

Regional cover with a personalised touch

Executive Healthcare Plan

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At Aetna

we make it our business to understand your health care needs. With more than 160 years of experience, including over 30 years in the international marketplace, covering over 600,000 members around the world, we are wellpositioned to provide comprehensive health benefits solutions.

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Abu Dhabi Banaglore Beijing Blue Bell Dubai Dublin Foshan Gurgaon Hartford

Regional individual and family solutions made easy

Hong Kong Jakarta London Manila New Delhi Shanghai Singapore Tampa Toronto

That's our commitment to you. We're dedicated to being a partner who provides you with consultative solutions, backed by a first class service philosophy you'll experience throughout all of our interactions.

At Aetna, the health of globally-mobile individuals and their families lies at the centre of everything we do. Through our first class approach to service, we are a valued partner, working daily to provide you with innovative and comprehensive products, programmes and services that can make a positive impact on vour health.

We take your health benefits needs to heart. That's why we've established a strong global presence, with a local footprint that touches key areas all over the world. With employees located across the globe, we are deeply embedded in the global marketplace and the expatriate experience. This enables us to best meet your needs with confidence and compassion.



Our service philosophy

At Aetna, we want our customers to be satisfied every time they interact with us. To achieve this goal, we have dedicated areas within the organisation focused on delivering a first class service experience.

The member experience

The 24/7 Aetna International Member Service Centre is committed to making sure you get the care you need, when you need it. Many of our multicultural and multilingual service professionals have experience as an expatriate themselves, giving them unique insight into the situations you may face.

You can receive assistance with:

- General benefits and plan inquiries

The International Member Service Centre is your one-stop resource, both day and night. Taking personalised service one step further, we can easily connect you to our Care and Response Excellence Team (CARE). CARE is a dedicated, clinical team that interacts one-on-one with you to provide:

- Pre-trip planning
- health needs
- Identification of providers and specialists

- · Questions on claims, benefit levels and cover
- Claims processing in many languages

• 24/7 support that's tailored to your specific

- · Worldwide coordination of routine and urgent medical care
- Assistance with obtaining prescription medications and medical devices
- Coordinating second opinions for complex cases
- Benefit coordination
- Coordination of care for return to home country after assignment completion
- Discharge planning
- · Clinical claim and international standards of care reviews
- Maternity management

Innovative tools and resources

Our first class service philosophy extends far beyond our organisational capabilities. Aetna is committed to providing valuable information through technological innovation.

With your cover, you have access to tools and resources via the Aetna International secure member website at www.AetnaInternational.com to help them navigate their health care experience more easily, including:

• Doctor and medical facility search tool that allows members to find screened and approved physicians and medical facilities

- Health and wellness information to help members improve or maintain their health, given lifestyle, diet and/or conditions
- Health and security news with the latest risk ratings and security alerts
- City profiles inclusive of travel information such as vaccination requirements and emergency phone numbers
- Drug and medical phrase translation **services** with features that allow members to search for medication availability by country
- Mobile doctor directory applications helping members to find direct-settlement facilities in their citv
- More mobile applications coming soon

Executive Healthcare Plan overview

The Executive Healthcare Plan (EHP) is designed with the needs of regionally mobile individuals in mind. It provides the medical cover you require, with a first class level of service you can rely on.

EHP provides a range of cover options with benefits that can include:

- Emergency evacuation or out of country transportation costs to an appropriate medical facility within the selected geographic coverage area for inpatient/ day patient treatment; this also includes reasonable travel costs
- Flexibility to obtain medical treatment at the facility of your choice, within the selected geographic coverage area
- Accident and emergency treatment outside the selected geographic coverage area for temporary business trips or holidays
- Inpatient and outpatient psychiatric treatment

- Alternative medicine
- Routine pregnancy and childbirth
- Complications of pregnancy
- Newborn accommodation
- Accidental damage to teeth
- Transport of mortal remains/cost of local burial or cremation
- Hospice care charges
- Organ transplant
- Rehabilitation
- Routine management of chronic conditions

Dental cover

AIDS

- Renal dialysis
- Vision care
- Inpatient/day patient treatment for chronic conditions
- Durable Medical Equipment
- Personal Accident
- Travel
- Aetna Security Service

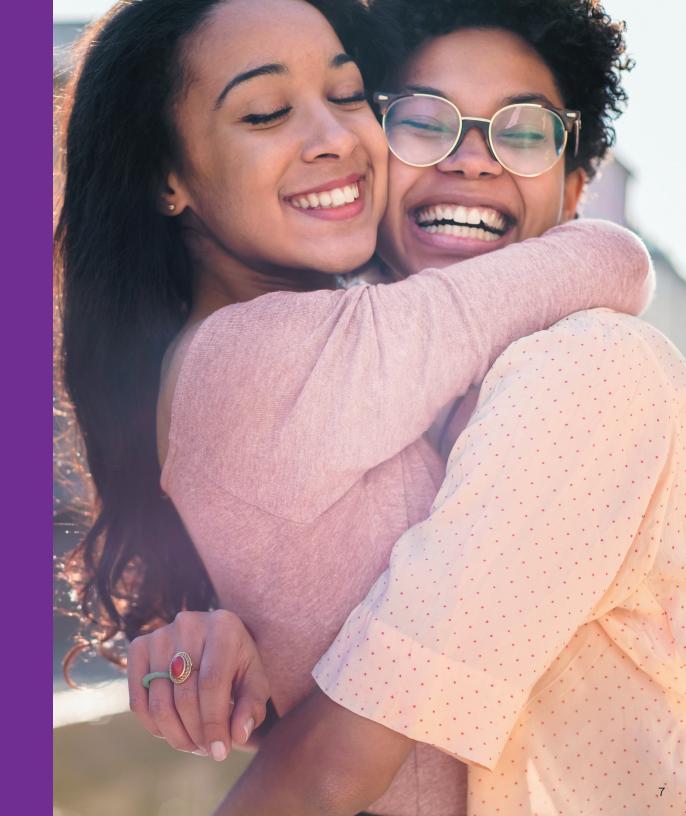
- and Sri Lanka
- Worldwide excluding USA
- Worldwide

In terms of accessing care, geographic coverage options include:

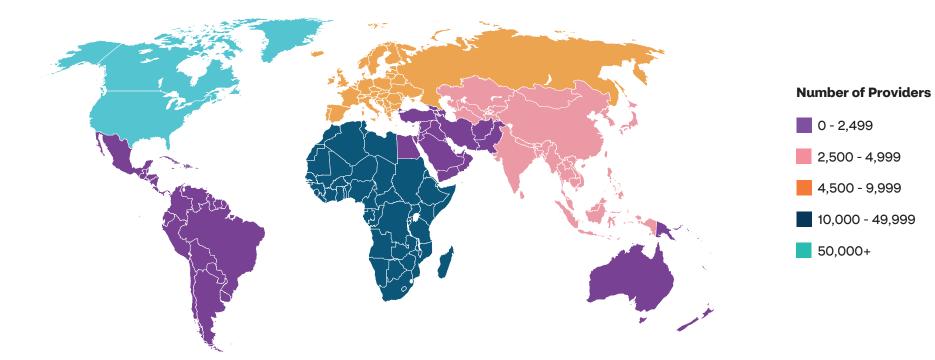
Africa plus India, Pakistan, Bangladesh

A collaborative approach

Our skilled team is here to partner with you to identify your ideal solution.



Our international community of health care professionals*



Reliable access to care

Aetna is committed to building strong and secure partnerships with health care professionals around the world — so that you have access to quality care when and where you may need it. That's why we have negotiated simplified prepayment procedures with thousands of medical facilities worldwide. Called "direct-settlement" arrangements, these agreements make accessing care easier and cover any eligible up-front costs associated with your care or treatment, such as planned inpatient treatment, a maternity stay or day patient services. This is a significant benefit if you're faced with a more expensive medical procedure.

If you are unable to find a specific health care professional in our directsettlement database, in the event that you require hospitalisation, we can coordinate a one-time direct-settlement agreement guickly and easily. In fact, we have a 95 percent success rate in negotiating these arrangements. You also have the freedom to pay up-front for care received at any health care professional worldwide, and submit a claim to us for reimbursement.

Q. Will the plan cover any illnesses or injuries that I had prior to enrolling in the plan?

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If you prefer, our Full Medical Underwriting (FMU) option covers pre-existing medical conditions provided you submit a full medical declaration for us to assess. We will agree to either accept all or some of your pre-existing medical conditions and may charge an increased premium, exclude all of your preexisting medical conditions, or decline cover altogether.

Q. Is there an annual benefit limit?

*The North America region includes health care professionals who participate in the Aetna U.S. PPO Network.

A. Existing conditions may be specifically excluded and the terms of any exclusion will be noted on your schedule of cover. These will be assessed at the time of application based on the information you declare to us. Undeclared conditions will be excluded and will invalidate your cover. If your underwriting terms are moratorium, cover for all preexisting conditions (and related conditions). with the exception of congenital conditions, is excluded during the first two years of membership. After this period, should an eligible condition recur, provided you have been treatment, symptom and advice free for a continuous period of two years since joining the plan, then the future costs will be covered which have been declared and accepted by us

A. You are able to claim up to an annual maximum of U.S.\$1,600,000 under Major Medical and Major Medical Plus plans. \$2,500,000 under Foundation plan and \$5,000,000 under Lifestyle options. Additionally, certain benefits have sub-limits. You will only be required to pay an excess if you have specifically chosen this option.

O. Can I seek treatment anywhere in the world?

A. Three geographic coverage options are available for accessing emergency and elective treatment. These include Africa plus India, Pakistan, Bangladesh and Sri Lanka, Worldwide excluding USA: and Worldwide.

Q. Am I covered if I travel outside of my selected geographic coverage area?

A. You are covered for Accident and Emergency treatment outside of your selected geographic coverage area for business trips or holidays. Specifically, this benefit is provided for up to 90 days during the period of cover and limited to a maximum of 60 days of treatment per event.

Q. Is a medical examination required to enrol in the plan?

A. No. In the rare instance that we require additional information for fair and accurate underwriting purposes, we will ask you to submit a medical report from your doctor.

Q. How quickly does my cover go into effect?

A. As soon as we receive a completed application form (email or original), we can confirm immediate cover for 15 days, subject to underwriter's acceptance and pending receipt of the premium. If you wish to be covered immediately, please contact Executive Healthcare Solutions on (254) 20 291 0000 or (254) 709 337 000. You may also reach us via email at info@executive-healthcare.com.

O. Can my family members also be covered?

A. Yes. Your spouse or adult partner, who is permanently living with you, can be included as a dependant. Also eligible for cover are unmarried children not more than 18 years old and living with you, or not more than 26 years old and in full-time education. Again, this is subject to a completed Application form.

Q. What happens if I want to cancel my cover?

A. You have 15 days from the commencement date of your cover to review your benefits. If you decide to cancel and no claims have been made, we will arrange a full refund of any premium paid, provided we receive a written request to cancel your cover.



Global presence, local footprint — around the corner or around the globe, we're there. With Aetna, you and your family have access to first class benefits and services.

Are you ready to experience the Aetna difference?

To learn more, contact us today

EHS Limited Suite 2004, Level 2, Alexander House, 35 Cybercity

Ebene, Mauritius

T: +230 464 5100 **F:** +230 467 3100

info@ehs-limited.com

www.executive-healthcare.com

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Aetna does not provide care or guarantee access to health services. Not all health services are covered. Health information programmes provide general health information and are not a substitute for diagnosis or treatment by a health care professional. See plan documents for a complete description of benefits, exclusions, limitations and conditions of cover. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna International plans, refer to www.AetnaInternational.com.

Whenever coverage provided by any insurance policy is in violation of any U.S, U.N or EU economic or trade sanctions, such coverage shall be null and void. For example, Aetna companies cannot pay for health care services provided in a country under sanction by the United States unless permitted under a written Office of Foreign Asset Control (OFAC) license. Learn more on the US Treasury's website at: www.treasury.gov/resource-center/sanctions.



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