

HEALTH JOURNEY GUARDIAN (HJG)

Pioneering cover for your entire health journey



AIA Vitality

AIA International Limited (Incorporated in Bermuda with limited liability)





HEALTH JOURNEY GUARDIAN

As you focus more on your health, you need the right companion for total support

Extensive protection throughout your entire health journey for your extra peace of mind

Most medical plans only focus on relieving your financial burdens upon the diagnosis or treatment of your medical need. Health Journey Guardian covers you all the way from prevention to recovery, including outpatient benefits, cancer benefits, rehabilitation and hospice care benefits and wellness assessments for different stages of your life to ensure your overall well-being.

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

Plan Highlights



Outpatient benefits

including up to 30 outpatient visits per policy year, with a quality medical network



Hospice care benefits

including first-in-market cover for at-home hospice care



Cancer benefits

including diagnosis, cancer treatments and monitoring benefits; 3 plan options available



Lifestage benefits

including complimentary medical check-up services and a series of wellness assessments



Rehabilitation benefits

including first-in-market cover for at-home recovery



Value-added medical services

including personal medical case management services with rehabilitation management

* As of 1 December 2021, comparing with comprehensive medical products provided by Hong Kong major insurance companies.





Outpatient benefits with access to a quality medical network in Hong Kong



Cancer care benefits for extra peace of mind

First in the market



Rehabilitation and hospice care benefits with at-home option



Lifestage benefits to protect your needs at different ages



Lifetime guaranteed renewal



Flexibility to suit your needs

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.



Personal medical case management services with rehabilitation management

If you are unfortunately diagnosed with a serious illness, our designated service provider will get you the medical support you need and tailor a personalised treatment and rehabilitation plan for you.

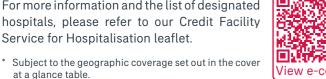
Your diagnosis and treatment will be assessed by a specialist, so you can count on additional medical expertise to overcome your health challenges with confidence.



Hassle-free medical payments at home and overseas

Should you face a health challenge, especially in a foreign country, you can enjoy the total convenience of cashless hospitalisation with AIA. This service extends to designated private hospitals* in Asia, including Singapore, Malaysia and Thailand, as well as the US and Europe. Upon approval, you can simply focus on your recovery without the stress of paying hospital bills and making subsequent claims. Any shortfall 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.



at a glance table.



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.



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 Health Journey Guardian. 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.





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 80				
Guaranteed Renewal	Whole life				
Geographical Cover	Worldwide (except for outpatient benefits, hospital cash benefit, benefits for psychiatric and psychological consultation and treatments, and worldwide emergency assistance services)				
Plan Option	Ward plan				
	Semi-Private plan				
	Standard Private plan				
Premium Payment Mode	Basic plan: Annually / Semi-annually / Quarterly / Monthly Add-on plan: Follow the corresponding basic plan				
Key Benefits	 Outpatient benefits (network) covering general practitioner and specialist consultations, Chinese medical practitioner consultations, physiotherapy and more 				
	 Cancer benefits covering diagnostic tests, active treatment like radiotherapy, chemotherapy and targeted therapy etc, and monitoring expenses 				
	 Rehabilitation benefits for cancer, stroke, heart attack and more, in rehabilitation centres and at home 				
	Hospice care benefits in hospice centres and at home				
	 Lifestage benefits offering complimentary check-up services and reimbursable vaccination and wellness assessments at different lifestages 				
	 Personal medical case management services with rehabilitation management and worldwide emergency assistance services 				

For more information, please read the "Benefit schedule for Health Journey Guardian" in this brochure.



Total medical cover and services for every step of your health journey

Health Journey Guardian offers comprehensive protections for you and your loved ones, taking care of all your medical needs from prevention, prediction and diagnosis to treatment and recovery for all-round wellness and better health.

Prevention

Prediction

Diagnosis

Treatment

Recovery





>

Embark your healthy living lifestyle



Lifestage Benefits >

Check-ups and health assessments for better health



Outpatient benefits

A premium medical network in Hong Kong provides you with the support you



Medical Protection > **Rehabilitation**

Cancer cover for your peace of mind

Local and overseas cashless medical services



Rehabilitation and Hospice Care Benefits

 $^{\triangle}$ Covers the cost of visiting health workers and nurses



Personal medical case management services with rehabilitation management

Tailor a personalised treatment and rehabilitation plan



HEALTH JOURNEY GUARDIAN

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: James (25 years old, smoker)

Occupation: Graphic designer

Family status: Single

Current cover: No group or individual medical protection

As a graphic designer at a start-up company, James is not protected by group medical coverage. He is looking for an affordable plan with outpatient benefits, as he is living on a limited budget.

Guaranteed Lifetime Renewal

AIA's **Health Journey Guardian** offers James affordable medical protection, with benefits that include up to 30 outpatient visits a year within a quality medical network in Hong Kong and cancer cover for diagnoses, active and palliative treatments and monitoring costs with 3 plan options. Outpatient benefits also extend to minor diseases like flu and cough.

Scenario: As James spends long hours working for the start-up, he experiences several health issues requiring outpatient treatment. At age 40, he is diagnosed with nasal cancer.

Insured's Age:

Employment

Age 25

James purchased the Health

Journey Guardian (Ward)

Diagnosed with flu & cough

Receives outpatient treatment with 5 days of basic medication (HK\$20 co-payment) by presenting his e-health card to designated medical network provider: and fully recovers

Diagnosed with neck & shoulder pain

Age 26

Receives outpatient treatment (HK\$20 co-payment) and 6 sessions of physiotherapy¹ (HK\$40 co-payment for each session) by presenting his e-health card to designated medical network provider; and fully recovers

First check-up

Age 28

Receives complimentary medical check-up services to better understand his health and he decides to receive one complimentary check-up every

diagnostic tests and cancer treatments: and fully recovers · His case is reviewed and

nasopharyngeal carcinoma

Receives full cover² for

Age 40

Diagnosed with

- managed by our designated service provider of personal medical case management services
- Eligible expenses3 were claimed for medicine, hospital expenses and radiotherapy

- 1. Recommendations by a registered medical practitioner of network in writing is required.
- 2. Full cover shall mean no itemised benefit sublimit under the cancer benefit (exclude the hospital cash benefit).
- 3. The claims amount is subject to the benefit limits as set out in the benefit schedule, which is subject to both the annual benefit limit and lifetime limit.

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: Susan (50 years old, non-smoker)

Occupation: Housewife

Family status: Married with 2 children

Current cover: No group or individual medical protection

Susan was protected by her husband's group medical cover until he recently retired. To minimise future financial stress on her family as she ages, she is focusing more on her health while looking for a medical plan that includes outpatient and rehabilitation benefits.

Guaranteed Lifetime Renewal

AlA's **Health Journey Guardian** offers Susan comprehensive cover from prevention to recovery, with benefits that include up to 30 outpatient visits a year with quality medical network, cancer cover, as well as marketleading rehabilitation cover with at-home recovery option.

Scenario: After a check-up and a colonoscopy at age 56, Susan is diagnosed with cancer the following year and requires extensive rehabilitation. She chooses to recover at home, with the help of a licensed health worker to perform simple home tasks and a registered nurse to tend to specific needs (i.e. wound and stoma care) to prevent complications.

Insured's Age: Age 50 Age 56 Age 57 Age 58 Homemaker **Blood in Stool (Rectal Bleeding)** Diagnosed with colon cancer Rehabilitation at home Susan purchased the Receives outpatient treatment Receives full cover¹ for Receives ancillary cover that **Health Journey Guardian** with 5 days of basic medication diagnostic tests and cancer include Chinese medical (HK\$20 co-payment) by practitioner consultations (up (Semi-Private) treatments presenting her e-health card to 30 visits per policy year) and Her case is reviewed and to designated medical network dietitian consultations (up to 4 managed by our designated provider, and is suggested to visits per policy year3), as well service provider of personal undergo colonoscopy as services by a licensed health medical case management worker and a registered nurse4 services to help her recover in comfort First colonoscopy (annual limit up to HK\$56,000 Eligible expenses² were per policy year) Receives wellness services claimed for medicine. under the plan by going for a hospital expenses. colonoscopy and is reimbursed operation for the removal of HK\$3,000 colon cancer and targeted therapy

- 1. Full cover shall mean no itemised benefit sublimit under the cancer benefit (exclude the hospital cash benefit).
- 2. The claims amount is subject to the benefit limits as set out in the benefit schedule, which is subject to both the annual benefit limit and the lifetime benefit limit.
- 3. This is counted towards the maximum 30 visits per policy year under the ancillary consultation and treatment benefits.
- 4. Recommendations by registered medical practitioner in writing are required for health worker and registered nurse of Rehabilitation benefit.

Benefit schedule for Health Journey Guardian

Recommendation by registered medical practitioner of network in writing is required.

A. Outpatient benefits¹

Max	ximuı	m visit / session for benefit items (i) to (vi)	30 visits or sessions per policy year		
Max	Maximum visit / session for benefit items (i), (ii), (iii), (iv) or (v), (vi)		2 visits or sessions per day		
Ber	nefit i	items	Co-payment ² (HK\$)	Maximum number of visits sessions per policy year	
	(i)	General practitioner consultation and medication	20 per visit	30 visits	
*	(ii)	Specialist consultation and medication	40 per visit	10 visits	
	(iii)	Chinese medical practitioner consultation	20 per visit	10 visits	
	(iv)	Acupuncture	20 per session	10	
	(v)	Bonesetting	20 per session	10 sessions	
*	(vi)	Physiotherapy	40 per session	20 sessions	
Ber	nefit i	tems	Benefit limit (HK\$)		
	(vii)	Simple X-ray and laboratory tests Including non-specialised X-ray and standard laboratory tests	2,000	per policy year	
	(viii)	Vaccination	200 p	er policy year	
		The covered vaccination includes: Hepatitis B vaccine / Bacillus Calmette-Guerin (BCG) vaccine / Polio (poliomyelitis) vaccine / Diphtheria-pertussistetanus vaccine / Leprosy vaccine / Japanese encephalitis vaccine / Meningitis vaccine / Hepatitis A vaccine / Measles vaccine / Influenza vaccine / Other vaccinations recommended by World Health Organization from time to time			



Benefit schedule for Health Journey Guardian (continued)

B. Cancer benefits

Recommendation by (attending) registered medical practitioner in writing is required.

Plan option		Ward		Semi-Private		Standard Private	
		HK\$	US\$	HK\$	US\$	HK\$	US\$
Annual I (except for	Limit r item B(ii)(1)f.) (per policy year)	200,000	25,000	400,000	50,000	600,000	75,000
Lifetime (except for	E Limit r item B(ii)(1)f.) (per life)	600,000	75,000	1,200,000	150,000	1,800,000	225,000
			HK\$			US\$	
Benefit items				Benefi	t limit		
(i)	Diagnostic Benefit			Fully co	vered*		
(ii)	Cancer Treatment Benefits						
	(1) Hospitalisation and treatment benefits						
	a. Hospital daily room and board			Fully co	vered*		
	b. Registered medical practitioner's visit fee			Fully co	vered*		
	c. Intensive care unit charges			Fully co	vered*		
	d. Surgical expenses			Fully co	vered*		
	Including surgeon's fee, anaesthetist's fee and operating theatre fee						
	e. Miscellaneous hospital expenses			Fully co	vered*		
	f. Hospital cash benefit For staying in non-Hong Kong government hospital	Maximum	400 per day 90 days per		Maximum	50 per day 90 days per p	olicy year
	(2) Day treatment and surgery						
	 a. Active and palliative treatment Including chemotherapy, hormonal therapy, radiotherapy, targeted therapy, immunotherapy, proton therapy, and day case procedure, etc. 			Fully co	overed*		
	b. Medication			Fully co	vered*		
	Including anti-nausea drugs, anti-rejection drugs, anti-vertigo drugs, anti-anodynes, and other long term medications required for active or palliative treatments						
(iii)	Reconstructive surgery benefit			Fully co	vered*		
	For restoration of function or appearance of head or breast						
(iv)	Monitoring benefit			Fully co	vered*		
	Including the expenses on consultation, laboratory tests and screening tests (up to 5 years after completion of active treatment)						

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Benefit schedule for Health Journey Guardian (continued)

C. Rehabilitation benefits

Recommendation by (attending) registered medical practitioner in writing is required.

			HK\$	US\$	
Anr	nual L	imit	56,000 per policy year	7,000 per policy year	
Ber	nefit i	tems	Benef	it limit	
**************************************	(i)	Rehabilitation at Rehabilitation Centre benefit For stay and treatment in rehabilitation centre	Fully covered*		
***	(ii)	Rehabilitation at home benefit			
		(1) Home facility enhancement benefit	35,000 per incident	4,375 per incident	
		Designated home facility enhancements such as widening passageways, adapting bathroom facilities and the provision of specialised furniture, which is prescribed by an occupational therapist			
	(2) Medical appliance benefit Purchase and / or rental of necessary medical appliances		5,000 per incident	625 per incident	
		(3) Health worker benefit Home care and personal care services	700 per visit, 1 visit per day Maximum 15 visits per policy year	87.5 per visit, 1 visit per day Maximum 15 visits per policy year	
		(4) Home nursing benefit	1,400 per visit, 1 visit per day Maximum 15 visits per policy year	175 per visit, 1 visit per day Maximum 15 visits per policy year	
36	(iii)	Ancillary consultation and treatment benefits Including physiotherapy, occupational therapy, speech therapy,	700 per visit, 1 visit per day Maximum 30 visits per policy year	87.5 per visit, 1 visit per day Maximum 30 visits per policy year	
		chiropractic treatment, treatments performed by neurosurgeon, neurologist, orthopedist, psychiatrist, psychologist or Chinese medicine practitioner, or dietitian consultation	(Dietitian: Maximum 4 visits per policy year and counted towards the maximum 30 visits per policy year)	(Dietitian: Maximum 4 visits per policy year and counted towards the maximum 30 visits per policy year)	
	(iv)	Psychiatric and psychological benefit	700 per visit, 1 visit per day	87.5 per visit, 1 visit per day	
		Including treatments performed by psychiatrist and psychologist after discharged from mental or psychiatric department of hospital	Maximum 15 visits per policy year	Maximum 15 visits per policy year	

D. Hospice care benefits



Recommendation by (attending) registered medical practitioner in writing is required.

			HK\$	US\$	
Annual Limit		imit	56,000 per policy year	7,000 per policy year	
Benefi	fit i	tems	Benef	it limit	
\$ (i)	i)	Hospice care at hospice centre benefit For admission in hospice with care and nursing service	Fully covered*		
% (ii	i)	Hospice care at home benefit			
		(1) Medical appliance benefit Purchase and / or rental of necessary medical appliances	5,000 per incident	625 per incident	
		(2) Health worker benefit Home care and personal care services	700 per visit, 1 visit per day Maximum 15 visits per policy year	87.5 per visit, 1 visit per day Maximum 15 visits per policy year	
		(3) Home nursing benefit	1,400 per visit, 1 visit per day Maximum 15 visits per policy year	175 per visit, 1 visit per day Maximum 15 visits per policy year	
₩ (ii	iii)	Ancillary consultation and treatment benefits Including physiotherapy, occupational therapy, speech therapy, chiropractic treatment, treatments performed by psychiatrist, psychologist or Chinese medicine practitioner, or dietitian consultation	700 per visit, 1 visit per day Maximum 30 visits per policy year (Dietitian: Maximum 4 visits per policy year and counted towards the maximum 30 visits per policy year)	87.5 per visit, 1 visit per day Maximum 30 visits per policy year (Dietitian: Maximum 4 visits per policy year and counted towards the maximum 30 visits per policy year)	

Benefit schedule for Health Journey Guardian (continued)

E. Lifestage benefits

-11	efit items Wellness services				Benefi	
)	Lifestage		Iness services options n option can be exercised once)	Age range of the insured	HK\$	US\$
	Young	(1)	HPV vaccination	9-35	3,000	375
	Adult	(2)	Eye check-up and cross-sectional ocular scan	18+	500	62.5
	Marriage	(3)	Pre-marital check-up	18+	1,000	125
	Mature	(4)	Mammogram	40+	1,000	125
		(5)	Upper GI endoscopy or Colonoscopy	50+	3,000	375
		(6)	Bone densitometry	50+	1,000	125
	All Ages	(7)	Speech assessment	All ages	800	100
i)	Complimentary medical check-up services (every 3 years)				Appli	cable

F. Other benefits

Ben	efit items	Benefit limit		
		HK\$	US\$	
(i)	Compassionate death benefit	10,000	1,250	
(ii)	Personal medical case management services with rehabilitation management	Applicable		
(iii)	Worldwide emergency assistance services			
	(a) Emergency medical evacuation	5,000,000	625,000	
	(b) Repatriation of remains	per life per life		
	(c) 24-hour worldwide telephone enquiry services	Included		

^{*} Fully covered shall mean no itemized benefit sublimit.

- 1 The currency of co-payment and benefit limits for outpatient benefits shall be Hong Kong dollars.
- 2 Co-payment shall mean an amount an insured is required to pay to the quality medical network for the relevant health services in accordance with the



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

- You need to pay the premium for this plan for life 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.
- 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; or
 - when you take this plan as an add-on plan of any basic plan which has been terminated
- 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. 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.
- 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 cover any of the following events or conditions:

- Exclusions for outpatient benefits, rehabilitation benefits and hospice care benefits:
 - 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, except for the condition of item 2 of Section 4 herein which applies to rehabilitation benefits and hospice care benefits (see benefit schedule, benefit items C and D).
 - services for beautification or cosmetic purposes, unless necessitated by injury for rehabilitation benefits and hospice care benefits (see benefit schedule, benefit items C and D) or covered by medical appliances benefit (see benefit schedule, benefit items C(ii)(2) and D(ii)(1) for details), 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, immunisation except for vaccinations (see benefit schedule, benefit item A(viii)) or health supplements.
 - dental treatment and oral and maxillofacial procedures performed by a dentist.
 - health services, 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 or rental of durable medical equipment or appliances including but not limited to wheelchairs, hearing aids and over-the-counter drugs, except covered by medical appliances benefit (see benefit schedule, benefit items C(ii) (2) and D(ii)(1)).
 - traditional Chinese medicine treatment including but not limited to herbal treatment, bonesetting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to gigong, massage therapy and aromatherapy, except covered by Chinese medicine practitioner consultation, acupuncture and bonesetting benefits (see benefit schedule, benefit items A(iii) to (v)).
- · experimental or unproven medical technology or procedure.
- congenital condition(s) which have manifested or been diagnosed before the insured reaches the age of 8.
- war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power; acts of terrorism, or direct participation in strike, riot or civil commotion, except for rehabilitation benefits and hospice care benefits (see benefit schedule, benefit items C and D).

2. Exclusions for cancer benefits:

- tumour which is histologically classified as premalignant.
- abnormal lesions of cervix uteri classified as cervical intraepithelial neoplasia grade I (CIN I) and grade II (CIN II).
- the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, or venereal and sexually transmitted disease or its sequelae.
- · nuclear, biological or chemical contamination.
- general check-up, 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 (in relation to the insured); vaccines for the prevention of covered cancer.
- 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.
- congenital covered cancer that has been found or is diagnosed before the insured reaches the age of 17.
- mental, behavioural, psychiatric or psychological disorder.
- Exclusions for additional events or conditions for outpatient benefits:
 - acupuncture, pilates, shockwave including those performed by physiotherapist, dietitian consultation; consultation and treatment for cancer.
 - female hormonal tests or assays and female hormonal replacement therapy unless resulting from a sickness or disease.
 - · accidents that arise from hazardous or professional sports.
 - specialized X-rays, e.g. intravenous pyelography (I.V.P.), intravenous cholangiography (I.V.C.), cholangiogram and specialized investigations, e.g. ultrasound examination, echocardiogram, endoscopies, X-ray using contrast media, ultrasound scan, computerized axial tomography (CAT) scan, PET scan, magnetic resonance imaging and investigation or treatment involving radio-active isotopes.
 - diagnostic and imaging investigation performed at a hospital, including the outpatient department in the hospital.
 - medication other than basic medication, such as specific treatments — anti-viral, anti-cancer, anti-TB, hormonal replacement and other expensive medications such as hormone analogues / antagonists and long term medication.
 - mental, behavioural, psychiatric or psychological disorder.

- 4. Exclusions for additional events or conditions for cancer benefits, rehabilitation benefits and hospice care benefits:
 - any treatment, test, or service which is not medically necessary.
 - HIV and its related disability, which is contracted or occurs before the policy date / the later of the issue date and the latest commencement date (if applicable), except for sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth. This exclusion is not applicable to cancer benefit.
 - eligible expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.

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
- 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. We guarantee you the terms and benefits will not be less favourable than the existing version.

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 specific items will be effective on the following dates:

ltems	Effective Date (after the policy commences)	
Unknown pre-existing condition(s)	31 days	
Lifestage benefits – Wellness services	5 years	

Product Limitation

1. We only cover the charges and / or expenses of the insured on medically necessary and reasonable and customary basis, except for wellness services (see benefit schedule, benefit item E(i)).

"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:

- (a) require the expertise of, or be referred by, a registered medical practitioner:
- (b) be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
- (c) 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, his family, caretaker or the attending registered medical practitioner;

- (d) 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
- (e) 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.

"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 the Company 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, the Company shall make reference to the followings (if applicable):

- a) treatment or service fee statistics and surveys in the insurance or medical industry;
- b) internal or industry claim statistics; and/or
- c) other pertinent source of reference in the locality where the treatments, services or supplies are provided
- 2. Adjustment factor is applied to the calculation of the benefit payable for cancer benefits, when the insured is confined in a type of room in a hospital which is at a higher level than the ward class corresponding to the plan level chosen ("selected room type"), according to the table below, except in the case of:
 - unavailability of the selected room type for emergency treatment as a result of the capacity shortfall of that
 - isolation reasons that require a specific class of accommodation: or
 - other reasons not involving personal preference of you and / or the insured.

	Selected Room Type			
Ward class of the confinement	Ward	Semi-Private	Standard Private	
Ward	N/A	N/A	N/A	
Semi-Private Room	60%	N/A	N/A	
Standard Private Room	40%	60%	N/A	
Any room with amenities upgraded beyond a Standard Private Room	20%	40%	60%	

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

- 3. Geographical cover for this plan is worldwide except for the following benefits / services:
 - · outpatient benefits are covered in Hong Kong only;
 - · hospital cash benefit is covered for non-Hong Kong government
 - · benefits for psychiatric and psychological consultation and treatments are covered in Hong Kong and Macau only; and
 - worldwide emergency assistance services is covered during trip (except for 24-hour worldwide telephone enquiry services)
- 4. Rehabilitation at rehabilitation centre benefit, rehabilitation at home benefit and ancillary consultation and treatment benefits under rehabilitation benefit (see benefit schedule items C(i) to (iii)) shall be payable following a diagnosis of cancer, stroke, heart attack, kidney failure or injury which requires surgery.
- 5. Only the eligible expenses charged on the psychiatric and psychological consultation visits and treatments as performed by a psychiatrist or psychologist in Hong Kong and Macau is payable under ancillary consultation and treatment benefits (see benefit schedule items C(iii) and D(iii)) and psychiatric and psychological benefit (see benefit schedule item C(iv)).
- 6. Check-up redemption letter will be sent to the policy owner upon each eligible policy anniversary.
- 7. 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. While trip is referring to a journey taken by the insured to leave the country or place of which the insured was a permanent resident at the time of leaving (being Hong Kong, Macau or Mainland China).
- 8. Worldwide emergency assistance services and credit facility services for hospitalisation are additional benefits. Worldwide emergency assistance services and outpatient benefits 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 worldwide emergency assistance services and credit facility services without further notice.
- 9. The personal medical case management services with rehabilitation management is not contractual services but the administrative arrangements offered in our absolute discretion. It is subject to amendment or termination at any time without prior notice. AIA shall not be responsible for any act, negligence or omission of medical advice, opinion, service or treatment on the part of them.

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. For details related to making a claim, please refer to the policy contract. 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 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 Policy owner or Policy owner's nominated representative, whichever is the 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.



aia.com.hk

Hong Kong (852) 2232 8888

















HEALTH JOURNEY GUARDIAN (HJG)

Pioneering cover for your entire health journey



AIA International Limited (Incorporated in Bermuda with limited liability)



