

GROUP INSURANCE – MEDICAL PROTECTION
PROTECT

PRIMARY PROTECTION FOR YOUR EMPLOYEES

Covers life, accident, hospitalisation and network outpatient benefits plus worldwide emergency assistance services, giving the most essential medical protection to your employees and their families.



AIA Corporate Solutions
— Your Pension and Group Insurance Partner



**HEALTHIER, LONGER,
BETTER LIVES**

Having an excellent team is one of the key factors to running a successful business

To attract and retain talents, you can offer your employees essential medical protection, enhancing the sense of belonging and morale of the team.

Protect is designed for small to medium-sized enterprises (SMEs) with a minimum of 3 employees.

With comprehensive life, accident, hospitalisation, network outpatient benefits and worldwide emergency assistance services, it can help your employees cope with medical expenses. In addition, by just presenting their HealthCard and paying a small amount of copayment, insured members can receive quality outpatient services at our network clinics, and no subsequent claim is needed. You can therefore provide the most essential protection for your valuable employees with ease.

Cover at a glance

Product Nature	Medical protection insurance plan (Reimbursement)	
Plan Type	Basic plan	
Issue Age	Employee / Spouse	Unmarried children
	Age 64 or below	2 weeks to age 18, or up to age 22 for full-time students
Protection up to Age	Age 64	Age 18, or up to age 22 for full-time students
Eligibility	<ul style="list-style-type: none"> • Applicable to the employer with 3 to 19 full-time employees • If the plan includes family protection, all eligible family members of the employee must join the same plan as the employee 	
Medical Underwriting	No medical underwriting requirement	
Plan Option	<ul style="list-style-type: none"> • Plan 1 Death benefit: Maximum benefit HK\$50,000 Accidental death and disablement benefit: Sum assured HK\$150,000 • Plan 2 Death benefit: Maximum benefit HK\$80,000 Accidental death and disablement benefit: Sum assured HK\$250,000 	
Core Benefits	<ul style="list-style-type: none"> • Life and accident benefits (for insured employees only) • Daily hospital income benefit • Surgical benefit, including day surgeries • Network outpatient benefits • Worldwide emergency assistance services 	

For more information, please read the “Benefits schedule for **Protect**” in this brochure.



Simple application

SMEs with 3 full-time employees or above can apply for this plan. No medical underwriting is required. Furthermore, the waiting period is waived under this plan, enabling employees to get their protection instantly and easily.



Cover for pre-existing conditions

If insured members have been covered for 12 continuous months under this plan, the pre-existing conditions they have will be covered under this plan, enhancing their medical protection.



Comprehensive protection for 5 major areas

The plan covers 5 major areas, including life, accident, hospitalisation, network outpatient benefits and worldwide emergency assistance services for just an affordable premium, allowing you to provide comprehensive medical protection for your employees with minimum financial burden.



Flexible hospitalisation and surgical benefits

The plan has no minimum hours of confinement in the hospital, and also covers day surgery, which is common nowadays. Employees can therefore choose the most suitable medical solution flexibly according to their doctors' advices and their needs.



High-quality and convenient network outpatient services

We have carefully selected medical service providers from different specialties to form the AIA medical network. Simply by presenting the HealthCard at network clinics and paying a small amount of copayment, insured members can access network outpatient services conveniently without the need to file a subsequent claim.



Benefits schedule for PROTECT

Benefit items are reimbursed on a “medically necessary” basis (except life and accident benefits). For more information, please refer to point 1 of the “Product Limitation” section under “Important Information”.



Core Benefits

	Maximum Benefit (HK\$)	
Plan	Plan 1	Plan 2
Geographic Cover	Worldwide	
I. Life Insurance Benefit		
Death benefit <ul style="list-style-type: none">Payable if the death of the insured employee occurs while the policy is in effectApplicable to insured employees only	50,000	80,000
II. Accident Insurance Benefits		
Accidental death and disablement benefit (Sum Assured) <ul style="list-style-type: none">Payable if any of the injuries, which is caused solely by accident, covered in the benefits schedule for the accidental death and disablement benefit occurs within 12 months of an accident involving the insured employee, up to the percentage listed in the benefits schedule (as the case may be).Applicable to insured employees only	150,000	250,000
III. Daily Hospital Income and Surgical Benefits		
1. Hospital income benefit (per day)	500	800
	Maximum 90 days per disability	
2. Surgical benefit (inpatient and day surgeries) (per disability) Including surgeon's fee & actual charges of surgical supplies	3,000	5,000
- Increased overseas surgical benefit (due to accident) (per disability) <ul style="list-style-type: none">Benefit limit under Part III Item 2 is doubled for surgery during a hospitalisation due to an accident while the insured member is travelling overseasNot applicable to the PRC (including Hong Kong SAR and Macau SAR)	Up to 200% of surgical benefit payable	
IV. Worldwide Emergency Assistance Services		
a. Emergency medical evacuation	100%	
b. Repatriation of remains	100%	
c. Worldwide hospitalisation deposit guarantee	Maximum 60,000 (per trip)	
d. Compassionate visit by one immediate family member (if the insured member is hospitalised for more than 7 consecutive days) <ul style="list-style-type: none">Return air ticket (economy class)Visitor's accommodation expenses	Included Maximum 12,000 (per trip)	
e. Return of children (under 18 years of age) to the place of residence (if the insured member is hospitalised and the children under 18 are travelling with the insured member and are left unattended) <ul style="list-style-type: none">One-way air ticket (economy class)Qualified escort when necessary	Included Included	
f. Overseas medical monitoring & repatriation after discharge from overseas hospitalisation	Included	
g. Hotel room accommodation for convalescence	Maximum 2,000 per day (maximum 5 days) (per trip)	

Core Benefits (continued)



Recommendation by a registered doctor in writing is required.

	Maximum Benefit (HK\$)	
Plan	Plan 1	Plan 2
Geographic Cover	Hong Kong	
V. Network Outpatient Benefits		
1. Outpatient consultation by a general doctor (per visit) <ul style="list-style-type: none">Including 3 days' basic medicationMaximum 1 visit per day	Copayment* 50 30 visits per policy year	Copayment* 30 30 visits per policy year
 2. Outpatient consultation by a specialist (per visit) <ul style="list-style-type: none">Including 5 days' basic medicationMaximum 1 visit per day	Copayment* 100 10 visits per policy year	Copayment* 60 10 visits per policy year
3. Chinese herbal medicine and bone-setting (per visit) <ul style="list-style-type: none">Including 2 days' basic medicationMaximum 1 visit per day	Copayment* 50 5 visits per policy year	Copayment* 30 5 visits per policy year
 4. Basic diagnostic testing (per visit) <ul style="list-style-type: none">Referral by a network doctor is required	20% of the actual charge as Copayment* 500 per policy year	20% of the actual charge as Copayment* 1,000 per policy year

* Copayment shall mean a fixed amount or a percentage of the actual charge that the insured member must pay for the network outpatient benefits as specified in the above benefits schedule directly to the relevant network provider either after received medical services or when billed by such network provider (whichever is applicable). For example, for the actual charge of HK\$500 with 20% of the actual charge as copayment, the insured member is responsible for HK\$100 (i.e. 20% of the actual charge), while we pay for the remaining HK\$400 to the network provider (i.e. 80% of the actual charge). For network outpatient benefit with copayment of HK\$50, the insured member is responsible to pay HK\$50 to the relevant network provider directly.

Benefits schedule for the accidental death & disablement benefit

Injury	% of Sum Assured
1. Loss of life	100%
2. Permanent total loss of sight of both eyes / one eye	100%
3. Loss of or the permanent total loss of use of two limbs / one limb	100%
4. Loss of speech and hearing	100%
5. Permanent and incurable insanity	100%
6. Permanent and incurable paralysis of all limbs	100%
7. Permanent total loss of hearing in	
a. both ears	75%
b. one ear	25%
8. Loss of speech	50%
9. Permanent total loss of the lens of one eye	50%
10. Loss of or the permanent total loss of use of four fingers and thumb of	
a. right hand	70%
b. left hand	50%
11. Loss of or the permanent total loss of use of four fingers of	
a. right hand	40%
b. left hand	30%
12. Loss of or the permanent total loss of use of one thumb	
a. both right phalanges / one right phalanx	30% / 15%
b. both left phalanges / one left phalanx	20% / 10%
13. Loss of or the permanent total loss of use of fingers	
a. three right phalanges / two right phalanges / one right phalanx	10% / 7.5% / 5%
b. three left phalanges / two left phalanges / one left phalanx	7.5% / 5% / 2%
14. Loss of or the permanent total loss of use of toes	
a. all – both feet	15%
b. great – both phalanges	5%
c. great – one phalanx	3%
d. other than great, each toe	1%
15. Fractured leg or patella with established non-union	10%
16. Shortening of leg by at least 5cm	7.5%
17. Third degree burns (full thickness skin destruction) covering 25% or more of total body surface area	100%

If the insured employee is left-handed, the percentage for the disablements of right hand and left hand listed in the benefits schedule will be transposed.





Conditions

Eligibility

Number of employees

- The company must have 3 to 19 full-time employees

Age of employees

- Full-time employees: age 64 or below

Age of employees' dependants

- Spouse: age 64 or below
- Unmarried dependant children: from the age of 2 weeks to 18 years; full-time students are eligible up to the age of 22 (proof of full-time education is required).

Participation guidelines

- All eligible employees of the company must join the plan.
- Employees of the same class must join the same plan.
- If the plan includes family protection, all eligible family members of the employee must join the same plan as the employee.

Excluded industry / organisation

This plan is not applicable to the below industries / organisations:

1. Group where other than a single employer or employee relationship exists
2. Group where eligible employees include seasonal, unskilled, part-time or transient workers
3. Association of individuals or companies
4. Bus, taxi or truck driver (Risks involved with driving in mainland China will be excluded)
5. Construction group
6. Labour union
7. Hospital / doctor / nurse / medical or clinic group
8. Political or religious group
9. Sports team
10. Underground mine worker
11. Farmer / agriculture / animal processing
12. Employee leasing firm or temporary agency
13. Window and / or industrial cleaning service
14. Spa, Turkish bath, massage parlor, gymnasium, health resort or similar enterprises
15. Theatre, amusement park, dance hall, billiard parlor, and bowling alley or sports promoter
16. Group which involves special hazards / risks
 - a) Commercial airline personnel
 - b) Nuclear power or chemical production plant
 - c) Police or security officer
 - d) Fireman
 - e) Manufacturer or user of ammunition or explosive
 - f) Military and military related group
 - g) Collective traveling group (e.g. Professional sports team, air crew, offshore worker, oil rig worker, ship crew, diver or driller (oil, water, underground coal), underground miner)

How to apply

Please submit the following completed and signed documents:

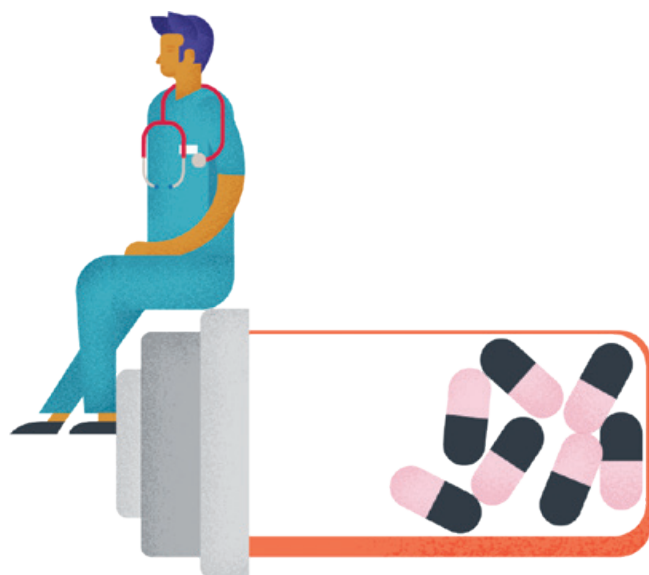
1. Application form
2. Data form of proposed insured members
3. Photocopy of Hong Kong Business Registration Certificate
4. Cheque for the first year's premium and levy, payable to "AIA International Limited"
5. Documents required by "The Guideline on Anti-Money Laundering and Counter-Terrorist Financing"



The policy will be effective on the date when we receive all the required documents or any subsequent date as specified by the policyholder, whichever is later.



Our representative will deliver the group policy document to the successful applicant.





Important Information

1. *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.
2. This plan is an insurance plan without any savings element. All premiums are paid for the insurance and related costs.
3. Insured members refer to the insured employees and their insured family members (if applicable).
4. If the plan includes family protection, the benefits mentioned in this product brochure for employees apply to their dependants as well (excluding life and accident benefits).

Key Product Risks

1. You need to pay the premium for this plan upon renewal every year.
2. The insured member will lose the cover when the following happens:
 - the insured member passes away.
3. You may request for the termination of your policy by notifying us in written notice. Also, we will terminate your policy and all the insured members will lose their cover when one of the following happens:
 - you do not pay the premium within 31 days of the premium due date;
 - the number of insured full-time employees falls below 3;
 - the nature of the company's business changes to another nature that we shall cease to provide cover. For the latest list of the excluded industries / organisations, please visit our website aia.com.hk; or
 - the company provides incorrect information or is unable to disclose important information regarding the insured members.
4. The insured member may lose the cover when he or she no longer resides in Hong Kong.
5. We reserve the right to terminate your policy and all the insured members will lose their cover when the company transfers to operate out of Hong Kong.
6. Cover renewal is based on the continuing availability of the plan to all existing policies.
7. 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 members may lose the cover and you may lose the remaining premium and levy for that policy year.

8. 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.
9. Your current planned benefit may not be sufficient to meet the future needs of the insured members since the future cost of living may become higher than they are today due to inflation. Where the actual rate of inflation is higher than expected, the insured members may receive less in real terms even if we meet all of our contractual obligations.

General Exclusions

Under this plan, we will not cover conditions that result from any of the following events:

All benefits exclusions

1. Any benefit not available under an insured member's plan or charges exceeding the limits specified in the benefits schedule.
2. Any claim arising directly or indirectly as a result of HIV / AIDS.

Life benefit exclusions

1. Any pre-existing condition, which directly or indirectly, wholly or partly, caused the death of the insured employee, unless the insured employee affected by such condition has been covered under this policy continuously for 12 months.
2. Suicide, whether while sane or insane, within 1 year from the effective date of the insured employee's cover. In such event, AIA's liability shall be limited to a refund of the total premiums paid for the life insurance coverage for the insured employee. (For any subsequent increase in life insurance coverage within 1 year from the effective date of the increase in coverage, AIA's liability in respect of the increase in cover shall be limited to a refund of the total premiums paid in respect of such increase for the insured employee.)

Accident benefits exclusions

1. Suicide, self-inflicted injuries or any attempt thereof, while sane or insane.
2. War, declared or undeclared, revolution or any warlike operations.
3. Riot and civil commotion, strikes or terrorist activities.
4. Violation or attempted violation of the law or resistance to arrest.
5. Entering, operating or serving, riding in or on, ascending or descending from or with any aerial device, or conveyance except while the insured employee is a fare-paying passenger in an aircraft operated by a commercial passenger airline on a regular scheduled passenger trip over its established passenger route.
6. Racing on horse or wheels.

Medical benefits exclusions

Medical benefits include hospital income and surgical benefits, network outpatient benefits and worldwide emergency assistance services.

1. Pre-existing conditions for which the insured member showed symptoms or received medical treatment, diagnosis, consultation or prescribed drugs within the 12 months preceding the effective date of the policy, unless the insured member has been insured under the policy continuously for 12 months.

2. Investigation and treatment of psychological, emotional, mental or behavioral conditions; alcoholism or drug addiction; rest cure or sanatoria care; treatment of an optional nature; intentionally self-inflicted injuries while sane or insane.
 3. Injuries arising directly or indirectly from war, declared or undeclared.
 4. Special nursing care; general physical or medical check-up or tests that are not incidental to treatment or diagnosis of an actual sickness or injury, or not medically necessary; immunisation, vaccination or inoculation.
 5. Procurement or use of any special braces, appliances, equipment, prosthetic devices, implants, contact lenses, eye glasses, hearing aids or the fitting of the same and non-medical services such as television, telephone and the like.
 6. Any dental or eye examination / treatment, surgical procedure for correction of eye refraction, cosmetic procedures or plastic surgery, unless such surgery is necessary for the repair of damage caused solely by accidental injury covered under the policy.
 7. Any investigation, treatment or surgery for congenital defect that gives rise to signs or symptoms, or is diagnosed, before the insured member reaches the age of 17.
 8. Birth control measures, investigation or treatment pertaining to infertility, genetic testing or counseling, treatment occasioned by or resulting from pregnancy, childbirth or abortion.
 9. Non-medically necessary health services.
 10. Experimental, investigational or unproven services unless authorised by the Company.
 11. Services and supplies for smoking cessation programmes and the treatment of nicotine addiction.
 12. Services rendered by a doctor, Surgeon or Chinese Medicine Practitioner (whether legally registered or not) with the same legal residence as the insured member, or is his family member, including spouse, brother, sister, parent or child; or services delivered by an agent of the Company.
 13. Acupuncture, tui na, hypnotism, massage therapy, aroma therapy, and other forms of alternative treatments.
 14. Clinical home care, custodial care in any setting, day care, hospice, private duty nursing or respite care unless prior approval is obtained from the Company.
 15. Other education services such as speech improvement, diabetic classes and nutritional services, or group support services.
- Additional network outpatient benefits exclusions**
1. Treatment arising from infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy.
 2. Charges related to birth control or sterilisation of either sex.
 3. Pregnancy and all matters related to pregnancy, childbirth, abortion or miscarriage.
 4. Accommodation, nursing and services received in health hydro, nature cure clinics, convalescent homes, rest home or similar establishments.
 5. Treatment arising from the abuse of drugs or alcohol.
 6. Treatment arising from self-inflicted injuries, whether sane or insane.
 7. Treatment arising from sexually transmitted diseases.
 8. Treatment arising from Human Immunodeficiency Virus Infection.
 9. Treatment for congenital abnormalities and complications arising from congenital abnormalities.
 10. Treatment arising from any psychogeriatric or psychiatric condition, including but not limited to psychoses, neuroses, depression, anxiety, anorexia nervosa, schizophrenia, behavioral disorders etc.
 11. Treatment arising from sexual dysfunction including but not limited to impotence, erectile dysfunction, pre-mature ejaculation, regardless of cause.
 12. Charges for blood or blood plasma.
 13. Treatment arising from war, invasion, acts of foreign enemies, hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection or military or usurped power; or racing on horses or wheels or any form of powered water sports.
 14. Procurement or use of special braces, appliances, spectacles, hearing aids, wheelchairs, crutches or other equipment.
 15. Cosmetic surgery or treatment for cosmetic purpose such as consultation for Acne Vulgaris, weight problem, hair loss etc.
 16. Routine eye or hearing tests, routine or screening blood test, general check-ups, vaccination or inoculations.
 17. Correction of vision or eye refraction error such as myopia, hyperopia, presbyopia.
 18. Dental treatment unless necessitated by accidental injury to healthy teeth.
 19. Routine physical examinations and investigations.
 20. X-ray using contrast media such as Ba Meal, intravenous pyelogram etc.; advanced imaging including but not limited to computerised axial tomography scan, magnetic resonance imaging scan, positron emission tomography scan, and investigations involving radioactive substances.
 21. Radiotherapy and chemotherapy.
 22. Chronic illness; any diseases and disorders, with or without signs and symptoms, that persists for more than 6 months and requires regular medical attention, including but not limited to:

• AIDS	• Chronic Hepatitis	• Hyperthyroidism
• Allergic Rhinitis	• Coronary Heart Disease	• Hypothyroidism
• Alzheimer's Disease	• Diabetes Mellitus	• Arthritis
• Mental Illness & Psychiatric Disorder		• Asthma
• Gout	• Onychomycosis	• Cancer
• Heart Disease	• Parkinson's Disease	• Chronic Bronchitis
• Heart Failure	• Psoriasis	• Chronic Eczema
• Hyperlipidemia	• Renal Failure	
• Hypertension	• Systemic Lupus Erythematosus	

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

Effective from 1 January 2018, all policyholders 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.

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;
- 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 the policyholder a written notice of any revision before any policy anniversary or upon renewal.

Product Limitation

1. We only cover the charges or expenses of the insured member which are "medically necessary".

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

- necessary to meet the basic health needs of the insured member;
- consistent with the diagnosis of the condition;
- provided in the most cost-effective manner; and type of setting appropriate for the delivery of the health service; and of demonstrated medical value; and
- required for reasons other than the convenience of the insured member or his physician.

Experimental, screening, and preventive services or supplies are not considered medically necessary. We may adjust any and all benefits payable in relation to any hospital / medical charges which is not a medically necessary charge.

2. **Protect** is applicable to companies with 3 to 19 proposed employees. For companies with 20 or more proposed employees, a tailor-made proposal can be provided upon request.

3. Worldwide emergency assistance services are covered during the trip only (except for 24-hour worldwide telephone enquiring services), which are additional benefits. 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.
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. Network outpatient 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. AIA reserves the right to amend, suspend or terminate these services without further notice.

Claim Procedure

If any of the insured members wishes to make a claim, he / she must send us the appropriate form and relevant proof within 90 days of the date the covered event happened. The appropriate claim form can be downloaded from our website: aia.com.hk or obtained from the financial planner. 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 by giving no less than 31 days' prior written notice to us, however this will result in the insured member losing his cover and you losing the remaining premium and levy for that policy year. We also reserve the right to cancel the policy upon the policy renewal by giving you no less than 31 days' prior written notice.

Please contact your financial planner or call our hotline for details

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AIA Hong Kong and Macau



AIA_HK_MACAU



Information about the Insurance Authority Collecting Levy on Insurance Premiums

Collection of levy on insurance premiums from policyholder by the Insurance Authority (effective 1 January 2018)

Background

The Insurance Authority ("IA") has replaced the Office of the Commissioner of Insurance to regulate insurance companies since 26 June 2017. Under this new regulatory regime, with the gazette of the Insurance (Levy) Order ("the Order") and the Insurance (Levy) Regulation ("the Regulation"), all new and in-force policies underwritten in Hong Kong are subject to levy, effective 1 January 2018.

The statutory requirement on levy

- All in-force policies are subject to levy with policy anniversary date on or after 1 January 2018.
- Levy payable is calculated as a percentage of premiums and shall be paid by policyholders along with premiums. Levy rates and the maximum levy are prescribed by the Order as below, which shall apply throughout the policy year.

Policy Effective Date or Policy Anniversary Date	Levy Rate	Maximum Levy (HK\$)	
		General Business*	Long Term Business [#]
From 1 January 2018 to 31 March 2019 (both dates inclusive)	0.04%	2,000	40
From 1 April 2019 to 31 March 2020 (both dates inclusive)	0.06%	3,000	60
From 1 April 2020 to 31 March 2021 (both dates inclusive)	0.085%	4,250	85
From 1 April 2021 onwards (inclusive of that date)	0.1%	5,000	100

* Group medical policies and group life policies with medical protection or with benefits covering sickness will be subject to the maximum levy for "General Business".

[#] Pure group life policies and group life policies with Accidental Death & Disablement riders will be subject to the maximum levy for "Long Term Business".

- Different levy rates and maximums will apply, depending on the policy effective date or anniversary date. The prescribed levy will be subject to change from time to time.
- The actual levy payable will always be subject to the final confirmation of the policy effective date and the exact premiums of the policy. The final amount will be confirmed and listed in our Levy Invoice.

If you have further questions on levy, please visit our website at www.aia.com.hk or IA's website at www.ia.org.hk.

