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Healthcare
Smart Medimoney

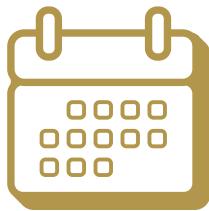
Your financial assistance during hospital stay



Product brochure

No one knows when an illness or accident will strike. When you are hospitalised because of injury or sickness, **Smart Medimoney** will give you daily allowance to pay for the unexpected medical expenses or to compensate for your loss of income. You may choose **Smart Medimoney** as stand-alone basic plan or supplement to other AXA basic plans.

Plan features



Daily Benefit



Guaranteed
renewability¹



Choice of 4 different
benefit levels



No claim discount²



Worldwide emergency
assistance³



Daily Benefit

Smart Medimoney provides Daily Benefit for confinement of up to 1,000 days^{4,5}. Should the insured be confined in intensive care unit, **Smart Medimoney** provides Intensive Care Daily Benefit⁶, which will be doubled of the Daily Benefit and payable up to 120 days⁴ to offer extra financial flexibility. Please refer to the benefit schedule for details.



Guaranteed renewability^{1,7}

You will enjoy guaranteed annual renewal¹ of your **Smart Medimoney**, giving you added peace of mind.



Choice of 4 different benefit levels

Smart Medimoney provides Economy, Regular, Superior and Premier benefit levels which allow you to choose precisely the level of cover that best suits your budget and personal needs.



No claim discount²

Subject to the terms and conditions of the policy contract, you can enjoy a no claim discount² upon policy anniversary if (1) the benefit level of **Smart Medimoney** was Regular or above throughout the 3 years immediately preceding the policy anniversary; and (2) no benefit was paid or payable, or no claim was incurred, under (a) **Smart Medimoney**; and (b) **Smart Medicare** or **Smart Start Medical Insurance** (only applicable if **Smart Medimoney** is attached to **Smart Medicare** or **Smart Start Medical Insurance**) during the 3 years immediately preceding the policy anniversary; and (3) the benefit level of **Smart Medimoney** is Regular or above in the year immediately after the policy anniversary. The discount is equal to 15% of your annual premium (before no claim discount², if any) of **Smart Medimoney** in the year immediately preceding the policy anniversary.



Worldwide emergency assistance³

As our valued customer, you will automatically be entitled to use the worldwide emergency assistance³ provided by third party service provider. In the event of an emergency during a business trip or holiday, you can simply contact the 24-hour worldwide alarm centres for help.

Smart Medimoney at a glance

| | |
|----------------------|---|
| Premium payment term | Up to age 75 |
| Benefit period | Up to age 75 ⁸ |
| Issue age | 14 days old – age 65 |
| Premium [#] | <ul style="list-style-type: none"> ■ Will be adjusted based on the insured's attained age ■ Premiums are not guaranteed |
| Policy currency | For Smart Medimoney issued as basic plans: HKD For Smart Medimoney issued as supplements: HKD / USD |
| Payment mode | Annual / Semi-annual / Monthly |
| Policy application | Underwriting required |
| Policy renewability | Guaranteed annual renewal until the insured reaches the age of 75 ¹ |

[#] Please refer to **Premium adjustment** under the section **Important information** for details.

Benefit schedule

| Protection | Benefit items | Maximum benefit limit | | | |
|---|--|-----------------------|-----------|-----------|-----------|
| | | Economy | Regular | Superior | Premier |
| Hospitalisation Per confinement ⁹ | Daily Benefit ^{4,5} (up to 1,000 days ⁴) | HKD500 | HKD750 | HKD1,000 | HKD1,250 |
| | Intensive Care Daily Benefit ^{4,5,6} (up to 120 days ⁴) | HKD1,000 | HKD1,500 | HKD2,000 | HKD2,500 |
| Life Per policy | Death Benefit | HKD10,000 | HKD15,000 | HKD20,000 | HKD30,000 |

Note:

■ When **Smart Medimoney** is issued as a supplement, the supplement should be denominated in the same currency in which the basic plan is denominated.

Important information

Disclosure obligation for underwriting

You are required to declare all requisite information that would affect the underwriting decisions of the Company. Subject to our rights in the case of fraud, if the insured's age or sex has been misstated, all benefits will be calculated on the basis of the correct age and sex and the premiums paid. If at the correct age, the insured was not insurable according to our requirements, the policy and any attached endorsement and supplements will be void from the policy date.

Cooling-off period

If you are not completely satisfied with the policy, you have the right to cancel it by giving a written notice of cancellation to the Company. Such written notice of cancellation must be signed by you and received directly by our Customer Service at Suite 2001, 20/F, Tower Two, Times Square, 1 Matheson Street, Causeway Bay, Hong Kong within **21 calendar days** immediately following either the day of delivery of the policy or the cooling-off notice (notifying you of the cooling-off period) to you or your nominated representative (whichever is earlier). The policy will then be cancelled and a refund of any premium(s) paid will be returned to you on the condition that no claim payment under the policy has been made prior to your request for cancellation.

Cancellation

After the cooling-off period, the policyholder can request cancellation by giving 30 days prior written notice to the Company, provided that there has been no benefit payment during the relevant policy year. No premium or proportion of the premium will be refunded to the policyholder if cancellation is initiated by the policyholder and accepted by the Company before the expiry date.

Submission of claims

We must receive due proof in the form specified by us within 60 days after the disability was first attended or treated. Original statement of accounts and receipts showing itemised expenses are required.

Policy currency

If your policy is denominated in a currency other than your local currency, you may face an exchange rate risk. Upon currency conversion, the amounts you receive and the premiums you pay may vary as a result of changes in exchange rate.

Premium adjustment

The initial premium is based on the age of the insured at the time of policy issuance and other factors including but not limited to gender and risk class of the insured and the benefit level of your policy. Premium rates are not guaranteed and may be adjusted by the Company at policy anniversaries if necessary. We consider factors including but not limited to (i) the Company'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 and product feature revisions.

Non-payment of premium

You should pay premiums for the whole of your premium payment term. Any premiums remaining outstanding at the end of the grace period (i.e. 31 days after premium due date) may lead to termination of your policy. You may lose the insurance protection offered by the policy.

Automatic revision of benefits

In order to keep the level of benefits in line with the changing medical situation and, the Company may, subject to the policy contract, revise the terms and benefit coverage and future premiums from time to time, such that the adequacy of coverage under the plan can be maintained.

Termination

When **Smart Medimoney** is issued as a basic plan, it will automatically terminate on and cannot be renewed beyond the policy anniversary on or immediately following:

- (a) insured's 75th birthday; or
- (b) the death of the insured.

When **Smart Medimoney** is issued as a supplement, it will automatically terminate:

- (a) on and cannot be renewed beyond the policy anniversary on or immediately following the insured's 75th birthday; or
- (b) upon the death of the insured; or
- (c) cancellation of **Smart Medimoney**; or
- (d) if the basic plan to which **Smart Medimoney** is attached terminates or an option on nonpayment takes effect.

Key exclusions

No benefit (other than the Death Benefit) is payable for **Smart Medimoney** in respect of any disability resulting directly or indirectly from or in respect of any of the following:

- covered sickness which is contracted and commences within 30 days following the policy date or supplement effective date or within 10 days following any date of reinstatement of **Smart Medimoney**, whichever is later; or
- pregnancy, childbirth or miscarriage, sterilisation, or infertility and any related treatment or treatment of congenital anomalies; or
- any drug or alcohol abuse; or
- any self-inflicted injury or suicide, whether sane or insane; or
- cosmetic surgery, eye glasses, corrective aids and treatment of refractive errors or any optional surgery; or
- dental care or surgery unless resulting (directly and independently of all other causes) from a covered injury (excluding denture and related expenses); or
- general check-up, convalescence, custodial or rest care; or
- treatment or surgery for tonsils, adenoids or hernia or a disease peculiar to the female generative organs unless the insured has been continuously covered under **Smart Medimoney** for a period of 120 days from the policy date or supplement effective date or any date of reinstatement of **Smart Medimoney**, whichever is later; or
- circumcision before attaining the age of 12; or
- disease or infection with any human immunodeficiency virus (HIV) and / or any HIV-related illness including Acquired Immune Deficiency Syndrome (AIDS) and / or any mutations, derivations or variations thereof; or
- any attempt or commission of assault or unlawful act by the insured; or
- any act due to war, declared or not, military, naval or air service for any country at war, declared or not; or
- any confinement, treatment, procedure, supplies or other medical services which are not medically necessary; or
- any charges exceeding the reasonable and customary charges.

For details and the latest list of exclusions, please refer to the policy contract.

Suicide exclusion

If the insured commits suicide within 1 year from the policy date or supplement effective date or any date of reinstatement of **Smart Medimoney**, whichever is later, whether sane or insane, no Death Benefit for **Smart Medimoney** is payable.

Pre-existing condition

No benefit is payable in respect of any pre-existing conditions or recurrence of chronic pre-existing conditions prior to the policy date or supplement effective date or any date of reinstatement of **Smart Medimoney**, whichever is later.

Levy on insurance premium

Levy collected by the Insurance Authority through the Company will be imposed on the policy at the applicable rate. Policyholders must pay the levy in order to avoid any legal consequences.

Rights of third parties

The policy is excluded from the application of the Contracts (Rights of Third Parties) Ordinance (Cap 623 of the Laws of Hong Kong) (“TP Ordinance”). Any person or entity which is not a party to the policy shall have no rights under the TP Ordinance to enforce any terms of the policy.

Reasonable and customary charges and medically necessary treatments

We will only reimburse the reasonable and customary charges actually incurred for eligible treatments that are covered under the policy and are medically necessary. If the charges are higher than the reasonable and customary charges, we will only pay the amount which is reasonably and customarily charged.

Remarks

1. Subject to the terms and conditions of the policy contract, you have a guaranteed right to renew the policy by making payment of the prevailing premium in advance at the time of renewal on each policy anniversary.
2. If after a no claim discount has been given, a benefit in respect of any previous year becomes payable under any plan of the following policies, namely (i) **Smart Medimoney** or (ii) **Smart Medicare** or **Smart Start Medical Insurance** (only applicable if **Smart Medimoney** is attached to **Smart Medicare** or **Smart Start Medical Insurance**), the no claim discount given will be deducted from the benefit payable.
3. The provision of services is provided by third party service provider(s) and is subject to the terms and conditions of third party service provider(s). AXA and the third party service provider(s) reserve the right to amend the terms and conditions from time to time without prior notice. AXA shall not be responsible for any services so provided or any act or failure to act on the part of the third-party service provider(s).
4. The aggregate period of the Daily Benefit and Intensive Care Daily Benefit payable will not exceed 90 days per confinement resulting from mental illness and 1,000 days per confinement resulting from other covered disabilities.
5. A reduced benefit of HKD250 per day will be paid for hospital confinement in a place outside North America, Europe, Australia, New Zealand, Japan, Singapore, Taiwan, Hong Kong or Macau.
6. The amount of the Intensive Care Daily Benefit has already included the amount of Daily Benefit. For the avoidance of doubt, the Daily Benefit will not be payable during the period which the Intensive Care Daily Benefit is payable.
7. Without limiting the application of the renewal clause, if there is any misrepresentation, non-disclosure or fraud on the part of the insured, we shall have the right to terminate the policy, or to revise the terms and conditions of the policy.
8. The benefit period of **Smart Medimoney** is up to age 75 (age at last birthday) of the insured, subject to the termination of policy as stated in section Important information of this product brochure and the terms and conditions of the policy contract.
9. Confinements resulting from the same disability are treated as the same confinement unless the insured has been able to resume his normal activities in full without the need of medical attention or treatment for the disability causing the first confinement for a period of at least 90 days between the 2 successive confinements.

Notes:

- Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured on his or her last birthday.
- The Company reserves the right to revise the benefits, terms of the policy and future premiums in the policy contract on any policy anniversary.
- Please contact your financial consultant for availability of other policy currency(ies).
- All types of waiver of premium supplements do not apply to **Smart Medimoney**.

How do I make a claim?

Simply contact your financial consultant, visit www.axa.com.hk/en/claims or contact us by telephone (852) 2802 2812 for claim submission detail. After submission, we will help you process your claim as soon as possible.

Smart Medimoney is underwritten by AXA China Region Insurance Company (Hong Kong) Limited / AXA China Region Insurance Company Limited (collectively "AXA", the "Company", or "we").

The plan is subject to the terms, conditions and exclusions of the relevant policy contract. AXA reserves the final right to approve any application. This product brochure contains general information only and does not constitute any contract between any parties and AXA. It is not a policy. For detailed terms, conditions and exclusions of the plan, please refer to the relevant policy contract, which will be made available by the Company upon request.



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Product brochure**

Find out more about **Smart Medimoney**

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www.axa.com.hk



We value your feedback which will help us serve you better. You may reach us at:

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