LIFE INSURANCE - MEDICAL PROTECTION
AIA VOLUNTARY HEALTH INSURANCE PRIVILEGE SCHEME (AVPR)

PRIVILEGE PROTECTION TO KEEP YOU AT YOUR BEST

With AIA Voluntary Health Insurance Privilege Scheme, you can enjoy high-level protection for top-tier medical care, extended cancer cover, no claim medical check-up services, cashless hospitalisation and much more. You can also apply for tax deduction of up to HKD8,000 per insured person per tax assessment year. Join AIA Vitality and receive an instant 10% premium discount and an array of rewards and discounts that help you live a healthier lifestyle.

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AIA Vitality

AIA International Limited
(Incorporated in Bermuda with limited liability)

AIA
HEALTHIER, LONGER, BETTER LIVES

Your good health is your greatest wealth

When you live a life of success, you need medical protection that can match your pace.

AIA Voluntary Health Insurance Privilege Scheme offers advanced medical protection throughout Asia with lifetime guaranteed renewal, offering you the privileged support you need to achieve more in life. With AIA Voluntary Health Insurance Privilege Scheme, you can enjoy full reimbursement with no itemised benefit sublimit for major medical expenses, hospital stays in a semi-private room or standard private room (depending on confinement location), full cover for non-surgical cancer treatment and extended support in the hospital and beyond. Embark on a journey of healthy living with no claim medical check-up services if no claims is paid, plus an instant 10% premium discount for the first year for AIA Vitality members.

AIA Voluntary Health Insurance Privilege 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 superb medical cover that meets your needs, with tax deduction benefits.

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).

Plan highlights

Medical protection with a lifetime limit of HKD50 million and a high annual limit of HKD10 million

Full cover for non-surgical cancer treatment

Annual no claim medical check-up services if no claims is paid

AIA "Health and Wellness 360" offers a range of medical support, including:

- **cashless hospitalisation for designated hospitals in different countries**
- **personal support during hospitalisation and beyond through Personal Medical Case Management Services with Rehabilitation Management**

Cover at a glance

Type of the Certified Plan	**Flexi Plan**	
Name of the Certified Plan	**AIA Voluntary Health Insurance Privilege Scheme**	
Certification Number and Annual Deductible Choices	**HKD**	**USD**
	0 Deductible: F00053-01-000-02	0 Deductible: F00053-04-000-02
	16,000 Deductible: F00053-02-000-02	2,000 Deductible: F00053-05-000-02
	25,000 Deductible: F00053-03-000-02	3,125 Deductible: F00053-06-000-02
Product Nature	**Medical protection insurance plan (Reimbursement)**	
Plan Type	Add-on plan	
Insured Person's Age at Application	15 days to age 80	
Guaranteed Renewal	Whole life	
Premium Payment Mode	Follow the corresponding basic plan	
	HKD	**USD**
Lifetime Benefit Limit (per life)	50,000,000	6,250,000
Annual Benefit Limit (per policy year)	10,000,000	1,250,000
Annual Deductible Choices (per policy year)	0 / 16,000 / 25,000	0 / 2,000 / 3,125
Geographical Cover		
• non-emergency treatment	Asia (except for psychiatric treatments and lower ward class cash benefit covered in Hong Kong and Macau)	
• emergency treatment	Worldwide (except for worldwide emergency assistance services covered during trip)	
Room Type		
• for Hong Kong, Macau and Mainland China	Semi-private room	
• for Asia, excluding Hong Kong, Macau and Mainland China	Standard private room	
• for outside Asia	Standard private room (for emergency treatment only)	
Key Benefits	• hospitalisation and surgical care • time-saving and convenient day case procedures (including visit to day case procedure centre) • high quality specialist network services • broad post-hospitalisation care • extended caring protection for your specific needs, including non-surgical cancer treatment • global emergency treatment and worldwide emergency assistance services[@]	

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

[@] Worldwide emergency assistance services are additional benefit and do not form part of the VHIS Certified Plan, the policy holder can remove this additional benefit by sending a written notice to the Company.

"Hong Kong" and "Macau" herein refer to "Hong Kong Special Administrative Region" and "Macau Special Administrative Region" respectively.

Government certified for your peace of mind

AIA Voluntary Health Insurance Privilege Scheme is a **Certified Plan under the Voluntary Health Insurance Scheme (VHIS)** that offers you superb medical cover, helping you access private healthcare services while applying for tax deduction to enjoy attractive tax advantages.

Not only complies with the minimum requirements of the VHIS, **AIA Voluntary Health Insurance Privilege Scheme** offers valuable privileges including full reimbursement with no itemised benefit sublimit for major medical expenses including the value-added tax (VAT) and goods and services tax (GST) which are incurred for medical services overseas, Personal Medical Case Management Services with Rehabilitation Management, high quality specialist network services and much more. 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.

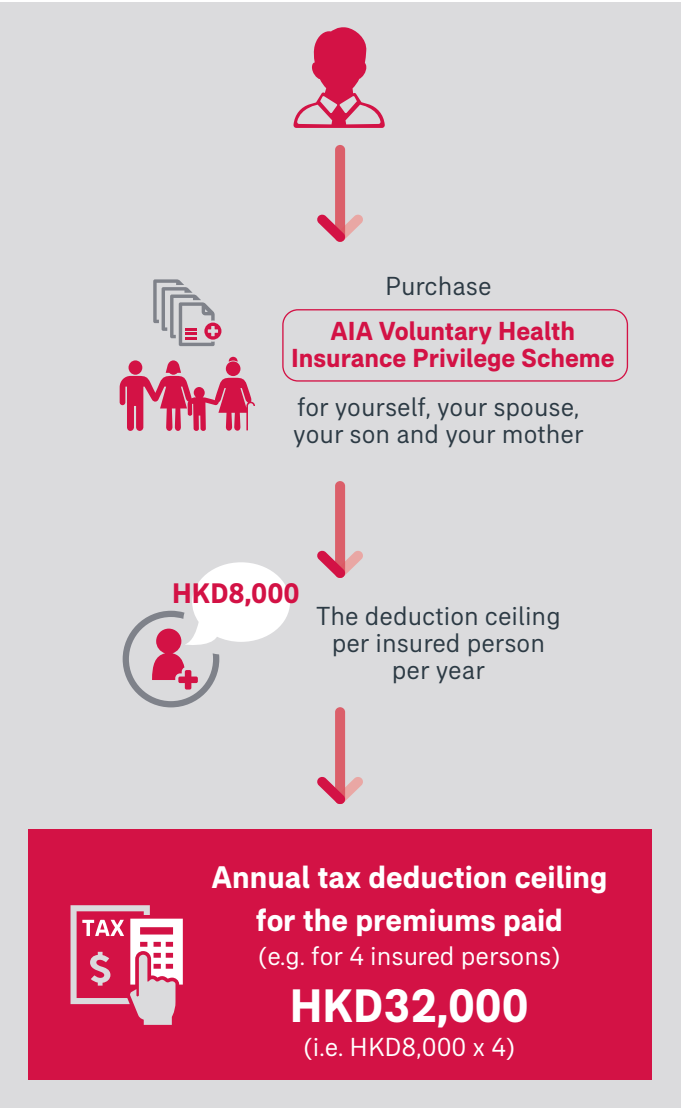
Protect your whole family and apply for a higher tax deduction amount

To help you budget smarter, the premiums you pay for **AIA Voluntary Health Insurance Privilege 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 Privilege 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.

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

Lifetime guaranteed renewal

AIA Voluntary Health Insurance Privilege 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 for life. 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.)

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 Privilege 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 add-on plan provides full cover starting from the 31st day of the 1st policy year, which is shorter than the minimum requirement of 3-year waiting period under VHIS.

Days after policy commences	Protection for unknown pre-existing conditions
First 30 days	0% cover
31st day and onwards	100% cover



Extended caring protection to safeguard the needs of stroke and cancer patients

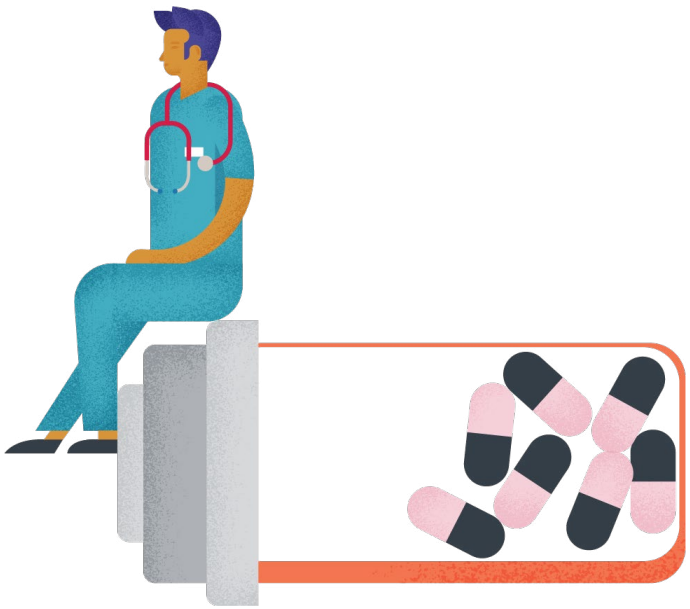
Stroke is a common disease with potentially harmful consequences, often requiring extensive period of recovery and additional living support. This add-on plan offers extended caring protection to address the daily needs and self-care capabilities of stroke patients, so that you may receive the proper care even in the comfort of your own home. These include:

- **home facility enhancements prescribed by occupational therapists** – widening of corridors, adapting bathroom facilities and purchasing specialised furniture, etc.
- **professional medical support** – consultations, treatments and prescriptions from chiropractors, physiotherapists, speech therapists, occupational therapists, neurologist, neurosurgeons and Chinese medicine practitioners according to your personal needs
- **disability subsidy** – if you become unable to take care of yourself for at least 6 uninterrupted months, we will provide a disability subsidy of HKD5,000 per month to you for up to 24 months per incident

This add-on plan also includes enhanced support for cancer patients with cover for radiotherapy, chemotherapy, targeted therapy, immunotherapy, hormonal therapy and the related consultations, medications and diagnostic tests. For patients with kidney diseases, we also cover the expenses required for regular dialysis treatments.

No claim medical check-up services

Because maintaining good health is just as important, **AIA Voluntary Health Insurance Privilege Scheme** rewards a free medical check-up services for you once per year to help you understand your health, provided that no claim is paid during the policy year that just passed. This service begins once the insured person reaches the age of 2 at the policy anniversary.





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

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

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

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Access a high-quality medical network

This is a value-added service designed to further enhance your peace of mind in a medical situation. Our medical network has a group of multi-disciplinary medical specialists and provides you with access to a number of advanced day case medical centres, a safe and convenient alternative to hospitals. 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.

For more information, please refer to the specialist network leaflet.

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Hassle-free medical payment at home and overseas

When you are facing a health challenge, the last thing you want is the hassle of paying your medical bills, especially in a foreign country. Through AIA, you can enjoy the total convenience of cashless hospitalisation, even while in designated private hospitals in Asia, including Singapore, Malaysia and Thailand, as well as the United States and Europe (subject to geographic cover set out in the benefit schedule). 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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Worldwide emergency assistance

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

Options to suit your needs

We understand that everyone's situation is different. That's why we offer 3 annual deductible choices for each policy currency you have chosen to suit your personal medical needs:

	HKD	USD
Annual deductible choices	0	0
	16,000	2,000
	25,000	3,125

If you are looking for full medical protection or top-up cover to supplement your current medical plan, annual deductible choices allow you to specify how much you are willing to pay before you claim. Choosing a higher deductible amount could lower the premiums for your policy. For example, if you chose an annual deductible of HKD16,000 and your eligible medical expense is HKD100,000, you would receive HKD100,000 less your deductible, which would be HKD84,000.

You can also choose to reduce your annual deductible amount to a specified amount without having to provide us with current details of your health upon policy anniversary of your cover at the age of 50, 55, 60, 65, 70, 75 or 81 once. The premium will be adjusted based on your selected deductible amount, and your out-of-pocket limit for a claim will be reduced. Before making your request for this reduction of deductible, you may have to reassess if this reduction can suit your personal needs.

Furthermore, this add-on plan can attach to any specified basic plan in order to provide a wide range of cover.



Join AIA Vitality and enjoy an instant 10% premium discount

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[2] for the **AIA Voluntary Health Insurance Privilege Scheme**. As long as you keep up a healthy lifestyle, you can even enjoy a minimum 10% premium discount each year[3], 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 further details, please refer to the remarks in the **AIA Vitality** section.





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.)

Policyowner and insured person:	Gordon (age 40, non-smoker)
Occupation:	Business Development Director
Family status:	Married, with one son
Current cover:	AIA life insurance plan and employer's group medical plan



As a successful business executive, Gordon wants himself and his loved ones to have access to advanced and flexible medical protection. He decides to purchase **AIA Voluntary Health Insurance Privilege Scheme** for himself, his wife and his son.

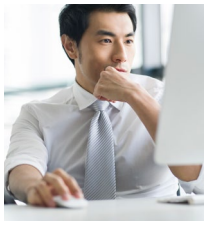
Guaranteed lifetime renewal

AIA Voluntary Health Insurance Privilege Scheme offers Gordon superb medical protection with a lifetime benefit limit up to HKD50,000,000/USD6,250,000 that will supplement his employer's group medical plan. This add-on plan provides full reimbursement of major medical expenses with no itemised benefit sublimit, hospital stays in a semi-private or standard private room according to confinement location, full cover for non-surgical cancer treatments[1], and broad extended benefits to ensure sufficient and continuous cover during different stages in the recovery journey, from pre-confinement through to post-confinement.

Scenario: Gordon is diagnosed with cancer before his retirement and has a stroke after his retirement. He makes claims for medical expenses incurred **during pre-confinement, confinement and post-confinement.**

Insured person's age at policy application

Age 40 | Age 53 | Age 55 | Age 75



Purchasing AIA Voluntary Health Insurance Privilege Scheme

Gordon enjoys **medical protection** and can apply for a **tax deduction**

Lifetime benefit limit: HKD50,000,000/ USD6,250,000

Annual benefit limit: HKD10,000,000/ USD1,250,000



Gordon is diagnosed with colorectal cancer

- With advice from international medical specialists, he receives treatment in both Hong Kong and Singapore and recovers
- His case is reviewed and managed by our designated service provider of Personal Medical Case Management Services

Eligible expenses can be claimed[2] for:

- Pre-confinement outpatient care
  +
- Confinement (semi-private room in Hong Kong and standard private room in Singapore) and reverse colostomy surgery
  +
- Targeted therapy
  +
- Post-confinement outpatient care, including follow-up outpatient visits provided by physiotherapists and occupational therapists
  +
- Post surgery home nursing[3]



Gordon retires

His treatment for colorectal cancer has been completed and he has fully recovered



Gordon suffers a stroke

- He receives treatment and recovers
- His case is reviewed and managed by our designated service provider of Personal Medical Case Management Services

Eligible expenses can be claimed[2] for:

- Pre-confinement outpatient care
  +
- Confinement (semi-private room in Hong Kong)
  +
- Post-confinement outpatient care, including follow-up outpatient visits provided by physiotherapists and occupational therapists

Stroke rehabilitation benefit includes:

- Home facility enhancement benefit with a prescription by an occupational therapist to help Gordon adapt to his new life at home;
- Stroke ancillary benefit[3] to provide professional medical support[4] according to Gordon's medical needs; and
- Disability subsidy benefit for disability continued for 6 months to provide a monthly cash allowance to support Gordon's additional disability expenses, such as home nursing services

1. Full cover shall mean no itemised benefit sublimit.
2. The claim amount is subject to the benefit limits as set out in the benefit schedule, which include both the annual benefit limit and the lifetime benefit limit.
3. Recommendation by attending doctor or registered medical practitioner in writing is required.
4. Professional medical support includes consultations and treatments provided by chiropractors, physiotherapists, speech therapists, occupational therapists, neurologist, neurosurgeons and Chinese medicine practitioners.

Benefit schedule for AIA Voluntary Health Insurance Privilege Scheme

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

Overview	HKD	USD
Lifetime Benefit Limit Applies to benefit items I (a) - (r) and II (a) - (i)	50,000,000 per life	6,250,000 per life
Annual Benefit Limit Applies to benefit items I (a) - (r) and II (a) - (i)	10,000,000 per policy year	1,250,000 per policy year
Geographical Cover[1] • non-emergency treatment	Asia (except for psychiatric treatments and lower ward class cash benefit covered in Hong Kong and Macau)	
• emergency treatment	Worldwide (except for worldwide emergency assistance services covered during trip)	
Room Type • for Hong Kong, Macau and Mainland China • for Asia, excluding Hong Kong, Macau and Mainland China • for outside Asia	Semi-private room Standard private room Standard private room (for emergency treatment only)	
Annual Deductible Choices Applies to benefit items I (a) - (r) and II (a) - (e), (h)(i), (h)(ii) and (i)	0 / 16,000 / 25,000 per policy year	0 / 2,000 / 3,125 per policy year

I. Core Benefits

Benefit items[2,8]	Benefit limit	
	HKD	USD
a. Room and board	Fully covered*	
b. Miscellaneous charges Including medical appliances		
c. Attending doctor's visit fee		
d. Specialist's fee[3]		
e. Intensive care		
f. Surgeon's fee	Fully covered* regardless of the surgical category	
g. Anaesthetist's fee	Fully covered*	
h. Operating theatre charges		
i. Prescribed diagnostic imaging tests[3,4]		

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

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

Benefit items[2,8]	Benefit limit	
	HKD	USD
j. **Prescribed non-surgical cancer treatments**[5]	Fully covered*	
k. **Pre- and post- confinement/day case procedure outpatient care**[3]		
(i) prior outpatient visits or emergency consultations	Fully covered*	
• within 30 days before each admission or day case procedure	all visits	
• more than 30 days before each admission or day case procedure	1 visit	
(ii) follow-up outpatient visits		
• within 90 days after each hospital discharge / completion of day case procedure		
1. all follow-up outpatient visits (other than dietitian consultation visits)	Fully covered*	
2. 4 visits of dietitian consultations	680 per visit	85 per visit
l. **Psychiatric treatments** For confinement in Hong Kong and Macau	40,000 per policy year	5,000 per policy year
m. **Private nurse's fee**[3] Nursing service after surgery or discharge from intensive care unit	Fully covered* maximum 30 days per policy year	
n. **Dialysis benefit**[3]	Fully covered*	
o. **Post surgery home nursing benefit**[3] Nursing services within 196 days after discharge from hospital (after surgery / admission to intensive care unit)	Fully covered* maximum196 days per policy year	
p. **Reconstructive surgery benefit**[3] For restoration of appearance or a breast	160,000 per accident / per mastectomy	20,000 per accident / per mastectomy
q. **Medical appliances benefit for reconstructive surgery** External, prosthetic or reconstructive devices / materials implanted during reconstructive surgery	96,000 each item per policy year	12,000 each item per policy year
r. **Emergency outpatient treatment benefit** Treatments within 24 hours of the accident	Fully covered*	

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

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

II. Other Benefits

Benefit items[2]	Benefit limit	
	HKD	USD
a. Donor's benefit For organ transplantation of heart, kidney, liver, lung and bone marrow	30% of the sum of surgical expenses for organ transplantation[6]	
b. Hospital companion bed benefit Expenses for one companion bed during the insured person's hospital stay	Fully covered*	
c. Chinese medicine practitioner outpatient care Follow-up outpatient visit (within 90 days after each discharge from hospital or completion of day case procedure)	600 per visit	75 per visit
	1 visit per day, maximum 15 visits	
d. Rehabilitation benefit[3] For stay and treatment in rehabilitation centre	80,000 per policy year	10,000 per policy year
	maximum 60 days per policy year	
e. Hospice care benefit[3] For admission in hospice with care and nursing service	80,000 per policy year	10,000 per policy year
f. Lower ward class cash benefit For staying in a room that is in a ward lower than the covered room type in private hospital of Hong Kong and Macau	1,200 per day	150 per day
	maximum 60 days per policy year	
g. Day surgery cash benefit Applicable when benefit item I (f) is payable for the same procedure	1,600 per procedure	200 per procedure
	maximum 1 procedure per policy year	
h. Stroke rehabilitation benefit After discharge from hospital		
(i) Home facility enhancement benefit[3] Designated home facility enhancements such as widening passageways, adapting bathroom facilities and the provision of specialised furniture, which is prescribed by an occupational therapist	50,000 per incident	6,250 per incident
(ii) Stroke ancillary benefit		
1. Chiropractor / physiotherapist / speech therapist / occupational therapist / neurosurgeon[3] • for consultation and / or treatment	1,000 per visit	125 per visit
2. Neurologist[3] • for consultation, treatment and / or medicines prescribed	100,000 per incident	12,500 per incident
3. Chinese medicine practitioner • for consultation, treatment and / or medicines prescribed	maximum 30 visits per policy year	
(iii) Disability subsidy benefit	5,000 per month	625 per month
• For disability continued for 6 months	maximum 24 months per incident	

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

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

Benefit items[2]	Benefit limit	
	HKD	USD
i. Emergency dental benefit Treatments within 3 months of the accident	Fully covered*	
j. Compassionate death benefit Payable to the beneficiary if the insured person passes away	10,000	1,250
k. No claim medical check-up services (annual)	Applicable	
l. Personal Medical Case Management Services	Applicable	
m. Worldwide emergency assistance services[7] (i) Emergency medical evacuation (ii) Repatriation of remains (iii) Compassionate visit For staying in hospital more than 5 consecutive days (iv) Return of minor For staying in hospital more than 5 consecutive days	5,000,000 per life	625,000 per life
(v) 24-hour worldwide telephone enquiry services	Included	

* Fully covered shall mean no itemised benefit sublimit.

Notes:

1. For any non-emergency treatments performed outside Asia, (a) eligible expenses and / or other expenses payable for benefit items I(a) to (k) shall be subject to the benefit limits as stated in Standard Plan Benefit Schedule; (b) no benefit shall be payable for benefit items I(l) to (r), II(a) to (i), and II(k), and shall be subject to the applicable terms and conditions / benefits as stated in policy provision.
2. Unless otherwise specified, eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
3. The Company shall have the right to ask for proof of recommendation except for Chinese medicine practitioner under benefit item II (h)(ii), e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
4. 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.
5. Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
6. The benefit limit of this donor's benefit shall be equal to 30% of the sum of (a) the expenses incurred for the surgery to remove the organ or bone marrow from the donor; and (b) the eligible expenses for the surgery to transplant the organ or bone marrow into the insured person as recipient.
7. Worldwide emergency assistance services are additional benefit and do not form part of the VHIS Certified Plan, the policyholder can remove this additional benefit by sending a written notice to the Company.
8. Benefit items I (a) - (l) are provided under VHIS with another set of benefit limits as stated in the VHIS Standard Plan Terms and Benefits. For further details, please visit www.vhis.gov.hk.

Standard Plan Benefit Schedule
You may browse the website to understand standard plan benefit schedule:
https://www.aia.com.hk/content/dam/hk/en/pdf/benefit-schedule/standard-plan-benefit-schedule-en.pdf

AIA VOLUNTARY HEALTH INSURANCE PRIVILEGE SCHEME



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 add-on 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 add-on 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. This plan is an add-on plan. You need to pay the premium for this add-on plan until the end of cover period or when the basic plan it is attached to is terminated, whichever is earlier. If you do not pay the premium within 30 days of the premium due date, the add-on plan will be terminated and you / the insured will lose the cover.

2. You may request for the termination of your policy by notifying us in written notice. Also, we will terminate your policy and you / the insured 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
    - the basic plan to which this add-on plan is attached to has been terminated. For continuation of the cover, you may notify us in 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. You are subject to exchange rate risks for plans denominated in currencies other than the local currency. Exchange rates fluctuate from time to time. You may suffer a loss of your benefit values and the subsequent premium payments (if any) may be higher than your initial premium payment as a result of exchange rate fluctuations. You should consider the exchange rate risks and decide whether to take such risks.

5. The future medical costs will be higher than they are today due to inflation. Hence, the benefit amounts and the future premium rate of this add-on plan may be revised to reflect the inflation.

Key Exclusions

Under this add-on 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 covered by Reconstructive surgery benefit and Medical appliances benefit for reconstructive surgery (see benefit schedule, benefit items I (p) and (q) 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
- dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident or covered by Emergency dental benefit (see benefit schedule, benefit item II (i) for details)
- 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, except covered by Home facility enhancement benefit (see benefit schedule, benefit item II (h)(i) for details)
- 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, except covered by Chinese medicine practitioner outpatient care and Stroke ancillary benefit (see benefit schedule, benefit items II (c) and (h)(ii)(3) for details)
- 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 add-on 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 add-on 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 existing version and 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 add-on plan will be effective on the following dates:

Items	Effective Date (after the policy commences)
Injury	Immediately
Sickness / Disease	Immediately
Specialist network service	Immediately

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 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, 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. "Asia" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, Mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan, and Vietnam.

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

$$= \frac{\text{Highest daily room charge of the covered room type in the hospital admitted by the insured person (depends on which country / place the insured person stays)}}{\text{Daily room charge of the room the insured person stays}}$$

   Except when such confinement in a room of class above covered room is due to:

   - unavailability of covered room for emergency treatment as a result of capacity shortfall in the hospital of confinement;
   - isolation reasons that require a specific class of accommodation; or
   - other reasons not involving personal preference of you and / or the insured person.

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.

4. If the insured person is a United States citizen and has stayed in the United States for a period of or periods aggregating 182 days or more within the 12 consecutive months immediately prior to his receiving emergency treatment which takes places in United States, benefits pay-out amount shall be reduced to 50%. Such reduction applies to all benefit items in the benefit schedule except benefit items II(f), (g), (h)(iii) and (j) to (m).

5. After applying the benefit adjustment(s) of items (3) and / or (4) as stated above (before applying deductible balance), the benefits payable shall not be less than the benefits payable according to the remaining balance of limits in the Standard Plan Benefit Schedule (before applying deductible balance).

6. For any non-emergency treatments performed outside Asia, the maximum limit of surgeon's fee as stated in Standard Plan Benefit Schedule, is subject to the relevant surgical category and the categorisation of such surgical procedure.

7. Only the eligible expenses charged on the psychiatric treatments during confinement in Hong Kong and Macau as recommended by a specialist is payable under Psychiatric treatments (see benefit schedule, benefit item I (l)).

8. No claim medical check-up services begin once the insured person reaches the age of 2 at the policy anniversary. Check-up redemption letter will be sent to the policyholder within 365 days after each eligible policy anniversary.

9. If the eligible expenses have been reimbursed under any law, or medical program or other insurance policy provided by any government, company, other third party or us, such expenses will not be reimbursable by us under this policy.

10. Worldwide emergency assistance services are covered during the trip only (except for 24-hour worldwide telephone enquiring services), which are additional benefits and do not form part of the VHIS Certified Plan, the policyholder can remove this additional benefit by sending a written notice to the Company. A trip refers to a journey where the insured person departing abroad from either Hong Kong, Macau or Mainland China (of which the insured is the permanent resident at the time of departure). The services are provided by third party service provider(s). AIA shall not be responsible for any act, negligence or omission of medical advice, opinion, service or treatment on the part of them. AIA reserves the right to amend, suspend or terminate the service without further notice.

11. Rehabilitation management, 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.

AIA Vitality

Earn rewards for your healthy lifestyle

AIA Vitality is a game changing wellness programme which redefines the traditional concept of insurance, aims to reward customers to live a healthy lifestyle.

Purchase a selected **AIA Vitality** insurance product and be an **AIA Vitality** member[1] to receive an instant 10% premium discount[2] and an array of rewards and discounts offered by our partners. As long as you keep up a healthy lifestyle, you can even enjoy a minimum 10% premium discount each year[3].

Simply by being active in daily life and having a healthy diet, you can earn points and upgrade your status for more offers and rewards.



SLEEP WELL

BY NOT SMOKING

SHOPPING DANCING

TAKING THE STAIRS

RUNNING

DOING YOGA

HEALTHY DIET

PLAYING BASKETBALL



Enjoy premium discount and lifestyle rewards

AIA Vitality rewards you to live healthy lives with premium discounts, enabling you to enjoy life with all-round protection in a smart way.

- **Enjoy an instant 10% premium discount for the first year by joining AIA Vitality**
- **Enjoy up to 15% premium discount if you can maintain your Platinum Status for 5 consecutive years[4]**
- **Premium discounts are not affected by claims history**

You can also enjoy a wide range of lifestyle rewards and offers from our partners, including discounts on health checks, fitness devices, sports equipment, fresh fruit and vegetables, travel-related offers, etc.[5]

AIA Vitality is not an insurance product that falls under the jurisdiction of the insurance regulation. Annual membership fee is required for joining[5]. Moreover, the cover of the insured under the policy shall remain unchanged no matter whether the customer chooses to join **AIA Vitality** or not. For details related to the membership and membership fee, please visit "How to join" section under aia.com.hk/aiavitality.

Remarks:

1. The applicants for AIA Vitality must be 18 years old or above and must be the insured of the in-force policy of an AIA Vitality selected insurance product.
2. Premium discount is only applicable to the standard premiums of selected AIA Vitality insurance products (including basic and add-on plans) and shall not apply to any extra premiums due to loading. In all circumstances, the premium discount will be calculated in accordance with the insured's AIA Vitality Status achieved on each policy anniversary. The policy anniversary of AIA Vitality selected insurance products and AIA Vitality membership anniversary may not be the same. For details and offers of AIA Vitality selected insurance products, please visit aia.com.hk/aiavitality.
3. To enjoy a 10% premium discount each year, members must become Gold Members during their first year and maintain Gold Status from then on.
4. Members will enjoy 15% premium discount in the subsequent year of policy renewal if they currently enjoy 10% premium discount and maintain the Platinum Status for 5 consecutive years.
5. An annual membership fee will be charged for AIA Vitality and a member has to renew the AIA Vitality membership annually on time in order to maintain the membership and enjoy premium discount (if any) in the subsequent policy years. The membership fee of AIA Vitality may vary at any time without prior notice. Likewise, programme benefits may be added or removed without prior notice.

Important note:

Members must log in AIA Vitality through "AIA Connect" mobile application ("Platform"). The Platform is available to use under certain mobile phone operating systems. Please refer to App Store (iOS) and Google Play (Android) for the latest system requirements. AIA gives no warranty on the compatibility or reliability of the Platform, and accepts no responsibility in the event that you are not able to earn or record points due to incompatibility between Platform and / or mobile phone operating systems and fitness devices / fitness-tracking mobile apps.

Earn more discounts and rewards with higher membership status

	Bronze	Silver	Gold	Platinum
AIA Vitality Status				
AIA Vitality Points	0 point	10,000 points	20,000 points	30,000 points
Discount adjustment for the subsequent year's renewal	-2%	-1%	0% (No adjustment)	+1%
				Up to 15% premium discount

Rewards and offers

You can earn points and upgrade your status for more rewards and offers.
Find out the latest details: aia.com.hk/en/aiavitalityrewards

Example: Healthy journey of a Gold member

Know Your Health

Complete 6 online assessments[6]

and

Complete health check

- Blood pressure
- Blood glucose
- BMI
- Total cholesterol

Total: 8,500 - 11,500 points in a year

Improve Your Health[7]

Achieve 7,500 steps every day for 5 days in a week[8]
50 points/day x 5 days
x 52 weeks = 13,000 points

or

2 Partner gym visits in a week
100 points/day x 2 days
x 52 weeks = 10,400 points

Total: 10,400 - 13,000 points in a year

Enjoy The Rewards

Monthly Challenge to earn **active rewards** that keep you motivated

Status rewards for successfully improving your membership status

Over 20,000 points in a year Upgrade to **GOLD** member

Remarks:

6. Members can earn a total of 5,500 points after completing the AIA Vitality Health Review, Stressor Assessment, Exercise Assessment, Online Nutrition Assessment, Non-smoker's Declaration and Sleep Assessment. Online assessments may change from time to time without prior notice.
7. Members can earn up to 15,000 points a year for fitness activities including walking and visiting partner gym centres, etc.
8. For the details of synchronising the step count with AIA Vitality, please visit aia.com.hk/aiavitality.

Important note:
For the relevant terms and conditions, and the latest details of all assessments, point-earning activities, rewards and offers, please visit aia.com.hk/aiavitality.

The more you engage with **AIA Vitality**, the more **AIA Vitality** Points you earn and the higher your **AIA Vitality** Status, leading to greater premium discount, lifestyle rewards and offers and a healthier you.



Contact us now

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