



Blue Cross 藍十字

Member of BEA Group 東亞銀行集團成員

「大亨」醫療保險計劃 Tycoon Medical Insurance Plan



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With effect from Jan 2020

藍十字（亞太）保險有限公司

Blue Cross (Asia-Pacific) Insurance Limited

藍十字（亞太）保險有限公司（「藍十字」）乃東亞銀行集團成員，於香港經營保險業務逾50年，致力為個人及企業客戶提供多元化的保險產品及服務，包括醫療、旅遊及一般保險。藍十字屢獲殊榮，其保險產品及服務均獲廣泛認同。

藍十字在2019年獲得保險行業國際信用評級機構和信息提供商 AM Best 授予財務實力評級及長期發行人信用評級分別為 A（優秀）及「a」級別。有關最新評級，請瀏覽 www.ambest.com。

Blue Cross (Asia-Pacific) Insurance Limited (“Blue Cross”) is a member of The Bank of East Asia Group. With over 50 years of operational experience in the insurance industry, Blue Cross provides a comprehensive range of products and services including medical, travel and general insurance, which cater to the needs of both individual and corporate customers. Blue Cross’ success in insurance products and services is reaffirmed by numerous awards and accolades.

In 2019, Blue Cross was assigned the Financial Strength Rating of A (Excellent) and the Long-Term Issuer Credit Rating of “a” by AM Best, a global rating agency and information provider with a unique focus on the insurance industry. For the latest rating, please access www.ambest.com.

藍十字給您的服務承諾

Blue Cross Service Commitment to You

讓客戶滿意是藍十字的服務宗旨，我們竭誠迅速處理您的醫療索償。收妥所需文件後，我們承諾會在3個工作天內完成經 Super Care 會員平台遞交的門診索償批核。而住院索償批核會在8個工作天內完成。

您可隨時下載 Blue Cross HK 數碼保險應用程式或登入 www.bluecross.com.hk/supercare 管理您的索償和查閱保單資料。

Customer satisfaction is of Blue Cross' highest priority, which is why your medical claims are promptly processed. Upon receipt of full documentation, we promise to approve outpatient claims via Super Care member's platform in 3 working days. For inpatient claims, we will approve within 8 working days.

You can manage your claims and check your policy information anytime via Blue Cross HK Digital Insurance App or www.bluecross.com.hk/supercare.



Blue Cross HK App



靈活醫療保障 豐盛人生盡在掌握

當您正享受職場上的豐碩成果，是時候為自己的健康及家人的未來作更好打算。現今醫療科技日新月異，但先進的醫療技術卻往往涉及巨額開支。作為成功人士的您，實在需要擁有優質、全面的醫療健康保障，即使頑疾突然而至，亦有足夠條件接受最妥善的治療，對抗疾病。

「大亨」醫療保險計劃為您提供每年高達US\$3,000,000的充裕賠償額，並有全方位的保障項目以供選擇，您可悉隨己意，度身設計最合適自己的健康保障，充分掌握豐盛人生，輕鬆自在。

Enjoy the Splendour of Life with Flexible Health Protection

While enjoying your success and achievements in career, it is time to plan ahead for your health and family. With today's advanced technology, newer and better therapies are available but they usually cost patients a fortune. Being a successful person, you deserve a quality and comprehensive health protection plan which enables you to afford the best possible treatments financially even if critical illnesses strike you out of the blue.

With an ample amount of protection up to US\$3,000,000 per year, together with a diverse range of benefit items, Tycoon Medical Insurance Plan enables you to customise an all-round medical and health protection plan that best suits your specific needs, allowing you to enjoy a colourful and worry-free life.

計劃特點 Plan Highlights

靈活保障組合

Flexible combination of coverage

- 自由組合所需的保障地域¹、每年綜合最高賠償額、自付額²及病房級別³
Your choice of Cover Area¹, Overall Annual Limit, Deductible² and Type of Accommodation³ as required
- 3項自選附加保障：門診保障、產科保障⁴、牙科保障
3 Optional Benefits: Outpatient Benefits, Maternity Benefits⁴, Dental Benefits
- 特設「白金」、「金」及「銀」3個計劃級別，每年綜合最高賠償額分別為US\$3,000,000、US\$2,300,000及US\$1,600,000
Provide 3 plan levels namely Platinum, Gold, and Silver, with overall annual limits of US\$3,000,000, US\$2,300,000, and US\$1,600,000 respectively

全面醫療保障 + 照顧癌症及長期病患

All-round protection + care for cancer and chronic illnesses

- 自由選擇主診醫生及任何私家醫院
Your choice of attending doctors and private hospitals
- 全數賠償大部分住院及手術費用
Full cover for most items under Hospital and Surgical Benefits
- 針對癌症及長期病患的特別治療保障
Special Treatment Benefits for cancer and chronic illnesses
- 入院前及出院後保障
Pre- and Post-Hospitalisation Benefits
- 意外治療保障
Accident Treatment Benefits
- 可賠償在門診進行的先進診斷掃描費用
Cover the expenses of Advanced Diagnostic Imaging performed in outpatient facility

「白金」及「金」計劃尊享保障

Exclusive benefits for Platinum and Gold plans

- 免費週年身體檢查
Annual health checkup for free

支援服務

Supportive services

- 第二醫療意見諮詢、入院前索償評估⁵、優先出院免結賬⁶、24小時全球緊急援助
Second Medical Opinion, Pre-hospitalisation Claim Assessment⁵, Cashless Priority Discharge⁶, 24-hour Worldwide Emergency Aid

保證續保至99歲⁷

Guaranteed renewal up to age 99⁷

- 不會因投保後的健康狀況或索償記錄而不獲續保
Guaranteed renewal regardless of health status or claim history after enrolment

全球保障¹

Worldwide coverage¹

- 無論身處外地公幹或旅遊，均可即時入院接受治療
Allow immediate hospitalisation for treatment when travelling abroad for business or leisure

投保手續簡單

Easy application

- 無須驗身
No medical examination is required

計劃特點 Plan Highlights

無索償折扣⁸ No claim discount⁸

- 我們鼓勵您保持身心健康而特設無索償折扣。於續保時，若受保人沒有在下表所述的無索償期內提出任何有關基本保障的索償，基本保障所應繳付之保費（附加門診保障之保費除外）可獲相應之無索償折扣。

We know you try hard to keep yourself in great shape. To cheer you up, we offer you the No Claim Discount. You can enjoy premium discount on the aggregate premium payable for the Basic Benefits (excluding premiums pay for Optional Outpatient Benefits) as soon as next year's policy renewal, if no claim under the Basic Benefits has been made during the respective no claim periods, as specified below.

緊接續保前之無索償期 No claim period immediately preceding renewal	折扣率 Discount rate
1年 1 year	5%
連續2年 2 consecutive years	5%
連續3年 3 consecutive years	10%
連續4年 4 consecutive years	10%
連續5年或以上 5 consecutive years or more	15%

- 任何就緊急門診治療或門診手術現金津貼（如適用）作出的索償將不會影響受保人獲得無索償折扣的資格。
Any claim made under Emergency Outpatient Treatment or Outpatient Surgery Cash Allowance (if applicable) will not affect



靈活保障組合 配合人生各階段需要

「大亨」醫療保險計劃彈性極高，給予您靈活、多元化及具成本效益的保障選擇。本計劃設有「白金」、「金」及「銀」3個計劃級別。「白金」及「金」計劃提供「環球」或「環球（北美除外）」兩個保障地域¹。而「銀」計劃則提供「環球（北美除外）」保障地域，讓您以較相宜的保費於香港、澳門及中國獲得全數賠償半私家房的大部分住院及手術費用，若您身處外地公幹或旅遊（北美除外），更可入住私家房。

即使您目前已擁有公司的醫療保障，仍需要一份額外的個人醫療保障，以確保在轉職期間或退休後仍可擁有充裕的醫療保障，應付突如其來的醫療開支。本計劃提供多種不同的自付額²，讓您在盡享公司醫療福利之餘，有預算地提升整體保障。除基本保障外，您亦可選擇多項自選附加保障，包括：門診保障、產科保障⁴、牙科保障，更周全地保障您及家人的健康。

全面醫療保障 照顧癌症及長期病患

此計劃的「白金」、「金」及「銀」計劃級別分別提供US\$3,000,000、US\$2,300,000及US\$1,600,000之每年綜合最高賠償額，讓您選取最合適的保障。保障範圍包括：全數賠償大部分住院及手術費用、入院前及出院後的治療費用（包括中醫治療：如跌打及針灸、脊椎治療、物理治療等）、意外治療費用（包括矯形修復手術）等；另外亦提供更靈活性的門診手術現金津貼⁹，迎合不同醫療需要。

嚴重及長期疾病不但為病患者及其家人帶來打擊，而嶄新治療更往往花費不菲。因此「大亨」醫療保險計劃的保障範圍特別伸延至針對長期病患的特別治療，包括癌症治療（化學治療、標靶治療、放射治療、荷爾蒙治療、免疫治療、伽瑪刀或數碼導航刀）、腎透析治療、器官移植（包括骨髓移植）、以至愛滋病治療等，協助受保人應付龐大醫療開支。

第二醫療意見諮詢

一旦不幸患上嚴重疾病，患者往往希望向有關方面的專家再作獨立諮詢，並在聽取更多專業醫療意見後，才慎重地決定治療方案。此計劃提供第二醫療診斷意見，受保人可透過國際頂級醫療中心獲得免費諮詢，有助掌握病情，從而選擇最妥善的治療。

Flexible Coverage for all Stages of Life

With a wide range of protection options, Tycoon Medical Insurance Plan provides you with highly flexible, diversified and cost-effective protection. The Plan offers 3 plan levels, namely Platinum, Gold, and Silver. Platinum and Gold Plans offer 2 cover areas¹: “Worldwide” or “Worldwide (excluding North America)”, while the Silver Plan covers “Worldwide (excluding North America)”. With a modest premium, the Silver Plan provides you with full cover for most items under Hospital and Surgical Benefits in semi-private room in Hong Kong, Macau and China. Besides, you are entitled to stay in private room when travelling abroad for business or leisure (excluding North America).

Even if you are covered by an existing company medical policy, you still need an extra medical protection that helps cover unexpected medical costs when you are between jobs or retired. To match your personal needs, the Plan offers various choices of deductibles², allowing you to enhance medical protection within your budget while taking advantage of the medical benefits offered by your employer. In addition to the basic benefits, you can choose from a range of optional benefits based on your needs, namely Outpatient Benefits, Maternity Benefits⁴, and Dental Benefits.

All-round Protection to Care for Cancer and Chronic Illnesses

To provide you with the desirable medical coverage, the Platinum, Gold, and Silver Plans offer overall annual limits of US\$3,000,000, US\$2,300,000, and US\$1,600,000 respectively. Benefit items include full cover for most items under Hospital and Surgical Benefits, pre- and post-hospitalisation medical costs (including Chinese medicine practitioner treatments like Chinese bone-setting and acupuncture, chiropractic, physiotherapy, etc.), accident treatment costs (including reconstructive surgery), etc. What's more, the Outpatient Surgery Cash Allowance⁹ can offer you even greater flexibility for different medical needs.

Critical and chronic illnesses often impose heavy financial burden on patients due to the high cost of advanced medical treatments, not to mention the stress caused by these illnesses. Therefore, Tycoon Medical Insurance Plan extends its coverage to the high cost of special treatments incurred for various chronic illnesses, including cancer treatments (chemotherapy, targeted therapy, radiotherapy, hormonal therapy, immunotherapy, gamma knife or cyberknife), kidney dialysis, organ transplants (including marrow transplants), AIDS treatments, etc.

Second Medical Opinion

Patients suffering from critical illnesses often want to seek second opinion from independent medical experts before making their final decision on treatment options. A top-notch international medical team will offer the insured a second medical advice for free, enabling patients to better understand their situation and make informed choices on treatment.

入院前索償評估

只需在入院或接受治療前的最少3個工作天前致電專線3608 2988（按1153）提交相關資料，或於網上填寫「入院前索償評估」表格，我們即按您的保單計算可賠償金額⁵，讓您在財務上更有預算，安心接受治療。

優先出院免結賬⁶

此計劃設有「優先出院免結賬」安排，您只要在入住本港私家醫院前通知藍十字，我們便會為您直接支付醫院賬單，讓您輕鬆地「優先」出院，免除繁瑣的索償程序，安心休養以儘快康復。

24小時全球緊急援助

如您身處外地公幹或於旅遊時遇上緊急事故，只須致電「24小時全球緊急援助」熱線，便可隨時隨地獲得當地資訊、醫療及法律等多項支援服務。

保證續保至99歲⁷

成功投保後，不論您的健康狀況或索償記錄，我們都承諾為您續保至99歲，讓您享有保障至100歲，而且不會個別徵收額外保費。此外，您的保單更可自動續保至下一個受保期，為您的人生不同階段提供理想的保障，讓您與家人安枕無憂。

免費週年身體檢查 (適用於「白金」及「金」計劃)

我們關注您的健康，因此特別為您安排免費身體檢查服務，讓您及早發現初期病徵，助您掌握自己的身體狀況。

Pre-hospitalisation Claim Assessment

Simply make a call to our Hotline on 3608 2988 (press 2153) and provide related information, or complete the Pre-hospitalisation Claim Assessment Form online at least 3 working days prior to hospitalisation or the start of treatment. We will help you to estimate the eligible claim amount⁵ based on your policy coverage, allowing you to plan your budget in advance and undergo treatment with peace of mind.

Cashless Priority Discharge⁶

If you are admitted to a private hospital in Hong Kong, simply inform Blue Cross before admission, and your hospital bills will then be settled directly by us. This gives you great convenience and no hassle of claim reimbursement upon discharge, allowing you to focus on making a speedy, worry-free recovery.

24-hour Worldwide Emergency Aid

In the event of emergency while travelling overseas for business or leisure, you can receive local information, medical and legal assistance anytime, anywhere. Simply make a call to our 24-hour Worldwide Emergency Aid Hotline.

Guaranteed Renewal up to Age 99⁷

Once enrolled, your policy is guaranteed to be renewable till the age of 99, giving you coverage up to age 100. No additional premium will be imposed individually upon policy renewal, regardless of your health status or claim history. Moreover, your policy will be automatically renewed for another period of insurance. This gives you and your family the real peace of mind at different stages of life.

Annual Health Checkup for Free (For Platinum and Gold Plans)

Your health is our utmost concern. We have specially arranged free checkup programmes to help you detect early diseases and monitor your health conditions.



訂造個人化全球保障

3個計劃級別提供不同之每年綜合最高賠償額，加上3個自付額和3項自選附加保障供選擇，讓您訂造靈活而合心意的醫療保障組合，既合乎成本效益，亦滿足您的個人需要。

Tailor Your Worldwide Protection

With 3 plan levels offering different overall annual limits, 3 choices of deductibles and 3 optional benefits, you can tailor-make a cost-effective yet flexible medical protection plan to cater for your own needs.

計劃級別 Plan Level

首先，選擇計劃級別 First, choose the Plan Level

- 白金 Platinum US\$3,000,000*
- 金 Gold US\$2,300,000*
- 銀 Silver US\$1,600,000*

1

保障地域¹ Cover Area¹

然後，選擇保障地域 Next, select the Cover Area

- 環球[^] Worldwide[^]
- 環球（北美除外） Worldwide (excluding North America)

2

自付額² Deductible²

保費節省高達65%
Up to 65% Premium Savings

再決定自付額 Then, decide the Deductible

- | | | | |
|--|---------------------------------------|----------------------|---------------------------------------|
| ▪ 白金及金計劃
Platinum and
Gold Plans | - US\$0
- US\$5,000
- US\$8,000 | ▪ 銀計劃
Silver Plan | - US\$0
- US\$2,000
- US\$5,000 |
|--|---------------------------------------|----------------------|---------------------------------------|

3

自選附加保障 Optional Benefits

最後，揀選自選附加保障 Finally, opt for the Optional Benefits

- 門診保障 Outpatient Benefits
- 產科保障⁴ Maternity Benefits⁴
- 牙科保障 Dental Benefits

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*每年綜合最高賠償額 Overall Annual Limit
^ 不適用於銀計劃 Not applicable to Silver Plan

「自付額」小貼士

什麼是「自付額」？

就保單而言，自付額是指保險公司作出賠償前，受保人須自行負擔的金額。

誰應考慮設有自付額的保險？

現時已有公司醫療保險的僱員，可考慮投保設有合適自付額的個人醫療保險計劃。這樣，當公司醫療保險不足應付醫療費用時，個人醫療保險計劃便可協助補足。

為何應考慮設有自付額的保險？

一般而言，設有自付額的保險計劃可讓客戶以較低保費擁有相同的保障，若以公司醫療保險作基礎，並加上自費的個人醫療保險計劃，既可提升整體保障，亦合乎成本效益。

如何釐定自付額？

要決定合適的自付額，首要是了解現時公司醫療保險可為您提供的保障。如需進一步了解，請聯絡藍十字或您的保險代理／經紀，以便為您作出評估。

何時減低自付額？

當您不再擁有公司醫療保險時，例如當您轉為自僱人士或退休，便可按個人需要及負擔能力，考慮減低自付額。

自付額選擇

每受保人每年的自付額 Deductible Per Person Per Year (US\$)	節省之基本保障保費 Savings on Basic Benefits Premium				
	白金 Platinum	金 Gold	白金（北美除外） Platinum (Excluding North America)	金（北美除外） Gold (Excluding North America)	銀 Silver
2,000	N/A	N/A	N/A	N/A	35%
5,000	55%	55%	50%	50%	55%
8,000	65%	65%	60%	60%	N/A

Tips for Choosing “Deductible”

WHAT is the meaning of “deductible”?

In an insurance policy, the deductible is the amount that must be paid by the insured before the insurer makes any claim payments.

WHO should consider an insurance with a deductible?

Employees who are currently covered by a company medical policy can consider adding an individual medical plan with a desirable deductible on top of their company medical policy. This way, the individual plan can supplement the company policy if the latter is exceeded.

WHY consider an insurance with a deductible?

Premiums are typically lower for insurance plans with a deductible for the same coverage. It would be a cost-effective approach to use the company medical policy as basic cover and supplement it with a self-paid individual medical plan as top-up cover.

HOW to determine the deductible amount?

To calculate a desirable deductible amount for your situation, you need to first assess the benefits of your existing company medical policy. For advice, please contact Blue Cross or your servicing agent/broker for an assessment.

WHEN to reduce the deductible amount?

When your company medical policy is no longer available, due to, for example, self-employment or retirement, you should consider reducing the deductible amount based on your needs and affordability.

Choice of deductible

靈活保障 配合個人需要：個案舉例

個案 1：企業高層 追求更佳健康保障

背景：

Spenser今年40歲，現任國際企業的高級行政人員，約有20%時間於海外公幹和視察業務。Spenser除了經常出席應酬及餐飲活動之外，平日上班及作息均並無定時。此外，每逢公餘時，Spenser均喜歡與三五知己消遣作樂。

目標：

雖然公司已提供基本醫療保障，但保障額及範圍未必足夠應付較嚴重的疾病（例如：心臟病或癌症），所以Spenser希望擁有一份優質的個人醫療保險計劃，提升整體保障。

個案 2：自僱珠寶設計師 無憂穿梭全世界

背景：

Spenser的女朋友Chloe，今年同樣40歲，乃自由身的珠寶首飾設計師，約有15至20%時間前往海外出席珠寶展或活動。由於是自僱人士的關係，Chloe並沒有公司醫療保障，一切醫療開支均需要自費。

目標：

甚少患病的Chloe，適逢好朋友身患乳癌，所以希望儘快為自己挑選一份優質及全面的個人醫療保險計劃，以便繼續無憂地追求夢想，建立自己的珠寶品牌。

建議方案：「大亨」醫療保險計劃

Recommendation: Tycoon Medical Insurance Plan

	Spenser	Chloe
計劃級別 Plan Level	白金 Platinum	白金 Platinum
每年綜合最高賠償額 Overall Annual Limit	US\$3,000,000	US\$3,000,000
保障地域 Cover Area	環球 Worldwide	環球 Worldwide
自付額 Deductible	US\$5,000	US\$0
年繳保費 Annual Premium	US\$2,363	US\$5,251

與Chloe相比，保費節省55%。
Spenser's premium is 55% less than Chloe's.

Flexible Coverage Catering for Different Needs: Illustrative Examples

Case 1: A senior executive looking for enhanced medical protection

Background:

Spenser, aged 40, is a senior executive of a multi-national conglomerate. He spends around 20% of time working overseas for business meetings and visits. Besides attending business functions and banquets, Spenser works and rests at irregular hours. After work, he enjoys clubbing and entertainment to ease the pressure.

Target:

Despite being covered by a company's basic medical policy, Spenser looks for a quality individual medical plan to enhance the overall protection, as the former may be insufficient to fully cover all the medical expenses incurred by major illnesses (e.g. heart diseases or cancers).

Case 2: A self-employed jewellery designer seeking worldwide medical coverage

Background:

Chloe, Spenser's girlfriend, also aged 40 this year. Chloe is a self-employed jewellery designer who spends 15-20% of time travelling overseas for jewellery shows or other related functions. Being a self-employed designer, Chloe is not covered by company medical insurance and has to pay all medical costs at her own expense.

Target:

Chloe seldom falls ill but learning her best friend suffered from breast cancer has set off her health alarm. Now she wants to secure a quality, all-round individual medical plan as soon as possible, so that she can continue to focus on realising the dream of owning her jewellery brand.



假設Spenser投保「大亨」醫療保險計劃後，須接受冠狀動脈血管介入手術（俗稱「通波仔」），所需的總醫療費用約US\$50,200將如何由兩份醫療保險共同支付：

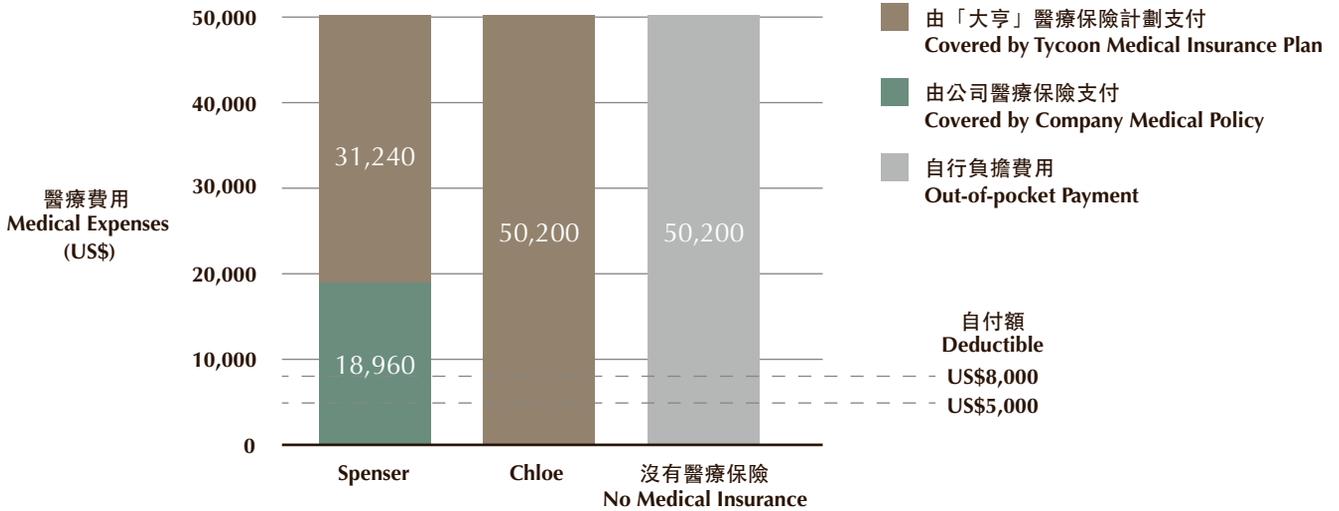
If, after enrolling in the Tycoon Medical Insurance Plan, Spenser needs to undergo a coronary angioplasty that costs US\$50,200, the medical expenses can be covered by the 2 medical plans as follows:

保障項目 Benefit Items	醫療費用 Medical Expenses (US\$)	Spenser	
		由公司醫療保險支付 Covered by Company Medical Policy (US\$)	由「大亨」醫療保險計劃支付 Covered by Tycoon Medical Insurance Plan (US\$)
病房及膳食費用 (3天) Room & Board (3 Days)	1,500	1,500	-
外科醫生費用 Surgeon's Fees	20,000	7,600	12,400
麻醉科醫生費用 Anaesthetist's Fees	6,300	2,300	4,000
手術室費用 Operating Theatre Fees	11,200	2,300	8,900
醫生巡房費用 Physician's Visit Fees	2,000	1,260	740
醫院雜項費用 Miscellaneous Hospital Charges	9,200	4,000	5,200
醫療費用總額 (US\$) Total Medical Expenses (US\$)	50,200	18,960	31,240

- Spenser會就醫療費用首先向公司醫保的保險公司提出索償，然後再就差額向藍十字提交索償申請。
- 由於Spenser的公司醫療保險賠償為US\$18,960，高於他在「大亨」醫療保險計劃所選的自付額 (US\$5,000)，所以他無須負擔任何費用。
- Spenser should first lodge a claim with the insurer of the company medical policy and then lodge a claim with Blue Cross for the shortfall.
- Since the claim payment from company medical policy (US\$18,960) is higher than the chosen deductible (US\$5,000) in the Tycoon Medical Insurance Plan, Spenser does not need to bear any medical cost himself.

假設Chloe投保「大亨」醫療保險計劃後，亦須接受相同的手術，總醫療費用同為US\$50,200，她與Spenser的醫療費用賠償情況如下：

And if, after enrolling in the Tycoon Medical Insurance Plan, Chloe also has to undergo the same surgery with the same cost of US\$50,200, the claim arrangement of their medical expenses can be summarised as follows:



- 雖然Chloe沒有公司醫療保險，但醫療費用仍可獲「大亨」醫療保險計劃全數賠償。
- Though Chloe has no company medical coverage, her medical costs can be fully covered by the Tycoon Medical Insurance Plan.

自付額 (Deductible)	年繳保費 (Annual Premium)	保費節省 (對比無自付額) (Premium Savings (Vs Nil Deductible))
US\$0	US\$5,251	-
US\$5,000	US\$2,363	節省 Save 55%
US\$8,000	US\$1,838	節省 Save 65%

- 已有公司醫療保險的人士，可投保設有合適自付額的個人醫療保險計劃。
- Customers with company medical policy should consider having an individual medical plan with a desirable deductible.
- 選擇自付額，可以較低的保費擁有同樣的醫療保障。
- With a deductible, the same medical protection will be offered at a lower premium.

註：以上個案僅供解說及參考之用，客戶所選的方案應按個人需要而定。此外，舉例中所列的數值僅供說明用途，實際的賠償額、保費或其他資料須視乎不同客戶的情況而定，並可能與上述個案所列的金額不同。

Note: The cases and figures quoted above are for illustrative purposes and reference only. Customers should select a medical protection plan that suits their personal needs and background. The actual claim payment, premiums and other related details depend on the situation and needs of different customers, and may differ from the amounts listed above.

保障範圍一覽表 Schedule of Benefits (US\$)

計劃級別 Plan Level	白金 Platinum	金 Gold	銀 Silver
每年綜合最高賠償額 (每受保人)* Overall Annual Limit (Per insured)*	3,000,000	2,300,000	1,600,000
終身最高賠償額 ¹⁰ (每受保人)* Overall Lifetime Limit ¹⁰ (Per insured)*	7,000,000		3,500,000
病房級別 ³ Type of Accommodation ³	私家房 Private Room		私家房/ 半私家房 [^] Private Room/ Semi-private Room [^]

*基本保障及自選附加保障均計算在內。Both Basic Benefits and Optional Benefits are inclusive.

[^]於香港、澳門及中國住院只限半私家房。Confinement in Hong Kong, Macau and China is restricted to semi-private room.

保障項目 Benefit Items	每受保人之每年最高賠償額 Annual Limit Per Insured		
	白金 Platinum	金 Gold	銀 Silver
基本保障 [†] Basic Benefits [†]			

A. 住院及手術保障 Hospital and Surgical Benefits

1. 病房及膳食費用 Room and Board	全數賠償 Full Cover		
2. 外科醫生費用 Surgeon's Fees			
3. 麻醉科醫生費用 [#] Anaesthetist's Fees [#]			
4. 手術室費用 [#] Operating Theatre Fees [#]			
5. 醫生巡房費用 Physician's Visit Fees			
6. 專科醫生費用 Specialist's Fees			
7. 深切治療費用 Charges for Intensive Care			
8. 私家看護費用 Private Nurse's Fees (最長120天) (Max. 120 days)			
9. 受保子女住院陪床費用 Companion Bed for Insured Child			
10. 醫院雜項費用 Miscellaneous Hospital Charges			
11. 門診手術費用 Fees for Outpatient Surgery			
12. 門診手術現金津貼 ⁹ Outpatient Surgery Cash Allowance ⁹	300 每宗手術療程 Per surgical procedure		
13. 先進診斷掃描 (在門診進行) Advanced Diagnostic Imaging (Performed in outpatient facility)	3,000	2,400	1,000
14. 每天住院現金津貼 (僅適用於入住合格公立醫院普通病房) (最長45天) Daily Hospital Cash Allowance (For confinement in general ward of eligible public hospital only) (Max. 45 days)	200 每天 Per Day		150 每天 Per Day
適用於選擇無自付額之受保人 Applicable to an Insured with No Deductible			
15. 每天住院現金津貼 (適用於入住香港私家醫院，而入住的病房為私家房以下級別) (最長45天) Daily Hospital Cash Allowance (For confinement in a private hospital in Hong Kong with room level lower than that of a private room) (Max. 45 days)	200 每天 Per Day		不適用 N/A
16. 住院入息共付賠償 [△] Hospital Income for Double Benefit [△] (最長45天) (Max. 45 days)	150	120	100
	每天 Per Day		

[†] 於扣除自付額後 (如適用)，藍十字將根據保障項目A-D之賠償額支付可償醫療費用。

Blue Cross covers eligible expenses incurred in excess of the deductible (if applicable) in respect of benefit items A to D.

[#] 藍十字在須支付「外科醫生費用」的情況下，方可賠償此保障所引致的費用。Charges for such benefits will be payable on condition that Surgeon's Fees are payable by Blue Cross.

[△] 若受保人獲得本公司以外之其他註冊保險公司所提供的任何其他醫院賠償計劃之保障 (不論是屬個人或團體保單)，而在該註冊保險公司支付任何賠償後，本公司方作出賠償，本保障將賠償按保障利益表中所列限額，就每日於醫院住院期間支付額外現金津貼。

For the Insured covered by any other hospital reimbursement plans offered by a licensed insurance company other than the Company, regardless of whether it is an individual or group policy, if the Company reimburses after any reimbursement has been paid from such licensed insurance company, this benefit shall be payable as extra cash benefit for each day of Confined period in Hospital subject to the limits as specified in the Schedule of Benefits.

註：所有費用必須為「合理慣例」¹¹及「醫療必要」¹²的開支。Note: All expenses incurred must be Reasonable and Customary¹¹ and Medically Necessary¹².

保障範圍一覽表 Schedule of Benefits (US\$)

保障項目 Benefit Items	每受保人之每年最高賠償額 Annual Limit Per Insured		
	白金 Platinum	金 Gold	銀 Silver
基本保障[†] Basic Benefits[†]			
B. 入院前及出院後保障 Pre- and Post-Hospitalisation Benefits			
1. 入院／日症手術 [‡] 前門診診症 Pre-Hospitalisation/Day Case Procedure [‡] Outpatient Consultation (入院／日症手術 [‡] 前30天內) (Within 30 days prior to hospitalisation/day case procedure [‡])	全數賠償 Full Cover		
2. 出院／日症手術 [‡] 後門診診症 Post-Hospitalisation/Day Case Procedure [‡] Outpatient Consultation (出院／日症手術 [‡] 後60天內) (Within 60 days after hospitalisation/day case procedure [‡])	全數賠償 Full Cover		
3. 出院／日症手術 [‡] 後輔助治療 Post-Hospitalisation/Day Case Procedure [‡] Auxiliary Treatment (出院／日症手術 [‡] 後60天內) (Within 60 days after hospitalisation/day case procedure [‡]) - 中醫治療 (包括跌打及針灸)、脊椎治療、物理治療、順勢療法及整骨療法 - Chinese Medicine Practitioner Treatment (including Chinese Bone-setting and Acupuncture), Chiropractic, Physiotherapy, Homeopathy and Osteopathy	650	350	350
4. 手術後家居看護 Post-Surgery Home Nursing (出院後28星期內) (Within 28 weeks after hospitalisation) (最長196天) (Max. 196 days)	全數賠償 Full Cover		
C. 特別治療保障 Special Treatment Benefits			
1. 癌症治療 Cancer Therapy - 化學治療、標靶治療、放射治療、荷爾蒙治療、免疫治療、伽瑪刀或數碼導航刀 - Chemotherapy, Targeted Therapy, Radiotherapy, Hormonal Therapy, Immunotherapy, Gamma Knife or Cyberknife	全數賠償 Full Cover		
2. 腎透析 Kidney Dialysis			
3. 器官移植 Organ Transplant			
4. 人體免疫力缺乏病毒／愛滋病治療 HIV/AIDS Treatment (等候期：5年) (Waiting period: 5 years)	10,000		
5. 妊娠期併發症 Complications of Pregnancy (等候期：1年) (Waiting period: 1 year)	15,000		
6. 精神病或心理治療 Mental or Psychological Treatment (須住院接受治療) (Inpatient treatment only)	6,000	4,000	4,000
7. 更年期雌激素替代療法 Hormone Replacement Therapy for Menopause	全數賠償 Full Cover		
8. 中藥治療 Traditional Chinese Medicine Treatment (須住院接受治療) (Inpatient treatment only)	1,300	650	650
9. 人造義體／義肢費用 Prosthetic Devices Expenses	全數賠償 Full Cover		
10. 善終服務 Hospice Care	10,000	不適用 N/A	
D. 意外治療保障 Accident Treatment Benefits			
1. 緊急門診治療 Emergency Outpatient Treatment			
2. 受損牙齒 Damaged Teeth			
3. 矯形修復手術 Reconstructive Surgery (須住院接受治療) (Inpatient treatment only)	全數賠償 Full Cover		
E. 支援服務 Supportive Services			
1. 第二醫療意見諮詢 Second Medical Opinion			
2. 優先出院免結賬 ⁶ Cashless Priority Discharge ⁶	✓		
3. 24小時全球緊急援助 24-hour Worldwide Emergency Aid			

[†] 於扣除自付額後 (如適用)，藍十字將根據保障項目A-D之賠償額支付可償醫療費用。

Blue Cross covers eligible expenses incurred in excess of the deductible (if applicable) in respect of benefit items A to D.

[‡] 「日症手術」指於門診設施由醫生進行屬醫療必要之醫療或外科程序。門診設施包括醫生診所，或醫院設立及營運之日症中心、日間護理中心、門診部或相等之門診設施。

“Day Case Procedure” means a medically necessary medical or surgical procedure which is performed by a physician in an outpatient facility. An outpatient facility may refer to a physician’s clinic, a day case centre, a day care centre, or an outpatient department or equivalent facility established and operated by a hospital.

註：所有費用必須為「合理慣例」¹¹及「醫療必要」¹²的開支。Note: All expenses incurred must be Reasonable and Customary¹¹ and Medically Necessary¹².

免費週年身體檢查

專為「白金」及「金」計劃而設的免費週年身體檢查，詳情如下：

Annual Health Checkup for Free

A free annual health checkup programme is designed exclusively for Platinum and Gold Plans with details below:

週年身體檢查 Annual Health Checkup

檢查項目 Profile (P1)

- | | |
|---|---|
| 1. 醫療顧問分析化驗報告及普通體格評估 | 1. Medical advice on laboratory reports and general physical measurements |
| 2. 貧血及血病檢查
(i) 全血計算
(ii) 紅血球沉降率
(iii) 血小板量 | 2. Anaemia and blood diseases screening
(i) Complete blood count
(ii) ESR
(iii) Platelet |
| 3. 血型及血因子類別
(i) 血型及血因子 | 3. Blood grouping
(i) ABO blood group and Rh factor |
| 4. 糖尿病檢查
(i) 血糖 | 4. Diabetic screening
(i) Glucose |
| 5. 痛風症檢查
(i) 尿酸 | 5. Gout screening
(i) Uric acid |
| 6. 心肺病檢查
(i) 胸部X光檢查及報告
(ii) 心電圖及報告 | 6. Heart and lung diseases screening
(i) Chest X-ray with report
(ii) Electrocardiogram (ECG) with report |
| 7. 心臟病及中風檢查
(i) 高低密度膽固醇 | 7. Heart disease and stroke risk factors screening
(i) HDL, LDL |
| 8. 腸病檢查
(i) 大便常規檢查 | 8. Intestinal diseases screening
(i) Stool (routine examination) |
| 9. 血脂肪檢查
(i) 總膽固醇
(ii) 三酸甘油脂 | 9. Lipids pattern screening
(i) Cholesterol total
(ii) Triglycerides |
| 10. 肝功能試驗
(i) 谷草轉氨酶
(ii) 谷丙轉氨酶 | 10. Liver function tests
(i) SGOT (AST)
(ii) SGPT (ALT) |
| 11. 腎功能試驗
(i) 肌肝酸
(ii) 尿素
(iii) 小便常規檢查 | 11. Renal function tests
(i) Creatinine
(ii) Urea
(iii) Urine (routine examination) |
| 12. 甲狀腺功能試驗
(i) 甲狀腺素 (T4) | 12. Thyroid function test
(i) Thyroxine (T4) |

身體檢查服務由藍十字指定的醫療服務機構提供，並須符合有關條款及細則，而受保人可於保單生效後及每年續保後享有此免費檢查服務。

The health checkup service is provided by designated service provider(s) of Blue Cross and subject to relevant terms and conditions. The insured person(s) will be entitled to the free checkup service after policy issuance and each subsequent renewal.

保障範圍一覽表 Schedule of Benefits (US\$)

保障項目 Benefit Items	每受保人之每年最高賠償額 Annual Limit Per Insured		
	白金 Platinum	金 Gold	銀 Silver
自選附加保障 Optional Benefits			
A. 門診保障 Outpatient Benefits			
1. 門診診症 Outpatient Consultation - 普通科醫生診症、專科醫生診症及醫生到診 - General Practitioner's Consultation, Specialist's Consultation and Doctor On-call Service	全數賠償 Full Cover		
2. 另類治療* Alternative Treatments* - 中醫治療（包括跌打及針灸）、脊椎治療、物理治療、順勢療法、整骨療法、催眠及精神病治療 [^] - Chinese Medicine Practitioner Treatment (including Chinese Bone-setting and Acupuncture), Chiropractic, Physiotherapy, Homeopathy, Osteopathy, Hypnotherapy and Mental Treatment [^]	全數賠償 Full Cover (每項治療每天1次) (1 visit per day per type of treatment)		
3. X光診斷及化驗* Diagnostic X-rays and Laboratory Tests* - 包括電腦掃描、磁力共振造影、步態掃描等 - Including Computerised Tomography, Magnetic Resonance Imaging, Gait Scans, etc.	全數賠償 Full Cover		
4. 處方藥物* Prescribed Medicines and Drugs*	全數賠償 Full Cover		
5. 檢查及疫苗注射 Health Examinations and Vaccinations - 週年身體檢查 [#] Annual Health Checkup [#] - 週年眼科檢查 [#] Annual Eye Examination [#] - 週年牙科檢查 [#] Annual Dental Examination [#] - 疫苗注射 Vaccinations	650		
B. 產科保障⁴ Maternity Benefits⁴			
1. 自然分娩 Normal Delivery (等候期：1年) (Waiting period: 1 year)	7,500		
2. 剖腹生產 Caesarean Section (等候期：1年) (Waiting period: 1 year)	15,000		
3. 流產或治療性墮胎 Miscarriage or Therapeutic Abortion (等候期：90天) (Waiting period: 90 days)	5,000		
C. 牙科保障 Dental Benefits			
1. 口腔檢查及洗牙 Oral Examination and Scale & Polish	全數賠償 Full Cover (每受保期內2次) (Twice per period of insurance)		
2. 常規治療 Routine Treatments (等候期：90天) (Waiting period: 90 days) - 包括補牙、脫牙、X光、鑲嵌、覆蓋、膿瘡排放、齒根管治療、牙周病手術及藥物使用 - Including Tooth Fillings, Tooth Extractions, X-ray, Inlays, Onlays, Drainage of Abscesses, Root Canal Work, Periodontal Surgery and Medications	2,000		
3. 修復治療 Restoration Treatments (等候期：90天) (Waiting period: 90 days) - 包括智慧齒或阻生牙齒脫除手術、假牙、齒冠、齒橋、牙齒植入及矯正治療、麻醉、修復齒尖的牙冠釘、齒根尖切除術、軟組織阻生、牙骨阻生及金牙鑲嵌 - Including Surgeries for Removal of Wisdom Teeth/Impacted Teeth, Dentures, Crowns, Bridges, Implants and Orthodontic Treatment, Anaesthesia, Pins for Cusp Restoration, Apicoectomy, Soft-tissue Impaction, Bony Impaction and Gold Inlays	3,000		

* 需具書面轉介。Referral letter is required.

[^] 由精神科醫生或心理學家提供之治療，需具書面轉介。If the treatment is performed by a Psychiatrist or a Psychologist, a referral letter is required.

[#] 每年一次。Once per year.

註：所有費用必須為「合理慣例」¹¹ 及「醫療必要」¹² 的開支。Note: All expenses incurred must be Reasonable and Customary¹¹ and Medically Necessary¹².

計劃摘要 Plan Summary

投保年齡 Enrolment Age	12日至70歲人士 [^] Age from 12 days to 70 years [^]
保障期 Protection Period	至100歲 [#] Up to age 100 [#]
保單續保 Policy Renewal	每年續保至99歲 Annual renewal up to age 99
保單貨幣 Policy Currency	美元 US\$
計劃級別 Plan Level	白金／金／銀 Platinum / Gold / Silver
保障地域 Cover Area	環球／環球（北美除外） Worldwide / Worldwide (excluding North America)
自付額 ² Deductible ²	白金／金計劃 Platinum / Gold Plans: US\$0 / US\$5,000 / US\$8,000 銀計劃 Silver Plan: US\$0 / US\$2,000 / US\$5,000
冷靜期 Cooling-off Period	40日 days
保費繳付方法 Premium Payment Mode	年繳／半年繳／月繳 Annual / Semi-annual / Monthly

[^]產科保障的投保年齡為18至44歲。 Enrolment age of Maternity Benefits is 18 to 44.

[#]產科保障的保障期至46歲。 Protection period of Maternity Benefits is up to the age of 46.

重要事項

- 關於「保障地域」：
 - 「門診保障」的保障地域必須與「基本保障」的保障地域相同。
 - 若已選擇「環球（北美除外）」為適用之保障地域，本保單下的保障將不包含北美（在緊急事故下接受的治療及／或服務除外）。
 - 在過去12個月內有6個月或以上居住、逗留或留學於北美地區的客戶、或計劃在未來12個月內於北美地區居住、逗留或留學的客戶、或北美地區的公民，只可選擇「環球（北美除外）」為「基本保障」及「門診保障」的保障地域。
 - 若受保人於過去12個月內有6個月或以上居住於北美地區，藍十字保留於續保時將保障地域由「環球」更改為「環球（北美除外）」的權利。
 - 若客戶有6個月或以上居住於包括但不限於以下國家，則無須支付額外地域附加保費：澳洲、孟加拉國、不丹、柬埔寨、關島、印度、印尼、日本、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、菲律賓、新加坡、韓國、斯里蘭卡、台灣、泰國和越南。
 - 因風險變動有機會影響本保單的保障，保單持有人在受保期內，必須就受保人之地址、居留地、職業變更或其他風險變動即時通知藍十字。藍十字有權就任何風險變動在任何期間作保費（不論就過去或未來受風險變動而影響之保費）、保障或其他條款及細則之調整。於藍十字支付本保單之任何保障之前，保單持有人必須繳付任何所須的額外保費。若居留地之變動導致受保人未能根據藍十字當時適用之核保規定符合受保資格，該受保人於本保單下之保障將不獲續保，而藍十字將致力為受保人轉換至另一個可供選擇的醫療保險計劃。
- 「自付額」只適用於「基本保障」。如受保人於續保時年齡為50、55、60或65歲，保單持有人可於該續保日之前或之後31天內要求減低該受保人之「自付額」，而無須提供該受保人進一步之健康證明。每名受保人終身只限行使此權利1次，而且一經行使將不可撤銷。有關更改只會於續保時生效，並需獲藍十字核准。
- 不論受保人屬自願與否，若 a) 在香港、澳門或中國於任何高於半私家房級別但不高於私家房級別的病房留院，根據「銀」計劃的「住院及手術保障」下應付之保障將受限於符合索償資格的費用之50%；或 b) 於任何高於私家房級別的病房留院，「住院及手術保障」下應付之保障將受限於符合索償資格的費用之25%。
- 如投保自選附加「產科保障」，客戶必須同時選擇「門診保障」。
- 可賠償金額之評估只供客戶參考之用，實際賠償金額以最終理賠決定為準。所有保障項目只會在符合所有保單條款及細則及所有不保之事項的情況下支付。

Important Notes

- About Cover Area:
 - The cover area of Outpatient Benefits must be the same as that of the Basic Benefits.
 - If the cover area of "Worldwide (excluding North America)" is selected or applied, this policy will not provide any cover in North America except for emergency treatment and/or service.
 - For the Basic Benefits and the Outpatient Benefits, customers who have resided or have stayed/studied in North America for 6 months or more in the past 12 months, or customers planning to reside, stay or study in North America in the next 12 months, or North American citizens, are only eligible to select "Worldwide (excluding North America)" as the cover area.
 - Upon policy renewal, Blue Cross reserves the right to change the cover area from "Worldwide" to "Worldwide (excluding North America)" if the insured has resided in North America for 6 months or more in the past 12 months.
 - No geographical loading will be applied if the customer resides in countries including but not limited to the following countries for 6 months or more: Australia, Bangladesh, Bhutan, Cambodia, Guam, India, Indonesia, Japan, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Thailand and Vietnam.
 - During the period of insurance, the policyholder shall give immediate notice to Blue Cross in respect of any change of address, residency, occupation of an insured or any other change of risk which may affect the cover of this policy. Blue Cross reserves the right to adjust the premium for any period, in the past or future, the benefits and other terms and conditions of this policy to effect such change of risk. The policyholder shall pay any additional premium as required before any benefit is payable under this policy. If the change of residency shall result in the insured being not insurable according to Blue Cross' underwriting rules, renewal of insurance coverage under this policy will cease and Blue Cross will endeavour to transfer the insured to another available medical insurance plan.
- The Deductible is only applicable to the Basic Benefits. With respect to an insured of age 50, 55, 60 or 65 at renewal, the policyholder may apply for lowering the Deductible within 31 days before or after the relevant renewal without providing Blue Cross with further evidence of the insured's health status. This right can only be exercised once during the lifetime of an insured and is irrevocable. The change shall only take effect on renewal and subject to the approval of Blue Cross.
- If an insured, whether voluntarily or involuntarily, is confined in a room of a standard: a) exceeding a semi-private room but not exceeding a private room in Hong Kong, Macau or China under the Silver Plan, the benefit payable under Hospital and Surgical Benefits shall be limited to 50% of the eligible expenses; or b) exceeding a private room, the benefit payable under Hospital and Surgical Benefits shall be limited to 25% of the eligible expenses.
- To enrol in the optional Maternity Benefits, customers must also opt for the Outpatient Benefits.
- Assessment of the estimated eligible claim amounts is for customers' reference only, the actual eligible claim amounts will be subject to the final claim decision. All benefits will be payable subject to the terms and conditions and the full list of policy exclusions.

重要事項

6. 「優先出院免結賬」只適用於入住本港私家醫院。需於入院前至少4個工作天填妥及交回「入院前登記表格」以進行登記及確認手續。藍十字承保的責任只限於符合「大亨」醫療保險計劃規定的合資格醫療費用，並會向受保人收取一切已繳付但不屬保單承保範圍的醫療費用（如有）。
7. 「保證續保至99歲」不適用於產科保障。本計劃保證續保（視乎續保時本公司仍否提供本計劃），藍十字將不會根據個別受保人於續保時的健康狀況或索償記錄，向其額外收取保費或附加不保事項至個別保單。然而，藍十字將保留在續保時調整保費及更改條款及細則的權利，例如：因應受保人年齡的調整、特定風險級別或風險級別的轉變作出保費調整。
8. 如在保單持有人就該受保人之保障以無索償折扣續保後，藍十字才支付或須支付該受保人於上一個受保期就基本保障條款項下產生的索償，保單持有人必須在藍十字發出繳費通知後21天內向藍十字償還折扣差額。除非藍十字收到該折扣差額，否則藍十字不會向受保人支付任何保單下的保障利益。
9. 「門診手術現金津貼」只適用於以下指定日症手術療程：胃鏡（包括食道、胃、十二指腸鏡）檢查、腸鏡檢查、膀胱鏡檢查、關節鏡檢查、陰道鏡檢查、支氣管鏡檢查、視網膜脫落修補及子宮鏡檢查。
10. 「終身最高賠償額」指受保人在所有「大亨」醫療保險計劃保單下，一生合計可享有的最高保障總額，不論該些保單是否已終止、仍生效或已到期。
11. 「合理慣例」指治療、服務或物料收費不超過在當地由具相若水平的相關服務或物料供應者，為同一性別和年齡的人士針對類似疾病或傷患提供的相類似的治療、服務或物料所收取的收費水平。「合理慣例」的收費在任何情況下均不應高於所招致的實際收費。藍十字會參照以下資料（如適用）以釐定「合理慣例」的醫療費用：a) 載列於由香港政府發佈之憲報中香港公立醫院向自費病人收取私家住院醫療服務的費用；b) 由業界進行的治療或服務費用調查；c) 內部索償數據；d) 受保程度或水平；及/或 e) 於提供治療、服務或物料當地之其他適當相關參考資料。
12. 「醫療必要」指需要就醫療狀況或牙科狀況接受治療或服務，而所進行的治療或服務按照一般公認的醫療標準乃屬必要的。被視為「醫療必要」的治療或服務必須符合以下各項：a) 需要合資格醫療人士的專業知識；b) 與診斷一致，並對醫治該狀況而言屬必需；c) 根據專業而審慎的醫療標準提供，而並非主要為使受保人、其家庭成員、護理人員或主診的合資格醫療人士帶來方便或感到舒適而提供；及 d) 在該情況下以最具成本效益的方式和設定提供。

Important Notes

6. Cashless Priority Discharge is only applicable to admission to private hospitals in Hong Kong. A Hospitalisation Pre-registration Form is required to be completed and returned to Blue Cross for registration and authorisation process at least 4 working days prior to admission. The liability of Blue Cross under the policy is limited to indemnify the insured for the eligible medical expenses payable in accordance with the Tycoon Medical Insurance Plan. Blue Cross shall recover from the insured the medical expenses settled on behalf of the insured which fall outside coverage of the policy (if any).
7. Guaranteed Renewal up to Age 99 is not applicable to the Maternity Benefits. Renewal is guaranteed (subject to the availability of the Plan at the time of renewal) and Blue Cross will neither charge extra premium nor impose additional exclusions on an individual policy based on the insured's health status or claim history at the time of renewal. However, Blue Cross reserves the right to revise the terms and conditions of this policy and adjust the premium upon policy renewal due to, for example, age-related adjustment, a particular risk class or change of risk class.
8. In the event that after the insurance coverage for that insured is renewed at a No Claim Discount, a claim by that insured for any benefit under the Basic Benefits section, which has accrued in the previous period of insurance, is paid or becomes payable by Blue Cross, the policyholder shall reimburse the discounted amount to Blue Cross within 21 days from the date of the invoice. No benefits shall be payable to the insured under this policy unless the discounted amount is received by Blue Cross.
9. Outpatient Surgery Cash Allowance is only applicable to the following day-case surgical procedures: gastroscopy (including esophagogastroduodenoscopy), colonoscopy, cystoscopy, arthroscopy, colposcopy, bronchoscopy, detached retina repair and hysteroscopy.
10. Overall Lifetime Limit refers to the maximum aggregate amount of cover under all policies of Tycoon Medical Insurance Plan an insured is entitled to during his lifetime, regardless of whether those policies are terminated, in force or have expired.
11. Reasonable and Customary refers to a charge for medical treatments, services or supplies which does not exceed the general level of charges being charged by the relevant service providers or suppliers of similar standing in the locality where the charge is incurred for similar treatments, 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 is Reasonable and Customary, Blue Cross may make reference to the following (if applicable): a) the gazette issued by the Hong Kong Government which sets out the fees for the private patient services in public hospitals in Hong Kong; b) industrial treatment or service fee survey; c) internal claim statistics; d) extent or level of benefit insured; and/or e) other pertinent source of reference in the locality where the treatments, services or supplies are provided.
12. Medically Necessary refers to the need to have treatment or service for the purpose of treating a medical condition or dental condition in accordance with the generally accepted standards of medical practice and such treatment or service must: a) require the expertise of a qualified medical practitioner; b) be consistent with the diagnosis and necessary for the treatment of the condition; c) be rendered in accordance with professional and prudent standards of medical practice, and not be rendered primarily for the convenience or the comfort of an insured, his/her family members, caretaker or attending qualified medical practitioner; and d) be rendered in the most cost-efficient manner and setting appropriate in the circumstances.

主要不保事項*

1. 已存在的狀況。
2. 並非屬醫療必要的治療或測試，或並非經醫生處方購買的藥物。
3. 除保單條款及細則內有關「檢查及疫苗注射」項目所訂明外，純粹為接受一般身體檢查、X光診斷、先進造影、化驗、基因測試、輔導服務或物理治療而住院。
4. 任何先天性疾患（疝氣、斜視或包皮開口狹窄除外）或成長障礙狀況或相類似疾病的相關治療（在受保人年齡達12歲後出現的新生嬰兒異常除外）。
5. 除保單條款及細則內有關「人體免疫力缺乏病毒／愛滋病治療」項目所訂明外，直接或間接因人體免疫力缺乏病毒及其相關醫療病症（包括愛滋病及／或因感染人體免疫力缺乏病毒而相應引致的任何突變、衍生或變異）所引致的費用。
6. 直接或間接因濫用藥物或酒精、自我毀傷或企圖自殺、進行不法活動、飲用超過規定水平的酒精或服用超過規定水平的藥物後駕駛或操控機器、或經由性接觸傳染的疾病或其後遺症。
7. 以美容或整形為目的之任何服務費用；包括因此而引致的相關醫療狀況，及與以下相關的費用，但不限於聽力測試、例行血液測試、一般身體檢查、預防性治療、接種疫苗或防疫注射（除保單條款及細則內有關「檢查及疫苗注射」項目所訂明外）等。
8. 除保單條款及細則內有關「受損牙齒」或「牙科保障」項目所訂明外，因牙科狀況接受之牙科治療及口腔外科手術（受保人因意外而需在住院期間接受的緊急牙科治療及手術除外），及因牙科狀況或於口腔外科手術後不論是以住院病人或門診病人身份接受的覆診治療。
9. 除保單條款及細則內有關「產科保障」或「妊娠期併發症」項目所訂明外，所有產科及其併發症相關的檢驗、治療、外科程序、輔導服務及基因測試，包括懷孕或其後的分娩、墮胎或流產；節育或恢復生育；兩性結紮或變性；不育治療等。

Major Exclusions*

1. Pre-existing conditions.
2. Treatment or test which is not Medically Necessary; or purchase of drugs which are not prescribed by a physician.
3. Except as otherwise provided in the Terms and Conditions for "Health Examinations and Vaccinations" in the policy, confinement solely for the purpose of general checkup; diagnostic X-ray; advanced imaging; laboratory tests; genetic testing; counselling or physiotherapy.
4. Treatment related to congenital conditions (except Hernias, Strabismus and Phimosis) or developmental conditions or disease of similar kind (except the neo-natal abnormalities which become apparent after an insured reaches the age of 12).
5. Except as otherwise provided in Terms and Conditions for "HIV/AIDS Treatment" in the policy, expenses directly or indirectly arising from Human Immunodeficiency Virus (HIV) and its related medical condition, including AIDS and/or any mutations, derivation or variations thereof, consequential upon an HIV infection.
6. Treatment or medical condition directly or indirectly arising from or consequent upon the abuse of drugs or alcohol, self-inflicted injuries or attempted suicide, illegal activity, or driving or maneuvering machines whilst exceeding the prescribed alcohol and drug limit, or venereal and sexually transmitted disease or its sequelae.
7. Charges in respect of services for beautification or cosmetic purposes; including any related and associated medical conditions arising therefrom, and expenses in relation to but not limited to hearing tests, routine blood tests, general checkups, prophylaxis treatment, vaccinations or inoculations (except as otherwise provided in the Terms and Conditions for "Health Examinations and Vaccinations" in the policy), etc.
8. Except as otherwise provided in the Terms and Conditions for "Damaged Teeth" or "Dental Benefits" in the policy, treatment of a dental condition and oral surgery (except treatment of an emergency and surgery arising from an accident received by the insured during confinement) as well as follow up treatment of the dental condition or oral surgery whether as an inpatient or outpatient.
9. Except as otherwise provided in the Terms and Conditions for "Maternity Benefits" or "Complications of Pregnancy" in the policy, all investigations, treatments, surgical procedure, counselling services and genetic testing relating to maternity conditions and its complications, including 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, etc.

主要不保事項*

10. 除保單條款及細則內有關「醫院雜項費用」或「人造義體／義肢費用」項目所訂明外，購買人工裝置，購買或租借耐用的醫療設備及儀器，包括但不限於家居使用之輪椅、床及傢俱、呼吸道壓力治療機及面罩、可攜式氧氣及氧氣治療儀器、透析機、運動設備、眼鏡、助聽器、特別支架、輔助步行器具、非處方藥物、空氣清新機、空調及供熱裝置。
11. 除保單條款及細則內有關「精神病或心理治療」或「另類治療」項目所訂明外，直接或間接由任何精神或心理狀況，以及其生理及心理表現所引致的治療或醫療狀況。
12. 除保單條款及細則內有關「出院後輔助治療」或「另類治療」項目所訂明外，其他另類療法，包括但不限於中醫、指壓、天灸、推拿、催眠、氣功、按摩治療、香薰治療及相類似之療法。
13. 直接或間接因戰爭（不論宣戰與否）、內戰、侵略、外敵行動、敵對行動、叛亂、革命、暴動、起義或軍事政變或奪權；或因參與陸軍、空軍、海軍及其他紀律性服務而引致的治療或醫療狀況。

*適用於基本保障及自選附加保障。

Major Exclusions*

10. Except as otherwise provided in the Terms and Conditions for “Miscellaneous Hospital Charges” or “Prosthetic Devices Expenses” in the policy, purchase of prosthetic devices, purchase or rental 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.
11. Except as otherwise provided in the Terms and Conditions for “Mental or Psychological Treatment” or “Alternative Treatments” in the policy, treatment or medical condition directly or indirectly arising from any psychotic, psychological, or psychiatric conditions and any physiological or psychosomatic manifestations thereof.
12. Except as otherwise provided in the Terms and Conditions for “Post-Hospitalisation Auxiliary Treatment” or “Alternative Treatments” in the policy, other alternative treatments including but not limited to Chinese medicine, acupuncture, tianjiu, tui-na, hypnotism, qigong, massage therapy, aromatherapy and such alike.
13. Treatment or medical condition directly or indirectly arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection or military or usurped power; resulting from taking part in military, air force, naval and other disciplinary services.

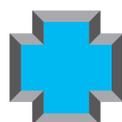
*Applicable to Basic Benefits and Optional Benefits.

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- 此小冊子僅在香港派發。派發此小冊子並不構成亦不應被詮釋為在香港境外出售、游說顧客購買或提供任何保險產品。
- 「大亨」醫療保險計劃由香港獲授權之保險商 - 藍十字（亞太）保險有限公司承保。
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Notes:

- This brochure is for reference only. Should there be any discrepancy between the English and the Chinese versions of this brochure, the English version shall apply and prevail. Please refer to the policy for the exact terms and conditions and the full list of policy exclusions. For more information or a copy of the policy terms and conditions, please visit www.bluecross.com.hk, Blue Cross HK Digital Insurance App or call Blue Cross Customer Service Hotline on 3608 2988.
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