柏盛健康
prosper

2026-2027

Nanjing International School

MEDICAL INSURANCE PLAN

Prosper Health

Prosper Health is a member-centric health insurance service provider. Collaborating with leading insurance companies in China, we offer personalized health management services and insurance solutions to both corporate and individual clients.

Backed by the medical ecosystem resources of the New Frontier, our medical network spans globally, encompassing both public and private healthcare facilities. Prosper provides a complete range of medical services, including disease prevention, treatment, rehabilitation, and ongoing management. Through our dedicated Personal Care Managers and Primary Care Physicians, we understand our clients' unique needs and address their concerns, establishing a highly engaging, trustworthy, and long-term personalized service model. Furthermore, technology serves as one of our vital driving forces. We are committed to enhancing the customer experience by creating efficient digital tools.

Make insurance simple and human

FOREWORD

Dear customer

Prosper Health will provide you superior quality employee insurance service during your insurance period.

In addition to this service manual, you may also check our official WeChat mini-program "Prosper" for relevant documents and forms.

If you have questions or need any assistance, feel free to contact your care team, and we will assist you promptly.

Thanks again for choosing our service!

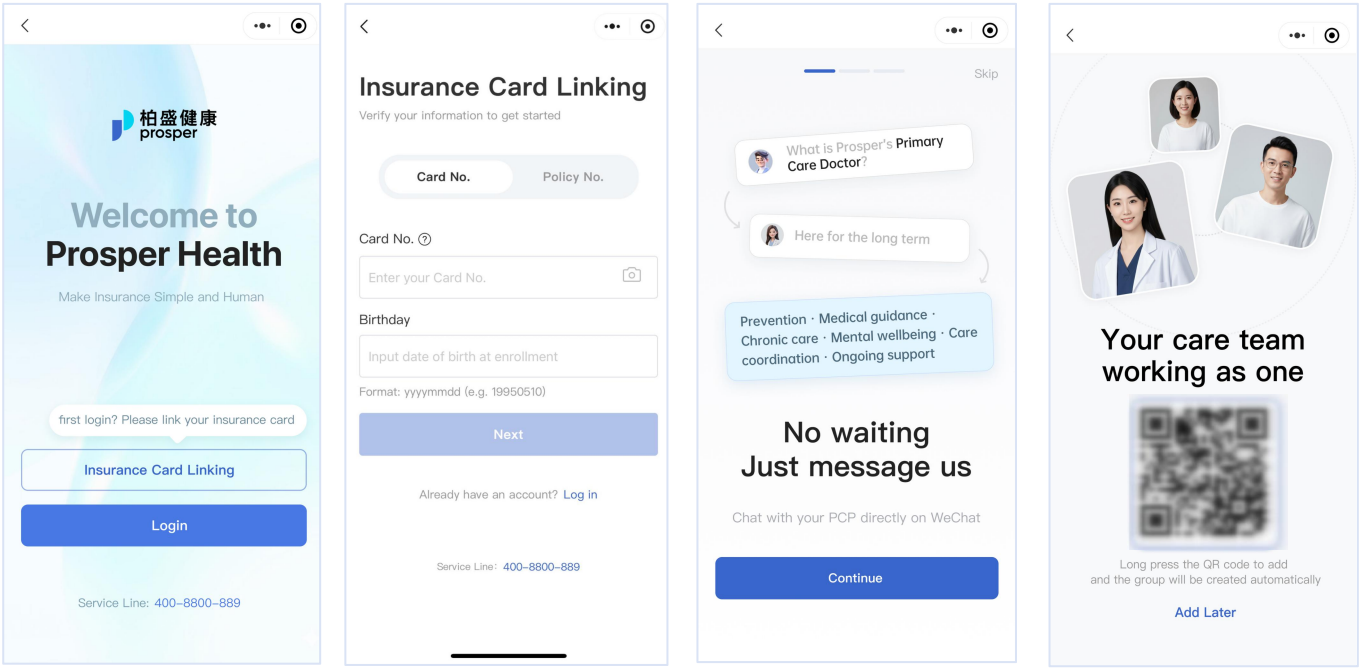
Contact Us

1 Wechat mini-program

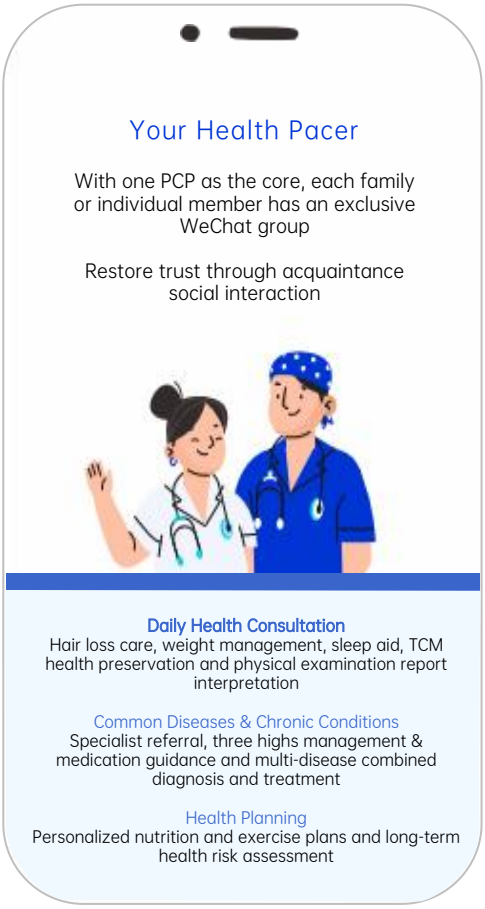
You can scan the QR code to access the mini program. Register your information on the Prosper Health mini program, bind your membership card to check for benefits, submit claims, and apply for pre-authorization. Please scan the code below to get started.

Activate your member portal to get started. A membership card with your unique ID can be found in the welcome letter.

- Scan to access the member portal
- Verify your information
- Activate
- Scan the QR code to add your PCP
- Automatically create your care team (PCP& PCM)



Contact Us



Primary Care Physician

You can contact your PCP for health consultation, care management services and professional health guidance.

Working Hours:
Monday – Friday 9:00-18:00
Public Holidays excluded

From Consultation to In-Person Care

- Complex medical issues identified via online consultation
- Direct booking of nearby clinics
- In-person consultation with your PCP
- Familiar care provider, no need to repeat your medical history

Synchronized Health Data

- Examination results (e.g., blood pressure, ultrasound, etc.)
- Synchronized to your personal online health record
- Continuous online health monitoring

Chronic Disease Closed-Loop

- Online medication delivery for chronic conditions
- Regular in-person follow-up check-ups for health indicators
- Health record establishment
- Dynamic adjustment of treatment plans

Personal Care Manager

You can contact PCM for insurance services, learn about your benefits plan, and help you with complex cases.

Working Hours:
Monday - Sunday 8:30-20:30
Public Holidays excluded

Benefits Assistance

- Benefits & Policy interpretation
- Quick query of coverage scope
- Value-added service consultation

Dedicated Medical Assistance

- Outpatient appointment
- Medication reminder
- Follow-up care after treatment

Pre-authorization & Claims Assistance

- Introduction to pre-authorization & claims process
- Claims documentation Consultation
- Complex case handling

2 Customer Service Hotline

+86-400-8800-889
Working Hours: 24/7

For any inquires, making an appointment, seeking hospital recommendations, etc. (In case of emergency, please seek medical care immediately first and contact us for further assistance.)

3 Email

cs@prosperhealth.cn

Please feel free to reach us via: cs@prosperhealth.cn, our service representatives will reply as soon as possible.

4 Account Manager

Barbara Chong

Email
barbara.chong@prosperhealth.cn

Contents

PART 1

Health Plan

Benefits Schedule

Medical Insurance -Combined Benefit Limit, Deductible, Coinsurance	Benefit Limit
Combined Limit for Medical Insurance Benefits Maximum per main insured person or additional insured person per insurance period	RMB 12,000,000 per insurance period
Deductible Individual; Family	RMB 6,000 per individual RMB 18,000 per family Not applicable to Wellness benefit Online Consultations and Pharmacy Delivery are not subject to deductibles
Coinsurance Coinsurance is the percentage of charges for covered expenses that the main insured person or additional insured person will be required to pay under the plan after satisfying the required deductible	There will be 30% coinsurance for plan if the main insured person or additional insured person seeking treatments at hospitals or clinics in the High Cost Providers List below
Out of Pocket Limit	RMB 30,000
Area of Coverage	Worldwide excluding USA For US nationals, United States out-patient treatment is covered up to RMB 10,000 and routine physical examination is also provided in USA
Emergency Out of Area of Coverage * For details please refer to page 14	Prosper will provide coverage for emergency treatment occurred within 30 days after leaving your area of coverage (for non-medical purpose)
Pre-existing Conditions	Medical History Disregarded

In-Patient/Day Case Healthcare Benefits-Deductible Applies

In-Patient/Day Case Healthcare Benefits	Benefit Limit
Hospital Charges for: ·Nursing and accommodation for in-patient treatment	100% Refund Up to standard private room(1 bed with toilet) for accommodation
Day case treatment	100% Refund Up to standard private room(1 bed with toilet)for accommodation
Prescribed medicines, drugs and dressings for in-patient or day case treatment	100% Refund
Surgical Appliance and/or Medical Appliance This benefit will be paid in respect of: ·an artificial limb, prosthesis or device which is inserted during surgery; ·an artificial prosthesis or device which is necessary part of the treatment immediately following surgery for as long as is required by medical necessity; ·a prosthesis or appliance which is medically necessary and is part of the recuperation process on a short-term basis.	100% Refund
Parental Accommodation This applies to insured in-patient under the age of 18. Prosper will pay for reasonable costs for a parent staying in the same hospital with the insured in-patient	100% Refund Up to standard private room(1 bed with toilet) for accommodation Up to 30 days per insurance period
Operating theatre and recovery room	100% Refund
Surgeons' and Anesthetists' Fees	100% Refund
Surgical Procedures (Excluding organ transplant surgery)	100% Refund Excluding organ transplant surgery
Specialist Physician's Fees This benefit is paid in full for regular visits by a specialist physician during stays in hospital including intensive care by a specialist physician for as long as is required by medical necessity	100% Refund
Physiotherapy	100% Refund

Non-surgical Cancer Treatment Include Radiotherapy, Chemotherapy, Targeted Therapy and Cancer Immunotherapy Proton beam therapy and heavy ion therapy only indicated for malignant tumors with evidence show net benefit than normal radiation therapy, including: - Gallbladder cancer - Head and neck cancer with intracranial, skull base, orbital and perineural invasion - Unresectable intraheptic malignant tumor - Hepatocellular carcinoma - Ocular melanoma - Skull base tumors including chordomas and chondrosarcomas	100% Refund
Pathology, Radiography, Radiology	100% Refund
Home Nursing charges This benefit will be paid: ·If recommended by a specialist immediately after hospital treatment for as long as is required by medical necessity; ·On a full time basis for as long as is required by medical necessity for treatment which would normally be provided in a hospital	100% Refund
Psychiatric Care This benefit will be paid in respect of psychiatric conditions,other mental disorders or addictive conditions	Not Covered
Private Ambulance This benefit is payable for transport to or from a hospital when ordered for medical reasons	100% Refund

Out-patient Healthcare Benefits-Deductible Applies

Out-Patient Healthcare Benefits	Benefit Limit
Out-patient Insurance Benefit Combined maximum limit per main insured person or additional insured person per insurance period for out-patient treatments.This limit forms a part of the Insurance Benefit limit.	100% Refund Up to RMB 60,000 per insurance period Except the below three items which are fully covered up to annual max
Cancer Treatment Include Radiotherapy, Chemotherapy, Targeted Therapy and Cancer Immunotherapy Proton beam therapy and heavy ion therapy only indicated for malignant tumors with evidence show net benefit than normal radiation therapy,including: - Gallbladder cancer - Head and neck cancer with intracranial, skull base,orbital and perineural invasion - Unresectableintraheptic malignant tumor - Hepatocellular carcinoma - Ocular melanoma - Skull base tumors including chordomas and chondrosarcomas	100% Refund Up to annual max of RMB 12,000,000
Pathology, Radiography, Radiology	100% Refund Up to annual max of RMB 12,000,000
Non-surgical and Minor Surgical Procedures and Treatment Outpatient Surgery fee, MRI, CT, PET Scan Fees	100% Refund Up to annual max of RMB 12,000,000
Consultations with Medical Practitioners and Specialists	100% Refund
Prescribed Medicines,Drugs and Dressings	100% Refund
Physiotherapy, Traditional Chinese Medicine Treatment (including Acupuncture, Tuina, Cupping, Chinese medicine for external, Needle-knife therapy), Chiropractic, Osteopathy, Homeopathy, Speech therapy, Alternative therapy This benefit will be payable for Consultations and Treatments with Medical Practitioners/Specialists related to above items	100% Refund Up to RMB 12,000 per year of 10 visits per year
Hormone Replacement Therapy	100% Refund Up to RMB 1,000 per year
Annual Eye and Hearing Test One eye test and hearing test for additional insured person under the age of 15	100% Refund

Travel Vaccinations This benefit will be payable for vaccinations related to travel	Not covered
Chinese Herbal Medicine	100% Refund Up to RMB 12,000 per insurance period
Emergency Dental Treatment This benefit will be payable for treatment received during the emergency visit immediately after accidental damage to natural teeth	Not covered
Psychiatric Care This benefit will be paid in respect of psychiatric conditions, other mental disorders or addictive conditions	100% Refund Up to 20 visits per insurance period (Maximum 60 minutes in one visit of Psychiatric Care)
Telehealth Services (Remote consultation) Charges for the delivery of telehealth services by means of real time two-way audio, visual, or other telecommunications or electronic communications, including the application of secure video conferencing or store and forward transfer technology to provide or support healthcare delivery, which facilitate the assessment, diagnosis, consultation, treatment, education, care management and self-management of a patient's health care by a health care provider practicing within his or her scope of practice as would be practiced in-person with a patient, and legally allowed to practice in the state, while such patient is at an originating site and the health care provider is at a distant site	
Online Consultations (Mental and psychological disorders treatment is not covered) ***Mental health telehealth sessions are not covered under this video consultations benefit. They are covered under outpatient psychiatric care benefit - see above***	Covered up to outpatient maximum and outpatient prescription drug benefit maximum

Emergency and other Special Benefits-Deductible Applies

Emergency Medical Evacuation/Repatriation (These benefits require pre-approval)	Benefit Limit
Emergency Evacuation	100% Refund
Medical Repatriation	100% Refund
Repatriation of Remains	100% Refund
Transport Cost for Third Party	100% Refund
Other Special Health Benefits	**Benefit Limit**
Reconstructive Surgery where is needed as a result of an accident or disease in order to restore function or shape/appearance,the surgery must be carried out within 12 months of the accident or disease	100% Refund Up to RMB 12,000,000
Congenital Condition Treatment: 1. Diagnosed within 6 months of birth for new born infant that are enrolled onto the plan within 30 days of birth 2. For minors under 18 years of age	1. 100% Refund Up to RMB 200,000 2. 100% Refund Up to RMB 30,000
AIDS/HIV treatments (non-pre-existing conditions)	100% Refund Up to RMB 12,000,000
Compassionate Emergency Visit Costs you have to pay for an economy class return ticket from a country within your area of cover to visit a close family member,if their medical condition results in them being placed on a critical list,or their death.You are limited to one return journey in each plan year. Close family member means a dependent, parent, step- parent, parent-in-law, grandparent, grandchild, brother, sister, brother or sister in-law, son or daughter in-law or guardian.	One round trip per policy year
Flights to Thailand (Need Pre-auth) 1. Only eligible for Inpatient treatment received within Thailand network 2. Restricted to one return flight under the name of the client receiving the inpatient treatment 3. Flights for accompany family member is covered for a round trip of economy class 4. Flights must arrive in Thailand within a two day period prior to admission and leave Thailand within a two-day period following discharge from hospital	100% Refund Up to RMB 7,000

Maternity and Wellness Benefits

Maternity Benefits - Deductible Applies	Benefit Limit
Inpatient and Outpatient Maternity Cover This benefit is payable to eligible female covered under the plan. It includes childbirth, pre-natal and post-natal exams, pre-natal vitamins	100% Refund Up to RMB 60,000 for normal delivery, unlimited if complications; Up to standard private room (1 bed with toilet) for accommodation in hospital if necessary for maternity
New Born Infant care Treatment within 14 days(for enrollment new born only)	100% Refund Up to Maternity cap of RMB 60,000
Wellness Benefits - Deductible Not Applicable	**Benefit Limit**
Routine Physical Exams This benefit will be paid for, or in connection with, routine physical examinations for insured persons	Payable up to RMB 3,500 per insurance period; For US nationals, this benefit is extended in USA
Immunization This benefit will be payable for all insured person	100% Refund For US nationals, claims incurred in the US is covered up to RMB 10,000 under the out-patient benefits.
Pap Smear Prosper will pay charges for an annual Papanicolaou screening	
Prostate Cancer Screening Prosper will pay charges for an annual prostate cancer screening for male insured person over 50 years old	
Mammograms for Breast Cancer Screening or Diagnostic Purposes This benefit will be paid in respect of: ·one baseline mammogram for asymptomatic women aged 35-39; ·a mammogram for asymptomatic women aged 40-49 every two years or more if medically necessary; ·a mammogram every year for women aged 50 and over	

Emergency Out of Area of Coverage

If you or your insured family members travel outside your area of coverage, Prosper will provide coverage for emergency treatment occurred within 30 days after leaving your area of coverage (for non-medical purpose).

The emergency treatment refers to out-patient and in-patient implemented by a physician, specialist or medical practitioner and hospitalization that commences within the first 24 hours after emergency condition. The emergency condition includes but not limited to the following list. Prosper's medical team will decide if there is emergency condition requiring emergency treatment based on the claim application:

- High fever: Adult above 38.5 degree Celsius, Child above 39.0 degree Celsius
- Acute abdominal pain, severe vomiting, severe diarrhea
- All kinds of shock
- Coma
- Epileptic attack
- Severe wheezing, difficult breathing
- Acute chest pain, heart failure, severe arrhythmia
- Hypertension Crisis, hypertensive encephalopathy, cerebrovascular accident
- All kinds of acute hemorrhage
- Acute urinary tract hemorrhage, Acute urinary retention, renal colic
- All kinds of acute poisoning (food or drug toxic), all kinds of accident (electric shock, drowning)
- Cerebral trauma, fracture, dislocation, laceration, fire burn, burn, or any other acute injury
- All kinds of poisonous animal or insect bite, acute allergic disease
- Foreign body in ENT or respiratory tract or esophagus, acute sore eyes or redness eyes or swollen eyes, sudden visual impairment and eye trauma
- Other medically emergent conditions attributing to critical, urgent and severe circumstance recognized by Clinical Team of Prosper

List of High-cost Providers

- United Family Hospitals and Clinics (Beijing, Guangzhou, Qingdao, Hangzhou, Tianjin and other cities if any, excluding Shenzhen New Frontier United Family Hospital and Shanghai United Family Hospital/Clinics)
- Parkway Health Medical Centers (Shanghai, Suzhou, Hong Kong and other cities if any, please refer to https://www.parkwaypantai.com/. Chengdu and Shenton Clinics in Mainland China are excluded)
- St. Michael Hospital (Shanghai)
- Shanghai East International Medical Center (Shanghai)
- International SOS and Raffles Medical Joint Venture Clinics (Beijing, Tianjin, Shenzhen, Dalian and other cities if any)
- Beijing International Medical Center (Beijing)
- American Medical Center (Shanghai)
- Institute for Western Surgery (Guangzhou and other cities if any)
- Hong Kong Adventist Hospital – Stubbs Road (Hong Kong)
- Matilda International Hospital (Hong Kong)
- Hong Kong Sanatorium & Hospital (Hong Kong)

List of Restricted Providers

- Asia Medical Specialist & Sport Performance (Hong Kong), please refer to https://www.asiamedicalspecialists.hk/en/
- Shanghai ChingHo Medical Clinic
- HealthSAGE (Shanghai) Clinic or Neckyw (Shanghai) Clinic, including but not limited to:
- Shanghai Gaobo TCM Clinic
- Shanghai Bo Jin TCM Clinic
- Shanghai Jin Bo TCM Clinic
- Shanghai Bowan Traditional Chinese Medicine Clinic
- Shanghai Ji An TCM Clinic
- Shanghai Tai Ji TCM Clinic
- Shanghai Mingtang Chinese Medicine Clinic Co., Ltd.

Policy Exclusions

The company will **not pay** benefit for the following treatment and extras:

1. Treatment that arises from or is in any way connected with attempted suicide or any injury or illness that the main insured person or additional insured person inflicts upon himself.

2. Occupational Therapy, including but not limited to:
(1) Sensory integration therapy, group therapy, treatment of dyslexia, behavior modification or myofunctional therapy for dysfluency, for stuttering or other involuntarily acted conditions not arising from any illness or injury;
(2) Treatment for functional articulation disorder not arising from any illness or injury, such as correction of tongue thrust, lisp, verbal apraxia or swallowing dysfunction;
(3) Treatments for custodial, educational or developmental in nature related purposes;
(4) Maintenance or preventive treatment consisting of routine long-term or non-medically necessary care provided to prevent recurrences;
(5) Treatment designed to acquire levels of function that had not been previously achieved prior to the injury or illness.

3. Dental or orthodontic treatment which is not caused by accidents unless benefit is specifically provided in the list of benefits.

4. Private prescriptions or dressings for use as an out-patient unless the out-patient list of benefits has been chosen and benefit is covered under that list.

5. Treatment in nature cure clinics, health spas and nursing homes.

6. Charges for residential stays in a hospital which is arranged wholly or partly for residence reasons or for treatment which is not necessary, or costs for stays in a hospital which has virtually become the place of domicile or permanent residence.

7. All aspects of pregnancy or childbirth unless maternity benefit is selected and shown in list of benefits.

8. Treatment needed because of or relating to infertility, including complications arising out of such treatment, with the exception of the investigation of infertility to the point of diagnosis.

9. Treatment by way of the intentional termination of pregnancy, unless two medical practitioners certify in writing that the pregnancy were to endanger the life or mental stability of the mother.

10. Treatment by way of nursery care for an eligible female in a hospital following childbirth.

11. Treatment to change the refraction of one or both eyes, including refractive keratotomy (RK) and photorefractive keratectomy (PRK).

12. Injury or disability directly or indirectly caused or contributed to whilst engaging in or taking part in war , invasion, act of terrorist activities, rebellion (whether war be declared or not), civil war, commotion, military or usurped power, martial law, riot or the act of any lawfully constituted authority, or while the insured person are carrying out army, naval or air services operations.

13. Treatment outside the selected area of coverage, except if the treatment is taken as emergency treatment as set forth in the contract.

14. International services expenses for emergency evacuation, medical repatriation and transportationcosts for third parties without the company s authorization in advance or afterwards.

Policy Exclusions

15. Any expense arising from the travel between land and an off-shore facility at sea, regardless if it is out of medical necessity. An off-shore facility at sea refers to an off-shore artificial facility including but not limited to oil rig, ship, vessel, etc. A naturally formed island or reef shall not be included.

16. Sex change operations or any treatment needed to prepare for or recover from these operations (for example, psychological counselling) including complications arising out of such treatment.

17. Treatment that arises from or is any way connected with injury, illness or disablement as a result of:
(1) Taking part in a sporting activity on a professional basis; or
(2) Solo scuba-diving or scuba diving at depths below 30 metres unless the diver is PADI qualified (or equivalent) for that depth.

18. Any form of experimental treatment (or procedure) that does not amount to orthodox treatment or does not adhere to the commonly accepted, customary or traditional practice of medicine.

19. Expenses relating to:

(1) Treatment needed for or related to birth control, including but not limited to any form of sterilisation or contraception including vasectomy;
(2) Any form of plastic, cosmetic or reconstructive surgery or treatment, even for psychological reasons, unless it is of medical necessity as a direct result of the patient having an accident or because of other surgery, which itself would have been covered under the Contract;
(3) Appliances (including spectacles unless the vision benefit has been selected and hearing aids) which do not fall within the company's definition of surgical appliance and/or medical appliance;
(4) Hearing tests, except for one hearing test per annum for an additional insured person under the age of 15 years;
(5) Incidental costs not out of medical necessity including newspapers, taxi fares, telephone calls, guests'meals and hotel accommodation, etc.;
(6) Routine examinations or tests including health screens and medical examinations (if Wellness Benefit has been selected, this will be detailed in the list of benefits, and coverage for Wellness tests will be included);
(7) Eye tests except for eye test once per year for additional insured person under the age of 15 years;
(8) Costs or fees for filling in a claim form or other administration charges.
(9) Costs that have been paid by another insurance company , person , organisation or public programme. If the main insured person or additional insured person is covered by other insurance, the Company will only pay its part of the benefit. If another person, organisation or public programme is responsible for paying the costs of treatment, the company is entitled to claw back any of these costs that has been paid.

20. Medical malpractice.

The treatment for injury or illness directly caused by medical malpractice shall be excluded from the coverage of the contract. Expenses relating to treatment for complication and sequela resulted from medical malpractice shall not be excluded from the coverage of this policy.

21. Work related injuries

Unless otherwise agreed in policy, the treatment for work related injuries shall be excluded from the coverage of the contract. Work related injuries shall be identified in accordance with the identification report issued by identification institution authorized by relevant laws and regulations of the People's Republic of China or any institution with equal qualification.

Prosper health reserves the right of final interpretation.

Prosper Medical Network PART 2

Network in Mainland China

Prosper Health has an extensive network of hospitals in Mainland China, covering 296 cities and over 3000 medical providers, include the VIP or international departments of public hospitals (Grade A hospitals), branches of foreign clinics in China, and international medical facilities.

Please refer to the direct billing list for specific provider information and appointment instructions.

You can view the Prosper Health direct billing list in our mini program, or contact us for hospital recommendations.

Make an Appointment

- Please refer to the medical network list in the mini-program for booking appointments. Some medical providers may not be able to provide direct billing service if appointments are not made through Prosper.
- For appointments at public hospitals, please book at least **2-3 working days in advance**.

  Please try to arrive on time for your appointment, and if you need to reschedule, please contact us at least **1 working day in advance** through our customer service hotline at +86-400-8800-889.
- If you cannot make it to your appointment on time due to unforeseen circumstances, please cancel your appointment at least **1 working day in advance**.

  Failure to inform the hospital in advance may result in the loss of appointment making and direct billing services in the future, and some hospitals may still charge you for the missed appointment (in such cases, you will be responsible for paying the full consultation fee).

Reminders

- **Please bring your [insurance card] and [valid Photo ID],** such as ID card, passport, or Taiwan compatriot permit, and arrive at least 5-10 minutes early if possible.
- If you are unable to show up for your scheduled appointment, there will be a record of no-show, which may affect your direct billing service for future appointments.

Hospital Representatives

Prosper Health provides on-site representative services. We can provide the following services:

- **Assist members in registering at the front desk**
- **Provide bilingual services in Chinese and English if needed**
- **Guide members to fill out forms, coordinate with doctors, or assist with medical services**

The on-site representative is unable to provide advice on claims and payouts. In case of emergency, or receive medical treatment or hospitalization in non-direct billing hospitals, please make sure to collect your medical records, original invoices, and charge lists for claim reimbursement.

Prosper Medical Network PART 2

Hong Kong, Macau, Taiwan and other regions

Make an Appointment

- Please find the direct billing list in the Prosper mini-program.
- You can also contact the service hotline or your Care Team to inquire about medical providers that accept direct billing.
- **Patients seeking medical treatment in Hong Kong, Macau, Taiwan, and other regions must contact Prosper Health in advance to make an appointment and arrange for direct billing service.**

Seeking Care in Hong Kong, Macau, and Taiwan

- In case of emergency or receiving medical treatment or hospitalization in non-direct billing hospitals, please keep record of all medical records and original invoices for reimbursement.
- When seeking medical treatment, please be sure to have your [insurance card] and [valid Photo ID] of the patient (ID card/ Passport/Driving license/ Taiwan compatriot permit/ Passport, etc.) ready.

Seeking Care in All Other Regions (Except for USA)

- Please contact Prosper Health at least **5 working days in advance** to make an appointment.
- In case of emergency, or if you seek medical treatments at non-direct billing providers, please keep medical records, original invoices and other related documents for claims purposes.
- When seeking medical treatment, please be sure to have your [insurance card] and [valid Photo ID] of the patient (ID card/Passport/ Driving license/Taiwan compatriot permit/Passport, etc.) ready.

Notes

All direct billing services will be provided upon confirmation from Prosper Health.

Routine Services

PART 3

1) Pre-Authorization

What is Pre-authorization?

Before receiving any treatment or medical procedure on the following list, members must obtain pre-authorization, otherwise the insurance company reserves the right not to cover the corresponding treatment costs.

Services Requiring Pre-authorization

1. **Mainland China (Public Hospitals)**
   - In-patient Stays
2. **Mainland China (Private Hospitals)**
   - In-patient Stays
   - Physiotherapy, Chiropractic treatment, Osteopathy, Homeopathy
   - Maternity
   - MRI Scan, CT and PET-CT
   - Mental Health
   - Pain Management
3. **Flights to Thailand**
4. **The USA**
   - In-patient Stays

Reminders

In cases of emergency when pre-authorization is not possible, Prosper Health customer service team should be notified within 48 hours of emergency treatment to ensure no denied coverage due to the lack of pre-authorization.

If the insured fails to obtain pre-authorization before undergoing the above-mentioned treatments, or fails to notify the insurer within the specified time in an emergency situation, the Insurer will only cover 80% of the Insured's reasonable and necessary medical expenses, calculated according to the plan's coverage, deductible, reimbursement ratio, and policy sub-limits agreed upon by the contract.

Required Documents

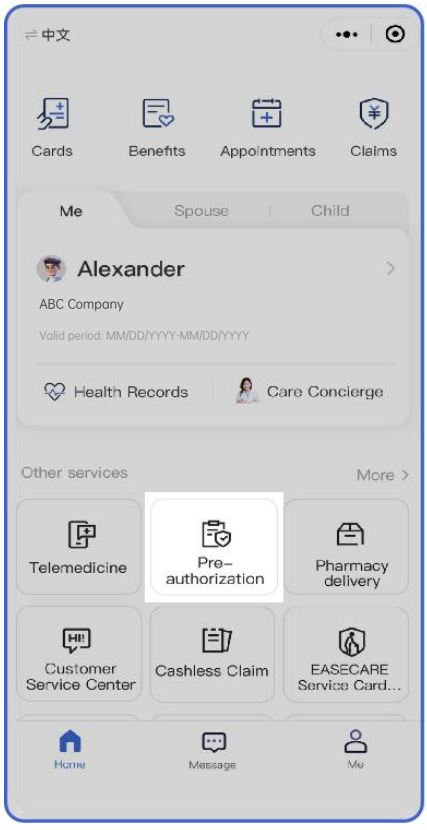
① Pre-authorization form
② Medical materials: hospitalization notice, outpatient medical records, diagnosis, etc.
③ Copies of valid identification documents: ID card, passport

Application Process

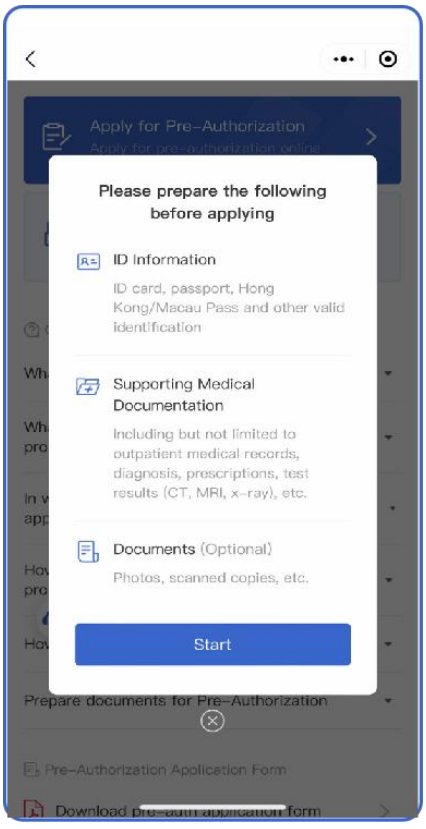
- Approval time: Within 2 working days
- For claims over RMB 50,000: Within 5 working days

Please prepare the pre-authorization materials and submit to us **at least 2-5 working days in advance by calling our customer service hotline at +86 400-8800-889,** sending an email to our pre-authorization team at preauth@prosperhealth.cn, or submit online through the Prosper Health mini-program.
The steps are as follows:

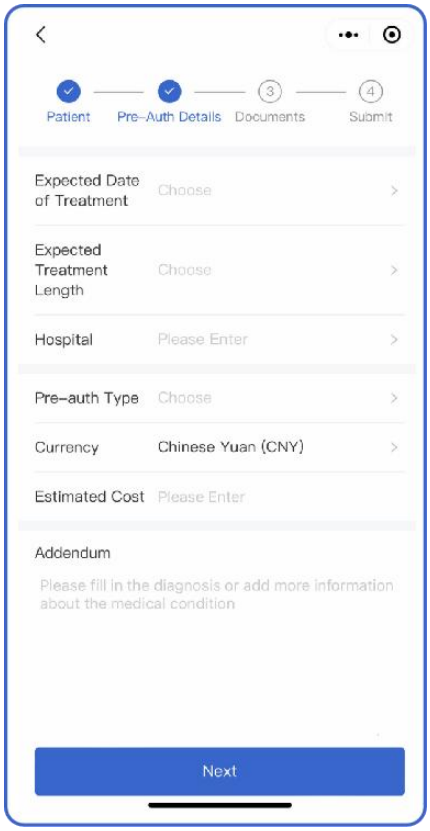
Step 1
Log on to your Account and click "Pre-authorization"



Step 2
Click "Apply for Pre authorization" and start



Step 3
Submit pre-authorization information



Notes

① There is a risk of claims denial if pre-authorization is not obtained. In addition, network providers may refuse to provide direct billing services without a proper pre-authorization confirmation.

② If needed, we may require you to submit additional medical proof documents.

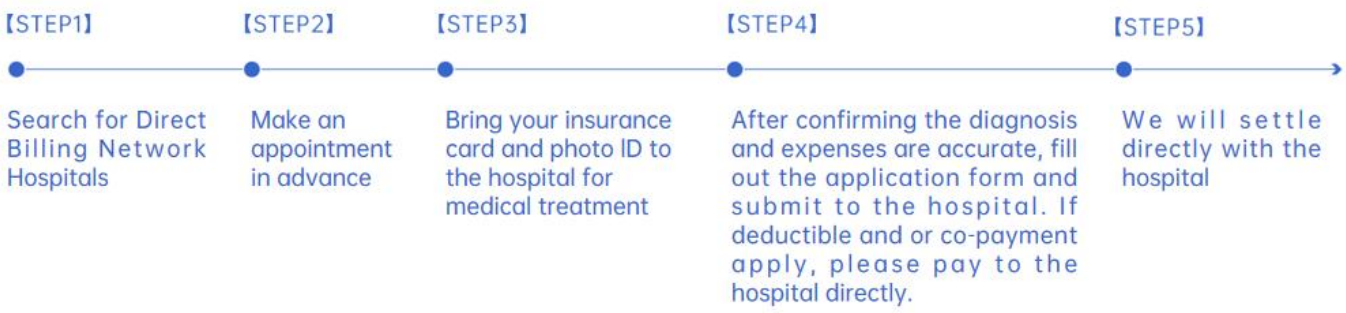
③ During the claims review period, if the medical records and invoices provided are different from those provided in the pre-authorization application, the final coverage of the claim may also be different. Pre-authorization does not guarantee full reimbursement, and you still need to pay for expenses that may not be covered under your policy. At the same time, the treatment authorized must fall within the scope of insurance coverage under the policy.

2) Direct Billing Service

What is Direct Billing Medical Service

When you seek medical treatment at a direct billing medical provider, **if the medical expenses fall within your coverage,** we will **directly settle the relevant medical bills** with the provider in accordance with your insurance plan, saving you the hassle of submitting claims to us afterwards.

Direct Billing Medical Service Process



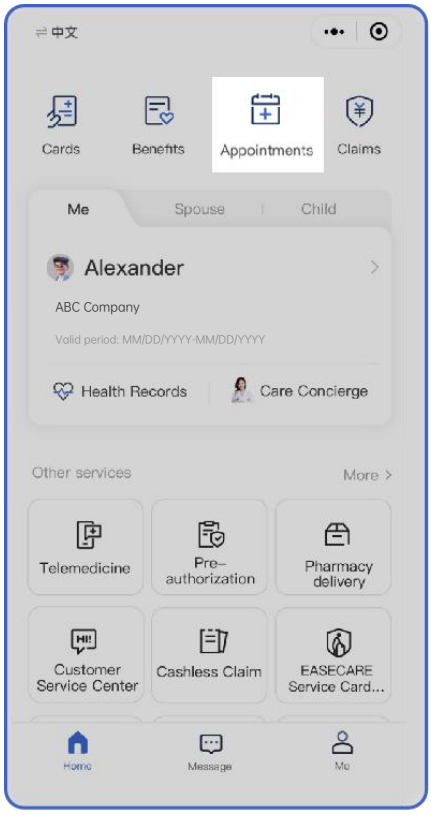
You can choose any of the following methods to make an appointment:

1. **Call the customer service hotline +86-400-8800-889** before the appointment, and we can help make the appointment for you

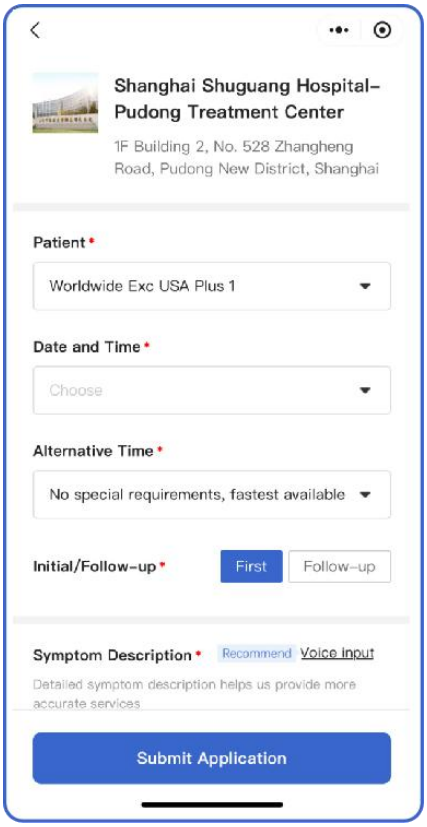
2. Please find the direct billing list in the Prosper mini-program before the appointment, and select the medical provider for appointment.

The steps are as follows:

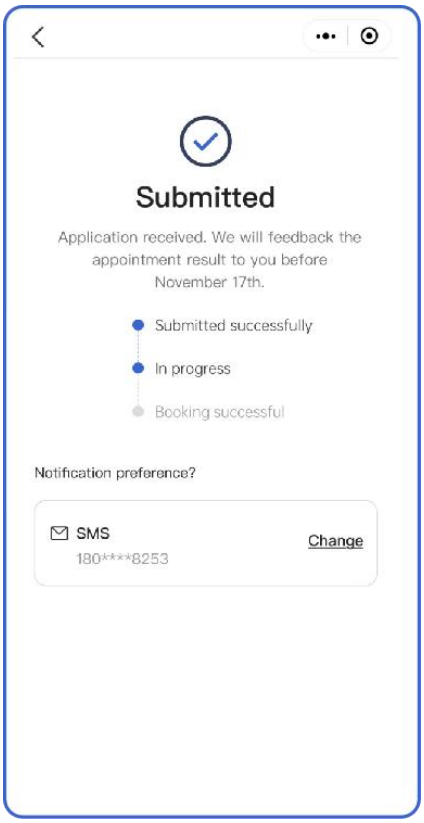
Step 1
Log on to your Account and click "Appointment"



Step 2
Click "Book Appointment" and submit the Application



Step 3
Submitted successfully



Disclaimer

The direct billing service provided by Prosper for medical institutions is a convenient healthcare service for you.

Medical institutions that accept direct billing cannot determine whether your health insurance plan covers certain treatments.

In some cases, certain direct billing medical expenses may not be covered by your insurance plan due to the plan not covering certain treatments, relevant claim expenses reaching the annual benefit maximum limit, and/or being a policy exclusion.

In such cases, if we have already paid the claim on your behalf to the hospital, we will contact you and ask you to return the claim payment promptly.

In other cases, the hospital will settle the bill directly with you.

3) Online Hospital

What is an online hospital

Prosper Health partners with specific Online Hospital to provide you with uninterrupted online consultations through text and video throughout the year. The specific services are as follows:

Online Hospital			
Online medical consultation service		Pharmacy services	
Consultation for Non-Chronic Diseases	Follow-up consultation for chronic diseases	Daily medication dispensing and home delivery	Medication guidance, detailed medication guidance, adverse drug reactions, etc.

Service Description

Offers video consultations and medication prescriptions for common diseases and follow-up visits for chronic disease patients and non-chronic diseases. Mental and psychological disorders treatment are not covered under online care. This service is only available for members, reimbursed up to medical outpatient limit, and subject to the limit for outpatient prescription drugs purchases. The service will be terminated when the insurance contract expires.

In the process of actual use, there will be no payment behavior from member, such like consultation fee, drug delivery fee (if any), no payment behavior. The statistics of the number of consultations shall be based on doctor notes.

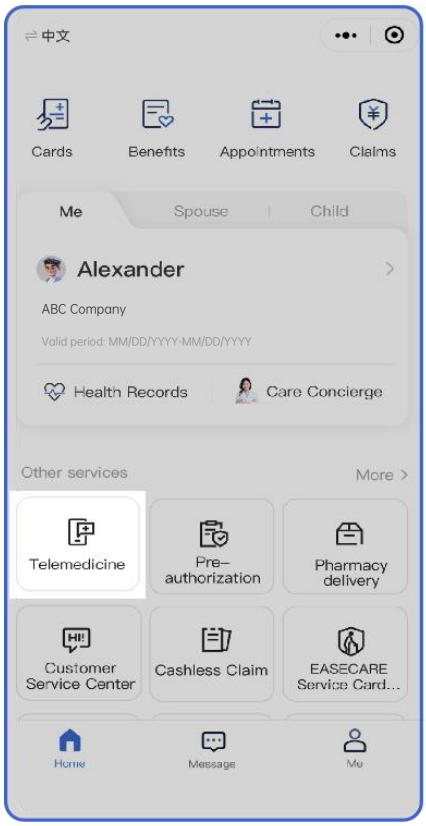
- Service hours: 24/7, no reservation required;
- Service times: subject to outpatient maximum, and outpatient prescription drug benefits maximum;
- Average service duration: no limit;
- Service coverage: family medicine;
- Service response time: 9 seconds;
- Medication delivery: home delivery services available in Mainland China, ranging from 30-minute delivery to 1-3 days depending on local service availability.

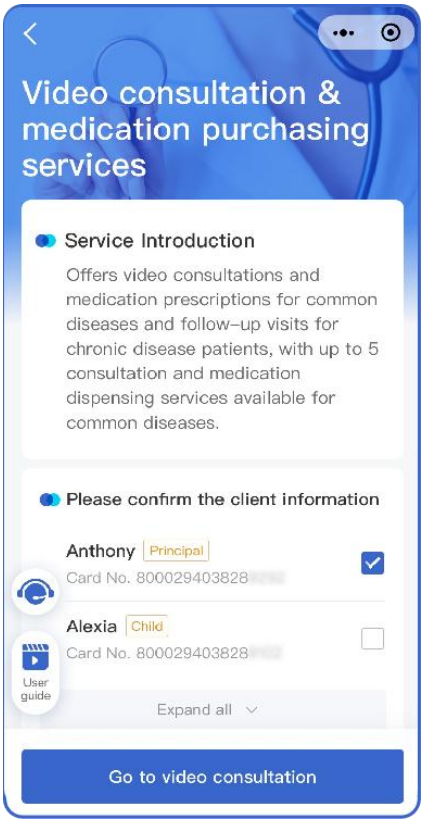
The steps are as follows:

Step 1
Log on to your Account and click "Telemedicine"

Step 2
Click on "Go to video consultation"

Step 3
Click on "Video Call Doctor"





4) Non-direct Billing Claims

What is a non-direct billing claim

If the medical expenses are paid by yourself when seeking medical treatment at a hospital covered under your insurance plan, you may apply for a non-direct bill claim, and claim to us after the treatment is completed.

Non-Direct Billing Claim Application Process

【STEP1】	【STEP2】	【STEP3】	【STEP4】	【STEP5】	【STEP6】
Visit a hospital and pay for the medical expenses yourself	Fill out the claim application form and collect relevant claim documents	Submit the claim online or through mail	We will process the claim.	After claim is processed, reimbursement will be arranged to your designated bank account	Claim record is available in your mini-program.

Claim Documentation

Please prepare the relevant documents as shown below and pay attention to the completeness of the information provided.

Treatments in Mainland China

The submission process depends on whether the fapiao is electronic or paper-based.

- Electronic fapiao: Claims can be submitted online via the Prosper WeChat Mini Program (no limit on claim amounts). Please ensure all relevant medical documentation is included. Refer to the list below for required documents.
- Paper fapiao: Claims can be submitted online through the Prosper WeChat Mini Program, along wiith the necessary medical documentation (no claim amount limit). However, for claims exceeding RMB 10,000 with a paper fapiao, **the original fapiao** must be mailed to Prosper's office before the claim can be processed and finalized.

Treatments Outside Mainland China

Original documents are not required. All claims can be submitted online. Please be sure to include the invoices/receipts/relevant medical documents in your electronic submission.

Medical Documentation

- Outpatient: outpatient medical records, diagnoses and/or prescription notes (if any) requires medication name and dosage.
- Inpatient: discharge summary, hospital charge list

Valid identification of the insured

- Required for the first claim and for claims exceeding RMB 10,000

* Important Note:
Please retain copies of all original medical documentation (including but not limited to medical records, itemized bills, and hospital discharge reports) for at least two years in case of an insurance audit.

Submit a Claim

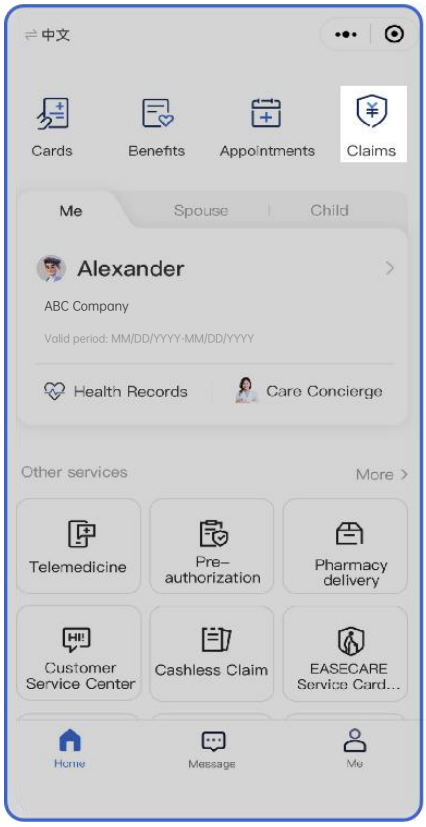
You can submit your claim through the following two channels:

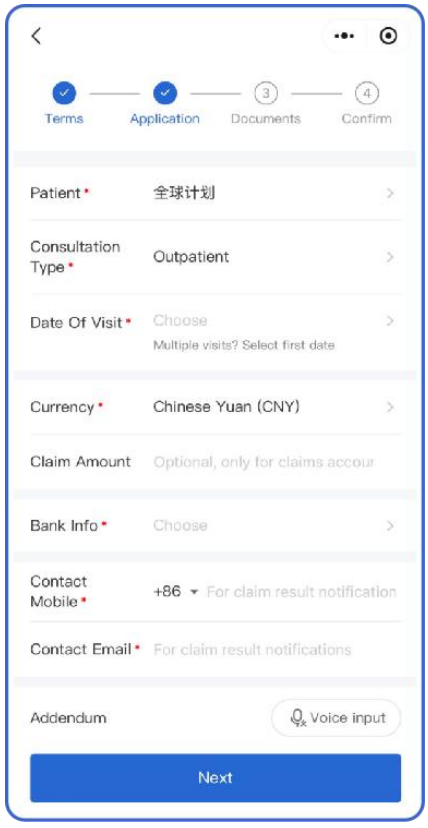
a. Follow the mini-program to submit a claim application

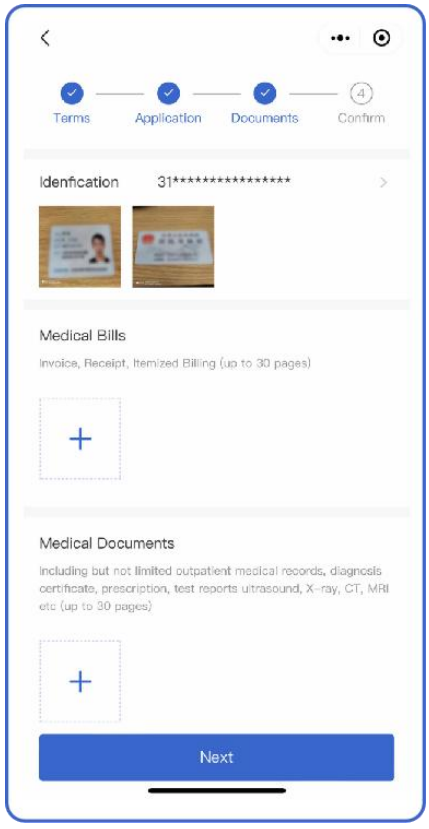
Step 1
Log on to your Account and click "Claims"

Step 2
Select "Submit a Claim" , fill in the information - click "Next"

Step 3
Upload the relevant documents and submit



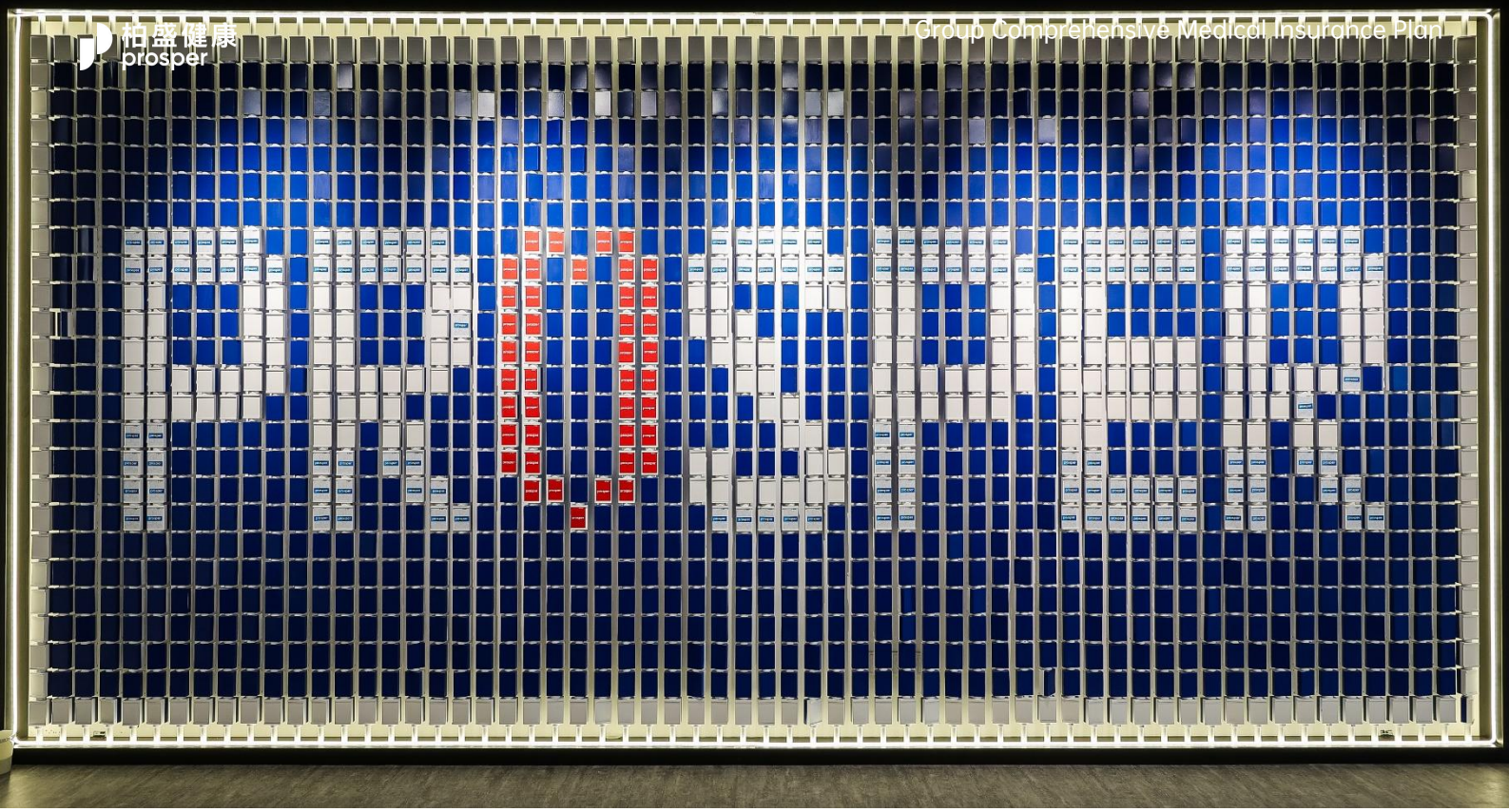




b. If the total claims amount exceeds RMB 10,000, you will need to mail in the required documents to the address below. The claim will be finalized only after Prosper receives the original documents.

- Address: Room 01-02A, 8th Floor, Golden Square, 268 Jiangning Road, Jing'an District, Shanghai
  地址：上海市静安区江宁路268号嘉禾中心8楼 01-1-02A 柏盛健康
- Prosper Health Recipient: Claims Department (need to be signed in person)
  收件人：理赔部（需当面签收）
- Phone: +86-153-1612-3026

*If the original fapiao is already an electronic fapiao or if you receive treatments outside Mainland China, you do not need to mail it to us. Please submit your claim application through our mini-program.



Claims Notification

- After receiving your application material, we will promptly review them and notify you of the claims decision via text message;
- For claims that are complete, clear and do not require additional investigation, we will issue the Explanation of Benefit (EOB) and arrange payment within the following working days.

RMB Account: 5-7 working days
Foreign Currency Account: 12-15 working days

Claims Appeal

If you do not agree to the claims results, please contact our dedicated customer service team at +86-400-8800-889, and we will assist you throughout the appeals process. Appeal should be submitted within 2 years after receiving the initial claims decision. Any fees incurred due to the investigation of medical records and/or other related expenses will be your responsibility. The Claims Appeal Review Committee will review your case upon receiving the request and respond to you as soon as possible.

Value-added Services

PART 4

1) Value-added services view and application

You can login to the Prosper Health mini-program to view and apply for value-added services covered by insurance. Alternatively, you can contact your Personal Care Manager, or dial +86-400-8800-889 to make a service request. We will help you handle the whole process.

2) Value-added Services

Please refer to the following pages for details about the value-add services.

Special Service

Establishment of Health Record

- Establish a comprehensive and exclusive personal health record for daily health management and chronic disease intervention.

Physical Examination Consultation and Report Interpretation

- Make a personalized physical examination plan, conduct professional analyses, follow-up, and give daily self-care recommendations based on the results of physical examination reports.

Medical Recommendation and Appointment Assistance

- Provide appropriate recommendation on hospitals and specialties based on member's needs and medical habits, and assist with making outpatient appointments.

Specialist Fastpass

- Assist in making appointment with designated specialists, and provide professional diagnosis and treatment plan.
- Eligibility: those in need of severe surgery or specialty drug treatment, and/or suffering from catastrophic diseases or suspected rare diseases.

Medical Fastpass

- Assist in arranging appointments with outpatient specialists (with the promise of deputy director level physician and above), and hospitalization.

Pharmacy Service

Service Overview

1 Chronic Illness Management

- Assisting with comprehensive health management
- Personal Care Manager provides real-time support, guidance and assistance for member's health conditions, offering professional advice, and providing regular health tips on a 1-on-1 basis
- Help establish a long-term, trusted relationship with a doctor who will be able to provide professional advice and follow-up care recommendations

2 Chronic Illness Medication Delivery Service

- Direct billing for Medication: Prosper Health can settle reimbursable medication costs directly with network pharmacies based on your insurance benefits, and deliver medications you need directly to your doorsteps.
- Conditions for Direct billing for Chronic Illness Medications:

  a. Chronic illness in stable condition, and have been consistent in medication use for over three months;

  b. No adjustments needed for medication usage and/or dosage;

  c. Medication is prescribed by a licensed physician in Mainland China under the two-track prescription system;

  d.Commonly deliverable chronic disease medications address symptoms such as hypertension, hyperlipidemia, asthma, cerebrovascular diseases, etc.

- *In accordance with national drug control regulations, the following medicines cannot be delivered through the Chronic Illness Delivery Service:
  Injections, toxic drugs for medical use, Class II psychotropic drugs, drugs permitted to be operated by drug retailers under doping control, drugs for the treatment of mental disorders (antipsychotic, anxiolytic, antimanic, injections, toxic drugs for medical use, Class II psychotropic drugs, antidepressants), antiviral drugs (reverse transcriptase inhibitors and protease inhibitors), oncological drugs, compound oral solutions containing narcotic drugs and Tramadol, drugs not listed in the non-prescription list- including but not limited to antibacterial drugs and hormones, anabolic agents, peptide hormones, etc., are all drugs that must be sold on prescription.
  The "single-track" prescription drugs and cold-chain drugs are not included in the OTC drug catalogue.

- *Note: Prosper Health reserves the right to the final interpretation of this service.

Service Process

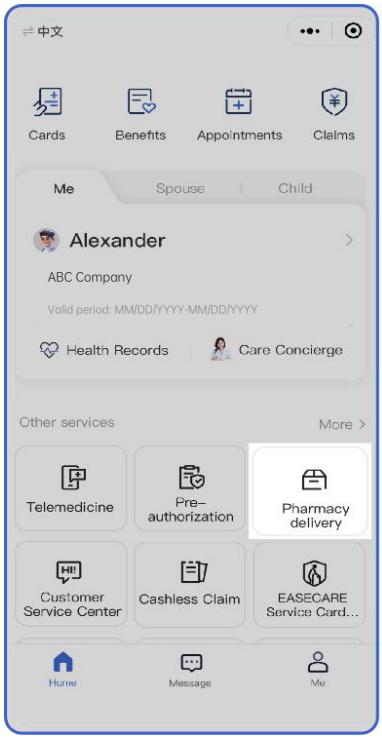
How to Apply

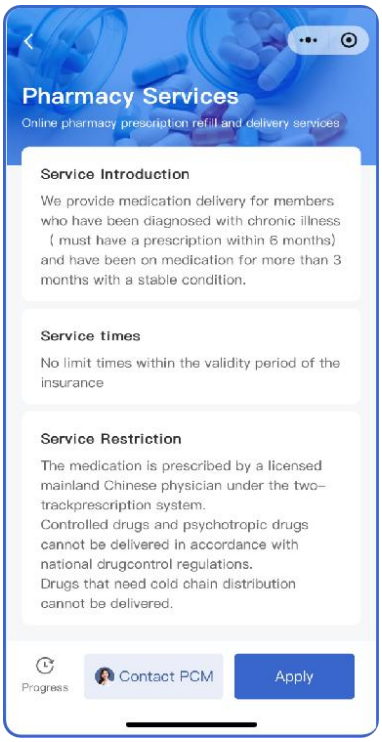
Step 1

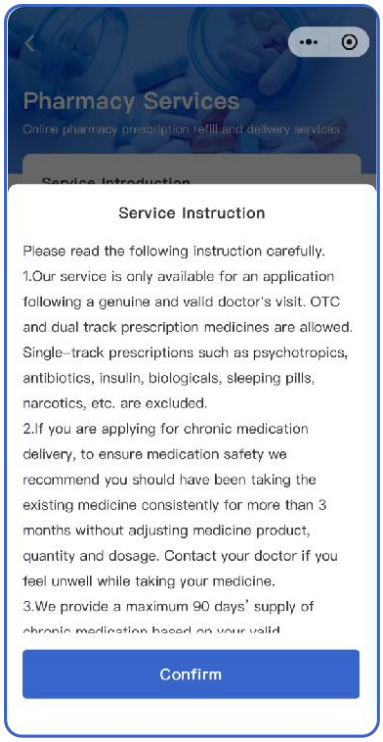
Log on to your Account and click "Pharmacy delivery"

Select "Apply"

Click "Confirm"





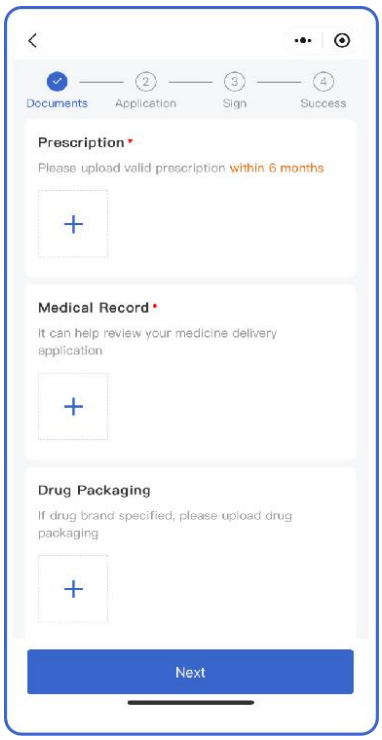


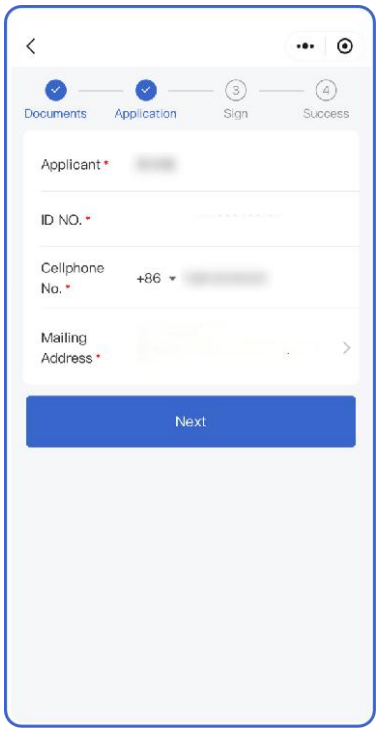
Step 2

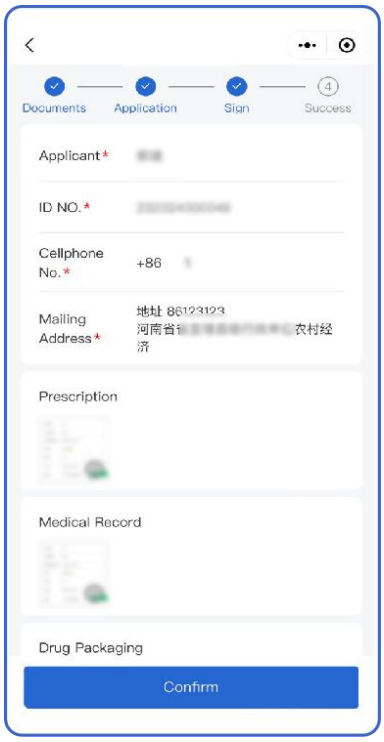
Upload the following:
Medical records within the past six months (mandatory)
Prescription (mandatory)
Medication packaging (optional)

Fill in personal information, Click "Next"

After confirming all the information is correct Click "Confirm"



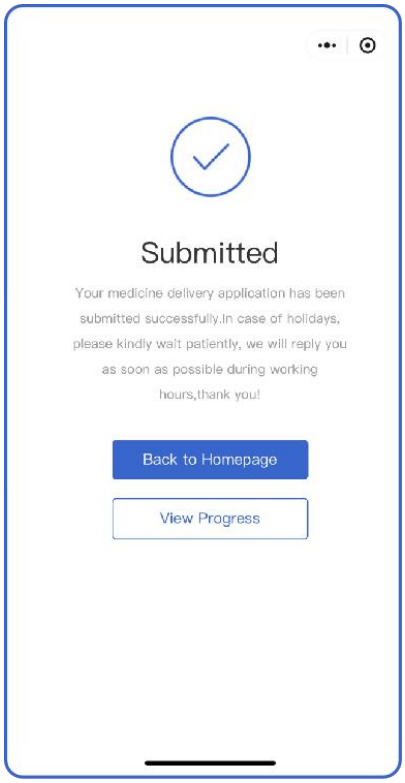




Step 3

Sign your name in the signature box
Click Save when you're done

Chronic medicine delivery service submitted successfully; wait for review



Deliver medicine

Upon confirmation, we will deliver medicine to your door

Upon approval, the personal care manager will arrange for the medications to be delivered to your specified address based on the provided documents.

The service processing time is T+1 working day (excluding public holidays).

Notes

- This service is only available in Mainland China;
- A maximum of 90 days' supply can be delivered per order. Usage and dosage must align with the medical records and prescription. Prosper Health does not recommend any medication; please be sure to follow your doctor's prescription and advice;
- To protect your legal rights, you must sign an authorization form each time you use the chronic disease medication delivery service.

Service Instructions

1 Required Materials:

- Valid medical records (including prescriptions) within six months, detailing medication usage and dosage;
- Photos of medication packaging;
- Contact details, such as phone number and delivery address.

2 Eligibility:

- Must be insured member under Prosper Health Group High-end Medical Insurance Policy;
- The medications must have a valid doctor's prescription issued within the past six months, with relevant medical records provided;
- You are currently using the medication for chronic illness management, with no need to adjust the medication or dosage;
- Final reimbursement scope will be determined based on the clause of your insurance contract.

3 Fees

Any non-reimbursable costs (e.g., deductibles, co-payments, etc.), or discrepancies between medical prescription and required medications. Consult your Personal Care Manager for details. Prosper Health reserves the final interpretation rights.

Employee Assistance Program (EAP)

- We provide you with instant psychological counseling and online appointments with professional counselors. Counseling topics may include marriage and family, child education, interpersonal relationships, workplace stress, career development, etc., to promote problem solving, stress relief, and short-term and effective improvement of your work motivation and life happiness.

How to make an appointment for EAP services?

- Log in to the mini program and make an EAP service appointment with one click.
- Or call the 24/7 bilingual hotline at +86 400-619-1990 to make an appointment.

Please inform the service staff that you are a client of Prosper Health and provide your insurance card number (starting with 8000) as your exclusive identification code. Once identified, you can make an appointment for services.

Consultation Service Process:

【STEP1】	【STEP2】	【STEP3】	【STEP4】
Make an appointment for a consultation	Confirm the consultant	Start the consultation	Service feedback

Note:

① The counseling service is available from 9:00 to 22:00, except during the Lunar New Year and National Day holidays;

② Both Chinese and English counseling services are available;

③ All counselors have more than 5 years of counseling experience and have completed at least 500 hours of counseling training.

Medical Treatment Assistance

Medical Assistance and Accompaniment

- Medical assistance available with professional personnels, covering more than 200 cities nationwide. Assist in the whole process of the hospital visit on the day of treatment, and provide assistance with registration, queuing, examinations procedure, and picking up prescriptions from the pharmacy.

Global Advanced Clinical Research Assistance

- Based on member's needs, access new drugs as soon as possible, contact clinical research team at pharmaceutical companies and hospitals, and provide new drug trial enrollment assistance services for upcoming major diseases or rare diseases.

Direct Billing Service for Specialty Drugs

- Direct billing service available for special oncology drugs at professional pharmacies, covering 208 cities nationwide; providing a one-stop solution to specialty drugs.

Multi-Disciplinary Treatment

- Arrange joint consultation with experts from multiple disciplines , and provide comprehensive, individualized treatment plan; effectively solving the patient's demand for "precision treatment".
- Eligibility: those in need of severe surgery or special drug treatment, or suffering from catastrophic diseases or suspected rare diseases.

Cancer and Rare Disease Genetic Screening Services

- Provide genetic screening services at qualified, top domestic laboratories, design and help select test package based on individual conditions, sample type and report interpretation for cancer and rare diseases.
- Eligibility: those suffering from malignant tumors and/or rare diseases.

Global Second Medical Opinion

- Arrange authoritative experts around the world to give advice on diagnosis, treatment, discharge plan and others based on your specific condition.
- Eligibility: those in need of severe surgery or specialty drug treatment, or suffering from catastrophic diseases or suspected rare diseases.

Post-Treatment Service

At-Home Nursing Services

- Nursing workers with many years of clinical experience will come to your home and provide member with more than 30 comprehensive home care services, such as dressing change, suture removal, medication management, pipe management, etc.

Post-Treatment Nutrition Program

- Registered dietitians provide designated guidance on reasonable eating habits, targeting to improve overall quality of life and help accelerate the recovery from diseases.

Digital Rehabilitation

- Rehabilitation physicians or physical therapists with many years of clinical experience assess the needs of patients and customize personalized digital rehabilitation programs, so that members can experience and complete rehabilitation services at home.

Follow-up Care After Treatment

- Extending medical services outside the scope of the hospital, and develop different follow-up care programs based on member's conditions, so as to ensure that member can get scientific, professional and convenient guidance outside the hospital.

Important Statement

PART 5

Statement

① In order to provide you with high-quality insurance services, Prosper Health needs to collect some of your personal information. Prosper Health will respect and protect your privacy information in accordance with the laws and regulations of the People's Republic of China.

② Prosper Health will only collect and use your personal information within the necessary scope to provide appropriate insurance services to you. In the process of providing insurance services, Prosper Health may disclose your information to insurance companies, reinsurance companies, medical networks, and assistance companies. Prosper Health will strictly keep your information confidential and will not disclose your information to any third party (except insurance companies, reinsurance companies, medical networks, and assistance companies) without your prior consent.

③ Prosper Health will save and destroy your information in accordance with the law.

④ Unless otherwise specified, your provision of personal information to Prosper Health will be deemed as your acceptance of the above privacy statement.

Make Insurance Simple and Human

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