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Medical protection
Smart Medical Insurance

Comprehensive medical protection



Product brochure

The comprehensive medical protection you need to achieve your plan in life

Financial stability is vital if you and your loved ones are to achieve your plans in life. As illness can strike at any time and medical costs are increasing year by year, it's always wise to safeguard yourself against enormous medical expenses that can easily disrupt your plans.

Providing you with comprehensive medical coverage, our **Smart Medical Insurance** ensures you will get the care you need while also protecting your finances. There are 2 different plans to match your unique needs – **Smart Medicare** which offers you reimbursement protection of actual medical expenses up to age 100, and **Smart Medimoney** which provides you with daily allowance protection during hospitalisation until age 75. You may choose **Smart Medical Insurance** as stand-alone basic plan(s) or supplement(s) to other AXA basic plans.



Smart Medicare



Reimbursement protection of medical costs up to age 100

Providing you with reimbursement protection of actual medical expenses up to age 100, including in-hospital room and board, surgery, hospital expenses and out-patient surgery, etc., our **Smart Medicare** enables you to obtain the medical treatment of your choice. The plan also offers you the added peace of mind of coverage for intensive care, in-patient specialist, major illness treatment and medical negligence. Such wide-ranging protection ensures that you will immediately be able to enter a private hospital should illness strike. Please refer to the benefit schedule in this product brochure for quick reference.



Choice of 4 different benefit levels to meet your unique needs

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



Optional Supplementary Major Medical (SMM)

Available as an optional top-up for **Smart Medicare** customers, our Supplementary Major Medical provides supplementary reimbursement for your actual hospital costs incurred in excess of those covered under hospital benefit of **Smart Medicare** in accordance with the relevant terms and conditions. The Supplementary Major Medical offers 4 benefit levels, giving you choices of financial support to meet your needs. Please refer to the benefit schedule in this product brochure for quick reference.



Enjoy a premium discount¹ when you supplement your AXA basic plan

You can enjoy a premium discount¹ when **Smart Medicare** is attached as a supplement to your AXA basic plan.

Smart Medimoney



Daily hospital cash benefits

Smart Medimoney provides you with daily cash benefits for hospital stay of up to 1,000 days. These daily cash benefits will be doubled to give you extra financial flexibility should the insured be confined in intensive care unit. Please refer to the benefit schedule in this product brochure for quick reference.



Choice of 4 different benefit levels to meet your unique needs

Our Economy, Regular, Superior and Premier benefit levels allow you to choose daily cash benefits between MOP500 and MOP1,250 during your stay in hospital.

Other benefits & services



Guaranteed renewability

You will enjoy guaranteed annual renewal of your **Smart Medical Insurance**, giving you added peace of mind. **Smart Medicare** guarantees annual renewal until the insured person reaches the age of 100; while **Smart Medimoney** guarantees annual renewal until the insured person reaches the age of 75.



No claim discount ensures even better value

You can enjoy a no claim discount² on your premium for staying healthy, provided that:

- If you are a customer of Regular level or above of **Smart Medimoney** and no benefit was paid or payable for the 3 consecutive years immediately prior to your policy renewal, and you are a customer of Regular level or above of **Smart Medimoney** in the year after policy renewal, a premium discount will be offered upon renewal of your policy; or
- If you are a customer of any benefit level of **Smart Medicare** and no benefit was paid or payable for the 3 consecutive years immediately prior to your policy renewal, a premium discount will be offered upon renewal of your policy.

The discount is equal to 15% of your annual premium (before no claim discount, if any) of **Smart Medical Insurance** in the year immediately preceding the policy anniversary.



AXA Assistance Program³

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



Join our professional preventive care program

You will also be eligible to enjoy a special rate on a wide range of professional healthcare preventive services. Please refer to the relevant website for more details.

Smart Medicare benefit schedule

A highlight of the key benefits of **Smart Medicare** is set out below. Please refer to the policy contract for the full list of the benefits and relevant terms, conditions and exclusions.

Protection	Benefit (maximum benefit amount)	Economy (MOP)	Regular (MOP)	Superior (MOP)	Premier (MOP)
Hospitalisation (Per confinement ^a)	Daily Room & Board (up to 120 days ^b)	680/day	800/day	1,600/day	4,500/day
	Medical Practitioner's Visit in Hospital (up to 120 days)	650/day	750/day	1,500/day	4,500/day
	Intensive Care ^c ^(up to 15 days ^b) *(up to 90 days ^b)	2,200/day [^]	2,200/day [*]	3,720/day [*]	7,000/day [*]
	In-patient Specialist's Fee	2,500	3,000	5,000	10,000
	Miscellaneous Hospital Expense ^d (Dressings, drugs, etc.)	6,000	10,000	20,000	35,000
	Surgeon's Fee ^e <ul style="list-style-type: none"> ■ Critical Major ■ Super Major ■ Major ■ Intermediate ■ Minor ■ Investigative Procedure 	40,000 20,000 15,000 7,500 3,000 3,000	45,000 33,750 22,500 11,250 4,500 4,500	80,000 60,000 40,000 20,000 8,000 8,000	160,000 120,000 80,000 40,000 16,000 16,000
	Anaesthetist's Fee	Maximum 30% of Surgeon's Fee	Maximum 35% of Surgeon's Fee		
	Operating Theatre	Maximum 30% of Surgeon's Fee	Maximum 35% of Surgeon's Fee		
Major Illness Treatment (Per policy)	Radiotherapy & Chemotherapy for Cancer ^f	50,000	50,000	100,000	200,000
	Kidney Dialysis ^f	150,000	150,000	250,000	400,000
Out-patient (Per disability)	Out-patient Surgery	Follows the above Surgeon's Fee ^e , Anaesthetist's Fee and Operating Theatre			
	Emergency Out-patient Treatment for Accident ^d	2,000	5,000	5,000	22,000
Medical Negligence	Medical Negligence (Total and permanent disablement or death)	60,000	60,000	200,000	550,000
Life	Death Benefit	15,000	15,000	20,000	30,000

Smart Medicare Supplementary Major Medical^g benefit schedule (Optional)

A highlight of the key benefits of **Smart Medicare Supplementary Major Medical** is set out below. Please refer to the policy contract for the full list of the benefits and relevant terms, conditions and exclusions.

Protection	Benefit (maximum benefit amount)	Economy (MOP)	Regular (MOP)	Superior (MOP)	Premier (MOP)	
Hospitalisation (Per confinement ^a)	Percentage of the hospital expenses (in excess of the benefit paid under Hospitalisation protection per confinement in the above table of Smart Medicare) after deducting the Deductible (if applicable), subject to the Maximum Benefit amount ^h	75%		80%		
	1. Maximum Benefit	105,000	116,000	180,000	420,000	
	2. Deductible	8,000	-	-	-	
	Maximum Benefit will be subject to the following terms:					
	1. Daily Room & Board ⁱ (Starting from the 121 st day)	680/day	800/day	1,600/day	4,500/day	
	2. Medical Practitioner's Visit in Hospital ⁱ (Starting from the 121 st day)	650/day	750/day	1,500/day	4,500/day	
	3. Intensive Care ⁱ +(Starting from 16 th day) #(Starting from 91 st day)	2,200/day ⁺	2,200/day [#]	3,720/day [#]	7,000/day [#]	

Smart Medimoney benefit schedule

A highlight of the key benefits of **Smart Medimoney** is set out below. Please refer to the policy contract for the full list of the benefits and relevant terms, conditions and exclusions.

Protection	Benefit (maximum benefit amount)	Economy (MOP)	Regular (MOP)	Superior (MOP)	Premier (MOP)
Hospitalisation (Per confinement ^a)	Daily Benefit ^j (up to 1,000 days)	500	750	1,000	1,250
	Intensive Care Daily Benefit ^j (up to 120 days)	1,000	1,500	2,000	2,500
Life	Death Benefit	10,000	15,000	20,000	30,000

Notes:

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

- 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 for a period of at least 90 days between the 2 successive confinements.
- The aggregate period of the Daily Room & Board benefit and Intensive Care benefit will not exceed 120 days per confinement.
- In respect of a confinement, the period during which the Intensive Care benefit is payable will not exceed 15 days for Economy level or 90 days for other benefit levels. In cases where the confinement is in a place other than North America, Europe, Australia, New Zealand, Japan, Singapore, Taiwan, Hong Kong or Macau, the amount payable under the Intensive Care benefit will not exceed the maximum amount of the Daily Room & Board benefit for any 1 day.
- For each disability, the aggregate of the amount payable under Miscellaneous Hospital Expense benefit and Emergency Out-patient Treatment for Accident benefit will not exceed the maximum amount of the Miscellaneous Hospital Expense benefit.
- Procedures are classified in accordance with the Schedule of Surgical Fees in the policy contract. If more than 1 procedure (whether in-hospital or out-patient surgery) is performed resulting from the same disability, only the largest benefit is payable. If more than 1 procedure is performed during a confinement resulting from different disabilities, the aggregate of all amounts payable will not exceed the maximum amount for Critical Major class of Surgeon's Fee.
- Radiotherapy & Chemotherapy for Cancer Benefit and Kidney Dialysis Benefit will not be payable if treatment is provided in a place outside North America, Europe, Australia, New Zealand, Japan, Singapore, Taiwan, Hong Kong or Macau.
- Extra premium is needed for the additional benefit.
- Subject to the maximum benefit amount as stated in the Smart Medicare benefit schedule and Smart Medicare Supplementary Major Medical benefit schedule (Optional) in the relevant policy.
- The Daily Room & Board benefit and Medical Practitioner's Visit in Hospital benefit will not be paid for the first 120 days of the confinement whilst Intensive Care benefit will not be paid for the first 15 days of the confinement for Economy level and first 90 days of the confinement for other benefit levels. In cases where the confinement is in a place other than North America, Europe, Australia, New Zealand, Japan, Singapore, Taiwan, Hong Kong or Macau, the amount payable under the Intensive Care benefit will not exceed the maximum amount of the Daily Room & Board benefit for any 1 day.
- A reduced benefit of MOP 250 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. The aggregate period of the Daily Benefit and Intensive Care Daily Benefit will not exceed 90 days per confinement resulting from mental illness and 1,000 days per confinement resulting from other disabilities. The amount of the Intensive Care Daily Benefit has already included the amount of Daily Benefit.

Smart Medical Insurance at a glance

	Smart Medicare	Smart Medimoney
Premium payment term	Up to age 100	Up to age 75
Benefit period	Up to age 100	Up to age 75
Issue age	Age 0 – 65	
Premium~	<ul style="list-style-type: none"> ■ Will be adjusted based on the insured's attained age ■ Premiums are not guaranteed 	
Benefit type	Reimburse actual medical expenses ⁴	Provide daily cash benefits ⁴

~ Please refer to **Premium adjustment** under the section Important Information for details.



Important Information

Disclosure obligation for underwriting

You have to ensure that the following events will not occur: (a) any material fact affecting the risk is incorrectly stated in or omitted from the application form or any statement or declaration made by the owner and/or insured, or (b) the policy or any renewal has been obtained through any misstatement, misrepresentation or suppression, or (c) any claim under this policy is fraudulent or exaggerated.

Otherwise, the policy shall be re-underwritten and may be void at the sole and absolute discretion of the Company and any benefits obtained as a result of such events shall become immediately payable to the Company and the Company reserves the right to recover from the insured or owner any cost related to the void policy.

During re-underwriting process, we consider a number of factors including but not limited to medical risk, financial risk, personal risk and moral hazard risk.

Cooling-off period

If you are not completely satisfied with the policy, you have the right to cancel the policy and obtain a refund of any premium(s) paid provided that there is no claim payment made under the policy prior to your request for cancellation. To exercise this right, please return the policy (if applicable) and send your signed written notice of cancellation directly to our Customer Service at Avenida do Infante D. Henrique No.43-53A, 20 Andar, The Macau Square, Macau within **21 calendar days** immediately following the day of delivery of the policy to you or your nominated representative. The policy will then be cancelled and a refund of any premium(s) paid will be returned to you in policy currency.

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. Premiums are not guaranteed and may be changed by the Company at any of the policy anniversaries. The premium may be adjusted on each policy anniversary based on factors including but not limited to the attained age of the insured, medical trend and the Company's claims experience.

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

We may from time to time revise the benefits under the policy or reclassify the procedures in the Schedule of Surgical Fees in the policy contract in order to keep the level of benefits in line with the changing medical situation and costs. We will notify the owner in writing no less than 21 days in advance of the policy anniversary effecting such revision and/or reclassification, specifying, among others, the revised benefit schedule in the Policy Specifications and/or the reclassified Schedule of Surgical Fees, the new premium and effective date.

Termination

- When the plan is issued as a basic plan, it will automatically terminate upon the earliest occurrence of any of the following:
 - (a) on the policy anniversary on or immediately following the insured's 100th birthday in respect of **Smart Medicare**; or
 - (b) on the policy anniversary on or immediately following the insured's 75th birthday in respect of **Smart Medimoney**.
- When the plan is issued as a supplement, it will automatically terminate upon the earliest occurrence of any of the following:
 - (a) on the policy anniversary on or immediately following the insured's 100th birthday in respect of **Smart Medicare**; or
 - (b) on the policy anniversary on or immediately following the insured's 75th birthday in respect of **Smart Medimoney**; or
 - (c) if the basic plan to which the supplement is attached terminates or an option on non-payment takes effect.

You may apply for policy surrender in accordance with the application procedures and administrative rules of the Company in force from time to time. We will process the relevant application after our receipt of your valid written application (in the form specified by us) . Please contact your financial consultant for further details.

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 which 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 charge.

We will base the calculation of reasonable and customary charges on a combination of the following (if applicable):

- (a) the gazette issued by the Hong Kong government which sets out the fees for the private patient services in public hospitals in Hong Kong;
- (b) statistical information provided by local health authoritative body and information collected from medical specialists and surgeons practicing in the country or area where the treatment is received;
- (c) industrial medical fee survey;
- (d) our internal claim statistics and/or our global experience; and
- (e) the extent or level of benefit insured.

Key exclusions

- (a) We will not pay any benefit (other than the Death Benefit) under the policy 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 within 10 days following any date of reinstatement, 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, hernia or a disease peculiar to the female generative organs unless the insured has been continuously covered under the **Smart Medical Insurance** for a period of 120 days from the policy date or any date of reinstatement, 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.
- (b) We will not pay any benefit in respect of any pre-existing conditions or recurrence of chronic pre-existing conditions prior to the policy date or any date of reinstatement, whichever is later.
- (c) Radiotherapy & Chemotherapy for Cancer Benefit is not payable if:
 - the insured suffered from cancer within 60 days following the policy date or any date of reinstatement, whichever is later; or
 - treatment of radiotherapy or chemotherapy is not received in a hospital or a cancer treatment clinic in North America, Europe, Australia, New Zealand, Japan, Singapore, Taiwan, Hong Kong or Macau.
- (d) Kidney Dialysis Benefit is not payable if:
 - the insured suffered from chronic and irreversible kidney failure within 60 days following the policy date or any date of reinstatement, whichever is later; or
 - regular haemodialysis or peritoneal dialysis is not received in a hospital or a kidney dialysis clinic in North America, Europe, Australia, New Zealand, Japan, Singapore, Taiwan, Hong Kong or Macau.
- (e) Medical Negligence Benefit is not payable if the negligence of a medical practitioner or a hospital occurs in a place outside Hong Kong or Macau.
- (f) Death Benefit is not payable if the insured commits suicide within 1 year from the policy date or any date of reinstatement, whichever is later, whether sane or insane.

Rights of third parties

Any person or entity which is not a party to the policy shall have no rights to enforce any terms of the policy.

Remarks

1. When **Smart Medicare** is attached to a basic plan, the premium of **Smart MediCare** will be reduced by MOP 100.
2. If a benefit in respect of any previous year becomes payable under any plan of the policy after a no claim discount has been given, the no claim discount given will be deducted from the benefit payable.
3. The services under the AXA Assistance Program is provided to clients who have an individual medical insurance plan coverage with AXA China Region Insurance Company Limited or AXA China Region Insurance Company (Hong Kong) Limited. The provision of services are subject to the terms and conditions of the AXA Assistance Program. AXA reserves the right to amend the terms and conditions thereof from time to time without prior notice.
4. Subject to the maximum benefit amount as stated in the **Smart Medicare** Benefit Schedule and **Smart Medicare** Supplementary Major Medical Benefit Schedule (Optional) / **Smart Medimoney** Benefit Schedule in the relevant policy.

Notes:

- Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured on his or her last birthday.
- Please contact your financial consultant for availability of other policy currency(ies).
- All types of waiver of premium supplements do not apply to **Smart Medical Insurance**.

How can I enquire about claims?

Before the insured receives a medical service, you may contact us by telephone (853) 8799 2812, fax (853) 2878 0022 or email ma.enquiry@axa.com.mo and request for an estimate of the amount that may be claimed under your policy contract or to enquire about the eligibility of claims and reimbursement limits from us. We will provide a response within 2 working days. Our estimate is for reference only, and the actual amount claimable by you shall be subject to our claim assessment and the final expenses charged by medical specialists or hospitals.

What should I do if I need to make a claim?

Simply contact your financial consultant or contact us by telephone (853) 8799 2812, fax (853) 2878 0022 or email ma.enquiry@axa.com.mo. We will help you process your claim as soon as possible.

Smart Medical Insurance is underwritten by AXA China Region Insurance Company (Hong Kong) Limited (“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

Macau

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