

# Benefit Schedule

## 保障計劃

### Plan Summary 計劃概要

Plan Option 計劃選項	Plan 1 計劃1	Plan 1A 計劃1A	Plan 2 計劃2	Plan 2A 計劃2A	Plan 2B 計劃2B
	Semi-private Room 半私家病房		Ward Room 大房		
Geographical Cover 受保地區	Worldwide 全球				
Benefit Coverage 保障範圍	(A) Hosptialisation Benefits 住院保障	(A) Hospitalisation 住院保障 + (B) Supplement Major Medical Benefits 額外醫療保障	(A) Hosptialisation Benefits 住院保障	(A) Hospitalisation 住院保障 + (B) Supplement Major Medical Benefits 額外醫療保障	(A) Hospitalisation 住院保障 + (B) Supplement Major Medical Benefits 額外醫療保障
Annual Benefit Limit 每年保障限額	\$650,000 per Policy Year 每保單年度 \$650,000	\$830,000 per Policy Year 每保單年度 \$830,000	\$500,000 per Policy Year 每保單年度 \$500,000	\$680,000 per Policy Year 每保單年度 \$680,000	\$620,000 per Policy Year 每保單年度 \$620,000

### (A) Hospitalisation benefits 住院保障

Plan Option 計劃選項	Plan 1 計劃1		Plan 2 計劃2	
Certification No. 認可編號	F00061-01-000-01		F00061-02-000-01	
Annual Benefit Limit 每年保障限額	\$650,000 per Policy Year 每保單年度 \$650,000		\$500,000 per Policy Year 每保單年度 \$500,000	
I. Basic benefits 基本保障	Non Network Coverage 非網絡保障	Surgical Package performed at CUHKMC 於中大醫院進行定價收費手術	Non Network Coverage 非網絡保障	Surgical Package performed at CUHKMC 於中大醫院進行定價收費手術
	Semi-private Room 半私家病房	Ward Room 大房	Ward Room 大房	Ward Room 大房
(a) Room and board (Maximum 180 days per Policy Year) 病房及膳食 (每保單年度最多180日)	每日 \$1,200 per day	Full Cover <sup>(9)</sup> 全額賠償 <sup>(9)</sup>	每日 \$800 per day	Full Cover <sup>(9)</sup> 全額賠償 <sup>(9)</sup>
(b) Miscellaneous charges (per Policy Year) 雜項開支 (每保單年度)	\$26,000		\$20,000	
(c) Attending doctor's visit fee (Maximum 180 days per Policy Year) 主診醫生巡房費 (每保單年度最多180日)	每日 \$1,200 per day		每日 \$800 per day	
(d) Specialist's fee <sup>(2)</sup> (per Disability per Policy Year) 專科醫生費 <sup>(2)</sup> (每保單年度 每傷病)	\$6,100		\$4,800	
(e) Intensive care (Maximum 25 days per Policy Year) 深切治療 (每保單年度最多25日)	每日 \$4,375 per day		每日 \$3,500 per day	
(f) Surgeon's fee (Per surgery, subject to surgical category for the surgery/procedure in the Schedule of Surgical Procedures) 外科醫生費 (每項手術限額, 按手術表劃分的手術分類) • Complex 複雜 \$99,840 • Major 大型 \$49,920 • Intermediate 中型 \$24,960 • Minor 小型 \$9,984			\$76,800 \$38,400 \$19,200 \$7,680	
(g) Anaesthetist's fee 麻醉科醫生費	35% of Surgeon's fee payable <sup>(5)</sup> 外科醫生費賠償額的 35% <sup>(5)</sup>		35% of Surgeon's fee payable <sup>(5)</sup> 外科醫生費賠償額的 35% <sup>(5)</sup>	
(h) Operating theatre charges 手術室費	35% of Surgeon's fee payable <sup>(5)</sup> 外科醫生費賠償額的 35% <sup>(5)</sup>		35% of Surgeon's fee payable <sup>(5)</sup> 外科醫生費賠償額的 35% <sup>(5)</sup>	
(i) Prescribed Diagnostic Imaging Tests <sup>(2)(3)</sup> (per Policy Year)(Subject to 30% Coinsurance) 訂明診斷成像檢測 <sup>(2)(3)</sup> (每保單年度) (設 30% 共同保險)	\$20,000			
(j) Prescribed Non-surgical Cancer Treatments <sup>(4)</sup> (per Disability per Policy Year) 訂明非手術癌症治療 <sup>(4)</sup> (每保單年度每傷病)	\$200,000			

(k) Pre- and post- Confinement / Day Case Procedure outpatient care <sup>(2)</sup> 入院前或出院後 / 日間手術前後的門診護理 <sup>(2)</sup>	For (k)(i) and (k)(ii), up to \$8,400 per Policy Year 就(k)(i)及(k)(ii), 每保單年度最多\$8,400			
(i) 1 prior outpatient visit or Emergency consultation per Confinement / Day Case Procedure <sup>(6)</sup> 入院前 / 日間手術前最多1次門診或急症診症 <sup>(6)</sup>	每日一次 \$1,200 per visit per day			
(ii) All follow-up outpatient visits per Confinement/ Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure) <sup>(7)</sup> 出院後 / 日間手術後90日內的所有跟進門診 <sup>(7)</sup>	每日一次 \$1,000 per visit per day			
(l) Psychiatric treatments (per Policy Year) 精神科治療 (每保單年度)	\$30,000			
<b>Benefit Items<sup>(1)</sup></b> <b>保障項目<sup>(1)</sup></b>	<b>Non Network Coverage</b> <b>非網絡保障</b>	<b>Surgical Package performed at CUHKMC</b> <b>於中大醫院進行定價收費手術</b>	<b>Non Network Coverage</b> <b>非網絡保障</b>	<b>Surgical Package performed at CUHKMC</b> <b>於中大醫院進行定價收費手術</b>
<b>II. Additional benefits</b> <b>附加保障</b>	<b>Semi-private Room</b> <b>半私家病房</b>	<b>Ward Room</b> <b>大房</b>	<b>Ward Room</b> <b>大房</b>	<b>Ward Room</b> <b>大房</b>
(a) Companion bed at Hospital (Maximum 180 days per Policy Year) 住院陪床 (每保單年度最多180日) (For Insured Person Aged below 18 or above 65 only) (僅適用於年齡未滿18歲或超過65歲受保人)	每日 \$520 per day	Full Cover <sup>(9)</sup> 全額賠償 <sup>(9)</sup>	每日 \$400 per day	Full Cover <sup>(9)</sup> 全額賠償 <sup>(9)</sup>
(b) Kidney dialysis treatment (per Policy Year) 腎臟透析 (每保單年度)	\$200,000			
(c) Home care service <sup>(2)</sup> (in Hong Kong only) 家居護理服務 <sup>(2)</sup> (只適用香港)	For (c)(i) and (c)(ii), up to \$6,000 per Policy Year (with 90 days after discharge from Hospital) 就(c)(i)及(c)(ii), 每保單年度最多\$6,000 (出院後 90 日內)			
Service including: Subject to one (1) visit per day 服務包括: 每日一次 (i) Home nursing 家居護士 (ii) Assistant healthcare service 輔助保健服務	\$600			
Free Worldwide Emergency Assistance Services 全球免費緊急支援服務 (Medical Evacuation / Repatriation) (醫療運送 / 送返原居地)	Free 免費			

## (B) Supplementary major medical benefit (Optional) 自選額外醫療保障

Plan Option 計劃選項	Plan 1A 計劃1A	Plan 2A 計劃2A	Plan 2B 計劃2B
Certification No. 認可編號	F00061-01-001-01	F00061-02-001-01	F00061-02-002-01
Benefit Level 保障級別	Semi-private Room 半私家病房	Ward Room 大房	Ward Room 大房
Benefit is payable for the eligible medical expenses exceed the maximum benefits under : (1) Basic Benefits (a) – (h) and (k)(i) ; and (2) Additional Benefits (a); and/or (3) Overall maximum of the corresponding hospitalisation benefits after the eligible medical expenses payable under the full cover benefit for network procedure package at CUHK Medical Centre  若合資格醫療費用超出了以下保障項目的最高賠償額後開始賠償 (1) 基本保障 (a) - (h) 及 (k)(i) ; 及 (2) 附加保障 (a); 及/或 (3) 於中大醫院進行網絡全額保障手術套餐之住院保障合資格醫療費用的最高總限額	Maximum Limit Per Policy Year (in HKD) 每宗病症最高賠償額 (港元)		
Annual Benefit Limit 每年保障限額	\$180,000 per Policy Year 每保單年度 \$180,000	\$180,000 per Policy Year 每保單年度 \$180,000	\$120,000 per Policy Year 每保單年度 \$120,000
Reimbursement Percentage 賠償百分比	80%		
If the insured person has chosen a level of hospital facilities and services higher than the entitled level of accommodation, the following scale of reimbursement (Adjustment Factor) will be applied for Supplementary Major Medical Benefit <sup>(10)</sup> : 如受保人的實際住房設施及服務級別高於其受保障的級別, 額外醫療保障將按以下調整系數計算高於賠償百分比的額外費用 <sup>(10)</sup> :			
Ward to Semi-Private 大房轉半私家房間	50%		
Ward to Private 大房轉私家房間	25%		
Ward to Above Standard Private 大房轉高於標準私家房間	12.5%		
Semi-Private to Private 半私家病房轉私家房間	50%		
Semi-Private to Above Standard Private 半私家病房轉高於標準私家房間	12.5%		

#### Notes –

- (1) Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above, unless otherwise specified.
- (2) The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
- (3) Tests covered here only include computed tomography (“CT” scan), magnetic resonance imaging (“MRI” scan), positron emission tomography (“PET” scan), PET-CT combined and PET-MRI combined.
- (4) Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- (5) The percentage here applies to the Surgeon's fee actually payable or the benefit limit for the Surgeon's fee according to the surgical categorisation, whichever is the lower.
- (6) Pre-Confinement / Day Case Procedure consultation includes but not limited to consultation, western medication prescribed or diagnostic test.
- (7) Post-Confinement / Day Case Procedure consultation includes but not limited to consultation, western prescribed medication, dressings, physiotherapy, occupational therapy, speech therapy, diagnostic test or rehabilitation treatment including dietetic consultation.
- (8) Please refer to the Company's website (<https://www.asiainsurance.hk/>) for the latest list of Network Hospitals. The list is subject to change from time to time.
- (9) Full cover shall mean no itemised benefit sub-limit, and the benefit payable shall be subject to the Annual Benefit Limit and Lifetime Benefit Limit.
- (10) The adjusted Coinsurance shall not apply where the room class upgrade arises from –
  - (i) unavailability of accommodation at the entitled room class due to ward or room shortage for Emergency Treatment;
  - (ii) isolation reasons that require a specific class of accommodation; or
  - (iii) other reasons not involving personal preference of the Policy Holders and/or the Insured Persons.

#### 註解

- (1) 同一項目的合資格費用不可獲上述表中多於一個保障項目的賠償，除非另有註明。
- (2) 本公司有權要求有關書面建議的證明，例如轉介信或由主診醫生或註冊醫生在索償申請表內提供的陳述。
- (3) 檢測只包括電腦斷層掃描 (“CT”掃描)、磁力共振掃描 (“MRI”掃描)、正電子放射斷層掃描 (“PET”掃描)、PET-CT 組合及 PET-MRI 組合。
- (4) 治療只包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。
- (5) 此百分比適用於外科醫生費實際賠償的金額或根據手術分類下外科醫生費的保障限額，以較低者為準。
- (6) 入院前/日間手術前的門診護理包括但不限於診症、處方西藥或診斷檢測。
- (7) 出院後/日間手術後的門診護理包括但不限於診症、處方西藥、敷藥、物理治療、職業治療、言語治療、診斷檢測或復康治療包括營養諮詢。
- (8) 關於最新的網絡醫院名單，請查閱本公司網頁(<https://www.asiainsurance.hk/>)。該名單可能會不時更改。
- (9) 全額保障是指不設分項賠償限額，應支付的保障將受限於每年保障限額及終身保障限額。
- (10) 調整後共同保險將不適用於下列情況引致的病房升級：
  - (i) 因急症治療入住醫院，而醫院因病房供應不足而未能提供訂明的房間級別；
  - (ii) 因隔離需要而入住指定級別的房間；或
  - (iii) 不涉及保單持有人及/或受保人個人喜好的其他原因。

