

Terms and Conditions for Using Credit Facilities Services

These terms and conditions apply to both the Policyholder and the Insured (Person) when using the Credit Facilities Services offered by Blue Cross (Asia-Pacific) Insurance Limited ("the Company"). By using the Credit Facilities Services, including the Healthcare Card, the Letter of Guarantee and other documents issued by the Company for identification ("Other Tools"), the Policyholder and the Insured (Person) irrevocably agree to the terms and conditions below:

- 1. The Healthcare Card, the Letter of Guarantee and Other Tools are issued subject to the application of the Policyholder and approval of the Company.
- 2. The physical Healthcare Card is only valid after the date on which the Insured (Person) is covered by the Policy and being signed by the Insured (Person). The use of the Healthcare Card is subject to the terms under "Blue Cross Healthcare Card – User Guide". The use of Other Tools is subject to applicable terms and conditions issued by the Company from time to time.
- 3. The Letter of Guarantee is only valid for the period specified on the letter and if signed by the Company.
- 4. The Healthcare Card, the Letter of Guarantee and Other Tools are not transferable.
- 5. When using the Healthcare Card or Letter of Guarantee or Other Tools, the Insured (Person) must present the Healthcare Card or Other Tools, together with his/ her HKID card to the designated healthcare providers for identification prior to receiving the medical services. The Insured (Person)'s name, membership number and benefit codes will be displayed on the Healthcare Card for identification purpose.
- 6. The Insured (Person) should sign the medical voucher* when using the Healthcare Card and/or the Letter of Guarantee as an evidence of receipt of the medical services. Once the medical voucher* is signed, the Insured (Person) is deemed to have irrevocably accepted the terms and conditions as stated thereon.
- In case of loss or theft of the Healthcare Card, the Policyholder should notify the Company in writing immediately. The Policyholder is responsible for collecting and returning to the Company all physical Healthcare Cards on termination of the Insured (Person)'s benefits.
- 8. The Policyholder and the Insured (Person) shall be liable for any amount incurred as a result of the use of an unreturned, lost or stolen Healthcare Card.
- 9. For the replacement of each physical Healthcare Card, a handling fee of HK\$30 will be charged.
- 10. The Policyholder and the Insured (Person) acknowledge that all medical and healthcare services are provided by independent healthcare providers. The Company assumes no responsibility for the services provided by the healthcare providers and no warranty, representation, endorsement or recommendation is given by or may be implied from any information provided by the Company about such healthcare providers in relation to their quality or competence.
- 11. An arrangement for direct billing and settlement of medical expense may be made between the Company and designated healthcare providers up to the inpatient credit limit[#] or the maximum benefit limit of the Insured (Person) as specified in the Schedule of Benefits or such other documents under the Policy (if appropriate). The Policyholder and the Insured (Person) are liable for any ineligible expenses which are not covered under the Policy or any expenses exceeding the maximum benefit limit or inpatient credit limit[#], and which has been charged when using the Healthcare Card, the Letter of Guarantee and/or Other Tools. The Policyholder and the Insured (Person) agree to reimburse the Company immediately for all

使用免付賬醫療服務的條款及細則

以下之條款及細則適用於保單持有人及受保人(士)使用藍十字(亞 太)保險有限公司(「本公司」)提供之免付賬醫療服務。當使用免 付賬醫療服務,包括由本公司發出的醫療卡、保證書及其他本公司 所提供以作核對身份之用的文件(「其他工具」),則代表保單持有 人及受保人(士)均不可撤銷地同意以下之條款及細則:

- 醫療卡、保證書及其他工具需要經保單持有人作出申請及本公司批核後發出。
- 實體醫療卡自受保人(士)受保於保單當天起及須由受保人(士)簽 署後方為有效。醫療卡之使用須受限於「藍十字醫療卡 - 使用 簡介」內所載列之條款。其他工具的使用是受限於本公司不時 發出的相關條款及細則。
- 3. 保證書須由本公司簽署後並僅於保證書指定之期間內有效。
- 4. 醫療卡、保證書和其他工具不得轉讓予他人。
- 5. 使用醫療卡或其他工具時,受保人(士)須出示醫療卡、保證書或 其他工具及其香港身份證予指定的醫療機構,以於接受醫療服 務前作核對身份之用。受保人(士)之姓名、會員號碼及保障編號 將顯示於醫療卡上作核對身份之用。
- 6. 受保人(士)於使用醫療卡及/或保證書時,須簽署醫療單據*以 作接受醫療服務的證明。當受保人(士)在醫療單據*上簽署,即 表示受保人(士)已不可撤銷地同意醫療單據*上的條款及細則。
- 7. 醫療卡如有遺失或遭盜竊,保單持有人應立即以書面形式通知 本公司。於受保人(士)之保障終止時,保單持有人亦須負責收回 並退還所有有關實體醫療卡予本公司。
- 保單持有人及受保人(士)須負責支付任何因使用未退還、已遺失 或遭盜竊之醫療卡所引致之費用。
- 9. 本公司將就補發新實體醫療卡收取每張 HK\$30 之服務費用。
- 10.保單持有人及受保人(士)確認所有醫療服務是由獨立醫療機構 提供。本公司不會就醫療機構提供的服務負責,並不會就該等 醫療機構之素質或能力作出任何保證、陳述、認可證明或建議, 而本公司提供的任何資料亦不作此默示。
- 11.本公司可與指定醫療機構作出直接付款及結賬安排,惟須受限 於住院掛賬限額[#]或於本保單之保障利益表或此類其他文件上 載列受保人(士)可享之最高賠償額(如適用)。保單持有人及受 保人(士)須負責支付任何記賬於醫療卡、保證書及/或其他工具 但不在承保範圍內的不符合索償資格的費用或超出最高賠償額 或住院掛賬限額[#]的費用,並同意於接獲書面要求後立即向本公 司償還所有不符合索償資格或超額之費用。在欠款全額清繳 前,本公司保留暫停處理未決索償或其他索償的權利。本公司



ineligible or excessive expenses incurred upon written demand. The Company reserves the right to withhold the processing of any pending or further claims until any outstanding amount owing has been fully settled. An interest will be charged at the prevailing interest rate on any amount that remains overdue for more than 30 days.

- 12. The Company may withdraw or suspend the use of the Credit Facilities Services at any time by giving a written notice.
- 13. All matters and disputes in relation to Credit Facilities Services will be subject to the final decision of the Company and the Company reserves the right to take legal actions against the Policyholder and the Insured (Person) for recovery of any amount owed and any losses, damages, costs and expenses in connection thereof.
- 14. The Company reserves the right to make any amendments to the above terms and conditions as and when it shall consider necessary. An updated version of the Terms and Conditions for Using Credit Facilities Services can be obtained from the Company's website at http://bluecross.com.hk/document/tnc/creditfacilitiesservice.
- 15. Should there be any discrepancy between the English and the Chinese versions of these terms and conditions, the English version shall apply and prevail.
- * All medical vouchers submitted to the Company for settlement shall be completed and countersigned by the Registered Medical Practitioner with the following details:
- a) date of consultation and the diagnosis of the condition being treated;
- b) breakdown of the charges relating to all medical services; and
- c) any amount paid by the Insured (Person).

Unless expressly waived in the Schedule of Benefits under the Policy, a referral letter signed by the Registered Medical Practitioner must be attached in case where consultation is received from a Specialist or Physiotherapist.

[#]Subject to an inpatient credit limit of HK\$300,000 per confinement unless specified otherwise and approved by the Company. This inpatient credit limit is not applicable to individual medical insurance plans. 將會就任何超逾30天之欠款按現行利率收取利息。

- 本公司可隨時發出書面通知以中止或暫停任何免付賬醫療服務。
- 13.本公司將保留所有與免付賬醫療服務相關事項及爭議的最終決 定權,而本公司亦將保留就追討任何欠款及任何有關之損失、 損毀、費用及支出向保單持有人及受保人(士)採取法律行動之權 利。
- 14. 本公司保留隨時修改以上條款之權利。使用免付賬醫療服務的 條款之最新版本可瀏覽本公司之網頁 <u>http://bluecross.com.hk/document/tnc/creditfacilitiesserv</u> <u>ice</u>。
- 15. 此條款之中英文版本如有差異,以英文版本為準。
- * 所有遞交予本公司之醫療單據必須由註冊醫生填寫及簽署,並須 包括以下資料:
- a) 診症日期及接受治療傷病的診斷;
- b) 各項醫療服務所收取之費用明細表;及
- c) 受保人(士)已繳付之費用。

除非已於保單的保障利益表中明確地豁免,凡接受專科治療及物理 治療的諮詢必須附上由註冊醫生簽署之轉介信。

*除非另有註明及經本公司批准外,須受制於每次住院掛賬限額 HK\$300,000。住院掛賬限額並不適用於個人醫療保單。