



It's time for a *fresh approach* to international health insurance

Now Health International is a specialist international health insurance provider. At the heart of our offer are benefit rich products and fast, accurate service.

With service centres in Hong Kong, Shanghai, Singapore, Jakarta, Dubai and the UK, we are strategically placed to serve the main expat hubs and emerging markets.

Our people are experts in international health insurance, delivering local market knowledge whenever you need it.

Why choose Now Health?

With us, it's simple to get immediate access to healthcare anywhere in the world. We make it easy to choose and use the right cover for you and your family.

- Our global underwriting partner is AXA. AXA has 103m clients worldwide, EUR 91.8b in revenues and EUR 5.1b in underlying earnings*
- Our quick and simple claims process means you can email or fax us all your claims for fast reimbursement
- Our innovative and peerless customer experience is delivered via a unique set of service promises which sets out how fast we will complete important tasks like processing claims
- We are international health insurance experts. Our senior management team has over 130-years combined experience
- WorldCare, our plan, was awarded Best International Private Health Insurance Product at the 2013 Professional Adviser International Fund & Product Awards
- You can access our customer service teams 24-hours a day, 365-days a year
- The state-of-the-art Now Health website provides instant access to plan documents, management information and claims tracking information. We were awarded Best Digital Insurance Firm at the Wealth and Finance Insurance and Reinsurance Awards 2015
- Our worldwide network of medical providers offers access to healthcare without having to pay up-front

- We operate a full medical underwriting approach which means that all our members know exactly what they're covered for
- 10 Now Health's local offices in Hong Kong, Shanghai, Singapore, Jakarta, Dubai and the UK offer a truly worldwide service

^{*} Source: www.axa.com/en/group/profile-and-key-figures/



Our promise to you

Your time is precious.
We understand that you need to know how quickly we will handle your requests. We have made six promises on how fast we will complete the following important tasks.

- 1 If you have had to pay for treatment and need to claim back your expenses, we will process eligible claims within **five working days**
- If you need day-patient or in-patient treatment, we will aim to pre-authorise your claim so you don't need to pay anything. We will place guarantees of payment with medical providers within two working days
- When you buy your plan, if we need to underwrite your application, we will respond to you within two working days
- 4 If you choose to receive your plan documents by post, we will dispatch them within **five working days**
- 5 If you choose to go paper-free, we will dispatch your membership card within **two working days**
- 6 We will respond to all your enquiries within one working day

It's easy to manage your cover online

The Now Health International website is designed to make it simpler to manage your international health insurance plan, from accessing your plan documents to tracking your claims.



Access your information from anywhere

With Now Health, all your details are stored in your secure online portfolio, which you can access 24-hours a day from anywhere in the world.

You can view and download all your plan documents from here, including your certificate of insurance, virtual membership card, members' handbook and any form you might need to manage your plan.

Track your claims online

You can track the status of all claims you make online. As soon as we receive your claim, we will notify you by email and SMS if you have chosen this option. You can then track the status of your claim using your secure online portfolio.

Remember you can fax or scan and email us all your claims when you have paid and are claiming back your expenses. We will process eligible claims within five working days so the process is fast and efficient.



How to use your insurance

When you need to use your plan, we've designed the process to be as straightforward as possible.

When you need out-patient treatment

If you select a plan that includes out-patient treatment, you can go to any medical practitioner, pay for your treatment and claim back your expenses. You won't have to pay anything if you have a nil excess and choose a medical provider from our network. Access an up-to-date network list from www.now-health.com or contact our customer service team.

When you need in-patient or day-patient treatment

If you need to be admitted to hospital for day-patient or in-patient treatment, contact us and we will place a guarantee of payment with the medical provider so you don't need to pay anything. We aim to do this within two working days of your call.

Accessing help

Our customer service teams around the world are accessible 24-hours a day, 365-days a year. This in-house service is available to you no matter where you are in the world, no matter of what time of day it is. They are on hand to answer any question about your plan, benefits, claims or if you have an emergency and need immediate help.

How to claim

If you've accessed treatment within our out-patient direct billing network or if we've placed a guarantee of payment for you, there's no need to do anything further.

If you've had to pay and claim, we will process your eligible claims within *five working days or less*.

You can track the status of all your claims in your secure online portfolio. We will email and SMS you updates as they happen.

All out-patient claims and in/day-patient claims under

USD 500 per medical condition All in/ day-patient claims over

USD 500 per medical condition

Complete the front of the claim form and email or fax it to us with your scanned receipt. Complete the front of the claim form and ask your medical practitioner to complete the back of the form. Email or fax it to us with your scanned receipts, diagnostic reports and/or discharge reports.

Your membership card

Once you join Now Health, we send you a membership card for each person covered on your plan. Our membership cards are designed to carry clear information on what you are covered for.

We work closely with the medical providers in our network on how to recognise Now Health cards. Any out-patient benefits you have selected will be clearly labelled on the card.



On the Card Front

01 Direct Billing

This will indicate what kind of direct billing you are entitled to. If you choose the Restricted Network, you will receive a different design of membership card

02 Product name and option

03 Your name

04 Membership number

This number is unique to each individual

05 Start date

This is the first day of your current plan year. It is in the format dd/mm/yyyy

06 Expiry date

This is the last day of your current plan year. It is in the format dd/mm/yyyy

07 Out-patient excess

This is the amount you pay towards the cost of any out-patient medical treatment.

The excess is applicable per insured person, per medical condition, per period of cover unless you have chosen the per visit excess option

08 Out-patient co-insurance

If you select the 10% co-insurance out-patient treatment option, it will say '10%' here and you will have to pay 10% of any out-patient treatment after the excess has been deducted to the medical provider. If you select the 20% co-insurance option, it will say '20%' here and you will have to pay 20% of any out-patient treatment after the excess has been deducted to the medical provider. If neither has been chosen, it will say 'Nil'

09 In/day-patient excess

This is the amount you pay towards the cost of any in/day-patient treatment.

The excess is applicable per insured person, per medical condition, per period of cover



On the Card Back

10 Online

Visit our website to login to your secure online portfolio and track your claims online

11 Customer service

You can call any of these numbers if you want to talk to us about any query. The number closest to you is normally at the top of the list

12 24-hour Emergency Assistance

If you have an emergency and need immediate help, call any of these numbers. The number closest to you is normally at the top of the list

13 Mailing address

If you want to post your claims or write us a letter, please use this address

14 This is the logo of the underwriter of your plan

Introducing WorldCare

We believe that WorldCare is one of the most benefit-rich products in the international health insurance market today. There are four levels available: Essential, Advance, Excel and Apex. This means you can select the level of cover you prefer to suit your lifestyle, from essential medical treatment, to a more comprehensive package.

WorldCare automatically provides you with access to healthcare anywhere in the world, other than the USA where we can only cover you for emergency treatment as standard.

A summary of each plan is shown below.

WorldCare Essential

Now Health's most affordable package is designed for people who want to be sure they can access in-patient and day-patient care when they need it while minimising their health insurance costs. You can choose a higher excess to lower your premiums if you only intend to claim for high-cost, infrequent medical events.

WorldCare Advance

This plan covers you for in-patient and day-patient treatment and out-patient care including GP and specialist appointments, physiotherapy and alternative therapies. It is suitable for people who want all-round medical care.

WorldCare Excel

This plan covers you for in-patient, day-patient and out-patient treatment at higher benefit levels than WorldCare Advance. It also includes routine and complex dental care after a nine-month waiting period.

WorldCare Apex

This is our highest level of cover. With very high benefit limits, it includes in-patient, day-patient, out-patient, and routine and complex dental treatment, at higher benefit levels than WorldCare Excel. WorldCare Apex also includes routine maternity care after a 12-month waiting period.

Additional Options

You can shape the cover you want by adding the following options:

- 1 Add a small level of out-patient charges cover to WorldCare Essential for added flexibility. There is a premium loading associated with this option
- 2 Add a small level of out-patient charges and maintenance of chronic condition cover to WorldCare Essential. There is a premium loading associated with this option
- 3 Choose fully-paid USA elective treatment within our network. A 50% co-insurance is applied when treatment is received out of network. There is a premium loading associated with this option

- 4 Take the Hospital Room Restriction benefit in Hong Kong (Hong Kong residents only) and receive hospital treatment in Hong Kong in a semi-private room. There is a premium discount associated with this option
- 5 Choose the Hospital Room Restriction benefit in Hong Kong and China (PRC residents only) and receive hospital treatment in Hong Kong in a semi-private room. In addition, in and day-patient treatment received within high cost facilities in Mainland China is subject to a 15% co-insurance up to an out-of-pocket limit of USD 7,500. There is a premium discount associated with this option
- 6 Select the co-insurance out-patient treatment option – pay either 10% or 20% of your out-patient treatment after any excess has been deducted (not available for WorldCare Essential). There is a premium discount associated with this option based on the co-insurance you have selected
- 7 Opt for our out-patient per visit excess you can have an excess of USD 25 per visit to an out-patient medical practitioner and a nil excess when accessing day-patient or in-patient treatment (not available for WorldCare Essential). There is a premium discount associated with this option
- 8 Two options of added-value cover for wellness, optical and vaccinations after a 6-month waiting period (not available for WorldCare Essential). There is an additional premium associated with this option based on which option you have selected
- 9 We also have a range of excesses to suit your lifestyle – from a high excess to reduce your premium, to a low or nil excess if you expect to use your plan frequently
- 10 Opt for our out-patient direct billing option you get a nil excess within our Restricted Network and a USD 100 excess out of the Restricted Network a more cost-effective solution than choosing a nil excess (not available for WorldCare Essential). There is a premium loading associated with this option. This option is only available for plans in-force on or after 1 August 2015 and for Residents of Hong Kong



WorldCare at a glance

A summary of each plan is shown below.

WorldCare Essential

- In-patient and day-patient care
- Out-patient care
- Routine & complex dental treatment
- Routine maternity care
- USA elective treatment
- Out-patient charges
- Out-patient charges - Option 2
- HK hospital room restriction
- HK & PRC hospital room restriction

WorldCare Advance

- In-patient and day-patient care
- Out-patient care
- Routine & complex dental treatment
- Routine maternity care
- USA elective treatment
- Co-insurance out-patient treatment
- Out-Patient Per Visit Excess
- HK hospital room restriction
- HK & PRC hospital room restriction
- **Out-Patient Direct** Billing Restricted Network*
- Wellness, optical and vaccinations
- Wellness, optical and vaccinations - Option 2

WorldCare Excel

- In-patient and day-patient care
- Out-patient care
- Routine & complex dental treatment
- Routine maternity care
- USA elective treatment
- Co-insurance out-patient treatment
- Out-Patient Per Visit Excess
- HK hospital room restriction
- HK & PRC hospital room restriction
- **Out-Patient Direct** Billing Restricted Network*
- Wellness, optical and vaccinations
- Wellness, optical and vaccinations - Option 2

WorldCare Apex

- In-patient and day-patient care
- Out-patient care
- Routine & complex dental treatment
- Routine maternity care
- USA elective treatment
- Co-insurance out-patient treatment
- Out-Patient Per Visit Excess
- HK hospital room restriction
- HK & PRC hospital room restriction
- **Out-Patient Direct** Billing Restricted Network*
- Wellness, optical and vaccinations
- Wellness, optical and vaccinations Option 2



X Not covered



^{*} Only available for plans in-force on or after 1 August 2015 and for Hong Kong residents.

WorldCare benefit schedule

Be	enefit	Essential	Advance	Excel	Apex
Anr	nual Maximum Plan Limit	USD 3m	USD 3.5m	USD 4m	USD 4.5m
1.	Maintenance of Chronic Medical Conditions	Not covered	Up to USD 15,000	Up to USD 20,000	> Full refund
2.	Hospital Charges, Medical Practitioner and Specialist Fees i) Hospital charges for in-patient and day-patient treatment ii) Related ancillary charges	 (i) Full refund (ii) Up to USD 1,500 per medical condition 	(i) Full refund(ii) Up to USD 1,500 per medical condition	ii) Full refund iii) Up to USD 2,000 per medical condition	ii) Full refund iii) Up to USD 2,500 per medical condition
3.	Diagnostic Procedures	 Full refund for in-patient pre and post-operative scans 	Full refund	Full refund	Full refund
4.	Emergency Ambulance Transportation	Full refund	Full refund	Full refund	Full refund
5.	Parent Accommodation	➤ Full refund	Full refund	Full refund	Full refund
6.	Renal Failure and Renal Dialysis i) Treatment of renal failure, including renal dialysis on an in-patient basis ii) Treatment of renal failure, including renal dialysis on an a day-patient or out-patient basis	(i) Up to six weeks full refund for in-patient pre and post-operative care (ii) Not covered	(i) Up to six weeks full refund (ii) Up to USD 10,000	(i) Up to six weeks full refund (ii) Up to USD 25,000	(i) Up to six weeks full refund (ii) Up to USD 75,000
7.	Organ Transplant i) Treatment ii) Donor medical costs	(i) Full refund (ii) Up to USD 50,000	(i) Full refund (ii) Up to USD 50,000	(i) Full refund (ii) Up to USD 50,000	(i) Full refund (ii) Up to USD 50,000
8.	Cancer Treatment	Full refund	Full refund	Full refund	Full refund
9.	Pregnancy and Childbirth Medical Conditions	> Full refund	Full refund	Full refund	Full refund
10.	New Born Cover	Up to USD 100,000	Up to USD 100,000	Up to USD 125,000	Up to USD 150,000
11.	Hospital Accommodation for New Born Accompanying their Mother	Full refund	Full refund	Full refund	Full refund
12.	Congenital Disorder	Up to USD 100,000	Up to USD 100,000	Up to USD 125,000	Up to USD 150,000
13.	Reconstructive Surgery	Full refund	Full refund	Full refund	Full refund
14.	Rehabilitation	Full refund for eligible in-patient treatment only up to 30 days per medical condition	Full refund for up to 180 days per medical condition	▶ Full refund	Full refund
15.	In-Patient Emergency Dental Treatment	Full refund	Full refund	Full refund	Full refund
16.	In-Patient Psychiatric Treatment	Full refund for up to 30 days	Full refund for up to 30 days	Full refund for up to 30 days	Full refund for up to 30 days
17.	Terminal Illness	In-patient and day-patient treatment up to USD 50,000 lifetime limit	Up to USD 50,000 lifetime limit	Up to USD 75,000 lifetime limit	Up to USD 100,000 lifetime limit
18.	Emergency Non-Elective Treatment USA Cover	Full refund for accident requiring in-patient or day-patient care Illness: in-patient and day-patient care up to USD 25,000	Full refund for accident requiring in-patient or day-patient care Illness: in-patient and day-patient care up to USD 25,000	Full refund for accident requiring in-patient or day-patient care Illness: in-patient and day-patient care up to USD 35,000	Full refund for accident requiring in-patient or day-patient care Illness: in-patient and day-patient care up to USD 50,000
19.	Evacuation and Repatriation Evacuation i) Transportation costs ii) Reasonable local travel costs to and from medical appointments iii) Reasonable travel costs for a locally-accompanying person iv) Non-hospital accommodation costs Repatriation to country of residence or nationality following treatment	ii) Full refund iii) Full refund iii) Full refund iii) Full refund iii) Up to USD 200 per day, up to USD 7,500 per person, per evacuation Full refund	(i) Full refund (ii) Full refund (iii) Full refund (iv) Up to USD 200 per day, up to USD 7,500 per person, per evacuation Full refund	 (i) Full refund (ii) Full refund (iii) Full refund (iv) Up to USD 200 per day, up to USD 7,500 per person, per evacuation Full refund 	ii) Full refund iii) Full refund iii) Full refund iii) Full refund iv) Up to USD 300 per day, up to USD 10,000 per person, per evacuation Full refund
20.	Wortal Remains i) Transportation of body or ashes of insured person to country of residence or country of nationality ii) Burial or cremation costs at the place of death	(i) Full refund(ii) Up to USD 10,000	(i) Full refund (ii) Up to USD 10,000	(i) Full refund (ii) Up to USD 15,000	(i) Full refund (ii) Up to USD 20,000
21.	Hospital Cash Benefit	USD 125 per night	USD 175 per night	USD 225 per night	USD 275 per night

Be	enefit		Essential		Advance		Excel		Apex
22.	Out-Patient Charges i) Medical practitioner fees ii) Physiotherapy		(i) Pre-operative consultations and diagnostic procedures 15 days from admission and post hospitalisation to max USD 2,000 or 30 days per medical condition (iii) Not covered		(i) Full refund (ii) Full refund up to 30 sessions	•	(i) Full refund (ii) Full refund	•	(i) Full refund (ii) Full refund
23.	Day-Patient and Out-Patient Surgery	•	Full refund	•	Full refund	•	Full refund	•	Full refund
24.	Out-Patient Psychiatric Illness	•	Not covered		Up to USD 2,500		Up to USD 5,000	•	Up to USD 7,500
25.	Alternative Therapies	•	Not covered		Full refund up to a maximum of 30 visits	•	Full refund	•	Full refund
26.	Nursing Care at Home i) Care given by a qualified nurse ii) Emergency out-of-hours medical practitioner (CP) home visits		(i) Not covered (ii) Not covered		(i) Full refund up to 45 days per medical condition (ii) Not covered	•	(i) Full refund up to 60 days per medical condition (ii) Not covered		(i) Full refund up to 120 per medical condition (ii) Up to five visits
27.	AIDS Cover only available after three years of continuous membership		In-patient and day-patient treatment only up to USD 25,000		Up to USD 25,000		Up to USD 40,000		Up to USD 50,000
28.	Maternity Costs incurred within 12 months of plan start date are excluded	•	Not covered	•	Not covered	•	Not covered		Up to USD 15,000
29.	i) Routine dental treatment ii) Complex dental treatment Costs incurred within nine months of plan start date are excluded. A co-insurance of 20% applies. Orthodontics subject to 50% co-insurance.	•	(ii) Not covered (iii) Not covered		(i) Not covered (ii) Not covered		(i) Up to USD 1,000 (ii) Up to USD 2,000		(i) Up to USD 1,500 (ii) Up to USD 3,000
Add	ditional options								
30.	USA Elective Treatment	•	Optional Up to USD 1.5m	•	Optional Up to USD 1.5m	•	Optional Up to USD 1.5m	•	Optional Up to USD 1.5m
31.	Co-Insurance Out-Patient Treatment	•	(i) Not covered	•	(i) Optional	•	(i) Optional	•	(i) Optional
	i) 10% Co-Insurance Out-Patient Treatment ii) 20% Co-Insurance Out-Patient Treatment	•	(ii) Not covered	•	(ii) Optional	•	(ii) Optional	•	(ii) Optional
32.	HK Hospital Room Restriction	•	Optional	•	Optional	•	Optional	•	Optional
33.	HK & PRC Hospital Room Restriction	•	Optional	•	Optional	•	Optional	•	Optional
34.	Out-Patient Charges This additional option replaces benefit 22 i) Medical practitioner fees ii) Physiotherapy		Optional (i) Up to USD 4,500 (ii) Full refund up to 10 sessions	A	Already covered	Α	lready covered	Al	lready covered
35.	Out-Patient Charges – Option 2 This additional option replaces benefit 22 i) Medical practitioner fees and maintenance of chronic conditions ii) Physiotherapy		Optional (i) Up to USD 4,500 (ii) Full refund up to 10 sessions	4	Already covered	Α	Iready covered	Al	lready covered
36.	Out-Patient Direct Billing Restricted Network (Only available to policies in-force on or after 1 August 2015 and to Hong Kong residents)	•	Not covered	•	Optional	•	Optional	•	Optional
37.	Wellness, Optical and Vaccinations Costs incurred within 6 months of the plan start date are excluded	•	Not covered		Optional Combined limit up to USD 500 Cover available after 6 months of continuous membership		Optional Combined limit up to USD 500 Cover available after 6 months of continuous membership		Optional Combined limit up to USD 500 Cover available after 6 months of continuou membership
38.	Wellness, Optical and Vaccinations – Option 2 Costs incurred within 6 months of the plan start date are excluded	>	Not covered		Optional Combined limit up to USD 1,000 Cover available after 6 months of continuous membership		Optional Combined limit up to USD 1,000 Cover available after 6 months of continuous membership	•	Optional Combined limit up to USD 1,000 Cover available after 6 months of continuou membership
Exc	ess options								
	ndard Excess		Nil		USD 100		USD 100		USD 100
Opt	cional Excess		USD 1,000		Nil		Nil USD 50		Nil USD 50
			USD 2,500 USD 5,000		USD 50 USD 250		USD 50 USD 250		USD 50 USD 250
			USD 10,000		USD 500		232 230		330 230
			USD 15,000		USD 1,000				
					USD 2,500				
	:-Patient Per Visit Excess		Not covered		Optional USD 25		Optional USD 25	•	Optional USD 25

Full refund Not covered Subject to limits Optional

What we don't cover

These are the limitations that apply in addition to any personal exclusion we may detail in your Certificate of Insurance. These include treatments that may be considered a matter of personal choice (such as cosmetic treatment) and other treatments that are excluded from cover to keep premiums at an affordable level. For a full description, please refer to the members' handbook.

- 1 Act of terrorism, war and illegal acts
- 2 Administrative and shipping fees
- 3 Alcohol and drug abuse
- 4 Chemical exposure
- 5 Cosmetic surgery
- 6 Contamination
- 7 Chronic conditions in respect of the Essential plan option
- 8 Dental care unless this additional option has been chosen
- 9 Developmental disorders
- 10 Dietary supplements
- 11 Eating disorders
- 12 Excess or co-insurance
- 13 Experimental treatment and drugs
- 14 Eyes and ears
- 15 External prosthesis
- 16 Failure to follow medical advice
- 17 Foetal surgery
- 18 Genetic testing
- 19 Hazardous sports and pursuits

- 20 HIV, AIDS or sexually transmitted disease except as stated in the benefit schedule
- 21 HRT unless caused due to medical intervention
- 22 Morbid obesity
- 23 Nursing homes, convalescence homes, health hydros and nature cure clinics
- 24 Pregnancy or maternity unless this option has been chosen
- 25 Pre-existing Conditions, unless agreed by Us in writing
- 26 Professional sports
- 27 Reproductive medicine
- 28 Routine examinations, health screening unless this additional option has been chosen
- 29 Second opinions
- 30 Self-inflicted injuries or attempted suicide
- 31 Sexual problems and gender re-assignment
- 32 Sleep disorders
- 33 Travel/accommodation costs except those pre-authorised by us
- 34 Travelling against medical advice
- 35 Treatment by a family member
- 36 Treatment charges outside of our reasonable and customary range

Join Now Health today

It's quick and easy to join Now Health International.

If you're looking for a simple approach to international health insurance, visit www.now-health.com or ask your intermediary for more information.

Intermediary details









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