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Healthcare  
GlobalReach Medical Insurance Plan

A man and a woman are riding a bicycle along a beach. The man is in the foreground, wearing a blue shirt, white t-shirt, and a straw hat, smiling. The woman is behind him, wearing a white dress and a straw hat, also smiling and holding a bunch of colorful balloons (red, yellow, blue, pink, green, white). They are riding on a sandy beach with the ocean in the background under a clear blue sky.

# Understanding “trouble free” – a key to your coverage

Supplementary guide on “trouble free” eligibility

1. Your condition was more than 5 years ago?

2. Your condition was within the past 5 years?

2a. If you have one of the below conditions and becoming stable?

2b. Have other chronic conditions?

3. Didn't meet "trouble free"?

Appendix 1 – Commonly known associated medical conditions

In **GlobalReach Medical Insurance Plan**<sup>^</sup>, the concept of being “**trouble free**” plays a central role in determining whether a pre-existing or chronic condition may be eligible for coverage.

This guide<sup>1</sup> explains how “trouble free” works, what exceptions may apply, and how you can regain protection for conditions previously excluded. Whether your condition happened years ago or more recently, this reference will help you understand what is covered, and how to make the most of your protection.

## Important concepts

What are the medical conditions we classify as pre-existing conditions? And how do we determine whether they are “trouble free”? Let’s take a closer look at these important criteria.

### “Trouble free” means when the insured:

1. has not required or had any medical opinion, including follow-up consultations and regular check-ups from registered medical practitioners, such as general practitioners, specialists, or other health professionals;
  2. has not taken any medication, including over the counter drugs, or follow a special diet;
  3. has not had any medical treatment; and
  4. has not had any symptoms;
- for the medical condition or any associated medical conditions

If the insured suffer from any pre-existing condition or any of its associated medical condition and does not meet any of the criteria above, the insured will not be considered as trouble free.

### “Pre-existing condition” means a medical condition which during the 5 years preceding the policy date:

1. has been diagnosed; or
2. for which the insured has received medication, advice or treatment; or
3. which the insured reasonably has known about based on our appointed medical doctor’s opinion; or
4. for which the insured has experienced symptoms even if the insured has not consulted a registered medical practitioner

<sup>^</sup> For details of the benefits, please refer to the product brochure of **GlobalReach Medical Insurance Plan**.

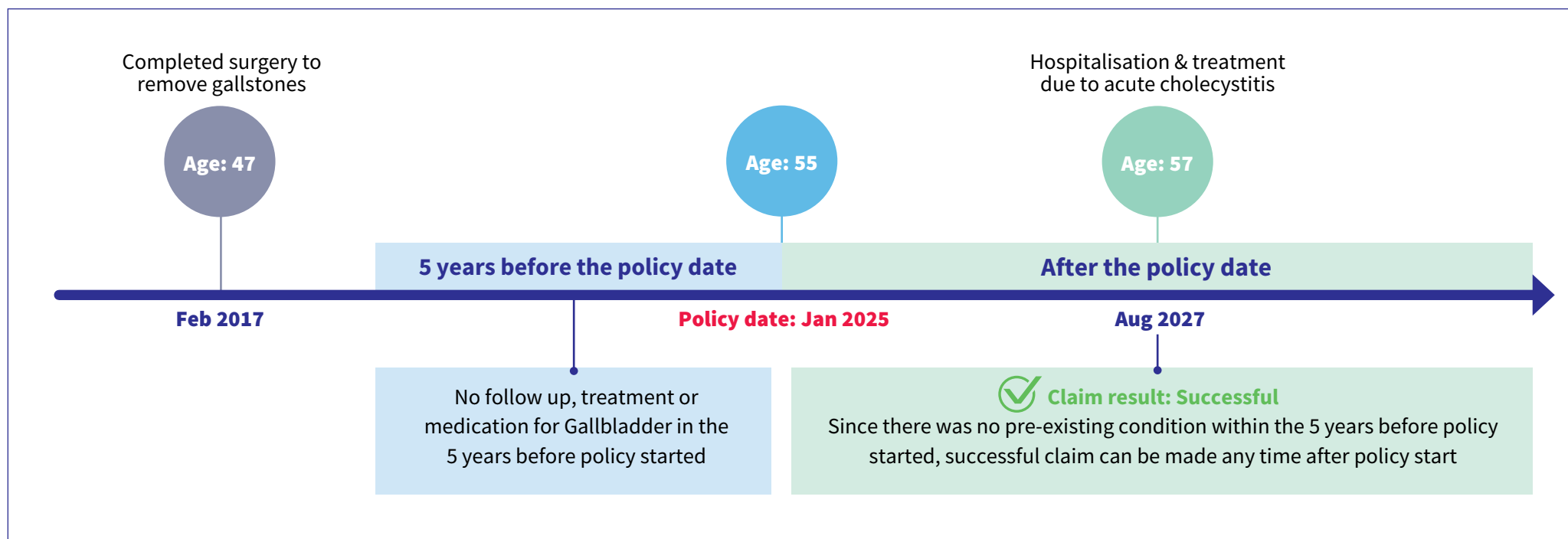
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## Your condition was more than 5 years ago? No “trouble free” period required

Any health condition, which is free from treatment, medication, follow-up consultations and regular check-ups, that occurred more than 5 years before your policy date is excluded from the pre-existing conditions assessment. In short, it doesn't affect your eligibility and you can make claims for this condition.

### Illustrative example 1

No history of any illness or condition within the 5 years before policy date



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Appendix 1 – Commonly known associated medical conditions

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## 2 Your condition was within the past 5 years?

Even if you had a medical condition within the 5 years before the policy date, you still have an opportunity to regain full protection, provided you maintain 2 consecutive years of stable condition and fulfill certain medical requirement for specific illnesses.

### 2a If you have one of the below conditions and becoming stable? You may still qualify as “trouble free”

Some chronic conditions are difficult to become fully “trouble free”. However, we don’t exclude you for that.

If your chronic condition is one of the followings, AXA applies special medical criteria to determine if you can be considered “trouble free”, even if regular check-ups are required.

#### Hepatitis B Carrier:

To be eligible, the insured must have:

Regular check-ups every 6 to 12 months and the results of which meet the following criteria:

- 1) ultrasound and immunological blood tests results are normal for 2 consecutive years; and
- 2) If HBsAg is positive, HBcAb and HBeAg have to be negative; and
- 3) Aspartate Aminotransferase (AST), Alanine Aminotransferase (ALT) and Alpha-fetoprotein (AFP) are within normal range; and
- 4) Liver ultrasound (USG) shows a liver normal in size, shape, and echotexture. There should be no signs of inflammation, scarring (fibrosis), or tumors (such as hepatocellular carcinoma). The liver should be homogeneous (uniform in appearance) without any focal lesions or areas of abnormal echogenicity

#### Cancer:

To be eligible, the insured must have:

- 1) All cancer treatments must be completed;
- 2) All test results must be normal, including but not limited to Cancer Marker, computed tomography (CT scan), magnetic resonance imaging (MRI scan), positron emission tomography (PET scan), PET-CT combined, PET-MRI combined or Ultrasound<sup>2</sup>; and
- 3) The attending physician confirms in writing the date of full remission of the insured for the assessment of “trouble free” period

#### Hypertension and / or Hyperlipidemia:

To be eligible, the insured must:

- 1) Be aged between 18 and 59 (at the beginning of the treatment which is subject matter of the relevant claim);
- 2) Have a BMI between 18 and 29.99 (at the beginning of the treatment which is subject matter of the relevant claim);
- 3) Be non-smokers; and
- 4) Not have the following conditions prior to policy date: coronary artery disease, heart enlargement, cerebrovascular disease, arrhythmia, diabetes, familial hyperlipidaemia, heart attack, ischemic heart disease, retinopathy, kidney abnormalities (such as abnormal kidney function, kidney complications, nephropathy), urinary abnormalities (such as proteinuria)

If the insured who meets the above requirements and also meets the following conditions continuously for 2 years after policy date, the pre-existing condition “Hypertension” and / or “Hyperlipidemia” will be considered “trouble free”:

- 1) BMI between 18 and 29.99;
- 2) No medical advice for hospitalisation or surgery due to hypertension or related conditions;
- 3) No evidence of organ damage caused by hypertension; and
- 4) Treatment and stable condition as follows:
  - a) Blood pressure range: 120-129/<90 mmHg;
  - b) Taking only one prescribed medication for hypertension; and
  - c) No increase in medication dosage or change to a new prescribed medication

## 2a

If you have one of the below conditions and becoming stable? You may still qualify as “trouble free”

### Illustrative example 2 – Hypertension

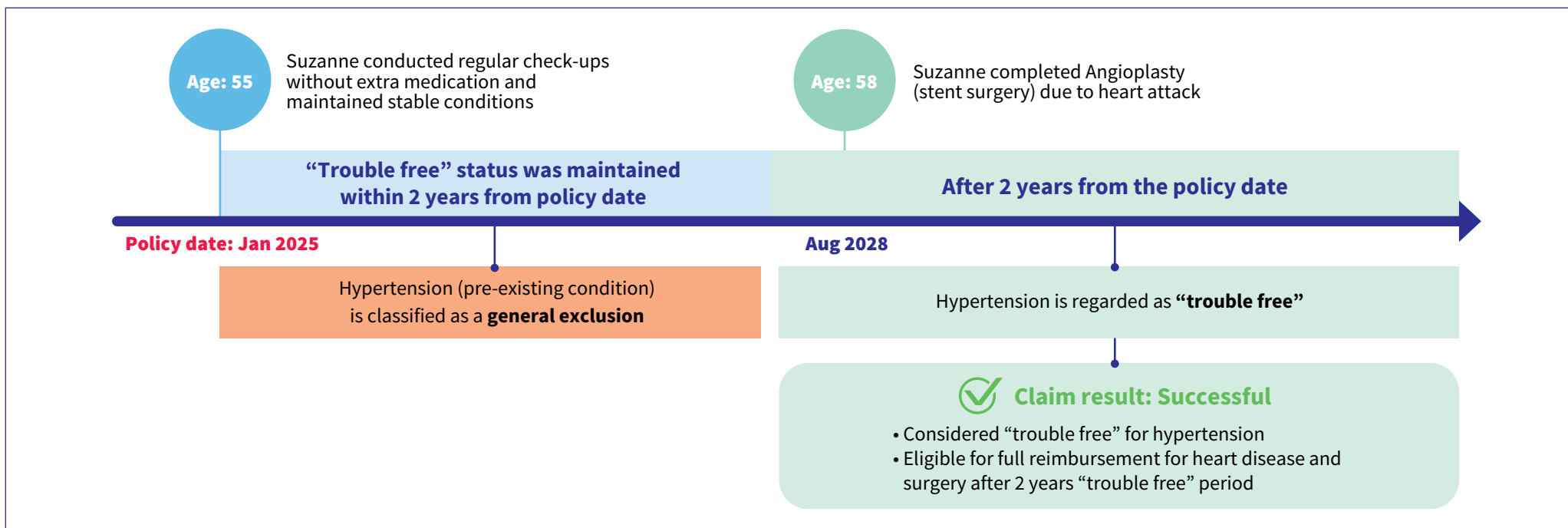


Suzanne was diagnosed with Hypertension 2 years before she took out the **GlobalReach Medical Protection Insurance Plan**<sup>^</sup> at age 55

- Policy owner and insured: Suzanne
- Age: 55, non-smoker
- Policy’s benefit level: Standard<sup>^</sup>

### Illustrative example 2.1

Suzanne completed Angioplasty 3 years after policy date. The claim was successful as 2 years’ “trouble free” period has been maintained.

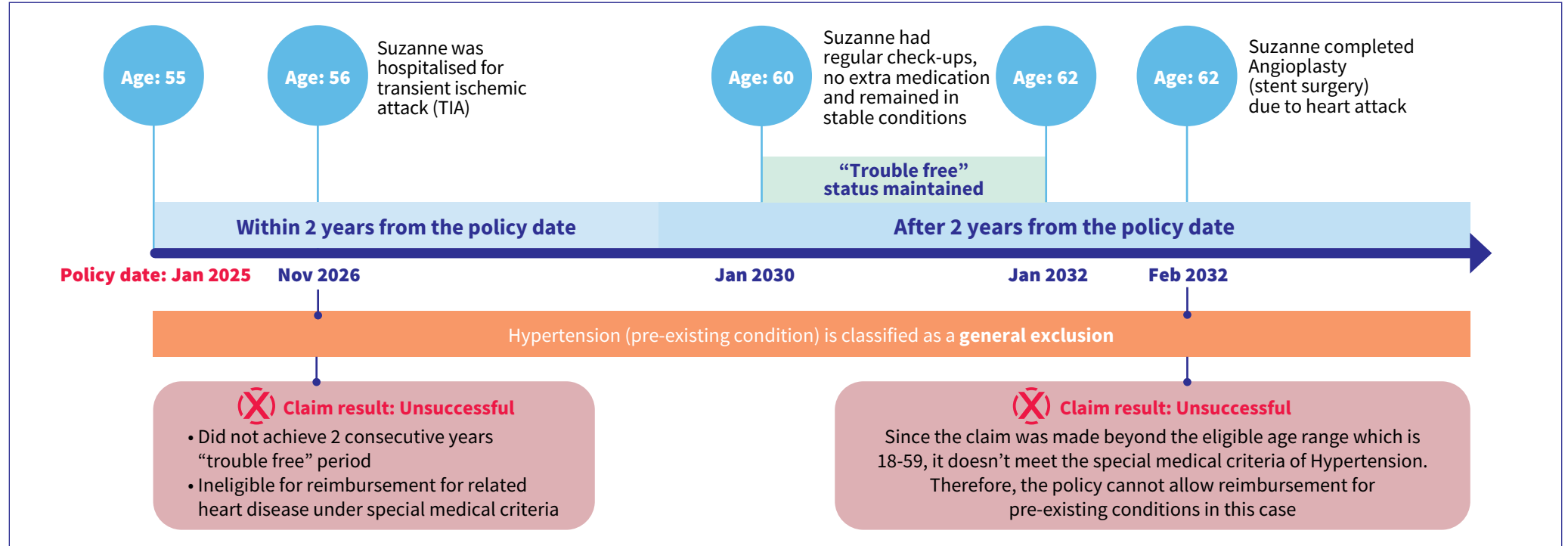


<sup>^</sup> For details of the benefits, please refer to the product brochure of **GlobalReach Medical Insurance Plan**.

## 2a If you have one of the below conditions and becoming stable? You may still qualify as “trouble free”

What to be aware of before getting coverage with 2 years “trouble free” period maintained:

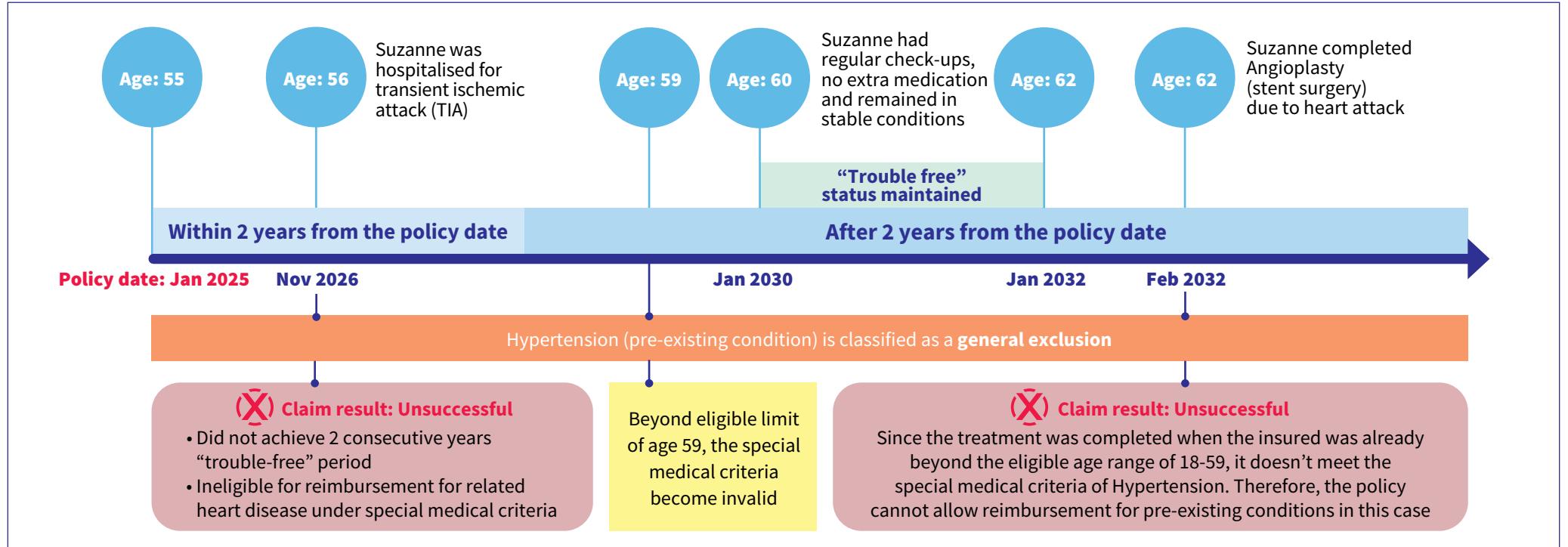
### Illustrative example 2.2



## 2a If you have one of the below conditions and becoming stable? You may still qualify as “trouble free”

What to be aware of before getting coverage with 2 years “trouble free” period maintained:

### Illustrative example 2.3



Suzanne was hospitalised for Hypertension-related transient ischemic attack (TIA) within the first 2 years of her policy, as she didn't maintain “trouble free” period, her claim was unsuccessful → to be considered “trouble free”, you need to have no symptoms and not require any treatment or fulfill the special medical criteria for a consecutive period of 2 years

Later on, she had Angioplasty subsequent to the 2 years' “trouble free” period, her claim was declined because she has exceeded the eligible age range of 18 to 59 at the beginning of the relevant treatment → to stay eligible, you have to meet all special medical criteria

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Appendix 1 – Commonly known associated medical conditions

## 2b







## Have other chronic conditions? You're still covered for unrelated illnesses

If you have a chronic condition, the policy may still cover treatments or illnesses that are unrelated to the chronic condition.

However, the chronic condition itself and any diseases or complications commonly associated with it are not considered “trouble free” and are explicitly excluded from coverage.

### For example

- If you have diabetes (a chronic condition) that doesn't meet the “trouble free” criteria, diabetes-related issues (e.g. diabetic retinopathy) won't be covered
- However, unrelated conditions (e.g. lung cancer) can still be covered under the policy

Examples of Chronic Condition	Commonly Associated Diseases* (including but not limited to ...)		Commonly Unassociated Diseases
<b>High Cholesterol</b>	Stroke Hypertension Heart disease	Arrhythmia Ischemic heart disease	 <b>Gastritis</b>  <b>Enteritis</b>  <b>Kidney stones</b>  <b>Liver disease</b>  <b>Cancer</b>  <b>Rheumatoid arthritis</b>
<b>Hypertension</b>	Stroke Coronary heart disease High cholesterol	Ischemic heart disease Hypertensive kidney disease	
<b>Diabetes</b>	Stroke Cataract Retinopathy	Diabetic nephropathy Ischemic heart disease	

\*For more on what is considered “associated medical conditions”, please refer to Appendix 1<sup>3</sup>.

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Appendix 1  
– Commonly known associated medical conditions

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## Didn't meet "trouble free"? There's still support

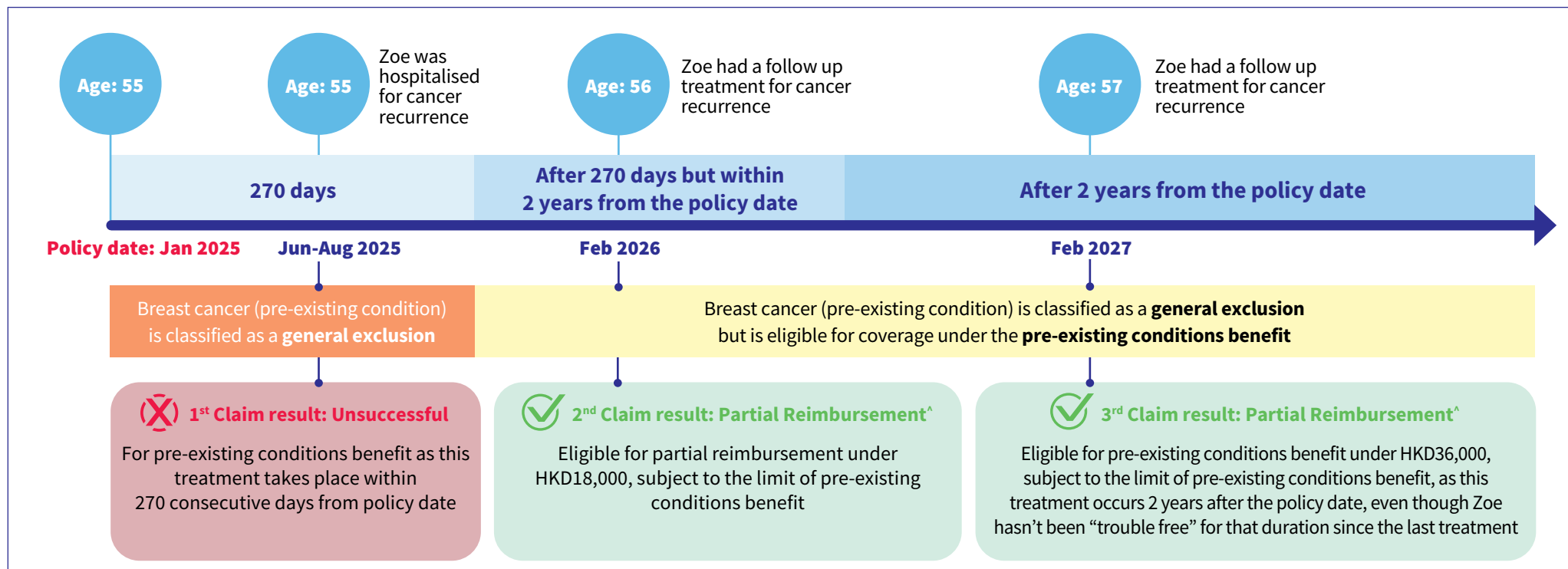
What's more, under AXA's **GlobalReach Medical Insurance Plan** – Comprehensive and Prestige benefit levels, even if you don't meet the full "trouble free" eligibility, you may still be eligible for partial reimbursement.

### Illustrative example 3.1



Zoe was diagnosed with breast cancer 3 years before she took out the **GlobalReach Medical Insurance Plan**<sup>^</sup> at age 55

- Policy owner and insured: Zoe
- Age: 55
- Policy's benefit level: Comprehensive<sup>^</sup>



<sup>^</sup> For details of the benefits, please refer to the product brochure of **GlobalReach Medical Insurance Plan**.

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Appendix 1 – Commonly known associated medical conditions

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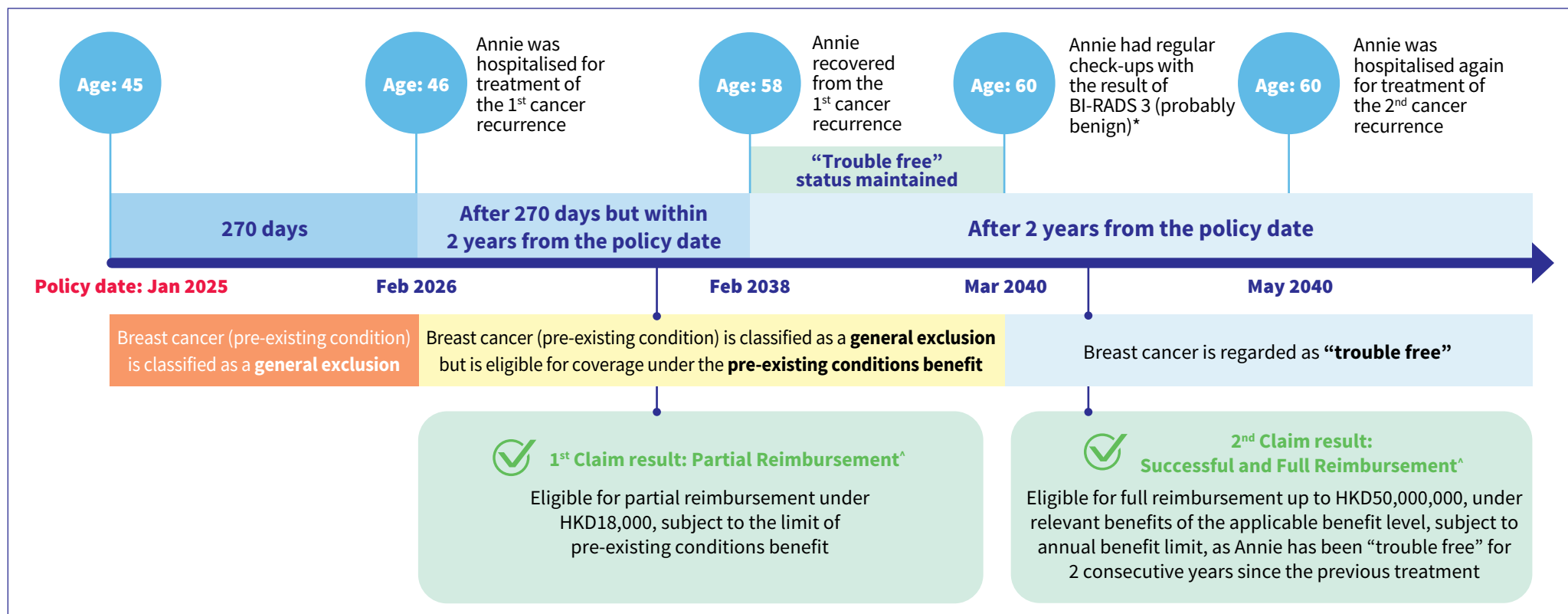
## Didn't meet "trouble free"? There's still support (cont'd)

### Illustrative example 3.2



Annie was diagnosed with breast cancer and completed the treatment 3 years before she took out **GlobalReach Medical Insurance Plan<sup>^</sup>** at age 45

- Policy owner and insured: Annie
- Age: 45
- Policy's benefit level: Prestige<sup>^</sup>



\* If your medical reports show abnormalities within the 2 years since the previous treatment, medication, follow-up consultations or regular check-ups, the "trouble free" period will be discontinued and another "trouble free" period of 2 consecutive years will be required in order to be able to claim for the eligible expenses arising from the pre-existing condition.

<sup>^</sup> For details of the benefits, please refer to the product brochure of **GlobalReach Medical Insurance Plan**.

## Appendix 1<sup>3</sup> - Commonly known associated medical conditions

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Appendix 1  
- Commonly known associated medical conditions

Endocrine, nutritional and metabolic disease	Disease of nervous system	Disease of circulatory system	Disease of the respiratory system
<ul style="list-style-type: none"> <li>Hypothyroidism</li> <li>Diabetes mellitus</li> <li>Congenital lactase deficiency</li> <li>Cushing's syndrome</li> <li>Hypogonadism</li> <li>Chronic adrenal insufficiency (Addison's Disease)</li> </ul>	<ul style="list-style-type: none"> <li>Huntington disease</li> <li>Spinal muscular atrophy</li> <li>Parkinson disease</li> <li>Alzheimer disease</li> <li>Epilepsy</li> <li>Chronic migraine</li> </ul>	<ul style="list-style-type: none"> <li>Essential hypertension</li> <li>Cardiomyopathy</li> <li>Atrial fibrillation and flutter</li> <li>Stroke</li> <li>Heart failure</li> <li>Aortic aneurysm</li> <li>Atherosclerosis</li> </ul>	<ul style="list-style-type: none"> <li>Chronic bronchitis</li> <li>Emphysema</li> <li>Chronic obstructive pulmonary disease (COPD)</li> <li>Asthma</li> <li>Pulmonary fibrosis</li> <li>Chronic sinusitis</li> </ul>
Disease of digestive system	Disease of musculoskeletal system and connective tissue	Disease of genitourinary system	
<ul style="list-style-type: none"> <li>Crohn disease</li> <li>Ulcerative colitis</li> <li>Chronic hepatitis B</li> <li>Chronic hepatitis C</li> <li>Cirrhosis of liver</li> <li>Irritable bowel syndrome</li> </ul>	<ul style="list-style-type: none"> <li>Systemic lupus erythematosus</li> <li>Sicca syndrome</li> <li>Rheumatoid arthritis</li> <li>Osteoarthritis</li> <li>Gout</li> </ul>	<ul style="list-style-type: none"> <li>Recurrent and persistent haematuria</li> <li>Chronic nephritis syndrome</li> <li>Nephrotic syndrome</li> <li>Chronic kidney disease</li> <li>Polycystic kidney disease</li> <li>Benign prostatic hyperplasia</li> </ul>	

**Remarks:**

1. This supplementary guide is for general reference only and aims to illustrate potential scenarios in which special medical criteria may be applied in considering the “trouble free” period. The special medical criteria are subject to change, which may be influenced by, including but not limited to, advances in medical technology, shifts in medical trends, updates to clinical guidelines and evolving clinical practices.
2. Specific regular check-ups apply to different types of cancer for the purpose of establishing “trouble free”. Please contact your financial consultant for more details.
3. This list is not exhaustive and is intended to illustrate some of the commonly known associated medical conditions. We will determine that a medical condition is associated with a pre-existing condition when this pre-existing condition is recognised either by your attending registered medical practitioner or our appointed registered medical practitioner in the concerned medical area, as a risk factor, or if it is directly or indirectly related to such medical condition. While we will not unreasonably refuse to pay benefit, we will reserve the right to determine whether a medical condition is associated with a pre-existing condition or not.

**Notes:**

- The designated medical insurance plans are subject to the terms, benefits and exclusions set out in the policy contract. AXA reserves the right to approve any application. This leaflet contains general information of the unique coverage for pre-existing conditions offered by AXA. It is not a policy. For detailed terms, benefits and exclusions of the designated medical insurance plans, please refer to the product brochures, proposal (if any) and policy contract, which will be made available by AXA upon request. “AXA” refers to AXA China Region Insurance Company (Hong Kong) Limited.
- The content of this leaflet is for informational purposes only. The criteria listed in the leaflet and / or any information which may be provided by financial consultant does not constitute medical advice. You are advised to consult your own doctors or healthcare providers about your specific health needs.



## **GlobalReach Medical Insurance Plan Supplementary guide on “trouble free” eligibility**

### **Find out more about AXA’s “trouble free” eligibility**

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