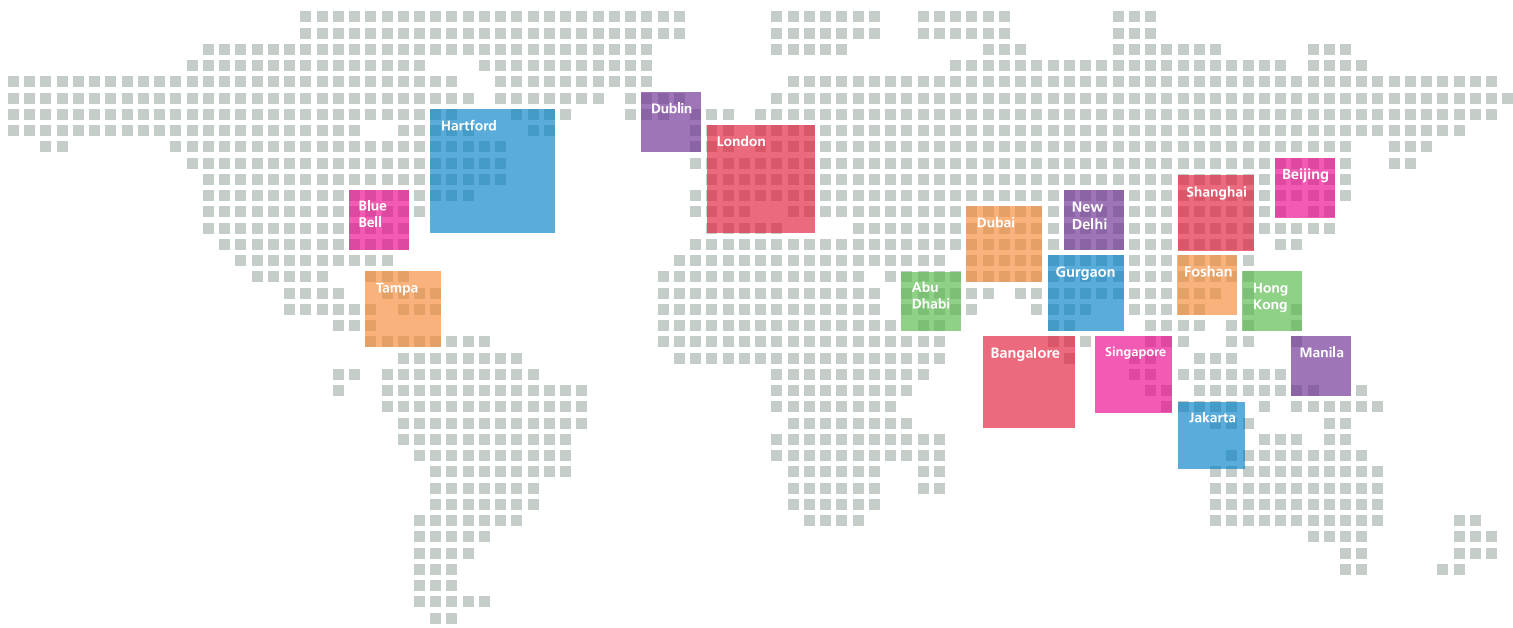


Regional cover with a personalised touch



At Aetna, we make it **our business to understand your health care needs**. With more than **30 years experience in the international marketplace**, covering over **425,000 members around the world**, we are well-positioned to provide **comprehensive health benefits solutions**, delivered first-class. And, as part of the Aetna organisation, we can leverage the strength and capabilities of one of the leading diversified health care benefits companies in the U.S., **with over 150 years of proven expertise and demonstrated success**.





THE AETNA DIFFERENCE

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At Aetna, the health of globally-mobile individuals and their families lies at the centre of everything we do. Through our first-class approach to service, we are a valued partner, working daily to provide you with innovative and comprehensive products, programmes and services that can make a positive impact on your health.

We take your health benefits needs to heart. That's why we've established a strong global presence, with a local footprint that touches key areas all over the world. With over 800 employees located across the globe, we are deeply embedded in the global marketplace and the expatriate experience. This enables us to best meet your needs with confidence and compassion.

Regional business solutions – made easy.

That's our commitment to you. We're dedicated to being a partner who provides you with consultative solutions, backed by a first-class service philosophy you'll experience throughout all of our interactions.

A first-class service philosophy

At Aetna, we want you and your family to be satisfied every time you interact with us. To help accomplish this goal, we have dedicated areas within the organisation focused on delivering a first-class service experience.

The member experience

The 24/7 Aetna International Member Service Centre is committed to making sure you get the care you need, when you need it. Many of our multicultural and multilingual service professionals have experience as an expatriate themselves, giving them unique insight into the situations you may face. You can receive assistance with:

- Questions on claims, benefit levels and cover
- Claims processing in many languages
- General benefit and plan enquiries

The International Member Service Centre is your one-stop resource, both day and night. Taking personalised service one step further, we can easily connect you to our **International Health Advisory Team (IHAT)**. IHAT is a dedicated, clinical team that interacts one-on-one with you to provide:

- Pre- and post-trip planning for international assignments
- Coordination of routine and urgent medical care
- Help obtaining prescription medications and/or medical devices
- Coordination of second opinions for difficult cases
- Discharge planning
- Help finding doctors and facilities



Executive Healthcare Plan overview

The Executive Healthcare Plan (EHP) is designed with the needs of regionally mobile individuals in mind. It provides the medical cover you require, with a first-class level of service you can rely on.

EHP provides a range of cover options with benefits that can include:

- Emergency Evacuation or Out of Country transportation costs to an appropriate medical facility within your selected geographic coverage area for In-Patient/Day-Patient treatment; this also includes reasonable travel costs
- Flexibility to obtain medical treatment at the facility of your choice, within your selected geographic coverage area
- Accident and Emergency treatment outside of your selected geographic coverage area for temporary business trips or holidays
- In-Patient and Out-Patient psychiatric treatment
- Alternative medicine
- Routine pregnancy and childbirth
- Complications of pregnancy
- New born accommodation
- Accidental damage to teeth
- Transport of mortal remains/ cost of local burial or cremation
- Hospice care charges
- Organ transplant
- Rehabilitation
- Routine Management of Chronic Conditions
- AIDS
- Dental Cover
- Renal Dialysis
- Vision Care
- In-Patient/Day-Patient Treatment for Chronic Conditions

In terms of accessing care, geographic coverage options include:

- Africa plus India, Pakistan, Bangladesh and Sri Lanka
- Worldwide excluding the U.S.
- Worldwide including elective treatment in U.S.

Our skilled team is here to partner with you to identify your ideal solution.

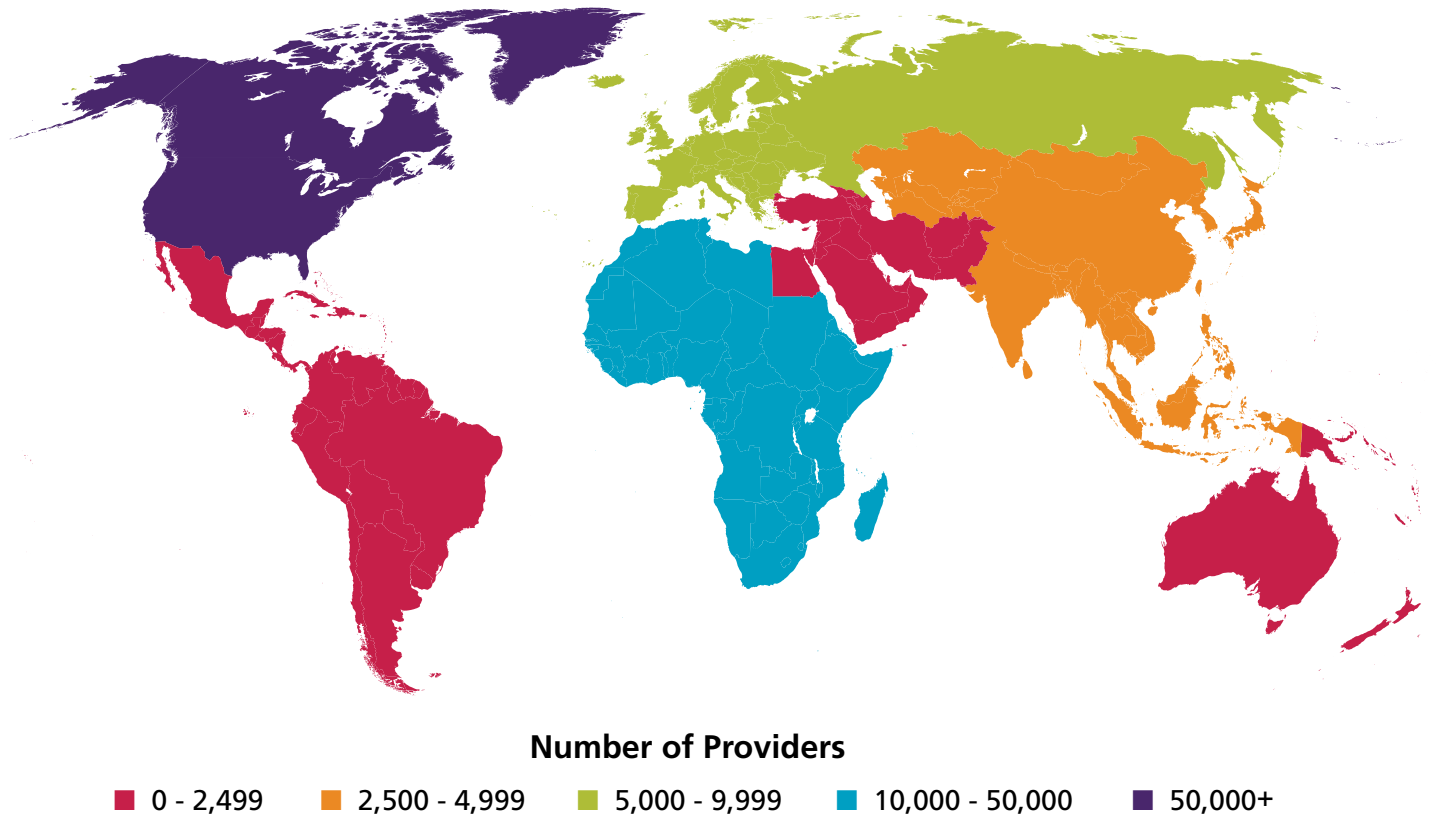


Reliable access to quality care

Aetna is committed to building strong and secure partnerships with health care professionals around the world — so that you have access to quality care when and where you may need it. That’s why we have negotiated simplified prepayment procedures with thousands of medical facilities worldwide. Called “direct-settlement” arrangements, these agreements make accessing care easier and cover any eligible up-front costs associated with your care or treatment, such as planned In-Patient treatment, a maternity stay or Day-Patient services. This is a significant benefit if you’re faced with a more expensive medical procedure.

If you are unable to find a specific health care professional in our direct-settlement database, in the event that you require hospitalisation, we can coordinate a one-time direct-settlement agreement quickly and easily. In fact, we have a 95 percent success rate in negotiating these arrangements. You also have the freedom to pay up-front for care received at any health care professional worldwide, and submit a claim to us for reimbursement.

Our international community of health care professionals*



*The North America region includes health care professionals who participate in the Aetna U.S. PPO Network.

Common questions and answers

Q. Will the plan cover any illnesses or injuries that I had prior to enrolling in the plan?

A. Existing conditions may be specifically excluded and the terms of any exclusion will be noted on your schedule of cover. These will be assessed at the time of application based on the information you declare to us. Undeclared conditions will be excluded and will invalidate your cover. Furthermore, cover for all pre-existing conditions is excluded during the first two years of membership. After this period, should an eligible condition recur, provided you have been treatment, symptom and advice free for a continuous period of two years since joining the plan, then the future costs will be covered which have been declared and accepted by us in writing.

Q. Is there an annual benefit limit?

A. You are able to claim up to an annual maximum of U.S. \$1,000,000 under the Major Medical option and U.S. \$1,500,000 under the Foundation and Lifestyle options. Additionally, certain benefits have sub-limits. You will only be required to pay an excess if you have specifically chosen this option.

Q. Can I seek treatment anywhere in the world?

A. Three geographic coverage options are available for accessing emergency and elective treatment. These include Africa plus India, Pakistan, Bangladesh and Sri Lanka, Worldwide excluding the U.S., and Worldwide.

Q. Am I covered if I travel outside of my selected geographic coverage area?

A. You are covered for Accident and Emergency treatment outside of your selected geographic coverage area for business trips or holidays. Specifically, this benefit is provided for up to 90 days during the period of cover and limited to a maximum of 60 days of treatment per event.

Q. Is a medical examination required to enrol in the plan?

A. No. In the rare instance that we require additional information for fair and accurate underwriting purposes, we will ask you to submit a medical report from your doctor.

Q. How quickly does my cover go into effect?

A. As soon as we receive a completed application form (fax or original), we can confirm immediate cover for 15 days, subject to underwriter's acceptance and pending receipt of the premium. If you wish to be covered immediately, please dial Executive Healthcare Solutions at (254 20) 221 9621/9826 or e-mail info@executive-healthcare.com.

Q. Can my family members also be covered?

A. Yes. Your spouse or adult partner, who is permanently living with you, can be included as a dependant. Also eligible for cover are unmarried children not more than 18 years old and living with you, or not more than 23 years old and in full-time education. Again, this is subject to a completed Application form.

Q. What happens if I want to cancel my cover?

A. You have 15 days from the commencement date of your cover to review your benefits. If you decide to cancel and no claims have been made, we will arrange a full refund of any premium paid, provided we receive a written request to cancel your cover.

Global presence, local footprint — around the corner or around the globe, we're there.

With Aetna, you and your family have access to first-class benefits and services that best meet your needs.

Are you ready to experience the Aetna difference?

**To learn more,
contact us today.**

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Aetna does not provide care or guarantee access to health services. Not all health services are covered. Health information programmes provide general health information and are not a substitute for diagnosis or treatment by a health care professional. See plan documents for a complete description of benefits, exclusions, limitations and conditions of cover. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna Global Benefits plans, refer to www.AetnaInternational.com.