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SMARTCARE EXCLUSIVE

Creating The Great Adventure

Product Manual

Benefits Schedule of Smartcare Exclusive

with policy effective from Novemver 1, 2025

Currency: RMB

Inpatient Cover	Classic	Elite	Classic	Elite	Elite
	China Plan (including HK, Macau, Taiwan)		International Plan (ex. US)		Worldwide Plan
Annual Limit for Part 1-9	**8,000,000**		**8,000,000**		**8,000,000**
Part 1: Inpatient and daycare treatment Benefit					
Hospitalization & Daycare Benefit Deductible Per Policy Year	Nil/15,000/30,000	Nil/15,000/30,000	Nil/15,000/30,000	Nil/15,000/30,000	Nil/15,000/30,000
Daily Room & Board Limit Per Day	Standard Private Room	Standard Private Room	Standard Private Room	Standard Private Room	Standard Private Room
Intensive Care Unit	Full Coverage	Full Coverage	Full Coverage	Full Coverage	Full Coverage
Hospital Miscellaneous Expenses (Prescription drugs, inpatient diagnostic procedures, Nursing, Operating theatre charges)					
Inpatient Physiotherapy**, Ambulance Service, Surgeon's Fee, Anesthetist's Fee, Inpatient Physician's Visit					
Home Nursing** (Max 90 days per disability)					
Immediate Family Accommodation **(Max 90 days per disability)					
Pre-hospitalization or Pre-daycare Specialist Consultation (Up to 90 days before admission)					
Pre-hospitalization or Pre-daycare Diagnostic Services (Up to 90 days before admission)					
Post-hospitalization or Post-daycare Treatment: Within 90 days immediately following the date of the last discharge from hospital					
Rehabilitation treatment **: Up to 28 days per policy year					
Inpatient Psychiatric Treatment: Up to 30 days per policy year **after 180 days continuous cover under the plan**	Not Covered	Not Covered	Full Coverage	Full Coverage	Full Coverage
Public Hospitals allowance of Mainland China* (Up to 30 days per policy year)	RMB 1,000 per day	RMB 1,000 per day	RMB 1,000 per day	RMB 1,000 per day	RMB 1,000 per day
Part 2: Major Organ Transplant ##	Full Coverage	Full Coverage	Full Coverage	Full Coverage	Full Coverage
Part 3: Artificial Prosthesis (Surgical Implants)**					
Part 4: Cancer Treatment, Outpatient Kidney dialysis and anti-rejection treatment after organ transplant as an Outpatitent					
Part 5: Outpatient Emergency Dental Treatment (Due to accidents only)					
Part 6: Outpatient Emergency Treatment (Due to accidents only)					
Part 7: Outpatient Surgery					
Part 8: Durable medical equipment (Annual limit per policy year)	5,000	5,000	5,000	5,000	5,000
Part 9: Usage of High Cost Provider#	Not Covered	Optional 100% or 80% Covered	Not Covered	Optional 100% or 80% Covered	Optional 100% or 80% Covered
Part 10: Emergency Assistance Service and Benefits	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Part 11: Online consultation and medicine at specified Internet hospital (Applicable to the insured aged 6 to 65 years old ONLY,No chronic disease,No Waiting Period applied)	Unlimited consultation visits; Annual medicine limit RMB 5,000, up to 4 reimbursement per month and up to RMB 500 per reimbursement				
Outpatient Cover (Optional)	**Classic**	**Elite**	**Classic**	**Elite**	**Elite**
	China Plan (including HK, Macau, Taiwan)		International Plan (ex. US)		Worldwide Plan
Annual Limit (Limit to 1 visit per day per disability)	**50,000**		**100,000**		**200,000**
Clinical Consultation, Specialist Consultation, Prescription Drugs & Medicine**	Full Coverage	Full Coverage	Full Coverage	Full Coverage	Full Coverage
Physiotherapy & Chiropractic Treatment** (Max 10 visits per year)					
X-Ray and Laboratory Fees**					
Chinese Herbalist, Bonesetter, and Acupuncturist**	Max 10 visits per year and Up to RMB 1000 per visit	Max 10 visits per year and Up to RMB 1000 per visit	Max 12 visits per year Full Coverage	Max 12 visits per year Full Coverage	Max 12 visits per year Full Coverage
Routine physical examinations, health screening & health check-ups, and vaccinations	3,000	3,000	4,000	4,000	5,000
Usage of High Cost Provider #	Not Covered	Optional 100% or 80% Covered	Not Covered	Optional 100% or 80% Covered	Optional 100% or 80% Covered
Dental Cover (Optional)	**Classic**	**Elite**	**Classic**	**Elite**	**Elite**
	China Plan (including HK, Macau, Taiwan)		International Plan (ex. US)		Worldwide Plan
Annual Limit	**5,000**		**8,000**		**10,000**
Co-Payment	25%	25%	25%	25%	25%
Nature dental treatment including fillings, build-ups, extractions (except wisdom teeth), X-ray, root planning, root canal treatment, periodontal treatment and dentures	Covered	Covered	Covered	Covered	Covered
Preventive, Oral Examination, Fluoridiza & Sealant (Max 2 visits per year and co-payment is not applicable) Max limit per visit	500	500	800	800	1,000
Usage of High Cost Provider #	Not Covered	Full Coverage	Not Covered	Full Coverage	Full Coverage
Maternity Cover (Optional)	**Classic**	**Elite**	**Classic**	**Elite**	**Elite**
	China Plan (including HK, Macau, Taiwan)		International Plan (ex. US)		Worldwide Plan
Annual Limit	**30,000**		**60,000**		**90,000**
Waiting Period	**180 days**	**180 days**	**180 days**	**180 days**	**180 days**
Co-Payment	Nil	Nil	Nil	Nil	Nil
Normal Delivery, Cesarean**, Termination of pregnancy**, Miscarriage**, Complications arising during the antenatal period and childbirth**, Medically necessary costs for new born baby for 15 days upon birth	Full Coverage	Full Coverage	Full Coverage	Full Coverage	Full Coverage
Usage of High Cost Provider#	Not Covered	Full Coverage	Not Covered	Full Coverage	Full Coverage

NB:

1. All expenses must be reasonable, necessary and customary.
2. For direct billing service, you are obligated to accept the final adjustment in charges and actions if there is any miscalculation or uncovered item according to the terms and conditions of the Policy.
3. **The coverage of each insurance benefit shall not exceed insurance amount specified in the Benefits Schedule and the total coverage of all benefits shall not exceed RMB 8 million.**
4. ** recommended or referred by the attending physician.
5. ***The hospitalization allowance here excludes the International Department of China-Japan Friendship Hospital,Peking Union Medical College Hospital and Concord Medical Center of Guangdong General Hospital.**
6. ## Include all expenses of operating theatre & materials, anesthetists, surgeon and hospital service relating to the organ transplantation.
7. For the insured who have no claim in recent 1 year, 2 consecutive years, 3 consecutive years, 4 consecutive years or more, the renewal discount can be 5%, 10%, 15%, 20% respectively.
8. One family policy can include different plans and allow the coverage area or benefits of insured persons higher than the main insured's.
9. **This benefit table is only available for the client serviced by MSH.**
10. **For complete insurance coverage and exclusion, etc., please refer to the terms and conditions of insurance policy and the terms and conditions shall prevail.**

Premium

*Currency: RMB (Yuan)

(IP 0 deductible) Plan / Age	China Classic		China Elite		International Classic		International Elite		Worldwide Elite	
	IP	IP+OP	IP	IP+OP	IP	IP+OP	IP	IP+OP	IP	IP+OP
0	5,856	22,307	7,606	28,189	7,026	25,007	9,128	33,933	15,677	44,081
10	4,782	15,599	5,644	20,055	5,741	17,980	6,765	22,845	11,643	33,576
20	6,734	18,488	8,216	22,944	8,084	21,496	9,862	26,189	16,400	40,226
30	8,727	24,594	10,649	29,395	10,475	27,815	12,778	34,874	21,252	52,267
40	12,568	29,786	15,442	37,580	14,937	35,088	18,473	42,541	29,729	64,094
50	20,747	40,220	25,250	50,124	24,894	46,843	30,369	57,203	48,822	87,128
60	35,415	64,692	43,203	78,622	42,480	75,242	51,825	91,691	81,884	137,741
Dental: 0-65		3,463		3,463		5,539		5,539		6,500

For the Elite Plan in the above table, the premium calculation is based on a 100% payment for HCP.

Hospitalization & Daycare Benefit Deductible Discount

RMB 15,000 Base Premium * 55% Base Premium * 50%

*The above annual deductible discount is only applicable to IP plan.

Notes:

· **Non Beijing** new policy rate shown in the table.If you want to know the Beijing rate, please consult your insurance consultant.

· The initial enrollment Age of the Main Insured shall be 18 to 65 years old. Where the spouse and the child/children are Dependent Insureds, the initial enrollment age of the spouse shall be 18 to 65 years and that of the child/children shall be 15 days after birth to 18 years old (Age Last Birthday).

· The above rate display is for reference only. The final premium shall be subject to our underwriting Decision Notice.

This quotation is valid from Nov 01st, 2025 to Oct 31st, 2026.

List of High Cost Providers

NO.	English name of Providers
1	All the United Family Hospitals and clinics (except Shanghai, Shenzhen, Guangzhou, Beijing Tianzhu / Liangma / Financial Street / Wudaokou / Guangqumen / Jianguomen / Yongfeng / Tianchen Clinic, United Family Women's & Children's Hospital, Beijing United Family Hospital Of Integrative Medicine)
2	Raffles Medical Beijing/Shenzhen/Tianjin/Tianjin-taida/Nanjing/Dalian Clinics(Beijing/Shenzhen/Tianjin/ Tianjintaida/Nanjing/Dalian International SOS Clinics)
3	Shanghai East International Medical Center
4	St. Michael Hospital and Beijing TIANTAN PUHUA Hospital
5	All the medical centers including hospitals belonging to Parkway Group in Hong Kong
6	Adventist Hospital
7	Matilda Hospital
8	All Medical Institutions belong to HKSH Medical Group
9	International Medical Center(Beijing)
10	International Medical Center (Shanghai)
11	Shanghai Redleaf International Women's & Children's Hospital
12	Gleneagles Hong Kong Hospital
13	Hong Kong Baptist Hospital

Please scan the QR code for the Restricted medical institutions

(We do not cover any expenses charged by these providers).

If you want to know the list of network hospitals, please enquiry your insurance consultant.*These lists above will be updated timely if have changes and the latest list is available at www.axa.cn.

Product Features

Coverage area from Great China to worldwide

Inpatient as core plan, outpatient dental and Mat can be added-on

Direct billing with medical card*

International Portability within AXA Group

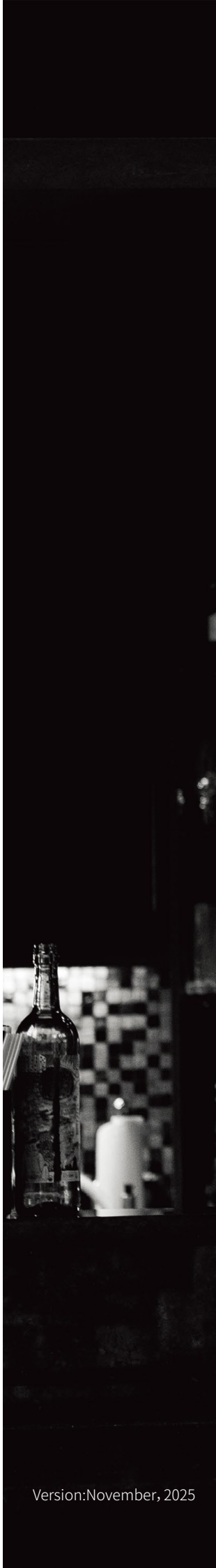
Access to extensive hospital network, so as to provide you quality medical service

Comprehensive value-added services to provide our customer with a better health in body and mind

* Please refer your claim guide for more details about the direct billing service.

Value-added Services

- Online family doctor
- Psychological counseling
- Outpatient coordination
- Outpatient & Inpatient Escort
- Expedited Hospital Examination Service for Critical Illnesses
- Non-critical illness Second Medical Opinion
- Multi-Disciplinary Treatment Service for Critical Illnesses
- Hospitalization coordination and subsidies for medical treatment for CI in other places
- Exclusive nursing service in hospital
- Discharge Transportation Service
- Subsidies of transportation expenses of return journey for non-critical Illness
- Home Care of Post-Hospitalization (more optional items)



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