

CUSTOMISE YOUR HEALTH INSURANCE PACKAGE ACCORDING TO YOUR NEEDS

Enjoy comprehensive protection while living abroad. With ACS Expat, you have the **freedom to select from four levels of hospitalisation coverage**, ensuring your protection throughout extended hospital stays exceeding 24 hours. Regardless of the level chosen, **you will always benefit from international medical evacuation and repatriation**.

Complete your coverage by adding optional benefits such as day-to-day medical expenses, prevention and screening, dental and optical care, maternity care, and premium assistance cover.



BRONZE	SILVER	GOLD	PLATINUM
Hospitalisation & International Evacuation/Repatriation			
Up to EUR/USD 500 000	Up to EUR/USD 1 000 000	Up to EUR/USD 2 000 000	Up to EUR/USD 3 000 000
Not available	Routine Medical Care, Prevention, and Screening (optional)		
	 Level 1	 Level 1	 Level 1
	Not available	  Level 2	  Level 2
		Not available	   Level 3
	Dental and Optical* (optional)		
	 Level 1	 Level 1	 Level 1
	Not available	  Level 2	  Level 2
	Maternity* (optional)		
	 Level 1	 Level 1	 Level 1
	Not available	  Level 2	  Level 2
Assistance Plus (available with all insurance plans)			
 Premium assistance services	 Premium assistance services	 Premium assistance services	 Premium assistance services

*Please note that the Dental-Optical and Maternity coverage options can be subscribed to only as additional coverage to the Day-to-Day Medical Expenses, Prevention and Screening insurance package.

TABLE OF BENEFITS

Hospitalisation & Evacuation/Repatriation module



Cover	BRONZE	SILVER	GOLD	PLATINUM
Maximum limit per beneficiary per year of coverage	€/€ 500 000	€/€ 1 000 000	€/€ 2 000 000	€/€ 3 000 000
Medical, surgical hospitalisation and outpatient day surgery	100 % of actual cost			
Expenses related to hospitalisation (medical and paramedical expenses incurred during hospitalisation)	100 % of actual cost			
Private room	100 % of actual cost, limited to €/€ 100 per day	100 % of actual cost, limited to €/€ 150 per day	100 % of actual cost, limited to €/€ 250 per day	100 % of actual cost
Organ transplant (excluding organ acquisition costs and transplant-related medicines)	100 % of actual cost			
Cancer treatment (including outpatient care and treatment)	100 % of actual cost			
Psychiatric hospitalisation (Waiting period: 3 months)	Not covered	100 % of actual cost, limited to €/€ 3 000 per year of coverage	100 % of actual cost, limited to €/€ 3 500 per year of coverage	100 % of actual cost, limited to €/€ 4 000 per year of coverage
Companion's bed (hospitalisation of a child under 16)	100 % of actual cost, limited to €/€ 50 per day	100 % of actual cost, limited to €/€ 75 per day	100 % of actual cost, limited to €/€ 100 per day	100 % of actual cost, limited to €/€ 150 per day
Outpatient care related to a hospitalisation (within 90 days of hospital discharge)	100 % of actual cost			
Hospitalisation at home immediately following hospitalisation covered by the policy (including hospital transport costs to home) (on prescription and with prior agreement)	100 % of actual cost, limited to €/€ 2 000 per year of coverage	100 % of actual cost, limited to €/€ 2 000 per year of coverage	100 % of actual cost, limited to €/€ 3 000 per year of coverage	100 % of actual cost, limited to €/€ 4 000 per year of coverage
Rehabilitation immediately after hospitalisation (within 90 days of hospitalisation or if the threshold is reached)	100 % of actual cost, limited to €/€ 2 000, per year of coverage	100 % of actual cost, limited to €/€ 2 000, per year of coverage	100 % of actual cost, limited to €/€ 3 000, per year of coverage	100 % of actual cost, limited to €/€ 4 000, per year of coverage
Local emergency ambulance transport	100 % of actual cost			
Emergency reconstructive dental surgery following an accident	100 % of actual cost			
Emergency treatment of less than 24 hours in a hospital (not related to a hospitalisation) in the zone of cover, in the event of accident or unexpected illness	€/€ 250 per year of coverage			
Emergency hospitalisation outside the zone of cover (travel of less than seven weeks from departure from zone of cover)	100 % of actual cost			
Medical evacuation	100 % of actual cost			
Following a medical evacuation, return of the Member to the country of expatriation after consolidation	100 % of actual cost			







Hospitalisation: each hospitalisation request is subject to obtaining prior approval.

YOUR AVAILABLE OPTIONS

Routine Medical Care, Prevention, and Screening Option



Cover	 LEVEL 1 <i>As an option for the Silver, Gold, and Platinum plans</i>	  LEVEL 2 <i>As an option for the Gold and Platinum plans</i>	   LEVEL 3 <i>As an option for the Platinum plan</i>
General practitioner's and specialist's fees	100% of actual cost, limited to €/€ 65 per act and per consultation	100 % of actual cost, limited to €/€ 150 per act and per consultation	100 % of actual cost, limited to €/€ 300 per act and per consultation
Psychiatrists, psychologists and psychotherapists	Up to 5 visits/year , maximum €/€ 60 per visit	Up to 10 visits/year , maximum €/€ 200 per visit	Up to 20 visits/year , maximum €/€ 200 per visit
Tests, radiology, scans and MRI (prior agreement for MRI)	100 % of actual cost, limited to €/€ 2 000 per year of coverage	100 % of actual cost, limited to €/€ 4 000 per year of coverage	100 % of actual cost, limited to €/€ 8 000 per year of coverage
Prescribed medicines and vaccines	100 % of actual cost		
Prescribed medical aids	100 % of actual cost		
Physiotherapy (prior agreement)	100 % of actual cost, limited to €/€ 50 per session and €/€ 500 per year of coverage	100 % of actual cost, limited to €/€ 60 per session and €/€ 900 per year of coverage	100% of actual cost, limited to €/€ 80 per session and €/€ 1 200 per year of coverage
Chiropractor (prior agreement), osteopath (prior agreement), homeopath, acupuncturist (prior agreement), naturopath, chiroprapist	100 % of actual cost, limited to €/€ 50 per session and €/€ 500 per year of coverage	100 % of actual cost, limited to €/€ 60 per session and €/€ 900 per year of coverage	100% of actual cost, limited to €/€ 80 per session and €/€ 1 200 per year of coverage
Prescribed speech therapy and orthoptics (prior agreement)	100 % of actual cost, limited to €/€ 50 per session and €/€ 500 per year of coverage	100 % of actual cost, limited to €/€ 60 per session and €/€ 900 per year of coverage	100 % of actual cost, limited to €/€ 80 per session and €/€ 1 200 per year of coverage
Prescribed medical prostheses (prior agreement)	100 % of actual cost, limited to €/€ 1 200 per year of coverage	100 % of actual cost, limited to €/€ 2 500 per year of coverage	100 % of actual cost, limited to €/€ 4 000 per year of coverage
Health check-up (laboratory tests, blood tests, electrocardiogram, hearing test, chest x-ray, etc.)	Reimbursement limited to €/€ 300 every three years	Reimbursement limited to €/€ 500 every three years	Reimbursement limited to €/€ 1 000 every three years
Cancer screening tests (mammogram, PSA, colorectal, pap smears, etc.) - every 5 years from age 20 to 35 - every 3 years from age 35 to 45 - every 2 years from age 45 to 55 - every year beyond age 55	Reimbursement limited to €/€ 300	Reimbursement limited to €/€ 500	Reimbursement limited to €/€ 1 000
Self-medication package : over-the-counter medication, aids to stop smoking, COVID-19 self-tests	Not covered	Up to €/€ 75 per year of coverage	Up to €/€ 150 per year of coverage
Dietician (consultation)	Not covered	Not covered	3 sessions per year of coverage, up to €/€ 150 per consultation

Dental and Optical Option		
Cover	 <p>LEVEL 1 As an option for the Silver, Gold, and Platinum plans</p>	  <p>LEVEL 2 As an option for the Gold and Platinum plans</p>
Dental		
Maximum limit per beneficiary per year of coverage	€/ \$ 2 000	€/ \$ 4 000
Dental care (waiting period : 3 months)	100% of actual cost limited to €/ \$ 1 000 per year of coverage	100% of actual cost limited to €/ \$ 2 000 per year of coverage
Orthodontics (children under 16) (prior agreement) (waiting period : 9 months)	100 % of actual cost limited to €/ \$ 1 000 per year of coverage	100% of actual cost limited to €/ \$ 2 000 per year of coverage
Dental prostheses, including inlays, onlays, implants (prior agreement, waiting period: 6 months)	100 % of actual cost limited to €/ \$ 300 per tooth and €/ \$ 1 000 per year of coverage	100 % of actual cost limited to €/ \$ 500 per tooth and €/ \$ 2 000 per year of coverage
Optics		
Prescription lenses, frames and contact lenses (waiting period : 6 months/one pair of glasses every 2 years) Cost of surgical and laser treatment for vision correction (once during the life of the policy) (waiting period: 6 months) (prior agreement)	100 % of actual cost limited to €/ \$ 400 per year of coverage	100 % of actual cost limited to €/ \$ 800 per year of coverage
Maternity Option 12-month waiting period		
Cover	 <p>LEVEL 1 As an option for the Silver, Gold, and Platinum plans</p>	  <p>LEVEL 2 As an option for the Gold and Platinum plans</p>
Maximum limit per beneficiary per year of coverage	€/ \$ 12 000	€/ \$ 24 000
Delivery expenses : Hospitalisation, private room, accommodation, medical and surgical fees	Up to €/ \$ 6 000 per pregnancy	Up to €/ \$ 12 000 per pregnancy
Home delivery (midwife or other specialist fees)		
Consultations, pharmacy, pre- and post-natal examinations and care		
Childbirth preparation sessions (carried out by a doctor or midwife)		
Diagnosis of chromosomal abnormalities (prior agreement)		
Newborn screening	The above threshold doubled	The above threshold doubled
Complications directly related to childbirth (including Caesarean section if medically justified by the practitioner)		
Medically assisted reproduction (MAR) (waiting period: 18 months)	Not covered	€/ \$ 1 000 per attempt, with a maximum of 3 attempts during the life of the policy



Assistance Plus Option

Benefits	 Cover
Following a medical evacuation - Coverage of pre- and/or post-hospitalisation hotel costs for the Member	€/€ 80 / night / person (10 nights maximum)
Following a medical evacuation, transport costs for a companion Member	Round-trip ticket
Following a medical evacuation - Care of dependent children under 16	Reimbursed up to 20 hours per year, max. €/€ 500
Repatriation of insured family members following the death or repatriation of one of the beneficiaries	One-way ticket
Repatriation in the event of Terrorism or Sabotage, Attack or Assault, Political Unrest or a Natural Disaster	One-way ticket
Early return in the event of the death or the hospitalisation of more than five days of a close family member excluding grandparents (parents, siblings, children and grandchildren)	Round-trip ticket, limited to one trip per enrolled person per year of coverage
Presence of a family member in the event of hospitalisation for more than six days	Round-trip ticket + €/€ 80 per night (max. 10 nights)
Transport of the body if one of the beneficiaries dies	Actual cost
Funeral expenses required for transport (cost of coffin)	Limited to €/€ 2 000
Burial expenses in the country of expatriation	up to €/€ 1 000
Search and Rescue Costs	up to €/€ 5 000 per person and a maximum of €/€ 15 000 per period of coverage
Psychological support following an insured event	3 telephone sessions per enrolled person and per year of coverage
Locating and shipping medicines not available locally	100% actual cost
Legal Assistance	Up to €/€ 3 000 per year of coverage
Advance of bail	Up to €/€ 12 000 per year of coverage

If the Member is covered by any basic health insurance plan, our reimbursements are additional to these.

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From travellers to expatriates, we cater to all needs

For over 40 years, ACS has been the trusted companion for travellers and expatriates worldwide, regardless of their stay abroad. As a wholly independent insurance broker, ACS is the preferred **partner for comprehensive international health insurance and assistance solutions**, offered with exceptional value for money. We allow travellers to explore the world with peace of mind and expatriates to enjoy this **wonderful life experience fully**.

Over 200,000 people trust ACS for their insurance needs abroad every year. Nestled in the heart of Paris, **ACS is a major player in the French travel insurance and expatriate health insurance industry**. We take pride in offering a diverse range of international insurance plans designed to meet everyone's needs.



50 passionate employees



Over 200 000 insured travellers and expatriates every year



40+ years of expertise

A multicultural team by your side

At ACS, we understand that health is your most valuable asset. Our multicultural team comprises fifty professionals from around the world, all eager to help you **find the optimal insurance solution that meets your personal and professional needs**. Our advisors will answer your questions and take the time to understand your situation so that they can offer you an insurance policy perfectly tailored to your needs. You don't speak French ? No problem ! At ACS, we are proficient in 15 languages !

Our Values

✓ **Customer Service** : Our team of multicultural professionals is dedicated to you. We stand by your side when you need us.

✓ **Agility** : We provide concrete and personalised solutions. With reactivity and flexibility, ACS adapts to the needs of travellers and expatriates around the world.

✓ **Commitment** : Our job is to accompany everyone throughout their project. We respond with honesty and transparency. Our relationship is based on trust.



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