

Medical (Life) Insurance

ManuShine Healthcare Series / Benefit

活亮人生醫療

保障系列 / 附加保障

This product leaflet is for use by the customers of DBS Bank (Hong Kong) Limited (the “Bank”). **ManuShine Healthcare Series / ManuShine Healthcare Benefit are medical (life) insurance plans underwritten by Manulife (International) Limited (incorporated in Bermuda with limited liability) (“Manulife”).** The Bank is acting as a licensed insurance agency of Manulife.



ManuShine Healthcare Series / Benefit

As life progresses, we reach different milestones involving career development and greater family responsibilities. Through these phases, medical protection becomes more essential to provide assurance that you and your family are protected with the right treatment when you need it most.

ManuShine Healthcare Series / ManuShine Healthcare Benefit

(‘ManuShine’ or the plan) each comes with three options – Classic, Premier and Elite and you may also choose among three levels of annual deductible amounts – Nil, HK\$8,000 / US\$1,000, or HK\$22,800 / US\$2,850 to fit your needs. The premium is lower when you choose a higher deductible.

ManuShine is an indemnity hospital insurance product provided and underwritten by Manulife, and is available as a basic plan (ManuShine Healthcare Series) or as a supplementary benefit (ManuShine Healthcare Benefit). This product leaflet provides only general information on this product. It does not form part of the policy and does not contain full terms of the policy. You should read the policy provisions of ManuShine Healthcare Series (‘Policy Provisions’) or benefit provisions of ManuShine Healthcare Benefit (‘Benefit Provisions’) for the exact terms and conditions that apply to this product. You can ask us for a copy.



Well-rounded medical coverage and service

ManuShine is guaranteed renewable annually throughout the lifetime of the life insured (see note 1) regardless of the health condition of the life insured. The plan provides full coverage for a wide range of major benefits with no sub-limits applied (see note 2). In addition, outpatient day-case procedures are covered for greater flexibility.

- **All-round confinement and surgical benefits**, including full coverage (see note 2) on hospital room and board, surgeon’s fees, doctor’s visit, specialist’s fees, hospital services, intensive care, anaesthetist’s fee, operation theatre fee, day-case surgeries and designated medical appliances (see note 3).
- **Pre- and post-hospitalization benefits** to safeguard you through your healthcare journey. We will cover the costs of outpatient services before and after a hospital stay / day-case surgery, as well as ancillary services (such as registered chiropractor, physiotherapist and registered dietician consultations, etc.) after a hospital stay / day-case surgery. Extended medical care for home nursing and rehabilitation are also available.
- **Substantial cancer recovery support** provides full coverage on cancer treatments, including radiotherapy, chemotherapy, immunotherapy, proton therapy, hormonal therapy and targeted therapy inclusive of genetic tests for targeted therapy (see notes 2 and 4). Named patient imported cancer drugs (see note 5) which are not yet registered in Hong Kong and reconstructive surgery for cancer (see note 6) are also covered.
- **Other extended benefits** for your greater peace of mind are available, such as full coverage on kidney dialysis treatment and pregnancy complications (see notes 2 and 7). Traditional Chinese medicine treatment during a hospital stay / after a hospital stay or day-case surgery are also covered.

The benefits we will pay under the plan depend on the annual limit and lifetime limit applicable to the plan. Please see the benefit schedule for details.



Various cash benefits

The plan offers various cash benefits as financial support to the life insured without affecting the annual deductible (if applicable):

- Hospital cash benefit for confinement in a general ward of a government hospital, even if no charges have been incurred for treatment during confinement.
- Hospital cash benefit for confinement in a room level lower than the room level entitled under the plan in private hospitals.
- Cash benefit for selected surgical procedures (i.e. OGD and Colonoscopy) in an outpatient setting. This cash benefit paid does not affect the no-claim period (see note 8).

Please see the benefit schedule for details.



Cashless arrangement for hospital stay

If hospitalization and in-patient treatment are required, it can be a challenge to come up with enough cash for unexpected medical expenses. You can apply for a credit arrangement before admission. Upon approval, we will pay the estimated credit amount of your eligible hospital and surgical expenses directly on your behalf (see note 9), so you can focus on your recovery knowing that your hospital bills will be taken care of.



Medical green passage service (see note 10)

ManuShine offers a medical green passage service which provides the life insured with a privileged medical referral service. In a few simple steps, the life insured can book outpatient and inpatient medical consultations with medical specialists under a list of designated network hospitals in mainland China. The service provides extra convenience to the life insured without worrying about booking and queuing.



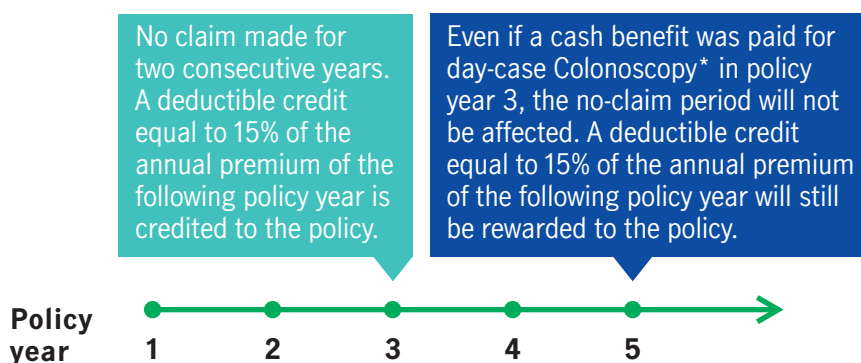
Extensive hospital networks

The plan offers extensive coverage of a designated hospital network throughout cities in **mainland China including 3A government hospitals** (see remark (a) under the benefit schedule) which ensures better medical coverage for the life insured.



No-claim deductible credit

If the plan fulfills the 2-year no-claim period (see note 8), ManuShine will provide a reward to your plan with a deductible credit (see note 11) equal to 15% of the annual premium of the following policy year. This credit can be used to offset any deductible when a claim is made.



* The above illustrative example assumes that no claim other than those made for this cash benefit has been submitted under this plan.

Other features



Take care of the life insured's well-being round the clock and around the world

(see note 12)

The life insured can get a second medical opinion from a network of leading specialist doctors in the United States through our second medical opinion services once a successful claim on a disability (as defined in the Policy Provisions or Benefit Provisions) has been made. They can also enjoy a discounted rate for receiving medical treatment from selected hospitals in the US. With the emergency medical assistance, the life insured will receive prompt medical care in case of an emergency while traveling outside their home country.



Flexible option to reduce the annual deductible once, regardless of your medical condition, either at age 55, 60 or 65

To offer you more flexibility and get prepared for your retirement, you can apply to lower the annual deductible of your plan without providing further evidence of insurability once only, either at age 55, 60 or 65 of the life insured (see note 14).



Stay healthy with wellness checkpoint

(see note 13)

To encourage the life insured to stay healthy, ManuShine offers a free health assessment at the end of every two consecutive policy years, as long as the plan has been effective for two consecutive policy years and the life insured has reached the age of 30 at the beginning of the second consecutive year. Health assessment packages are tailored to meet one's changing needs as the life insured moves through different stages of life.



Plan at a glance

ManuShine Healthcare Series / Benefit

	Product objective & nature	An indemnity hospital insurance product for non-Hong Kong and non-Macau customers with medical insurance needs.
	Product type	Basic plan / Supplementary benefit
	Policy / Benefit term	The coverage period is 1 year. Guaranteed lifetime renewal upon payment of premium (see note 1).
	Premium payment period	Premiums are payable for each policy year during the life insured's lifetime. Premiums are not guaranteed (see note 1).
	Issue age	15 days – age 70
	Policy currency	Hong Kong Dollar (HK\$) / United States Dollar (US\$)
	Premium payment mode	Annually / Semi-annually / Quarterly / Monthly
	Area of cover	Worldwide (Elite) / Worldwide exclude USA (Premier) / Asia (Classic) Please see the benefit schedule for details.
	Premium schedule	Please see the 'Annual Premium Table – ManuShine Healthcare Series / Benefit'.



Join Manulife**MOVE** for free and enjoy a premium discount of up to 10%!

Manulife**MOVE** is an innovative insurance concept that rewards customers with premium discounts for being healthier and more active.

As the life insured of ManuShine, you are eligible to be a Manulife**MOVE** member if you are aged 18 or above. Simply activate your MOVE app account and achieve the required daily step average for each MOVE reward level as shown below, and enjoy a premium discount of up to 10%# on ManuShine upon policy renewal for the next membership year.

MOVE reward level	Required daily step average	Premium discount (applicable to the premium due and payable in the following policy year)
LV 1	 5,000	5%
LV 2	 7,000	7%
LV 3	 10,000	10%

Manulife**MOVE** members will also receive regularly updated tips on how to maintain an active and healthy lifestyle.



For details, please refer to www.ManulifeMOVE.hk.

#The relevant premium discount is subject to terms and conditions. Manulife reserves the right to change, terminate or cancel the premium discount without prior notice. Please refer to our website www.ManulifeMOVE.hk for the terms and conditions, and the latest updates.

Notes

1. The period of coverage of the plan is one year and is renewable annually at each policy anniversary. We have the right to revise the benefits, terms and conditions and premium when you renew your plan. The premiums are not guaranteed and we may adjust them from time to time. Please see the 'renewal' paragraph under the 'Important Information' section below.
2. Full coverage shall mean the reimbursement of the actual amount of eligible expenses and / or other expenses charged after deducting the remaining annual deductible (if any), and is subject to the annual limit, lifetime limit and other limitations. Full coverage applies to selected benefit items only, while other benefit items are not fully reimbursable and subject to respective benefit item's limits. Please refer to the benefit schedule and Policy Provisions or Benefit Provisions for details.
3. Designated medical appliances include pacemaker, stents for percutaneous transluminal coronary angioplasty, intraocular lens, artificial cardiac valve, metallic or artificial joints for joint replacement, prosthetic ligaments for replacement or implantation between bones and prosthetic intervertebral disc. Non-designated medical appliances are subject to the maximum benefit limit per policy year specified in the benefit schedule, and external artificial limb and artificial ear / eye ball with surgery performed will be covered as non-designated medical appliances. Please see the Policy Provisions or Benefit Provisions for details.
4. If the life insured is diagnosed with a covered cancer, the cancer treatment benefit shall reimburse the reasonable and customary expenses charged for the genetic testing solely for the purpose of application of certain targeted therapy drugs on the life insured as prescribed in writing by the life insured's attending doctor. The genetic test prescribed is intended to confirm the presence of an appropriate gene mutation in order to determine whether the life insured will respond to such targeted therapy drugs. The life insured's prognosis must be supported by medical reports as evidence of fulfillment of particular criteria for the application of such targeted therapy drugs. The genetic test and associated targeted therapy drugs treatment protocol must be approved by the government, relevant authorities and recognized medical association in the locality where the targeted therapy drug is prescribed. If there are no relevant laws, authorities or recognized medical associations to regulate the genetic test in the locality, regulations in USA, United Kingdom or Europe shall prevail. Please see the Policy Provisions or Benefit Provisions for details.
5. If the life insured is diagnosed with a covered cancer, the cancer treatment benefit shall reimburse the reasonable and customary charges for cancer drugs not yet registered in Hong Kong for the sole use of the life insured for his / her cancer treatment to be received in Hong Kong only as recommended in writing by the life insured's attending doctor in Hong Kong. The import of such cancer drugs must be approved by the Department of Health in Hong Kong on a named patient basis in accordance with all applicable laws and regulations in Hong Kong. Such approved imported drugs and their associated treatment protocol must also be approved by, and must have obtained marketing authorization from the government, relevant authorities and the recognized medical association in the locality where the drugs have been launched in the market. The imported drugs for the life insured's conditions must be clinically appropriate and able to fulfill relevant regulator's approved indications and dosages, frequency and duration. If there are no relevant laws, authorities or recognized medical associations in the locality for the use of imported drugs, regulations in USA, UK or Europe shall prevail. Please see the Policy Provisions or Benefit Provisions for details.
6. The reconstructive surgery for cancer benefit shall reimburse the reasonable and customary charges actually incurred for reconstructive surgery for cancer performed (a) on the life insured and (b) within 12 months from the date of discharge from the hospital in which the life insured was confined for treatment for the covered cancer as recommended by the life insured's attending doctor. Please see the Policy Provisions or Benefit Provisions for details.
7. We shall reimburse the charges incurred for the life insured's confinement and surgical procedure in a hospital due to the covered pregnancy complications as recommended in writing by a doctor provided that its date of diagnosis must be after the plan has been in force for 12 consecutive policy months. Please refer to the Policy Provisions or Benefit Provisions for the details of covered pregnancy complications.
8. The no-claim period is for deductible credit calculation. Please refer to the Policy Provisions or Benefit Provisions for detailed terms and conditions for such calculation.
9. The credit service for hospitalization does not form part of this plan. This service is an administrative arrangement and is not part of the product features. It is only available after the plan has been effective for 180 consecutive days. We may terminate the service anytime without giving you prior notice. You will need to apply for this service through a prescribed form and procedures at least 5 working days before each time the insured person is admitted to hospital. If hospitalization is due to illness / disability classified under exclusion or other reasons, no pre-authorized amount will be approved. Upon approval of your application, we will issue a letter of confirmation. You

will be required to provide treatment information, complete and submit the claim form prescribed by us at the time of the life insured's discharge from hospitalization. Eligibility for the credit service and the issuance of the letter of confirmation are subject to our final decision. If the hospital expenses are more than the eligible claim limit or incurred in relation to items not covered under the policy, you will have to pay for the shortfall.

10. The medical green passage service is provided by a third party service provider which is an independent contractor and is not our agent. We reserve the right to change or terminate the medical green passage service anytime by prior notice. We make no representation, warranty or undertaking as to any service of the third party service providers. We shall not be liable to you or the life insured in any respect of any loss, damage, expense, suit, action or proceedings suffered or incurred by you or the life insured, whether directly or indirectly, arising from or in connection with the services provided or advice given by such third party service providers and / or its agents, or the availability of such services. The availability of the medical green passage service shall not be regarded as acceptance by the company of any liabilities to pay any benefits and / or reimburse any medical expenses under this plan. Please visit our website (www.manulife.com.hk) for the latest medical green passage service provision for the terms and conditions of this service.
11. Deductible credits are only applicable to plans with annual deductible options. If any claim relating to any of the previous 2 consecutive policy years under this plan becomes subsequently payable after any amount of benefit payable has been increased due to the deductible credit, we shall offset such an increased amount from the amount of claim payable, failing which we shall recover such an amount from the policyowner in full as a debt. Please see the Policy Provisions or Benefit Provisions for details on how exactly the deductible credits are calculated and the terms and conditions that apply.
12. A second medical opinion and emergency medical assistance are provided by third party service providers which are independent contractors and are not our agents. We make no representation, warranty or undertaking as to any medical opinions given by the medical service provider and / or hospitals or any services given by the service providers. The third party service providers may change the list of selected hospitals from time to time. Please visit our website (www.manulife.com.hk) for the latest medical referral services provisions and emergency assistance benefits provisions for the terms and conditions of these services.
13. The wellness checkpoint is only available in Hong Kong and Macau. We reserve the right to change or terminate the wellness checkpoint anytime without giving you prior notice. The wellness checkpoint is provided by a third party service provider which is an independent contractor and is not our agent. We make no representation, warranty or undertaking as to the availability of any services of the third party service provider including the medical check-up service. We shall not be liable to you or the life insured in any respect of any loss, damage, expense, suit, action or proceedings suffered or incurred by you or the life insured, whether directly or indirectly, arising from or in connection with the services (including the wellness checkpoint) provided or advice given by such a third party service provider and / or its agents, or the availability of such services.
14. You may apply to lower the annual deductible of this plan either at age 55, 60 or 65 of the life insured within 31 days before or after the relevant policy anniversary without providing further evidence of good health. You can only apply for this once during the lifetime of the life insured and you cannot change it back once it has been done. Upon reduction of the annual deductible, the premium payable shall include the premium according to the prevailing premium schedule adopted by us for such annual deductible option, and any premium loading the policyowner has agreed to for the policy.

Benefit Schedule

Plan Level	Maximum Benefit Limit (HK\$ / US\$)		
	Elite	Premier	Classic
Area of Cover	Worldwide ^{(a) (b)}	Worldwide exclude USA ^{(a) (c)}	Asia ^{(a) (d)}
Outside Area of Cover	All areas covered	Emergency treatment only	Emergency treatment only
Annual Limit	HK\$22,000,000 / US\$2,750,000	HK\$20,000,000 / US\$2,500,000	HK\$12,000,000 / US\$1,500,000
Lifetime Limit ^(e)	HK\$66,000,000 / US\$8,250,000	HK\$60,000,000 / US\$7,500,000	HK\$36,000,000 / US\$4,500,000
Annual Deductible Options (only apply to Sections I to V of this benefit schedule)	HK\$0 / US\$0 or HK\$8,000 / US\$1,000 or HK\$22,800 / US\$2,850		

HOSPITAL BENEFITS

I. CONFINEMENT BENEFITS

(1)	Hospital Room & Board ^(f)	Full Cover	
(2)	Doctor's Visit	Full Cover	
(3)	Specialist's Fee	Full Cover	
(4)	Hospital Services	Full Cover	
(5)	Intensive Care	Full Cover	
(6)	Hospital Companion Bed	Full Cover	
(7)	Private Nurse's Fee (Maximum number of days per policy year)	Full Cover (up to 90 days)	Full Cover (up to 60 days)
(8)	Hospital Cash for Confinement in a General Ward of Government Hospital (per day) ^(g)	HK\$1,800 / US\$225	HK\$1,200 / US\$150
(9)	Psychiatric Treatment (per policy year)	HK\$66,000 / US\$8,250	HK\$55,000 / US\$6,875
(10)	Hospital Cash for Confinement in a Lower Room Level of a Private Hospital (per day) ^(h)	HK\$1,800 / US\$225	HK\$1,200 / US\$150

II. SURGICAL BENEFITS

(1)	Surgeon's Fee	Full Cover	
(2)	Anaesthetist's Fee	Full Cover	
(3)	Operation Theatre Fee	Full Cover	
(4)	Day Case Surgeries	Full Cover	
(5)	Medical Appliances (see note 3)	Full Cover (HK\$100,000 / US\$12,500 per policy year for non-designated medical appliances)	
(6)	Cash Benefit for Outpatient Surgical Procedure (per surgery) (maximum 1 surgery per day) ⁽ⁱ⁾	HK\$1,800 / US\$225	HK\$1,200 / US\$150
(7)	Reconstructive Surgery for Cancer (per covered cancer) (see note 6)	HK\$330,000 / US\$41,250	HK\$275,000 / US\$34,375

Plan Level	Maximum Benefit Limit (HK\$ / US\$)		
	Elite	Premier	Classic
III. PRE- & POST-HOSPITALIZATION BENEFITS			
(1) Pre-Hospitalization / Day Case Surgery Outpatient	Full Cover (within 31 days before hospitalization or from performing the surgical procedure on a day case basis and maximum 1 visit per day)		
(2) Post-Hospitalization / Day Case Surgery Outpatient	Full Cover (within 60 days immediately after discharge from hospital or from performing the surgical procedure on a day case basis and maximum 1 visit per day)		
(3) Post-Hospitalization Home Nursing (Maximum number of days per policy year)	Full Cover (up to 120 days)	Full Cover (up to 60 days)	Full Cover (up to 30 days)
(4) Post-Hospitalization / Day Case Surgery Ancillary Service (per policy year) – Registered chiropractor, physiotherapist, speech therapist, occupational therapist & registered dietician consultations	HK\$60,000 / US\$7,500	HK\$45,000 / US\$5,625	HK\$30,000 / US\$3,750
	(within 90 days immediately after discharge from hospital or from performing the surgical procedure on a day case basis, maximum 1 visit per day and up to 60 visits per policy year)		
(5) Rehabilitation (per policy year)	HK\$110,000 / US\$13,750	HK\$88,000 / US\$11,000	HK\$55,000 / US\$6,875
IV. EXTENDED BENEFITS			
(1) Cancer Treatment	Full Cover		
(2) Kidney Dialysis	Full Cover		
(3) HIV / AIDS Treatment (per life) ⁽ⁱ⁾	HK\$1,000,000 / US\$125,000	HK\$900,000 / US\$112,500	HK\$800,000 / US\$100,000
(4) Living Donor Expenses for Transplantation Surgery (per disability) ^(k)	HK\$1,056,000 / US\$132,000	HK\$880,000 / US\$110,000	HK\$704,000 / US\$88,000
(5) Traditional Chinese Medicines	HK\$880 / US\$110 per visit	HK\$770 / US\$97 per visit	HK\$660 / US\$83 per visit
	(During hospital confinement / within 90 days immediately after discharge from hospital or from performing the surgical procedure on a day case basis, maximum 1 visit per day and up to 20 visits per policy year)		
(6) Hospice Care (per life)	HK\$220,000 / US\$27,500	HK\$132,000 / US\$16,500	HK\$88,000 / US\$11,000
(7) Pregnancy Complications (see note 7)	Full Cover		
V. EMERGENCY TREATMENT BENEFITS			
(1) Emergency Outpatient	Full Cover		
(2) Emergency Dental (due to accident)	Full Cover		
DEATH BENEFITS			
(1) Compassionate Death Benefit	HK\$80,000 / US\$10,000		
(2) Accidental Death Benefit	HK\$80,000 / US\$10,000		
OTHER SERVICES ⁽ⁿ⁾			
(1) Wellness Checkpoint	Included		
(2) Second Medical Opinion	Included		
(3) Emergency Medical Assistance	Included		
(4) Medical Green Passage Service	Included		

Benefit Schedule – Remarks

- (a) We will only recognize a hospital located in mainland China (not including Taiwan, Hong Kong and Macau) if it is included in the list of designated hospitals in mainland China we publish. We will reduce the amount of benefit we pay (except for death benefits) under this plan by 50% if:
- Asia Plan is chosen; and
 - the expenses are incurred in a hospital classified as an Elite Hospital in the hospital list maintained by us.
- We may revise the list of designated hospitals in mainland China from time to time without giving you prior notice. Please see the latest list of designated hospitals in mainland China revised and published from time to time on our website (www.manulife.com.hk) or call our customer services hotline for details.
- (b) We will reduce the amount of benefit we pay (except for death benefits) under this plan by 50% if:
- the life insured has lived in the USA for at least 183 days in the past 12 months at the time of the life insured's stay in hospital, or when receiving medical treatment or a medical service in the USA; or
 - the life insured is in hospital or has a day-case surgery in the USA without obtaining pre-authorization from us beforehand, unless it was due directly to an accident or an emergency.
- (c) Worldwide exclude USA: worldwide, not including the USA and US Minor Outlying Islands.
- (d) Asia: Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
- (e) Lifetime limit means the maximum aggregate amount of hospital benefits we will pay under all insurance policies covering the life insured and issued by us from time to time, whether or not still in force, which have a specific lifetime limit in line with their respective terms and conditions.
- (f) For Elite Plan, Premier Plan and Classic Plan (Asia but not including Australia, Hong Kong and New Zealand), hospital room and board shall be paid for confinement in a standard private room for the life insured's private use during their stay in hospital, with its own private facilities including a bedroom and bath or shower room (or rooms) only. It does not include any room of upper class with its own kitchen, dining or sitting room (or rooms) and so on.
- For Classic Plan, for hospital stays in Australia, Hong Kong or New Zealand, hospital room and board shall be paid for confinement in a standard semi-private room, which means a single bed with a shared bath or shower room or a room shared by two people for the life insured's use during their stay in hospital.
- In any case if the life insured is confined, whether voluntarily or involuntarily, in a room of the class:
- i. upper than standard semi-private room but not upper than standard private room in Australia, Hong Kong and New Zealand for Asia Plan, we shall reduce the amount of the benefit under confinement benefits and surgical benefits incurred during the period of confinement and payable under this plan to 50% of the benefit payable; or
 - ii. upper than standard private room, we shall reduce the amount of the benefit under confinement benefits and surgical benefits incurred during the period of confinement and payable under this plan to 25% of the benefit payable.
- (g) Hospital cash for confinement in a general ward of a government hospital benefit applies, upon recommendation by a doctor, if the life insured has: 1) a Hong Kong identity card and has to stay as a bed patient in a general ward of a government hospital in Hong Kong; or 2) a Macau resident identity card and has to stay as a bed patient in a general ward of a government hospital in Macau for medically necessary treatment of a disability regardless of whether charges have been incurred for treatment during confinement.

- (h) Hospital cash for confinement in a lower room level of a private hospital benefit applies if the life insured is confined in a room of the class lower than the applicable class the life insured is eligible for under the plan as a bed patient in a private hospital in the covered area for medically necessary treatment of a disability and has to pay charges.
- (i) Cash benefit for outpatient surgical procedure benefit applies if the selected surgical procedures (i.e. OGD and Colonoscopy) performed on the life insured on a day case, provided that the selected surgical procedures are medically necessary for treatment of a disability. The amount of the benefit payable per surgery, with a limit of one surgery per day, is subject to a maximum benefit limit specified in the benefit schedule.
- (j) HIV / AIDS treatment benefit is only payable if signs or symptoms of such HIV / AIDS illness first occur after the plan has been in force for five consecutive policy years. This benefit is only payable once and the maximum amount payable is subject to the limit as specified in the benefit schedule.
- (k) We shall reimburse the reasonable and customary charges actually incurred by the organ donor in a hospital for a living organ donation to the life insured. If the living organ donation is performed in hospitals located in mainland China (excluding Taiwan, Hong Kong and Macau), the cost to the organ donor for the living organ donation shall be paid only if the surgical procedures for the living organ donation are conducted in local organ transplant accredited institutions by organ transplant accredited surgeons and the organ procurement is in accordance with local medical and legal regulations. Please see the Policy Provisions or Benefit Provisions for details.
- (l) Services including wellness checkpoint, second medical opinion, emergency medical assistance and medical green passage service are provided by third party service providers. We may revise the details of these services from time to time without giving you prior notice.

Enjoy full reimbursement for major items of medical expenses

Mrs Wong, age 45, purchased **ManuShine Healthcare Series (Classic Plan) with an annual deductible option of HK\$8,000** to safeguard her health.

At age 60, she experienced pain and stiffness in her right knee. She was diagnosed with right knee osteoarthritis and was advised to undergo total knee replacement surgery. She stayed in a semi-private room of a private hospital in Hong Kong for 6 days. After returning home, she continued to receive outpatient care and ancillary service.

Medical services received	Billed medical expenses	
Pre-confinement		 Full cover[^]
• Pre-hospitalization outpatient (1 visit)	HK\$1,500	
Confinement		
• Hospital room & board (6 days)	HK\$6,650	
• Doctor's visit (7 days)	HK\$8,400	
• Hospital services	HK\$65,600	
• Surgeon's fee	HK\$75,000	
• Anaesthetist's fee	HK\$25,000	
• Operating theatre fee	HK\$9,330	
Post-confinement		
• Post-hospitalization outpatient (2 visits)	HK\$3,000	
• Post-hospitalization ancillary service (6 visits) [@]	HK\$6,000	
Total	HK\$200,480	
Less: Annual deductible	(HK\$8,000)	
Medical expenses reimbursable under the plan	HK\$192,480	

With ManuShine Healthcare Series, **Mrs Wong only needs to pay the annual deductible and doesn't have to worry about any other out-of-pocket payments.** In addition to the hospitalization treatment, her medical expenses from pre- to post-hospitalization are fully covered[^].

If Mrs Wong's plan also fulfills the 2-year no-claim period (see note 8), she can use the deductible credit, which is equal to 15% of the annual premium, to offset the HK\$8,000 annual deductible when the claim is made.

[^] Full coverage pertains to the above scenarios only.

[@] The benefit limit is HK\$30,000 per policy year.

(The above example is hypothetical and for illustrative purposes only. It is made under the assumptions that the respective benefit limits had not yet been reached and the post-hospitalization outpatient and ancillary services were received within 60 days and 90 days respectively after Mrs Wong was discharged from the hospital. It is also made under the assumption that no claim had been made previously under this plan when the claim was made.)

Deductible credit (see note 10)

Deductible credit will be used to offset any annual deductible when making a claim. If the life insured is covered by other insurance policies, the deductible credit will be used to offset any annual deductible so that some or all of those medical expenses which have not been reimbursed by other insurance plans may be recovered. The total amount of medical expenses claimed under this plan and other insurance plans (if any) cannot exceed the actual medical expenses.

Illustrative example 1:

(All figures in HK\$)

Annual deductible = 8,000

Deductible credit = 1,500



Illustrative example 2:

(All figures in HK\$)

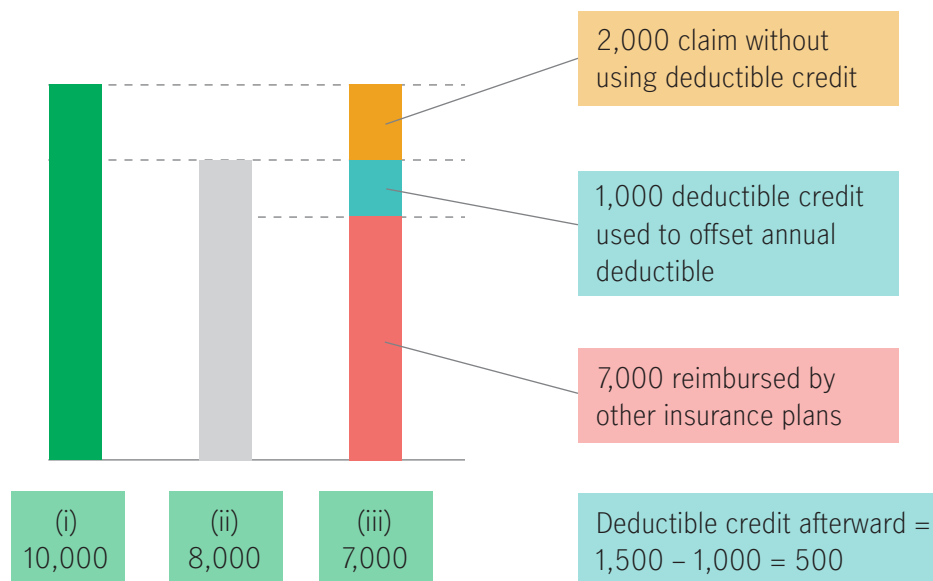
Annual deductible = 8,000

Deductible credit = 1,500

Eligible medical expenses of the claim – (i)	10,000
--	--------

Annual deductible – (ii)	8,000
--------------------------	-------

Medical claim reimbursed by any other insurance plans – (iii)	7,000
---	-------



Amount of benefit payable without deductible credit	$10,000 - 8,000 = 2,000$
---	--------------------------

Amount of benefit payable with deductible credit	$2,000 + 1,000 = 3,000$
--	-------------------------

Deductible credit will remain after the claim	$1,500 - 1,000 = 500$
---	-----------------------

Given the total claim amount from this plan and other insurance plans does not exceed the actual total medical expenses, only HK\$1,000 deductible credit is used to offset the annual deductible in this case.

The above examples are hypothetical and for illustrative purpose only. Please see the Policy Provisions or Benefit Provisions for details.

Important Information

1. Nature of the product

The product is an indemnity hospital insurance product without a savings element. There is no cash value for the product. The product is aimed at customers who want a medical insurance product and can pay the premium as long as they want medical protection. As a result, you are advised to save enough money to cover the premiums in the future. The premium pays for the insurance and related costs.

2. Cooling-off period (applies if this plan is a basic plan)

If you are not happy with your policy, you have a right to cancel it within the cooling-off period and get a refund of any premiums and any levy paid. To do this, you must give us, within the cooling-off period, your written notice signed by you at Individual Financial Products, Manulife (International) Limited, 22/F, Tower A, Manulife Financial Centre, 223-231 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong. In other words, your written notice to cancel your policy must reach us directly at the relevant address within a period of 21 calendar days immediately following the day we deliver to you or your nominated representative the policy or a notice telling you about the availability of the policy and the expiry date of the cooling-off period, whichever is the earlier. After the expiration of the cooling-off period, if you cancel the policy, there will be no premium refund.

3. Premium adjustment

The premiums will vary depending on the age of the life insured and are not guaranteed. We will regularly review our products, including the premium rates, to make sure we can continue to provide cover. When reviewing the premium rates, we will consider our claims experience, medical cost inflation, and other factors. We can change the premium rates on each policy anniversary.

4. Premium term and result of not paying the premium

You should continue to pay the premium (or premiums) on time throughout the benefit term. If you do not pay a premium on time, you have 31 days from the due date to pay it, during which the policy will continue in force. If we do not receive the premium after the 31-day period ends, the policy will end without further notice and the life insured will not be covered.

5. Credit risk

Any premiums you paid would become part of our assets and so you will be exposed to our credit risk. Our financial strength may affect our ability to meet the ongoing obligations under the insurance policy.

6. Currency risk

This plan is available in foreign currency. You should consider the potential currency risks when deciding which policy currency you should take. The foreign-currency exchange rate may fall as well as rise. Any change in the exchange rate will have a direct effect on the amount of premium you need to pay and the value of your benefits in your local currency. The risk of changes in the exchange rate may cause a financial loss to you. This potential loss from the currency conversion may wipe out the value of your benefits under the policy or even be more than the value of benefits under your policy.

7. Inflation risk

The costs of living and healthcare in the future are likely to be higher than it is today due to inflation. As a result, your current planned benefits may not be enough to meet your future needs.

8. Condition for ending the plan

This plan will end if:

- i. the life insured dies;
- ii. you fail to pay the premium within 31 days after the due date;
- iii. the aggregate benefits paid under the relevant insurance policies reach the lifetime limit;
- iv. we approve your written request to end this plan;

- v. the policy to which this plan is attached ends or matures (if this plan is a supplementary benefit); or
 - vi. you cash in the policy or we apply the non-forfeiture benefit (if any) to your policy (if this plan is a supplementary benefit);
- whichever happens first.

In the case of ManuShine Healthcare Benefit, the plan shall be terminated upon receipt by us of such request within 31 days before the due date for payment of any premium, at the policyowner's written request and accompanied by the plan for appropriate endorsement. Under such circumstances, the plan will terminate as of such premium payment due date.

Once terminated, this plan shall cease to have effect. Where this plan is terminated during the policy year, no part of the premium will be refunded, irrespective whether a claim has or has not been made in that policy year.

9. Renewal

If the plan is no longer offered, we will endeavor to enroll you in another medical plan available at that time. We reserve the right to revise the benefits, terms and conditions and premiums under the plan upon renewal. Any such revision and adjustment will apply to the renewed plan automatically unless you cancel the plan by a written notice within 30 days after the renewal takes effect in which case the plan will end.

Applicable to plan with 'worldwide' as the option of area of cover: we reserve the absolute right to change the area of cover from 'worldwide' to 'worldwide exclude USA' at any time if the life insured has taken up residence in the USA for at least 183 days in the past 12 months.

10. Suicide

No death benefit will be payable if the life insured commits suicide, whether sane or insane, within 1 year of:

- i. the policy issue date or the policy year date;
 - ii. the effective date of reinstatement; or
 - iii. the date of endorsement or the effective date of change (only applicable to ManuShine Healthcare Benefit added after the policy has been issued);
- whichever is later.

11. Claims procedure

Please refer to the 'Claims Procedures' section in the Policy Provisions or Benefit Provisions and visit www.manulife.com.hk for details.

When the life insured is entitled to benefits payable under another insurance policy, whether issued by us or another insurance company, or reimbursed through any other means, the hospital benefits under the plan shall be limited to the lesser of:

- i. the balance of expenses not covered by benefits payable under another insurance policy or any other means; and
- ii. the maximum benefit specified in the benefit schedule.

12. Reasonable and customary and medically necessary

We will not cover the confinement / stay, treatment and / or charges incurred relates to or arises as a direct or indirect result of any treatment, investigation, services or supplies which are not medically necessary; or any charges which exceed the 'reasonable and customary' charges.

'Reasonable and customary' shall mean a charge for medical care which does not exceed the general level of charges including but not limited to the length of confinement being made by medical service providers of similar standing in the locality where the charge including but not limited to the length of confinement is incurred for similar treatment, services or supplies to individuals of the same sex and age, for a similar disease or injury. The reasonable and customary charges shall not in any event exceed the actual charges incurred. In determining whether an expense including but not limited to the length of confinement is reasonable and customary, we may make reference to the followings (if applicable):

- i. the gazette issued by the Hong Kong government which sets out the fees for the private patient services in public hospitals in Hong Kong;

- ii. industrial medical fee survey;
- iii. internal claim statistics;
- iv. extent or level of benefit insured; and / or
- v. other pertinent source of reference.

‘Medically necessary’ shall mean a medical service which:

- i. is consistent with the diagnosis and customary medical treatment for the condition in Hong Kong or Macau,
- ii. is in accordance with standards of good medical practice in Hong Kong or Macau,
- iii. is not for the convenience of the life insured or the doctor, and
- iv. cannot be safely delivered in a lower level of medical care.

13. Waiting period

Except for accidental injury, eligible for and coverage under the hospital benefits will commence at the later of:

- i. the issue date or 30 days after the date when the application for this plan is signed, whichever is later;
- ii. 30 days after the effective date of reinstatement; or
- iii. 30 days after the date of endorsement or the effective date of change of this plan / plan upgrade, whichever is later (only applicable to ManuShine Healthcare Benefit added after the policy has been issued).

Please also refer to ‘Effective Date of Benefits’ in the Policy Provisions or Benefit Provisions for detailed terms and conditions.

14. Exclusions and limitations

We will not cover condition results directly or indirectly from any of the following:

- i. The life insured’s injury or illness is a pre-existing condition; or
- ii. The confinement / stay, treatment and / or charges incurred relates to or arises as a direct or indirect result of:
 - a) the life insured’s pregnancy, surrogacy, childbirth or termination of pregnancy (other than the pregnancy complications which are covered by pregnancy complications under extended benefits of this plan), birth control, infertility or human assisted reproduction, or sterilisation of either sexes;
 - b) war, hostilities (whether war is declared or not), rebellion, insurrection, riot, civil commotion;
 - c) the life insured’s participation in any criminal offence; or terrorist act; or attempted suicide or self-inflicted injuries while sane or insane;
 - d) a cosmetic treatment performed on the life insured unless i) necessitated by injury caused by an accident and the life insured sustains the injury and the cosmetic treatment is approved by us in advance within 90 days of the accident; or ii) such treatment is covered by reconstructive surgery for cancer benefit under this plan;
 - e) corrective aids and treatment of refractive errors performed on the life insured unless necessitated by injury caused by an accident and the life insured receives the corrective aids treatment within 90 days of the accident;
 - f) procurement or use of medical appliances and medical devices for the benefit of the life insured including but not limited to spectacles, contact lenses, hearing aids or wheelchairs (unless such medical appliances and medical devices are covered by medical appliances of the surgical benefits of this plan);
 - g) convalescence or physical examinations, or health checks (whether with or without any positive finding(s)) on the life insured; or vaccination and immunisation received by the life insured; or genetic testing or counseling (other than the genetic test for targeted therapy which is covered by cancer treatment under extended benefits of this plan) on the life insured;
 - h) treatment or tests carried out in relation to the life insured’s injury or illness are not consistent with customary medical treatment or diagnosis;
 - i) narcotics used by the life insured unless taken as prescribed by a doctor, or the life insured’s abuse of drugs and / or alcohol;
 - j) Agaricus blazei murill, Antelope horn powder, Antler, Cordyceps, Cubilose, Donkey-hide Gelatin, Ganoderma, all kinds of ginseng, Hippocampus, Moschus, Pearl Powder and Placenta Hominis;
 - k) dental treatment or surgery performed on the life insured (unless such occurrence is covered by emergency dental (due to accident) of emergency treatment benefits of this plan);
 - l) scuba diving or engaging in or taking part in any kind of race other than on foot, mountaineering involving the use of ropes or guides by the life insured;
 - m) AIDS or any complications associated with HIV infection except for HIV / AIDS treatment benefit;

- n) mental disorder, psychological or psychiatric conditions, behavioral problems or personality disorder of the life insured unless such occurrence is covered by psychiatric treatment of confinement benefits of the plan;
- o) any congenital or inherited disorder or developmental conditions (only applicable if the disorder gives rise to signs or symptoms or was diagnosed before the life insured reaches age 16) of the life insured;
- p) any confinement primarily for physiotherapy or for the investigation of signs and / or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures;
- q) any treatment, investigation, services or supplies which are not medically necessary; or any charges which exceed the 'reasonable and customary' charges;
- r) non-medical services, including but not limited to guest meals, radio, telephone, photocopy, personal items, medical report charges and the like;
- s) experimental and / or unconventional medical technology / procedure / therapy performed on the life insured; or novel drugs / medicines / stem cell therapy not yet approved by the government, relevant authorities and recognised medical association in the locality;
- t) sleep disorders (except for the treatment of sleep apnoea which is life-threatening as confirmed by a specialist and approved by us in advance);
- u) treatment of obesity (including morbid obesity), weight control programmes or bariatric surgery (except when bariatric surgery is necessary as confirmed by a specialist after failure of conventional treatments and approved by us in advance);
- v) transplant service for which the cost incurred in connection with identifying and procuring a replacement organ or any costs incurred for removal of the organ from the donor, all associated transportation costs and administrative costs unless such cost incurred is covered by the living donor expenses for transplantation surgery benefit under this plan;
- w) treatment of sexually transmitted diseases; or sexual problems, such as impotence, whatever the cause, gender issues or sex changes or gender re-assignments except for HIV / AIDS treatment benefit;
- x) treatment whilst staying in hospital for more than 90 consecutive days if the life insured is in a persistent vegetative state characterised by wakefulness without awareness for more than 4 weeks; or
- y) any activity or disease which falls under the exclusion(s) as shown on the special provisions (if any) of this plan; or
- z) nuclear contamination, biological contamination or chemical contamination unless the confinement / stay, treatments and / or charges are made / performed / incurred as a direct result of such nuclear contamination, biological contamination or chemical contamination which i) is caused by terrorist act and ii) occurs while the life insured x) is travelling outside his or her residential area / home country and y) is not involved as a terrorist.

The above is only a general description of the exclusions. Please see the Policy Provisions or Benefit Provisions for the full list of the exact exclusions.

What we have said above is an outline of the circumstances under which we will not pay the policy benefits. You should see the Policy Provisions or Benefit Provisions for the exact terms and conditions and pay particular attention to those terms including but not limited to the clauses on 'effective date of benefits', 'pre-existing conditions' and 'limitation of claim', and the definitions of 'day case', 'disability', 'medically necessary' and 'reasonable and customary'.

In this product leaflet, 'you' and 'your' refer to the policyowner. 'Manulife', 'we', 'us' and 'our' refer to Manulife (International) Limited (incorporated in Bermuda with limited liability).

You should not buy this product unless you fully understand the product features and risks. For more information, please contact the licensed staff of the Bank or call our customer service hotline on (852) 2510 3383. If you have any doubts, please get professional advice from independent advisors.

From January 1, 2018, the Insurance Authority starts collecting levy on insurance premiums from policyowners. For details of the levy and its collection arrangement, please visit our website at www.manulife.com.hk/link/levy-en.

To view our Privacy Policy, you can go to our website at www.manulife.com.hk. You may also ask us not to use your personal information for direct marketing purposes by writing to us. You can find our address on our website. We will not charge you a fee for this.

This product leaflet is only for distribution in the Hong Kong Special Administrative Region.

Annual Premium Table — ManuShine Healthcare Series / Benefit

The premiums will vary depending on the age nearest birthday of the life insured at each policy anniversary and are not guaranteed. The annual premium table below (which comes into effect on 1 July, 2021) is for reference only and may be revised from time to time without notice to you.

Annual Premium Table (HK\$)^									
Plan	Elite			Premier			Classic		
Area of Cover	Worldwide			Worldwide exclude USA			Asia		
Age#	Annual Deductible (HK\$)^			Annual Deductible (HK\$)^			Annual Deductible (HK\$)^		
	0	8,000	22,800	0	8,000	22,800	0	8,000	22,800
0	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
1	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
2	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
3	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
4	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
5	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
6	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
7	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
8	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
9	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
10	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
11	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
12	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
13	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
14	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
15	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
16	31,868	21,280	13,865	19,398	13,748	8,899	12,062	8,608	5,514
17	32,527	21,729	14,236	19,786	14,002	9,106	12,310	8,793	5,637
18	33,196	22,191	14,617	20,182	14,259	9,320	12,565	8,979	5,762
19	33,882	22,664	15,007	20,587	14,522	9,537	12,823	9,170	5,890
20	34,580	23,146	15,410	21,000	14,790	9,759	13,089	9,366	6,022
21	35,297	23,639	15,823	21,418	15,062	9,986	13,358	9,564	6,154
22	36,022	24,138	16,247	21,844	15,340	10,218	13,635	9,769	6,293
23	36,769	24,653	16,681	22,281	15,624	10,458	13,917	9,978	6,433
24	37,526	25,177	17,129	22,731	15,912	10,703	14,204	10,191	6,577
25	38,300	25,712	17,585	23,182	16,204	10,951	14,497	10,408	6,723
26	39,090	26,259	18,057	23,645	16,504	11,207	14,795	10,628	6,873
27	39,899	26,816	18,539	24,120	16,809	11,467	15,100	10,857	7,027
28	40,723	27,387	19,035	24,602	17,118	11,737	15,412	11,088	7,183

Annual Premium Table (HK\$)^									
Plan	Elite			Premier			Classic		
Area of Cover	Worldwide			Worldwide exclude USA			Asia		
Age#	Annual Deductible (HK\$)^			Annual Deductible (HK\$)^			Annual Deductible (HK\$)^		
	0	8,000	22,800	0	8,000	22,800	0	8,000	22,800
29	41,562	27,968	19,546	25,093	17,433	12,009	15,731	11,323	7,344
30	42,422	28,564	20,068	25,596	17,754	12,292	16,055	11,565	7,507
31	43,299	29,169	20,604	26,108	18,084	12,577	16,387	11,811	7,674
32	44,191	29,790	21,158	26,631	18,418	12,872	16,726	12,063	7,843
33	45,104	30,422	21,724	27,163	18,757	13,171	17,069	12,319	8,018
34	46,035	31,070	22,305	27,707	19,100	13,479	17,422	12,581	8,197
35	46,985	31,730	22,900	28,259	19,454	13,793	17,782	12,848	8,381
36	47,385	31,991	23,075	29,139	20,052	14,206	17,934	12,953	8,443
37	47,687	32,183	23,207	30,050	20,669	14,640	18,047	13,030	8,490
38	48,090	32,440	23,378	30,984	21,305	15,082	18,197	13,133	8,552
39	50,299	33,865	24,333	31,948	21,922	15,471	19,027	13,705	8,897
40	52,507	35,286	25,288	32,943	22,562	15,878	19,855	14,274	9,241
41	54,718	36,710	26,241	33,966	23,224	16,303	20,687	14,842	9,587
42	56,928	38,131	27,199	35,027	23,906	16,743	21,516	15,415	9,931
43	59,137	39,554	28,154	36,117	24,614	17,202	22,343	15,984	10,272
44	61,548	41,107	29,192	37,240	25,342	17,671	23,247	16,607	10,650
45	63,959	42,658	30,234	38,402	26,094	18,156	24,153	17,227	11,026
46	66,470	44,275	31,320	40,311	27,353	18,996	25,097	17,875	11,416
47	68,879	45,827	32,363	42,315	28,680	19,880	26,002	18,498	11,793
48	71,290	47,381	33,403	44,419	30,071	20,810	26,908	19,119	12,168
49	74,405	49,385	34,749	46,628	31,524	21,770	28,075	19,923	12,653
50	77,516	51,391	36,094	48,949	33,052	22,783	29,242	20,723	13,139
51	82,392	54,642	38,187	51,982	35,111	24,068	31,056	21,985	13,914
52	87,571	58,101	40,400	55,207	37,304	25,425	32,982	23,322	14,734
53	93,074	61,779	42,745	58,633	39,629	26,863	35,025	24,743	15,609
54	98,926	65,690	45,223	62,269	42,100	28,378	37,195	26,239	16,518
55	105,144	69,850	47,842	66,127	44,726	29,979	39,502	27,829	17,485
56	111,755	74,271	50,617	70,231	47,515	31,672	41,950	29,521	18,516
57	118,779	78,972	53,551	74,585	50,479	33,458	44,551	31,318	19,611
58	126,248	83,972	56,656	79,213	53,626	35,348	47,311	33,227	20,777
59	134,183	89,287	59,939	84,124	56,970	37,342	50,243	35,238	21,984
60	142,621	94,937	63,417	89,342	60,523	39,448	53,356	37,373	23,273
61	151,585	100,949	67,092	94,883	64,297	41,673	56,665	39,649	24,646
62	161,117	107,340	70,981	100,768	68,307	44,026	60,177	42,063	26,110
63	171,243	114,134	75,097	107,017	72,564	46,514	63,910	44,631	27,664
64	182,009	121,358	79,451	113,653	77,092	49,136	67,871	47,357	29,310
65	193,452	129,041	84,057	120,700	81,898	51,910	72,076	50,249	31,061
66	205,611	137,210	88,929	128,188	87,006	54,842	76,547	53,324	32,926
67	214,882	143,398	92,940	133,945	90,914	57,303	79,982	55,682	34,345
68	224,154	149,584	96,950	139,704	94,827	59,768	83,421	58,040	35,764
69	233,427	155,772	100,960	145,463	98,733	62,229	86,860	60,407	37,200

Annual Premium Table (HK\$)^									
Plan	Elite			Premier			Classic		
Area of Cover	Worldwide			Worldwide exclude USA			Asia		
Age#	Annual Deductible (HK\$)^			Annual Deductible (HK\$)^			Annual Deductible (HK\$)^		
	0	8,000	22,800	0	8,000	22,800	0	8,000	22,800
70	244,358	163,066	105,687	152,266	103,350	65,141	90,920	63,208	38,900
71*	256,593	171,324	111,038	159,951	108,565	68,428	95,508	66,375	40,826
72*	269,439	179,996	116,660	168,023	114,045	71,881	100,328	69,699	42,849
73*	282,929	189,105	122,567	176,503	119,802	75,508	105,388	73,193	44,976
74*	297,096	198,678	128,769	185,409	125,846	79,320	110,705	76,858	47,203
75*	311,971	208,736	135,289	194,768	132,198	83,323	116,293	80,713	49,543
76*	326,152	223,687	144,977	208,656	141,626	89,266	124,584	86,441	53,032
77*	342,022	232,196	150,495	216,579	147,003	92,656	129,314	89,698	55,006
78*	360,253	240,710	156,011	224,502	152,378	96,044	134,042	92,951	56,976
79*	371,732	249,221	161,528	232,421	157,756	99,432	138,772	96,201	58,942
80*	376,941	255,473	165,582	239,289	161,708	102,370	142,871	98,584	60,638
81*	386,126	264,653	171,530	248,975	167,502	106,516	148,652	102,086	63,050
82*	392,962	270,323	175,204	255,470	171,084	109,293	152,531	104,244	64,653
83*	402,815	277,100	179,598	263,111	175,371	112,560	157,087	106,826	66,533
84*	412,825	283,985	184,061	270,950	179,731	115,916	161,768	109,447	68,465
85*	422,995	290,980	188,594	278,999	184,158	119,359	166,573	112,111	70,447
86*	435,514	299,593	194,176	287,258	189,611	122,893	171,502	115,398	72,482
87*	448,361	308,430	199,903	295,730	195,202	126,515	176,559	118,767	74,571
88*	461,536	317,493	205,778	304,421	200,938	130,234	181,745	122,228	76,710
89*	475,051	326,790	211,804	313,335	206,821	134,048	187,066	125,776	78,906
90*	488,906	336,322	217,979	322,472	212,854	137,957	192,521	129,413	81,158
91*	503,111	346,093	224,312	331,839	219,038	141,965	198,114	133,141	83,467
92*	517,666	356,108	230,804	341,444	225,376	146,073	203,843	136,964	85,835
93*	532,585	366,370	237,456	351,283	231,870	150,282	209,718	140,881	88,260
94*	547,868	376,884	244,269	361,361	238,523	154,596	215,733	144,895	90,746
95*	563,521	387,650	251,248	371,687	245,339	159,013	221,897	149,005	92,255
96*	579,552	398,676	258,395	382,261	252,318	163,534	228,206	153,215	93,744
97*	595,961	409,967	265,711	393,084	259,459	168,166	234,668	157,523	95,205
98*	612,756	421,520	273,200	401,838	266,774	172,905	241,279	161,935	96,641
99*	629,942	433,341	280,864	408,248	274,257	177,756	248,045	166,447	98,043

^HK\$8 = US\$1

#Any reference to a specified age will mean the policy anniversary on which the life insured's age, nearest birthday, is the specified age.

*For renewal only

Remarks: • The premiums above are for annual payment mode. The following adjustment factor will be multiplied to the premiums above for the premium payable at each premium due date for the respective payment modes: Semi-annual: 0.52, Quarterly: 0.265, Monthly: 0.09.

• The premiums above do not include levy which is collected by the Insurance Authority.



醫療(人壽)保險

活亮人生醫療 保障系列 / 附加保障 ManuShine Healthcare Series / Benefit

本產品單張為星展銀行(香港)有限公司
(「銀行」)客戶之版本，「活亮人生醫療
保障系列」/「活亮人生醫療附加保障」
是由宏利人壽保險(國際)有限公司
(於百慕達註冊成立之有限責任公司)
(「宏利」)承保的醫療(人壽)保險計劃。
銀行為宏利之持牌保險代理機構。



活亮人生醫療保障系列 / 附加保障

隨著人生階段向前，面對事業發展及更大的家庭責任時，一份周詳的醫療計劃，可讓您及您的摯愛無憂，於需要時獲得適切的優質治療。

「活亮人生醫療保障系列」/「活亮人生醫療附加保障」(「活亮人生」或本計劃)分別提供標準、優越及卓越三個計劃。計劃設有三個每年自付額的選擇，分別為零自付額、8,000 港元 / 1,000 美元或 22,800 港元 / 2,850 美元。選擇自付額較高的計劃可以享有更相宜的保費。

「活亮人生」乃宏利提供及承保的償款住院保險產品，並提供基本計劃(「活亮人生醫療保障系列」)或附加保障(「活亮人生醫療附加保障」)。本產品單張只提供本產品之一般資料，並不構成保單的一部分，及並未載有保單的所有條款。您應參閱「活亮人生醫療保障系列」之保單條款(「保單條款」)或「活亮人生醫療附加保障」之保障條款(「保障條款」)以了解本產品之確實條款及細則。我們可按閣下要求提供該等複本。



周全醫療保障及服務

不論受保人的健康狀況如何，「活亮人生」為受保人終身提供每年保證續保(見註1)。計劃全數賠償多個主要保障項目，且不設分項賠償限額(見註2)。另外，門診日間手術亦可獲保障，給予您更大彈性。

- **周全的住院及外科手術保障**，包括全數賠償(見註2)住房費、手術費、醫生巡房費、專科醫生費、醫院雜費、深切治療、麻醉師費、手術室費、門診手術費及指定醫療裝置之費用(見註3)。
- **住院前及出院後保障**，守護着您的醫療康復之路。我們為您提供住院前 / 出院後的門診治療、以及於出院 / 門診手術後的輔助治療如註冊脊椎治療師、物理治療師及註冊營養師診治等的費用保障。額外醫療保障如私家看護及復康治療之相關費用亦可獲得賠償。
- **全力支援癌症復康**，為癌症治療包括電療、化療、免疫療法、質子治療、激素治療及標靶治療(包括因標靶治療而接受的遺傳基因測試之費用)提供全數賠償(見註2及4)。而未有在香港註冊的指定病人之進口癌症藥物(見註5)及癌症重建手術(見註6)費用亦屬保障範圍內。
- **其他延伸保障**如透析治療及妊娠併發症均獲全數賠償(見註2及7)。而於受保人住院期間 / 出院或門診手術後之中醫治療亦獲保障，讓您安心無憂。

計劃的賠償額將根據相關計劃的每年最高賠償限額及個人終身賠償限額而定。有關詳情，請參閱保障表。



多種現金保障

此計劃提供多項現金保障以作經濟支援，而每年自付額(如適用)並不會受這些現金保障賠償所影響。

- 若受保人入住政府醫院之普通病房，我們將支付住院現金保障，即使該次住院並未有就治療產生任何費用仍可作出索償。
- 若受保人於私家醫院入住低於計劃下適用之房間級別，我們將支付住院現金保障。
- 若受保人於門診進行指定手術(即食管胃十二指腸鏡檢查及結腸鏡檢查)，我們將支付現金保障。此項門診現金保障賠償並不會影響「無索償期」(見註8)。

有關詳情，請參閱保障表。



代繳住院費用服務

當您需要住院及進行治療，您或會難以籌措充足現金以支付突如其來的醫療費用。您可在入院前申請代繳住院費用服務的安排。一經批核，我們會代您直接向醫院繳付合資格住院及手術費用的授權金額(見註9)。因此，您無需擔心處理醫院賬單，安心專注於康復之上。



就醫綠色通道服務 (見註10)

「活亮人生」提供就醫綠色通道服務，為受保人提供特享的醫療轉介服務。只需幾個簡單步驟，受保人可預約於中國內地之指定網絡醫院內接受專業醫護人員進行門診及住院之醫療診治，無須再為預約及輪候擔憂。



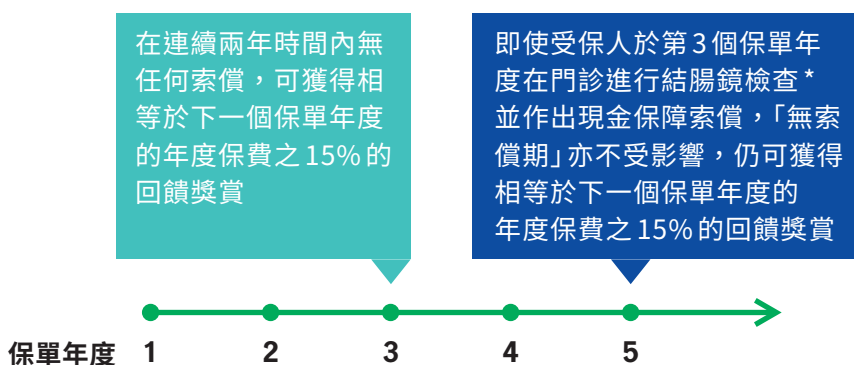
廣泛醫療網絡

為確保受保人享有更優質及整全之醫療服務，本計劃下之中國內地指定醫院名單覆蓋中國各大城市，更包括**中國內地的三級甲等政府醫院**(見保障表的備註(a)一項)。



無索償自付額 回饋獎賞

若此計劃符合兩年「無索償期」(見註8)條款，即可獲得自付額回饋獎賞(見註11)。回饋獎賞相等於您下一個保單年度的年度保費之15%。當有需要提出索償時，回饋獎賞可用於抵銷有需要自行負擔的自付額。



* 以上說明例子假設除了此現金保障外在本計劃下並沒有任何索償。

其他特色



隨時隨地給予受保人周全保障 (見註12)

傷病 (根據保單條款或保障條款之定義) 索償一經批核後，受保人可透過第二醫療意見服務，獲得由美國頂尖專科醫生團隊提供的第二醫療意見。另外，他們可以優惠價於美國指定醫院接受醫療服務。計劃亦設有緊急醫療援助，若受保人不幸在外地發生意外，亦可獲得及時的醫療支援。



健康管理站協助保持強健體魄 (見註13)

只要計劃已連續生效兩年，以及受保人於第2個連續保單年度開始時已達30歲，「活亮人生」將每兩個連續保單年度提供一次免費健康檢查。健康管理站會因應受保人不同的人生階段度身設計合適的健康檢查計劃。



不論健康狀況如何，可自由選擇於55、60或65歲時減低每年自付額一次

為了提供更大彈性及助您計劃退休，您可於受保人緊接55、60或65歲時享有一次減低計劃的每年自付額的選擇，而無需提供額外受保證明 (見註14)。



計劃一覽

活亮人生醫療保障系列 / 附加保障



產品目的及性質

償款住院保險產品，適合有醫療保障需要的非香港或非澳門客戶。



產品類別

基本計劃 / 附加保障



保單 / 保障年期

保障期為一年。於繳付保費後保證終身續保(見註1)。



保費繳付期

保費須於受保人在世期間每保單年度繳交。保費並非保證(見註1)。



投保年齡

15日至70歲



保單貨幣

港元 / 美元



保費繳付形式

每年 / 每半年 / 每季 / 每月



保障地區

環球(卓越計劃) / 環球美國除外(優越計劃) / 亞洲(標準計劃)
有關詳情，請參閱保障表。



保費表

請參閱「每年保費表 — 活亮人生醫療保障系列 / 附加保障」。



免費加入 Manulife**MOVE**， 獲享高達10%的保費折扣！

Manulife**MOVE**是個創新的保險概念，透過保費折扣鼓勵客戶投入健康活力生活。

您只需投保「活亮人生」為受保人，並年滿18歲，即合資格成為 Manulife**MOVE**會員。成功啟動您的MOVE應用程式賬戶，並達到下表所示的每日平均步數，即可在下一會籍年度續保「活亮人生」時，獲享高達10%#的保費折扣。

MOVE 獎賞級別	每日平均步數	保費折扣 (適用於下一個保 單年度的到期及應 繳保費)
級別1	 5,000	5%
級別2	 7,000	7%
級別3	 10,000	10%

Manulife**MOVE**會員亦將獲得定期更新的生活小貼士，有助投入健康生活。

 Manulife
MOVE

更多詳情，請瀏覽 www.ManulifeMOVE.hk。

有關保費折扣優惠須受條款及細則約束。宏利有權更改、終止或取消此保費優惠而不作另行通知。如欲了解條款及細則詳情以及最新公佈，請瀏覽 www.ManulifeMOVE.hk。

1. 本計劃的保障期為一年，並於每保單周年日續保。我們保留權利於每次續保時修訂保障、條款及細則以及保費。保費並非保證，我們會不時調整保費。請參閱以下「重要事項」的「續保」部分。
2. 全數賠償是指扣除餘下的每年自付費(如有)後的合資格費用及 / 或其他費用之實際金額的賠償，並受限於每年最高賠償限額、個人終身賠償限額及其他限制。全數賠償只適用於指定保障項目，而其他保障項目並不獲全數賠償及受限於相關項目的賠償限額。詳情請參閱保障表及保單條款或保障條款。
3. 指定醫療裝置包括起搏器、經皮冠狀動脈腔內成形術的支架、眼內人造晶體、人工心瓣、關節置換術的金屬或人工關節、置換或植入於關節的人工韌帶以及人工椎間盤。非指定醫療裝置需根據保障表內列明每個保單年度的賠償限額為上限，透過手術而置換的外置義肢及人造耳 / 眼球均視為非指定醫療裝置。詳情請參閱保單條款或保障條款。
4. 若受保人證實患上受保癌症，此項癌症治療保障將賠償受保人純粹為使用特定標靶治療藥物而接受的遺傳基因測試的合理及慣常收費的費用，而遺傳基因測試必須由受保人的主診醫生以書面建議。有關遺傳基因測試須旨在判定是否存在特定的基因變異，以確認受保人會否對該標靶治療藥物作出反應，而受保人必須由醫療報告證明其符合應用該標靶治療藥物的特定標準。有關遺傳基因測試及相關之標靶治療藥物的治療方案必須已獲處方該標靶治療藥物之當地政府、相關機構及認可醫學會批准。如果當地沒有有關監管遺傳基因測試之相關法律、機構或認可醫學會，則以美國、英國或歐洲採用之規管為準。詳情請參閱保單條款或保障條款。
5. 若受保人證實患上受保癌症，此項癌症治療保障將賠償受保人就使用未有在香港註冊的癌症藥物的合理及慣常收費的費用。有關癌症藥物必須只供受保人在香港進行相關癌症治療之用，並須由受保人的主診註冊醫生以書面建議。有關癌症藥物之進口必須獲香港衛生署根據香港有關法例及規則以指定患者的方式作出批准。該等已獲批准的進口藥物及其相關治療方案亦必須獲得銷售有關藥物之當地政府、相關機構及當地認可醫學會作出批准及銷售許可。受保人使用的進口藥物必須是在臨床上適當的，並須符合相關監管機構所批准的用途及劑量、服用次數及持續期。如果在使用進口藥物之地區沒有相關法律、機構或認可醫學會，則以美國、英國或歐洲採用之規管為準。詳情請參閱保單條款或保障條款。
6. 癌症重建手術保障將賠償由受保人的主診醫生建議(a)受保人及(b)因受保癌症住院及接受治療後由醫院出院當日起計12個月內進行重建手術而引致之合理及慣常的實際收費。詳情請參閱保單條款或保障條款。
7. 我們將賠償受保人於本保單生效日期起計連續12個月後被確診的受保障之妊娠期併發症而須住院及於醫院進行手術之費用，且由醫生以書面所建議。有關受保障之妊娠期併發症之詳情，請參閱保單條款或保障條款。
8. 「無索償期」用作計算自付額回饋獎賞。有關計算無索償期的條款及細則，請參閱保單條款或保障條款。
9. 代繳住院費用服務並不是構成本計劃的一部分。此服務是一項行政安排，並不屬於保單的產品特點。此服務只適用於本計劃已連續生效180日之後。我們有權隨時終止此項服務而不另行通知。您須於受保人每次住院前不少於五個工作天，以指定表格及程序申請代繳住院費用服務。如因不受保事項或其他原因而引致入住醫院，將不會獲發初步授權金額。保證書將於申請成功批核後簽發。您須提供治療資料及必須於受保人出院時填妥並交回本公司指定的賠償表格。代繳住院費用服務的獲享資格及保證書的簽發以我們的最終決定為準。若住院費用超出可獲賠償限額或因本保單的不受保障項目所引致，您便需要支付該差額。
10. 就醫綠色通道服務由第三者醫療服務機構提供，該機構為獨立的承辦商，並非本公司的代理。本公司保留隨時取消就醫綠色通道服務之權利並會作出另行通知。本公司不會就有關醫療服務供應者提供之任何服務作出任何表述、保證或承諾，及不會就您或受保人因該機構及 / 或其代理所提供之服務或建議或該等服務之供應而直接或間接蒙受或招致之任何損失、損害、費用、起訴、訴訟或法律程序，向您或受保人承擔任何責任。本公司及 / 或就醫綠色通道服務供應商提供的此項服務並不視作本公司同意承擔支付及 / 或賠償本計劃下任何醫療費用之責任。有關就醫綠色通道服務條款之最新條款及細則，請瀏覽我們的網站(www.manulife.com.hk)。

11. 自付額回饋獎賞只適用於設有每年自付額的計劃。若本計劃下任何與前兩個連續保單年度有關之賠償因自付額回饋獎賞而導致應付賠償金額增加後，而應予賠付，我們應從應予賠付的索償金額中扣除該增加的金額。否則，該金額將被視作債務，由我們向保單持有人全額索償。有關自付額回饋獎賞之計算方法及相關條款及細則，請參閱保單條款或保障條款。
12. 第二醫療意見及緊急醫療援助由第三方服務機構提供，該機構為獨立的承辦商，並非我們的代理。我們並不就有關醫療服務機構及 / 或醫院提供之任何醫療意見以及就該服務供應商之任何服務供應作出任何陳述、保證或承諾。第三方服務供應機構或不時變更指定醫院名單。有關醫療轉介服務條款及內地及國際緊急援助保障條款之最新條款及細則，請瀏覽我們的網站(www.manulife.com.hk)。
13. 健康管理站只適用於香港及澳門。我們保留隨時修訂或終止此健康管理站的權利並不作另行通知。健康管理站由第三方服務機構提供，該機構為獨立的承辦商，並非我們的代理。我們並不就該服務機構所能提供之任何服務(包括驗身服務)作出任何陳述、保證或承諾，及不會就您或受保人因該機構及 / 或其代理所提供之服務(包括健康管理站)或建議或該等服務之供應而直接或間接蒙受或招致之任何損失、損害、費用、起訴、訴訟或法律程序，向您或受保人承擔任何責任。
14. 於緊接受保人 55、60 或 65 歲的保單周年日之前或之後的 31 天內，您可申請享有一次減低現有每年自付額而無需額外提供健康狀況證明。此項權利在受保人一生只可行使一次且一經行使便不可撤回。在減低每年自付額後，應支付保費應包括按我們現行採用就該每年自付額選項的保費表內的保費，及保單持有人曾就保單所接受的任何附加保費。

保障表

計劃	最高賠償限額(港元 / 美元)		
	卓越計劃	優越計劃	標準計劃
保障地區	環球 ^{(a) (b)}	環球美國除外 ^{(a) (c)}	亞洲 ^{(a) (d)}
保障地區範圍外	全部地區均獲保障	只限於緊急治療	只限於緊急治療
每年最高賠償限額	22,000,000港元 / 2,750,000美元	20,000,000港元 / 2,500,000美元	12,000,000港元 / 1,500,000美元
個人終身賠償限額 ^(e)	66,000,000港元 / 8,250,000美元	60,000,000港元 / 7,500,000美元	36,000,000港元 / 4,500,000美元
每年自付額選項 (只適用於保障表I至V部分)	0港元 / 0美元 或 8,000港元 / 1,000美元 或 22,800港元 / 2,850美元		

醫療保障項目

I. 住院保障

(1) 住房費 ^(f)	全數保障		
(2) 醫生巡房費	全數保障		
(3) 專科醫生費	全數保障		
(4) 醫院雜費	全數保障		
(5) 深切治療	全數保障		
(6) 住院陪床費	全數保障		
(7) 私家看護費 (每個保單年度最高賠償日數)	全數保障 (最多90日)	全數保障 (最多60日)	全數保障 (最多30日)
(8) 入住政府醫院普通病房之住院現金 (每日) ^(g)	1,800港元 / 225美元	1,200港元 / 150美元	1,000港元 / 125美元
(9) 精神疾病治療 (每個保單年度)	66,000港元 / 8,250美元	55,000港元 / 6,875美元	44,000港元 / 5,500美元
(10) 入住私家醫院較低房間級 別之住院現金 (每日) ^(h)	1,800港元 / 225美元	1,200港元 / 150美元	1,000港元 / 125美元

II. 外科手術保障

(1) 手術費	全數保障		
(2) 麻醉師費	全數保障		
(3) 手術室費	全數保障		
(4) 門診手術費	全數保障		
(5) 醫療裝置 (見註3)	全數保障 (非指定醫療裝置限額為每個保單年度100,000港元 / 12,500美元)		
(6) 門診手術現金 (每項手術) (每日最多一項手術) ⁽ⁱ⁾	1,800港元 / 225美元	1,200港元 / 150美元	1,000港元 / 125美元
(7) 癌症重建手術 (每項受保癌症) (見註6)	330,000港元 / 41,250美元	275,000港元 / 34,375美元	220,000港元 / 27,500美元

計劃	最高賠償限額 (港元 / 美元)		
	卓越計劃	優越計劃	標準計劃
III. 住院前及出院後保障			
(1) 住院 / 門診手術前門診	全數保障 (住院前 / 於門診接受手術程序前31日內的診治以及最多每日診治1次)		
(2) 出院 / 門診手術後門診	全數保障 (出院後 / 於門診接受手術程序後60日內的診治以及最多每日診治1次)		
(3) 出院後私家看護 (每個保單年度最高賠償日數)	全數保障 (最多120日)	全數保障 (最多60日)	全數保障 (最多30日)
(4) 出院 / 門診手術後輔助治療 (每個保單年度) – 註冊脊椎治療師、物理治療師、 言語治療師、職業治療師或 註冊營養師診治	60,000港元 / 7,500美元	45,000港元 / 5,625美元	30,000港元 / 3,750美元
(出院後 / 於門診接受手術程序後90日內的診治，最多每日診治1次及 每個保單年度最多診治60次)			
(5) 復康治療 (每個保單年度)	110,000港元 / 13,750美元	88,000港元 / 11,000美元	55,000港元 / 6,875美元
IV. 延伸保障			
(1) 癌症治療	全數保障		
(2) 透析治療	全數保障		
(3) 人體免疫力缺乏病毒 / 愛滋病治療 (以終身計算) ⁽ⁱ⁾	1,000,000港元 / 125,000美元	900,000港元 / 112,500美元	800,000港元 / 100,000美元
(4) 在生捐贈者之移植手術費用 (每項傷病) ^(k)	1,056,000港元 / 132,000美元	880,000港元 / 110,000美元	704,000港元 / 88,000美元
(5) 中醫治療	每次880港元 / 110美元	每次770港元 / 97美元	每次660港元 / 83美元
(住院期間 / 出院後或於門診接受手術程序後90日內的診治， 最多每日診治1次及每個保單年度最多診治20次)			
(6) 善終服務 (以終身計算)	220,000港元 / 27,500美元	132,000港元 / 16,500美元	88,000港元 / 11,000美元
(7) 妊娠併發症 (見註7)	全數保障		
V. 緊急治療保障			
(1) 意外急症門診治療	全數保障		
(2) 意外牙齒創傷治療 (意外導致)	全數保障		
身故賠償保障			
(1) 恩恤身故賠償	80,000港元 / 10,000美元		
(2) 意外身故賠償	80,000港元 / 10,000美元		
其他服務 ^(l)			
(1) 健康管理站	包括		
(2) 第二醫療意見	包括		
(3) 緊急醫療援助	包括		
(4) 就醫綠色通道服務	包括		

保障表 – 備註

(a) 就中國內地之保障(台灣、香港及澳門除外)，我們只會認可於中國內地指定醫院名單內列明的醫院。在下列情況下，我們會將本計劃下應予支付之賠償金額(身故賠償保障除外)減少 50%：

- 若選擇亞洲保障的計劃；及
- 若費用於我們的醫院名單下被評定為「卓越醫院」的醫院內產生。

我們將不時更新及修訂有關指定中國內地醫院名單，並不作另行通知。有關最新中國內地指定醫院名單，請參閱本公司網站(www.manulife.com.hk)或致電客戶服務熱線。

(b) 在下列情況下，我們會將本計劃下應予支付之賠償金額(身故賠償保障除外)減少 50%：

- 若受保人在美國住院、接受治療或醫療服務時，在過去 12 個月已居住於美國至少 183 日或以上；或
- 若受保人於美國之任何住院或接受門診手術並沒有獲我們預先批核(因意外或緊急事故直接引致則除外)。

(c) 環球美國除外：全球各地，但不包括美國及美國本土以外的小島嶼。

(d) 亞洲：阿富汗、澳洲、孟加拉、不丹、汶萊、柬埔寨、中國、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克、越南。

(e) 個人終身賠償限額是指我們不時為保障受保人而簽發的所有保單(不論保單是否仍然生效)可支付的最高醫療保障賠償總額，而此等保單按其各自相關條款及細則訂有個人終身賠償限額的限制。

(f) 於卓越計劃、優越計劃以及標準計劃(於澳洲、香港及新西蘭以外的亞洲地區住院)下，將支付受保人在住院期間入住設有私人設施(只包括睡房及浴室)並只供受保人私人使用的標準私家病房，但不包括設有廚房、飯廳或客廳等之任何以上等級病房之住房費。

於標準計劃下，若於澳洲、香港或新西蘭住院，將支付受保人在住院期間入住標準半私家病房，即是指受保人在住院期間入住設有單人床(只包括共用的浴室)或供兩人使用的標準半私家病房之住房費。

在任何情況下，若受保人在住院期間不論自願或非自願而入住以下級別的病房：

- i. 就亞洲保障的計劃，於澳洲、香港及新西蘭醫院入住高於標準半私家級別之病房，但不高於標準私家級別之病房；我們將就住院期間的住院及手術保障應支付之賠償金額減至 50%；或
- ii. 若入住高於標準私家級別之病房，我們將就住院期間的住院及手術保障應支付之賠償金額減至 25%。

(g) 入住政府醫院普通病房之住院現金保障只適用於 1) 持有香港身份證之受保人，經醫生建議入住香港政府醫院的普通病房為住院病人；或 2) 持有澳門身份證之受保人，經醫生建議入住澳門政府醫院的普通病房為住院病人，就傷病接受屬必須之醫療服務的治療，而不論該次住院有否就治療產生任何費用。

(h) 入住私家醫院較低房間級別之住院現金保障只適用於當受保人入住受保地區的私家醫院為住院病人，及入住低於受保人於本計劃下適用之房間級別，並接受傷病所導致之必須之醫療服務而產生費用。

(i) 門診手術現金保障只適用於受保人因傷病及必須之醫療服務所需的治療於門診進行指定手術(即食管胃十二指腸鏡檢查及結腸鏡檢查)。可支付的門診手術保障金額限於每日最多一項手術及於保障表列明之最高賠償限額。

(j) 人體免疫力缺乏病毒 / 愛滋病治療保障只限於該疾病的徵狀或病徵於保單連續生效滿 5 個保單年度後首次發生方獲得賠償。此項保障只限支付一次賠償，最高賠償金額以保障表內列明此項保障的限額為上限。

(k) 我們將賠償器官捐贈者於醫院進行在生器官捐贈予受保人所產生之合理及慣常的實際收費。若在生器官捐贈於中國(台灣、香港及澳門除外)的醫院內進行，必須於當地認可之器官移植機構由認可之器官移植醫生進行及獲得器官之程序必須根據當地醫療及法律規管進行，則器官捐贈者於在生器官捐贈所產生之費用將獲賠償。詳情請參閱保單條款或保障條款。

(l) 有關服務(包括健康管理站、第二醫療意見、緊急醫療援助及就醫綠色通道服務)由第三服務供應商提供，我們將不時修改有關服務詳情，恕不另行通知。

可享全數賠償主要項目的醫療開支

黃太(45歲)，為保障個人健康，她投保了「活亮人生醫療保障系列(標準計劃)」，並選擇每年自付額為8,000港元。

於60歲時，她的右膝蓋感到痛楚及僵硬，後來被確診患上右膝關節炎，並在醫生建議下接受全人工膝關節置換手術。她在香港一家私家醫院的半私家房留院6日。回家後，她繼續接受門診及輔助治療。

所接受的醫療服務	醫療費用	 全數賠償 [^]
住院前		
• 住院前門診(1次)	1,500 港元	
住院		
• 住房費(6日)	6,650 港元	
• 醫生巡房費(7日)	8,400 港元	
• 醫院雜費	65,600 港元	
• 手術費	75,000 港元	
• 麻醉師費	25,000 港元	
• 手術室費	9,330 港元	
出院後		
• 出院後門診(2次)	3,000 港元	
• 出院後輔助治療(6次) [@]	6,000 港元	
總額	200,480 港元	
減: 每年自付額	(8,000 港元)	
計劃下可獲賠償的醫療費用	192,480 港元	

在「活亮人生醫療保障系列」的保障下，黃太只需繳付每年自付額而無須擔心任何其他各項自費開支。除住院治療外，由住院前至出院後的醫療費用均可獲全數賠償[^]。

若黃太的計劃符合兩年「無索償期」(見註8)之要求，她可用自付額回饋獎賞(相等於年度保費之15%)，以抵銷於索償時其8,000港元的每年自付額。

[^] 全數賠償僅適用於上述情況。

[@] 賠償限額為每保單年度30,000港元。

(上述例子只屬假設並僅供說明用途。上述例子乃假設相關之賠償限額均未耗盡及在出院後分別於60日及90日內接受門診及輔助治療，並假設黃太於索償前沒有在此計劃下作任何索償。)

自付額回饋獎賞 (見註10)

當提出索償時，自付額回饋獎賞可用作抵銷每年自付額。若受保人已擁有其他醫療保障，自付額回饋獎賞可用作抵銷自付額，因此部分或全部沒有其他醫療保障賠償的醫療開支或可被抵銷。由本計劃及其他醫療保障 (如有) 的總賠償不能多於實際醫療開支。

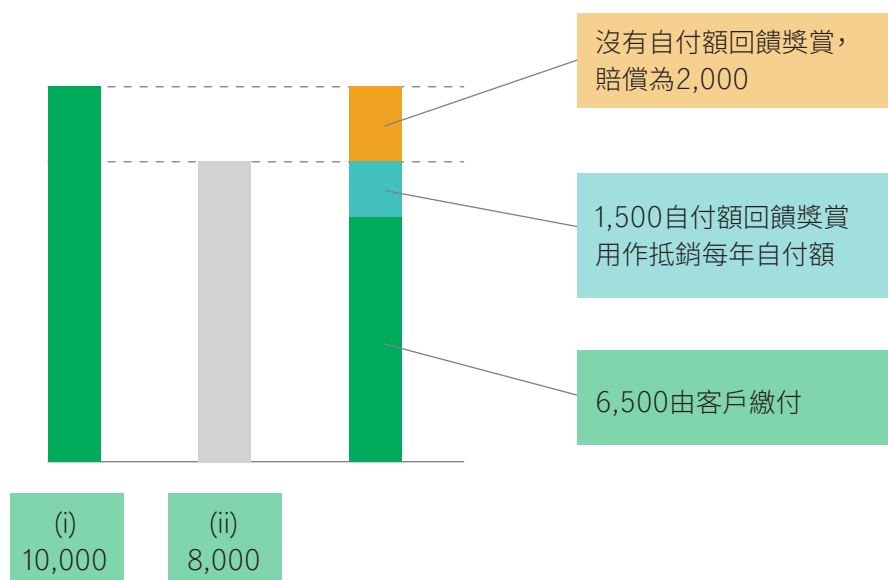
說明例子1：

(所有數字均為港元)

每年自付額 = 8,000

自付額回饋獎賞 = 1,500

合資格醫療費用的賠償金額 - (i)	10,000
每年自付額 - (ii)	8,000



沒有自付額回饋獎賞，賠償為	$10,000 - 8,000 = 2,000$
有自付額回饋獎賞，賠償為	$2,000 + 1,500 = 3,500$
於索償後的自付額回饋獎賞	$1,500 - 1,500 = 0$

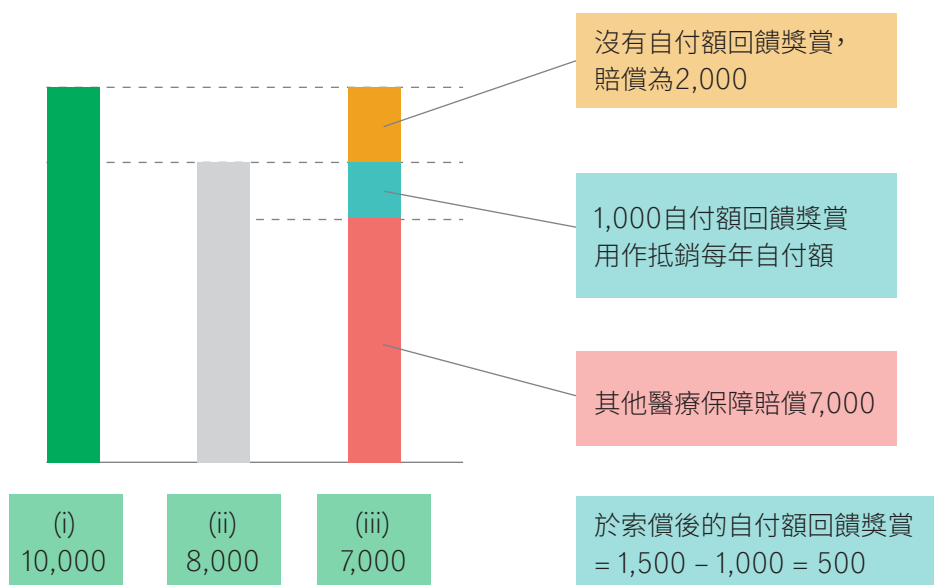
說明例子 2：

(所有數字均為港元)

每年自付額 = 8,000

自付額回饋獎賞 = 1,500

合資格醫療費用的賠償金額 – (i)	10,000
每年自付額 – (ii)	8,000
其他醫療保障賠償的醫療開支 – (iii)	7,000



沒有自付額回饋獎賞，賠償為	$10,000 - 8,000 = 2,000$
有自付額回饋獎賞，賠償為	$2,000 + 1,000 = 3,000$
於索償後的自付額回饋獎賞	$1,500 - 1,000 = 500$

由於本計劃及其他醫療保障的總賠償不能多於實際醫療開支，只有1,000 港元自付額回饋獎賞被用作抵銷每年自付額。

以上例子只屬假設並僅供說明用途，有關詳情，請參閱保單條款或保障條款。

重要事項

1. 產品性質

本產品是一份沒有儲蓄成分的償款住院保險產品。本產品沒有現金價值。本產品適合需要醫療保障產品及於需要醫療保障時有能力繳付保費的客戶。因此，您應預備足夠的資金以繳付未來的保費。保費用以支付保險及相關費用。

2. 冷靜期(適用於本計劃為基本計劃的情況下)

若您不滿意保單，您有權在冷靜期內取消保單，並獲退還任何已繳保費及任何已繳保費徵費。如要取消保單，您必須在冷靜期內將已簽署的書面通知直接送達宏利人壽保險(國際)有限公司個人理財產品部：香港九龍觀塘偉業街223-231號宏利金融中心A座22樓。換言之，取消保單的書面通知需於緊接保單或通知書(通知您保單可供領取及冷靜期的屆滿日)交付予您或您的指定代表之日起計21個曆日期間內送達宏利的有關地址，以較先者為準。冷靜期結束後，若閣下取消保單，已繳付的保費並不會退回。

3. 保費調整

您須繳交之保費金額會隨受保人年齡改變及並非保證。本公司會定期檢視本公司之產品，包括保費率，以確保可繼續提供保障。於檢視保費率時，本公司將考慮本公司的理賠經驗、醫療成本上漲及其他因素。本公司可於每個保單周年日調整保費率。

4. 保費年期及欠繳保費的後果

您須於整個保障期按時繳付保費。若您未能按時繳交保費，由到期日起計您可獲31天寬限期，而期間保單仍然有效。若您於31天寬限期後仍未繳交保費，保單將告失效而不作另行通知，而受保人亦不再受保障。

5. 信貸風險

任何已繳付的保費會成為宏利資產的一部分。因此，您將承受本公司的信貸風險。本公司的財政狀況或會影響其履行保單及合約的責任的能力。

6. 貨幣風險

您可選擇以非本地貨幣作為本計劃之貨幣單位。於決定貨幣單位前，您應考慮潛在的貨幣風險。匯率可升亦可跌，而任何匯率波動會直接影響您以本地貨幣計算時所需繳付保費及利益。匯率波動可能會造成損失。兌換貨幣潛在的損失可能抵銷(或甚至超過)來自保單的利益。

7. 通脹風險

因通脹關係，未來生活及醫療成本可能更高。因此，目前計劃的保障或許未能滿足您未來的需要。

8. 終止計劃之條件

本計劃將會於下列情況終止：

- i. 受保人身故；
 - ii. 於保費到期日後31日內仍未繳交保費；
 - iii. 相關保單支付的賠償總額達到終身限額上限；
 - iv. 我們批准保單持有人終止此計劃之書面申請；
 - v. 本計劃所附加於的保單終止或期滿(如本計劃為附加保障)；或
 - vi. 保單退保或本公司於您的保單內行使不能作廢權益(如有)(如本計劃為附加保障)；
- 以較先出現者為準。

就「活亮人生醫療附加保障」而言，於任何保費到期日前31天內，保單持有人可以書面通知我們終止本計劃。保單須隨書面通知一併交回我們以作相應批註。於我們妥收上述文件後，計劃將於有關保費到期日終止。

本計劃一旦終止，將不具任何效力。若本保單於保單年度中被終止，不論有否於該保單年度支付索償，將不獲退還保費的任何部份。

9. 續保

若本計劃不再提供，本公司會致力為您提供另一個其時適用之醫療保障計劃。本公司保留權利於每次續保時修訂保障、保單條款、細則和保費。任何有關修訂及調整將即時適用於已續保之計劃，除非您於續保生效後 30 天內以書面形式通知本公司取消本計劃，本計劃即告終止。

適用於將「環球」作為保障地區選項的計劃：若受保人在過去 12 個月已居住於美國達 183 日或以上，本公司保留權利於任何時間將保障地區由「環球」更改至「環球美國除外」。

10. 自殺

不論事發時精神是否健全，若受保人於本計劃以下之日期起計一年內自殺，將不獲支付任何身故賠償：

- i. 保單簽發日或保單生效日；
 - ii. 保單復效的生效日；或
 - iii. 保單批註日期或更改生效日（只適用於保單簽發後附加之「活亮人生醫療附加保障」）；
- 以較後者為準。

11. 索償程序

有關索償程序之詳情，請參閱保單條款或保障條款中的「索償程序」部分及瀏覽網站 www.manulife.com.hk。

若受保人享有其他保單保障而獲支付賠償，或已從任何其他途徑獲支付賠償，不論是由本公司或其他公司繕發的保單，本計劃之醫療保障，將以下列金額較少之一項為限：

- i. 所有有關費用於扣除由其他保單或任何其他途徑支付之賠償後之餘額；或
- ii. 於保障表內列明之賠償限額。

12. 「合理及慣常收費」及「必須之醫療服務」

我們將不保障任何不屬「必須之醫療服務」的治療、檢查、服務或供應品；或任何超出「合理及慣常收費」的收費而直接或間接引致或與之相關的住院 / 進住、治療及 / 或收費。

「合理及慣常收費」是指於當地具有類似級別或地位的醫療服務提供者在就相類同的疾病或受傷，為相同年齡和性別人士所提供治療、醫療服務或供應品之醫療診治不超過一般標準的收費，包括但不限於住院日數。合理及慣常收費於任何情況下不得超過實際收費。我們可參考以下情況（如適用）決定有關醫療費用包括但不限於住院日數，是否為「合理及慣常收費」：

- i. 由香港政府憲報就香港公立醫院為私家病人提供服務所定的收費；
- ii. 醫療行業的收費調查；
- iii. 內部保險賠償統計數據；
- iv. 受保障程度或水平；及 / 或
- v. 其他相關的參考資料

「必須之醫療服務」是指符合下列各項規定之醫療服務：

- i. 符合診斷結果，就有關病況於香港或澳門採用之慣常治療方式；
- ii. 符合香港或澳門良好醫療守則標準；
- iii. 並非純粹為方便受保人或醫生；及
- iv. 不可以安全地在較低醫療護理水平的情況下進行。

13. 等候期

除意外受傷外，醫療保障的獲取資格及其保障範圍將於下列日期正式生效（以較後者為準）：

- i. 保單簽發日或本計劃的投保申請書簽署日起計 30 日後（以較後者為準）；
- ii. 保單復效的生效日起計 30 日後；或
- iii. 於保單批註日期或更改本保障 / 提高保障生效日起計 30 日後（以較後者為準）（只適用於保單簽發後附加之「活亮人生醫療附加保障」）。

有關詳細條款及細則，詳情請參閱保單條款或保障條款中的「保障生效日期」部分。

14. 不保事項及限制

若受保人直接或間接因以下任何一項導致傷病，本公司不會就「活亮人生」作出賠償：

- i. 受保人於受保前已存在之狀況(受傷或疾病)；或
- ii. 直接或間接由下列原因引致或與之相關的住院 / 進住、治療及 / 或收費：
 - a) 受保人之妊娠、代母身份、分娩或終止妊娠(惟於本計劃延伸保障之妊娠期併發症所列明之妊娠期併發症則除外)、節育、不育或人工受孕或任何一性別絕育；
 - b) 戰爭、戰鬥(不論是否已宣戰)、叛亂、暴動、暴亂、民事騷亂；
 - c) 受保人參與任何刑事罪行、恐怖主義行動或在神志正常或失常的情況下企圖自殺或蓄意自殘；
 - d) 受保人進行整形手術，但若i)受保人因意外而引致受傷並因而必須接受整形手術，及該治療於意外發生起計90日內已獲本公司預先批核，或ii)惟於本計劃下所列明之癌症重建手術保障之治療則除外；
 - e) 受保人進行屈光偏差的矯正和治療，但若受保人因意外而引致受傷並因而於意外發生起計90日內接受矯正治療則除外；
 - f) 為受保人利益購買或使用醫療輔助器具及裝置，包括但不限於眼鏡、隱形眼鏡、助聽器或輪椅，惟於本計劃外科手術保障之醫療裝置內所列明的醫療輔助器及裝置則除外；
 - g) 受保人進行療養或身體檢查，或健康檢查(無論該等檢查結果是否正常)；或受保人接種和免疫注射；或受保人進行遺傳基因測試或遺傳基因諮詢輔導(惟於本計劃下延伸保障內所列明之癌症治療下保障的因標靶治療而接受的遺傳基因測試則除外)；
 - h) 就受保人之受傷或疾病相關而作出之治療或測試與常規醫療或診斷不一致；
 - i) 受保人使用麻醉劑(但由醫生處方使用則除外)，或受保人濫用藥物及 / 或酗酒；
 - j) 姬松茸、羚羊角粉、鹿茸、冬蟲夏草、燕窩、花膠、靈芝、各種人參、海馬、麝香、珍珠粉及紫河車；
 - k) 受保人接受的牙科治療或外科手術，惟於本計劃下緊急治療保障內所列明之意外牙齒創傷治療(意外導致)則除外；
 - l) 受保人進行水肺潛水、參加任何非徒步進行的比賽、輔以繩索或由嚮導帶領的攀山活動；
 - m) 愛滋病(AIDS)或受人體免疫力缺乏病毒(HIV)感染的任何相關的併發症，惟人體免疫力缺乏病毒 / 愛滋病治療保障則除外；
 - n) 精神紊亂、心理或精神疾病、行為問題或人格障礙，惟於本保單下住院保障內所列明之精神疾病治療則除外；
 - o) 任何先天性或遺傳疾病或發育中出現異常情況(只適用於該異常於受保人年滿16歲前已產生徵狀或病徵，或已被診斷患上疾病)；
 - p) 任何只為物理治療或就檢查徵狀及 / 或病徵而進行之診斷影像、化驗室檢查或其他診斷程序的住院；
 - q) 任何不屬「必須之醫療服務」的治療、檢查、服務或供應品；或任何超出「合理及慣常收費」的收費；
 - r) 非醫療服務，包括但不限於探訪者用餐、收音機、電話、影印、個人物品、醫療報告收費及其他類似項目；
 - s) 受保人接受實驗及 / 或非主流醫療技術 / 程序 / 治療，或尚未由當地政府、相關機構及當地認可醫學會批准之新型藥物或幹細胞治療；
 - t) 睡眠疾病(由專科醫生確認為危及生命的睡眠窒息症治療及已獲本公司預先批核則除外)；
 - u) 治療過度肥胖(包括病態肥胖)、控制體重計劃或減肥手術(由專科醫生於傳統治療方法失敗後確認為必需的減肥手術及已獲本公司預先批核則除外)；
 - v) 有關於尋找及採購替換器官或由捐贈者身上移除器官而須支付的移植服務費用、所有相關的運輸費用及行政費用；惟於本計劃下所列明之在生捐贈者之移植手術費用保障所產生之費用則除外；
 - w) 由性接觸傳染的疾病或性問題，如性功能障礙(不論其原因)，性別有關的問題或變性或性別重新分配，惟本計劃所包括的人體免疫力缺乏病毒 / 愛滋病治療保障則除外；
 - x) 若受保人維持覺醒而沒有意識的持續性植物人狀態超過4星期並於醫院接受超過連續90日的治療；
 - y) 任何在本計劃之特別條款(如有)中不受保的活動或疾病；或
 - z) 核污染、生物污染或化學污染，惟i)因恐怖主義行動及ii)於受保人x)居住地區 / 定居國家以外的旅程中發生及y)並沒有作為恐怖份子參與其中而直接所引致之住院 / 進住，治療及 / 或費用則除外。

以上為不保事項之一般概要。有關全部及確實之不保事項，請參閱保單條款或保障條款。

以上只概括有關不獲支付的情況。請參閱保單條款或保障條款內的確實條款及細則，並特別留意包括但不限於「保障生效日期」、「已存在情況」及「索償限制」之條款及「門診」、「傷病」、「必須之醫療服務」及「合理及慣常」之定義。

本產品單張內，「您」及「閣下」指保單持有人，「我們」、「本公司」及「宏利」指宏利人壽保險(國際)有限公司(於百慕達註冊成立之有限責任公司)。

閣下不應在未完全瞭解此產品的性質及風險前購買本產品。如欲了解計劃詳情，歡迎與銀行的持牌職員聯絡，或致電客戶服務熱線(852) 2510 3383。如閣下有任何疑問，請諮詢獨立專業意見。

由2018年1月1日起，保險業監管局將向保單持有人收取保費徵費。有關徵費及其收取安排之詳情，請瀏覽宏利網站 www.manulife.com.hk/link/levy-zh。

如欲參閱宏利之私隱政策，閣下可瀏覽宏利網站，網址為 www.manulife.com.hk。閣下並可要求宏利停止使用閣下的個人資料作直接促銷用途，如有此需要，請致函我們。本公司地址可於宏利網站上找到。我們不會因此而收取任何費用。

本產品單張只可於香港特別行政區傳閱。

每年保費表 — 活亮人生醫療保障系列 / 附加保障

保費將於每個保單周年日隨受保人最接近一個生日所達之歲數年齡改變及並非保證。以下每年保費表由2021年7月1日開始生效，有關保費只供參考及可能會隨時更改而不另行通知。

每年保費表 (港元)^									
計劃	卓越計劃			優越計劃			標準計劃		
保障地區	環球			環球美國除外			亞洲		
年齡#	每年自付額選項 (港元)^			每年自付額選項 (港元)^			每年自付額選項 (港元)^		
	0	8,000	22,800	0	8,000	22,800	0	8,000	22,800
0	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
1	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
2	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
3	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
4	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
5	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
6	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
7	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
8	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
9	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
10	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
11	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
12	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
13	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
14	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
15	31,223	20,835	13,503	19,016	13,498	8,697	11,819	8,428	5,393
16	31,868	21,280	13,865	19,398	13,748	8,899	12,062	8,608	5,514
17	32,527	21,729	14,236	19,786	14,002	9,106	12,310	8,793	5,637
18	33,196	22,191	14,617	20,182	14,259	9,320	12,565	8,979	5,762
19	33,882	22,664	15,007	20,587	14,522	9,537	12,823	9,170	5,890
20	34,580	23,146	15,410	21,000	14,790	9,759	13,089	9,366	6,022
21	35,297	23,639	15,823	21,418	15,062	9,986	13,358	9,564	6,154
22	36,022	24,138	16,247	21,844	15,340	10,218	13,635	9,769	6,293
23	36,769	24,653	16,681	22,281	15,624	10,458	13,917	9,978	6,433
24	37,526	25,177	17,129	22,731	15,912	10,703	14,204	10,191	6,577
25	38,300	25,712	17,585	23,182	16,204	10,951	14,497	10,408	6,723
26	39,090	26,259	18,057	23,645	16,504	11,207	14,795	10,628	6,873
27	39,899	26,816	18,539	24,120	16,809	11,467	15,100	10,857	7,027
28	40,723	27,387	19,035	24,602	17,118	11,737	15,412	11,088	7,183

每年保費表 (港元)^									
計劃	卓越計劃			優越計劃			標準計劃		
保障地區	環球			環球美國除外			亞洲		
年齡#	每年自付額選項 (港元)^			每年自付額選項 (港元)^			每年自付額選項 (港元)^		
	0	8,000	22,800	0	8,000	22,800	0	8,000	22,800
29	41,562	27,968	19,546	25,093	17,433	12,009	15,731	11,323	7,344
30	42,422	28,564	20,068	25,596	17,754	12,292	16,055	11,565	7,507
31	43,299	29,169	20,604	26,108	18,084	12,577	16,387	11,811	7,674
32	44,191	29,790	21,158	26,631	18,418	12,872	16,726	12,063	7,843
33	45,104	30,422	21,724	27,163	18,757	13,171	17,069	12,319	8,018
34	46,035	31,070	22,305	27,707	19,100	13,479	17,422	12,581	8,197
35	46,985	31,730	22,900	28,259	19,454	13,793	17,782	12,848	8,381
36	47,385	31,991	23,075	29,139	20,052	14,206	17,934	12,953	8,443
37	47,687	32,183	23,207	30,050	20,669	14,640	18,047	13,030	8,490
38	48,090	32,440	23,378	30,984	21,305	15,082	18,197	13,133	8,552
39	50,299	33,865	24,333	31,948	21,922	15,471	19,027	13,705	8,897
40	52,507	35,286	25,288	32,943	22,562	15,878	19,855	14,274	9,241
41	54,718	36,710	26,241	33,966	23,224	16,303	20,687	14,842	9,587
42	56,928	38,131	27,199	35,027	23,906	16,743	21,516	15,415	9,931
43	59,137	39,554	28,154	36,117	24,614	17,202	22,343	15,984	10,272
44	61,548	41,107	29,192	37,240	25,342	17,671	23,247	16,607	10,650
45	63,959	42,658	30,234	38,402	26,094	18,156	24,153	17,227	11,026
46	66,470	44,275	31,320	40,311	27,353	18,996	25,097	17,875	11,416
47	68,879	45,827	32,363	42,315	28,680	19,880	26,002	18,498	11,793
48	71,290	47,381	33,403	44,419	30,071	20,810	26,908	19,119	12,168
49	74,405	49,385	34,749	46,628	31,524	21,770	28,075	19,923	12,653
50	77,516	51,391	36,094	48,949	33,052	22,783	29,242	20,723	13,139
51	82,392	54,642	38,187	51,982	35,111	24,068	31,056	21,985	13,914
52	87,571	58,101	40,400	55,207	37,304	25,425	32,982	23,322	14,734
53	93,074	61,779	42,745	58,633	39,629	26,863	35,025	24,743	15,609
54	98,926	65,690	45,223	62,269	42,100	28,378	37,195	26,239	16,518
55	105,144	69,850	47,842	66,127	44,726	29,979	39,502	27,829	17,485
56	111,755	74,271	50,617	70,231	47,515	31,672	41,950	29,521	18,516
57	118,779	78,972	53,551	74,585	50,479	33,458	44,551	31,318	19,611
58	126,248	83,972	56,656	79,213	53,626	35,348	47,311	33,227	20,777
59	134,183	89,287	59,939	84,124	56,970	37,342	50,243	35,238	21,984
60	142,621	94,937	63,417	89,342	60,523	39,448	53,356	37,373	23,273
61	151,585	100,949	67,092	94,883	64,297	41,673	56,665	39,649	24,646
62	161,117	107,340	70,981	100,768	68,307	44,026	60,177	42,063	26,110
63	171,243	114,134	75,097	107,017	72,564	46,514	63,910	44,631	27,664
64	182,009	121,358	79,451	113,653	77,092	49,136	67,871	47,357	29,310
65	193,452	129,041	84,057	120,700	81,898	51,910	72,076	50,249	31,061
66	205,611	137,210	88,929	128,188	87,006	54,842	76,547	53,324	32,926
67	214,882	143,398	92,940	133,945	90,914	57,303	79,982	55,682	34,345
68	224,154	149,584	96,950	139,704	94,827	59,768	83,421	58,040	35,764
69	233,427	155,772	100,960	145,463	98,733	62,229	86,860	60,407	37,200

每年保費表 (港元)^									
計劃	卓越計劃			優越計劃			標準計劃		
保障地區	環球			環球美國除外			亞洲		
年齡#	每年自付額選項 (港元)^			每年自付額選項 (港元)^			每年自付額選項 (港元)^		
	0	8,000	22,800	0	8,000	22,800	0	8,000	22,800
70	244,358	163,066	105,687	152,266	103,350	65,141	90,920	63,208	38,900
71*	256,593	171,324	111,038	159,951	108,565	68,428	95,508	66,375	40,826
72*	269,439	179,996	116,660	168,023	114,045	71,881	100,328	69,699	42,849
73*	282,929	189,105	122,567	176,503	119,802	75,508	105,388	73,193	44,976
74*	297,096	198,678	128,769	185,409	125,846	79,320	110,705	76,858	47,203
75*	311,971	208,736	135,289	194,768	132,198	83,323	116,293	80,713	49,543
76*	326,152	223,687	144,977	208,656	141,626	89,266	124,584	86,441	53,032
77*	342,022	232,196	150,495	216,579	147,003	92,656	129,314	89,698	55,006
78*	360,253	240,710	156,011	224,502	152,378	96,044	134,042	92,951	56,976
79*	371,732	249,221	161,528	232,421	157,756	99,432	138,772	96,201	58,942
80*	376,941	255,473	165,582	239,289	161,708	102,370	142,871	98,584	60,638
81*	386,126	264,653	171,530	248,975	167,502	106,516	148,652	102,086	63,050
82*	392,962	270,323	175,204	255,470	171,084	109,293	152,531	104,244	64,653
83*	402,815	277,100	179,598	263,111	175,371	112,560	157,087	106,826	66,533
84*	412,825	283,985	184,061	270,950	179,731	115,916	161,768	109,447	68,465
85*	422,995	290,980	188,594	278,999	184,158	119,359	166,573	112,111	70,447
86*	435,514	299,593	194,176	287,258	189,611	122,893	171,502	115,398	72,482
87*	448,361	308,430	199,903	295,730	195,202	126,515	176,559	118,767	74,571
88*	461,536	317,493	205,778	304,421	200,938	130,234	181,745	122,228	76,710
89*	475,051	326,790	211,804	313,335	206,821	134,048	187,066	125,776	78,906
90*	488,906	336,322	217,979	322,472	212,854	137,957	192,521	129,413	81,158
91*	503,111	346,093	224,312	331,839	219,038	141,965	198,114	133,141	83,467
92*	517,666	356,108	230,804	341,444	225,376	146,073	203,843	136,964	85,835
93*	532,585	366,370	237,456	351,283	231,870	150,282	209,718	140,881	88,260
94*	547,868	376,884	244,269	361,361	238,523	154,596	215,733	144,895	90,746
95*	563,521	387,650	251,248	371,687	245,339	159,013	221,897	149,005	92,255
96*	579,552	398,676	258,395	382,261	252,318	163,534	228,206	153,215	93,744
97*	595,961	409,967	265,711	393,084	259,459	168,166	234,668	157,523	95,205
98*	612,756	421,520	273,200	401,838	266,774	172,905	241,279	161,935	96,641
99*	629,942	433,341	280,864	408,248	274,257	177,756	248,045	166,447	98,043

^8港元 = 1美元

#任何出現於此表之特定年齡是指在保單周年日當天，受保人於最接近一個生日所達之歲數。

*只供續保

註解：

- 以上保費為以每年繳付形式。如以其他繳付形式，每個保費到期日的應繳保費為以上保費乘以以下調整因子：每半年：0.52，每季：0.265，每月：0.09。
- 以上保費並未包括由保險業監管局徵收的保費徵費。

