International Exclusive

Service Manual

Foreword

Thank you for choosing AXA Tianping Property & Casualty Insurance Co., Ltd.(Hereinafter referred to as "we" or "us") as your preferred health insurance.It is important that you read and understand this service manual.

This service manual provides guidelines in the following areas:

- How to contact us
- Understanding Pre-authorisation Procedures
- Understanding the terms applicable to direct billingservices
- How to benefit from direct billing service
- How to make a claim
- How to access International Emergency Medical Assistance
- How to seek Second Medical Opinion Service

We have developed a partnership with Medilink, the international medical Third Party Administrator（TPA）, and its affiliated organisations to allow access to healthcare providers and to offer direct billing settlement services within a large network of hospitals and clinics within and outside of China. Medilink will help you locate the appropriate hospital or clinic, as well as confirm your coverage and arrange for direct billing settlement to take place.

We reserve the right for final explanation/modification/cancellation of the contents of this service manual and AXA Health Card.

Follow the WeChat public account for more detailed product and service information

24-Hour Emergency Hotline

If you have any questions with regards to the terms and conditions of your policy, please contact us.

Within mainland of China: 400 920 3123
Outside mainland of China: 86 400 920 3123

Service Contact Numbers and AXA Health Card

SERVICE CONTACT NUMBERS

You may seek assistance by calling our 24-Hour Service Hotline. We are ready to be at your service.

Within mainland of China(Excluding Hong Kong, Macau, and Taiwan): 400 920 3123

Outside mainland of China(Including Hong Kong, Macau, and Taiwan): 86 400 920 3123

Email: healthcare@axatp.com

MEDILINK WILL PROVIDE APPROPRIATE ASSISTANCE TO YOU IN THE FOLLOW AREAS:

- verify your coverage according to your plan;
- determine whether the services or supplies are covered under your plan;
- assist to select a network medical provider;
- assist in pre-authorisation application;
- verify if treatment is medically necessary to minimize the out-of-pocket cost to you;
- assist in reimbursement procedure;
- assist to arrange for International Emergency Medical Assistance;
- assist in Second Medical Opinion service .

If you find any problem in our service or think your rights have been violated, please keep relevant evidence and contact us through the hotline or email.
We will accept it immediately and update the progress to you in a timely manner.

If you are not satisfied with the settlement result of your medical expenses and your claim appeal has not been effectively resolved through our hotline or customer service email, you can contact us at claims-appeal@axatp.com. We will initiate the claim appeal review process for you. After receiving your appeal, the claim appeal team will review it as soon as possible and reply within 10 working days.

STANDARD AXA HEALTH CARD

When you choose the AXA International Exclusive plan, you will receive our AXA Health Card.This card provides you access to the hospitals and clinics within our network.If you present your AXA Health Card together with your ID to a medical provider within our network,you do not need to make payment for eligible medical services (subject to terms and conditions of your plan).

The AXA Health Card is limited to your personal use.you may not loan or sell it to another person.If you breach the rules,we reserves the right to refuse payment for the fraudulent claim.Should your behavior cause contract rescission or contract invalidity, your membership may also be cancelled.

To get your AXA health card, you need to follow the WeChat of AXA Tianping High-end Health Insurance and input your identity information, then follow the instructions to obtain it. You can also contact the customer service hotline to get the user guidance for the AXA health card.

IMPORTANT NOTE:

To protect yourself from unexpected costs , we enourage you to seek pre-authorisation for any treatment with in or outside our direct billing network .

THE FOLLOWING SERVICES REQUIRE PRE-AUTHORISATION FROM US:

- Prescriptions more than 30 days;
- Hormone Replacement Therapy;
- Reconstruction Surgery;
- Home Nursing;
- Hospice and Palliative Care;
- Seeking another medical opinion or obtaining subsequent opinion or referrals after the maximum of two(2) consultations for the same medical condition;
- Psychiatric Benefit:All treatments given by psychologists , psychotherapists or any individuals other;
- Direct billing for out-patient services outside Mainland of China,in Hong Kong,Macau and Taiwan(to facilltate pre-arrangement of services);
- International Emergency Medical Assistance.

Pre-authorisation can be helpful to avoid deduction or refusal of claims due to non-insurance coverage.

PRE-AUTHORISATION

IN-PATIENT SERVICES

Pre-authorisation grants you approval for certain medical procedures or treatment , prior to the commencement of the proposed medical treatment.

NOTWITHSTANDING THE REQUIREMENT TO PRE-AUTHORISE:

- Pre-authorisation approval does not guarantee payment of a claim in full,as additional copay ments and out-of-pocket expenses may apply to the final invoice;
- Benefits payable under the policy are subject to eligibility at the time when the charges are incurred, and to all other terms,limitations,and exclusions of the Policy;
- Should new evidence be found subsequently to demonstrate that the treatment or medical expenses are not eligible,the prior approval may be revoked.AXA shall be entitled to entitled to recover all money in respect of any liabilities incurred or paid for expenses that is not eligible under this policy.

PROCEDURE FOR IN -PATIENT SERVICES

Complete the Pre-authorisation Request Form.

- This from can be downloaded from the online member portal: www.medillink-global.com.cn;
- Or you may call us to have a copy sent to you.
  Within mainland of China: 400 920 3123
  Outside mainland of China: 86 400 920 3123

The completed from with supporting documents,e.g.investigative reports,should be received by Medilink via email at least 5 working days prior to the scheduled procedure or treatment date at the hospital.

Please email the completed pre-authorisation from to: healthcare@axatp.com,AXA will review the request and respond within 2 working days upon receiving the complete medical information.

Considering that it is difficult to pre-authorisation in emergency situations, you can receive treatment first and contact our service hotline within 48 hours after the occurrence of the emergency situation to apply for pre-authorization.

Direct-Billing Service

IMPORTANT NOTES AND CONDITIONS OF USE

The charge presented at the medical provider are the preliminary claim assessment of your policy . You are obligated to accept the final adjustments and pay the excess amount if there is any miscalculation or uncovered items.

You will not be eligible for direct settlement if the cost of your single outpaient visit exceeds RMB 8,000 or more , in any currency, or if your treatment or medical condition is not covered in your plan . In this case , you will need to settle the payment directly with your medical provider.

Due to constraints of their internal financial systems , some direct billing providers are unable to receive payment from you for remaining amounts. In this case, Medilink will settle the amount for you and request payment from you via bank transfer within 30 days.

If your treatment is not eligible under the terms and conditions of your Policy or if Medilink is temporarily unable to confim whether your treatment is covered, a Decline Letter will be issued to the provider. However, you will still be able to proceed with the treatment at your own cost and submit a claim with all the necessary supporting documents for evaluation after your treatment.

You may seek assistance by calling our 24-Hour Service Hotline.We are ready to be at your service.
Within mainland of China: 400 920 3123
Outside mainland of China: 86 400 920 3123
Email: healthcare@axatp.com

Within Mainland Of China

FOR OUT-PATIENT SERVICE THROUGH POS MACHINE

SELECT A MEDICAL PROVIDER WITHIN OUR NETWORK	You may query and select a network medical provider by visiting www.medilink-global.com.cn tomake an appointment or you may contact Medilink at **400 920 3123** for assistance.
ELIGIBILITY VERIFICATION	When you visit the network medical provider please present your Ahealth Card along with you photo ID(ID cards, passports)at the reception. Upon confirming your identity, the staff will swipe your AXA Health Card at the POS machine, and print out an Eligibility Verification slip.
FILL IN THE CLAIM FORM	Fill in and sign the front page of the claim form while you are waiting for your treatment. Forms should be available at the reception of the network medical provider Altematively, you may also call 400-920-3123 to receive an electronic copy of the form or download it from the online member portal at www.medilink-global.com.cn.
CONSULTATION WITH THE DOCTOR	Please ask your doctor to fill in the medical information at the back of the claim form, and to confirm with his/her signature.
REAL-TIME CLAIM CONFIRMATION	The billing staff of the network medical provider will input your treatment details to the POS machine in order to facilitate an online real-time validation. Upon confirmation of your claim the POS machine will print out a confirmation slip. Please read the slip carefully and sign it once you have confirmed its contents. Please pay the remaining amount to the provider(if any).
DISCHARGE	In case of a technical issue with you AXA Health Card or the POS machine, the receptionist of the network provider will directly contact Medilink to allow an off-line transaction following the same steps as highlighted above. **Please note that there is a limit of(1)visit per day per disability.**

FOR IN-PATIENT SERVICE

PRE-AUTHORISATION APPLICATION	Should your attending physician recommend you for in-patient treatment, he/she will need to fill in a"Pre-authorisation Form"and send the completed form with supporting documents for consideration by the AXA team. Investigative reports should be received by Medilink via email at **healthcare@axatp.com** at least 5 working days prior to the scheduled procedure or treatment.
GUARANTEE LETTER ISSUANCE	We will review request and respond within 2 woking days upon receliving the complete medical information. If the proposed treatment and diagnosis is covered under the Policy, a Guarantee Letter bearing the cost of the medical treatment that is covered, will be sent to the network medical provider. Should the information submitted be incomplete or the proposed treatment and diagnosis not covered under your Policy, a Decline Letter will be issued to the network medical provider. Youmay however continue the in-patient treatment at your own cost, in which case AXA and Medilink shall not be liable for any of your medical expenses and you will be responsible for settling your treatment costs.
ELIGIBILITY VERIFICATION	When you are admitted to the hospital, please present your AXA Health Card along with your photo ID(ID cards, passports)at the reception. Upon confirming your identity, the staff will swipe your AXA Health Card at the POS machine, and print out an Eligibility Verification slip Medilink will fax an updated Guarantee Letter to the network medical provider.
PRE-ASSESSMENT FOR THE MEDICAL BILL	AXA will perform a Pre-Discharge Billing Assessment for the whole medical bill at the time ofyour discharge. Please pay the remaining amount to theprovider accordingly (if any).
DISCHARGE	The charges presented at the medical provider represents the preliminary claim assessment of your policy. You are obligated to accept the final adjustment and pay the excess amount if there is any miscalculation or uncovered items Due to the constraints of their internal financial systems, some direct billing providers are unable to receive payment from you for remaining amounts. In this case, Medilink will settle the amount for you and request payment from you via bank transfer within 30 days.

Outside Mainland Of China

FOR OUT-PATIENT SERVICE(IN HONGKONG, MACAU AND TAIWAN)

REQUEST TO MAKE AN APPOINTMENT

If you wish to seek treatment within our network medical providers in Hong Kong, Macau or Taiwan,you may select a network medical provider by checking the list from www.medilink-global.com.cn, contact the network medical provider directly to make an appointment or contact Medilink for assistance. Within mainland of China：400 920 3123,Outside mainland of China：86 400 920 3123, Or email to：healthcare@axatp.com.

Please provide the following information when contacting us to make an appointment：

- Patients AXA Health Card number
- Preferred date of consultation
- Patient name and date of birth
- Preferred clinic or specialt
- Patient mobile phone number and E-mail contact
- Symptoms or diagnosis

CONFIRMATION OF APPOINTMENT

We will get back to you within 2 working days if you requested our assistance to book your appointment.A Pre-authorisation Letter will be sent to the network medical provider prior to the date of your appointment.Please note that this is not a guarantee of eligibility for treatment as this will be subject to the outcome of the consultation with the doctor. You may have to settle the payment directly with the billing staff of your medical provider.

ELIGIBILITY VERIFICATION

When you visit the network medical provider,please present your AXA Health Card along with your photo ID(ID cards, passports)at the reception. Upon verifying your identity, the staff will assist you during your visit.

FILL IN THE CLAIM FORM

Please fill in and sign the front page of the claim form while you are waiting for the treatment.

CONSULTATION WITH THE DOCTOR

Please ask your doctor to fill in the medical information at the back of the claim form, and to confirm with his/her signature.

DISCHARGE

Please wait for confirmation of the coverage before leaving the premises of your network medical provider. Upon discussing with the hospital staff, Medilink will issue a Letter of Guarantee to the network medical provider for the eligble expenses only.You will be required to settle any expenses not covered under your policy,directly with the provider.Please note that we are not able to provide direct settlement services with the network medical providers if pre-authorisation has not been pre-arranged.For emergencies,you may visit the provider and settle your bill directly with them.

Please note that there is a limit of(1)visit per day per disability.

FOR IN-PATIENT SERVICE

MAKE AN APOINTMENT

If your attending physician at the network medical provider has recommended you for in-patienttreatment, he/she needs to fill in the “Pre-authorisation Form" and email to us. This form can be downloaded from the on line member portal: www.medilink-global.com.cn.

Or you may contact us to have a copy sent to you.
Within mainland of China：400 920 3123
Outside mainland of China：86 400 920 3123
Or email to：healthcare@axatp.com

PRE-AUTHORISATION APPLICATION AND APPROVAL

The completed form with all neccessary supporting documents should be received by Medilink via email at healthcare@axatp.com at least 5 working days prior to the scheduled procedure or treatment date at the hospital. If the hospitalisation is eligible, a copy of the Confirmation Letter with specific guarantee limit will be forwarded to the network medical provider.

Should the information submitted be incomplete or the proposed treatment and diagnosis not covered under your Policy, a Decline Letter will be issued to the network medical provider. You may however continue the in-patient treatment at your own cost, in which case AXA and Medilink shall not be liable for any of your medical expenses and you will be the responsible for settling your hospital costs.

ELIGIBILITY VERIFICATION

When you are admitted to the hospital, please bring your AXA Health Card along with your photo ID (ID cards, passports)to the reception.

PRE-DISCHARGE ASSESSMENT BILL

AXA will perform a Pre-Discharge Billing Assessment for the whole medical bill at the time of yourdischarge.Please pay the remaining amount to the provider accordingly (if any).

DISCHARGE

The charges presented at the medical provider represents the preliminary claim assessment of your policy. You are obligated to accept the final adjustment and pay the excess amount if there is any miscalculation or uncovered items.

Due to constraints of their internal financial systems, some direct billing providers are unable to receive payment from you for remaining amounts. In this case, Medilink will settle the amount for you and request payment from you via bank transfer within 30 days.

Reimbursement

If you have visited a clinic or hospital outside of the direct billing network, you should settle the payment directly with the billing staff of your medical provider and then seek reimbursement within 180 days after your treatment.

THE FOLLOWING DOCUMENTS ARE REQUIRED FOR SUBMISSION FOR REIMBURSEMENT:

1. The original bills and receipts of the claim expenses. Make sure that the original bills and receipts show the date of treatment, patients name, and diagnosis with attending physician's stamp and signature;
2. Completed treatment records, discharge summary for inpatient treatment;
3. Investigation reports, such as X-ray or Laboratory records;
4. Relevant medical expenses detailed list;
5. Completed appropriate claim forms;(Can be downloaded through the website https://www.axa.cn/);
6. Other materials if necessary.

PLEASE SEND THE ABOVE DOCUMENTS TO:

Shanghai office address:
Recipient: High-end Medical Service Group
Address: 3F,Jianhua Building,No.85,Lane 623,Wanhangdu Road,Jing'an District,shanghai
Postcode: 200040
Phone: 400 920 3123

UPON RECEIVING THE REQUIRED CLAIM MATERIALS, WE WILL:

1. Settle the claim and issue the result within 10 working days.
2. In other cases, we will let you know if we need any more information.

International Emergency Medical Assistance

If you need emergency in-patient assistance where local facilities are unavailable or inadequate, you should contact with Medilink:

Within mainland of China:400 920 3123
Outside mainland of China:86 400 920 3123

MEDILINK WILL REQUIRE SPECIFIC DETAILS OF THE NATURE OF ASSISTANCE REQUIRED:

- Information of the insured: full name, passport number, etc;
- Nature of injury, emergency or medical condition;
- Location of the member who has sustained injury or where he/she moved from;
- Full name and complete address of the hospital where the insured member is located;
- Full name of the treating doctor;
- Contact number of the hospital, ward and doctor;
- Contact details of the caller and family member.

PLEASE NOTE:

- This service is provided by an international assistance company who acts for us;
- Emergency evacuation can be used, when the insured member is away from his/her redence. Evacuation, when medically necessary, will always be to the nearest place where appropriate treatment can be given. An insured member evacuated during an emergency will subsequently be returned tohis/her principal country of residence.
- All cases must be assessed by us, and be deemed medically necessary for evacuation and/or repatriation. All arrangements must be made by us in order to ensure that related costs are covered by the International Emergency Medical Assistance(IEMA)service;
- If the insured, you or your family member makes his/her own arrangements, the costs will not be covered. Entitlement to the IEMA service does not mean that you or your family;member's treatment following evacuation or repatriation will be eligible for benefit. Any such treatment will be subject to the terms and conditions of member's plan.

ONLINE CONSULTATION AND MEDICINE AT SPECIFIED INTERNET HOSPITAL

Specified Internet hospital can provide online consultation and medicine service for insured aged 6 to 65 (Minors need to be accompanied by their guardians for consultation) when policy is effective.

Thanks to the video consultation platform, you can benefit health management services including healthcare advice, medical guidance, consultation of common diseases, disease prevention, rehabilitation guidance, interpretation of physical examination report, medication consultation, direct payment of medicine fee, home delivery of medicine, etc.**No waiting period applied; Unlimited consultation visits; Medicine 80% covered, annual medicine limit RMB 2,000, up to 2 reimbursement per month and up to RMB 200 per reimbursement.**

Specified Internet hospitals can provide medicine including OTC and prescription medicine(consultation and medicine for chronic diseases are not included), covering a variety of common diseases.

Medicine list may be updated, detailed list can be founded on our official website.

According to the regulation, purchase of medicine shall be decided by the doctor based on diagnosis. The doctor shall reasonably choose the brand and specification of the medicine. Dosage of the medicine is 3-7 days and shall not be changed as per patient's opinion.

Medicine delivery is limited in Mainland of China. You will need to pay for the delivery cost that-may be occurred.

1. Please link to the mini program of the Internet hospital via our official WeChat account.
2. Choose method of consultation: immediate video consultation or video consultation with reservation. When the consultation is finished, based on your diagnosis, you can benefit direct paying of medicine cost and medicine home delivery service.
3. When you first login the Internet hospital, please click 'complete your health record' to complete your personal information (ex. pre-existing conditions, etc).
4. We have selected an exclusive family doctor for you. You can make appointment through "video consultation reservation". In principle, your family doctor will not be changed within the same policy year to ensure continuity and consistency of your consultation service.
5. Your doctor will prescribe necessary medicine according to your health situation. Medicine cost and visits exceeding your policy coverage need to be covered by yourself.
6. Online platform provides medicine delivery service.
7. You can query historic orders in the mini program of the Internet hospital.
8. According to regulation, specified Internet hospitals can only provide online consultation and medicine services to users who speak Mandarin or accompanied by interpreter. In the absence of an interpreter, users can benefit English healthcare advice with reservation in advance.
9. This service shall not be regarded as phone treatment or 120 emergency service.

English healthcare advice

1. Please reserve your English healthcare advice 12 hours in advance
2. Add your customer service specialist via QR code in our official WeChat account.
3. Submit your reservation form.
4. Doctor will call you at the time reserved with the below number 0755-36561467. Please pay attention.

You can refer to the user manual of Online consultation and medicine at specified Internet hospital for more details

For inquiries regarding online consultation and medicine service: 400 680 8065 (Chinese service only).

Available in 9:00-21:00 from Monday to Friday, and in 9:00-18:00 from Saturday to Sunday. Working hours during holidays are from 9:00 to 18:00.

Any other time, You can leave a message on the hot-line, and customer service will reply to you on the next working day.

VALUE-ADDED SERVICE

Second medical opinion(SMO)

THE BENEFITS OF SMO

Although SMO may not change the previous diagnosis, it may sometimes detect any"mis" diagnosis.Through independent and objective advice from experts, we can better assist you in making medical decisions.

It is very difficult for an individual doctor to be aware of ALL the latest technology and advanced medical knowledge By leveraging on the pool of knowledge from the top Medical Institutions worldwide, it gives the insured member an opportunity to receive altemative treatment options from the health professionals in the world.

It provides the opportunity to confirm the diagnosis and treatment proposed by the treating doctor.

The Process of Obtaining a Second Medical Opinion for Critical Illnesses

STEP 1: Obtain a diagnosis and treatment plan from your treating doctor in a legally registered medical institution.(First Medical Opinion)

STEP 2: Contact Medilink 24-hour Service Hotline: 400-920-3123 to request for your Second Medical Opinion (SMO)service.

STEP 3: Medilink will perform preliminary verification to evaluate whether the diagnosis qualifies for SMO service.

STEP 4: Upon confirming that your condition qualifies for SMO, Medilink will submit a choice of the 3 qualified corresponding Medical Institutions from the SMO network to choose from.

STEP 5: Upon selecting one of the available options, the insured member will provide all the relevant medical records and information to Medilink, preferably in digital format.

STEP 6: The medical records provided by the member will be sent to the selected medical institution.

STEP 7: The medical institution will provide a medical opinion in writing to the member within 7 working days.

NOTE: The material may need to be translated. If you need it, Medilink can help the translation work, but you are not responsible for the accuracy of the translation. At the same time, the time for feedback of the second medical opinion will be appropriately extended.

Number of services available:1 time per policy year.

IMPORTANT NOTE :

The 'Second Medical Opinion' (SMO) service is provided when you suffer from chronic diseases (such as cancer, tumors, etc.) or suffer from life-threatening accidental injuries.
Based on the diagnosis (i.e. the first medical opinion) obtained, We will provide you with professional written medical advice through our network.

The ' Second Medical Opinion' (SMO) service is provided by independent medical service provider who will assess your medical condition based on the medical documents provided by you. We shall not in any case be held responsible for any medical opinion given by SMO service.

For details on the type of "Qualifying Medical Conditions for SMO Service", please contact our 24-hour hotline.

Within mainland of China: 400 920 3123
Outside mainland of China: 86 400 920 3123
Email: healthcare@axatp.com

The Process of Obtaining a Second Medical Opinion for Non- critical Illnesses

STEP 1: You have obtained a diagnosis (first medical opinion) from a legally registered medical institution.

STEP 2: Dial the toll-free hotline: 021 5299 2173, and put forward your need for a second medical opinion. A health specialist will guide you to collect disease-related information and send it to the designated service email.

STEP 3: After receiving the email, a doctor from a 3A-grade hospital will assess whether your current condition is suitable for receiving the second medical opinion service.

STEP 4: Upon approval, the designated service provider will select three renowned medical institutions in mainland of China based on your disease condition for you to choose from.

STEP 5: You can choose one of the renowned medical institutions provided for service (with arrangements made for departmental vice directors or higher-level experts).

STEP 6: The designated service provider will organize your disease-related information and send it to the medical institution you selected.

STEP 7: Within 10 working days of receiving your complete disease-related information, the expert from the medical institution you selected will provide you with a written second medical opinion.

STEP 8: If needed, after receiving the written second medical opinion, the designated service provider will offer interpretation services.

Number of services available:1 time per policy year.

Notes :

1. If you provide additional materials like examination reports during the service process, the feedback time for the second medical opinion may be extended.
2. The medical records required for issuing the second medical opinion should be within six months, including but not limited to outpatient medical records, discharge summaries, laboratory reports, medical imaging reports (CT or MRI), pathology reports, etc., preferably in electronic format (which can be obtained from relevant department physicians). If the provided medical records are incomplete, resulting in the inability to provide the second medical opinion service, neither we nor the designated service provider will bear corresponding responsibilities.
3. The above process applies to diseases diagnosed after medical treatment. Chronic diseases, routine health problems, emergencies, or acute conditions are not covered by this service.

Medicine Delivery For Chronic Disease

Our designated supplier provides regular express door-to-door service of dual track prescription drugs(it is a drug that can be purchased in the pharmacy outside the hospital with the doctor's prescription) for you with chronic diseases while the situation is stable and has taken the existing drugs for more than 3 months with no need of adjusting the usage and dosage of those drugs. Distribution scope is limit to Mainland of China.

1. Please submit your request of medicine delivery via call the 24-hour hotline 400 920 3123 at least one week in advance.
2. Submit the required documentations for assessment.
3. The pharmacy will dispense drugs according to the valid medical records and prescriptions provided, then send the express.
4. Please confirm and sign on the medicine list which is enclosed with the express when you receive the delivery.

Number of services available: No usage limit.

Outpatient coordination and escort

When you suffer from discomfort or a disease and needs to seek medical treatment, you can call the hotline 021 5299 2173, the health specialist will judge your current health status and provide medical suggestions, coordinate and arrange the outpatient services in optimized health network of designated supplier according to your choice to avoid repeated medical treatment and delayed diagnosis.

1. Please call hotline 021 5299 2173 to make an appointment 5 working days in advance.
2. The health specialist understands your illness and needs and confirm your personal information.
3. Select the appropriate hospital according to your situation and confirm with you by telephone.
4. On the day of treatment, the health specialist will escort you throughout the visit.

Number of services available : 2 time per policy year.

Notes:

1. Once the health specialist confirms the specific requirements for outpatient coordination services with you, the service is considered initiated. If a cancellation is requested after the requirement is confirmed, or if the appointment is not attended as scheduled due to your personal reasons, the service will still be considered completed.
2. If you need to cancel or change the escort service, please notify us at least 1 working day in advance. If the cancellation is made on the same day of the scheduled service, it will still be considered completed.
3. When minors, insured individuals over 65 years old, individuals with mental disorders, Alzheimer’ s patients, individuals with limited mobility, or patients with critical illnesses needs to use the escort service, they must be accompanied by an adult family member throughout the entire process.

Expedited Hospital Examination Service for Critical Illnesses

When you suffer from or is suspected to have contracted critical diseases and requires medical examination, we will expedite the scheduling of necessary medical examinations for you in order to timely follow-up diagnosis and treatment.

1. Please call hotline at 021 5299 2173 , our health specialist will guide you in submitting disease-related documents. (Including but not limited to medical information, appointment slips, etc.)
2. Upon reception of these documents, the examination will be scheduled within 7 working days.

Number of services available:1 time per policy year.

Notes:

1. This service is only available for use by the insured individual.
2. Gastroscopy, colonoscopy, and puncture examinations are excluded.
3. If delays or service failures occur due to third-party reasons such as hospital system issues, equipment malfunctions, or force majeure, we will coordinate alternative arrangements but shall not be liable for any direct or indirect losses incurred.
4. Once the documents are submitted, rescheduling or cancellation due to the insured's personal reasons will be considered as completion of the service.
5. This service does not cover any expenses incurred during the examination, including but not limited to examination fees, material costs, or equipment usage fees.
6. This service benefit is valid during the policy period. If the policy becomes suspended or terminated for any reason, the above service will also become invalid. However, services applied for before the expiration will still be provided.
7. For medical professionalism and safety considerations, this expedited examination service currently does not cover neonatal-related examinations or obstetric-related expedited requests.

Number of services available:1 time per policy year.

Multi-Disciplinary Treatment Service for Critical Illnesses

When you suffer from or is suspected to have contracted critical diseases, we can arrange a team of three or more experts at the level of associate chief physician or above in public hospitals to provide an online video-based multi-disciplinary treatment consultation to assist you in planning the next steps for diagnosis and treatment.

1. Please call hotline at 021 5299 2173 , our health specialist will guide you in submitting relevant medical documents. (May include but are not limited to outpatient records, blood test reports, CT scans, MRI reports, or pathology reports, etc.)
2. After receiving your complete documents, we will confirm the expert consultation arrangement within 10 working days.
3. We will schedule an online consultation at the agreed time(the duration typically ranges from 30 to 60 minutes, depending on the complexity of the case).

4. Within 5-10 working days after the consultation, we will provide you with a written expert opinion report.

Number of services available:1 time per policy year.

Notes：

1. If the insured fails to attend the consultation at the scheduled time, it will still be considered as completion of the service.
2. This service benefit is valid during the policy period. If the policy becomes suspended or terminated for any reason, the above service will also become invalid. However, services applied for before the expiration will still be provided.

Hospitalization coordination and escort

When you needs to be hospitalized in the network hospital of designated supplier, our service provider shall coordinate and arrange the medical institution within the network for you according to your choice.

You can call health hotline 021 5299 2173 to apply for service. After receivingyour application, the health specialist shall confirm whether your disease is within the scope of service and understand the relevant information of your related illness (including preliminary diagnosis, whether there is a notice of admission,etc.).

Without admission notice:

1. Designated supplier shall coordinate the outpatient service of the selected hospital for you to conduct medical treatment.
2. After treatment, if the attending expert issues an admission notice, our service provider will coordinate the hospitalization arrangement for you within 10 working days.
3. On the day of admission, the health specialist will escort you throughout the entire process of completing the admission procedures.

With admission notice:

1. Designated supplier will coordinate with the hospital to arrange hospitalization for you within 10 working days.
2. On the day of admission, the health specialist will escort you throughout the entire process of completing the admission procedures.

Number of services available：1 time per policy year; No usage limit to the number of times for critical illnesses.

Notes:

1. Once the health specialist confirms the specific requirements for hospitalization coordination services with you, the service is considered initiated. If a cancellation is requested after the requirement is confirmed, or if the appointment is not attended as scheduled due to your personal reasons, the service will still be considered completed.
2. If you need to cancel or change the escort service, please notify us at least 1 working day in advance. If the cancellation is made on the same day of the scheduled service, it will still be considered completed.
3. When minors, insured individuals over 65 years old, individuals with mental disorders, Alzheimer’ s patients, individuals with limited mobility, or patients with critical illnesses needs to use the escort service, they must be accompanied by an adult family member throughout the entire process.

Inpatient visit

If you require hospitalization due to illness or an accident, our service hotline at 400 021 5506 can offer you an inpatient visit service. Within 2 working days after your request, our staff will visit you at the hospital to deliver a care letter and a small gift, offering our support for your health.

Number of services available:1 time per policy year.

Notes:

1. This service is only available at 1,767 designated hospitals in the mainland of China.
2. If you need to reschedule a confirmed service appointment, a 12-hour advance notice is required.
3. Remote visitwill be arranged under the following circumstances:
   - The patient has a medically confirmed infectious disease, mental health condition, or other condition that may pose a physical or property risk to service personnel.
   - Due to pandemic restrictions or hospital control measures.

Exclusive nursing service in hospital

Customers can enjoy one exclusive nursing service in mainland of China due to illness or accident within the valid period of the insurance policy.

The services include pre-admission guidance, assessment of care demands, customized professional care plan of admission, 5-day nursing service ofadmission, on-site visit by professional nurses during admission period and on-site assistance by professional nurses on the day of discharge.You can call health hotline 400 021 5506 to apply for service.

Note：

1. This service is only available at 1,767 designated hospitals in the mainland of China.
2. To ensure your safety, this service provided by dedicated nursing personnel are mainly health promotion guidance services and life-care services. For medical nursing services which involve mainland of China's policies and regulations, it is recommended to operate in regular medical institutions with professional qualifications held by personnel within the area where their license is located.
3. This service firmly avoids providing customers with invasive nursing measures and other high-risk nursing operations (such as injections, etc.) to maximize the protection of customers' health and safety.
4. A fter a successful application for the service, if rescheduling or cancellation is needed, the insured individual must notify at least 1 working day in advance. If we have already arranged services for the insured individual but the insured individual does not use them at the scheduled time, it will be considered that the service has been used.
5. This service is not applicable in the following cases: maternity/pregnancy-related conditions (including ectopic pregnancy), miscarriage, childbirth (including C-section), contraception, sterilization, infertility treatment, artificial insemination and resulting complications; or medically confirmed infectious diseases, mental disorders, critical/severe conditions (including life-threatening situations requiring critical care notice), ICU/CCU admissions, health check-ups, quarantine treatment, as well as cosmetic/esthetic medical procedures. We appreciate your understanding.

Note：

6. If the customer or their family members fail to truthfully disclose medical conditions resulting in adverse consequences, neither we nor our authorized service providers shall bear corresponding or full medical/legal liabilities.
7. Our service personnel shall not assume any related or full legal liabilities arising from changes in the customer's medical condition when performing services in accordance with standard operating procedures.

Number of services available：1 time per policy year.

Discharge Support

Integrated with our excellent service provider, our service provider offer you discharge services after your hospital stay resulting from a covered injury or covered illness. Our discharge service is now carried out in major cities throughout Mainland of China. The discharge support package includes:

（1）**Transportation from hospital to home and support during the whole journey**
（2）**Discharge Guideline for home-based care**

Getting a smooth transition from hospital to home(please contact us at least 48 hours before discharge), **TEL**：400 021 5506.

TRANSPORTATION SERVICE

Our experienced caregivers will meet you at the hospital and arrange proper transportation for you and assist the whole transition process from the hospital to home.

A. If your destination is within 200km of the hospital, our service provider will provide transportation to your destination and escort you all the way to your residence；
B. If your destination is beyond 200km transportation distance from the hospital, then you may want to alter your destination to somewhere within 200km of the hospital(such as transportation hubs in your city (train stations, airports, bus terminals, etc.), since our service provider offer transportation service only within such distance;
C. During the whole journey, our caregivers will offer safety and comfort condition assessment and vital signs monitoring and give guidance accordingly.

Number of services available：1 time per policy year.

Notes：

1. This service is only available within the urban areas of 716 cities in the mainland of China.
2. Following situations are NOT covered by transportation service: transferring to another hospital; returning home because of withdrawal of treatment.
3. We DO NOT offer transportation services for patients with infectious diseases and mental disorders that may cause injury or property damage to caregivers.
4. The reservation shall be made at least 24 hours prior to the actual service time. Otherwise it may result in service unavailability or compromised service experience.
5. If you need to reschedule a confirmed service appointment, a 12-hour advance notice is required.

DISCHARGE GUIDELINE

The Discharge Guideline is provided by highly skilled multidisciplinary teams including specialist doctors, therapists, dieticians, and nurses From reviewing your medical history, the Guideline gives tailor-made instructions on daily care, complication prevention, assistive devices, safety recommendations around the home, nutrition planning, rehabilitation procedure, and health hazard prevention. Our caregivers will contact you or your family member to explain the Guideline to make sure that you understand the discharge instructions and can follow them.

Number of services available : 1 time per policy year.

Subsidies for medical treatment for critical diseases in other places

When you suffer from or is suspected to have severe diseases as agreed by the China Insurance Industry Association and requires hospitalization, you may use this service if the hospital you first visited is not in the same city as the hospital you went to for medical treatment. Designated supplier may reimburse the accommodation fee and transportation fees involved during the period up to RMB 10,000 per policy year, and the total accumulated amount shall not exceed RMB 20,000.

This service can be provided once in each policy year. The invoice date must be within the corresponding policy year and the request must be made in the corresponding policy year(Expenses incurred within 30 days before the expiration of the policy can be applied for within 30 days after the expiration of the policy). The unused subsidy amount in the current policy year will not be accumulated and will not be retroactive.You can call hotline 021 5299 2173 to apply for service. After receiving your application, the health specialist shall call back and help on the Subsidies' process.

Notes :

1. The accommodation subsidy amount shall be based on the invoice. The daily accommodation subsidy shall not exceed RMB 800 in top-tier cities (Beijing, Shanghai, Guangzhou, Shenzhen) and RMB 500 in other cities.
2. The transportation subsidy amount shall be based on the invoice. Flights are limited to domestic economy class, and trains are limited to second-class high-speed rail seats. If the actual cost exceeds the above standards, the subsidy will be calculated based on above-mentioned standards.

Subsidies of Transportation Expenses of return Journey for Non-critical Illness

If you suffer from a non-critical illness and need to seek medical treatment elsewhere, and the distance from your home to the hospital exceeds 200 kilometers (based on the shortest actual transportation route), our service provider will cover the cost of train or plane tickets for you and one family member to return home (train tickets limited to hard sleepers or second-class seats, and plane tickets limited to domestic economy class). You must provide valid transportation invoices containing you and your family members' names, as well as diagnosis certificates from both the local and cross-country medical institutions, as evidence for the medical treatment. The subsidies' cap is RMB 2,000 per policy year.you can call hotline 021 5299 2173 to apply for service.

Notes :

1. Subsidies for medical travel expenses incurred within one month before the policy expires can be applied for within one month after the policy expires. Applications beyond this deadline will not be processed for services rendered in the previous policy year.

Home Care of Post-Hospitalization

If you have received explicit nursing instructions after hospitalization, designated service provider can offer professional home care services to the insured individual, enhancing recovery and quality of life after discharge/operation.

Service Process

1. Please call our service hotline at 400 021 5506 at least 5 working days in advance. Service application hours: 8:00-20:00.
2. After verifying your information, our health specialist will develop a Home Healthcare Service Plan tailored to your physical condition and specific needs (including but not limited to nursing items, service frequency, and number of services).
3. The health specialist will explain the details of the Home Healthcare Service Plan to you, and the service will begin after obtaining your approval.
4. Doctors, nurses or therapists will provide post-hospitalization home care services at the scheduled time according to the arrangements specified in the Home Healthcare Service Plan.
5. Home care of post-hospitalization services are available from 9:00 to 18:00, excluding national statutory holidays.
6. You can call 400 021 5506 or contact your sales representative for a specific list of home care-service items.

Number of services available: Limited to 5 times per policy year.

Notes :

1. This service is only available for use by the insured individual.
2. Due to the limitations of the home environment, before providing this service, our service provider will conduct an assessment based on your actual needs and the procedures required. This assessment ensures that our service is designed to prioritize your health and safety while minimizing service risks. For higher-risk care procedures (such as injections, etc.), we reserves the right to determine whether they can be performed or not.
3. After a successful application for the service, if rescheduling or cancellation is needed, the insured individual must notify at least 1 working day in advance. If we has already arranged services for the insured individual but the insured individual does not use them at the scheduled time, it will be considered that the service has been used.
4. This service benefit is valid during the policy period. If the policy becomes suspended or terminated for any reason, the above service will also become invalid. However, services applied for before the expiration will still be provided.
5. During the service process, if additional consumables (such as gauze, cotton balls, medication, etc.) are needed depending on the service content, you will need to provide them yourself or pay for the purchase cost.
6. If the service cannot be completed due to reasons such as non-cooperation with the nursing procedure or failure to prepare the required self-supplied consumables, the service provider shall not be held responsible. In such cases, the service will still be considered as having been used.
7. This service can only be implemented after being signed and confirmed by you or your family member. The duration of each in-home service shall be based on the time required for the specific service items stipulated in the post-hospitalization in-home care plan.
8. If we find significant discrepancies between the initial assessment when the service is applied for and the actual conditions, or identify potential risks during service delivery, we reserves the right to refuse service without assuming any related liability. If adverse consequences arise due to the patient or family members failing to truthfully disclose the medical condition, we shall not bear any corresponding or full medical or legal responsibility.

Notes :

9. If the patient suffers from a medically confirmed infectious disease, mental illness, or any other condition that may pose physical or property risks to the service personnel, or is in a state that may endanger the service personnel, the service provider may refuse to provide services without assuming any related liability.
10. For clients who are unable to care for themselves or are in a disabled state, a family member must be present during the service to ensure personal safety. If no family member is present, we may refuse to provide the service.
11. The service personnel only provide technical services. The service provider shall not bear any corresponding or full medical or legal responsibility for adverse consequences caused by self-supplied medications, consumables, or related items required for the service.

Psychological counseling

Psychological counseling service from psychological counseling experts of designated supplier, such as marriage and love emotion, emotional management, family relations, parent-child family and so on. Psychological counseling is served via health hotline.

1. You can call hotline 400 620 1800 to make an appointment. The appointment time is 8:00-20:00. No service is provided during the legal Spring Festival holiday.
2. The health specialist confirms your information and has a preliminary understanding of the basic situation.
3. Our health specialist will match suitable psychological counselors for you, and call back in 3 hours to confirm the appointment time for psychological counseling.
4. At the agreed consultation time, the psychological counselor will proactively call you to begin the consultation.

Number of services available: 5 times per policy year.

Matters needing attention:

This service only provides routine psychological counseling questions, excluding crisis intervention (i.e. suicide, self-injury, etc. caused by special reasons).

In case of crisis intervention, both parties can communicate and negotiate according to the actual situation.

List of Restricted Medical Institutions

Please note we do not cover any expenses charged by the following medical institution:

This list may be updated, please refer to our official channels (including but not limited to the official website,customer service hotline, etc.) for specific notifications. For any details please contact 24-hour hotline 400 920 3123.

NO.	Hospital Name
1	Shanghai Wangzhiwei Clinic
2	Shanghai Wulei Clinic
3	Asia Medical Specialists
4	Chronic Disease Hospital of Ji'nan Traditional Chinese Medicine

NO.	Hospital Name
5	Shenzhen Chenyukun Clinic
6	All Ming Jing Tang TCM Clinics
7	Shanghai Yosemite Hospital (Jingan) and Shanghai Yosemite Clinic.
8	All Jijin Perfect TCM Clinics and Massage (including Shanghai,Kunming,Danyang)
9	All Shanghai Jingyiwei TCM Clinics
10	Shanghai Bowan Traditional Chinese Medicine Clinic
11	Shanghai Jin Bo TCM Clinic
12	Shanghai Bo Jin TCM Clinic
13	Shanghai Gaobo TCM Clinic
14	Shanghai Ji An TCM Clinic
15	Shanghai Tai Ji TCM Clinic
16	Shanghai Gaoran TCM Clinics, Wealth Branch and Health Branch
17	Klinoerth Therapy Clinic
18	Shanghai Whole Jiujiu Health Clinic
19	Beijing Zhenshitang Chinese Medicine Clinic
20	Beijing Yijia Jiahe Clinic
21	Ankang Yayou Dental Clinic
22	SERVICIO DE SALUD
23	Beijing Taiyi Tongyitang Clinic
24	Beijing Yufang Outpatient Department Co., LTD
25	Beijing Gapella Hospital
26	Beijing Jueguan Dental Clinic

NO.	Hospital Name
27	Beijing Jinger Hospital Management Co., LTD. Jinger Dental Clinic
28	Chengdu Gaoxin Renmei Yufang Comprehensive Outpatient Department Co., Ltd
29	Hangzhou Yu Hang Yufang Wei Lai Cheng Clinic
30	Hangzhou Yuhang Yufang Flower City Clinic Co., LTD
31	Hangzhou Zhen Wen Clinic
32	Huzhou Ruibo Tongyitang TCM Clinic Co., Ltd.
33	Nanjing Yufang Clinic Co., Ltd
34	Nanjing Zhen Wen Clinic
35	Qingdao Laoshan District DAVID Dental Clinic
36	DAVID DENTAL CLINIC QINGDAO
37	Yonsei MOA Hospital
38	Shanghai Sky Clinic
39	Shanghai Liang Gong Guan TCM Clinic (Damuzhi Branch/ Chengshan Rd Branch/ Tianwu Kongjian Branch/1088 Palace Branch)
40	Shanghai Lianggong Qiyuan TCM Clinic (Jinxiufang Branch)
41	Shanghai Jinghe Clinic
42	Shanghai WA Optimum Health Care
43	Shanghai Anfa Outpatient Department
44	Shanghai Shidao Shouzheng TCM Clinic
45	Shanghai Zhen Wen Clinic
46	Shanghai Siruiming Mental Health Clinic co. LTD.
47	Shanghai Hechuan Dental Clinic Co., Ltd.

NO.	Hospital Name
48	Shanghai Gelite Haohan TCM Clinic
49	Shanghai Shidao TCM Clinic
50	Tai Cang Yufang Clinic
51	Wuhan Yufang Traditional Chinese and Western Medicine Clinic Co., Ltd
52	Yixing Heqiao Hospital
53	Xi an Yufang Medical Management Co., LTD
54	Yantai Baishi Proctology Hospital
55	Shanghai Chengxin Dental Clinic
56	Yufang Healthcare
57	Beijing Kai Nuo Chiropractic Clinic Co., Ltd.
58	Beijing Tongrentang Jingbei Enterprise Management Co., LTD
59	Shanghai Yaolong TCM Clinic
60	Beijing Pinggu District Hospital / Pinggu District Traditional Chinese Medicine Hospital
61	Beijing Dehantang TCM Clinic
62	Beijing Junyi Traditional Chinese Medicine Hospital
63	Beijing Deshengmen Traditional Chinese Medicine Hospital
64	Shanghai Mingtang TCM Clinic Co., Ltd.

List of High-cost Providers

NB:

High-cost providers refers to a list of hospitals which are classified as high-cost providers by us. Co-insurance will be applied for members covered under certain plans if they seek treatment in these high-cost providers. There may be plans that DO NOT cover for treatment at these high cost providers.

This list may be updated, please refer to our official channels (including but not limited to the official website, customer service hotline, etc.) for specific notifications. For any details please contact 24-hour hotline 400 920 3123.

NO.	Hospital Name
1	All the United Family Hospitals and clinics
2	Raffles Medical Beijing/Shenzhen/Tianjin/Tianjintaida/Nanjing/Dalian Clinics(Beijing/Shenzhen/Tianjin/Tianjintaida/Nanjing/Dalian International SOS Clinics)
3	Shanghai East International Medical Center
4	St. Michael Hospital and Beijing Puhua International hospital & clinic
5	All the medical centers including hospitals belonging to Parkway Shenton Group in China and Singapore China - Excluding Chengdu Gleneagles Hospital and Chengdu Shenton Health Clinic Singapore - Gleneagles Hospital, Mount Elizabeth Hospital, Mount Elizabeth Novena Hospital, Parkway East Hospitals.
6	All the Global Health Care Medical & Dental Centers
7	International Medical Center-Beijing
8	All CanAm International Medical Center
9	All the medical centers including hospitals belonging to New Century Group (including Beijing Eden Hospital and Shenzhen Yihe Clinic, except Chengdu, Suzhou and Qingdao)

NO.	Hospital Name
10	Adventist Hospital
11	Matilda Hospital
12	Sanatorium Hospital
13	Sports Medical Centre (Hong Kong)
14	Shanghai International Medical Center

Version: September , 2026

安盛

www.axa.cn

AXA Tianping Property Insurance Co., Ltd.

If you need more detailed product and service information
Please follow the official account of AXA Tianping Private Health Insurance
Please refer to the Policy Wording for complete policy benefits and exclusions.

This manual is only available for the client serviced by Medilink.