



AIA VOLUNTARY HEALTH INSURANCE STANDARD SCHEME (AVS)

Plan your family's healthy future



AIA Vitality

AIA International Limited
(Incorporated in Bermuda with limited liability)



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HEALTHIER, LONGER,
BETTER LIVES

While you are building a wonderful life

A proper medical plan can give you peace of mind

The AIA Voluntary Health Insurance Standard Scheme combines essential medical cover with guaranteed renewal to age 100, and no lifetime benefit limit, plus cover for unknown pre-existing conditions. This plan also offers a no-claims discount on premium up to 15% if you make no claim, plus an instant 10% premium discount for the first year for AIA Vitality members embarking on their healthy-living journey.

AIA Voluntary Health Insurance Standard Scheme is a Certified Plan under Voluntary Health Insurance Scheme (VHIS) with premiums that are eligible to be deducted from your annual taxable income. Taxpayer who is the policyholder can apply for a tax deduction[#] of up to HKD8,000 per insured person, which the insured person of the Certified Plan should be the taxpayer himself or any specified relatives*, in each assessment year, and there is no cap on the number of specified relatives*. This way, you can enjoy essential medical cover that meets your needs, with tax deduction benefits.

Cover at a glance

Type of the Certified Plan	Standard Plan
Name of the Certified Plan	AIA Voluntary Health Insurance Standard Scheme
Certification Number	S00013-01-000-02
Product Nature	Medical protection insurance plan (Reimbursement)
Plan Type	Basic plan and add-on plan
Insured Person's Age at Application	15 days to age 80
Guaranteed Renewal	Up to the insured person's age of 100
Premium Payment Mode	Basic plan: annually / semi-annually / quarterly / monthly Add-on plan: follow the corresponding basic plan
Geographical Cover	Worldwide (except for psychiatric treatments)
Lifetime Benefit Limit	Nil
Annual Benefit Limit	HKD420,000 per policy year
Core Benefits	<ul style="list-style-type: none"> • confinement benefits including room & board and attending doctor's visit fee, etc. • inpatient and day case procedure • prescribed diagnostic imaging tests • prescribed non-surgical cancer treatment • outpatient care before and after confinement or day case procedure
No Claim Discount	No claim in 3 or more consecutive policy years entitles you with a premium discount on the next policy anniversary, up to 15 % of the total premiums paid for the preceding policy year.

For more information, please read the "Benefit schedule for **AIA Voluntary Health Insurance Standard Scheme**" in this brochure.

[#] Tax deductions is one of the allowable deductions from assessable income, it does not equate to a direct deduction from total tax payable. For details of tax deductions, please visit Inland Revenue Department (IRD) of HKSAR website and consult your tax and accounting advisors for tax advice.

* Specified relatives are defined under Inland Revenue Ordinance (Chapter 112).

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



Government certified for your peace of mind

AIA Voluntary Health Insurance Standard Scheme is a **Certified Plan under the Voluntary Health Insurance Scheme (VHIS)**, which complies with the minimum requirements of the VHIS Standard Plan, helping you access private healthcare services for your essential needs while applying for tax deduction to enjoy tax benefit. Value-added tax (VAT) and goods and services tax (GST) incurred for medical services overseas are also covered. Because it is certified by the Health Bureau, you can trust in the level of protection you'll be receiving. For further details on VHIS, please visit www.vhis.gov.hk.



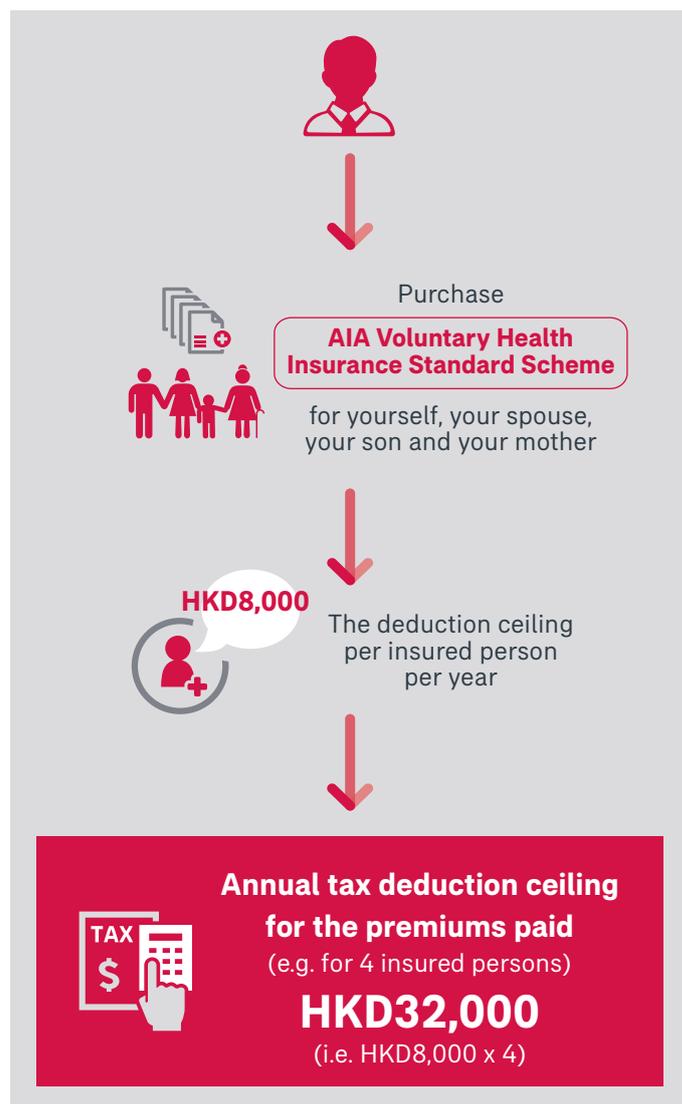
Protect your whole family and apply for a higher tax deduction amount

To help you budget smarter, the premiums you pay for **AIA Voluntary Health Insurance Standard Scheme** is eligible to be deducted from your annual taxable income. Taxpayer who is the policyholder can apply for a tax deduction of up to HKD8,000 per insured person, which the insured person of the Certified Plan should be the taxpayer himself or any specified relatives*, in each assessment year.

There is no cap on the number of specified relatives* that a taxpayer can use to claim tax deductions as long as all the policies are held by the same taxpayer and cover yourself and / or your specified relatives*. Specified relatives* include your spouse or child, or a parent, grandparent or sibling of you or your spouse.

In other words, if you take up **AIA Voluntary Health Insurance Standard Scheme** for yourself, your spouse, your son and your mother as an example (i.e. four insured persons) and pay the required premiums in the same tax assessment year, the annual tax deduction amount for you would be up to HKD32,000 (i.e. HKD8,000 x 4).

The illustration below shows the tax deduction amount you could claim if you were the policyholder for four insured persons, for example.



For details on tax deductions, please visit www.vhis.gov.hk and consult your own tax and accounting advisors for tax advice.



Guaranteed renewal up to age 100

AIA Voluntary Health Insurance Standard Scheme provides cover immediately right after the policy becomes effective and guarantees that your premium for renewal will not be raised for any claim you have made, or any changes in your health condition. You can renew your cover every year up to age 100. Renewal premium will be based on the prevailing premium rates at the time of renewal. (For details on the first year's premium, please refer to the Standard Premium Schedule provided by your financial planner, or available online through www.aia.com.hk and www.vhis.gov.hk.)

* Specified relatives are defined under Inland Revenue Ordinance (Chapter 112).



Steadfast protection with no lifetime benefit limit

AIA Voluntary Health Insurance Standard Scheme stays with you through the ups and downs of life. There is no lifetime benefit limit, so you won't have to worry about losing your protection in the future. You can make claims up to the annual benefit limit of HKD420,000. This limit replenishes each policy year, helping you get the treatment you need, again and again.



Cover on unknown pre-existing conditions

At present, pre-existing conditions unknown to insurance applicants are commonly excluded from benefit cover. However, you can trust in your protection under **AIA Voluntary Health Insurance Standard Scheme** even if you turn out to have a pre-existing condition that you were reasonably unaware of at the time of insurance application. This plan provides partial cover during a waiting period of 3 policy years upon policy inception and full cover from the 4th policy year onwards.

Policy Year	Protection for unknown pre-existing conditions
1st	0% cover
2nd	25% cover
3rd	50% cover
4th and onwards	100% cover

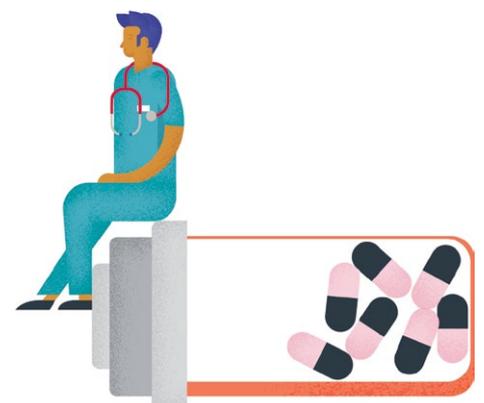


No claim discount

AIA believes in maintaining healthy living habits, and we encourage you to maintain yours by rewarding you with a no claim discount on premium, up to 15% of the total premium paid for the preceding cover year.

If no claim is made for 3 consecutive policy years or more, you will be eligible for this premium discount on the next policy anniversary. Please refer to the following table for no claim discount:

Claims Free Years	No Claim Discount
3 consecutive policy years	5%
4 consecutive policy years	10%
5 or more consecutive policy years	15%







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.



Access a high-quality medical network

Our medical network gives you exclusive access to quality medical services for greater peace of mind. It comprises carefully selected medical specialists with multi-disciplinary expertise, as well as advanced day case medical centres that are a safe and convenient alternative to hospitals.



With your electronic network surgery card, you can enjoy all the benefits offered under the plan’s medical network. Once this plan is in effect, you can book day case procedure at network clinics and day case procedure centres. The network doctor will apply for the medical expense pre-approval service on your behalf.

You can also enjoy the convenience of cashless hospitalisation (also known as Credit Facility Service for Hospitalisation), and a dedicated hotline for centralised booking.



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. 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. Any shortfall payment resulting from your hospital stay will be settled 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.



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Options to suit your needs

You have the option to take up **AIA Voluntary Health Insurance Standard Scheme** as either a stand-alone insurance plan or as an add-on plan of specified basic plans.

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 **AIA Voluntary Health Insurance Standard Scheme**. 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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Example

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

Policyholder and insured person:	Jonathan (age 35, non-smoker)
Occupation:	Teacher
Family status:	Married, 1 daughter
Current cover:	Employer's group medical plan



**Guaranteed
renewal up to
age 100**

Jonathan believes health is the most valuable asset. He wants protection for his family and himself against the financial difficulties when something unpredictable happens. He purchases **AIA Voluntary Health Insurance Standard Scheme** for himself, his wife and his daughter.

AIA Voluntary Health Insurance Standard Scheme offers essential medical protection at an affordable premium with flexibility to complement his employer's group medical plan and reduce the financial impact.

Insured person's age at policy application

Age 35

Age 40

Age 41



Purchasing AIA Voluntary Health Insurance Standard Scheme

Enjoying both **medical protection** and applying for **tax deductions**.



Jonathan has symptoms that might be from colon cancer, he is recommended for diagnostic tests.

Unfortunately, Jonathan is diagnosed with colon cancer. He is recommended for a partial laparoscopic colectomy. After surgery, Jonathan continues to receive non-surgical cancer treatments for recovery.

Estimated colon cancer diagnosis and treatment cost:

- Room and board: HKD10,500
- Surgeon's fee (category: complex), anaesthetist's fee and operating theatre charges: HKD99,350
- Prescribed diagnostic imaging tests[^]: HKD30,470
- Prescribed non-surgical cancer treatments: HKD75,000
- Miscellaneous charges: HKD31,588

Total fees: HKD246,908

With **AIA Voluntary Health Insurance Standard Scheme**, the **claimable amount is HKD210,140**, protecting Jonathan against financial burdens. Jonathan only has to pay a non-claimable amount of HKD36,768.



Jonathan continues to receive non-surgical cancer treatment and is fully recovered.

Estimated cost:

- Prescribed non-surgical cancer treatments: HKD75,000
- Post-confinement outpatient care: HKD7,740

Total fees: HKD82,740

With **AIA Voluntary Health Insurance Standard Scheme**, **total claimable amount is HKD76,740**, Jonathan is well protected on the road to recovery.

Note: Case assumption - Policy anniversary date and date of birth of insured person is 1st January.

- With **AIA Voluntary Health Insurance Standard Scheme**, Jonathan may choose to access private healthcare services for essential medical needs.
- Prescribed non-surgical cancer treatments claim is based on per policy year, Jonathan can continue to receive treatment to ensure his peace of mind.

[^] Prescribed diagnostic imaging tests are subject to 30% coinsurance.

Source of Information: The information is extracted from AIA's Research of Cancer and Medical Expenses by GfK Hong Kong, an independent market research company. (Dated March 2019) - Fees and charges from Union Hospital, Hong Kong Sanatorium & Hospital, St. Paul's Hospital, Gleneagles Hong Kong Hospital, St. Teresa's Hospital, Precious Blood Hospital (Caritas), The Government of Hong Kong Special Administrative Region Press Release, Hong Kong Cancer Fund, ESDLife, and Hong Kong Education City Limited.

This document is based on publicly available information and you shall refer to the source of information at the footnote of this document. The purpose of this document is for reference only and shall not be construed as tax advice nor is this document intended to constitute any professional advice, view, attitude, position or opinion provided by AIA. AIA expressly disclaims all warranties of any kind and fitness for a particular purpose in connection with the information contained in this document. AIA do not accept, assume or undertake any legal responsibility to any person or entity for any loss or damage of whatever nature (direct, indirect, consequential or otherwise) whether arising in contract, tort or otherwise, from the use of or reliance on the information contained in this document. AIA does not provide tax or accounting advice and you should consult your own tax and accounting advisors for any tax advice.

Benefit schedule for AIA Voluntary Health Insurance Standard Scheme



Recommendation by attending doctor or registered medical practitioner in writing is required.

Overview

Lifetime benefit limit Applies to items (a) - (l)	Nil
Annual benefit limit Applies to items (a) - (l)	HKD420,000 per policy year
Geographical cover	Worldwide (except for psychiatric treatments)

Core Benefit

Benefit item ¹	Benefit limit
	HKD
a. Room and board (per day)	750 Maximum 180 days per policy year
b. Miscellaneous charges (per policy year)	14,000
c. Attending doctor's visit fee (per day)	750 Maximum 180 days per policy year
 d. Specialist's fee² (per policy year)	4,300
e. Intensive care (per day)	3,500 Maximum 25 days per policy year
f. Surgeon's fee (per surgery) Surgical Procedure of AIA Voluntary Health Insurance Standard Scheme  Subject to surgical category for the surgery / procedure in the schedule of surgical procedures. You may browse the website to understand surgical procedure for reference purpose: https://www.aia.com.hk/content/dam/hk/en/pdf/product-brochure/individuals/vhis-standard/AVS_surgical_procedure_en.pdf	Complex: 50,000 Major: 25,000 Intermediate: 12,500 Minor: 5,000
g. Anaesthetist's fee	35% of surgeon's fee payable ⁵
h. Operating theatre charges	35% of surgeon's fee payable ⁵
 i. Prescribed diagnostic imaging tests^{2,3} (per policy year)	20,000 subject to 30% coinsurance ⁶
j. Prescribed non-surgical cancer treatments⁴ (per policy year)	80,000
 k. Pre- and post-confinement / day case procedure outpatient care² (per visit)	580 up to HKD3,000 per policy year <ul style="list-style-type: none"> • 1 prior outpatient visit or emergency consultation per confinement / day case procedure • 3 follow-up outpatient visits per confinement / day case procedure (within 90 days after discharge from hospital or completion of day case procedure)
l. Psychiatric treatments (per policy year)	30,000



Benefit schedule for AIA Voluntary Health Insurance Standard Scheme (continued)

 Recommendation by attending doctor or registered medical practitioner in writing is required.

Other Benefit

Benefit Item ¹	Benefit Limit
	HKD
Compassionate death benefit	8,800

Notes:

1. Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above. All benefits are not subject to any restriction in the choice of ward class.
2. We shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or registered medical practitioner.
3. Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
4. Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
5. The percentage here applies to the Surgeon's fee actually payable or the benefit limit for the Surgeon's fee according to the surgical categorisation, whichever is the lower.
6. Coinsurance is a percentage of eligible expenses that you need to pay. For example, for the eligible expenses of HKD10,000 with 30% coinsurance, you are responsible for HKD3,000 (i.e. 30% of eligible expenses), while we pay the remaining HKD7,000 (i.e. 70% of eligible expenses).



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 Hong Kong only.

Key Product Risks

1. You need to pay the premium for this plan until the age of 100 as long as you renew for this plan. If you do not pay the premium within 30 days of the premium due date, the policy will be terminated and you / the insured person 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 person will lose the cover when one of the following happens:
 - the insured person passes away;
 - you do not pay the premium within 30 days after the premium due date;
 - the Company has ceased to have the requisite authorization under the Insurance Ordinance to write or continue to write the plan; or
 - when taking this plan as an add-on plan of any basic plan which has been terminated. For continuation of the cover, you may apply to convert this add-on plan to a standalone plan by giving us a written notice.
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 person may lose his cover and you may lose the remaining premium for that policy year.
4. 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.

Key Exclusions

Under this plan, we will not pay any benefits in relation to or arising from the following expenses:

- treatments, procedures, medications, tests or services which are not medically necessary
- solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy
- HIV and its related disability, which is contracted or occurs before the policy effective date, except for sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth
- the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae
- services for beautification or cosmetic purposes, unless necessitated by injury caused by an accident, or correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to LASIK
- prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions
- dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident
- medical services and counselling services relating to maternity conditions and its complications, including but not limited to abortion or miscarriage, birth control or reversal of birth control
- purchase of durable medical equipment or appliances including but not limited to wheelchairs, hearing aids and over-the-counter drugs
- traditional Chinese medicine treatment including but not limited to herbal treatment, bone-setting and acupuncture, and other forms of alternative treatment including but not limited to qigong, massage therapy and aromatherapy
- experimental or unproven medical technology or procedure
- congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of 8 years
- eligible expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party
- war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power

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 terms and benefits upon renewal by giving a 30 days advance notice. As long as we maintain the registration as a VHIS provider, we guarantee you the terms and benefits will not be less favourable than the latest version of the Standard Plan terms and benefits published by the Government at the time of renewal.

We will give you a written notice of any revision 30 days before the end of policy year or upon renewal.

Benefits Covered

Cover of this plan will be effective on the following dates:

Items	Effective Date (after the policy commences)
Injury	Immediately
Sickness / Disease	Immediately
Network Service	Immediately

Effective from 1 January 2018, all policy owners are required to pay a levy on each premium payment made for both new and in-force Hong Kong policies to the Insurance Authority (IA). For levy details, please visit our website at www.aia.com.hk/useful-information-ia-en or IA's website at www.ia.org.hk.

Product Limitation

1. We only cover the charges and / or expenses of the insured person on medically necessary and reasonable and customary basis.

"Medically necessary" means the need to have medical service for the purpose of investigating or treating the relevant disability in accordance with the generally accepted standards of medical practice and such medical service must:

- require the expertise of, or be referred by, a registered medical practitioner;
- be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
- be rendered in accordance with standards of good and prudent medical practice, and not be rendered primarily for the convenience or the comfort of the insured person, his family, caretaker or the attending registered medical practitioner;
- be rendered in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- be furnished at the most appropriate level which, in the prudent professional judgment of the attending registered medical practitioner, can be safely and effectively provided to the insured person.

"Reasonable and customary" means in relation to a charge for medical service, such level which does not exceed the general range of charges being charged by the relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar age, for a similar disability, as reasonably determined by us in utmost good faith. The reasonable and customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is reasonable and customary, we shall make reference to the followings (if applicable):

- treatment or service fee statistics and surveys in the insurance or medical industry;
- internal or industry claim statistics;
- gazette published by the government; and / or
- other pertinent source of reference in the locality where the treatments, services or supplies are provided.

2. The maximum limit of surgeon's fee per surgery is subject to the relevant surgical category and the categorisation of such surgical procedure.
3. Only the eligible expenses charged on the psychiatric treatments during confinement in Hong Kong as recommended by a specialist is payable under psychiatric treatments (see benefit schedule item (I)).
4. 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 will not be reimbursable by us under this policy.
5. Medical network services, Credit Facility Service for Hospitalisation, and Medical Expense Pre-approval Service are additional benefits and do not form part of the VHIS Certified Plan. Medical network services are provided by network doctor. AIA shall not be responsible for any act or omission of network doctor in the provision of medical network services. Credit Facility Service for Hospitalisation is provided by third party service provider(s). AIA reserves the right to amend, suspend or terminate these services without further notice.

Claim Procedure

If you wish to make a claim, you must send us the appropriate forms and proofs within 90 days after discharge from hospital or the date on which relevant medical services are performed and completed. You can get the appropriate claim forms from your financial planner, by calling the AIA Customer Hotline (852) 2232 8888 in Hong Kong, 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 the policy and obtain a refund of any premiums and any levy 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 12/F, AIA Tower, 183 Electric Road, North Point, Hong Kong within 21 calendar days immediately following either the day of delivery of the policy or the Cooling-off Notice to Policyholder or Policyholder's nominated representative, whichever is earlier. After the cooling-off period, you can request cancellation of this policy by giving 30 days prior written notice to us, provided that there has been no benefit payment under this policy during the relevant policy year.

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

Hong Kong  (852) 2232 8888
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