

Continuing your international healthcare cover

Once you leave your company, you'll no longer be covered on their international healthcare scheme. But don't worry, as the scheme was provided by AXA, it's easy for you and your family to continue your cover on one of our personal plans. And you can have it all set up before you leave.

What we're offering you:

- A chance to keep your cover for previous and existing medical conditions. (Some of the benefit limits you had on your company plan may differ on a personal plan).
- Up to 3 months to take up the offer, after leaving your company scheme.
 You can also benefit from this offer before you leave.

You may find it difficult to continue your cover for any existing or previous medical conditions at a later date.

It's also important to note that if you decide to move insurers, you and any family members covered on your policy, wouldn't be guaranteed this continuity of cover.

By continuing your cover with AXA, you'll be able to:

Access any claims history or records you already have with AXA

 Any claims history you have can be transferred across from your company scheme – no need for paperwork or application forms.

Continue using your online account

 You'll still have access to your online account, where you can manage your account details and submit any claims, and stay in touch with us.

Choose where you want treatment

You can still choose to have treatment anywhere in the world – whether that's locally, back home with your family doctor, or with a specialist in a different country.



How to continue your cover

Call us today on our dedicated helpline: +44 (0) 1892 612 080.*

We can help explain your options, go through what is and isn't covered and set up your cover for you.

†Due to restrictions in some countries, we might not be able to provide you with cover. To find out more, just get in touch.

Introduction

Lines are open Monday to Friday, 8am-5pm (UK time). We may record and/or monitor calls for quality assurance, training and as a record of our conversation.

How to get the right cover for you

To take out a new policy for you and your family, just give us a call.

Tell us who to cover

Whether it's just you, or your family too, you will all be looked after, on one plan.

You'll need to give us the basic details of anyone covered on your policy, like date of birth and country of residence.

Here's an example

Emma works in Spain. She chooses Comprehensive cover for the out-patient options, and includes dental care for routine check-ups.

She doesn't visit the USA, so has excluded it, knowing she can still have emergency cover if she finds herself there unexpectedly. She's also chosen to cut costs by adding an excess of £250.

Choose what to include in your cover

Depending on the level of cover you choose, you can opt for any of the following:

- Out-patient treatment including consultations, vaccinations, diagnostic tests and more.
- ✓ **Dental care** emergency and routine.
- ✓ Cover for when you're travelling

 for things like lost luggage

 and cancellations.

Find the cover that's right for you

Choose a plan to meet your needs and budget.

Click below to find out more:

Tailor your cover

It's your choice.

- Add an excess: when you claim, you'll agree to pay up to a set amount per policy year, and you'll pay less for your premiums.
- Choose how often you'd like to pay: monthly, quarterly or annually.
- ✓ Include or exclude the USA: it's that simple. This can alter the cost of your premiums. Even if you choose 'Worldwide excluding the USA', you'll still have emergency cover when visiting the USA, with all our cover levels except Foundation.

Let us do the rest

We'll help you set up your cover.

From that moment, we'll be there for you whenever you need us. Even if it's just a simple question about your health cover, all you need to do is call us.

You can start your policy from the day your company policy ends, so you won't have any gaps in your cover.

How to get the right cover for you

AXA at your side

With one of the world's leading insurers at your side, you can focus on getting the most from life's adventures, knowing we've got your back if you need us. Here are just six of the reasons it pays to have AXA with you.



You've had the diagnosis, but you just aren't sure...

You can turn to us

With your cover you can have an independent second opinion from world-leading experts. We'll also provide you with a medically trained case manager who can speak to local health providers in their language and support you and your family, from diagnosis to recovery.

The Second Medical Opinion Service is available over the phone to all our members.



You're walking into a hospital or clinic, but you don't know if they'll recognise your cover...

You're covered by a leading insurance brand

Our global reach means that hospitals and clinics around the world will trust your cover. This means, in many cases, we can pay the costs directly for you.

AXA is one of the largest insurers in the world, with offices in 62 countries, and local knowledge and support wherever you happen to be.



You need to see a doctor but you're struggling to find the time...

Have a doctor at your fingertips

With our Virtual Doctor service, you can speak to an experienced doctor by video consultation or by phone, from anywhere in the world - day or night.

The Virtual Doctor service is available on all our plans.



You need mental health support...

Speak to a psychologist

Whatever you're facing, there's someone here for you to talk to. With the Mind Health service, you have access to fully qualified psychologists over the phone. Choose where and when to have your sessions and get the tools and guidance you need to help you. This is accessible via the Virtual Doctor service, following a referral if required.



It's an emergency, but you know you can't get the help you need close by...

We'll get you where you need to be

If you have a serious accident or illness and can't get the help you need locally, we'll arrange for you to be evacuated to the nearest medical facility – whether that's a short drive or an international flight away. And then when you're ready, we'll get you back home.

All plans include emergency evacuation and repatriation as standard.



You can rely on us to be there when you need it most...

Extra cancer support

Our Dedicated Care team is available by phone from 9am to 5pm (UK time) for members receiving cancer treatment. They can:

- give you ideas on the questions to ask at appointments
- help you decide on a treatment plan
- advise on how to cope with chemotherapy
- simply just be there to listen.

Our award-winning service is rated consistently high by our members, with a rating of 4.8/5.1

AXA at your side

A closer look at the plans

This is just a summary to help you choose. For more detail, just ask us for a benefits table.

1 of 2

Foundation

Standard

Foundation plan

A summary of what's included in the Foundation plan:

- ✓ An overall policy limit of £100,000 / €125,000 / \$160,000.
- ✓ Hospital charges if you need to stay in hospital overnight or as a day-patient.
- ✓ Surgery whether you're staying overnight or not.
- ✓ A second opinion if you need some reassurance, including a medical case manager.
- ✓ We'll get you to the care you need and home again: emergency evacuation and repatriation – covered as standard.
- ✓ Emergency in-patient and day-patient cover everywhere, excluding USA (unless you have chosen Worldwide cover).
- ✓ A wide range of cancer treatment, including radiotherapy, chemotherapy, bisphosphonates, biological therapies and experimental drugs.
- ✓ Ambulance transport, to and between hospitals.
- ✓ You can stay with your child if they need hospital treatment.
- ✓ Cover for accidental damage to teeth.
- ✓ Medical conditions that start during pregnancy.

Upgrade Foundation:

+ Out-patient treatment such as extra tests or physiotherapy.

Standard plan

Everything in Foundation, plus:

- ✓ A higher overall policy limit of £1,000,000 / €1,275,000 / \$1,600,000.
- ✓ Cover for wigs or external prostheses.
- ✓ Emergency treatment in the USA no matter your chosen area of cover.
- ✓ Cash benefit for free in-patient treatment.
- ✓ Cover for non-routine dental treatment (e.g. replacing crowns).

Upgrade Standard:

- + Extra cover for routine treatment you have as an out-patient, such as specialist visits or extra tests.
- + International travel insurance, with all the cover you'd expect, like cancellation or lost luggage.

Plans

Comprehensive

Prestige

Prestige Plus

Comprehensive plan

Everything in Standard, plus:

- More cover for routine treatment you have as an out-patient, such as specialist visits or extra tests.
- Drugs and dressings when you're an out-patient.
- ✓ Cover for chronic conditions that arise after you join, such as asthma and diabetes.
- ✓ Cover if you ever need kidney dialysis.
- A nurse to give chemotherapy or antibiotics by drip in the comfort of your home.
- Cover for eye tests and prescription glasses.
- Chinese herbal medicine.

Upgrade Comprehensive:

- + Cover for your routine dental checkups and care.
- + International travel insurance, with all the cover you'd expect, like cancellation or lost luggage.

Prestige plan

Everything in Comprehensive, plus:

- Cover for your routine pregnancy checkups and childbirth.
- ✓ An allowance you can use to get annual health checks helping to spot potential problems early.
- ✓ Palliative care if you're diagnosed with cancer, to relieve pain if other treatment is no longer working.
- ✓ Disability compensation to give you and your family some financial reassurance if you become disabled.
- ✓ International travel insurance, with all the cover you'd expect, like cancellation or lost luggage.

Upgrade Prestige:

+ Cover for your routine dental checkups and care.

Prestige Plus plan

Everything in Prestige, plus:

- Extra out-patient cover.
- Extra emergency cover in the USA (if you've chosen Worldwide excluding the USA).
- ✓ Higher limits to give you more flexibility and treatment choices.
- ✓ Cover for your routine dental checkups and care.
- ✓ Palliative care if you're diagnosed with any illness, to relieve pain if other treatment is no longer working.
- ✓ More cover for Chinese herbal medicine.

What's not included

As with most health insurance, there are some exclusions and limits on all of these plans.

The plans don't cover:

- ✗ Treatment outside your area of cover or against medical advice.
- ✗ Treatment for injuries as a result of sports that you receive money for taking part in.
- ✗ Your costs for arranging treatment, such as phone calls and travel.
- ★ Treatment designed to prevent illness rather than treat it.
- ✗ Treatment charges that the hospital or medical practitioner would not reasonably and customarily charge in the country where you have the treatment.

Speak to your AXA representative if you have any questions and to find out what's not covered on each plan.

Plans

We were not only a number, a case: there was personal care and support

Maya's story with AXA since 2006

"Kelly, the lady who is overlooking our case, has been fantastic. In such difficult times, when one's child is being treated with cancer, one needs all the support to allow a parent to be strong and instil strength in his/her child.

Kelly's sincere care and efficient attention went beyond professionalism. This is a tribute to AXA, your recruitment, your training and your culture. We were not only a number, a case: there was (and still is) personal care and support which exceeded our expectations. Kelly even sent a colouring book and colouring pencils for my child. I had tears in my eyes when she received them. Thank you for nurturing such a culture: it is indeed personalised care."



Personal stories

Common questions

If you're thinking about continuing your healthcare cover, let us help.



What is the continuation of cover offer?

If you begin your personal plan within the 3 month period after your corporate scheme ends, you can stay covered for your previous and existing medical conditions, subject to the benefits and terms of the new plan you've chosen.



How long do I have to use the offer?

You have 3 months from the date your corporate healthcare cover ends, to take up our offer. If you do, we'll always start your new policy on the date you left your company plan. This makes sure there's no gap in your cover. So get in touch early and make the most of your new plan right away.



Why is it important to take the offer now?

After the first 3 months, we can't guarantee that we'll be able to offer you continuous cover so if you still need healthcare insurance, it's best to speak to us straight away.

Plus if you decide to move insurers, they may not be able to offer you cover for medical conditions you or your family had while you were with us.



Do I have to wait until I've left my company before setting up my new plan?

No, you can talk to us anytime about your new plan and we can set it up to start the day you leave your company scheme.

You don't need to give us any documentation from your company and if you have any questions about your new cover, we can go through them over the phone.



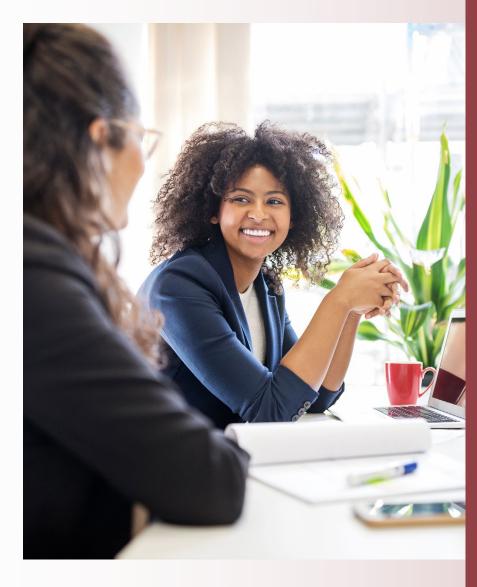
Can I add my family members?

Yes, you can add family members to your new policy. If any of your dependents were also covered on your corporate scheme, they'll be able to continue their cover too, as long as you let us know within 3 months.



Will my benefits stay the same?

Your benefits will depend on the cover level you choose. However your company may have chosen to include specific benefits and limits for their employees which may not be available on our personal plans.



FAQs

Still want AXA by your side?

To help find a plan that suits your needs and budget and to get a quote, please simply get in touch.



Give us a call on +44 (0)1892 612 080.

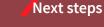
Lines are open Monday – Friday 8am – 5pm (UK time).



Email us at internationalsales.health@axa.com
Visit our website axaglobalhealthcare.com



Speak to your AXA representative or intermediary today.



¹Score of 4.76/5, based on 24,142 responses on Stella (customer feedback platform) from Jan - Dec 2020. Award: Customer Care Solution of the Year winner, 2021. Awarded by Insurance Times for the Claims Excellence Awards. The Virtual Doctor, Mind Health and Second Medical Opinion services are provided by Teladoc Health.

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