Global healthcare

A perfect fit

Tailored business plans
Global health insurance
tailored to your business

Let’s get started

Six key reasons to choose us

1 Part of one of the world's leading insurance brands,[1] with global resources to support your people wherever they go for you.

2 Consistently good service to help you and your employees worldwide, with experienced multilingual advisers available 24/7.

3 We harness AXA's unique in-country expertise to help make sure your package meets your needs.

4 Access to healthcare facilities in the places that matter to your business.

5 Cost containment options to keep your premiums under control.

6 Simple management dashboard to help you see how your people are using their plan.

Help your people go further for your business

Trust us to look after your people, so they can look after your business.

Even the most experienced employee on assignment needs to know that they'll have support they can rely on, wherever they go for your business.

That's where we fit in. With global health cover, including access to over 1.9 million healthcare facilities worldwide,[2] you can be confident that your people will feel supported while they're working on assignment. That's an important reassurance when you're asking them to go a little bit further for you.

Who are we?

We're the global healthcare specialists for AXA, one of the world's leading insurance brands[1] – a company that businesses have relied on to support and protect what matters to them for over 60 years.[3] And we know what we're doing.

Built for business

We've designed plans with cost controls built in – so you can help keep your workforce performing at their best, at a price you're comfortable with.

AXA has offices worldwide,[5] so you can be sure we have the experience and global resources to give both you and your employees the support you need. And our dedicated account management team will help you get everything running smoothly.

Simple to set up... simple to manage

Keeping track of all the local regulations, deciding on the best options possible for your team, adding and removing members, keeping an eye on claims... It can all add up to a daunting to-do list. Let us help tick a few of those boxes.

Designed to match your needs

Our professional team will work closely with you to set up your global health insurance plan, helping to make sure that you're offering the benefits that are important to you and your employees and that they can access the right care wherever they're based.

Global reach: local expertise

As AXA's global healthcare specialists, we're uniquely placed to harness our in-country expertise right around the world – so wherever you're based, however complex your business needs, we can put together a plan tailored to multiple countries around the world.

Our in-country resources help to introduce plans in places with specific regulations, such as the Gulf, Saudi Arabia, the Netherlands and Australia. If you need cover in these countries, just give us a call: we can introduce a locally compliant plan alongside your international health plan, in any combination to suit your team.

Cost saving options to help you get the best value

Your plan is designed to balance your employees' needs and your budget, with cost saving options built in. You'll have a premium guarantee and a profit share scheme to give you cashback if your claims are low. You can also customise your plan to save more, with flexible benefit limits and excess options.

See next page for more information.

Dedicated account management

Your account management team will be on hand to help you manage your plan and answer all your questions.

You'll also have access to a management dashboard, giving you an overview of claims, how your people are using their plan, and whether you're on track to benefit from our cost-controlling profit share scheme.

Vigilant on costs

You're careful about where your money goes: we are too

We keep a close eye on costs to make sure that your benefits package is a worthwhile investment – balancing your need to keep your employees in good health, with your budget.

We work closely with our healthcare providers to secure valuable discounts that help your employees' benefits to go even further.

Our dedicated fraud investigation and claims risk management teams draw on the unique resources of the AXA Group to continuously work on your behalf around the globe. We make sure we're paying real claims, reviewing claim costs and making sure providers are charging what they should – while still ensuring your employees receive whatever care they need.

Get the cover that fits your team

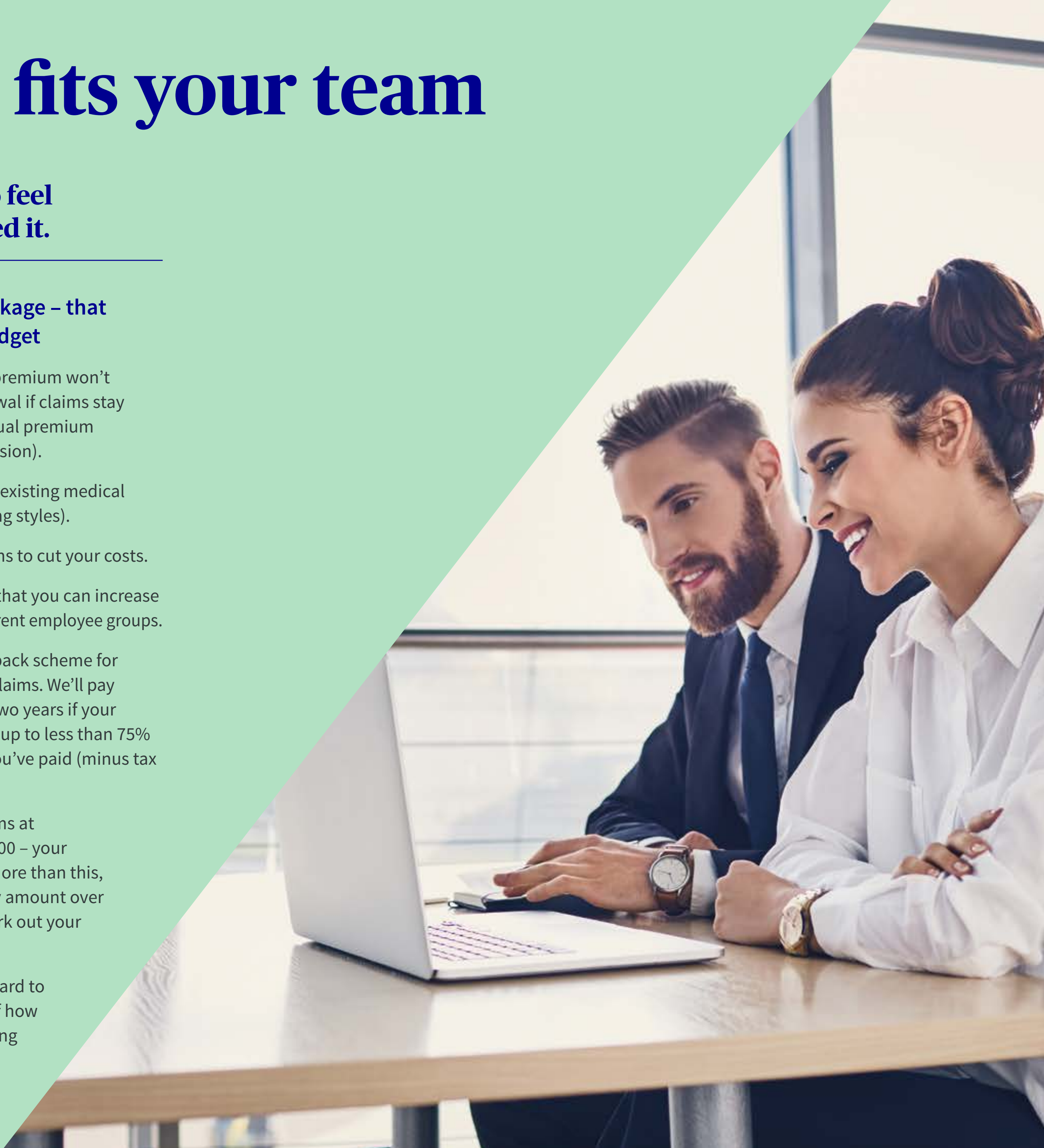
When you're sending people abroad, they need to feel confident that they'll have support when they need it.

They go further for you: go further for them

- A package that harnesses AXA's unique in-country expertise to help meet the needs of assignees in key corporate destinations.
- Extra support including being able to speak to a nurse or counsellor by phone day or night.
- A simple, easy-to-use plan that travels with them.
- An online account to add claims and check membership details.
- Consistent global service 24/7.

A comprehensive package – that still matches your budget

- A guarantee that your premium won't go up at your first renewal if claims stay under 75% of your annual premium (minus tax and commission).
- Different ways to cover existing medical conditions (underwriting styles).
- A range of excess options to cut your costs.
- Treatment allowances that you can increase or decrease to suit different employee groups.
- Profit share – our cashback scheme for companies with lower claims. We'll pay you money back after two years if your employees' claims add up to less than 75% of the total premium you've paid (minus tax and commission).
- We cap high-value claims at £35,000/€44,500/$56,000 – your employees can claim more than this, but we won't count any amount over this figure when we work out your renewal premiums.
- A management dashboard to give you an overview of how your employees are using their plan.



Support your employees can rely on

We'll get your people the answers and the care they need. Quickly, reliably, easily.

Emergency evacuation and repatriation as standard

If any of your employees have a serious accident or illness and can't get the help they need locally, we'll arrange for them to be evacuated to the nearest suitable medical facility. And then when they're ready, we'll get them back again.

We don't take emergency evacuation and repatriation claims into account when we work out your renewal premium.

Second opinion from global experts

The Second Medical Opinion service is part of our Virtual Care from AXA offering.

To perform at their very best, your employees need to feel confident about their health. If any of your employees are ever unsure about their diagnosis, they can get a second medical opinion from an independent expert. And if they need it, we can arrange for them to have a medically trained case manager who can speak to local health providers in their language, and support your employee from diagnosis to recovery – helping them get back to full strength faster.

Integrated with our Virtual Doctor and Mind Health services, the Second Medical Opinion service is available to all our members.

Fast, simple access to care

AXA membership gives your people access to over 1.9 million healthcare facilities worldwide. And with trusted AXA Select healthcare providers in key expat destinations and 163 countries, your team will be able to access expert care no matter where they happen to be.[2]

Your employees can manage everything online or call our multi-lingual advisors 24/7 – we can even help them with translation over the phone.

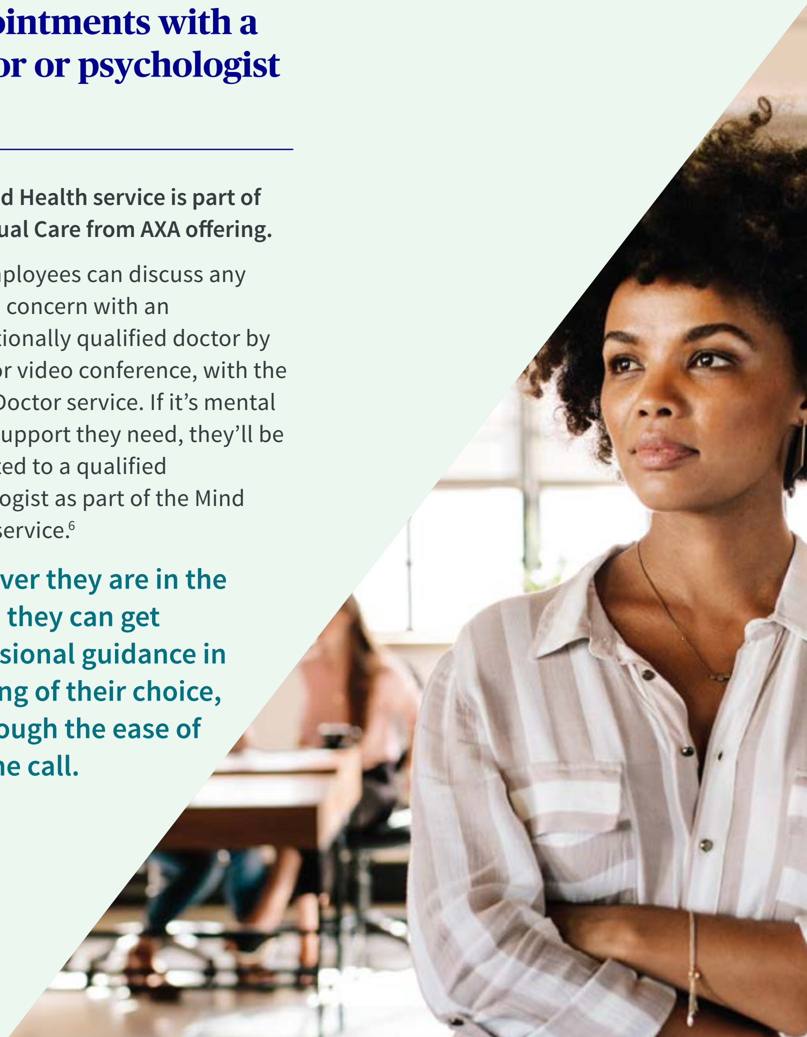
No matter where your people are, we'll be there for them, with the same consistent, friendly service.

Appointments with a doctor or psychologist

The Mind Health service is part of our Virtual Care from AXA offering.

Your employees can discuss any medical concern with an internationally qualified doctor by phone or video conference, with the Virtual Doctor service. If it's mental health support they need, they'll be connected to a qualified psychologist as part of the Mind Health service.[6]

Wherever they are in the world, they can get professional guidance in a setting of their choice, all through the ease of a phone call.



Tailor your cover

For groups of 75-149 employees – a single plan that's easy to set up and easy to manage. For more information about how our cover works in your area and for your team, please see the summary of cover here.

1

Where do you need cover for?

Choose the cover area that's best for each employee:

- ☐ **Worldwide**
- ☐ **Worldwide, excluding the USA**
- ☐ **Channel Islands, Isle of Man, UK and Europe**

Your employees are covered everywhere in their cover area, whether they're at home, on holiday or on a work trip.

Visiting the USA? Even if you choose 'Worldwide, excluding the USA', with most of our plans your employees will still have cover for emergency treatment when visiting the USA.

2

Which cover level suits your employees?

You can choose different levels for different employee groups:

- ☐ **Standard** – covering CT, PET and MRI scans, hospital stays and emergency transport
- ☐ **Comprehensive** – for extra cover including outpatient treatment
- ☐ **Prestige** – for more reassurance, including routine pregnancy and childbirth
- ☐ **Prestige Plus** – for our ultimate cover, with extensive outpatient benefits and dental cover included

Covering employees in the Channel Islands or Isle of Man? Take a look at our summary here.

3

Customise your employees' cover

Customise your cover by adding upgrades or changing limits on:

- **Outpatient cover**
- **Medical practitioner cover**
- **Complementary practitioner cover**
- **Dental care**
- **Optical cover**
- **Health checks**
- **Routine pregnancy and childbirth** (Global health plan only)
- **Off-islands transportation** (Islands Health Plan only)
- **The Mind Health service**

The benefits and limits you can flex will depend on the cover level you've chosen.

4

Manage your costs with an excess

Add an excess to help bring your premiums down:

- We offer a wide range of excesses to help you get quality cover but still match your budget.
- You can add different excesses for different groups of employees.
- You can ask employees to pay the excess, or pay it yourself.

International cover

To find out how you can customise your cover by adding upgrades or changing limits, see here

Our global health plan

Can I add an excess to bring my premium down?

You can choose an excess level to suit your budget:

- ☐ £100 €125 $160
- ☐ £250 €320 $400
- ☐ £500 €640 $800
- ☐ £1,000 €1,275 $1,600
- ☐ £2,000 €2,550 $3,200

All excesses are per person, per year.

Summary of benefits

Benefit allowance	Standard	Comprehensive	Prestige	Prestige Plus
Benefit allowance per member	Up to £1,000,000/ €1,275,000/$1,600,000 each year	Up to £1,500,000/ €1,900,000/$2,400,000 each year	Up to £2,000,000/ €2,550,000/$3,200,000 each year	Up to £5,000,000/ €6,375,000/$8,000,000 each year

Inpatient and day patient cover	Standard	Comprehensive	Prestige	Prestige Plus
Inpatient and day patient treatment including surgeons', anaesthetists', physicians' and consultants' charges, diagnostic tests and physiotherapy	Within benefit allowance			
Cash benefit for each night you receive free inpatient treatment and free hospital accommodation	£100/€125/$160 a night			£150/€190/$240 a night
Parent accommodation charges for one parent staying with a child member under 18	Within benefit allowance			
Inpatient psychiatric treatment	100 days per lifetime membership			

Outpatient cover	Standard	Comprehensive	Prestige	Prestige Plus
Surgical procedures	Within benefit allowance			
Medical practitioner charges for consultations	Not included – optional upgrade available: Outpatient limit of £1,000/€1,275/$1,600 £200/€250/$320 limit on complementary practitioner charges from the outpatient limit Up to £100/€125/$160 on vaccinations from the outpatient limit	Outpatient limit of £3,500/€4,460/$5,600 £300/€380/$480 limit on complementary practitioner charges from the outpatient limit £300/€380/$480 limit on vaccinations from the outpatient limit	Outpatient limit of £5,750/€7,330/$9,200 £300/€380/$480 limit on complementary practitioner charges from the outpatient limit £300/€380/$480 limit on vaccinations from the outpatient limit	Within benefit allowance
Diagnostic tests				Within benefit allowance
Psychiatric illness consultations and treatment				Paid in full up to 30 sessions within benefit allowance
Physiotherapy				Paid in full up to 35 sessions within benefit allowance
Complementary practitioner charges				Paid in full up to 35 sessions within benefit allowance
Vaccinations and their administration by a medical practitioner or nurse				Up to £500/€635/$800 each year
Chinese herbal medicine	Included within the complementary practitioner benefit limit			Up to 15 sessions at £100/ €125/$160 per session within benefit allowance
Outpatient drugs and dressings prescribed by a medical practitioner	Up to £100/€125/$160 each year	Up to £500/€635/$800 each year	Up to £750/€950/$1,200 each year	Within benefit allowance

You can increase or decrease the limits within these benefits – see here

International cover continued

To find out how you can customise your cover by adding upgrades or changing limits, see here

Brain and Body Scans	Standard	Comprehensive	Prestige	Prestige Plus
CT, MRI and PET scans received as an inpatient, day patient or outpatient	Within benefit allowance			

Cancer cover	Standard	Comprehensive	Prestige	Prestige Plus
Radiotherapy and chemotherapy received as an inpatient, day patient or outpatient	Within benefit allowance			
Chemotherapy and/or biological drug treatment to prevent a recurrence of cancer or to maintain remission	Within benefit allowance			
Experimental drug treatments as part of an ethically approved drug trial	Within benefit allowance			
Follow up consultations if you remain a member and your policy includes outpatient cover	Not included – optional upgrade available	Membership lifetime		
Nurse to give you chemotherapy for cancer or antibiotics by intravenous drip at home	Not included	Up to 14 days	Up to 28 days	
Purchase of wigs during active treatment of cancer	Up to £400/€510/$640			
Day patient radiotherapy & chemotherapy cash benefit when treatment and accommodation has been free of charge	£50/€60/$80 a day up to £5,000/€6,375/$8,000			£150/€190/$240 a day up to £5,000/€6,375/$8,000

Chronic cover	Standard	Comprehensive	Prestige	Prestige Plus
Routine follow up consultations and 120 day limit on inpatient treatment	Not included	Included		
Kidney dialysis inpatient, day patient or outpatient treatment	Not included	Up to £25,000/ €31,875/$40,000	Up to £50,000/ €63,750/$80,000	Up to £75,000/ €95,625/$120,000

Pregnancy cover and palliative care	Standard	Comprehensive	Prestige	Prestige Plus
Routine pregnancy and childbirth (a moratorium applies, please speak to an adviser for details)	Not included	Not included – optional upgrade available: Up to £5,000/ €6,375/$8,000	Up to £10,000/ €12,750/$16,000	Up to £12,000/ €15,300/$19,200
Palliative care	Not included		Up to 30 days (Cancer diagnosis only)	Up to 30 days

41%

of employers said that international health insurance was the benefit their employees on international assignment valued the most[4]

International cover continued

To find out how you can customise your cover by adding upgrades or changing limits, see here

What's not covered?

As with most health insurance, there are limits and exclusions on these plans. They don't cover:

- ✖ Treatment designed to prevent illness rather than treat it.
- ✖ Treatment for injuries as a result of sports that your employees receive money for taking part in.
- ✖ Claims if your employees travel outside their area of cover to get treatment or against medical advice.
- ✖ Non-emergency treatment in the USA, unless you've chosen to include the USA in your cover.
- ✖ Treatment in the UK from providers that are not listed in our Directory of Hospitals unless you have a Prestige Plus plan.
- ✖ Costs for arranging treatment, such as phone calls and travel.
- ✖ Depending on the cover you choose, conditions that started before your employees joined. When you join, we'll talk to you about how we cover pre-existing conditions for your employees.

Full details of what members are and are not covered for are provided in the membership handbook, or are available on request.

Summary of benefits continued

Emergency treatment	Standard	Comprehensive	Prestige	Prestige Plus
Emergency treatment in the USA emergency inpatient and day patient treatment (applicable only for plans with 'worldwide excluding USA' area of cover)	Up to 6 weeks up to a limit of £10,000/€12,750/$16,000	Up to 6 weeks up to a limit of £15,000/€19,125/$24,000	Up to 10 weeks up to a limit of £20,000/€25,500/$32,000	Up to 10 weeks up to a limit of £30,000/€38,250/$48,000
Emergency outpatient treatment whilst you are in the USA (not applicable with USA upgrade)	Not included			Up to £2,000/€2,550/$3,200
Ambulance transport for emergency transport to or between hospitals	Within benefit allowance			
Evacuation and repatriation service	Included			

Health and wellbeing cover	Standard	Comprehensive	Prestige	Prestige Plus
Non-routine dental treatment eg replacing crowns	50% of costs incurred up to £320/€405/$510		50% of costs incurred up to £500/€635/$800	80% of costs up to £3,500/€4,450/$5,600
Routine dental treatment eg check ups, scale and polish	Not included	Not included – optional upgrade available: 80% of costs up to £1,000/€1,275/$1,600	Not included – optional upgrade available: 80% of costs up to £1,500/€1,900/$2,400	
Accidental damage to teeth	Up to £10,000/€12,750/$16,000			
Prescription glasses and contact lenses	Not included	Up to £100/€125/$160		Up to £200/€255/$320
Eyesight test cover	Not included	Paid in full for one eye test per year		
Health check	Not included		Up to £300/€380/$480 per person per year	Up to £400/€510/$640 per person per year
Disability compensation cover	Not included		Up to £50,000/€63,750/$80,000	Up to £100,000/€127,500/$160,000
Spinal supports, knee braces and pneumatic walking boots, external prostheses during active treatment of cancer	Up to £1,500/€1,900/$2,400	Up to £2,000/€2,550/$3,200	Up to £2,500/€3,200/$4,000	Up to £3,500/€4,450/$5,600

Support and helplines	Standard	Comprehensive	Prestige	Prestige Plus
Virtual Doctor service	Included			
Personal Medical Case Management	Included			
Health at Hand	Included			
Doctor, Dental, Optical helpline	Included			

You can increase or decrease the limits within these benefits – see here

Islands cover

To find out how you can customise your cover by adding upgrades or changing limits, see here

Summary of benefits

Inpatient & day patient treatment	Core	Classic	Premier	Ultimate
Hospital and accommodation charges	Paid in full			
Out of directory cash benefit when a member receives treatment at a facility in the UK not listed in the Islands Health Plan Directory of Hospitals	£100 each day / night			
Specialist fees (surgeons, anaesthetists and physicians)	No annual maximum			
Parent accommodation: Charges for one parent staying in hospital with a child under the age of 18 and covered by the policy	Paid in full			
Hotel accommodation for one parent while a child is in hospital	£100 a night up to £500 per year			
Emergency outside of Europe cover	Not included	Paid in full for up to 8 weeks treatment in any year up to a total of £25,000 a year	Paid in full for up to 8 weeks treatment in any year up to a total of £30,000 a year	Paid in full for up to 8 weeks treatment in any year up to a total of £50,000 a year
Cash benefit for each night you receive free inpatient treatment and free hospital accommodation within the UK or Channel Islands	Not included	£50 per night up to £2,000 per year		£100 per night up to £2,000 per year
Inpatient psychiatric treatment	100 days per lifetime membership			

Outpatient cover	Core	Classic	Premier	Ultimate
Surgical procedures	No annual maximum			
CT, MRI and PET scans received as an inpatient, day patient or outpatient at any hospital in Europe and scanning centre within the Islands Health Plan Directory of Hospitals	Paid in full			
CT, MRI and PET scans per visit for using a CT, MRI or PET facility in the UK that is not listed as a scanning centre in the Islands Health Plan Directory of Hospitals	£100 each visit			
Psychiatric – outpatient consultations and treatment	Not included		Up to £1,000 per year	
Other outpatient treatment combined limit, including:	Not included	Up to £1,000 per year	Up to £2,500 per year	No annual maximum
Specialist consultations	Not included	Treatment for GP referred physiotherapy and/or complementary practitioner treatment up to 10 sessions per year. Further sessions available under specialist referral up to your outpatient limit		
Complementary practitioner charges				
Physiotherapy				
Diagnostic tests				

You can increase or decrease the limits within these benefits – see here

Islands Health Plan

What's my area of cover?

Guernsey, Jersey and Isle of Man, UK and Europe.

Which hospitals can I use?

You can use UK and island hospitals listed in the Islands Health Plan Directory of Hospitals, and in the rest of Europe you can use any hospital.

Access to our extended network of hospitals

You can also choose to extend your hospital network – giving you access to a greater range of hospitals in London.

Can I add an excess to bring my premium down?

You can choose an excess level to suit your budget:

- ☐ **£100**
- ☐ **£250**
- ☐ **£500**
- ☐ **£1,000**
- ☐ **£2,000**

All excesses are per person, per year.

Islands cover continued

To find out how you can customise your cover by adding upgrades or changing limits, see here

What's not covered?

As with most health insurance, there are limits and exclusions on these plans. They don't cover:

- Treatment of chronic conditions.
- Routine dental check-ups.
- Routine pregnancy and childbirth except for complications.
- Preventative treatment.
- Claims if your employees have travelled outside of Europe to get treatment.
- For treatment in the UK, any inpatient or day patient treatment, MRI, CT or PET scans and oral surgical procedures not received in a hospital, scanning centre or facility listed in the Islands Health Plan Directory of Hospitals.
- Depending on the cover you choose, conditions that started before your employees joined. When you join, we'll talk to you about how we cover pre-existing conditions for your employees.

Full details of what members are and are not covered for are provided in the membership handbook, or are available on request.

Summary of benefits continued

Cancer cover	Core	Classic	Premier	Ultimate
Radiotherapy and chemotherapy received as an inpatient, day patient or outpatient	No annual maximum			
Drug treatment to prevent recurrence of cancer (excluding pre-existing conditions)	No annual maximum			
Follow-up consultations	Not included	No annual maximum within outpatient limit		No annual maximum
Day patient and outpatient radiotherapy and chemotherapy cash benefit when treatment and accommodation has been free of charge	£50 per day up to £5,000 per year			
Experimental treatment for cancer	Costs and conditions to be agreed before treatment			
Hospital-at-home	Paid in full			
Palliative care	Included			
Hospice donation	Not included		£100 per night	
External prostheses during active treatment of cancer	Not included	Up to £1,500 per year	Up to £2,500 per year	Up to £5,000 per year
Purchase of wigs during active treatment of cancer	Not included	Up to £400 per year		
Transportation from the Islands to UK or another Island for eligible cancer treatment if local treatment is not available	Not included		Up to £1,000 per year	Up to £1,500 per year

Other benefits	Core	Classic	Premier	Ultimate
Virtual Doctor service	Included			
Virtual Doctor prescription charges	Up to £200 a year (through the Virtual Doctor service)			
GP fees	Not included		Up to £500 per year	No annual maximum
Maternity cash benefit after one year of cover	Not included		£150 per birth	
Health check – contribution towards cost	Not included		Up to £100 every 2 years	Up to £200 every 2 years
Ambulance transport – for road ambulance for emergency transport to or between hospitals	Paid in full			
Evacuation and repatriation service	Paid in full			
Transportation from the Islands to UK or another Island if local treatment is not available	Up to £1,500 per year			
Accidental damage to teeth	Not included		Up to £1,000 per year	
Dental and optical cover	Not included – optional upgrade available: 80% of the cost for non-routine dental treatment, up to £150 each year; Up to £25 towards an eye test each year; 80% of the cost for prescription glasses and contact lenses, up to £100 each year			Non-routine dental treatment: 80% refund up to £350 per year; Optical cover: 80% refund £200 per year; Up to £25 for an eye test

You can increase or decrease the limits within these benefits – see here

Customise your cover

Customise your plan by adding cover or changing limits

Customising your international cover

Standard	Comprehensive	Prestige	Prestige Plus
Outpatient cover			
✚ Add extra outpatient cover ⚙ Flex: Outpatient limit Medical practitioner consultations Complementary practitioner charges Drugs and dressings	✔ Included ⚙ Flex: Outpatient limit Medical practitioner consultations Complementary practitioner charges Drugs and dressings	✔ Included ⚙ Flex: Outpatient limit Medical practitioner consultations Complementary practitioner charges Drugs and dressings	✔ Included ⚙ Flex: Outpatient limit Medical practitioner consultations Complementary practitioner charges Drugs and dressings
Prescription glasses and contact lenses			
✚ Add prescription glasses and contact lenses ⚙ Flex prescription glasses and contact lenses limit	✔ Included ⚙ Flex prescription glasses and contact lenses limit	✔ Included ⚙ Flex prescription glasses and contact lenses limit	✔ Included ⚙ Flex prescription glasses and contact lenses limit
Dental cover			
✚ Add routine dental ⚙ Flex dental care limits	✚ Add routine dental ⚙ Flex dental care limits	✚ Add routine dental ⚙ Flex dental care limits	✔ Included ⚙ Flex dental care limits
Health checks			
✘ Not available	✘ Not available	⚙ Flex health check contribution limit	⚙ Flex health check contribution limit
Pregnancy and childbirth			
✘ Not available	✚ Add routine pregnancy and childbirth cover	✔ Included	✔ Included
Mind Health service			
✚ Add Mind Health service	✚ Add Mind Health service	✚ Add Mind Health service	✚ Add Mind Health service

Customising your islands cover

Core	Classic	Premier	Ultimate
Outpatient cover			
✚ Add extra outpatient cover ⚙ Flex: Outpatient limit Complementary practitioner charges	✔ Included ⚙ Flex: Outpatient limit Complementary practitioner charges	✔ Included ⚙ Flex: Outpatient limit Complementary practitioner charges	✔ Included ⚙ Flex: Outpatient limit Complementary practitioner charges
GP fees			
✚ Add GP fees ⚙ Flex limit for GP fees	✚ Add GP fees ⚙ Flex limit for GP fees	✔ Included ⚙ Flex limit for GP fees	✔ Included ⚙ Flex limit for GP fees
Dental and optical cover			
✚ Add dental and optical ⚙ Flex limits for all types of dental and optical cover	✚ Add dental and optical ⚙ Flex limits for all types of dental and optical cover	✚ Add dental and optical ⚙ Flex limits for all types of dental and optical cover	✔ Included ⚙ Flex limits for all types of dental and optical cover
Health checks			
✘ Not available	✘ Not available	⚙ Flex health check contribution limit	⚙ Flex health check contribution limit
Transportation from the Islands to UK or another Island			
⚙ Flex transportation limit	⚙ Flex transportation limit	⚙ Flex transportation limit	⚙ Flex transportation limit
Extended network of hospitals			
✚ Add access to greater range of hospitals in London	✚ Add access to greater range of hospitals in London	✚ Add access to greater range of hospitals in London	✚ Add access to greater range of hospitals in London
Mind Health service			
✚ Add Mind Health service	✚ Add Mind Health service	✚ Add Mind Health service	✚ Add Mind Health service

✔ Cover already included
✘ Cover not available
✚ Cover that can be added
⚙ Cover where you can increase or decrease the limits

Want AXA by your side?

To find out more about our Tailored business plans, you can:

Give us a call on **+44 (0) 1892 596 422** to get more information and request a quote.

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

Visit the business pages of our website **axaglobalhealthcare.com**

Speak to your AXA representative or intermediary today.

[1] The number two insurance brand in Interbrand's 2024 Best Global Brands report and number 48 overall.

[2] Number of providers in the AXA Select medical provider network according to Global Network Management team, as of September 2024.

[3] AXA group of companies have been providing cross-border health insurance plans since 1963.

[4] www.axa.com/en/about-us/key-figures

[5] You can request an appointment 24/7/365. Callbacks are typically within 24 hours. You do not need to pay or claim for a consultation, but you will be charged for the cost of the initial phone call when using the callback service. You won't be charged if you request a callback using the app or online portal. Video appointments in English, Spanish and Mandarin are available between 8am and 12am (UK time), Monday to Friday. Video appointments in German are available between 8am and 8pm (CET), Monday to Friday. In Singapore, all appointments are conducted only via video and in English, between 10am and 7pm (Singapore Standard Time), 7 days a week. These services are provided by an independent third party, Teladoc Health.

The people used for the images in this document are models.