



Now Health International

Aviation Plan - 2015 Training





Now Health International Office Locations







Now Health International

- Specialist provider of International Private Medical Insurance, since 2010
- Over 150 years combined International Private Medical Insurance market knowledge in the senior management team
- Head office in Hong Kong
- Singapore Office established in Feb 2014
- International Hospitalisation Insurance is underwritten by Tenet Sompo Insurance Pte Ltd, Singapore. Part of the Sompo group.

Benefit-rich products

Experts in international health insurance
Delivering local market knowledge, and
Fast, accurate service













An Award Winning Organisation

- 2014 Cover Excellence Awards Best PMI
- 2013 Asia Insurance Technology Awards: Ecommerce Award
- 2013 Professional Adviser International Fund & Product Awards: Best International Health Insurance Product
- 2012 Insurex Conference & Awards: The E-Business Award
- 2012 MENA Insurance Awards: Product Innovation of the Year













Key Milestones in 2014

- Launched 24/7 member customer services team
- Expansion of our direct billing network to about 400 clinics
- Claims service promise within 5 working days or less
- Improved 2nd annual customer survey
- Introduction of medical health loading
- Anticipated launch of our Indonesia Office
- Won best IMPI awards 2014











What does our members think of us?

Yearly Customer Survey





What do our members think?

Our Customers say they would:

recommend us to their friends and family, (2% Improvement)

94% rate their experience with us as 'Good, Very Good or Excellent' (3% improvement)

rated our claims process as Easy or Very Easy (10% improvement)

Nov 2014 Global Survey results. Both individual and company members were invited to participate.



Now Health Service Promise & Support





Our Service Promise

- ✓ Pre-authorisation of claims: arranged within two to five working days
- Eligible claims: processed in approximately five working days.
- Customer service enquiries: response within one working day
- Complaints: response within five working days





NHI Support to you and Customer

Contact

- Dedicated NHI customer services
- NHI Singapore BD team

Support Services

- Member additions
- Benefit clarification
- How to use the policy
- Claims
- Invoicing
- Replacement cards



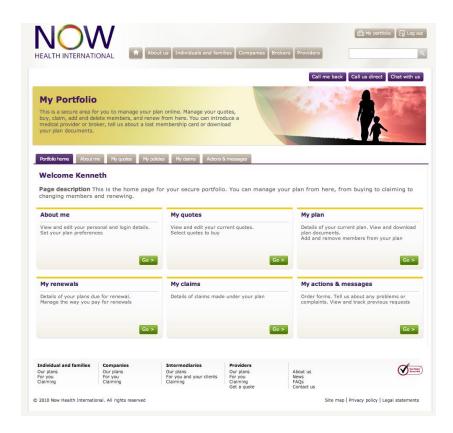




Now Health Online Portal

Manage your Policy

- View & download policy documents
- Additions/Deletion of a member
- Retrieve renewals and track
- Soft or hard copy policy fulfilment
- Welcome email and temporary log in issued in1 working day
- View claims history and track claims







Simplified Claims

Soft copies
Hassle Free Approach
Claims notification within 5 days



How to Claim: Inpatient

Planned Surgery

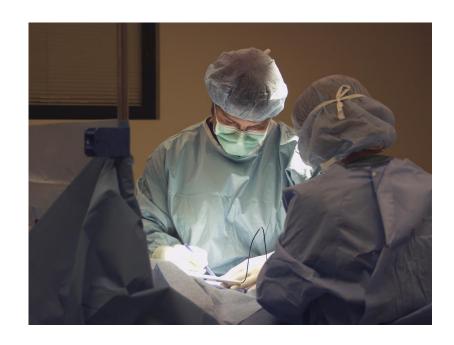
- 1. Call Customer Services
- 2. Pre-authorisation in 2 working days
- 3. Cashless worldwide
- 4. Access to all hospitals in Singapore

Medical Emergency

- 1. Proceed to local A + E for emergency treatment
- 2. Contact NHI as soon as possible must be before discharge

Emergency Evacuation

- Proceed to local A + E
- 2. Contact NHI to arrange evacuation
- 3. NHI evacuates you to nearest centre of excellence







How to Claim: Outpatient Cashless (Advance Plan)

Simply present your membership card to NHI network partner

400 clinics across Singapore including several 24 hour clinics

Outpatient cashless provider clinics located worldwide

- Hong Kong
- China
- Malaysia
- Thailand
- Vietnam
- Middle East & Africa



Request your local clinic to be added to the NHI cashless network





How to Claim: Outpatient Pay & Claim

Outpatient

- Receive treatment anywhere
- Medical referral is not required to see a Specialist

Pay & Claim

- Simple claim form
- Email claim submission
- Original documents not required
- Claim updates by SMS and email

Claims under USD \$500

No Doctor signature required

Claims over USD \$500

 Doctor required to complete section 3 of claim form



Claims Assessed 5 Working Days

15





Claims Message from Now Health - Sample



We are writing to let you know that we have finished processing your recent claim(s). Please login into your secure online portfolio for details. If you have submitted more than one claim, please check the status of each of them.

You can login to your portfolio from here. Go to the 'My Claims' tab or select the 'My Claims' panel on the portfolio homepage. You will find a list of all your claims for each plan year. The most recent one is at the bottom of the list but you can sort the list by clicking on any of the titles in either ascending or descending order.

Your claim status will be listed next to the name of the member. This will tell you the outcome of your claim.

To get more detail, select the claim you want to view and click the 'view details' button it will appear in a new window. The three tabs indicate the appropriate values if you have elected to have your claim reimbursed in either your plan currency, the currency of your claim or any other currency you have chosen.

You can also download an Explanation of Benefit pdf using the 'view EOB' button, which will provide you with the details of your claim for your records.

If you have any questions, or would like to discuss your claim, please contact us using any of the details below.

Yours sincerely

Administration Team

Customer Services - Asia Pacific

Now Health International





Online claims information - Status of a claim

Different claims statuses explained				
Pre-Authorised	We have issued an authorisation for treatment to a care provider.	No Payment Due	Your claim is not being reimbursed as it is within your plan excess or deductible.	
Submitted	Your claim has been received.	Assessment	Your claim has been assessed and payment	
Suspended	We need further information in order to	Complete	has been approved.	
,	adjudicate your claim. Settlement in	Your claim has been submitted to our finance team for payment.		
Referred	eferred We have referred your claim internally for	team for payment.		
	clarification and will continue with the adjudication process shortly. Settlement Complete		Your claim has been settled.	
Awaiting Assessment	Your claim is awaiting assessment by our claims team.	Declined	Your claim has been declined. Please refer to the Explanation of Benefits or contact us for further information.	



Underwriting Philosophy

Medical Loading – FMU cases
Portability
Transparent underwriting approach
Medical Health Disregard





Underwriting Philosophy

Community Rated Schemes

- > Individuals
- > Group schemes from 3 49 employees

Maximum entry age: aged 79

Underwriting Practises	Individual
Full Medical Underwriting	✓
Pre-Existing Medical Declaration - Loading *	✓
Continuous Transfer (CTT)	✓
Portability	✓

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Why Global Medical Plans?





Why Global Medical?

- \$3m cover
- Receive private treatment anywhere in the world
- Freedom to choose the hospital
- Freedom to choose the surgeon
- Insurance designed to work with every healthcare system

Your clients want the best





International vs Domestic?

	International	Domestic
Elective treatment overseas	Yes	No
GOP overseas	Yes	No
Annual Limits	High	Low-mid
Benefit caps	High	Low
Claims Service	5-10 days	Over 3 weeks
Claim Submission	Electronic	Originals required
Claim reimbursement	Multiple currency	Single currency
Portability	Yes	No
Enrolment age	Up to 79	Up to 65
Maximum age	Unlimited	Up to 75



Why Aviation Plans?





What lead to Aviation Plan.....

- Gaps found in group medical insurance benefits for pilots and cabin crew working in commercial airlines
- Medical benefits provided by company were mainly in Singapore
- Some commercial airlines provide medical insurance whilst on duty cover
- No portability option for pilots when they leave their company
- Lack of medical health insurance providers who will take pilots and cabin crew
- Dependents are generally not covered whilst travelling with pilots
- Insurance plans may be subjected to occupational exclusions
- Received requests to provide top-ups from their group medical plans





Eligibility

- Full time employees (Pilots and Cabin Crew) &/or with dependents of a Singapore based Commercial and Chartered Airlines.
- > Main policyholder and dependents must reside in Singapore with a Singapore residential address.
- Main policyholder will be required to produce proof of staff ID/pass card with application form
- Dependents mean Spouse or Adult Partner and/or unmarried child not more than 18 years or up to 28 years in full time education residing with the Insured
- Main policy holder and dependents must hold the same plan
- > Policy is issued on a 12 month contract. No early cancellation or pro-rata refund if members resign
- No midterm upgrade or downgrade in plan. Any changes to excess taken up will be subjected to underwriting
- Policy documents are fulfilled by soft copy with membership cards provided





Renewability

- Upon Renewal
 - Upon renewal, member to prove continued employment with a commercial airline (current staff ID card with expiry date)
- If member leaves a commercial airline, we can transfer the policy to a standard individual plan and apply prevailing published rates upon renewal
 - Transfers can be made without further underwriting however a CTT application is required
 - If currently insured under Advance with dental and maternity we will have to move the plan holder to Apex Plan
 - If currently insured under Advance Plan and the member is pregnant, upon renewal under Apex Plan the maternity benefit will be limited to \$7000 for existing pregnancy





Application Process

- Complete the Aviation Application Form & Aviation Questionaire
- Individual Fact Find form is required
- Underwriters will review the medical declarations and aviation questionaire to offer terms
- For chartered pilots, occupational flying exclusions will be applicable
- > For pilots engaging in leisure flying, exclusions will be applicable
- Please provide proof of staff ID/pass card



Worldcare Aviation Plans

High Annual Limit - US\$3million Essential - High Inpatient/Day-patient Plan Advance - Inpatient + Outpatient + Optional Add On





Introducing Aviation Plan - Annual Limit US\$3mil

Essential: In-patient and Day-patient

* Opt in for Outpatient incl Chronic Medical Condition of up to \$4500

Advance: In-patient, Day-patient and Out-patient

* Opt in for Maternity &/or Dental benefits

* Opt for Co-Insurance for Outpatient Charges

Optional: Worldwide including USA

Excess : Available for both Essential and Advance Plan



Benefit	Essential	Advance
Annual Maximum	\$3m	\$3m
In- Patient Be	nefits	
Hospital Charges, Medical Practitioner and Specialist Fees:		
In-Patient or Day-Patient Treatment, intensive care charges, accommodation (ward/semi-private or private), diagnostic tests; operating theatre, surgeon, anaesthetist, nursing charges. Drugs and dressings, surgical appliances.	Full Cover	Full Cover
Ancillary charges: Purchase and rental of crutches, canes, walking aids and self- propelled non-electronic wheelchairs within six months of an In- Patient or Day-Patient Hospital Treatment.	\$1,500 per medical condition	\$1,500 per medical condition
Diagnostic Procedures:	Full Cover	
CT, MRI and positron emission tomography (PET) PET requires Pre Authorisation	In-Patient pre and post-operative	Full Cover



Benefit	Essential	Advance
In- Patient Be	nefits	
Parent Accommodation:		
One parent staying in Hospital overnight with an Insured Person under 18 years old when the child is admitted as an In- Patient	Full Cover	Full Cover
Pregnancy and Childbirth Medical Conditions:		
In-Patient Treatment arising during the antenatal stages of Pregnancy, or arising during childbirth.	Full Cover	Full Cover
Ie Ectopic Pregnancy , hydatidiform mole, retained placenta, placenta praevia, eclampsia, diabetes, post partum haemorrhage , miscarriage requiring immediate surgical Treatment, failure to progress in labour		



Benefit	Essential	Advance
In- Patient Ber	efits	
New Born Cover:		
In-Patient Treatment of premature birth(prior to age 37 weeks gestation) or Acute Condition suffered by a New Born baby within 30 days following birth.	\$100,000	\$100,000
New Born baby must be added to the Plan within 30 days of birth. Multiple births covered up to same limits.		
Hospital Accommodation for New Born Accompanying their Mother:	Full Cover	Full Cover
Hospital Accommodation for New Born baby (up to 16 weeks old) accompany its mother being treated as an In-Patient.	ruii Covei	ruii Covei
Congenital Disorder: In-Patient Treatment		
If a Congenital Disorder manifests itself in a New Born baby within 30 days of birth, cover for such Medical Conditions will be provided under New Born Cover.	\$100,000	\$100,000



Benefit	Essential	Advance
In- Patient Benefi	ts	
Rehabilitation:		
Admission to a Rehabilitation unit of a Hospital following Inpatient confinement of 3 consecutive days. Admission must be within 14 days of discharge	Full Cover	Full Cover
Includes: i) Use of special Treatment rooms ii) Physical therapy fees iii) Speech therapy fees iv) Occupational therapy fees	In-patient only up to 30 days per medical condition	up to 180 days per medical condition
Must be admitted to Hospital for 1 night and be treated within 10 days of the accident Following costs covered with an extra-oral impact Replacement a crown, bridge facing, veneer or denture If implants are clinically needed We will pay only the cost which would have	Full Cover	Full Cover
teeth following an Accident. Must be admitted to Hospital for 1 night and be treated within 10 days of the accident Following costs covered with an extra-oral impact Replacement a crown, bridge facing, veneer or denture If implants are clinically needed We will pay only the cost which would have been incurred if equivalent bridgework was undertaken instead Damage to dentures if worn at time of accident	Full Cover	Full Cove



Benefit	Essential	Advance	
In- Patient Benefits			
In-Patient Psychiatric Treatment:	Full Cover	Full Cover	
Administered under the direct control of a Registered Psychiatrist in Psychiatric unit of a Hospital.	up to 30 days	up to 30 days	
Emergency Ambulance Transportation: Emergency road ambulance to or between Hospitals	Full Cover	Full Cover	
Emergency Non-Elective Treatment USA Cover:			
For planned trips up to 30 days.			
Emergency treatment within 24 hours of an Accident or the sudden beginning of a severe illness presenting	Accident Full Cover In & day patient only Illness up to \$25,000	Accident Full Cover Illness up to \$25,000	
an immediate threat to the Insured Person's health.			
Excludes Pregnancy and childbirth			



Benefit	Essential	Advance
In- Patient Be	nefits	
Hospital Cash Benefit:		
Payable when Insured Person is admitted for In-Patient Treatment free of charge that would have otherwise been charged to this policy.	\$125 per night	\$175 per night
Maximum of 30 nights per Period of Cover.		
Nursing Care at Home: i) Care given at Insured Person's own home immediately following In-Patient or Day-Patient treatment on the recommendation of a Medical Practitioner or Specialist.	Not Covered	Full Cover up to 45 days per condition
ii) Emergency Medical Practitioner (GP) home visits out of normal clinic hours		Not Covered



Benefit	Essential	Advance
	Out-Patient Benefits	
Out-Patient Charges :	Consultation and diagnostics 15 days Pre-operation and 30 days or USD 2,000 post admission	
i) Medical Practitioner fees including consultations; Specialist fees; Diagnostic Tests; prescribed Drugs and Dressings.		Full Cover
ii) Physiotherapy by a Registered Physiotherapist, when referred by a Medical Practitioner, or Specialist	Not Covered	Full Cover up to 30 sessions
Maintenance of Chronic Medical Conditions: Consultations, check ups, tests, drugs and dressings for ongoing conditions such as asthma, diabetes and hypertension. Cancer and Renal failure and dialysis excluded	Not Covered	\$15,000



Benefit	Essential	Advance
Out-Patient Benefits		
Alternative Therapies:		
i) Osteopaths, chiropractors, homeopaths,		
dietician and acupuncture Treatment when referred by a Medical Practitioner or Specialist	Not Covered	Full Cover up to 30 sessions
ii) Traditional Chinese Medicine Practitioner.		
General chiropody or podiatry are excluded		



Benefit	Essential	Advance	
Organ Transplant, Cancer and Renal Care Benefits			
Organ Transplant:	Full Cover	Full Cover	
Kidney, pancreas, liver, heart, lung, bone marrow, cornea, or heart and lung,	\$50,000	\$50,000	
Donor Medical Costs			
In-Patient or Day-Patient costs			
Excludes cost of the donor organ search.			
Renal Failure and Renal Dialysis: i) Treatment of renal failure, including renal dialysis on an inpatient basis ii) Treatment of renal failure, including renal dialysis on a daypatient or out-patient basis	i) Up to 6 weeks full refund for In-patient pre and post operative ii) Not covered	i) Up to 6 weeks full refund for In-patient pre and post operative ii) \$75,000	
Cancer Treatment: In-Patient, Day-Patient or Out-Patient. Includes oncologist fees, surgery, radiotherapy and chemotherapy from the point of diagnosis.	Full Cover	Full Cover	





Benefit	Essential	Advance
Evacuation and Repatriation Benefits		
Evacuation and Repatriation:		
Moving insured person with critical life threatening medical condition to the nearest medical facility for an In-Patient or Day-Patient treatment		
i) Transportation costs. Includes an economy class airfare ticket for a local escort.	r Full Cover	
ii) Local travel costs to and from medical appointments as a Day- Patient.	Full Cover	
iii) Travel costs for a local escort to visit admitted person at Hospital	Full Cover	
iv) Non-Hospital Accommodation immediately pre and post- Hospital admission whilst under the care of a Specialist.	\$250 per day, \$7,500 per person per evacuation	
Repatriation		
An economy class airfare to return the Insured Person and escort to insured person's Country of Nationality or Country of Residence. Journey must be made within one month of completion of Treatment.		



Benefits	Essential/Advance Plan
Mortal Remains:	
i) Transportation of body or ashes of an Insured Person to Country of Nationality or Country of Residence, or	Full Cover
ii) Burial or cremation at the place of death	\$10,000



Benefit	Essential	Advance
Palliative Care and AIDS Benefit		
Terminal Illness:		
In-Patient, Day-Patient or Out-Patient palliative and Hospice Care for the purpose of temporary relief of symptoms.	\$50,000 In & day patient	\$50,000 per lifetime
Includes Hospital or hospice accommodation, nursing care and Drugs and Dressings.		
AIDS:		
Pre and post-diagnosis consultations, routine check-ups for this condition, Drugs and Dressings, Hospital Accommodation and nursing fees.	\$25,000 In & day patient	\$25,000
Due to occupation Accident or blood transfusion.		
* 3 year waiting period		



Benefit	Essential	Advance	
Optional Cover			
Out-Patient Charges:			
i) Medical Practitioner fees including consultation, Specialist fees, Diagnostic Tests (option to incl Chronic Medical Condition is available)	\$4,500		
prescribed Drugs and Dressings.		Already Covered	
ii) Physiotherapy by a registered Physiotherapist, when referred by a Medical Practitioner,	Full Cover 10 sessions		
or Specialist.			
USA Elective Treatment:			
i) In-Patient and Day-Patient Treatment received within the Now Health International Provider			
Network.	Full Cover up to	Full Cover up to \$1.5m	
ii) Out-Patient Treatment received within the Now Health International Provider Network.	\$1.5m		
Treatment received outside the Now Health International Provider Network will be			
subject to a 50% Co-Insurance.			



Benefit	Essential	Advance	
Optional Benefits			
Dental Care: i) Routine Dental Treatment		i) \$500 20% co-insurance	
ii) Complex Dental Treatment Subject to 9 months waiting period	Not Covered	ii) \$1,000 20% co-insurance 50% co-insurance on orthodontic	
Maternity Subject to 12 month waiting period With 20% Co-insurance (Available when Dental Care Benefit is selected)	Not Covered	\$7,000 20% co-insurance	



Benefit	Essential	Advance
Optional Excess, & Outpatient Direct Billing		
Out-Patient Direct Billing:		
Out-Patient Treatment received within our Outpatient Direct Billing Network will incur nil Excess	Not Covered	Available
The policy Excess will apply to Out-Patient Treatment received outside of the Out-Patient Direct Billing per The policy Excess will still apply to all Eligible In-Patient and/or Day Patient Treatment.		
Available Excess	Nil	Nil
Per New Medical Condition, Per Period of Cover	\$1,000	\$1,000
	\$5,000	\$2,500



Benefit	Essential	Advance	
Optional Co-Insurance			
Co - Insurance on Outpatient Charges	NA	20% Co-Pay	





Main Exclusions

- Act of terrorism, war or illegal acts unless an innocent bystander
- Administrative and shipping fees
- Alcohol & drug abuse
- Chemical exposure
- Cosmetic surgery
- Contamination
- Developmental disorders
- Dietary supplements
- Eating disorders
- Experimental treatment & drugs
- Eyes and ears
- External prosthesis
- Failure to follow medical advice
- Foetal surgery
- Genetic testing
- Sexually transmitted diseases

- Morbid obesity
- Nursing homes, convalescence homes, health hydro's and nature cure clinics
- Pre-existing medical conditions
- Professional sports
- Reproductive medicine
- Routine Examinations, health screening
- Second opinions
- Self inflicted injuries, attempted suicide
- Sexual problems, gender realignment
- Sleep disorders
- Travel/ accommodation costs
- Travelling against medical advice
- Treatment by family member
- Charges outside reasonable and customary



Remuneration





Aviation Plan – Commission/Brokerage

New and Renewal Sales

10% annual and renewable upon placement of cover

Switching to standard Worldcare Plans

15% annual and renewable upon placement of cover



How to reach us?

Singapore Sales Team





Working with Now Health

Make sure you have completed an agency application with Now Health

Know you clients / Individual or Group Fact find is required for all quotations

Individual Sales

- Quoting: Ryan Cheng
- Queries: Call 68802307/68802302/ 68802303 or email ryan.cheng@now-health.com
- Submitting applications: Email ryan.cheng@now-health.com or ann.wong@now-health.com

Group Sales

- Quoting: Required information is date of birth, inception date, current benefits, target premium, nationality, country of residence, company name, Claims if more than 50 employees. Email to ann.wong@now-health.com or rob.mcintyre@now-health.com
- Queries: Call 6880 2302/6880 2301/ 6880 2303
- Submitting applications: Email to <u>ann.wong@now-health.com</u> or <u>rob.mcintyre@now-health.com</u>



Thank you