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Employee benefits
PortaProtection

Medical protection from employment to retirement



Product brochure

Medical protection on the move

It is always exciting to move into new roles or turn a new page of life entering retirement. Life could never be better as now you can carry the very best of your medical protection with you.

As an existing member of an AXA group medical insurance scheme¹, you, your dependants and immediate family can continue to enjoy peace of mind from a comprehensive medical protection that **PortaProtection** (“the Plan”) can provide². It is also designed to top-up your group medical insurance coverage, enhancing coverage for yourself and your family. The Plan features lifetime coverage and worldwide protection. Existing members of an AXA group medical insurance scheme can enjoy guaranteed acceptance and no underwriting is required when applying for **PortaProtection**.

Distinctive features



Continuity of your existing group medical benefits^{2,3}

Whether you are moving from one employer to another or planning to retire, you will still be able to maintain the comprehensive medical coverage which you used to enjoy. Even if you join a new group medical insurance scheme provided by your new employer in future, **PortaProtection** can still be a supplement to your medical plan.



No underwriting is required⁴ and guaranteed acceptance⁵

Any existing members of an AXA group medical insurance scheme from 15 days up to age 64 can enjoy guaranteed acceptance, with no requirement for a medical questionnaire or screening.



Coverage for pre-existing conditions⁶

Unlike most other individual health insurance plans, for existing members of an AXA group medical insurance scheme, **PortaProtection** will cover pre-existing conditions if you have been continuously insured under an AXA group medical insurance scheme and / or **PortaProtection** for at least 12 consecutive months. (Please refer to section **Example on the coverage for pre-existing condition** of this product brochure for details.)



Lifelong protection and guaranteed renewal^{7,12}

You will enjoy lifetime guaranteed annual renewal of your **PortaProtection** policy irrespective of your health condition. Be rest assured that wherever life takes you, you will continue to benefit from comprehensive medical protection.



Comprehensive reimbursement of medical expenses³

PortaProtection enables you to obtain the medical treatment of your choice by providing you with comprehensive reimbursement protection of a proportionate amount or full amount of the actual medical expenses incurred (depending on your plan chosen), covering expenses relating to room and general nursing care benefits, intensive care benefit, advanced diagnostic imaging, lump sum hospital and surgical benefits, top up cancer / renal dialysis benefits, etc.



An option of deductible amount⁸ to suit your different medical needs in your life journey

If you are currently covered by an AXA group medical insurance scheme or other medical plans, you may top up your medical protection at preferential premium rates by choosing a plan with deductible. To provide you with more flexibility in retirement planning, you may apply to remove the deductible at age 55, 60 or 65 of the insured person within 30 days before the relevant policy anniversary without providing further evidence of insurability of the insured person.



Design your own medical plan with flexibility

You can tailor your plan with:

- different levels of hospital and surgical benefits
- deductible for designated plans
- optional outpatient benefits



Family Care Services⁹

In case of hospitalisation due to accidental bodily injury, you will be entitled to a series of Family Care Services for your home, child(ren) and pet.

PortaProtection at a glance

	Existing members of an AXA group medical insurance scheme	Not existing members of an AXA group medical insurance scheme
Benefit period	Whole of life	
Issue age / Eligibility ¹⁰ (subject to the conditions stated in section Enrolment guidelines below)	15 days old – 64 years old	<ul style="list-style-type: none"> 15 days old - 64 years old, and Dependants and immediate family members including spouse, child(ren)¹¹, parents and siblings of existing members of an AXA group medical insurance scheme who are not existing members of an AXA group medical insurance scheme
Underwriting	Guaranteed acceptance	Health declaration is required and is subject to AXA's approval
Policy renewability	Guaranteed lifetime annual renewal ^{7,12}	
Premium structure	Yearly adjusted based on attained age ^{7,12}	
Payment mode	Monthly or annual	
Effective date for coverage	The first day of a month ¹³	

Enrolment guidelines

	Existing members of an AXA group medical insurance scheme (a)	Not existing members of an AXA group medical insurance scheme (b)
Application submission period	Must be submitted either: <ol style="list-style-type: none"> within 30 days after joining an AXA group medical insurance scheme; or within 30 days after the policy anniversary date of AXA group medical insurance scheme¹⁴; or within 30 days prior to the termination of their membership¹⁵ in AXA group medical insurance scheme; or within 30 days prior to the birthday of age 65 	Must be submitted either: <ol style="list-style-type: none"> during the application submission period of the relevant existing member of an AXA group medical insurance scheme set out in items 1 to 4 under column (a); or within 30 days prior to the PortaProtection policy anniversary date of the relevant existing member of an AXA group medical insurance scheme

Example on the coverage for pre-existing condition

Example	The PortaProtection applicant	PortaProtection application submission period	AXA group medical's membership effective date	PortaProtection effective date	Pre-existing condition cover from
1	Existing group member	within 30 days after joining an AXA group medical insurance scheme	1 January 2019	1 February 2019	1 January 2020
2	Existing group member	within 30 days after the policy anniversary date of AXA group medical insurance scheme ¹⁴	1 January 2019 (AXA group medical policy anniversary date: 1 March 2019)	1 April 2019	1 January 2020
3	Existing group member	within 30 days prior to the termination of their membership ¹⁵ in AXA group medical insurance scheme	1 January 2019 (Last employment date: 31 March 2019)	1 April 2019	1 January 2020
4	Not an existing group member	According to "Application submission period" in above column (b)	N/A	1 January 2019	Not covered

Mandatory Insured Benefits

■ Traditional Hospital and Surgical Benefits[^]

Summary of benefits	Maximum limit per insured person (HKD)		
	Plan level		
	Plan 1	Plan 2	Plan 3
1. Room and General Nursing Care Benefits* Daily limit Maximum days per disability	700 100 days	1,750 100 days	3,500 100 days
2. Meal Allowance* Daily limit Maximum days per disability	200 100 days	250 100 days	300 100 days
3. Hospital Services Benefits (Ancillary Charges) (excluding advanced diagnostic imaging (see item 12 for details)) Maximum limit per policy year	15,000	30,000	45,000
4. Physician's Fees Benefit* (non-surgical) Daily limit Maximum days per disability	700 100 days	1,750 100 days	3,500 100 days
5. Surgical Benefit (including ward attendance fees) Maximum limit per disability ■ Complex (including clinical operation**) ■ Major (including clinical operation**) ■ Intermediate (including clinical operation**) ■ Minor (for clinical operation, see item 11***)	 50,000 25,000 12,500 6,250	 75,000 37,500 18,750 9,375	 100,000 50,000 25,000 12,500
6. Operating Theatre Fees Maximum limit per disability ■ Complex ■ Major ■ Intermediate ■ Minor	 15,000 7,500 3,750 1,875	 22,500 11,250 5,625 2,813	 30,000 15,000 7,500 3,750
7. Anaesthetist's Fees Maximum limit per disability ■ Complex ■ Major ■ Intermediate ■ Minor	 15,000 7,500 3,750 1,875	 22,500 11,250 5,625 2,813	 30,000 15,000 7,500 3,750
8. Inpatient Specialist's Fees Benefit (non-surgical) Maximum limit per disability	7,000	17,500	35,000
9. Intensive Care Benefit Maximum limit per disability	14,000	28,000	42,000
10. Post-operative Consultation / Therapy (for a period up to 6 weeks after discharge from hospital including diagnostic / pathology exam) Maximum limit per disability	2,500	3,750	5,000
11. Additional Minor Surgical Benefit at Doctor's Clinic*** Maximum limit per disability	6,250	9,375	12,500
12. Advanced Diagnostic Imaging (including test performed in outpatient settings) ■ Magnetic Resonance Imaging ■ Computerised Tomography Scan ■ Positron Emission Tomography Scan Maximum limit per disability	 5,000	 7,500	 10,000
13. Emergency Outpatient Treatment (for accidents) Maximum limit per disability	6,000	8,000	10,000

* The limit is counted on a daily basis and cannot be accumulated.

** Surgical benefit at doctor's clinic includes all related treatments incurred on the date of operation and post-operative consultation / therapy, subject to the maximum limit per disability.

+ As for minor operation, benefit will be paid under item 5 or 11 up to maximum limit per disability.

[^] Mental illness and emotional disorder are not covered by Traditional Hospital and Surgical Benefits.

Mandatory Insured Benefits (cont'd)

■ Lump Sum Hospital and Surgical Benefits^{^^}

Summary of benefits	Maximum limit per insured person (HKD)								
	Plan level								
	Plan 4	Plan 5	Plan 6	Plan 7	Plan 71 Deductible	Plan 8	Plan 81 Deductible	Plan 9	Plan 91 Deductible
Room type entitlement	Ward	Semi-private	Private	Ward	Ward	Semi-private	Semi-private	Private	Private
Maximum limit per policy year for items 1 to 13 of Traditional Hospital and Surgical Benefits (no item limit is applied)	150,000	300,000	600,000	150,000	150,000	300,000	300,000	600,000	600,000
Reimbursement percentage	80%	80%	80%	90%	90%	90%	90%	90%	90%
Deductible amount per year	0	0	0	0	80,000	0	150,000	0	300,000

^{^^} Mental illness and emotional disorder are not covered by Lump Sum Hospital and Surgical Benefits.

The amount payable will be paid in the following percentages if the incurred room type is higher than insured person's entitlement:

Entitlement	Incurred room type	Reimbursement percentage
Ward	Semi-private	50%
Ward	Private	25%
Ward	VIP / Deluxe / Suite	0%
Semi-private	Private	50%
Semi-private	VIP / Deluxe / Suite	0%
Private	VIP / Deluxe / Suite	50%

■ Top Up Cancer / Renal Dialysis Benefits

Chemotherapy / Radiotherapy / Renal Dialysis Treatment ^Δ performed in inpatient and outpatient settings	Maximum limit per insured person (HKD)								
	Plan level								
	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6	Plan 7 / Plan 71	Plan 8 / Plan 81	Plan 9 / Plan 91
Maximum limit per disability	100,000	200,000	300,000	100,000	200,000	300,000	100,000	200,000	300,000
Reimbursement percentage	80%	80%	80%	80%	80%	80%	90%	90%	90%

^Δ The benefit will be applicable after the limit of "Traditional Hospital and Surgical Benefits" or "Lump Sum Hospital and Surgical Benefits" is exhausted and will be payable starting from the next eligible claims incurred.

■ Value-added Service – Family Care Services⁹

In case of hospitalisation due to accidental bodily injury, the insured person will be entitled to the following services for each bodily injury:

Service	Details
Domestic home care service	Deliver home care service for a maximum of 9 hours with a minimum of 3 consecutive hours per visit
Baby-sitting or child-care	Look after your unattended dependant child(ren) (up to two children under age 12) for a maximum of 8 hours with a minimum of 4 consecutive hours per visit
Pet care	Including transportation from residence to the nearest pet hotel and accommodation with total transportation and pet hotel expense up to HKD500 per day for 5 days (applicable to one dog or cat only)
Meal delivery assistance	Arrange meal delivery to hospital or residence at the cost of the insured person

Optional Insured Benefits

■ Optional Outpatient Benefits

Summary of benefits	Maximum limit per insured person (HKD)			
	Plan level			
	Plan 1	Plan 2	Plan 3	Plan 4
1. Outpatient Doctor's Consultation Benefit (including western medicine) Maximum limit per visit Maximum visits per policy year Reimbursement % per visit between 1 and 10 visits Reimbursement % per visit after the 10 th visit	150 50 visits 80% 60%	200 50 visits 80% 60%	300 50 visits 80% 60%	350 50 visits 80% 60%
2. Outpatient Diagnostic Laboratory Tests Benefit[#] Maximum limit per year Reimbursement % per visit	3,000 80%	3,000 80%	4,000 80%	4,000 80%
3. Outpatient Specialist (non-surgical) Fees Benefit[#] (including western medicine) Maximum limit per visit Maximum visits per policy year Reimbursement % per visit between 1 and 5 visits Reimbursement % per visit after the 5 th visit	380 10 visits 80% 60%	500 10 visits 80% 60%	750 10 visits 80% 60%	850 10 visits 80% 60%
4. Prescriptions Benefit[#] (From licensed medical dispensary (other than doctor's and hospital's clinic) for treatment or management of covered disability requiring medication in excess of 30 days) Maximum limit per policy year Reimbursement % per visit	3,000 80%	3,000 80%	4,000 80%	5,000 80%
5. Chinese Medicine Practitioner Consultation Benefit (including Chinese medicine) Maximum limit per visit Maximum visits per policy year Reimbursement % per visit	150 10 visits 80%	200 10 visits 80%	300 10 visits 80%	350 20 visits 80%
6. Outpatient Mental Illness^{##} and Emotional Disorder Benefit^{##} (including Western medicine) Maximum limit per policy year Reimbursement % per visit	2,500 80%	3,000 80%	4,000 80%	5,000 80%
7. Physiotherapy[#] and Chiropractic Benefit[#] Maximum limit per visit Maximum visits per policy year Reimbursement % per visit between 1 and 8 visits Reimbursement % per visit after the 8 th visit	220 20 visits 80% 60%	260 20 visits 80% 60%	380 20 visits 80% 60%	420 20 visits 80% 60%

1 + 3 + 5 + 7 = Maximum 50 visits per policy year

[#] Referral letter from a general medical practitioner is required.

^{##} Consultation must be rendered by a duly registered practitioner of western medicine.

Illustrative example³ (Deductible Plan)

This illustrative example is for reference only.

Mr. Chan takes out a **PortaProtection** policy at age 30.

- Plan level : Plan 91
- Reimbursement percentage : 90%
- Deductible amount per policy year : HKD300,000
- Room type entitlement : Private

Two years after taking out the policy, Mr. Chan is confined in a private room of a hospital for a surgery. A hospital bill with eligible expenses of HKD520,000 is incurred. He receives a reimbursement of HKD400,000 from his group medical insurance scheme.

His reimbursement amount under the **PortaProtection** policy will be the lower of:

(eligible expenses – deductible amount) x reimbursement percentage
 = (HKD520,000 – HKD300,000) X 90%
 = HKD198,000

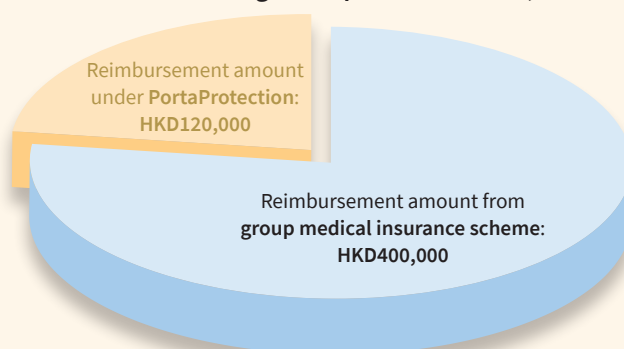
OR

eligible expenses – claim amount paid under any other insurance policy
 = HKD520,000 – HKD400,000
 = HKD120,000



As such, Mr. Chan will be reimbursed for the remaining expense of HKD120,000 under **PortaProtection** and he does not need to pay any out-of-pocket expense for the surgery.

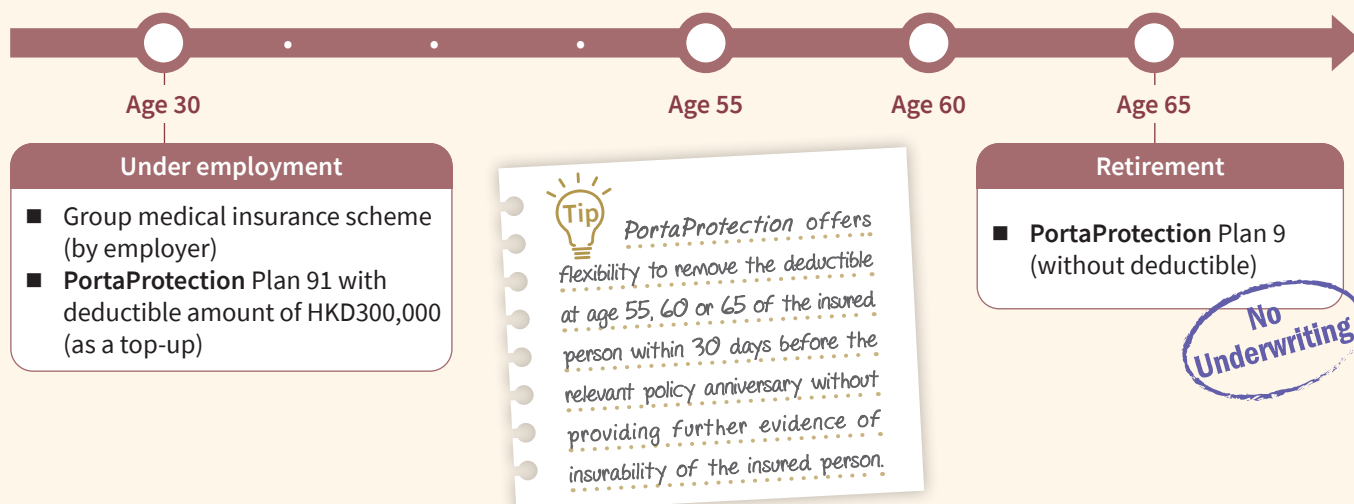
Mr. Chan's eligible expenses: HKD520,000



How can **PortaProtection** provide enough medical protection from working age to retirement with flexibility?

Mr. Chan takes out a **PortaProtection** policy to supplement his group medical plan.

After retirement, Mr. Chan is no longer insured by the group medical scheme. Therefore, he can choose to remove the deductible at age 65 to ensure enough protection.



Illustrative example³ (Reimbursement under PortaProtection)

This illustrative example is for reference only.

Ms. Lee takes out a **PortaProtection** policy at age 35.

- Plan level : Plan 8
- Reimbursement percentage : 90%
- Maximum limit per policy year : HKD300,000
- Room type entitlement : Semi-private

Four years after taking out the policy, Ms. Lee is confined in a semi-private room of a hospital for a surgery. A hospital bill with eligible expenses of HKD143,000 is incurred. She receives a reimbursement of HKD82,000 from her group medical insurance scheme.

Reimbursement under PortaProtection

- total reimbursement limit = eligible expenses multiplied by reimbursement percentage
- if total eligible unpaid amount after settlement under other medical insurance policy(ies) is less than total reimbursement limit, the claim can be fully paid (subject to maximum limit per policy year)

In this case

total reimbursement limit

$$\begin{aligned} &= \text{HKD}143,000 \times 90\% \\ &= \text{HKD}128,700 \end{aligned}$$

Claims will be calculated by
Actual Eligible Incurred Amount

eligible unpaid amount after group medical insurance

$$\begin{aligned} &= \text{HKD}143,000 - \text{HKD}82,000 \\ &= \text{HKD}61,000 \end{aligned}$$

Total amount paid under **PortaProtection** is HKD61,000
Maximum limit per policy year is HKD300,000

Ms. Lee does not need to pay any out-of-pocket expense for the surgery

**Fully
Reimbursed**

Important Information

Cooling-off period

If you are not completely satisfied with the policy, you have the right to cancel it by giving a written notice of cancellation to AXA. Such written notice of cancellation must be signed by you and received directly by our Customer Service at Suite 2001, 20/F, Tower Two, Times Square, 1 Matheson Street, Causeway Bay, Hong Kong within **15 calendar days** immediately following either the day of delivery of the policy or the cooling-off notice (notifying you of the cooling-off period) to you or your nominated representative (whichever is earlier). The policy will then be cancelled and a refund of any premium(s) paid will be returned to you on the condition that no claim payment under the policy has been made prior to your request for cancellation.

Cancellation after cooling-off period

After the cooling-off period, you can request to terminate the policy or cover with respect to any insured person by giving written notice to AXA. If the policyholder gives notice in writing to AXA to terminate the policy, or to terminate cover with respect to any insured person included hereunder, such termination shall become effective on the last day of the month in which the notice is received by AXA or the date specified in the notice, whichever is the later, provided that no claims have been paid or are payable under the policy in respect of that individual insured person within that policy year. No premium or proportion of the premium will be refunded to the policyholder when termination is accepted before the natural expiry date of the annual policy. Please note that new application will not be accepted if any applicant has cancelled a **PortaProtection** policy previously.

Termination of medical benefits

Coverage of the insured person shall automatically terminate on the earliest of the following dates:

- (i) the expiration of the period for which the last premium payment was made in respect of such insured person;
- (ii) the expiry date coinciding with or following the death of the insured person/policyholder;
- (iii) the date on which the insured person is deleted from the policy;
- (iv) the date when the insured person's coverage or benefits under the policy shall have been exhausted;
- (v) at midnight (Hong Kong SAR time) on the expiry date of the Policy or if an insured person is in hospital confinement for a covered disability at the time of such termination, then the time of termination shall be extended for such hospital confinement up to a maximum of 30 days from such disability or the time his or her coverage or benefits for such disability shall have been exhausted, whichever shall first occur; or
- (vi) promulgation of any laws or regulations in the relevant jurisdiction whereby the provision of insurance coverage to the insured person will become illegal.

Other termination

The policy will be terminated in the following circumstances:

- (i) If AXA gives notice of termination by registered letter to the policyholder at his or her last known address, such termination shall become effective from the last day of the month following the date of such notice being issued provided such notice period will not be less than seven days.
- (ii) The policy shall terminate immediately upon the death of the policyholder. Any eligible person shall cease to be an insured person upon his or her death or upon his or her ceasing to be an eligible person.
- (iii) In the event that the initial premium charged to the policyholder's nominated bank account or credit card is not paid, the policy shall be deemed to be null and void from the original commencement date.
- (iv) Provided one or more premiums charged to the policyholder's nominated bank account or credit card have been paid, non-payment of any subsequent premium shall terminate the policy as of the last day of the month in which such premium became payable.
- (v) In the event premium has been paid for any period beyond the termination date of the policy, or beyond the termination date of cover in respect of insured persons, the relevant proportion shall be refunded to the policyholder's nominated bank account or credit card. In the event that premium has not been paid for any period up to the date of termination or as otherwise provided for in the policy, the policyholder shall be liable to AXA for the payment of such premium.
- (vi) AXA shall be entitled at any time to terminate the policy, or to subject the policy to different terms, if the policyholder or an insured person has at any time failed to observe the terms and conditions of the policy or failed to act with the utmost good faith.

Submission of claims

All claims must be submitted to AXA within 60 days after the date of discharge from hospital or the date treatment is received for the disability for which the claim is being made. For this purpose, a claim shall be deemed not to be valid or complete and medical benefits will not be payable unless all original receipts and original itemised bills together with the diagnosis have been submitted to AXA together with a fully completed claim form supplied by AXA to the policyholder upon the policyholder's request. Only actual costs incurred shall be considered for reimbursement.

In respect of an insured person for whom any benefit is covered or payable under any group medical policy, he / she shall submit claims under such policy first before submitting any claims to AXA. Otherwise, AXA is not obliged to pay the relevant claims.

Duplicate application

An insured person shall not be covered under more than one **PortaProtection** insurance policy issued by AXA. In the event that an insured person is covered under more than one such policy, AXA will consider that person to be insured under the policy which provides the greatest amount of benefit. When the benefit under each such policy is identical, the policy first issued by AXA will be the only one considered by AXA for payment of benefits. AXA will refund any duplicated insurance premium payment which may have been made by or on behalf of that insured person.

Key Exclusions

Below is part of the exclusions only and is not intended to be complete and exhaustive. For details and the full list of exclusions, please refer to the policy contract.

- Expenses that are recoverable from a third party.
- Cosmetic or plastic surgery, dental oral or oro-surgical care and treatment of any kind (save and except where provided in an operating theatre of a hospital under general anaesthetic), eye refraction, eye tests or fitting of glasses, surgical, mechanical or chemical contraceptive methods of birth control or treatment pertaining to infertility or in-vitro fertilisation or sterilisation of either sex.
- Congenital conditions.
- Pre-existing conditions (please refer to “Coverage for pre-existing conditions” under “Distinctive features” section for more information).
- The costs of blood and blood plasma.
- Expense directly or indirectly arising from Human Immunodeficiency Virus (HIV) related disability, including Acquired Immune Deficiency Syndrome (AIDS) and / or any mutation, derivations or variations thereof, which proceeds from an HIV infection occurring prior to the effective date. For purposes of this exclusion, an HIV related disability emerging within 5 years of the effective date will be conclusively presumed to proceed from an HIV infection occurring prior to the effective date, in the absence of clear and convincing evidence to the contrary.
- Pregnancy, childbirth (including surgical delivery), miscarriage, abortion and pre-natal or postnatal care.
- Routine or general check ups or routine blood tests, health examinations, check ups or tests not incidental to treatment or diagnosis of a covered disability, inoculation, medication or vaccination for immunisation or quarantine purposes.
- Personal injury by accident arising out of and in the course of employment caused to an employee subject to employees’ compensation ordinance (Cap.282 of the Laws of Hong Kong SAR).
- In-patient treatment or outpatient chinese medicine practitioner consultation directly or indirectly arising from any insanity, psycho-geriatric, psychological or psychiatric condition including but not confined to psychoses, neuroses, depression of any kind, anxiety, anorexia nervosa, bulimia, schizophrenia and other behavioural disorders.
- Procurement or use of special braces, appliances, hearing aids, wheelchairs, crutches or any other similar equipment.
- Hospitalisation primarily for diagnosis scanning, x-ray examinations or physical therapy.
- Any expense, regardless of any contributory cause(s), involving the use of or release or the threat thereof of any nuclear weapon or device or chemical or biological agent, including but not limited to expenses in any way caused or contributed to by an act of terrorism.
- Injury, illness, sickness or disease directly or indirectly resulting from or consequent upon:
 - (a) Drug addiction, alcoholism, venereal diseases or willful misuse of drugs or alcohol, attempted suicide or intentional self-inflicted injury or participating in an illegal activity.
 - (b) High risk occupations or activities including but not limited to engaging in or taking part in:
 - (i) naval, military or air force service or operations;
 - (ii) aviation other than as a fare-paying passenger in an aircraft provided and operated by an airline or air charter company which is duly licensed for the regular transportation of fare-paying passengers;
 - (iii) aqualung diving; bungee jumping; mountaineering; hang gliding; motor cycling; parachuting; parasailing; pot-holing; daring feats or stunts; racing other than on foot; skiing, tobogganing, sledding and ice skating including ice hockey and any other sports requiring snow or ice to be played or work activities involving dangerous or contaminable substances;
 - (iv) sport activity in a professional capacity or where the insured person would or could earn income or remuneration from engaging in such sport; and
 - (v) airline personnel and aircrew, ship crews.
 - (c) War or any act of war, declared or undeclared, invasion, act of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
- Charges for accommodation and nursing in any establishment which for any reason is or has effectively become the place of domicile or permanent abode.
- Expenses paid by any other existing insurance, or directly or indirectly arising from healthcare services provided by government facilities unless there is a legal obligation for the insured person to pay.
- Any expense which is a direct or indirect result of nuclear reaction or radiation.

Remarks

1. An AXA group medical insurance scheme refers to a selected group medical insurance scheme provided by AXA General Insurance Hong Kong Limited or AXA China Region Insurance Company Limited ("AXA").
2. Subject to age limitation and eligibility. Please refer to sections **PortaProtection at a glance** and **Enrolment guidelines** of this product brochure for details.
3. Insured person is required to declare if he / she has any coverage of group medical insurance scheme provided by any insurance company upon claim request. Claim payment shall be made against the group medical policy of the insured person first (if any). Any unpaid portion of the eligible expense shall then be claimed under the **PortaProtection** policy (subject to the coverage under the policy).
4. No underwriting is required for eligible existing members of an AXA group medical insurance scheme who can enjoy guaranteed acceptance. Health declaration is required for eligible applicants who are not existing members of an AXA group medical insurance scheme and the applications of such eligible applicants are subject to underwriting approval. Exclusions may apply.
5. Application will not be accepted if any applicant has cancelled a **PortaProtection** policy previously.
6. Except for any exclusions applicable to the insured person as stated under the relevant AXA group medical insurance scheme or the **PortaProtection** plan.
7. Premium rates are not guaranteed and terms and conditions of renewal may also change. AXA reserves the right to review and adjust the premium rates on each policy anniversary of the **PortaProtection** policy. We consider factors including but not limited to (i) AXA claims and policy persistency experience and (ii) expected claim outgo from all policies under this plan in future years, reflecting the impact of medical trend, medical cost inflation and product feature revisions.
8. Deductible (if applicable) is the aggregate amount of eligible expenses claimed that the insured person will have to bear each policy year before any medical benefits are payable under **PortaProtection**. This amount will be deducted from any reimbursement made to the insured person by AXA. The policyholder may apply for adding or removing the deductible (if applicable) at each policy anniversary subject to our underwriting acceptance of the insured person, or may apply for removing the deductible (if applicable) of the policy at age 55, 60 or 65 of the insured person within 30 days before the relevant policy anniversary without providing further evidence of insurability on the insured person. The right of removal of the deductible (if applicable) can only be exercised once in the lifetime of the insured person. For the avoidance of doubt, acceptance or non-acceptance by AXA of the any addition or removal of the deductible (if applicable) must be confirmed in writing by AXA before the change can become effective.
9. This service is applicable to the insured person age 18 or above and will be provided in Hong Kong only. The provision of services is subject to the terms and conditions of the Family Care Services Programme. This Family Care Services is arranged by AXA, while the services are provided by third party service provider appointed by AXA which is an independent third party and not an agent of AXA. AXA reserves the right to amend the terms and conditions thereof from time to time without prior notice. AXA shall not be responsible for any services so provided or any act or failure to act on the part of the third party service provider.
10. The spouse of an existing member of an AXA group medical insurance scheme may apply for **PortaProtection** together with such existing member under the same application or on his / her own under a separate application. For a child of an existing member of an AXA group medical insurance scheme, if the child has attained the age of 15 days and is under the age of 19 (or under the age of 23 if he / she is registered as and is a full-time student at a recognised educational institution) and is an unmarried person and financially solely dependent upon the existing member, he / she must apply together with the existing member under the same application. All insured person(s) under the same application must be covered by the same plan level.
11. Child(ren) shall mean any person who has attained the age of 15 days and is under the age of 19 (or up to the age of 23 if he / she is registered as and is a full-time student at a recognised educational institution) and is an unmarried person and financially solely dependent upon the existing member.
12. The rates of premiums and any rates of premium discounts or surcharges shall be prescribed from time to time by AXA which shall also have the right to prescribe the method of payment of premiums.
13. The effective date for coverage under **PortaProtection** will be the first day of a month. In the event an application is not submitted on the first day of the month, the effective date for coverage under **PortaProtection** will be the first day of the following month. Likewise, if the member's last day of coverage under AXA group medical insurance scheme is not the last day of a month, the effective date for **PortaProtection** will be the first day of the month in which the membership under AXA group medical insurance scheme is terminated in order to ensure continuous coverage. If the applicant happens to be hospitalised before the day the coverage would otherwise become effective, his / her **PortaProtection** coverage will only commence on the first day after he / she is discharged from the hospital.
14. Subject to the successful renewal of the group medical insurance scheme for at least 1 year.
15. Such termination of membership cannot be a result of non-renewal of AXA group medical insurance scheme.

Notes:

- Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured person on his or her last birthday.
- Levy collected by the Insurance Authority will be imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2523 3061.
- According to the rules of the Voluntary Health Insurance Scheme ("VHIS"), a one-off migration facilitation will be offered to existing policyholders of individual indemnity hospital insurance within 10 years since the full implementation of VHIS on 01 April 2019. Invitation will be issued to the relevant policyholders when we initiate the migration offer.

PortaProtection is underwritten by AXA General Insurance Hong Kong Limited ("AXA").

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 provisions, which will be made available by AXA upon request.**

ABOUT AXA HONG KONG AND MACAU

AXA Hong Kong and Macau is a member of the AXA Group, a leading global insurer with presence in 51 markets and serving 94 million customers worldwide. Our purpose is to act for human progress by protecting what matters.

As one of the most diversified insurers in Hong Kong, we offer integrated solutions across Life, Health and General Insurance. We are the largest General Insurance provider and a major Health and Employee Benefits provider. Our aim is to not only be the insurer to provide comprehensive protection to our customers, but also a holistic partner to the individuals, businesses and community we serve. At the core of our service commitment is continuous product & service innovation and customer experience enrichment, which is achieved through actively listening to our customers' needs and leveraging and investing in technology and digital transformation.

We embrace our responsibility to be a driving force against climate change and a force for good to create shared value for our community. We are proud to be the first to address the importance of mental health through different products and services and thought leading iconic research. Our overall Sustainability Strategy, with emphasis on climate strategy and biodiversity commitment, is developed based on TCFD recommendations. We are committed to integrating environmental, social and governance factors across our business and strive to contribute to a sustainable future through 3 distinct roles - as an investor, an insurer and an exemplary company.



**PortaProtection
Product brochure**

January 2025

www.axa.com.hk

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PortaProtection premium table

(effective from 1 January 2025)

Annual premium^{~^} per insured person (HKD)

Hospital & Surgical Benefits [®]	Plan level											
	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6	Plan 7	Plan 71 Deductible	Plan 8	Plan 81 Deductible	Plan 9	Plan 91 Deductible
Age group												
0 – 19	2,238	3,588	5,148	1,718	3,198	5,936	1,925	577	3,425	820	6,662	2,916
20 – 29	2,513	4,056	5,823	1,913	3,589	6,723	2,130	640	3,865	923	7,557	3,309
30 – 39	3,234	5,275	7,626	2,531	4,643	8,808	2,611	784	4,800	1,171	9,462	4,140
40 – 49	3,780	6,168	9,348	3,207	5,817	11,008	3,584	964	6,375	1,409	13,853	5,336
50 – 59	5,208	8,591	13,082	4,775	8,950	16,814	5,395	1,981	9,369	2,980	20,712	7,682
60 – 64	7,776	12,942	19,796	7,251	13,813	26,159	8,431	3,090	14,878	4,730	32,231	12,755
65 – 69 ^{^^}	10,028	16,755	25,193	9,532	18,223	34,658	10,642	3,903	19,656	5,999	41,022	16,234
≥ 70 ^{^^}	20,483	34,461	51,983	19,298	37,403	71,585	21,564	7,907	40,337	12,310	84,759	33,541
Optional Outpatient Benefits	Plan level											
	Plan 1	Plan 2	Plan 3	Plan 4								
Age group												
0 – 19	4,921	5,879	8,345	9,351								
20 – 29	4,692	5,603	7,955	8,912								
30 – 39	4,692	5,603	7,955	9,262								
40 – 49	4,820	5,754	8,174	9,514								
50 – 59	5,008	5,981	8,493	10,261								
60 – 64	5,785	6,915	9,807	11,832								
65 – 69 ^{^^}	6,243	7,445	10,564	12,764								
≥ 70 ^{^^}	8,152	9,754	13,840	16,712								

Monthly premium^{~^} per insured person (HKD)

Hospital & Surgical Benefits [®]	Plan level											
	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6	Plan 7	Plan 71 Deductible	Plan 8	Plan 81 Deductible	Plan 9	Plan 91 Deductible
Age group												
0 – 19	207	332	477	159	296	550	178	53	317	76	617	270
20 – 29	233	376	539	177	332	623	197	59	358	85	700	306
30 – 39	299	488	706	234	430	816	242	73	444	108	876	383
40 – 49	350	571	866	297	539	1,019	332	89	590	130	1,283	494
50 – 59	482	796	1,211	442	829	1,557	500	183	868	276	1,918	711
60 – 64	720	1,198	1,833	671	1,279	2,422	781	286	1,378	438	2,985	1,181
65 – 69 ^{^^}	929	1,552	2,333	883	1,687	3,209	985	361	1,820	556	3,799	1,503
≥ 70 ^{^^}	1,897	3,191	4,814	1,787	3,464	6,629	1,997	732	3,735	1,140	7,849	3,106
Optional Outpatient Benefits	Plan level											
	Plan 1	Plan 2	Plan 3	Plan 4								
Age group												
0 – 19	456	544	773	866								
20 – 29	434	519	737	825								
30 – 39	434	519	737	858								
40 – 49	446	533	757	881								
50 – 59	464	554	786	950								
60 – 64	536	640	908	1,096								
65 – 69 ^{^^}	578	689	978	1,182								
≥ 70 ^{^^}	755	903	1,282	1,548								

[~] Premium rates are not guaranteed and terms and conditions of renewal may also change. AXA reserves the right to review and adjust the premium rates on each policy anniversary of the **PortaProtection** policy. AXA considers factors including but not limited to (i) AXA claims and policy persistency experience and (ii) expected claim outgo from all policies under this plan in future years, reflecting the impact of medical trend, medical cost inflation and product feature revisions.

[^] Levy collected by the Insurance Authority will be imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2523 3061.

[®] Including Top Up Cancer / Renal Dialysis Benefits and Family Care Services. Please refer to the relevant terms and conditions of the policy contract and the terms and conditions of the Family Care Services Programme for details.

^{^^} Applicable to policy renewal only.

Notes:

- This leaflet should be read in conjunction with the product brochure of **PortaProtection** which contains major features of the plan.
- No premium (in full or in proportion) will be refunded for termination or cancellation of policy before the end of the relevant policy year.
- Deductible (if applicable) is the aggregate amount of eligible expenses claimed that the insured person will have to bear each policy year before any medical benefits are payable under **PortaProtection**. For details, please refer to the product brochure of **PortaProtection**.

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