



Download our Easy Claim mobile app!





For more information, see page 5.



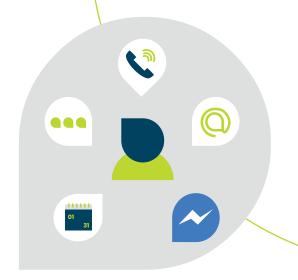
Welcome to APRIL International Care

Thank you for choosing us to provide protection for you and your loved ones. Throughout the duration of your plan, regardless of your country of expatriation, we will be close by to make sure you benefit from quality international insurance cover.

This guide contains all the practical and useful information you will need for a full understanding of your plan and its services. It supplements your General Conditions and Insurance certificate.

If you have any questions or need advice, we are there for you:

- on Facebook Messenger or by Chat
- via your Customer Zone by clicking on this link
- by phone, email or by visiting our offices:



APRIL International Care MEXICO

Tel: +52 (55) 52 80 13 37
Email:
infomexico@april-international.com
Monday to Friday from 9am to 6pm

APRIL International Care PARIS

Tel: +33 (0)1 73 02 93 93

Email:

info.expat@april-international.com

Monday to Friday from 8.30am to 6pm

APRIL International Care BANGKOK

Tel: +66 (0) 2022 9180 Email: infobangkok@april-international.com Monday to Friday from 8.30am to 6pm

Outside these hours, our assistance coordinators are available to help in difficult situations or emergencies.

We wish you an enjoyable and successful stay abroad.





Very good.
Straightforward, fast and efficient. Advisors easy to reach if you need information.

Very efficient customer service and sales team.

Friendly and helpful.
At last an insurer who
listens and knows how to
meet the personalised
needs of their customers.



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1. Using your plan

Your Easy Claim mobile app

To better follow your insurance plan abroad, we have set up a mobile app called Easy Claim, which allows you to:

- submit your medical expenses up to €/USD 1,000 in just a few minutes.
- , view and download your Insurance Card,
- request a guarantee of payment before going into hospital,
- view the list of health professionals near your home and recommended by APRIL,
- , know your dedicated contacts and to contact us easily.

You can also:

- pupdate and add new bank details,
- view and update other personal information,
- view the details of your reimbursements,
- upload your documents (insurance certificates, reimbursement statements, forms, etc.)



Your online Customer Zone In addition to your Easy Claim app

In just a few clicks, from your **PC, tablet or smartphone**, you can access to your **Customer Zone** to view and pay your premiums directly online, if you are the policyholder.



TO USE THE EASY CLAIM APP, YOU CAN:

- Download the Easy Claim app from your mobile or tablet, by downloading the app from the Apple Store or Google Play.
- Log in with your Customer Zone username and password once you activated your account,
- Follow the different steps to submit your claim for reimbursement,
- Then simply wait to be notified that your claim has been processed.

To find out how to submit a claim for reimbursement using the app, go to page 9.



THE ADVANTAGES OF THE EASY CLAIM SERVICE:

There's no need to send us the originals of your medical bills and prescriptions so you:

- Avoid postal charges,
- Get faster reimbursements,
- Save time thanks to streamlined procedures.

You can also:

- Consult and download your personalised insurance card,
- Access to your personalised contacts.



Discover the Easy Claim demo video to find out more



ACTIVATING YOUR ACCOUNT IS FASY

- Use the username you were sent by email when you enrolled in the plan. If you have lost your username, contact us by clicking here: https://fr.april-international.com/fr/contactez-nos-differents-bureaux-dans-le-monde.
- Go to your Easy Claim app and click on « Ist login? Activate my account » and follow the instructions on the screen to choose your password.
- Log in to your app or your Customer Zone with your username and the password you chose.

Doctor available by phone

1 TELECONSULTATION

With this new service, get confidential advice from a health professional who will answer all your medical questions. A doctor will call you back within 3 hours at any time 24/7, anywhere in the world, in your preferred language. Simple and convenient to use, without you having to leave home!

To use the service:

- from your Easy Claim app home page, go to the "Contact a doctor" section,
- select "Request a teleconsultation",
- complete the form in just a few clicks and send your request!

The doctor may issue you with a prescription, if required. Teleconsultation is not an emergency service! If necessary, you should go to the nearest hospital.

This service is only available for the following medical conditions:

- general consultation (headache, sore throat etc.),
- information on certain diseases, ongoing treatment or
- occasional medical conditions (excluding chronic illnesses).





Discover your two new free services available now!

2 • SECOND MEDICAL OPINION:

With this new service, get in touch with one of the 50,000 medical specialists in the Teladoc health network and get a Second Medical Opinion on a diagnosis you have been given and the treatment being proposed.

A medical specialist will check your medical file and get in touch with you within a maximum of 24 hours to give you their advice on your situation.

To use the service:

- go to the "Contact a doctor" section of your Easy Claim app,
- choose the option "Request a second medical opinion",
- complete the form in just a few clicks and send your request!

EMERGENCY CONTACT NUMBERS 24/7



> In case of inpatient hospitalisation*

- From USA & Canada (toll free): - From countries in Latin America (collect calls accepted):

From countries in the Asia-Pacific region: - From Middle East, Africa and Europe

> For direct payment in the USA*
- For benefit verification and/or for

(+1) 866 299 2900 pre-authorization, please call (toll free):

Billing address: OnHC - 777 Brickell Ave Suite 410 - Miami, FL 33131, USA

> For repatriation assistance (collect calls accepted)

+33141612325 *only if cover selected

(+1) 866 299 2900 (+1) 305 381 6977

+66 2022 9180

+33173029399

♥aetna

Good to know

Don't hesitate to use your Insurance Card! With emergency contact numbers, available 24/7, you can consult or download your Insurance Card in your Customer Zone or directly from your mobile app Easy Claim:

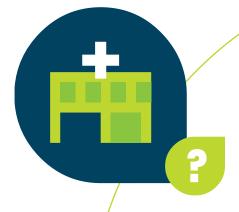
- arrange direct payment of hospital charges,
- use the direct billing network in the USA (hospitals and doctors).
- request assistance in an emergency.

The card helps make your admission to a healthcare facility easier in case of emergency hospitalisation.

To make the process as straightforward as possible, your first name(s), last name and plan number are printed on the card.

2. Your medical expenses cover and basic repatriation assistance

When you enrolled in the MyHealth International plan, you took out Medical expenses cover to insure you during your time abroad. You can find details of the benefits provided under your plan in the Benefits schedule which you received along with your Welcome Pack. This guide provides you with further details on the procedures to follow if you are hospitalised and how to make a claim for the reimbursement of your healthcare.



What to do if you are hospitalised

« Can you pay my hospital bill for me? »

We understand that being hospitalised is always a difficult time. This is why we want you to avoid advance fees by paying directly your hospital charges (including day hospitalisation) to the hospital you are in. We will therefore contact the hospital directly.

To request the direct payment of your hospital charges, or for any additional information before your admission to hospital, call the emergency numbers shown on your insurance card (see page 6).

NON-EMERGENCY HOSPITALISATION

Please send the Confidential medical certificate to our Medical Examiner **at least 5 days before** your admission to hospital in case of any non-emergency hospitalisation:

- > your Easy Claim app, section « Make a request » and « Prepare an hospitalisation »,
- > by fax: +33 (0)173 02 93 60,
- > by post:

APRIL International Care - Service courrier 1 rue du Mont CS 80010 81700 BLAN - FRANCE This gives us time to review your request and handle the administrative formalities with the hospital.

It is important to follow the Prior agreement procedure. If this requirement is not met, we will apply **a 20% penalty**.

URGENT HOSPITALISATION

Please contact APRIL International as soon as possible to let us know about your situation. Our teams can be contacted at any time 24/7 and will guide you through the process.

A QUICK LOOK AT WHAT TO DO IF YOU ARE HOSPITALISED





URGENT HOSPITALISATION



Send us:

the emergency admission form or equivalent
 the accident report if you have one
 We can do this for you if necessary!



We send the agreement to pay to the hospital



When you are discharged, you send us the hospital report



The hospital sends us the bill: our agreement to pay is limited to the benefits provided under your plan

*your Confidential Medical Certificate completed by your doctor, or any equivalent document, the prescription from your doctor if you have one, your medical report if you have it, the results of scans, tests, x-rays etc. in connection with your hospitalisation.



Prepare your request including:

- all the medical documents for your admission to hospital*
 estimate of costs from the hospital including doctors' fees and any excess fees being charged
 - > estimate of costs from the hospital specifying the cost of the private room
 - > submit your request in your Easy Claim mobile app.



Your request is assessed, a response is provided by the medical examiner within 3 days and the agreement to pay is sent by email and/or fax to both the hospital and the plan member



The hospital sends us the bill when you are discharged



We pay the bill directly to the hospital



The hospital asks for payment before you are admitted



You send us the bill and we make an advance payment by bank transfer

Claiming reimbursement of your medical expenses

FOR MEDICAL BILLS UP TO €/US\$ 1,000

Remember to use your Easy Claim app, it's quick and simple!



Consult a healthcare professional.



Send your claims for reimbursement to APRIL International Care France using your Easy Claim app.



Your reimbursement is processed within a few days (excluding bank processing times and postal delivery).

To submit your claims for reimbursement, please use your Easy Claim mobile app:

- > Download the Easy Claim app,
- > Log in with your Customer Zone username (see page 5),
- > Submit your claim for reimbursement by:
- a. entering the beneficiary and the cost of the treatment or procedure,
- b. adding photos of your medical bills and prescriptions,
- c. sending it to us with just one click!
- > Follow your claim in the « See my claims history » section.









■ Good to know

If you send your claims for reimbursement using the **Easy Claim app**, you must **keep your original medical bills (and other supporting documents) for a period of 2 years** from the date on which you made the claim. You may be asked to produce them when your claim is being processed.

The exchange rate applied will be the one in force on the date on which the treatment occurred.



If you have not obtained our Prior agreement, a 20% deductible will be applied to the reimbursement of your medical bill (excluding accidents or emergencies) so remember to send us your request.

WHAT DOCUMENTS DO YOU NEED TO SEND US?

- > the practitioner's fee notes or the bills you have paid, the medical prescriptions showing the date and your full name and date of birth, the type and date of the consultations and the treatment given, together with proof of payment,
- if the treatment requires Prior agreement, the Prior agreement form approved by our medical department.

You have 2 years from the date of treatment to send us your claim for reimbursement.

Claiming reimbursement of your medical expenses

FOR MEDICAL BILLS **OVER** €/US\$ 1.000

Please send them to us by post.



« Are there any costs I can't incur without your agreement? »

In some countries, the cost of medical care can be exorbitant. To help you avoid any nasty surprises, it's important to obtain the Prior agreement of our Medical Examiner (valid for 6 months) for all medical expenses of €/US\$ 2,000 or more. Before incurring any costs, you will therefore need to ask the practitioner prescribing the treatment to complete a Request for prior agreement together with an itemised quote.

The Request for prior agreement form is available in the Customer Zone at www.april-international.com or from our advisors.

If you are pregnant, please let us know as soon as possible so that we can assist with formalities. In case of non-emergency hospitalisation, go to page 8.

HOW IS MY CLAIM PAID?

- by bank transfer to a bank account in France (send us details of your bank account),
- > by bank transfer to a bank in the USA (send us the account number, SWIFT code, your bank's address and an ABA routing number),
- by bank transfer to an account in another country (send us the account number, SWIFT code and your bank's address).

We will cover the bank charges applied by our banking partner!

Depending on where your bank account is located, your own bank may apply charges to the transfer. These charges will be deducted from your reimbursements.

Good to know: Add or modify your bank details using your Easy Claim app in the «My account» section or using your Customer zone.

Using direct billing services in the USA and Mexico

To help you contain your medical expenses, which could be exorbitant, we have negotiated preferential rates for you with AETNA and Caremark, two of the largest care networks in the USA.



If you selected Hospitalisation only, you benefit from:

access to: more than 5,500 hospitals with no cash advance required. We'll pay your medical bill directly.



If you selected the Hospitalisation + Outpatient benefits with or without Maternity Package and/or Vision-dental Package, you also benefit from:

access to: almost 690,000 doctors, more than 5,500 hospitals and more than 68,000 pharmacies with no cash advance required. We'll pay your medical bill directly.

This service is available for:

- > consultations with GPs and specialists,
- > diagnostic tests and x-rays,
- > medical examinations and treatments,
- > care by medical auxiliaries.

a doctor's home visit service:

To avoid long waits at the emergency department, and **no need to pay for your consultation.** Call us on (+1) 800 649 7119.

Please note

There is no difference between a generic drug and a non-generic drug, either in terms of active substance or of effectiveness. Nevertheless, the cost of original, non-generic, drugs is higher. In order to contain medical inflation, non-generic drugs are covered only if their generic form is unavailable.

What do I need the third party payment card for?

Your third party payment card allows you to avoid cash advance: we'll settle your bill directly.

Where to find my third party payment card?

Your third party payment card will be sent to you by email within 15 days following your application. A link allows you to download the card, which you can print out or keep on your smartphone.

How to identify the hospitals, pharmacies and doctors who are members of the network?

Nothing could be easier:

- > Log into your Easy Claim mobile app and click on the « Find a doctor » button OR log on to **omhc.com/April**
- > Click on **« Selecting a provider »** and then on **« Search now »**,
- > Select « Passport to Healthcare Primary PPO Network » and click on « Continue ».
- > Select the physicians specialty and choose a healthcare professional in the proposed list in order to get the contact details,
- > You can also browse the section **« Other useful ressources »** for your research.



Who to contact for information?

We are available 24/7 to answer any questions you may have! From the United States, call **1-866-299-2900** to speak to an advisor.

Please note

Medication costing more than €/US\$1,500 requires our Prior agreement.

The third party payment service is not available if your application includes a medical exclusion.

Handy tip

Log on to www.caremark.com to find your nearest pharmacy.

Sometimes health professionals send their patients a bill after providing care services, even if the insured member has already supplied all the information about his insurance plan. If you receive a bill from a provider, simply scan the letter you received and send it to **bills@omhc.com**. You will then receive an email confirming receipt and Global Excel will liaise directly with the provider. Rest assured, you will always be kept up to date with how your claim is progressing.



You benefit from:

1- access to a care network:

Almost 850 doctors and more than 37 hospitals with no cash advance required. We'll pay your medical bill directly.

This service is available for:

- > hospital charges,
- > consultations with GPs and specialists,
- > diagnostic tests, x-rays and rehabilitation sessions.

2- a doctor's home visit service for emergencies during evenings or weekends:

To avoid long waits at the emergency department, and **no need to pay for your consultation.**

We will make an appointment for you with the healthcare professional best suited to your situation.



How to use this service?

Contact Global Excel to open a case:

- > from Mexico, on 01 (800) 212 9527,
- > from all other countries, on **+52 (55) 4170 85 90**,
- > by email to cniglobalservices@globalexcel.com





Need to be repatriated for medical reasons?

Did you know that Basic repatriation assistance is included in your Medical expenses cover? That means you automatically have repatriation assistance if you have an accident or become ill.

Depending on your situation, the repatriation destination can vary between:

- > the most appropriate hospital, **or**
- > the hospital nearest to your home in your Country of nationality (or in your country of origin if different) or your main residence in your Country of cover, or
- > your home in your Country of nationality (or in your country of origin if different) or your main residence in your Country of cover.

3. Other additional benefits



Check your insurance certificate to see exactly what benefits you are entitled to

Comprehensive repatriation assistance

Need to return home if a family member dies or is admitted to hospital? Been admitted to hospital and would like to have a family member with you? Need to be evacuated due to a terrorist attack or a natural disaster? Need to have an administrative document translated into your own language?

To benefit from comprehensive repatriation assistance, it's essential to have prior agreement from Europ Assistance.

Contact our teams available 24/7:

■ by phone: +33 (0)1 41 61 23 25 ■ by email: <u>aic@ea-gcs.com</u>

Our advisors will then find the assistance solution that best suits your needs.

Baggage insurance

Have you lost your baggage or have it damaged? Your policy provides compensation up to € 1,000 if the bags or personal effects you had with you during the outward or return journey or during your stay abroad are lost, stolen following burglary or destroyed.

To benefit from this cover:

You must submit the claim to the insurer in writing on the following website https://www.chubbclaims.com/ace/fr-fr within 5 working days of the event. After this period, the insurer has the right to refuse any request.

Personal liability (private capacity)

What happens if you (or a member of your family) cause damage or injury to another party?

Your personal liability insurance covers the financial consequences of bodily injuries and material damage that you unintentionally cause to others. Your children are also insured at school and when taking part in out-of-school activities.

To make a claim under this benefit:

You should declare any event which may trigger a claim under this benefit, including details of the circumstances and consequences, as soon as you become aware of the event and within a maximum of 15 days. This declaration should be sent by registered mail to **France.DeclarationsRC@Chubb.com**.

■ Death & total loss of autonomy lump sum

Do you want to protect your family's future in the event of death due to illness or accident?

This benefit consists of **paying a lump sum to the beneficiary or beneficiaries you designated** when enrolling in the plan, if you were to die before your 65th birthday. The amount of the lump sum is doubled if the death is due to an accident. **The full amount of the lump sum is also paid to you in the event of total and irreversible loss of autonomy.**

To make a claim under this benefit:

The declaration of the death or total and irreversible loss of autonomy, together with the supporting documents listed in paragraph 7.4 of your General conditions, should be sent to us by post.

■ Income protection during periods of sick leave

Do you want protection from the impact of an illness or accident on your earnings? This benefit consists of paying you a daily benefit or an annual pension if you have to take time off work due to an illness or accident.

To make a claim under this benefit:

You should send us your declaration of sick leave, together with the supporting documents listed in paragraph 8.5 of your General conditions.

4. Paying your premiums and making changes to your plan





Your premium amount may change on the anniversary date of your plan depending on the country of destination, benefits and the options you selected. Changes to your premium are not based on the level of claims you have made. In fact, the insurers base their calculation on the overall number of claims made by the persons insured under this plan.

When you enrolled in the plan, you had the choice of opting for monthly, quarterly, twice-yearly or annual payments.

If you chose to pay your premiums by SEPA direct debit, please ensure you have sent us the completed SEPA direct debit mandate, together with the details of the bank account to be debited (available for payments in Euro only).

If you chose to pay your premiums by bank transfer, PayPal or credit card, you will receive a premium notice

at each due date with details of the amount to be paid.

You can pay your premiums by bank card and PayPal from your Customer Zone.



« I need to make some amendments to my plan as my personal circumstances have changed. What should I do? »

We would be pleased to assist with making any changes to your plan.

You can:

> adjust the level of your cover to suit your needs throughout the duration of your plan (if you choose to upgrade your benefits, you will have to undergo new medical formalities required under the plan),

- > provide us with a new address or new bank details,
- > add a dependent,
- > declare a birth.
- > purchase new benefits,
- > make any other changes to your cover.

Please report any changes in your family situation (birth, marriage, divorce, etc.) within thirty days of the event so that your personal information can be updated.



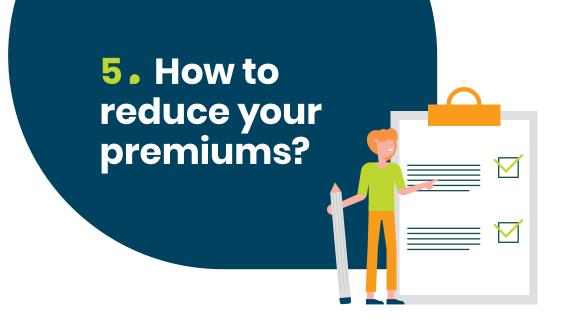
« What if I decide to return permanently to my country of nationality? »

You have the option of terminating your plan early.

You should send us your request for early termination by registered letter with proof of delivery or by email, together with an official document confirming that you are returning home on a permanent basis (a certificate of registration with the Social Security scheme in your country of nationality or a copy of your new employment contract, for example).

Your plan will come to an end no earlier than the day following receipt of your request.





You can reduce your premiums with 2 options.

Option 1: You have chosen a deductible

You have chosen an annual deductible from the following amounts:

● €/US\$ 500 **●** €/US\$ 1, 000

● €/US\$ 2,500

● €/US\$ 5,000

You get a discount on your annual medical expenses premium based on the amount of deductible selected.

Option 2: You have chosen a level of reimbursement

You have opted for **reimbursements at 80 % or 90 % of actual costs** for Outpatient, Vision-Dental and Maternity benefits. Hospitalisation is always covered at 100 % of actual costs.

How are premium reductions calculated based on the level of reimbursement?

The premium is calculated as follows:

- > premium amount x 0.9 (if you chose reimbursements at 90 %)
- > premium amount x 0.8 (if you chose reimbursements at 80 %)

For example, if your premium is \in 100 and you have chosen reimbursements at 90 %, you will only pay \in 90 instead of \in 100. You can reduce your premiums while still benefiting from all your services, **including your third party payment card in the USA**.

APRIL, insurance made easy

Founded in 1988, APRIL is an international insurance services group based in 22 countries, whose ambition is to offer its customers an easier and more accessible insurance experience. More than 3,000 employees design, distribute and manage specialized insurance solutions around five expertise markets (borrower, international health, Professionals/Very small business, local Health and Life, niche damage) for its partners and customers – individuals, professionals and companies. In 2019, the group generated sales of 1,017.23 million euros.

For every expatriate situation, an international insurance solution

Whether you're a student, on an internship, planning a working holiday, in work or retired, travelling alone or with your family, APRIL International Care will support you during your time abroad with a range of comprehensive and flexible insurance solutions suitable for all kinds of expatriates and all budgets.

CONTACT
YOUR INSURANCE CONSULTANT:

Opric International Care

Head office:

14 rue Gerty Archimède - 75012 Paris - FRANCE Tel: +33 (0)1 73 02 93 93 - Fax: +33 (0)1 73 02 93 90 Email: info.expat@april-international.com - www.april-international.com

A French simplified joint-stock company (S.A.S.) with a capital of €200,000. RCS Paris 309 707 727 Insurance intermediary - Registered with ORIAS under number 07 008 000 (www.orias.fr) Prudential Supervision and Resolution Authority (ACPR) 4 place de Budapest - CS 92459 - 75436 Paris Cedex 09 France NAF6622Z - VAT № FR603009707727

