INTERNATIONAL HEALTHCARE PLANS
for Individuals and Families

Allianz Care
Making your life simpler, easier and safer

In a world that brings people to be more and more mobile, we ensure that you don’t have to worry about access to healthcare, anywhere your busy life takes you. Whether you are moving abroad for business or to enhance your educational background, whether your family moves with you or remains at home, we are here to support.

We are Allianz

We have been in the international health insurance business for more than 50 years. We are the expert healthcare partner chosen by expats who want to feel valued and cared for.

As a wholly owned subsidiary of the Allianz Group, we are able to draw on the resources and expertise of one of the world’s leading financial services providers. The Allianz Group provides financial services to more than 86 million customers around the globe.
International healthcare insurance or travel insurance? Which one do I need?

Not sure which one is more appropriate for your case? We give you a quick explanation below so you can consider if international healthcare insurance is what you need.

International health insurance is designed for people who are abroad for long periods of time (on their own or with their families) and want to be sure that they are covered for any medical needs. It is not the same as travel insurance, as it provides a more durable and comprehensive cover:

<table>
<thead>
<tr>
<th>International health insurance</th>
<th>Travel insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Duration</strong></td>
<td></td>
</tr>
<tr>
<td>Long – the insured person is</td>
<td>Short – the insured person is</td>
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<tr>
<td>abroad for a few months or</td>
<td>abroad for a few days or weeks.</td>
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<tr>
<td>years.</td>
<td></td>
</tr>
<tr>
<td><strong>Who?</strong></td>
<td></td>
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<tr>
<td>Expatriates living abroad or</td>
<td>People going on holidays or short trips.</td>
</tr>
<tr>
<td>travelling for long periods of</td>
<td></td>
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<tr>
<td>time (e.g. for months) due to</td>
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<tr>
<td>work or lifestyle.</td>
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<tr>
<td><strong>Cover</strong></td>
<td></td>
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<tr>
<td>Planned, unplanned and</td>
<td>Lost luggage/travel documents, cancelled trip, delayed departure, emergency medical treatment.</td>
</tr>
<tr>
<td>day-to-day medical treatment</td>
<td></td>
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<tr>
<td>(either in-patient or out-patient), e.g. surgery, dental treatment, routine health checks, etc.</td>
<td></td>
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<tr>
<td><strong>Focus</strong></td>
<td></td>
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<tr>
<td>The new life abroad.</td>
<td>The trip.</td>
</tr>
<tr>
<td><strong>Premium</strong></td>
<td></td>
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<tr>
<td>Per year – renews each year.</td>
<td>Per trip – one-off.</td>
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We are flexible
- Opportunity to choose among different levels of cover to adjust to your real needs and budget – also different people under the same policy can select different plans!
- Discounts available to families insuring two or more children
- Rewarding loyalty – new benefits (e.g. fitness assessment) become available after your first policy renewal

We are reliable
- 24/7 support channels – we are always with you, day and night, through a range of support services, e.g. multilingual Helpline, Expat Assistance Programme, Travel Security Services and more
- A medical network of more than 900,000 medical providers around the world – no matter where you are, we can help

We are digital
- With MyHealth digital services you can manage cover and access services anytime, anywhere
- HealthSteps, our digital fitness app, encourages your healthy lifestyle
- We reimburse you the cost for a health app of your choice

We are family-friendly
- A range of family-focussed benefits (e.g. first aid course for parents, well-child tests, child hearing tests, vaccinations and more)
- Enhanced maternity cover

International health insurance – we know what’s important to you

Moving abroad can be an adventure but leaving the familiar behind can be tough. Allianz Care is here to support you – our international healthcare plans have been designed specifically to meet your needs. From everyday doctor visits to more specific treatments, we’ve got you covered.
Who are our plans for?

Our plans are so comprehensive and flexible that they can be suitable for almost all types of customers and situations. A few examples of customers we currently help:

Single executive relocating abroad for business

I need international health insurance, as I am about to move abroad and I plan to travel frequently back home to visit my family. I am a busy executive and I have no time for administration: my policy has to be easy to manage. I am also looking for value for money.

What we offer:
- The option to select your geographical area of cover to include the regions where you are going to live and travel (terms and conditions apply).
- Comprehensive modular solutions, so you can choose what you want to be covered for, e.g. in-patient benefits only, or else you can add out-patient, dental or repatriation – as per your needs and budget.
- The freedom to choose providers from our global medical provider network (good if you don’t know yet any provider in your new country) or else use your favourite provider in your new country, back home or anywhere.
- Loyalty benefits (new benefits become active on your policy from your first renewal).
- Innovative MyHealth Digital Services (desktop and mobile app version), allowing for online claiming, online policy administration and more.

Young student going to study at a foreign college

I need budget-friendly cover in case I need medical care while abroad. I also want that my parents feel reassured knowing that I am protected when I am away.

What we offer:
- A range of options that allow you to create your budget-friendly, yet comprehensive cover. You can select the geographical area of cover that you need, the level of cover that you need, and you can add a deductible to further reduce your premium.
- Digital access to your cover and services (including online claiming via mobile app or member portal) through our innovative MyHealth digital services.
- 24/7 multilingual Helpline, open day and night to assist you with simple cover queries or medical emergencies.
- Access to 24/7 Expat Assistance Programme (EAP), to support you with a wide range of challenges, e.g. cultural transition, work/study balance, etc.
- Medi24, a service available 24/7 in four different languages that allows you to talk to a nurse anytime, if you have a medical query.

Established family relocating abroad following one of the parents’ reassignment

We need healthcare cover for both when we are in the new destination country and when we travel back home. We will be new in the country and are not familiar with the healthcare system there.

What we offer:
- A range of family-friendly benefits, e.g. well-child tests, child home nursing, child hearing exam, first aid course for parents and more.
- Family discounts if you insure two or more children.
- The opportunity to personalise each family member’s cover (e.g. mum and dad can opt for a lesser level of cover than their children or else, as per their needs).
- The freedom to choose providers from our global medical provider network (good if you don’t know yet any provider in your new country) or else use your favourite provider in your new country, back home or anywhere.
- 24/7 support channels – e.g. multilingual Helpline, Expat Assistance Programme, Travel Security Services, Medi24.
Young couple relocating abroad for work and planning for a baby

What we offer:
• A range of prevention and wellbeing benefits – also access to HealthSteps, our digital fitness app, to encourage your healthy lifestyle.
• The opportunity to include infertility treatment cover.
• Generous range of maternity benefits, including breastfeeding consultations, pregnancy yoga classes, post-natal classes and more.
• The option to buy delivery-only cover (if in your destination country you have access to free or partially free pre-natal care) or a full maternity package, including pre- and post-natal care.
• The ability to add a baby to your policy without underwriting from birth (terms and conditions apply).

Mature couple planning to spend their retirement in a warmer climate abroad

We need an international healthcare plan that can give us peace of mind, should we need any medical attention while abroad. We will need cover for the small day-to-day things, but our main focus is on the bigger events (e.g. should we require hospitalisation).

What we offer:
• The ability to apply until the day before your 76th birthday.
• Generous in-patient cover, including things like hospital accommodation, surgery, organ transplant, etc.
• A range of benefits to cover the day-to-day medical care, including GP visits, prescription drugs, specialist fees, glasses and eye examination, etc.
• The freedom to choose providers from our global medical provider network (good if you don’t know yet any provider in your new country) or else use your favourite provider in your new country, back home or anywhere.
• A comprehensive Repatriation Plan that includes cover for the costs of someone accompanying the repatriated person.

Female moving abroad with her child to join her husband, who has already relocated following a job reassignment

I need a very comprehensive international healthcare plan to cover myself and my child, without obligation to include my husband on the policy, as he is already covered under his company’s healthcare scheme.

What we offer:
• No obligation to include both parents on the policy, so you don’t need to insure your husband if he doesn’t need this plan.
• A range of family-friendly benefits, e.g. well-child tests, child home nursing, child hearing exam, first aid course for parents and more.
• Generous range of maternity benefits, including breastfeeding consultations, pregnancy yoga classes, post-natal classes and more.
• The option to buy delivery-only cover (if in your destination country you have access to free or partially free pre-natal care) or a full maternity package, including pre- and post-natal care.
• Family discounts if at any point you insure two or more children.
How we can really help
The true story of one of our youngest members: baby Sofia.

Sofia's parents, Andrea and Melanie, have been living in Singapore for business reasons for the last 7 years. Andrea is originally from Italy and Melanie is French-Korean.

In 2017, Melanie became pregnant with twins and gave birth to two beautiful girls (Sofia and Elena).

Elena was in very good health, but unfortunately it was not the same for baby Sofia: after some examinations, the doctors identified that something was not right with her oxygen levels. She was immediately admitted to the intensive care unit, underwent some scans and was finally diagnosed with a very rare medical condition: her pulmonary valve was missing and she also had a hole in her heart.

Sofia’s situation was so severe that her parents were not sure if she was going to survive. It was very hard for them to see the little baby connected to all those tubes and not being able to hold her. But at least the couple felt relieved for having Allianz Care cover and support: “The last thing you want to do in this situation is worry about the costs of the treatment. We felt very supported by Allianz Care in this difficult time.”

The medical case was supervised in Allianz Care by dr. Sadhana, one of the doctors in our Medical Team. “Dr Sadhana followed up with us regularly to check how Sofia was doing, which was really nice and showed her human approach.”

Sofia had three surgeries in total. The main surgery happened when she was 8 kg, big enough to undergo an open-heart surgery that took six hours. The surgery was successful and Sofia recovered really well. The twins are almost two years old now and have just started pre-school.

Sofia is achieving all development milestones for a child at her age. She is a little fighter and went through a lot in her two years. We believe she takes her strength from her parents, as Melanie says: “Before having them, we weren’t even sure if we were ready yet to be parents but when Sofia and Elena were born, we had to be strong for them. We had to lead by example.”
How to create your plan

We know that undertaking an expat journey is a big task: international health insurance is just one item in a list of many. Our goal is to make choosing and purchasing cover as simple as possible.

We offer you a modular plan design: you can adapt your cover to suit your needs and budget requirements, choosing where you are covered, what is covered and (if you are insuring your spouse and/or your children under your policy) who is covered for what benefits.

Please ask your broker to guide you through choosing the most appropriate level of cover for your situation. To help you get started we have outlined below three simple steps.

Step 1 – Select a Core Plan

This will be your base cover, protecting you for any big health events, e.g. if you need hospitalisation. Our Core Plans include a wide range of in-patient and day-care treatments, as well as other benefits such as medical evacuation, nursing at home and rehabilitation treatment.

We offer three different Core Plans to choose from, each providing a different level of cover. If you wish, you can choose different Core Plans for each person under your policy:

- Care
- Care Plus
- Care Pro

Please refer to our Table of Benefits for further details.

Optional Core Plan deductible

If you wish to reduce the cost of your Core Plan, you can select a Core Plan deductible and we will apply a discount to your premium.
Step 2 – Choose your supplementary plans*

These will allow you to personalise your cover, by adding the type of supplemental benefits that you may need. You can choose what supplemental plan applies to what person under your policy, as well as what level of cover applies to each person*.

Maternity Plans

Are you planning for a baby? Then you may need one of these. Our Maternity Plans cover delivery, any complications of childbirth (e.g. C-section) and newborn care. We offer two levels of cover:

- Bloom
- Bloom Plus

If you are looking for a more extended maternity cover (i.e. if you want to be covered through your pregnancy as well, rather than only at the point of delivery), you can select our Active Family Out-Patient Plan which includes pre- and post-natal benefits. It also includes added-value maternity benefits, e.g. pregnancy yoga classes, breastfeeding consultation and more.

Out-patient Plans

These will cover you for day-to-day medical costs, e.g. if you need to go to your GP or need to buy prescriptions. We offer three levels of cover, plus a special one that is dedicated to families:

- Active
- Active Plus
- Active Pro
- Active Family

Optional Out-patient Plan deductible

If you haven’t selected a Core Plan deductible at Step 1, you may select an Out-patient Plan deductible; this will reduce your Out-patient Plan premium. Please note that either a Core Plan or an Out-patient Plan deductible can be selected.

Dental Plans

Ensure that your smile is protected. Our Dental Plans cover things like dental care, orthodontic treatment and prostheses. We offer two levels of cover:

- Smile
- Smile Plus

Repatriation Plan

This plan covers you in the event that you need to be repatriated to your home country, where the medical treatment you need is not available locally. We offer one, comprehensive level of cover for repatriation.

Step 3 – Choose your area of cover

We offer a choice of three different geographical areas of cover, so you can choose the one that is more applicable to your situation:

- Worldwide
- Worldwide excluding USA
- Africa only

* Certain plans can only be selected in conjunction with other specific plans. Please request from your broker a copy of our Table of Benefits for full details.
Cover for pre-existing and chronic conditions

Worried that a pre-existing condition in your (or your family’s) medical history may impact your cover acceptance? Don’t be. We can provide cover for the vast majority of pre-existing or chronic conditions.

On average, we accept for cover the 70% of applications received – without any additional exclusions and at no additional cost.

Within the limits of your chosen plan(s), we cover chronic conditions that arise while your membership is in effect. No specific restrictions apply to the maintenance or ongoing supervision of such conditions. Eligible costs are covered under the benefits outlined in the Table of Benefits.

Examples of pre-existing/chronic conditions which we may cover:

<table>
<thead>
<tr>
<th>Asthma</th>
<th>Kidney stones</th>
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</thead>
<tbody>
<tr>
<td>Dermatitis</td>
<td>Prostatitis</td>
</tr>
<tr>
<td>Gallstones</td>
<td>Thyroid disorders</td>
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<tr>
<td>Gastritis</td>
<td>Allergies</td>
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<tr>
<td>Hiatus Hernia</td>
<td>GERD</td>
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<tr>
<td>Hypercholesterolemia</td>
<td>Migraine</td>
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<tr>
<td>Hypertension</td>
<td>Infectious tropical diseases</td>
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How to access cover

We know that you will be busy getting settled in your new country, so we try to keep your policy administration down to a minimum. When it comes to accessing medical care, we have a very straightforward process in place that will allow you to concentrate only on getting better.

Direct settlement for in-patient costs

We have direct settlement arrangements in place through our global medical provider network. This allows you to access treatment on a cashless basis, as we will pay the eligible costs directly to your medical provider.

To access direct settlement, for all in-patient treatment and certain out-patient treatments, you/your medical provider will need to send us a completed Treatment Guarantee Form in advance of treatment. The Treatment Guarantee process helps us assess your case, organise everything with the hospital before your arrival and make direct payment of your hospital bill easier, where possible*.

Reimbursement for out-patient and dental costs

For out-patient treatment (e.g. doctors’ visits or dental treatments), you will simply settle the bill at the time of treatment and then claim back the eligible medical expenses from us*.

You can claim back your eligible costs via MyHealth digital services (either mobile app or online portal version): simply fill in a few key details of your claim, take and attach a picture of your invoices and press ‘Submit’.

* Detailed information and terms and conditions related to the Treatment Guarantee and claiming process are outlined in our Benefit Guide.

Swift 48 hour claims process

We can process a claim and issue payment instructions to your bank within 48 hours, when all of the required information has been provided.
Our digital services

We invest in digital processes to make things easier and faster for you.

MyHealth digital services

MyHealth is our digital platform, available in two versions: mobile application and online portal. MyHealth has been designed to give you easy and convenient access to your cover and services, no matter where you are or what device you have at hand.

Via your personal MyHealth account you can, for example:

- Submit claims in 3 simple steps
- View your claim history
- Find a hospital nearby
- Download your policy documents
- And more

Additional features are available on the mobile app version, e.g.:

- Access local emergency numbers
- Run a quick evaluation of symptoms
- Translate medical terms in a number of languages
- And more

HealthSteps

HealthSteps is our health and wellness app, designed to encourage and support a fitter and healthier life.

Our app allows you to:

- Set a personalised fitness goal
- Select an action plan (e.g. healthy eating, sleep better, better posture, etc.)
- Track and monitor daily activity (e.g. steps taken, calories burned, etc.)

Health Matters

At Allianz Care, we believe in care over cure. We are here to support our customers through Health Matters, our monthly newsletter that includes tips on a variety of health, prevention and wellbeing topics.

Medical Provider Finder

Our Medical Provider directory is available on our website: www.allianzcare.com/members. This online directory allows you to search for hospitals, clinics, doctors and specialists on a country by country basis, with the ability to narrow down the search to specific regions and cities. You can also search under Medical Practitioner categories e.g. Internal Medicine, as well as on specialism, e.g. General Surgery, Neurosurgery or Traumatology etc. You are not restricted to using the providers listed in this directory.

Digital Health

App reimbursement

We reimburse the costs for a health app of your choice! This is included in all Core Plans offered.
And remember, we are always on

We understand that emergencies or even simple concerns don’t always happen at a convenient time. We offer a range of support services which are available 24/7. No matter the time or the query, we’re here and ready to help. These services are included in all our policies.

Allianz Care Helpline
Our 24/7 multilingual Helpline is always available, day and night, to respond to any queries on your policy or if you need assistance in case of an emergency.

Medical evacuation service
Locally assisted medical evacuation services, using the most suitable local partner to provide fast, convenient and safe transport to a medical facility. You can access this service by simply calling our Helpline.

Medi24
You have access to Medi24, a service available in four languages, which provides 24/7 phone access to medical advice. You can talk to a nurse on the phone in relation to a range of medical topics.

Travel Security Services
We also offer 24/7 Travel Security services, catering for all travel safety queries (i.e. talking to a security specialist about your travel destination). This service is offered via WorldAware Ltd.

Expatriate Assistance Programme
Confidential and professional 24/7 multilingual support service to address a wide range of life challenges, e.g.:
- Work/life balance
- Parenting
- Cross-cultural transition
- Stress management
- Relationship challenges
- Legal and financial support, e.g. advice with buying a home

Available by phone, video, email or online chat via Morneau Shepell.
If you wish to apply for one of our international healthcare plans, your broker will provide you with an Application Form to complete OR will complete your details online on our Quote & Buy tool. You may include your spouse/partner and/or children on your application.

Your broker will then send your completed application to our Underwriting Team. We will underwrite it: it means that we will evaluate the status of your health (as well as the health of your dependants, if applicable), as declared by you on your application. This will determine what cover we can offer to you. When we finish our evaluation, we will contact you to confirm our cover offer. If you accept it, we will send you a Membership Pack containing your terms and conditions and your invoice with the applicable premium.

We will activate your cover (and the cover of any dependants). You will need to pay the premium by the deadline stated on your invoice.

**Green thinking**

We provide policy documentation to new members in soft copy – this means they are available immediately via email or by logging onto your secure MyHealth digital services.
Frequently asked questions

Q. Who is eligible to apply?
A. We will consider applicants for cover up to the day before their 76th birthday.

Q. Can I cover my family members under my policy?
A. Yes. The persons eligible for cover under your policy are your spouse/partner together with any children under the age of 18, or under the age of 24, if in full-time education.

Q. Will my plan cover any medical conditions that started before my policy was activated?
A. In many cases, yes. It will depend on the type of medical conditions and other factors. We will consider an applicant’s pre-existing medical conditions on a case by case basis during the underwriting process. This is the reason why we ask you to respond to some questions on your (and any dependants’) medical status as part of your application. Please respond to all these questions accurately: if you are in any doubt as to whether a fact is material or relevant to the application, then please disclose it.

Q. What is a deductible and how is it applied?
A. A deductible is part of the medical costs that you have to pay. If you chose a deductible among those available (e.g. €100), you will pay your medical bills until you reach that amount – then we will start covering your eligible expenses, according to the terms and conditions of your policy. If you select a deductible, we will apply a discount on your premium.

Q. What happens if I move country or return to my home country?
A. It is important that you contact us as soon as possible if you change your country of residence. This may impact your cover or premium, even if you are moving home or to a country within your existing area of cover. If you move to a country outside of your current geographical area of cover, your existing cover will not be valid and therefore it is very important that you discuss this with us or your broker as early as possible. Please note that cover in some countries is subject to local health insurance restrictions, particularly for residents of that country. It is your responsibility to ensure that your healthcare cover is legally appropriate. If you are in any doubt, please seek independent legal advice as we may no longer be able to provide you with cover. The cover provided by us is not a substitute for local compulsory health insurance.

Q. What happens if I am outside of my selected area of cover and I need a treatment?
A. Your policy offers you cover for the emergency treatments outside your area of cover. This means that you will be covered for the medical emergencies occurring during business or holiday trips outside your area of cover. Full details are available in our Benefit Guide.

Q. Which hospitals can I go to?
A. You can search for medical providers via the Hospital, Doctor and Health Practitioner Finder on our website: www.allianzcare.com/members. Please note that you are not restricted to using providers from this directory and we do not always hold direct settlement agreements with the providers listed. Treatment Guarantee is required prior to in-patient treatment, as well as certain other treatments as specified in your Table of Benefits. We will, where possible, try to arrange the direct settlement of your in-patient medical expenses with your medical provider.

Q. Can I cancel my cover?
A. You can cancel the contract in relation to all insured persons, or only in relation to one or more dependants, within 30 days of receiving the full terms and conditions of your policy or from the start/renewal date of your policy, whichever is later. Please note that you cannot backdate the cancellation of your membership. If you wish to cancel your cover or the cover of a dependant, a “Right to change your mind” form will be included in your Membership Pack which you will need to complete and return to us.

If you cancel your contract within this 30 day period, you will be entitled to a full refund of the cancelled member(s) premiums paid for the new Insurance Year, provided that no claims have been made.
For further details, please contact your broker