
 - Recommendation by a medical practitioner in writing is required for medicine as covered under Cancer Treatment Benefits and preventive check-up for immediate family members.
 - For more information of service details, please refer to Personal Medical Case Management Services with Rehabilitation Management and Health Pilot leaflets.




EXAMPLE

(The following example is hypothetical and for illustrative purposes only. It assumes no previous claim has been made. It does not constitute medical advice. You should seek independent professional advice before making any decision on this matter.)

Policy owner and insured: Sally (age 32, non-smoker)
 Occupation: Multimedia Design Manager
 Family status: Single

Sally has learnt that cancer patients are being diagnosed at a younger age and public healthcare resources are scarce as ever. Therefore, she decides to purchase **Cancer Guardian 3 – Mega Plan** for comprehensive and continuous cancer cover and access to quality medical services.

Lifetime renewal

| | Age 32 | Age 34 | Age 35 | Age 37 | Age 38 |
|---|--|--|---|---|---|
| | Prevention | Prediction | Diagnosis | Treatment | Recovery |
| <p>Insured's Age:</p> <p>Benefits Sally purchased Cancer Guardian 3 – Mega Plan, the applicable first year premium upon application is HK\$/MOP 2,553</p> |  <p>First diagnosis of breast cancer Sally receives diagnostic tests and cancer treatments at a semi-private room in Hong Kong</p> <p>Reimburses HK\$/MOP970,000 for diagnostic tests and cancer treatments (including medicine and hospital expenses, etc.) under Diagnostic Benefit and Cancer Treatment Benefits, subject to the first Covered Cancer Limit of HK\$/MOP3,000,000</p> | <p>Premium payment resumes 1 year later</p> <p>Sally recovers from breast cancer</p> | <p>Second diagnosis of breast cancer Sally's breast cancer comes back and develops into Stage IV. She is advised to take experimental drugs to improve her conditions at a semi-private room in Hong Kong</p> <p>Reimburses HK\$/MOP3,000,000 for diagnostic tests and cancer treatments (including medicine and hospital expenses, etc.) under Diagnostic Benefit, Cancer Treatment Benefits and Experimental Drugs Benefit. All the above benefits are subject to the second Covered Cancer Limit of HK\$/MOP3,000,000</p> <p style="text-align: center;">+</p> <p>Reimburses HK\$/MOP984,800 under Target Protection Benefit with an additional 50% of Covered Cancer Limit</p> | <p>Covered Cancer Limit auto replenishes 3 years after the initial diagnosis date of breast cancer</p> <p>Registered Chinese medical practitioner consultation, including medicine prescribed, acupuncture and tui na</p> <p>Reimburses HK\$/MOP53,000 under Additional Caring Benefits</p> | |
| <p>Value-added services</p> | <p>Sally joins AIA Vitality helping her to build up healthy lifestyle systematically and earn rewards, and enjoying the 10% premium discount for the first year</p> | | <p>After her cancer diagnosis, Sally contacts the Health Pilot through the designated hotline for medical enquiries</p> | | <p>Sally wishes to consult with a Chinese Medicine Practitioner, so the Health Pilot makes appointments on her behalf</p> |
| | <p>Sally continues to receive support through Personal Medical Case Management Services with Rehabilitation Management and advice from the Health Pilot on the claims settlement procedures</p> | | | | |

- Notes:**
- The above first year premium is calculated on the basis of standard premium rates, and is assumed the insured is a female non-smoker and the attained age is 32 upon application, the plan level is Mega and the premium payment mode is annual. The figure is for reference only and does not include the AIA Vitality premium discount.
 - Expense for predictive purpose is referring to pap smear that is covered under Prevention and Early Detection Benefits. For the avoidance of doubt, except for pap smear as mentioned, Cancer Guardian 3 does not cover any other expenses for predictive purpose.
 - The eligible medical expenses for a covered cancer can be reimbursed under Cancer Guardian 3 - Mega Plan, with a lifetime cancer limit of HK\$/MOP9 million, covering the Diagnostic Benefit, Cancer Treatment Benefits, Experimental Drugs Benefit, Reconstructive Surgery Benefit and Monitoring Benefit.
 - Claims amounts are subject to the benefit limits as set out in the benefit schedule, which is subject to both the covered cancer limit and lifetime cancer limit if applicable.
 - For the Experimental Drugs Benefit to be payable, the insured must be diagnosed with a Stage III or IV covered cancer, or terminal blood cancer and with a medical certificate issued by a registered medical practitioner to certify that such prescribed experimental drug is related to his/her active or palliative treatment for the covered cancer. In addition, effective preliminary review must have been carried out on such prescribed drug at the time of prescription and have obtained approval from one of the following regulatory authorities to be on a clinical trial for testing and/or treatment in humans, and such experimental drug must be in active phase III of a clinical trial: United States Food and Drug Administration (FDA), European Medicines Agency (EMA), National Medical Products Administration (NMPA) of China or Department of Health of Hong Kong.
 - Subject to the maximum benefit limit of HK\$/MOP1.5 million for Experimental Drugs Benefit under Cancer Guardian 3 - Mega Plan, and maximum 60% of the actual cost for drugs prescribed outside of Hong Kong, Macau and Mainland China.
 - The Target Protection Benefit under Cancer Guardian 3 - Mega Plan offers an additional 50% of covered cancer limit once per policy for specific target cancers, including but not limited to Stage IV covered cancer as illustrated under this case.
 - Recommendation by a medical practitioner in writing is required for medicine as covered under Cancer Treatment Benefits, and experimental drug as covered under Experimental Drugs Benefit.
 - For more information of service details, please refer to our Personal Medical Case Management Services with Rehabilitation Management and Health Pilot leaflets.
 - AIA Vitality is not an insurance product and annual membership fee is required for joining. For details, please refer to the remarks in the AIA Vitality section.

Benefit schedule for Cancer Guardian 3

Benefit items are reimbursed on medically necessary and reasonable and customary basis. For more information, please refer to the “Product Limitation” section under “Important Information”. Benefits are illustrated in Hong Kong dollars / Macau pataca only. For policies denominated in US dollars, maximum benefits are equal to the maximum benefits in Hong Kong dollars / Macau pataca divided by 8.



Recommendation by a registered medical practitioner in writing is required.






| Plan Level | Standard | Plus | Mega |
|---|-------------------|--|----------------|
| Maximum Benefit (HK\$/MOP) | | | |
| Overview | | | |
| Lifetime Cancer Limit (applicable to the benefit items under Parts A to E below) | 3,000,000 | 3,000,000 | 9,000,000 |
| Covered Cancer Limit (applicable to benefit items under Parts A to E below, limit for every 3 consecutive policy years, and such limit replenishes every 3 policy years) | 1,000,000 | 1,000,000 | 3,000,000 |
| Geographical Cover | Worldwide | | |
| Room Type | Semi-private room | | |
| Benefit Items | | | |
| Maximum Benefit (HK\$/MOP) | | | |
| A. Diagnostic Benefit | | | |
| 1. Diagnostic tests The costs of diagnostic tests, including computed tomography, magnetic resonance imaging etc. for establishing the positive diagnosis of covered cancer | Fully covered* | | |
| B. Cancer Treatment Benefits | | | |
| (i) Hospitalisation and treatment | | | |
| 2. Hospital daily room and board | Fully covered* | | |
| 3. Attending registered medical practitioner's visits | Fully covered* | | |
| 4. Intensive care unit (“ICU”) expenses | Fully covered* | | |
| 5. Surgical expenses Including surgeon's fee, anaesthetist's fee and operating theatre fee | Fully covered* | | |
| 6. Miscellaneous hospital expenses | Fully covered* | | |
| 7. Hospital companion bed Including one companion bed during hospitalisation of the insured | Not applicable | Fully covered* | Fully covered* |
| (ii) Day treatment and surgery | | | |
| 8. Active and palliative treatments Including chemotherapy, hormonal therapy, radiotherapy, targeted therapy, immunotherapy, proton therapy and day surgery for any covered cancer | Fully covered* | | |
| 9. Medication Including anti-nausea drugs, anti-rejection drugs, anti-vertigo drugs, anti-anodynes, and other long-term medications required for the treatment of a covered cancer | Fully covered* | | |
| C. Experimental Drugs Benefit | | | |
| 10. Experimental drugs The insured must be diagnosed with a Stage III or IV covered cancer, or terminal blood cancer and with a medical certificate issued by a registered medical practitioner to certify that such the prescribed experimental drug is related to his/her active or palliative treatment for the covered cancer. Such prescribed experimental drug must be in active phase III of a clinical trial at the time of prescription with effective preliminary review and approval from one of the following regulatory authorities to be on a clinical trial for testing and/or treatment in humans: • United States Food and Drug Administration (FDA) • European Medicines Agency (EMA) • National Medical Products Administration (NMPA) of China • Department of Health of Hong Kong | Not applicable | 500,000 | 1,500,000 |
| | | Maximum 60% of the actual cost for drugs prescribed outside of Hong Kong, Macau and Mainland China | |
| D. Reconstructive Surgery Benefit | | | |
| 11. Reconstructive Surgery For restoration of function or appearance of head or breast. Surgery solely for isolated dental restoration is excluded | Fully covered* | | |
| E. Monitoring Benefit | | | |
| 12. Monitoring Including the expenses on consultation, laboratory tests and screening tests (up to 5 years after completion of active treatment) | Fully covered* | | |

* Fully covered shall mean no itemised benefit sublimit under Diagnostic Benefit, Cancer Treatment Benefits, Reconstructive Surgery Benefit and Monitoring Benefit.

Benefit schedule for Cancer Guardian 3 (continued)

Benefit items are reimbursed on medically necessary and reasonable and customary basis. For more information, please refer to the "Product Limitation" section under "Important Information". Benefits are illustrated in Hong Kong dollars / Macau pataca only. For policies denominated in US dollars, maximum benefits are equal to the maximum benefits in Hong Kong dollars / Macau pataca divided by 8.


 Recommendation by a registered medical practitioner in writing is required.

| Plan Level | Standard | Plus | Mega |
|---|---|--|--|
| Benefit Items | Maximum Benefit (HK\$/MOP) | | |
| F. Target Protection Benefit | | | |
| 13. Protection on specific target cancers Applicable to expenses incurred from the benefit items under Parts A, B, D and E only | Not applicable | Additional 50% of Covered Cancer Limit (for once per policy, and it does not count towards Covered Cancer Limit and Lifetime Cancer Limit) | |
| • Stage IV covered cancer; | | 500,000 | 1,500,000 |
| • Liver cancer; | | | |
| • Brain cancer; | | | |
| • Blood cancer; | | | |
| • Lymphoma | | | |
| G. Additional Caring Benefits (per policy) | | | |
| 14. 1-Year waiver of premium Upon the first diagnosis of first covered cancer (excluding carcinoma-in-situ for the purpose of this benefit) | | Once per policy | |
| 15. Daily hospital cash benefit for ICU For the admission of the insured to an Intensive Care Unit as a result of a covered cancer | 1,000 per day Maximum 15 days | 1,000 per day Maximum 15 days | 1,500 per day Maximum 15 days |
| 16. Daily hospital cash benefit for long-term hospitalisation Starting from the 31st day of a confinement after a continuous physical stay of 30 days | 500 per day Maximum 60 days | 500 per day Maximum 60 days | 750 per day Maximum 60 days |
| 17. Transportation fee subsidy Applicable for the transportation fee incurred for each day on which the insured receives medical treatment or undergoes surgery, tests, procedures or confinement covered under Parts A to G | Not applicable | 500 per day 1 payment per day Maximum 20 days | 750 per day 1 payment per day Maximum 20 days |
| 18. Registered Chinese medicine practitioner consultation Outpatient consultation, treatments (including acupuncture and Tui Na) and Chinese medicines prescribed | 600 per visit, 1 visit per day Maximum 30 visits | 1,000 per visit, 1 visit per day Maximum 38 visits | 1,500 per visit, 1 visit per day Maximum 38 visits |
|  19. Registered physiotherapist consultation Including acupuncture treatments | 600 per visit, 1 visit per day Maximum 20 visits | 600 per visit, 1 visit per day Maximum 20 visits | 900 per visit, 1 visit per day Maximum 20 visits |
|  20. Registered dietician consultation | 600 per visit, 1 visit per day Maximum 20 visits | 600 per visit, 1 visit per day Maximum 20 visits | 900 per visit, 1 visit per day Maximum 20 visits |
| 21. Psychological counselling Provides to the insured and an immediate family member (including the insured's legally married spouse, a child or parent) | 1,200 per visit Maximum 20 visits | 1,200 per visit Maximum 30 visits | 1,200 per visit Maximum 40 visits |
| | Maximum 1 visit per day, and maximum of 1 insured and 1 immediate family member per visit | | |
| 22. Expressive arts therapy Provides to the insured and an immediate family member (including the insured's legally married spouse, a child or parent) | 700 per visit Maximum 16 visits | 800 per visit Maximum 20 visits | 1,000 per visit Maximum 20 visits |
| | Maximum 1 visit per day, and maximum of 1 insured and 1 immediate family member per visit | | |
|  23. Preventive check-up for immediate family members For diagnostic tests undertaken by immediate family members (including the insured's legally married spouse, a child or parent), which are directly related to the diagnosed covered cancer of the insured | | 10,000 | |
| | Preventive check-up(s) for maximum 2 family members if the insured is diagnosed with a covered cancer | | |
|  24. Home nursing Provides to the insured by a licensed or graduate nurse in the insured's home after discharge from hospital following confinement or surgery | 1,000 per day Maximum 60 days | 1,000 per day Maximum 60 days | 1,500 per day Maximum 60 days |
|  25. Medical appliances Purchase and/or rental of necessary medical appliances relating to any covered cancer | 5,000 | 5,000 | 7,500 |
| 26. Wig and voice box expenses Subject to a condition that charges on chemotherapy and/or radiotherapy have been incurred and payable under Part B | 2,000 | 3,000 | 4,000 |

* Fully covered shall mean no itemised benefit sublimit under Diagnostic Benefit, Cancer Treatment Benefits, Reconstructive Surgery Benefit and Monitoring Benefit.

Benefit schedule for Cancer Guardian 3 (continued)

Benefit items are reimbursed on medically necessary and reasonable and customary basis. For more information, please refer to the "Product Limitation" section under "Important Information". Benefits are illustrated in Hong Kong dollars / Macau pataca only. For policies denominated in US dollars, maximum benefits are equal to the maximum benefits in Hong Kong dollars / Macau pataca divided by 8.

 Recommendation by a registered medical practitioner in writing is required.

| Plan Level | | Standard | Plus | Mega | |
|---|---|-------------------------------|--------------------|--------|--------|
| Benefit Items | | Maximum Benefit (HK\$/MOP) | | | |
| H. Prevention and Early Detection Benefits (per policy) | | | | | |
| 27. Prevention and early detection measures for cancer (available from the 4th policy year) | | | | | |
| Life stage | Age range of the insured (attained age at policy anniversary) | Measures options | | | |
| Young | 9-29 | HPV vaccination | Not applicable | 500 | |
| Adult | 30-34 | HPV vaccination; or | Not applicable | 500 | |
| | | Cancer screenings selection A | | | |
| | 35-39 | | Not applicable | 500 | |
| | 40-44 | Cancer screenings selection A | Not applicable | 750 | |
| Mature | 45-49 | | Not applicable | 750 | |
| | 50-54 | | Not applicable | 1,500 | |
| | 55-59 | | Not applicable | 1,500 | |
| | 60-64 | Cancer screenings selection B | Not applicable | 2,500 | |
| | 65-69 | | Not applicable | 2,500 | |
| | 70-74 | | Not applicable | 2,500 | |
| 75-79 | Not applicable | | 2,500 | | |
| I. Death Benefit | | | | | |
| 28. Compassionate death benefit Payable to the beneficiary if the insured passes away | | | 20,000 | 20,000 | 30,000 |
| J. Others | | | | | |
| 29. Worldwide emergency assistance services | | | | | |
| (a) Emergency medical evacuation | | | 5,000,000 per life | | |
| (b) Repatriation of remains | | | | | |
| (c) 24-hour worldwide telephone enquiry services | | | Included | | |

* Fully covered shall mean no itemised benefit sublimit under Diagnostic Benefit, Cancer Treatment Benefits, Reconstructive Surgery Benefit and Monitoring Benefit.

Notes:

- Each preventive and early detection measure for cancer (including HPV vaccination, cancer screenings selection A and cancer screenings selection B) under the Prevention and Early Detection Benefits shall only be exercised once per each age range of the insured as stated in the benefit schedule. In addition, each exercise of preventive and early detection measure for cancer shall be separated by at least 5 policy years.
- HPV Vaccination is payable once per policy for a maximum of 3 doses in either one of the insured's age range - "age 9-29" or "age 30-34". All doses must be administered within 12 months after the first dose is being administered.
- The age of the insured as stated in the benefit schedule refers to the attained age of the insured at policy anniversary.
- The insured may choose from any of the following early detection measure according to his/her own age:

| Cancer screenings selection A | Cancer screenings selection B |
|--|--|
| • Blood test | • Blood test |
| • Faecal immunochemical test | • Colonoscopy |
| • Chest x-ray | • Chest x-ray |
| • Urea breath test | • Urea breath test |
| • Ultrasonography on abdomen and pelvis | • Ultrasonography on abdomen and pelvis |
| • Breast examination, ultrasonography on breast or mammography | • Breast examination, ultrasonography on breast or mammography |
| • Pap smear (HPV test would also be covered if the HPV test is done together with Pap smear procedure) | • Pap smear (HPV test would also be covered if the HPV test is done together with Pap smear procedure) |

Important Information

This brochure does not contain the full terms and conditions of the policy. It is not, and does not form part of, a contract of insurance and is designed to provide an overview of the key features of this product. The precise terms and conditions of this plan are specified in the policy contract. Please refer to the policy contract for the definitions of capitalised terms, and the exact and complete terms and conditions of cover. In case you want to read policy contract sample before making an application, you can obtain a copy from AIA. This brochure should be read along with the illustrative document (if any) and other relevant marketing materials, which include additional information and important considerations about this product. We would like to remind you to review the relevant product materials provided to you and seek independent professional advice if necessary.

This plan is an insurance plan without any savings element. All premiums are paid for the insurance and related costs.

This brochure is for distribution in Macau only.

Key Product Risks

1. You need to pay the premium for this plan for life as long as you renew for this plan or for this add-on plan until the basic plan it is attached to is terminated. If you do not pay the premium within 31 days of the premium due date, the policy will be terminated and you / the insured will lose the cover.
2. You may request for the termination of your policy by notifying us in written notice. Also, we will terminate your policy and you / the insured will lose the cover when one of the following happens:
 - the insured passes away;
 - you do not pay the premium within 31 days of the premium due date;
 - the aggregate benefits under the relevant insurance policy reaches the lifetime cancer limit; or
 - when you take this plan as an add-on plan of any basic plan which has been terminated.

If the insured happens to be hospitalised on the date when the plan / add-on plan is terminated because you do not pay the premium within 31 days of the premium due date, we will extend the cover for an additional 30 days starting from the premium due date without the need for you to make any payments, subject to the same benefit limits which apply to your original plan. For the avoidance of doubt, the grace period will not be extended.

3. We underwrite the plan and you are subject to our credit risk. If we are unable to satisfy the financial obligations of the policy, the insured may lose his cover and you may lose the remaining premium for that policy year.
4. You are subject to exchange rate risks for plans denominated in currencies other than the local currency. Exchange rates fluctuate from time to time. You may suffer a loss of your benefit values and the subsequent premium payments (if any) may be higher than your initial premium payment as a result of exchange rate fluctuations. You should consider the exchange rate risks and decide whether to take such risks.
5. The future medical costs will be higher than they are today due to inflation. Hence, the benefit amounts and the future premium rate of this plan may be revised to reflect the inflation (Please refer to the Annual Premium Table for the first year premium provided by your financial planner).

Key Exclusions

Under this plan, except Compassionate Death Benefit, we will not cover any of the following events or conditions:

1. Cancer relating to any of the following event:
 - any tumour which is histologically classified as premalignant;
 - abnormal lesions of cervix uteri classified as cervical intra-epithelial neoplasia grade I (CIN I) and grade II (CIN II);
 - any drug or alcohol abuse;
 - any pre-existing conditions;
 - nuclear, biological or chemical contamination; and
 - any cancer where HIV infection is also present.
2. Any medical procedure, treatment, confinement and/or charges relating to any of the following events:
 - any treatment, test, service or supply which is not medically necessary (unless they are covered by Prevention and Early Detection Benefits, see item 27 in the benefits schedule for details);
 - any congenital covered cancer that has been found or is diagnosed before the insured reaches the age of 17;
 - general check-up (whether with or without any positive finding(s) on the insured), convalescence, custodial or rest care not related to the covered cancer; screening or check-ups on a preventative basis or where there are no symptoms or history of covered cancer unless they are covered by Prevention and Early Detection Benefits; vaccines for prevention of covered cancers unless they are covered by Prevention and Early Detection Benefits;
 - any experimental, unproven or unconventional medical treatments or novel drugs not yet approved by the government and relevant authorities of the country or region where the treatment is sought (unless they are covered by Experimental Drugs Benefit, see item 10 in the benefits schedule for details);
 - mental disorder, psychological or psychiatric conditions, behavioural problems or personality disorder (unless they are covered by “psychological counselling” and “expressive arts therapy” under Additional Caring Benefits, see benefits schedule items 21 and 22 for details); and
 - diseases or infection with any HIV or related illness.

The above list is for reference only. Please refer to the policy contract of this plan for the complete list and details of exclusions.

Premium Adjustment and Product Features Revision

1. Premium Adjustment

In order to provide you with continuous protection, we will annually review and adjust the premium of your plan accordingly at the end of policy year if necessary. During the review, we may consider factors including but not limited to the following:

- claim costs incurred from all policies under this plan and the expected claim outgo in the coming year which reflects the impact of medical trend, medical cost inflation and product feature revisions
- historical investment returns and the future outlook of the product's backing asset
- policy surrenders and lapses
- expenses directly related to the policy and indirect expenses allocated to this product

2. Product Features Revision

We reserve the right to revise the benefit structure, terms and conditions and / or product features, so as to keep pace with the times for medical advancement and to provide you with continuous protection.

We will give you a written notice of any revision 31 days before the end of policy year or upon renewal.

Product Limitation

1. The cover of this plan will be effective on the following dates:

| Items | Effective Date (after the policy commence) |
|--|---|
| Covered cancer | 90 days |
| Prevention and Early Detection Benefits – preventive and early detection measures for cancer | 3 years |

2. With the exception of preventive check-up for immediate family members, preventive and early detection measures for cancer, the product will not cover any routine medical check or test with a negative result. The relevant expenses will not be reimbursed. Only the expenses of a test directly confirmed a positive diagnosis of a covered cancer can be reimbursed.
3. All medical expense incurred by the insured and reimbursed by us (including those reimbursed pursuant to the Diagnostic Benefit, Cancer Treatment Benefits, Experimental Drugs Benefit, Reconstructive Surgery Benefit and Monitoring Benefit) for any and all covered cancer suffered by the insured will be counted towards the covered cancer limit. Covered cancer limit shall be replenished to its maximum limit after every three consecutive years commencing from the date of first diagnosis of the first covered cancer, and shall become zero when the aggregate amount paid during the lifetime of the insured reaches the lifetime cancer limit.

For the application of covered cancer limit, there shall only be one and the same covered cancer limit for all covered cancer suffered by the insured for every three consecutive years while the policy is in effect.

4. We only cover the charges and/or expenses of the insured on medically necessary and reasonable and customary basis (unless they are covered by Experimental Drugs Benefit, Prevention and Early Detection Benefits. Please refer to items 10 and 27 in the benefit schedule for details).

"Medically necessary" means that the medical services, diagnosis and/or treatments are:

- delivered according to standards of good medical practice;
- necessary; and
- cannot be safely delivered in a lower level of medical care, but excludes experimental, screening, and preventive services or supplies.

"Reasonable and customary" means:

- the medical services, diagnosis and/or treatments are medically necessary and delivered according to standards of good medical practice; and
- the costs of your medical services and the duration of your hospital stay are within the usual level of charges or duration for similar treatment in the locality of such services delivered.

We may adjust any and all benefits payable in relation to any hospital / medical charges which is not a reasonable and customary charge.

5. The insured will be covered for any room type in which he stays at hospital. However, there will be a reduction in his benefit pay-out amount in case the insured stays in a room type higher than the plan covered. In such a case, the benefit pay-out amount will be adjusted by multiplying the following factor:

$$= \frac{\text{Daily room charge of the semi-private room in which the insured stays at hospital}}{\text{Daily room charge of the room the insured stays}}$$

6. If the insured receives cancer treatment in the United States, the maximum benefit amount under Parts A to E and Part F (if applicable) in the benefits schedule for the charges incurred in the United States will be up to HK\$ 2,000,000 / MOP 2,000,000 / US\$ 250,000 per life for any and all covered cancer under all in-force and terminated policies of Cancer Guardian Series, Cancer Guardian 2 Series, Cancer Guardian 3 Series, Cancer Guardian Pearl Series, Cancer Guardian Pearl 2 Series, and Cancer Guardian Pearl 3 Series (including this policy), that covering the insured.

The plan's covered cancer limit and lifetime cancer limit remain unchanged for worldwide (excluding the United States).

7. If the eligible expenses have been reimbursed under any law, or medical program or other insurance policy provided by any government, company, other third party or us, such expenses will not be reimbursable by us under this policy.
8. All services under worldwide emergency assistance services are covered during the trip only (except that 24-hour worldwide telephone enquiring services are covered before and during the trip), which are additional benefits. A trip refers to a journey where the insured person departing abroad from either Hong Kong, Macau or Mainland China (of which the insured is the permanent resident at the time of departure). The services are provided by third party service provider(s). AIA shall not be responsible for any act, negligence or omission of medical advice, opinion, service or treatment on the part of them. AIA reserves the right to amend, suspend or terminate the service without further notice.

9. Credit Facility Service for Hospitalisation and Medical Expense Pre-approval Service are not contractual services and non-guaranteed, but the administrative arrangements offered in our absolute discretion. AIA reserves the right to amend, suspend or terminate the services without further notice.
10. The Personal Medical Case Management Services with Rehabilitation Management and Health Pilot are not contractual services and non-guaranteed, but the administrative arrangements offered in our absolute discretion. The services are provided by third party service provider(s). AIA shall not be responsible for any act, negligence or omission of medical advice, opinion, service or treatment on the part of them. AIA reserves the right to amend, suspend or terminate the services without further notice.

Claim Procedure



If you wish to make an enquiry on the eligibility of a claim, claimable amount estimate and reimbursement limit before undergoing a treatment or procedure, or our service pledge on the response time to such enquiries, please contact us via (853) 8988 1822 in Macau.

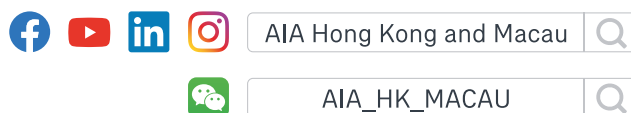
If you wish to make a claim, you must notify us in writing within 20 days of the date the covered event happened, and send us the appropriate forms and relevant proof within 90 days of the same date. You can get the appropriate claim forms from your financial planner, by calling the AIA Customer Hotline (853) 8988 1822 in Macau or by visiting any AIA Customer Service Centre. If you wish to know more about claim related matter, you may visit "File A Claim" section under our company website www.aia.com.hk.

Cancellation Right

You have the right to cancel and obtain a refund of any premiums paid by giving written notice to us. Such notice must be signed by you and submitted to the Customer Service Centre of AIA International Limited at Unit 201, 2F, AIA Tower, 251A-301 Avenida Comercial de Macau, Macau within 21 calendar days immediately following either the day of delivery of the policy or the Cooling-off Notice to you or your nominated representative, whichever is the earlier.

Please contact your financial planner or call AIA Customer Hotline for details

Macau  (853) 8988 1822
 aia.com.hk



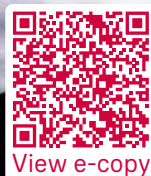


CANCER GUARDIAN 3 (CG3)

Brand-new approach for cancer protection

AIA Vitality

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HEALTHIER, LONGER,
BETTER LIVES



AIA International Limited

(Incorporated in Bermuda with limited liability)

Frequently Asked Questions About "Reasonable and Customary" Charges

Q1. How is the "Reasonable and Customary" charge determined?

The "Reasonable and Customary" charge refers to charges for the reimbursement benefit items including physician's visit fee, surgeon's fee and anaesthetist's fee. The "Reasonable and Customary" charge will be calculated based on the customer's admission room type as shown below:

| Item Charge | Based on "Reasonable and Customary" Reference Charge |
|-----------------------|---|
| Physician's Visit Fee | Equal to or less than the admission room charge |
| Surgeon's Fee | References the "List of Surgery Fees" published on the attending hospital's website |
| Anaesthetist's Fee | 35% of the Surgeon's fee |

Q2. How is the "Reasonable and Customary" charge determined if you're admitted to a lower room type than what is covered in the plan?

If you opt to be admitted to a lower room type than what is covered in the plan, we will reimburse eligible expenses subject to the "Reasonable and Customary" charge of your plan level chosen / covered room type. Examples are as follows:

| Plan Level Chosen / Covered Room Type | Customer's Admission Room Type | "Reasonable and Customary" Reference Charge |
|---------------------------------------|--------------------------------|---|
| Standard Private Room | Semi-Private Room or Ward Room | Standard Private Room |
| Semi-Private Room | Ward Room | Semi-Private Room |

Q3. How is the "Reasonable and Customary" charge determined if the billed surgeon's fee exceeds the "Reasonable and Customary" charge?

If the billed surgeon's fee exceeds the "Reasonable and Customary" charge, we will obtain hospital records and operation records from the attending hospital to determine the complexity of the surgery or any surgery complication resulting in the high surgeon's fee.

- If the records reveal the reason behind the high surgeon's fee, we will calculate the eligible surgeon's fee / anaesthetist's fee according to the billed amount.
- If the records do not reveal any reason behind the high surgeon's fee, we will adjust the eligible surgeon's fee / anaesthetist's fee according to the "Reasonable and Customary" charge.

Q4. Are there other factors that determine the "Reasonable and Customary" charge?

Other than the factors mentioned above, when we assess the claim, we will also check for a "List of Surgery Fees" on the website of the attending hospital.

- If it is available, we will use the "List of Surgery Fees" on the hospital's website to determine the "Reasonable and Customary" charge.
- If it is not available, we will use the "Reference Fee Table on Charges for Common Surgical Procedures" published within our Company to determine the "Reasonable and Customary" charge.

For more information, please refer to the "Reasonable and Customary" charge example outlined overleaf.

Frequently Asked Questions About "Reasonable and Customary" Charges

Q5. Where can I find information about the "Reasonable and Customary" charge in advance?

You can apply for the "Pre-approval Service" (applicable to products with this service), and will be informed of:

- whether the medical procedure / surgery will be covered;
- whether the physician's visit fees are reasonable; and
- what the eligible claim amount for the medical procedure / surgery will be under the policy.

This will help you understand and plan your treatment, so you can focus on getting better.

In case there are further queries on "Reasonable and Customary" charge, please contact your financial planner or call AIA Customer Hotline.

"Reasonable and Customary" Charge Example

(The following example is hypothetical and for illustration purposes only. If there are any changes in the values, no separate announcement will be made.)

Case Background

| | |
|-----------------------------|---|
| Reason for admission : | Breast Carcinoma-in-situ |
| Type of room : | Standard Private Room |
| Length of hospitalisation : | 5 days |
| Surgery : | Modified Radical Mastectomy |
| Total presented amount : | HK\$384,000 |
| Coverage : | A medical plan with full cover for major benefit items |

This insert contains general information and is for illustrative purpose only, and may include benefits/ benefit amounts that are not applicable to the relevant specific insurance products. For the details of the relevant specified insurance products, including its product features, terms and conditions, exclusions and key product risks, you may refer to the product brochure and policy contract of relevant products.

"Reasonable and Customary" Charge

| Benefit Items | The "Reasonable and Customary" Charge for Standard Private Room (HK\$) |
|--|--|
| Surgeon's Fee | 94,000 |
| Anaesthetist's Fee 35% of the Surgeon's Fee | 32,900 |

| Benefit Items | Presented Amount (HK\$) | Reimbursement Amount (adjusted to "Reasonable and Customary" Charge) (HK\$) |
|-----------------------|-------------------------|---|
| Room & Board | 19,500 | 19,500 |
| Physician's Visit | 19,500 | 19,500 |
| Hospital Expenses | 35,000 | 35,000 |
| Surgeon's Fee | 200,000 | 94,000 |
| Anaesthetist's Fee | 70,000 | 32,900 |
| Operating Theatre Fee | 40,000 | 40,000 |
| Total | 384,000 | 240,900 |

| | |
|--|---------|
| TOTAL Reimbursement Amount (HK\$) | 240,900 |
| Remaining Balance Not Reimbursed (HK\$) | 143,100 |

Note:

- All eligible claims will be reimbursed according to the benefit limits outlined in the benefit schedule. The eligible claim will be reimbursed on a medically necessary and reasonable and customary basis and subject to the terms, conditions, exclusions and limitations of the policy.

To understand the historical premium increase rates of our products, you may browse the website <https://www.aia.com.hk/en/our-products/further-product-information/macau-medical-products/medical.html> for reference purpose.

Please contact your financial planner or call AIA Customer Hotline for details

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