



HEALTHIER, LONGER,  
BETTER LIVES

AIA ONE BILLION  
JOIN THE JOURNEY

AIA HEALTH SAVER



Worth more than experienced, Save all over Thailand

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With **AIA HEALTH SAVER**



# AIA HEALTH SAVER

Even though your health is being maintained for the betterment, it still has chances to get ill. Be prepared for medical charges which are likely to be higher due to the advancement in medical technology these days is important. Cost-effective coverage for medical fees is a good protection that lessens your financial burdens and improves your quality of life.

**Get saved in the most cost-effective way with AIA Health Saver** – new medical rider with as-charged benefits, save money and relieve your concern even when you and your beloved ones become ill.

\$100

**NEW!** As-charged benefits that young children can purchase.  
Issued age from 15 days to 75 years old.



Coverage until the age of **99** years old.



**As-charged benefits for medical charges**  
with maximum sum assured at 500,000 baht<sup>1</sup>



**Cost-effective premium at reasonable price.**



**Male 35 Years Old**  
Premium starts at **7,500 baht<sup>2</sup>**



**Female 35 Years Old**  
Premium starts at **9,200 baht<sup>2</sup>**



**Double Sum Assured** for critical illnesses<sup>3</sup>. In case of 6 critical illnesses<sup>4</sup>, the maximum benefits **will be doubled<sup>5</sup>** and applicable for 4 consecutive policy years.



**Medical Coverage per policy year<sup>6</sup>**  
for medical service fees : Dialysis, Radiotherapy, and Chemotherapy

## Remark

<sup>1</sup> As charged benefits are only for some items. When combining group 3 - 6 and 12, the maximum benefits coverage must not exceed limit amount per confinement / When combining group 9 - 11, the maximum benefits coverage must not exceed limit amount per policy year. Additional details are available in the benefits table.

<sup>2</sup> Sample annual premium of plan 200,000 baht.

<sup>3</sup> Critical illness refers to the critical illness according to the definition of critical illness that is covered under the endorsement on critical illness coverage.

<sup>4</sup> Coverage for critical illnesses: 1. Acute Heart Attack 2. Major Stroke 3. Coronary Artery By-Pass Surgery 4. Invasive Cancer 5. Major Organs Transplantation or Bone Marrow Transplantation 6. Surgery to Aorta

<sup>5</sup> The maximum benefits will be increased to doubled, in the event that the insured has been treated for critical illness when first diagnosed with the critical illness for

(1) The maximum benefits in group 2 and group 3 - 6 and 12 as per confinement, excluding the benefits subgroup 2.4 ;

(2) The maximum benefits in group 9 - 11 as per policy year.

<sup>6</sup> When combining group 9 - 11, the maximum benefits coverage must not exceed limit amount per policy year.

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- The applicant is advised to study and make thorough understanding about the benefit illustrations before making decision to purchase the insurance. After receiving the policy, please study the details and the terms and conditions as specified in the policy contract.
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BRIFE BENEFITS TABLE		Plan (baht)			
		200,000	300,000	400,000	500,000
1. In-Patient Benefits					
GROUP 1	Hospital daily room & board, food and hospital service (inpatient) per confinement. In the event of ICU, such benefit will be paid for hospital daily room & board, food and hospital services charges (in-patient) at 6 times of the benefits Hospital daily room & board, food and hospital service charges (in-patient) combined not exceeding 365 days.	1,500 per day	2,000 per day	3,000 per day	4,000 per day
	ICU daily room & board benefits shall be paid at 6 times				
GROUP 2	Fees for medical services, diagnosis, treatment, blood services, nurse services, medicine, intravenous nutrition and medical supplies, per confinement.				
2.1	Medical service fee for diagnosis	25,000	35,000	40,000	50,000
2.2	Treatment medical service, blood service and nursing service				
2.3	Medicine, intravenous nutrition and medical supplies				
2.4	Medicine, expendable medical supplies (Supply 1) for take-home (7 days cap per admission)	5,000 per admission (Included in the maximum benefits group 2.1 - 2.3)			
GROUP 3	Fees for medical professional services (physician), examination, physical services per confinement (not exceeding 365 days)	As charged*			
GROUP 4	Fees for surgery and procedures per confinement				
4.1	Operating or medical procedure room	As charged*			
4.2	Medicine, intravenous nutrition, medical supplies and surgical device				
4.3	Medical professional services, physician (and assistant) fees for surgery & procedure				
4.4	Physician fee - Anesthesiology				
4.5	Organ transplantation				
GROUP 5	Day surgery <sup>1</sup>				
2. Out-patient benefits					
GROUP 6	Fees for diagnosis directly related to before and after in-patient treatment, or follow up OPD treatment directly related to after discharge per confinement				
6.1	Fees for diagnosis directly related to in-patient treatment within 30 days before and after admission	As charged*			
6.2	Fees for OPD treatment after discharge (per admission) for follow up treatment within 30 days after the admission (excluding fees for diagnosis)	As charged* Maximum 2 times (Per confinement)			

\* When combining group 3 - 6 and 12, the maximum benefits coverage must not exceed limit amount per confinement.

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BRIFE BENEFITS TABLE		Plan (baht)			
		200,000	300,000	400,000	500,000
GROUP 7	Fees for OPD treatment of injury within 24 hours of each accident	7,000	8,000	9,000	10,000
GROUP 8	Rehabilitation fees after admission per policy year	Not Cover			
GROUP 9	Medical services fees for chronic kidney failure treatment by hemodialysis per policy year	200,000**	300,000**	400,000**	500,000**
GROUP 10	Medical services fees for tumour or cancer treatment by radiation therapy, interventional radiology, nuclear medicine per policy year				
GROUP 11	Medical services fees for cancer treatment by chemotherapy per policy year				
GROUP 12	Emergency ambulance service fee	As charged* (Included in the maximum benefits group 3 - 6)			
GROUP 13	Minor surgery <sup>2</sup>	10,000 per admission	15,000 per admission	20,000 per admission	25,000 per admission
Additional Benefits					
3. OPD general benefits		Not Cover		1,000 per visit; Maximum 30 times per policy year.	1,500 per visit; Maximum 30 times per policy year.
4. Benefits of Critical Illness Coverage <sup>3</sup> (Double CI)		The Company shall increase maximum benefits as specified in the benefits table of this rider to be double for the benefits as following; in the event that the insured has been treated for critical illness. 1. The maximum benefits in group 2 and group 3 - 6 and 12 as per confinement, excluding the benefits subgroup 2.4 ; 2. The maximum benefits in group 9 - 11 as per policy year The maximum benefits will be increased in the policy year when the insured is diagnosed to critical illness and 3 years consecutive.			
5. Death benefit		10,000			

\* When combining group 3 – 6 and 12, the maximum benefits coverage must not exceed limit amount per confinement.

\*\* When combining group 9 - 11, the maximum benefits coverage must not exceed limit amount per policy year.

<sup>1</sup> Day surgery refers to a major surgery, or a surgical procedure performed instead of a major surgery, or the use of specialized treatment equipment that can replace a major surgery, that does not require an overnight hospital stay.

<sup>2</sup> Minor surgery refers to a surgical procedure at the level of cutaneous or subcutaneous or epithelial tissue by applying local/topical anesthesia.

<sup>3</sup> Critical illness coverage during the period that the rider is in force: If the insured is diagnosed and confirmed with the critical illness according to the definition of critical illness covered under this rider for the first time after the waiting period, the Company shall increase maximum benefits as specified in the benefits table of this rider to be double for the benefits as following; in the event that the insured has been treated for critical illness.

1. The maximum benefits in group 2 and group 3 - 6 and 12 as per confinement, excluding the benefits subgroup 2.4 ;

2. The maximum benefits in group 9 - 11 as per policy year

The double amount will cover first policy year of diagnosis and 3 consecutive years. The first policy year that the Company will increase the maximum benefits to double will be either;

1. The policy year that the insured is hospitalized due to critical illness for the first time; or

2. The policy year that the insured undergoes a day surgery due to critical illness for the first time; or

3. The policy year that the insured undergoes tissue biopsy for examination for the first time and the biopsy results conform the diagnosis of critical illness ;  
Whichever event occurs first.

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## SCENARIO 1 : Family Stabilizer



Khun Ekkachai, age 35, works for a private company. He is the pillar of the family with his wife and one 3-year-old child. Khun Ekkachai dedicated himself to support his family. So, he must carefully plan for the financial expenses of his family. He is concerned that an unexpected incident may happen to him, and his medical welfare provided by his employing company is insufficient, adversely affecting his entire family. Thus, he decided to purchase medical coverage with as charged benefit for himself in a cost-effective manner.

The AIA agent recommended **AIA Health Saver rider plan 300,000 baht** and annual premium payment of **9,300 baht**.

To relieve Khun Ekkachai's concern, regardless of whatever will happen to him, he is assured that the as charged benefit will help save his medical expenses in the future, leaving his family in a comfortable position.



**Example :** Khun Ekkachai has gone through an appendix surgery, and he needed a recovery period for 3 days in standard room at the hospital

## MEDICAL COVERAGE



When Khun Ekkachai purchased the **AIA Health Saver rider plan 300,000 baht**, this will lessen his burdens on such expenses as below :

Particulars		Initial Billing	Eligible Benefits	Benefits Payout	Unit : Baht
1	Daily room & board and hospital service charges (In-patient)	7,050 (2,350 x 3)	Room Charges 2,000 Per Day	6,000	<b>Standard Room 3 days 2,000 x 3 = 6,000</b>
2.1	Medical service fee for diagnosis	4,098	As Charged but not exceed limit amount 35,000 baht	4,098	
2.2	Medical treatment and nursing fees	2,400		2,400	
2.3	Medicine, intravenous nutrition and medical supplies	8,000		8,000	
2.4	Costs of take-home medicine and medical supplies (Medical Supply 1) Amount not exceed 7 days per admission	687	5,000 per admission*	687	<b>AIA Health Saver shall cover more than 99% of the Initial billing</b>
3	Fees for medical professional service (physician), examination, physical services	8,000	As Charged but not exceed limit amount 300,000 baht**	8,000	
4.1	Operating or medical procedure room	17,228		17,228	
4.2	Medicine, intravenous nutrition and surgical device in operating room	53,729		53,729	
4.3	Medical professional service, Physician (and assistant) fee-Surgery (Doctor fee)	44,000		44,000	
4.4	Physician fees - Anesthesiology	8,000		8,000	
SOU		153,192		152,142	

\* Included in the maximum benefits group 2.1 - 2.3

\*\* When combining group 3 – 6 and 12, the maximum benefits coverage must not exceed limit amount per confinement.

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## SCENARIO 2 : Ambitious Youth

Khun Saranya, age 32, is running her own business. She is determined to drive her business to achieve her target goals and she is also the pillar of her family including her parents. As her lifestyle is always changing, she is concerned with her personal health. If she got ill, she would not be able to work. She does not want to be a burden on her family. Then, she decided to apply for health insurance with as charged benefit to support her family just in case when an unexpected incident happens.



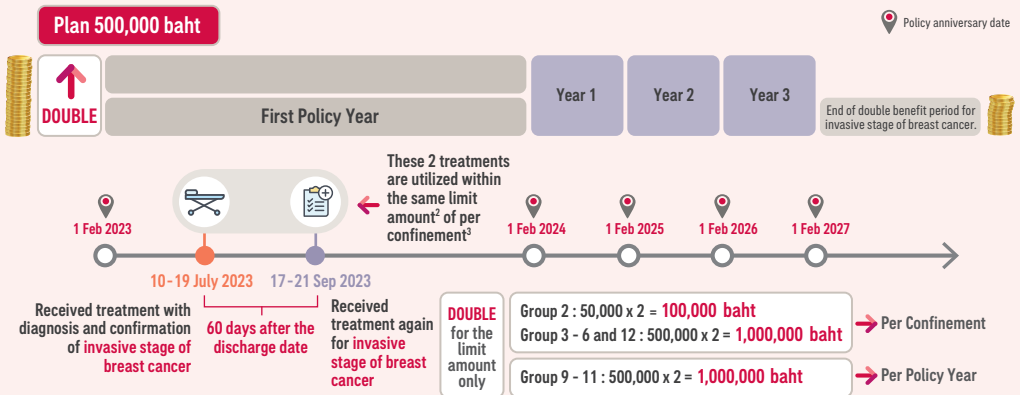
The AIA agent recommended **AIA Health Saver rider** plan **500,000 baht** and annual premium payment of **22,700 baht**.

When Khun Saranya becomes ill in the future, She will not be a burden on others, and she continues to live with confidence and can achieve what she has been aspiring for.

### Example :

- Khun Saranya has a severe chest pain and feel a lump in her breast. She has never been feeling this before. Then, she went to get the treatment from the hospital during 10 - 19 July 2023. She was diagnosed and confirm from doctor for the first time with invasive stage of breast cancer. The Company will increased the maximum benefits to be double<sup>1</sup> of sum assured. The maximum benefits will be increased in the policy year when Khun Saranya has been treated with invasive stage of breast cancer for the first time and the benefits will continuously for a total of 4 policy years.
- 60 days after the discharge from the hospital during 17 - 21 September 2023, Khun Saranya received a treatment of her invasive stage of breast cancer again (continuous treatment from the first time). Then the treatment utilizes the same benefits<sup>2</sup> of per confinement<sup>3</sup>.

The second admission for treatment is still within 90 days from the last hospital discharge date. In this case, both admissions are considered as the same confinement for treatment.



<sup>1</sup> The maximum benefits will be increased to doubled, in the event that the insured has been treated for critical illness when first diagnosed with the critical illness for

(1) The maximum benefits in group 2 and group 3 - 6 and 12 as per confinement, excluding the benefits subgroup 2.4 ;

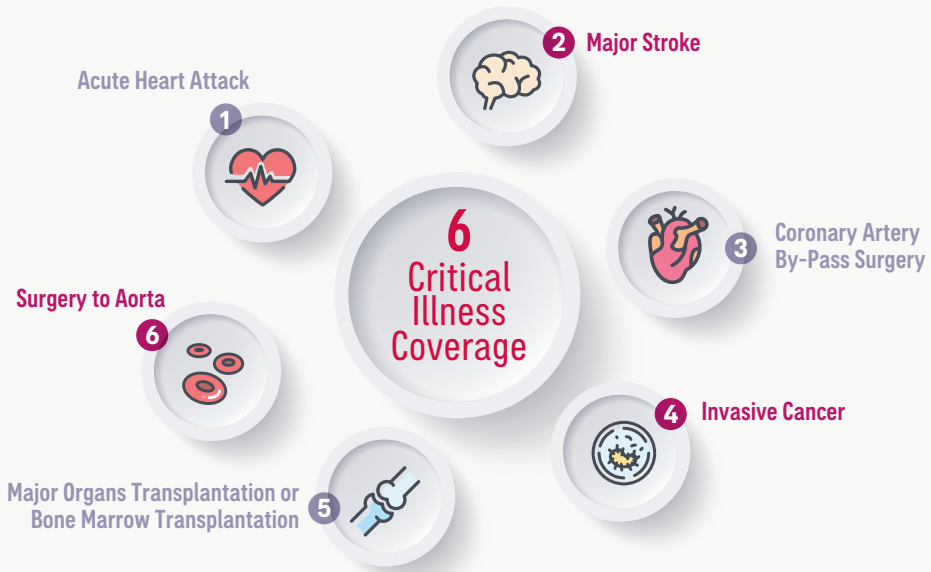
(2) The maximum benefits in group 9 - 11 as per policy year.

<sup>2</sup> Because it is still within 90 days starting from the last discharge date from the hospital and with the same critical illness.

<sup>3</sup> Per confinement refers to In-patient or day surgery in hospital per each admission, and also to In-patient or day surgery within the hospital, regardless of the number of admissions from the same injury or the same illness and undergone follow-up treatments and related complications within a period of 90 days after the last discharge from the hospital, which shall be considered as the same confinement for treatment.

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**In this respect, the Company will double the maximum benefits for critical illness coverage one time per one illness according to the definition of critical illness covered under this rider as follows :**



#### **Waiting Period of AIA Health Saver rider**

The Company shall not pay any benefits based on the following cases:

1. Any illnesses occurring within 30 days from the effective date of this rider or the date on which the Company approves the additional benefits of this rider, whichever date is later; or
2. Any of the following illnesses occurring within 120 days from the effective date of this rider or the date on which the Company approves the additional benefits of this rider, whichever date is later:
  - All types of hernia
  - Pterygium or cataract
  - Tonsillectomy or adenoidectomy
  - Endometriosis

#### **Partial Exclusions of AIA Health Saver rider**

1. Conditions that are caused by congenital abnormalities, or congenital organ system defects, or genetic disorder, or growth development abnormalities.
2. Esthetic enhancement treatment or cosmetic surgery or any other treatments for skin beauty purposes.
3. Pregnancy, miscarriage, abortion, child delivery, obstetric complications, addressing problems with infertility (including investigations and treatments), sterilization, and contraception.

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## Annual Standard Premium Rate

Unit : baht

Age (years old)	Male				Female			
	Plan				Plan			
	200,000	300,000	400,000	500,000	200,000	300,000	400,000	500,000
15 days – 5	29,900	39,900	51,400	61,300	27,300	36,600	47,000	56,600
6 – 10	16,400	23,200	27,200	34,200	14,600	20,400	24,900	31,800
11 – 15	10,100	12,300	16,400	20,200	8,500	10,500	14,400	18,200
16 – 20	7,300	8,700	10,600	13,700	7,400	9,700	12,000	15,000
21 – 25	6,900	8,400	10,400	13,400	8,600	10,600	14,400	18,100
26 – 30	7,400	8,900	13,500	16,600	9,100	11,300	17,100	21,000
31 – 35	7,500	9,300	14,700	18,900	9,200	11,700	18,000	22,700
36 – 40	8,500	10,200	15,200	20,100	10,400	11,900	18,500	25,100
41 – 45	10,000	11,400	17,100	21,600	12,100	13,800	21,700	26,500
46 – 50	11,800	13,000	18,000	24,700	14,300	16,000	23,200	29,200
51 – 55	15,400	17,200	24,300	30,900	15,500	17,200	25,600	34,100
56 – 60	20,600	24,200	30,700	40,500	20,800	24,400	31,000	40,900
61 – 65	27,300	31,000	47,000	56,600	27,600	31,300	47,500	57,200
66 – 70	37,500	47,100	65,900	81,000	37,900	47,600	66,600	81,800
71 – 75	53,700	67,400	94,400	115,800	54,200	68,100	95,300	117,000
76 – 80*	76,900	96,600	135,200	165,600	77,700	97,600	136,600	167,300
81 – 85*	110,200	138,500	193,800	236,800	111,300	139,900	195,700	239,200
86 – 90*	121,200	152,400	222,900	272,300	122,400	153,900	225,100	275,100
91 – 95*	133,300	167,600	256,300	313,100	134,600	169,300	258,900	316,400
96 – 98*	146,600	184,400	294,700	360,100	148,100	186,200	297,700	363,900

\* Renewal Year

A rider is an insurance policy having a renewable one-year rider term.

The Company reserves the right to adjust the premium rate in a policy year due to various factors such as age, occupational class, historical claim payments of the Company, etc. For medical riders, there may be other factors such as the raise up medical inflation rate or historical claim payments of the portfolio. Such adjustment of premium rate is subject to approval of the Registrar.

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Summary of Insurance Coverage

AIA Health Saver rider	AIA Health Saver rider
Issue age	15 days - 75 years old (renewable until 98 years old)
Covered period	Up to 99 years old or until the basic plan has expired
Underwriting rules	Depending on the underwriting criteria of the company
Medical examination	Depending on the underwriting criteria of the company
Tax deduction entitlement	The portion of health insurance premiums (if any) that meet the certain conditions are eligible for personal income tax deduction in accordance with the criteria stipulated by the Revenue Department
AIA Vitality benefits	AIA Health Saver rider is an integrated product under AIA Vitality Protection Program. It is eligible for premium discount as specified under AIA Vitality terms and conditions.

- The English version is unofficial translation of the original Thai version for reference only and has no legal binding as the protective control.
- It is the duty of the insurance applicant to make the insurance premium payment. Collection of insurance premiums by the insurance agent is only a facilitation service.
- Life insurance is not a cash deposit and is subject to the restrictions on policy surrender. Surrendering the policy before maturity may result in the insured receiving the returned proceeds less than the amount of premiums that have been paid.

About AIA Thailand

AIA Thailand, life insurance company is established on 1 October 1938. A Company is a member of AIA Group. AIA Thailand presents several life insurance products to customers, such as life protection plan, saving for retirement plan, accident and health insurance plan and Unit Linked. Besides, the company provides a service for Corporate Solutions, Credit Life and provident fund management under corporate services.



AIA Thailand

181 Surawongse Road, Bang Rak, Bangkok 10500

aia.co.th