### Medical Insurance VHIS Certified Plan

# Essential Safeguard for Your Health

## Health Essential Medical Plan – Standard

The life insurance plan is underwritten by Hong Kong Life Insurance Limited ("Hong Kong Life")





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Issued by Hong Kong Life Insurance Limited

# Essential Safeguard for Your Health

Feeling anxious about the unexpected medical expenses that significantly threat your finances?

Worrying about delayed public healthcare services due to limited resources?

The best way to care for yourself and your family is to have adequate medical coverage in place.

Health Essential Medical Plan - Standard (The "Plan") is a Certified Plan under the Hong Kong Government's Voluntary Health Insurance Scheme ("VHIS") which is eligible for claiming tax deduction. The Plan offers you a medical insurance, renewal is guaranteed up to the Age of 100 years of the Insured Person.

#### **Basic Information**

Type of the Certified Plan :	Standard Plan
Name of the Certified Plan:	Health Essential Medical Plan - Standard
Certification Number :	S00037-01-000-01







#### **Reimbursement for Lifelong Medical Protection**

The Plan is a medical plan of reimbursement for incurred medical expenses. If during the period while the Plan is in force, the Insured Person, as a result of a Disability and upon the recommendation of a Registered Medical Practitioner, is confined in a Hospital; or undergoes any Day Case Procedure, Prescribed Diagnostic Imaging Test or Prescribed Non-surgical Cancer Treatment, the Plan will reimburse the Reasonable and Customary<sup>1</sup> Eligible Expenses<sup>2</sup> to help you to relieve the sudden financial burden.



#### **Guaranteed Renewal for Peace of Mind**

Regardless of the Insured Person's health conditions or claim records, the Policy Holder is guaranteed to renew<sup>3</sup> the Plan every year up to the Age of 100 years of the Insured Person. Upon Renewal, Hong Kong Life guarantees that renewal premiums will not be raised as a result of any claims or any changes in health conditions of the Insured Person. Instead, the renewal premiums will be based on the prevailing premium rates at the time of Policy Anniversary.



#### **Tax Deduction**<sup>4</sup>

Policy Holder can apply for tax deduction on the premiums paid for the Plan for himself/ herself and his/ her dependants. The maximum annual tax deduction amount is HKD8,000 per Insured Person. There is no cap on the number of VHIS policies and dependants that are eligible for tax deduction.



#### No Lifetime Benefit Limit with Worldwide Coverage

All benefits described in the Plan do not have the lifetime benefit limit. Except for the psychiatric treatment, all benefits described in the Plan shall be applicable worldwide.



## No Restriction on Health Service Providers and Ward Class

All benefits described in the Plan are not subject to any restriction in the choice of healthcare services providers nor ward class of the Hospital, you can choose the suitable treatment with flexibility.



#### Extended Coverage to Safeguard Your Health

#### Unknown Pre-existing Condition(s)

The Eligible Expenses<sup>2</sup> arising from Pre-existing Condition(s) that the Policy Holder and/or Insured Person was not aware and would not reasonably have been aware of at the time of application, shall be payable by the Plan subject to the following waiting period and reimbursement arrangement:

Policy Year	Reimbursement Arrangement (% of reimbursement)
1 <sup>st</sup> Policy Year	No coverage
2 <sup>nd</sup> Policy Year	25%
3 <sup>rd</sup> Policy Year	50%
4 <sup>th</sup> Policy Year onwards	100%

#### Treatment of Congenital Condition(s)

If the Congenital Condition(s) have manifested or been diagnosed on or after the Insured Person attained the Age of 8 years, the Eligible Expenses<sup>2</sup> which are Reasonable and Customary<sup>1</sup> incurred from the relevant Congenital Condition(s) will be reimbursed by the Plan.

#### • Day Case Procedures

In case that the Insured Person undergoes any Day Case Procedure, the Plan will reimburse the Eligible Expenses<sup>2</sup> which are Reasonable and Customary<sup>1</sup>.

#### Prescribed Diagnostic Imaging Tests

The Plan will reimburse the Eligible Expenses<sup>2</sup> charged on Prescribed Diagnostic Imaging Test, including computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined. This benefit is subject to the Coinsurance as specified in the Benefit Schedule. After paying the 30% of the Eligible Expenses<sup>2</sup> by you, Hong Kong Life will cover the remaining Eligible Expenses<sup>2</sup>.

#### Prescribed Non-surgical Cancer Treatments

The Plan will reimburse the Eligible Expenses<sup>2</sup> charged on the Prescribed Non-surgical Cancer Treatments. Prescribed Non-surgical Cancer Treatments shall mean radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy for cancer treatment, and this benefit includes outpatient consultation by a Specialist in treatment planning, and monitoring of prognosis and development during the course of Prescribed Non-surgical Cancer Treatment.

#### Psychiatric Treatments

If the Insured Person receives psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist, the Plan will reimburse the relevant Eligible Expenses<sup>2</sup>.



#### Additional Life Protection

If the Insured Person dies while the Plan is in force, a compassionate death benefit will be paid to the Policy Holder. Besides, if the death of the Insured Person is caused by Accident, the Policy Holder will be paid an additional accidental death benefit.



Benefit items⁵	Benefit limit (in HKD)
(a) Room and board	\$750 per day Maximum 180 days per Policy Year
(b) Miscellaneous charges	\$14,000 per Policy Year
(c) Attending doctor's visit fee	\$750 per day Maximum 180 days per Policy Year
(d) Specialist's fee <sup>6</sup>	\$4,300 per Policy Year
(e) Intensive care	\$3,500 per day Maximum 25 days per Policy Year
(f) Surgeon's fee	Per surgery, subject to surgical category for the surgery/ procedure in the Schedule of Surgical Procedures – • Complex \$50,000 • Major \$25,000 • Intermediate \$12,500 • Minor \$5,000
(g) Anaesthetist's fee	35% of Surgeon's fee payable <sup>7</sup>
(h) Operating theatre charge	35% of Surgeon's fee payable7
(i) Prescribed Diagnostic Imaging Tests <sup>6,8</sup>	\$20,000 per Policy Year Subject to 30% Coinsurance
(j) Prescribed Non-surgical Cancer Treatments9	\$80,000 per Policy Year
(k) Pre- and post-Confinement/ Day Case Procedure outpatient care <sup>6</sup>	<ul> <li>\$580 per visit, up to \$3,000 per Policy Year</li> <li>1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure</li> <li>3 follow-up outpatient visits per Confinement/ Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)</li> </ul>
(I) Psychiatric treatments	\$30,000 per Policy Year
Other limits	
Annual Benefit Limit for benefit items (a) – (I)	\$420,000 per Policy Year
Lifetime Benefit Limit for benefit items (a) – (I)	Nil
Other benefits	
Compassionate death benefit	\$10,000
Accidental death benefit <sup>10</sup> \$10,000	



#### **Remarks:**

- 1. "Reasonable and Customary" shall mean, in relation to a charge for Medical Service, such level which does not exceed the general range of charges being charged by the relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar Age, for a similar Disability, as reasonably determined by Hong Kong Life in utmost good faith. The Reasonable and Customary charges shall not in any event exceed the actual charges incurred. In determining whether a charge is Reasonable and Customary, Hong Kong Life shall make reference to the followings (if applicable) - (a) treatment or service fee statistics and surveys in the insurance or medical industry; (b) internal or industry claim statistics; (c) gazette published by the Government; and/or (d) other pertinent source of reference in the locality where the treatments, services or supplies are provided.
- "Eligible Expenses" shall mean expenses incurred for Medical Services rendered with respect to a Disability. "Medical 2. Services" shall mean Medically Necessary services, including, as the context requires, Confinement, treatments, procedures, tests, examinations or other related services for the investigation or treatment of a Disability. For the definition of "Medically Necessary", please refer to the Terms and Conditions of the Plan. 3. The Policy Holder can renew the Policy every year up to the Age of 100 years of the Insured Person. Renewal premium
- is not guaranteed and Hong Kong Life reserves the right to adjust the Standard Premium according to the prevailing Standard Premium schedule adopted by Hong Kong Life on an overall Portfolio basis.
- 4. Whether tax deduction is allowable for the qualifying premiums paid under VHIS policy (not including levy) are subject to the Inland Revenue Ordinance and the circumstances of the Policy Holder (as taxpayer) and the Insured Person(s) (as specified dependent(s)). Please refer to the website of the Inland Revenue Department ("IRD") (www.ird.gov.hk) or contact the IRD directly for any tax related enquiries. You may also seek independent and professional advice from your tax and accounting advisors.
- 5. Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
- 6. Hong Kong Life shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
- 7. The percentage here applies to the Surgeon's fee actually payable or the benefit limit for the Surgeon's fee according to the surgical categorisation, whichever is the lower.
- Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined. Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal
- 9. therapy
- 10. The accidental death benefit (if applicable) is payable in addition to the compassionate death benefit.

#### **Basic Application Conditions**

Premium Payment Term	1 Year (Renewable up to the Age of 100 years of the Insured Person)	
Issue Age*	Age of 0 (15 days after birth) to 80 years	
Policy Currency	HKD	
Benefit Term	1 Year (Renewable up to the Age of 100 years of the Insured Person)	
Geographical Area of Cover	Worldwide (except for psychiatric treatments)	
Covered Ward Class	No restriction	
Premium Payment Mode	Annual/ Semi-annual/ Quarterly/ Monthly	
* Age means age of the Insured Person at the last birthday		

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#### **General Exclusions**

Under the Terms and Benefits of the Plan, Hong Kong Life shall not pay any benefits in relation to or arising from the following expenses.

- 1. Expenses incurred for treatments, procedures, medications, tests or services which are not Medically Necessary.
- 2. Expenses incurred for the whole or part of the Confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a Registered Medical Practitioner for Medically Necessary investigation or treatment of a Disability which cannot be effectively performed in a setting for providing Medical Services to a Day Patient.
- 3. Expenses arising from Human Immunodeficiency Virus ("HIV") and its related Disability, which is contracted or occurs before the Policy Effective Date. Irrespective of whether it is known or unknown to the Policy Holder or Insured Person at the time of submission of Application, including any updates of and changes to such requisite information (if so requested by Hong Kong Life) such Disability shall be generally excluded from any coverage of the Terms and Benefits of the Plan if it exists before the Policy Effective Date. If evidence of proof as to the time at which such Disability is first contracted or occurs is not available, manifestation of such Disability within the first five (5) years after the Policy Effective Date or occur before the Policy Effective Date, while manifestation after such five (5) years shall be presumed to be contracted or occur after the Policy Effective Date.

However, the exclusion under this Section 3 shall not apply where HIV and its related Disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the Terms and Benefits of the Plan shall apply.

- 4. Expenses incurred for Medical Services as a result of Disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae (except for HIV and its related Disability, where this Section 3 of General Exclusions applies).
- 5. Any charges in respect of services for -
  - (a) beautification or cosmetic purposes, unless necessitated by Injury caused by an Accident and the Insured Person receives the Medical Services within ninety (90) days of the Accident; or
  - (b) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
- 6. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the Insured Person and/or his family members, Hair Mineral Analysis (HMA), immunisation or health supplements. For the avoidance of doubt, this Section 6 does not apply to
  - (a) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other Medical Services provided;
  - (b) removal of pre-malignant conditions; and
  - (c) treatment for prevention of recurrence or complication of a previous Disability.
- Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for Emergency Treatment and surgery during Confinement arising from an Accident. Follow-up dental treatment or oral surgery after discharge from Hospital shall not be covered.
- 8. Expenses incurred for Medical Services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or premature ejaculation, regardless of cause.
- 9. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during Confinement or on the day of the Day Case Procedure.
- 10. Expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, gigong, massage therapy, aromatherapy, naturopathy, hydropathy, homeotherapy and other similar treatments.
- 11. Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
- 12. Expenses incurred for Medical Services provided as a result of Congenital Condition(s) which have manifested or been diagnosed before the Insured Person attained the Age of eight (8) years.
- 13. Eligible Expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
- 14. Expenses incurred for treatment for Disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

The above General Exclusions is for reference only. For details and full exclusions, please refer to the Terms and Conditions of the Plan.

#### **Important Statements**

#### 1. Tax deduction under the VHIS

The issuance of this plan does not necessarily mean you are eligible for any tax deduction for the premiums you have paid for this plan. Please refer to the website of the Inland Revenue Department ("IRD") or contact the IRD directly for any tax related enquiries. You may also seek independent and professional advice from your tax and accounting advisors.

#### 2. Product Features Revision

Hong Kong Life reserves the right to revise the Terms and Benefits upon renewal by giving a 30 days advance notice to the Policy Holder. As long as Hong Kong Life maintains the registration as a VHIS provider, Hong Kong Life guarantees the Terms and Benefits will not be less favourable than the latest version of the Standard Plan Terms and Benefits published by the Government at the time of renewal.

#### 3. Cooling-off Period

If you are not satisfied with your Policy, you have a right to cancel it within the cooling-off period and obtain a refund of any premium(s) and levy(ies) paid (in the original payment currency) to Hong Kong Life without any interest. A written notice signed by you should be received by Hong Kong Life Insurance Limited at 15/F Cosco Tower, 183 Queen's Road Central, Hong Kong within the cooling-off period (that is, 21 days after the delivery of the Policy or issue of the Cooling-off Right Notice (informing you/your representative about the availability of the Policy and Expiry Date of the cooling-off period), whichever is the earlier). After the expiration of the cooling-off period, if you cancel the Policy before the end of the term, the projected Total Surrender Value (if applicable) may be less than the Total Premiums Paid.

#### 4. Cancellation

After the cooling-off period, the Policy Holder can request cancellation of the Terms and Benefits of the Plan by giving thirty (30) days prior written notice to Hong Kong Life, provided that there has been no benefit payment under the Terms and Benefits of the Plan during the relevant Policy Year.

The cancellation right under this Section shall also apply after the Terms and Benefits of the Plan have been Renewed upon expiry of its first (or subsequent) Policy Year.

#### 5. Premium Adjustment

Renewal premium is not guaranteed and Hong Kong Life reserves the right to adjust the Standard Premium according to the prevailing Standard Premium schedule adopted by Hong Kong Life on an overall Portfolio basis.

#### 6. Credit Risk of Issuer

The Plan is issued and underwritten by Hong Kong Life. Your Policy is subject to the credit risk of Hong Kong Life. In the worst case, you may lose all the premium paid and benefit amount.

#### 7. Inflation Risk

When reviewing the values shown in the Insurance Proposal, please note that the cost of living in the future is likely to be higher than it is today due to inflation.

#### 8. Misrepresentation or Fraud

Hong Kong Life has the right to declare the Policy void as from the Policy Effective Date and notify the Policy Holder that no cover shall be provided for the Insured Person in case of any of the following events –

(a) any material fact relating to the health related information of the Insured Person which may impact the risk assessment by Hong Kong Life is incorrectly stated in, or omitted from, the Application or any statement or declaration made for or by the Insured Person in the Application or in any subsequent information or document submitted to Hong Kong Life for the purpose of the application, including any updates of and changes to such requisite information (if so requested by Hong Kong Life). The circumstances that a fact shall be considered "material" include, but not limited to, the situation where the disclosure of such fact as required by Hong Kong Life would have affected the underwriting decision of Hong Kong Life, such that Hong Kong Life would have imposed Premium Loading, included Case-based Exclusion(s), or rejected the application. For the avoidance of doubt, this paragraph (a) shall not apply to non-health related information of the Insured Person, which shall be governed by the Terms and Conditions of the Plan; or

(b) any Application or claim submitted is fraudulent or where a fraudulent representation is made.

The burden of proving (a) and (b) shall rest with Hong Kong Life. Hong Kong Life shall have the duty to make all necessary inquiries on all facts which are material to Hong Kong Life for underwriting purpose as provided in the Terms and Conditions of the Plan.

In the event of (a), Hong Kong Life shall have -

- (i) the right to demand refund of the benefits previously paid; and
- (ii) the obligation to refund the premium received,

in each case for the current Policy Year and the previous Policy Years in which the Policy was in force, subject to a reasonable administration charge payable to Hong Kong Life.

In the event of (b), Hong Kong Life shall have -

(iii) the right to demand refund of the benefits previously paid; and

(iv) the right not to refund the premium received.

For details, please refer to the Terms and Conditions of the Plan.

#### 9. Termination of Policy

The Policy shall be automatically terminated on the earliest of the followings -

- (a) where the Policy is terminated due to non-payment of premiums after the grace period as specified in the Terms and Conditions of the Plan;
- (b) the day immediately following the death of the Insured Person; or
- (c) Hong Kong Life has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write the Policy;

Immediately following the termination of the Policy, insurance coverage under the Policy shall cease to be in force. No premium paid for the current Policy Year and previous Policy Years shall be refunded, unless specified otherwise.

The Policy shall also be terminated if the Policy Holder decides to cancel the Policy or not to renew the Policy in accordance with the Terms and Conditions of the Plan, as the case may be, by giving the requisite written notice to Hong Kong Life.

For details, please refer to the Terms and Conditions of the Plan.

#### **10.Insurance Costs**

Part of the premium pays for the insurance and related costs (if any).

#### **11.Dispute Resolution**

If any dispute, controversy or disagreement arises out of the Policy, including matters relating to the validity, invalidity, breach or termination of the Policy, Hong Kong Life and Policy Holder shall use their endeavours to resolve it amicably, failing which, the matter may (but is not obliged to) be referred to any form of alternative dispute resolution, including but not limited to mediation or arbitration, as may be agreed between Hong Kong Life and the Policy Holder, before it is referred to a Hong Kong court.

Each party shall bear its own costs of using services under alternative dispute resolution.

#### **12.Dispute on Selling Process and Product**

Chong Hing Bank Limited, CMB Wing Lung Bank Limited, OCBC Wing Hang Bank Limited and Shanghai Commercial Bank Limited (collectively "Appointed Insurance Agencies" and each individually "Appointed Insurance Agency") are the Appointed Insurance Agencies of Hong Kong Life, and the life insurance product is a product of Hong Kong Life but not the Appointed Insurance Agencies. In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between the Appointed Insurance Agency and the customer out of the selling process or processing of the related transaction, Appointed Insurance Agency is required to enter into a Financial Dispute Resolution Scheme process with the customer; however any dispute over the contractual terms of the life insurance product should be resolved between Hong Kong Life and the customer directly.

Should you have any enquiries, please visit any branches of the Appointed Insurance Agencies, visit the company website of Hong Kong Life (www.hklife.com.hk) or call Hong Kong Life's Customer Services Hotline at 2290 2882.

This product leaflet is for reference and is applicable within Hong Kong only. For terms and conditions, please refer to the policy document. If there is any conflict between the product leaflet and the policy document, the latter shall prevail. The copy of the policy document is available upon request. Before applying for the insurance plan, you may refer to the contents and terms of the policy document. You may also seek independent and professional advice before making any decision.

Please mail to Hong Kong Life Insurance Limited at 15/F Cosco Tower, 183 Queen's Road Central, Hong Kong or call Hong Kong Life's Data Protection Officer at 2290 2882 if you request Hong Kong Life not to use your personal data for direct marketing purposes. No charge shall be levied on such arrangement.

This product leaflet has been prepared in both English and Chinese. Both English and Chinese versions are official versions and neither one shall prevail over the other. Any inconsistency shall be interpreted in favour of the Policy Holder.