



Member Guide

# Individuals & Families

Download our Easy Claim mobile app  
for quicker claims reimbursement!



 [april-international.com](https://april-international.com)

 **april**  
International  
INSURANCE MADE EASY



## WELCOME TO APRIL INTERNATIONAL!

Thank you for choosing us to protect you and your loved ones. Throughout the duration of your plan, wherever you are, we'll be there for you to make sure you can make the best of your international health insurance.

This guide contains all the practical and useful information you will need for a full understanding of your plan and its services. **Please read your Benefits Schedule and Terms and Conditions carefully.**

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# 1. How to use your plan?



## A > BENEFITS

« What benefits does my plan provide? »

### YOUR COVER



Hospital & Surgery



Outpatient



Maternity



Dental & Optical

**CORE**  
(Outpatient only)

**ESSENTIAL**

**EXTENSIVE**

**ELITE**

20% of actual costs or NIL

Nil

฿ 16,375

฿ 32,750

฿ 81,875

฿ 163,750

฿ 327,500

฿ 8,200 per visit\*

\*For children aged 0-10 under Hospital & Surgery  
Essential and Extensive

SEVERAL

TO CHOOSE FROM

4

LEVELS OF COVER

1

CO-INSURANCE  
OPTION

7

LEVELS OF  
DEDUCTIBLES

Your insurance plan is composed of different modules that you carefully selected when you applied for your policy. To find out more about what your specific policy covers and what your benefit limits are, please refer to your **Benefits Schedule** and **Terms and Conditions** which is available on your [Member Portal](#).

**MEDICAL AND EMERGENCY ASSISTANCE**  
Included in all plans

## B > YOUR DEDICATED CONTACTS

### ● CUSTOMER SERVICE



#### APRIL ASSISTANCE (THAILAND) CO LTD.

518/3 Maneeya Center North, 10th Floor  
Ploenchit Road, Lumpini, Patumwan  
Bangkok 10330



#### +66 2022 9170

9 am to 6 pm (UTC+7)



#### GENERAL ENQUIRIES

contact.th@april.com

#### CLAIMS SUBMISSION

Available on Easy Claim

#### TREATMENT PRE-APPROVAL REQUESTS

provider.asia@april.com

### ● MEDICAL ASSISTANCE & EMERGENCY CASES 24/7 PLATFORMS



#### BANGKOK +66 2022 9190

In case of medical emergency, please contact our Asia assistance platform based in Bangkok. **We accept collect calls.**







Please always state your **policy number and member number** in all your communications with APRIL.



## C > MEMBER PACK

Your Member Pack (sent by email) contains the following documents and information:

-  **Policy Documents**
-  **Terms and Conditions**
-  **Benefits Schedule**
-  **Payment Receipt**

Please make sure that you download your electronic member card on the Easy Claim app as soon as your policy starts. Your eCard displays your **emergency contacts** and will allow you to **enjoy cashless access to the medical facilities** within our network.

## D > MEMBER PORTAL

Your Member Portal is available at <https://members.april-international.com>

POLICY DOCUMENTS	INFORMATION & FORMS
Terms & Conditions	Medical Claim Form
	Advance Request Form
Benefits Schedule	Direct Billing List
	Emergency Assistance Program
Certificate of Insurance	Digital Services Guide



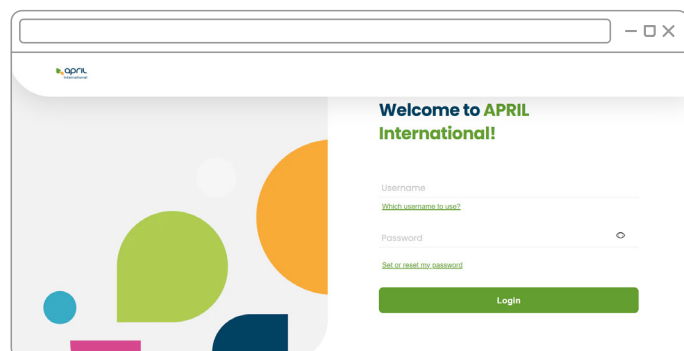
- Access your policy documents
- Check your reimbursement history and explanations of benefits



« How do I activate my account on the Member Portal? »

- 1 Check your emails: you have received an email inviting you to confirm your registration (from the address [noreply@april.com](mailto:noreply@april.com)). This email has been sent to the email address you indicated in your policy application.
- 2 Click on the button "Confirm" and enter the password of your choice.

**That's all! You are now registered.**



« What if I can't find my activation email? »

You can search your inbox for an email from [noreply@april.com](mailto:noreply@april.com). Don't forget to check your junk/spam folder.

If you are unable to find it, please contact us at [contact.th@april.com](mailto:contact.th@april.com) and we will send you a new one.

Please indicate your policy number and member number in the subject of the email.



« What if I don't remember my password? »

Please click on **"Set or reset my password"** below the password field, then enter your email address. A password reset link will be sent to you.



« What about my dependants? »

In addition to your personal information, you will be able to access your dependants' documents and claims history with the same login and password. There is only one common login access per family.

## E > THE EASY CLAIM APP AND ITS FUNCTIONS

### To access the Easy Claim App

- 1 Activate your account on our [Member Portal](#) (you have received an activation email from [noreply@april.com](mailto:noreply@april.com))
- 2 Download the APRIL Easy Claim app on your smartphone
- 3 Launch the app and login with your email address and the password you created on the Member Portal
- 4 You will now have access to all the functions on the app!

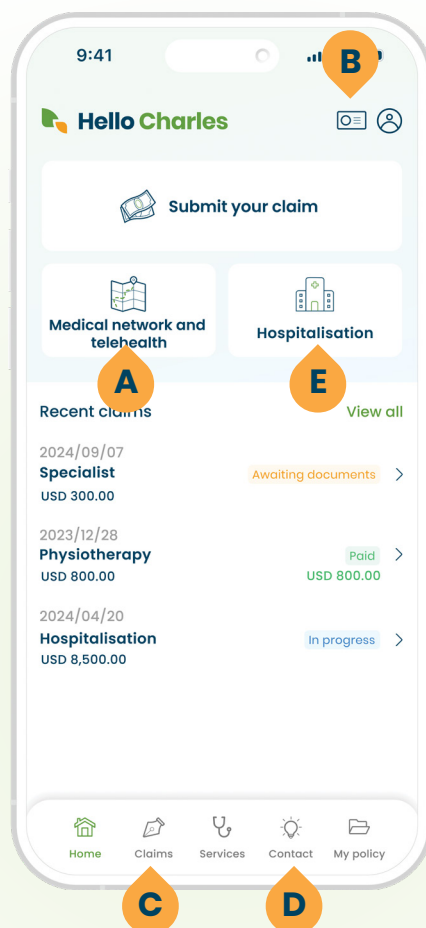


### A. Locate healthcare providers

Use Easy Claim's GPS function to find medical providers by location, name or specialty and check your eligibility for direct billing at the facilities.

### C. Submit and track medical claims

Submit medical invoices and receipts from anywhere in the world. Review your submitted claims in the **Claims** section, whether they're being processed or settled. If a claim is missing information, you can update it directly on the app.



### B. Download electronic member card

If eligible for direct billing, download your electronic member card on your smartphone for cashless access to numerous medical facilities. View your Benefits Schedule to understand your policy coverage.

### D. Access April contacts

Any questions about your policy?  
Having an emergency?  
You will be able to find all your APRIL contacts in the **Contact** section.

### E. Submit hospitalisation requests

For planned hospitalisations and surgeries, you must first obtain pre-authorisation from APRIL. You can submit your request for treatment directly on the app.





## TeleHEALTH SERVICES

TeleHEALTH services are included in all policies and available on Easy Claim.

### IN PARTNERSHIP WITH



- › Global leader in virtual care
- › 43 million members worldwide
- › Covering more than 175 countries
- › 90% members satisfaction

## 01. TELECONSULTATION

If you are feeling ill or have any general health questions, you can get in touch with a licensed medical practitioner anytime, anywhere. Choose between a phone or video consultation, tailored to your preference.



### Save time

You no longer need to travel and wait in a doctor's office, take time off from work or pull your kids out of school. This service is available 24/7 and you may use it after clinic hours, during public holiday or while traveling abroad.



### Save money

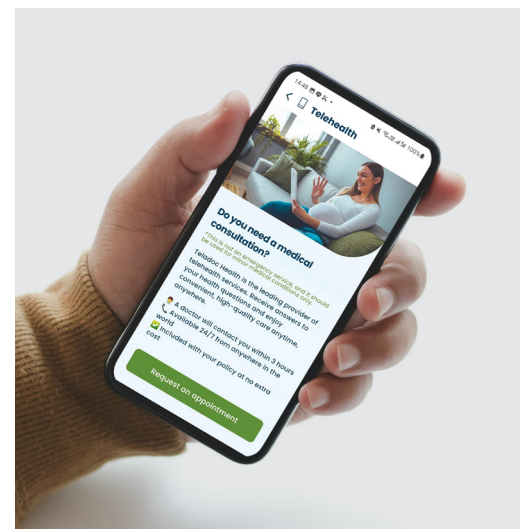
TeleHEALTH is included in all policies, even you have a Hospitalisation & Surgery only plan. You can also enjoy free teleconsultations outside your area of cover. Last but not least, simply save on your gas, parking or transportation expenses.



### More convenience

The number of consultations is unlimited and at no extra cost to our members. This service is available in English, French, German, Spanish, Mandarin, Cantonese, Thai, Vietnamese and Indonesian.

This is not an emergency service. In case of emergency, please contact our 24/7 assistance platform.

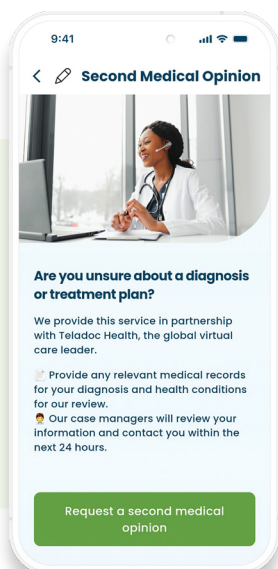


## 02. SECOND MEDICAL OPINION

For more serious conditions, you can receive a free Second Medical Opinion from the best medical experts in your pathology. Through our partnership with Teladoc Health, you have access to a network of 50,000 experts to answer all your questions.

### Not understanding your diagnosis? Thought of more questions since leaving your appointment or confused about the next steps for treatment?

Use our Second Medical Opinion service to receive an external and unbiased medical opinion, explore alternative treatments or simply understand your condition better.



### How does it work?



01. Send your request on Easy Claim
02. A dedicated doctor will call you within 24 hours and collect your medical record
03. Your case will be studied by the most experienced expert(s) in your pathology
04. A medical report will be sent to you within 10 days and your dedicated doctor will remain at your disposal to answer your questions

# 2. Your Medical Networks

In your MyHEALTH plan, you have access to 2 types of networks:

**A STANDARD AND PREMIUM NETWORK**  
This is where you're eligible for full coverage

When purchasing your plan, you have chosen to be covered under our **Standard** or **Premium** network. This network applies to all medical expenses, including Hospital and Surgery, Outpatient, Dental and Optical, and Maternity.

If you selected our **Standard** network, you are covered in any medical facilities **excluding** the ones below. If you visit any of the facilities below, your medical expenses will be subject to 40% co-insurance.

If you selected our **Premium** network, you are covered in any medical facility, **including** the ones below.



**B OUTPATIENT DIRECT BILLING NETWORKS**  
This is where you're eligible for direct billing services

APRIL offers a comprehensive network of hospitals, clinics, and healthcare providers where members can access direct billing services across Asia. This allows for cashless access for outpatient services.

We offer access to the below direct billing networks:

- General Network**
  - Over 4,800 facilities across Asia, including countries such as Thailand, Vietnam, Cambodia, and more.
  - Direct billing is available even when traveling to other countries in this network.
- Panel Network**
  - A selection of high-quality clinics within the General Network.
  - Available in **Thailand, Vietnam, Hong Kong, and Singapore.**

THAILAND	Bumrungrad International Hospital
	BNH Hospital
	Bangkok International Hospital
	MedPark Hospital
	Bangkok Hospital Pattaya
	Bangkok Hospital Chiang Mai
	Wattanaapat Hospital Samui
	Vejthani Hospital (Bangkok)
HONG KONG	Matilda International Hospital
	Hong Kong Sanatorium & Hospital
	Hong Kong Adventist Hospital
SINGAPORE	Gleneagles Hospital Singapore
	Mount Elizabeth Hospital (Orchard)
	Mount Elizabeth Novena Hospital
CHINA	United Family
	Sino United
	Parkway

### How to Identify Your Network

Your insurance card (available on Easy Claim) will show your network eligibility:

- DB:** You have access to the General Network.
- PNW:** You have access to the Panel Network.
- NO DB:** You are not eligible for direct billing services.

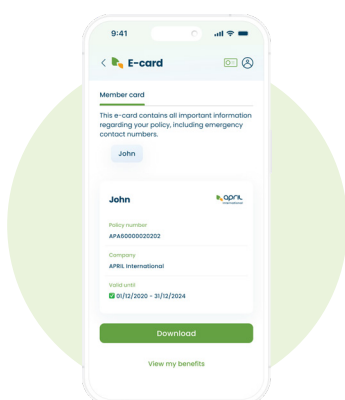
Outpatient Direct Billing is not available to members who have moratorium policies and will have to pay and file a claim for reimbursement.



# 3. How to claim your outpatient expenses?

## A > USE YOUR DIRECT BILLING NETWORK

By using direct billing, you won't have to pay anything out of your own pocket. Simply visit the provider of your choice within your network and show your member card at the counter.



SEE YOUR HEALTHCARE PROVIDER

SHOW YOUR APRIL MEMBER CARD

ENJOY DIRECT BILLING SERVICES

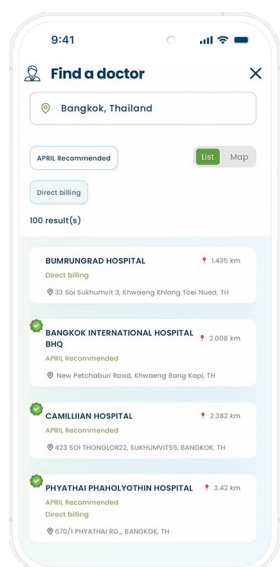
\*Subject to Terms and Conditions and Direct Billing guidelines



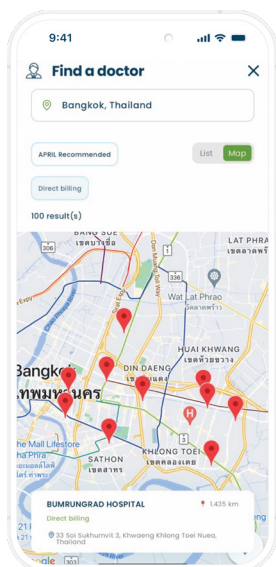
« Where can I find the APRIL direct billing list? »

Open the Easy Claim app and choose Find a doctor in the **Medical network and telehealth** section. Display your medical providers by name or speciality and select **Results with direct billing only** for cashless payment facilities.

The full list is also available on the APRIL International website, updated monthly with new providers. Always ensure you have the latest version!



OR



« Are there some expenses or treatments that are not eligible for Direct Billing? »

- ✗ Any items that haven't been prescribed by your attending physician
- ✗ Any items that are not covered by your policy
- ✗ Routine medical examinations or check-ups and vaccinations
- ✗ Physiotherapy (unless pre-approval is granted) and complementary medicine
- ✗ Dental treatments and optical benefits
- ✗ Treatments for pre-existing conditions
- ✗ Treatments for general exclusions

**Note: For treatments above USD250, your provider will request pre-authorisation from us**

If you are planning to receive any complex procedures such as outpatient surgery, scans, MRIs, laboratory tests, etc, please contact us at least 5 working days in advance of your visit to enable us to undertake the necessary verification and approval process (so that we can provide the treating facility with the necessary verification and approval) before your visit.

## B > SUBMIT YOUR CLAIMS FOR REIMBURSEMENT

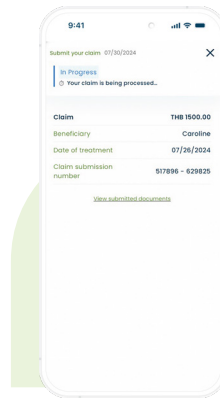
For medical bills **UP TO THB 10,000**  
(or equivalent in the local currency)



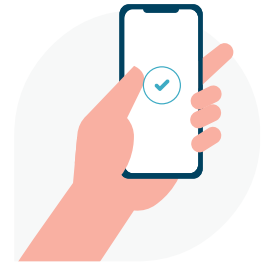
**SEE YOUR HEALTHCARE PRACTITIONER**



**PAY FOR YOUR MEDICAL EXPENSES**



**SEND YOUR INVOICES VIA THE APP OR THE MEMBER PORTAL**



**GET REIMBURSED WITHIN A FEW DAYS!**

Once your claim is submitted, you can track its status on Easy Claim and/or on your Member Portal. Once treated, you will receive a claim settlement email including your Explanation Of Benefits (EOB). For all electronic claims, please keep all your original documents for a period of 1 year.

For medical bills **ABOVE THB 10,000**  
(or equivalent in the local currency)

If your medical expenses exceed THB 10,000, please send your original documents to

**APRIL Assistance (Thailand) Co Ltd.**  
**518/3 Maneeya Center North, 10th Floor Pleonchit Road, Lumpini, Pathumwan Bangkok 10330, Thailand**

## C > LIST OF DOCUMENTS REQUIRED

« Which documents and information are required for claims? »

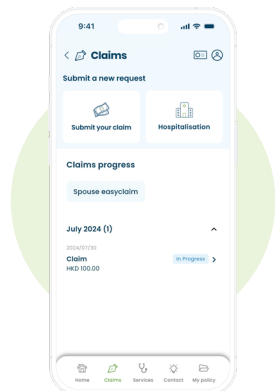
- › Diagnosis and/or symptoms requiring treatment must appear on your documents
- › Detailed invoices (including breakdown of medicine if any) and payment receipts
- › For treatment related to physiotherapy or any investigation (MRI, CT scans, blood tests, X-rays...), **a Claim Form will be required**

Please submit your claims within 90 days of treatment. We reserve the right to request a Claim Form at anytime.

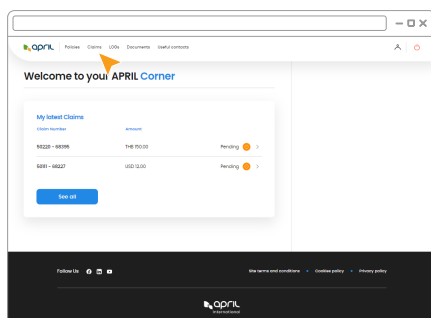
## D > REIMBURSEMENT PROCESS

### « How to check the status of your claims? »

Once you have submitted your claim, you will be able to follow its status:



On Easy Claim:  
Track your claims from the **Claims** page



On your Member Portal:  
click on **Claims**

Once your claim has been settled, you will be able to download your EOB (Explanation of Benefits) directly on the app or on your portal. You will also receive an email notification informing you that your claim has been settled.

Please make sure you include all the documents mentioned above, otherwise your claim may be pending for reimbursement.

## E > REIMBURSEMENT PROCESS

### « How are my claims reimbursed? »

- › If you have included your bank details on your Application Form, you will be reimbursed by bank transfer to that account.
- › If you have not submitted your bank account information, log into your Member Portal and enter it under the **Policies** tab.

For international transfers to a foreign bank, note that your bank may charge you fees for each transaction which will be your responsibility to bear.



## 4. What to do in case of hospitalisation or medical emergency

A

### NON-EMERGENCY HOSPITALISATION OR TREATMENT

#### Submit your request on Easy Claim.

Click on the **Hospitalisation** button, fill in the required fields and attach the relevant documents.



For any planned hospitalisation or treatment, you must request pre-approval from APRIL **5 to 15 working days** in advance according to your plan:

OR

● **Fill in the Advance Request Form** with the help of your attending physician (downloadable on your Member Portal) including the name of the medical facility, planned admission date and full breakdown of estimated cost and send it to [provider.asia@april.com](mailto:provider.asia@april.com)



#### APRIL will assess your request.

If some information is missing, we will contact you or your attending physician or hospital to finalise your request, so make sure that the phone number you indicated is correct.



When your request for hospitalisation or planned treatment is approved, we will provide you with the supporting documents (written approval or Letter of Guarantee).

With APRIL, you are not obliged to consult a particular doctor or go to a particular hospital. You are free to choose your own doctor or the hospital where you want to be treated.

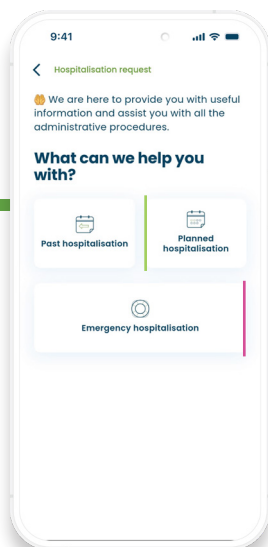
However, if you have a serious health problem, our experts will always look at each individual case. The local experience of our medical teams means we are able to make the best possible assessment of the treatment plans and rates offered by healthcare providers to ensure the treatments being proposed are appropriate and medically required and that they are in line with the usual and customary rates in the region.

B

### EMERGENCY HOSPITALISATION

If you need to be hospitalised urgently, please contact **APRIL Assistance (+66 2022 9190)** for immediate help. Whenever possible, please state your policy number and member number. You can also provide your member card to the hospital who will arrange to call us.

● **Your emergency numbers can be found on your Easy Claim app and on the back of your member card**



When your request for pre-authorisation or Letter of Guarantee is approved, we will provide you with the supporting documents (written approval or Letter of Guarantee).

If you are not capable of calling us before your hospitalisation, please make sure that you contact APRIL within the 24 hours following your admission to hospital or as soon as reasonably possible.



**Requesting a pre-approval is compulsory. If you don't request a pre-approval, we may apply a 20% CO-INSURANCE on your medical expenses. Please refer to page 13 for the full list of treatments requiring pre-approval.**



## C > YOUR MEDICAL ASSISTANCE SERVICES



In the event of an emergency, you may call our dedicated assistance hotline **24 hours a day, 365 days a year**. Medical assistance services are included in all plans regardless your level of coverage. Please refer to your **Emergency Assistance Program** available on your [Member Portal](#) for more detailed information.

Wherever you are in the world, our team will assist in transferring you to the most appropriate medical facility to receive the treatment you need and/or transport you back home after receiving your medical treatment.



**APRIL Assistance**  
**(+66) 2022 9190**

Depending on your situation, we will:

- **Transfer you to the most appropriate hospital, or**
  - **The hospital nearest to your home in your country of cover, or**
  - **Your home residence in your country of cover.**
-

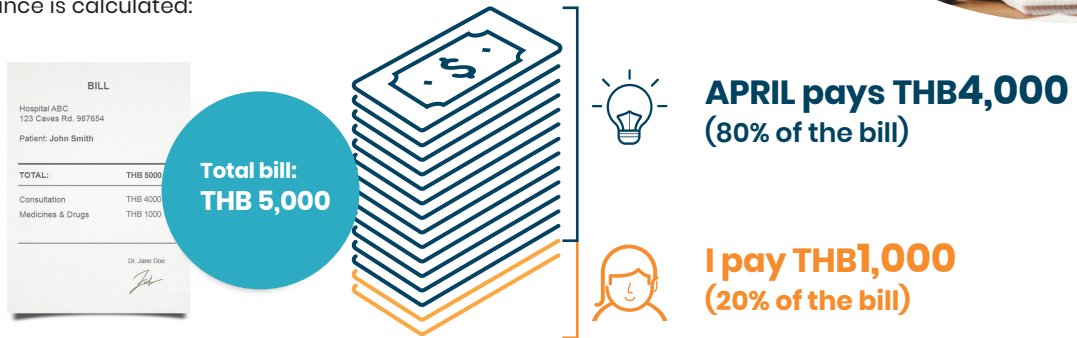
## 5. About your policy



### A > I HAVE CO-INSURANCE

« How does it work? »

On our outpatient plans, **we offer a 20% co-insurance**.  
Here's how the co-insurance is calculated:



### ■ When is co-insurance applied?

- If you visit a practitioner **outside our Panel Network** (see page 8), we will apply a 20% co-insurance on your Outpatient expenses.
- If you visit a practitioner within our Panel Network, you must present your APRIL card at the reception to benefit from cashless direct billing. In that case, we will waive the co-insurance completely.

Co-insurance will **only be applied to your outpatient expenses**. For any inpatient, maternity, dental, optical, health checkups and vaccination expenses, you will be fully covered by your plan (if you have chosen the mentioned modules).



### B > I HAVE A DEDUCTIBLE

« How does it work? »

A deductible is the amount you must pay out of pocket before your insurance plan begins covering medical expenses.

Example: If your deductible is \$16,375, you will need to pay this amount first before we start covering your medical expenses. Deductibles are applied per person, per year and only apply to the Hospital and Surgery plan.

For children aged 0-10 years, a \$8,200 deductible per visit applies to each medical visit. This is also only applicable to the Hospital and Surgery plan.

## C > WAITING PERIODS

From the effective start date of your policy, some waiting periods are applied before we start covering your expenses. Here is the list:

- **366 days for Newborn Additions**
- **300 days for Major Dental Treatment**
- **366 days for Maternity Benefits**
- **3 years for HIV/AIDS**

Any expenses related to the treatments or procedures mentioned above which are incurred before the waiting period is over are excluded from cover and will not be reimbursed.

If you have chosen CPME underwriting, you won't have to go through additional waiting period if it has already been completed with your previous insurer.





## D > GENERAL EXCLUSIONS

« WHAT IS NOT COVERED BY MY POLICY? »

There are certain items that your policy will not cover, which are referred to as exclusions. **Please read your Terms and Conditions carefully for the full list of general exclusions.** Here are the most common exclusions:

- ✗ Services which are not medically necessary
- ✗ Treatment which is covered by other insurance
- ✗ Cosmetic surgery and reconstructive surgery
- ✗ Sleep disorders or behavioural or developmental disorders
- ✗ Weight disorders
- ✗ Vitamins and health supplements
- ✗ Teeth whitening
- ✗ Treatment related to assisted conception, contraception, sterilisation, fertility or infertility
- ✗ All treatments related to sexually transmitted diseases
- ✗ Congenital diseases
- ✗ House calls, delivery of medicine or other items



## E > TREATMENTS REQUIRING PRE-AUTHORISATION

« In which cases do I need to request pre-authorisation from APRIL? »

Some major treatments and procedures require the pre-authorisation of our medical team:

- Hospital benefits
- Cancer treatment
- Surgery performed while a day-patient in a clinic or in a physician's office
- Stem cell treatment
- Rehabilitation treatment



**Requesting a pre-approval is compulsory.**  
If you don't request a pre-approval, we may apply a **20% CO-INSURANCE** on your medical expenses.

You must receive APRIL's prior approval for your treatment. Please submit your treatment request on Easy Claim or fill in our [Advance Request Form](#) (available on your Member Portal) and return it to us at [provider.asia@april.com](mailto:provider.asia@april.com).

Please refer to your Benefits Schedule for the full list of treatments requiring pre-approval.



## F > TREATMENTS REQUIRING A REFERRAL LETTER

« In which cases do I need a referral letter from my attending physician? »

If you wish to visit one of the specialists listed below, you must first visit your attending physician or general practitioner who will write you a referral letter for the specific treatment. To be fully covered, you must submit a referral letter from your attending physician along with your claim.

- Physiotherapy



## 6. Premium payment and policy update

### A > HOW CAN I PAY MY PREMIUMS?

For individual policies, your premiums will be paid annually. Whether you chose to pay your premiums by cheque, bank transfer or credit card, you will receive a premium notice at each due date with details of the amount to be paid.

Your premium amount may change on the anniversary date of your plan depending on the benefits and the options you selected.

This is because healthcare costs rising every year in Thailand, we might also adjust your premiums to keep pace with medical inflation. This is in addition to any age related increase(s) which may apply to your policy.

### B > HOW CAN I MAKE CHANGES TO MY PLAN?

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

#### ■ At renewal:

- › Adjust the level of your cover to suit your needs  
(if you choose to upgrade your benefits, you may have to go through our underwriting process)

#### ■ Anytime throughout your policy year:

- › Update your bank details  
You can easily add or delete a bank account on your [Member Portal](#), under the **Policy** tab.
- › Add a dependant (newly married or newborn)
- › Change your last name following a marriage or a divorce

To make any of these changes to your plan, please contact your insurance broker or a member of our team at [contact.th@april.com](mailto:contact.th@april.com). We will send you the appropriate forms to fill in and walk you through the process step by step.



### C > WHAT IF I DECIDE TO MOVE TO ANOTHER COUNTRY?

You will be able to enjoy the same level of cover in your new country of residence until the end of your policy year. If your area of cover is Worldwide excluding USA or Europe and ASEAN Excluding Singapore, your medical expenses will be capped at ฿ 1,637,500 outside your area of cover (applicable only for services rendered due to sudden illness or injury occurring within the first 30 days of any trip outside the area of cover).

If you plan to move to a new country, **please inform us as soon as possible** so we can review your request.

You will be able to enjoy the same level of cover in your new country of residence until the end of your policy year. However, if your area of cover is **Worldwide excluding USA** or **Europe and ASEAN excluding Singapore**, your medical expenses outside your area of cover will be capped at **฿1,637,500**. This cap applies only to services rendered due to sudden illness or injury occurring within the first 30 days of any trip outside the area of cover.

After the end of your policy year, we will review your request and, if approved, offer to renew your plan with a premium adjusted to your new country of residence. Please note that we do not offer renewals for the **USA** or for countries classified as **warring/high-risk**.

For more information, contact your insurance consultant :

Arranged and administered by:

**APRIL Assistance (Thailand) Co Ltd.**  
518/3 Maneeya Center North  
10th Floor Pleonchit Road, Lumpini, Pathumwan  
Bangkok 10330, Thailand  
Tel: +66 2022 9170  
Email: [contact.th@april.com](mailto:contact.th@april.com)

TH PG 2025/06