



ANA Healthcare Program

PPO

Employer Name : ALL NIPPON AIRWAYS CO., LTD.
Member ID : 022928-02

Subscriber Name : RYUSUKE OMAE

Customer Service : 1-833-889-1039/1-949-623-7422 Gender : male

Fax pre-determination to : 1-949-437-9691

Effective Date : Apr/01/2018

Submit claims to : Prestige International USA, Inc. Date of Birth : May/25/2009
19800 MacArthur Blvd, Suite 400,
Irvine, California 92612, U.S.A.

Attn : AN-MCP GROUP#:AN042016



Hospital-Physician, Medical providers :

Benefit will be paid directly to you upon completion of a payment authorization.
Submit claims with Diagnoses, Procedures, Dates of service, and charges.
Prestige International will pay one hundred percent (100%) of allowable charges
for any reasonable and necessary medical treatment with no prior payment
from the subscriber to Prestige International. Allowable charges are below.

| Medical treatment | Dental treatment | Childbirth/ pregnancy | Vaccination | Physical examination | Dental examination |
|-------------------|------------------|-----------------------|-------------|----------------------|--------------------|
| Payable | Payable | Non-Payable | Non-Payable | Non-Payable | Non-Payable |

For coverage confirmation or authorization, call the phone# on card front

プログラムの対象可否はマニュアルにてご確認の上ご受診下さい。
キャッシュレス受診時に問題が生じた場合およびお問い合わせについては
カード表面に記載されており、最寄りのヘルスケアセンターまでお電話にてご連絡下さい。

Signature

大前 りゅうすけ