

Preferred Care

Preferred guidance, treatment and protection when faced with critical illness

Preferred Care is an indemnity hospitals insurance plans which provides you and your family the peace of mind to benefit from world-class medical care if you ever become critically ill, giving you the best chance of recovery. It gives you access to world-class medical centres in USA for the best medical advice and treatment planning; it provides you with a Personal Care Manager, who is a specially trained medical professional, to fully assist you and a companion during and after treatment in designated US hospitals; and it provides you with annual coverage of up to US\$2 million for medical treatment. All at an affordable premium and levy¹.

Eligibility

- You are eligible to apply if you are:
 - an HSBC account holder
 - aged over 18 and below 75
 - not covered by any other Preferred Care or Private Care policy(ies)
- Eligible family members:
 - spouse: aged over 18 and below 75
 - children: aged over 1 and below 27
- You can insure your children only under this plan, without the need for an adult to be insured as well
- Renewal¹ is arranged automatically, up to 99 years of age
- In most cases a medical examination is not necessary

¹ The terms of any renewal may not be the same as the expiring policy and will be determined by the AXA. AXA shall not be under any obligation to renew the existing policy or any part thereof and shall not be obliged to give any reason for its decision.

Benefits

The programme has three integrated parts:

1. Medical advice and treatment planning

- If you are diagnosed with one of the covered conditions, this programme will help you to access world-class medical centres and orchestrate the diagnostic verification and treatment planning process
- Covers the following critical illness treatments:
 - Cancer treatment
 - Heart surgery for coronary artery bypass or valve replacement
 - Interventional cardiology procedures for opening of narrowed coronary arteries
 - Selected Neurosurgery for tumors and vascular repair
 - Major vascular surgery
 - Major organ transplants

- You will be assigned a Personal Care Manager, who along with an entire medical team will help you and your family to understand your options and determine the right treatment plan
- Our local National Medical Advisor, a doctor in Asia, who is appointed by Preferred Global Health, Ltd. ("PGH")*, or a PGH staff doctor, will guide and manage the collection of all necessary information, and coordinate the dialogue between the medical specialists involved at home and overseas
- Once you have chosen a treatment plan, Preferred Care will make arrangements for your treatment at one of the hospitals that are in the designated hospitals in the USA

2. Patient support and treatment

- Preferred Care assist you with the logistics when travelling to the USA for treatment:
 - Visa application
 - Accommodation arrangements
 - Airport transfers
 - Ambulance service if necessary
 - Orientation to the city, treatment facility and services available to you during your stay in the USA
 - Chinese language translation and interpretation assistance if necessary
- Your personal Care Manager will support you throughout the treatment process:
 - Get answers about your treatment plan and ensure that you receive the optimal medical care
 - Help with the hospital admittance process
 - Serve as a contact to your family giving them regular updates on your condition
 - Assist with planning for ongoing care in your country when your treatment in the USA is complete

3. Financial protection

- Annual coverage of up to US\$2 million for medical treatment and services, including a US\$20,000 travel and accommodation allowance per episode of treatment
- All necessary costs are paid by us in full and directly. There are no claim forms and no deductibles

Premium

Age group (inclusive)	Annual premium per insured person (HK\$)
1 – 19	1,177.80
20 – 29	1,552.20
30 – 34	2,269.80
35 – 39	3,471.00
40 – 44	5,499.00
45 – 49	7,183.80
50 – 54	10,116.60
55 – 59	14,297.40
60 – 64	19,016.40
65 – 69	24,429.60
70 – 74	28,080.00
75 – 79 ²	30,427.80
80 – 89 ²	31,200.00
90 – 99 ²	31,987.80

Please note:

- Premium rates are not guaranteed and terms and conditions of renewal may also change. AXA reserves the right to review and adjust the premium rates on each policy anniversary of the Preferred Care policy. Please refer to the premium table as shown in this factsheet for details of the premium rates for different plan options. We consider factors including but not limited to (i) AXA's claims and policy persistency experience and (ii) expected claim outgo from all policies under this plan in future years, reflecting the impact of medical trend, medical cost inflation and product feature revisions.
- This premium table does not include levy which is collected by the insurance authority. Levy collected by the insurance authority through AXA will be imposed on the policy at the applicable rate. Policyholders must pay the levy in order to avoid any legal consequences.
- Unless otherwise specified, all ages mentioned in this factsheet shall refer to the age on the last birthday.

Main policy exclusions

- Pre-existing conditions³ and associated complications
- Treatments which are experimental, investigative in nature, not prescribed or administered by a US based participating hospital or participating practitioner or not medically necessary for the insured person's illness or condition
- Drug addiction, alcoholism or suicide
- Human Immunodeficiency Virus (HIV) related disability
- Care provided by private nurses which were requested by the insured person
- Surgery or treatment for cosmetic purpose
- All complications arising from pregnancy
- Non-performance, omission, default, or negligence of any of the service providers, including PGH
- Treatments not approved through the pre-treatment review and approval process
- Expenses that are recoverable from a third party
- War, radiations or terrorism

² For renewal only.

³ Subject to the approval by AXA, after two years of coverage and four years without treatment or evidence of the pre-existing condition, you can re-apply for coverage. The definition of pre-existing condition is defined in the policy document. Please refer to the policy for details.

- Illness or injury arising out of and in the course of employment or covered under workers' compensation or occupational accident benefits

Please refer to the policy provisions for the full list of exclusions.

Right to return policy

If you change your mind about buying this policy within **30 calendar days** of receipt of your policy, you can return your policy for cancellation and refund any premium and levy[^] you have paid if you have not made any claim during this period.

Cancellation

You may cancel the policy in writing to AXA at any time and provided no claim has arisen during the then current period of insurance, you shall be entitled to a refund of premium at AXA's short period rates in the provision for the period the policy has been in force.

AXA is entitled to revise the conditions of the policy with effect from a date to be determined by AXA in writing to you. You are entitled to cancel the policy within 30 days of receiving notification of the change. As such, the insurance ends on the date on which the revision is to take effect.

Termination

AXA may at any time terminate the policy if the policyholder or any insured person has at any time:

- (a) misled AXA by misstatement;
- (b) knowingly claimed benefits for any purpose other than as are provided for under the policy;
- (c) agreed to any attempt by a third party to obtain an unreasonable pecuniary advantage to AXA's detriment and/or;
- (d) failed to act with utmost good faith.

AXA will serve an immediate cancellation notice by sending registered letter to you at your last known address and in such event will return to you the premium paid less the pro rate portion thereof for the period the policy has been in force.

If an insured person settles permanently outside of Asia the coverage ends for that insured person upon the next renewal date.

Act now!

Get more details about Preferred Care today and provide yourself and your family access to the US's finest critical care at an affordable price:

- Go to www.hsbc.com.hk
- Visit any HSBC branch

Frequently asked questions

Would I be able to choose the hospital under Preferred Care?

Based on your condition, Preferred Global Health, Ltd. (PGH)* will recommend an appropriate hospital from the higher ranking hospitals in the USA. PGH will consider all reasonable requests for treatment location that are medically sound and involving hospitals in the USA for the patient's condition.

* PGH is a third party service provider which is responsible for travel and accommodation arrangements, communications and coordination with the National Medical Advisors and for all contacts with participating practitioners and hospitals in the USA, and not an agent of AXA. AXA shall not have any obligation or liability whatsoever in relation to the services provided by PGH, and shall not be responsible for any act or failure to act on the part of PGH.

Are there any exclusions, such as pre-existing conditions under Preferred Care?

After two years of coverage and four years without consultation, treatment or medication of the pre-existing condition you can re-apply for coverage, and whether such coverage can be granted is determined by us on a case-by-case basis. Unlike some other health care programmes, pre-existing conditions are not automatically excluded forever. Other standard exclusions apply, such as claims arising from acts of war/terrorism, radiation, drug abuse, illegal activities, and HIV/AIDS. Please refer to the policy provisions for the full list of exclusions. This programme is specifically designed to be free from restrictive policy language – nonetheless we encourage you to discuss the policy wording with your Wealth Management Manager/ Premier Relationship Manager.

Why do I need this programme?

Critical illnesses are life threatening conditions and require advanced medical technology and expertise to achieve the most effective treatment and rapid recovery.

Some health care programmes may offer payment for treatment abroad and will claim to allow your choice of treatment destination. However, closer review of the coverage under this option is usually offered under special conditions (such as temporary trips overseas, emergencies, etc). Furthermore, you may be required to make the payment yourself, then be reimbursed, sometimes for less than the full cost you incurred. Travel and accommodation costs are usually not covered, even though these can be substantial. Lastly, many health care programmes do not provide you with personalised attention to find the best treatment or assist you during the treatment process.

The Preferred Care programme was designed specially to bring you personalised service and advanced treatment at designated hospitals in the USA. Payment is direct, causing you no financial disruption. Furthermore, Preferred Care pays for the necessary additional services for you and a companion. This includes airfare and a generous accommodation allowance. Most importantly, you and your family have the full 24-hour support of a team of trained professionals to support you every step of the way.

Do I need pre-approval before accessing the medical treatment?

Yes, payment of medical treatment costs and PGH Services under this programme is granted only if prior approval has been obtained from PGH for the treatment in question. You should refer to the insurance policy for the detailed terms, conditions and exclusions.

What do I need to do to get reimbursement after medical treatment?

If costs are inadvertently paid by you, invoices and required documents should be submitted to PGH within 90 days of the date on which the costs were incurred. Any claims payable under the policy shall be in US Dollars, unless otherwise stated. You should refer to the insurance policy for the detailed terms, conditions and exclusions.

After the treatment in the USA, will follow up service in Hong Kong be included in the coverage?

Preferred Care only covers the treatment that is arranged by PGH and incurred in an US hospital. While it does not cover the follow-up treatment costs outside of the USA, customers are not abandoned after leaving the US hospital. A full plan and coordination is provided between the US and Hong Kong doctors for follow-up care. Treatment cost in the USA, which is covered by Preferred Care, usually represents a bigger portion of the overall cost. You can arrange local medical insurance to cover the remaining local medical care cost which should be smaller by comparison.

If customer is suffering a covered illness, how can he travel to the USA?

PGH will assess individual's condition and advise if the patient can travel to the USA for treatment. Medical emergencies do require immediate local treatment, nonetheless most critical illness cases are not emergencies (e.g. cancer). Even if your condition is not suitable for travelling, you can still make use of the advice and support service provided by PGH. Once medically stable, you can make full use of the program.

Does this replace my medical insurance plan?

It is not designed to replace local medical insurance or treatment. Preferred Care is designed to offer you the advanced treatment and service that you may need in the USA in case you require any of the covered treatments.

If I move to other countries, will I be able to continue in the programme?

You can still continue the programme as long as you are residing in Asia including Australia, Bangladesh, Brunei, Burma, Cambodia, Hong Kong SAR, India, Indonesia, Japan, Korea, Laos, Macau SAR, Malaysia, People's Republic of China, New Zealand, Pakistan, Philippines, Singapore, Sri Lanka, Taiwan, Thailand and Vietnam. If you settle permanently outside of Asia, your coverage will end upon the next renewal date.

Why there are only 6 areas being covered?

These are the most common critical illnesses that require advanced medical technology and expertise to achieve the most effective treatment and rapid recovery.

Is the premium and levy^ guaranteed to remain unchanged?

The premium and levy^ depends on your attained age at the time of renewal but it is not guaranteed to remain unchanged. We reserve the right to adjust premium and levy^ for particular categories of insured persons if considered to be necessary. We will, however, give you sufficient written notification in advance.

How can I manage my policy?

You can call 2867 8678 should you have any queries about your policy, or manage your policy at ease by e-Policy Servicing after logging on to HSBC Internet Banking if you are a HSBC internet banking customer. This online service provides you with 24-hour access to your policy details and allows you to submit policy service requests without hassle.

^Levy collected by the Insurance Authority will be imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2867 8678.

Important notes:

The above policy is underwritten by AXA General Insurance Hong Kong Limited ("AXA"), which is authorised and regulated by the Insurance Authority of the Hong Kong SAR. AXA will be responsible for providing your insurance coverage and handling claims under your policy. The Hongkong and Shanghai Banking Corporation Limited is registered in accordance with the Insurance Ordinance (Cap. 41 of the Laws of Hong Kong) as an insurance agent of AXA for distribution of general insurance products in the Hong Kong SAR. General insurance plans are products of AXA but not HSBC.

For monetary disputes arising between HSBC and you out of the selling process or processing of the related transaction by HSBC, HSBC will enter into a Financial Dispute Resolution Scheme process with you. On the other hand, for any disputes over the terms and conditions of your policy, AXA will resolve with you directly.

Please be aware the coverage on this policy may overlap with your existing protection plans coverage or exceed your needs, so please refer to the policy for the detailed introduction and coverage. We also suggest you to compare our plan's coverage with your other existing protection plan. You are welcome to contact our staff for any enquiry.

An insured person shall not be covered under more than one Preferred Care or Private Care policy issued by AXA. If an insured person is covered under both the Preferred Care policy and the Private Care policy, AXA will deem such insured person to be insured only under the policy which provides the greatest amount of benefit. If the insured person is covered under more than one Preferred Care policy or more than one Private Care Policy, AXA will deem such insured person to be insured under the policy which was issued at the earliest date (in chronological order). AXA will refund any duplicated insurance premium payment which may have been made.

According to the rules of the Voluntary Health Insurance Scheme ("VHIS"), a one-off migration facilitation will be offered to existing policyholders of individual indemnity hospital insurance within 10 years since the full implementation of VHIS on 01 April 2019. Invitation will be issued to the relevant policyholders when we initiate the migration offer.

The information shown is intended as a general summary. You should refer to the insurance policy for the detailed terms and conditions.

In the event of any inconsistency between the English version and the Chinese version, the English version shall prevail.

Issued by AXA General Insurance Hong Kong Limited

(Only available for distribution in the Hong Kong Special Administrative Region)

March 2021