

Worldwide Elite Medical Plan





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The Worldwide Elite Medical Plan (hereinafter called "the Plan", "your policy" or "the policy", as appropriate) is underwritten by **AXA General Insurance Hong Kong Limited** ("AXA"), which is authorised and regulated by the Insurance Authority of the Hong Kong SAR. AXA will be responsible for providing your insurance coverage and handling claims under your policy. The Hongkong and Shanghai Banking Corporation Limited ("HSBC") is registered in accordance with the Insurance Ordinance (Cap. 41 of the Laws of Hong Kong) as an insurance agent of AXA for distribution of general insurance products in the Hong Kong SAR. General insurance plans are products of AXA but not HSBC.

For monetary disputes arising between HSBC and you out of the selling process or processing of the related transaction by HSBC, HSBC will enter into a Financial Dispute Resolution Scheme process with you. On the other hand, for any disputes over the terms and conditions of your policy, AXA will resolve with you directly.

The policy is excluded from the application of the Contracts (Rights of Third Parties) Ordinance (Cap. 623 of the Laws of Hong Kong) ("TP Ordinance"). Any person or entity which is not a party to the policy shall have no rights under the TP Ordinance to enforce any terms of the policy.

This product brochure contains general information only and does not constitute any contract between any parties and AXA. For detailed terms, conditions and exclusions, please refer to the relevant policy contract.

Issued by AXA General Insurance Hong Kong Limited

(Only for use in Hong Kong Special Administrative Region) May 2018

Worldwide Elite Medical Plan

We all want to stay healthy to pursue different life goals and enjoy every stage of life with our loved ones, but even if you are leading a healthy lifestyle, there is no guarantee of health. When illness or injury strikes, you need the reassurance that you have the resources to access high-quality medical treatment no matter where you are. Therefore, you need a medical insurance plan that can provide you with the support and cover your need throughout your life's journey, giving you peace of mind every step of the way.

Worldwide Elite Medical Plan, a comprehensive and flexible medical plan with lifetime coverage up to HK\$40,000,000 per year for in-patient and day-patient treatment ("Basic Plan") benefits, supports you with high-quality medical coverage and services. Under the Plan, you have the choice of topping up your Basic Plan with optional benefit plans that best suit your needs at additional premiums, when you need them.

Worldwide Elite Medical Plan's Structure

In-patient and Day-patient Treatment (Basic Plan)



Optional Out-patient Plan Optional Maternity Plan¹

Optional Dental Plan²

Optional Optical Plan²

¹ This Optional Maternity Plan is only applicable for insured person between age of 18 to 44 and subject to applicable waiting period. Insured person cannot enrol for the Optional Maternity Plan again if she has ever cancelled the Optional Maternity Plan under the same policy.

² These plans are required to be purchased together with the Optional Out-patient Plan and subject to applicable waiting period.

The flexibility you expect

Tailoring your plan within 2 steps

You can tailor your Plan by selecting your preferred deductible³ option and optional benefit plan(s) based on your medical protection needs.

Step 1: Select your deductible³ option for your Basic Plan

You can choose from different levels of annual deductible amount to suit your needs. If you are covered by another medical plan, you can choose a deductible option to enjoy a lower premium.

Step 2: Select your optional benefit plan(s)

Besides the Basic Plan that covers your essential needs for in-patient and day-patient benefits, you can top up your medical coverage by selecting the following optional benefit plans according to your personal needs:

- Optional Out-patient Plan
- Optional Maternity Plan¹
- Optional Dental Plan²
- Optional Optical Plan²

Plan features

Worldwide coverage with free choice of your doctors and hospitals

Regardless of where you are, you can choose to receive medical treatments either from doctors at hospitals under our Global Directory of Hospitals ("GDOH"), or of your own choice. We will reimburse you the medical costs incurred for any eligible claims according to the policy terms.

Guaranteed lifetime protection and renewal⁴

The Plan offers lifetime coverage without any age limits and guarantees lifetime renewal at each policy anniversary^{4,5,6}, regardless of your health condition and claims history.

- 1 This Optional Maternity Plan is only applicable for insured person between age of 18 to 44 and subject to applicable waiting period. Insured person cannot enrol for the Optional Maternity Plan again if she has ever cancelled the Optional Maternity Plan under the same policy.
- 2 These plans are required to be purchased together with the Optional Out-patient Plan and subject to applicable waiting period.
- 3 The deductible option selected for Basic Plan and Optional Out-patient Plan must be the same. Deductible is an aggregate amount of eligible expenses claimed that must be borne by the insured person in each period of insurance before any benefits are payable under the policy.
- 4 You have a guaranteed right to renew the policy by advance payment of the appropriate annual premium before the due date on each policy anniversary in accordance with the terms of the policy. Renewal of the policy is on an annual basis, with lifetime coverage (cover can be renewed up to age of 44 of the insured person for Optional Maternity Plan¹). AXA reserves our right to terminate the insurance coverage to any or all of the insured person(s) covered under the policy or the policy immediately if the provision of coverage to any or all of the insured person(s) under the policy would result in a breach of applicable laws or regulations. In any event, if the insured person moves to USA as his / her principal country of residence* and / or moves to Japan and / or sanctioned countries as his / her residence and / or address anytime during the period of insurance, the policy will not be renewed at next policy anniversary following our actual knowledge of the change.
- 5 The premium rates and age range of each group are not guaranteed. The premium payable upon each renewal and the terms of the renewed policy are determined by AXA at its discretion and may not be the same as the existing policy. Please refer to the premium table as shown in this product brochure for details of the premium rates for different plans and options, which may be changed from time to time by AXA at its discretion without prior notification.
- 6 The policy will be terminated at the earliest occurrence of any of the following events:
 - a when the policyholder dies; or
 - b when any premiums due under the policy remain unpaid at the end of the grace period; or
 - c when the policy is cancelled by the policyholder; or
 - d when there is promulgation of any laws or regulations in the relevant jurisdiction whereby the provision of insurance coverage under this policy will become illegal; or
 - e a policy anniversary which falls on the same day or immediately following the policyholder's change of his / her principal country of residence* to USA and / or changes of his / her residence and / or address to Japan and / or sanctioned countries; or
 - f when the coverage of all insured person(s) terminate(s) for whatever reason; or
 - g when any shortfall is not settled within fifteen (15) days as specified in the relevant written notice to the policyholder
- * Principal country of residence is the country where the insured person lives or intends to live for most of the period of insurance being 185 days or more and which will be shown as the place of residence in our records.

Full cover of in-patient and day-patient expenses⁷

The Plan provides full cover for most eligible hospital charges and surgical expenses. In addition, our benefits are also extended to cover:

- pre-hospitalisation and post-hospitalisation consultations
- rehabilitation
- cancer treatments and kidney dialysis
- AIDS or HIV (as a result of proven occupation accident or blood transfusion only)
- treatment for alcohol or substance abuse
- weight loss treatment for morbid obesity
- home nurse and in-patient private nurse
- coverage for injury caused by terrorism or war where the insured person is an innocent bystander
- hospice and palliative care
- funeral expenses

Optional Out-patient Plan⁷

In addition to consultation with general practitioner, specialist or Chinese medical practitioners, the Plan also covers the following benefits if you select our Optional Out-patient Plan:

- vaccinations and prescribed health supplements
- child annual eye and hearing tests
- child wellness test and adult annual check-up
- psychiatric and psychological treatment
- physiotherapy, speech therapy, oculomotor therapy and occupational therapy
- chiropractic treatment, acupuncture, osteopathy, homeopathy and dietician
- hormone replacement therapy
- traditional Chinese medicine

Optional benefits to meet your specific circumstance⁷

The Plan offers the flexibility to opt for extra protection to suit your specific needs including Optional Maternity Plan¹, Optional Dental Plan² and Optional Optical Plan² for your selection with market-leading benefits such as:

- Infertility treatment
- Lasik surgery
- Dental implant

Simple application

No medical check-up is required for the application of Worldwide Elite Medical Plan.

Family discount

A 10% discount on premium will be offered if 1) your direct family member(s) is an existing member of the Plan; or 2) you and your direct family member(s) successfully enrol for the Plan at the same time. Direct family member(s) means:

- spouse
- partner
- child(ren)8
- parent(s)

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² These plans are required to be purchased together with the Optional Out-patient Plan and subject to applicable waiting period.

⁷ Details of benefits and services are set out in the section of summary of benefits of this product brochure.

³ Child(ren) refer(s) to any biological child, stepchild, legally adopted child or foster child of the policyholder who is between the age of 14 days and age of 17, or up to age of 23 if he / she is unmarried, financially solely dependent upon the policyholder and registered as a full-time student at school, college or university with written proof from the educational institute where he / she is enrolled.

Value-added services

Direct billing for hospitalisation 9,10

AXA will settle your eligible in-patient or day-patient expenses directly with hospitals listed in our Global Directory of Hospitals ("GDOH") in most countries in the world, provided that necessary pre-authorisation is obtained. If you have chosen a deductible option, direct billing service will be effective as soon as you have settled your agreed share of relevant medical bills with the hospital. For details, please refer to the Policyholder User Guide which will be provided to you together with the policy contract after your policy takes effect.

24-hour customer service hotline

Our Worldwide Elite Customer Service Hotline (Cantonese, Mandarin and English) can be contacted whether you are travelling abroad or in Hong Kong 24 hours a day all year round, to provide you with necessary information about your benefits and claims under the Plan.

Second medical opinion 9,11

After receiving the eligible diagnosis for a medical condition from your registered medical practitioner, we will help you to obtain a second medical opinion from the medical expert of a designated network hospital upon your request. The medical expert will then prepare a written medical report on the evaluation and any treatment recommendation.

Worldwide emergency assistance 9,10

Wherever you need emergency assistance, simply contact Worldwide Elite Customer Service Hotline and we will provide assistance in emergency evacuation and / or overseas repatriation.

³ The deductible option selected for Basic Plan and Optional Out-patient Plan must be the same. Deductible is an aggregate amount of eligible expenses claimed that must be borne by the insured person in each period of insurance before any benefits are payable under the policy.

⁹ Please refer to the Policyholder User Guide for details of the value-added services and procedure, which will be provided to you together with the policy contract after your policy takes effect. Please note that the terms of the services and procedures in relation to these value-added services can be amended by AXA from time to time without prior notice.

¹⁰ These services are provided by a third party service provider which is an independent contractor and is not an agent of AXA or HSBC. AXA and HSBC shall make no representation, warranty or undertaking as to the availability of the services and shall not be liable to the policyholder or the insured person in any respect of any loss, damage, expense, suit, action or proceeding suffered or incurred by the insured person, whether directly or indirectly, arising from or in connection with the services provided or advice given by the third party service provider or its agents, or the availability of such services. AXA reserves the right to amend the terms and conditions thereof from time to time without prior notice.

¹¹ The second medical opinion is provided by a medical service provider which is an independent contractor and is not an agent of AXA or HSBC. Neither AXA nor HSBC shall be held responsible for or liable to the policyholder or any of the insured person(s) for anything in relation to such medical opinion given by the medical service provider and hospital. AXA reserves the right to amend the terms and conditions thereof from time to time without prior notice.

Worldwide Elite Medical Plan at a glance

Benefit period	Lifetime, except Op	Lifetime, except Optional Maternity Plan¹: up to age of 45				
Issue age	14 days to age of 8	0, except Optional N	Naternity Plan¹: age c	f 18 to 44		
Policy renewability	Guaranteed annual	renewal for lifetime	4			
Premium structure	Yearly adjusted bas	ed on attained age⁵				
Policy currency	HK\$	HK\$				
Payment mode	Annual	Annual				
Restriction of residency and address	Policyholder and insured person must: 1) not have USA as his / her principal country of residence*; and 2) not have Japan and / or sanctioned countries as his / her residence and / or address					
Deductible ³ Optional Optional Optional Optional Out-patient Plan Optional Dental Plan ²					Optional Optical Plan ²	
Deductible ³ amount	No Deductible	Zero	Zero			
per insured person per year	Option A	HK\$16,000	HK\$6,000	Nil	Nil	Nil
	Option B	HK\$48,000	HK\$12,000			

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- 3 The deductible option selected for Basic Plan and Optional Out-patient Plan must be the same. Deductible is an aggregate amount of eligible expenses claimed that must be borne by the insured person in each period of insurance before any benefits are payable under the policy.
- 4 You have a guaranteed right to renew the policy by advance payment of the appropriate annual premium before the due date on each policy anniversary in accordance with the terms of the policy. Renewal of the policy is on an annual basis, with lifetime coverage (cover can be renewed up to age of 44 of the insured person for Optional Maternity Plan¹). AXA reserves our right to terminate the insurance coverage to any or all of the insured person(s) covered under the policy or the policy immediately if the provision of coverage to any or all of the insured person(s) under the policy would result in a breach of applicable laws or regulations. In any event, if the insured person moves to USA as his / her principal country of residence* and / or moves to Japan and / or sanctioned countries as his / her residence and / or address anytime during the period of insurance, the policy will not be renewed at next policy anniversary following our actual knowledge of the change.
- The premium rates and age range of each group are not guaranteed. The premium payable upon each renewal and the terms of the renewed policy are determined by AXA at its discretion and may not be the same as the existing policy. Please refer to the premium table as shown in this product brochure for details of the premium rates for different plans and options, which may be changed from time to time by AXA at its discretion without prior notification.
- * Principal country of residence is the country where the insured person lives or intends to live for most of the period of insurance being 185 days or more and which will be shown as the place of residence in our records.

Summary of benefits

A highlight of the key benefits of the Plan is set out as below (subject to the relevant exclusions). Please refer to the policy contract for the full list of the benefits and the relevant terms, conditions and exclusions.

	Maximum limit per insured person per year (unless otherwise specified)	
Area of cover	Worldwide	
Maximum limit per year	HK\$40,000,000 (not applicable to Optional Maternity Plan ¹ , Optional Dental Plan ² and Optional Optical Plan ²)	
BASIC PLAN (IN-PATIENT AND DAY-PATIENT TREATMENT)		
HOSPITALISATION AND SURGICAL BENEFITS		
Hospital charges Charges for accommodation in the standard single room Medical practitioner's charges and specialist's fee Nursing care Drugs and dressings Intensive care Physiotherapy or complementary therapies Diagnostic tests Advanced medical imaging	Paid in full	
Surgical expense Surgeon's fee Anaesthetist's fee Operating theatre's charges	Paid in full	
Surgical / medical appliance or prosthesis (internal) ⁺	Paid in full	
Surgical / medical appliance or prosthesis (external) +	Paid in full, up to HK\$36,000 per item	
In-patient private nurse *	Paid in full, up to 30 days	
Organ transplant (excluding donor's costs)	Paid in full	
Parent accommodation for admission (for an insured child under the age of 18)	Paid in full for an extra bed inside the same room of the insured person	
Psychiatric and psychological treatment i,+	Paid in full, up to 30 days	

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² These plans are required to be purchased together with the Optional Out-patient Plan and subject to applicable waiting period.

i Waiting period: 24 months

⁺ Pre-authorisation is required for this benefit and subject to AXA review.

Summary of benefits (continued)

	Maximum limit per insured person per year (unless otherwise specified)		
Area of cover	Worldwide		
PRE-HOSPITALISATION AND POST-HOSPITALISATION BENEFITS			
Home nurse ⁺	Paid in full, up to 60 days		
Pre-hospitalisation out-patient consultation	Paid in full, up to 30 days before admission to hospital / surgical procedure and up to 1 visit per day		
Post-hospitalisation follow-up consultation	Paid in full, up to 30 days following discharge from hospital / surgical procedure and up to 1 visit per day		
Post-hospitalisation ancillary services (including physiotherapists, speech therapist, pathologists, orthoptists or podiatrists) [‡]	Paid in full, up to 30 days after discharge from hospital and up to 1 treatment per day for each kind of treatment		
Rehabilitation ⁺	Paid in full, up to 90 days		
EMERGENCY BENEFITS			
Emergency in-patient and out-patient dental treatment for accident	Paid in full		
Private land ambulance	Paid in full		
Emergency treatment for accident (within 72 hours after a new accident for treatment in the outpatient department or emergency department of a hospital)	Paid in full		
EXTENDED BENEFITS			
Kidney dialysis	Paid in full		
Cancer treatment (including chemotherapy and radiotherapy)	Paid in full		
Acquired Immune Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV) (as a result of proven occupation accident or blood transfusion only) i.+	Paid in full		
Hospice and palliative ii,+	Paid in full, up to 30 days per lifetime		
Treatment for alcohol or substance abuse in the recognised centre (including detoxification) $^{\rm i, +}$	Paid in full, up to HK\$480,000 per lifetime		
Weight loss treatment for morbid obesity i,+	90% reimbursement, up to HK\$100,000 per lifetime		
Funeral expenses	Up to HK\$24,000 per lifetime		
OPTIONAL OUT-PATIENT PLAN			
Consultation with medical practitioner	Paid in full, up to 15 visits per month		
Prescribed health supplements (such as vitamins)	Paid in full, up to HK\$2,400 in aggregate		
Diagnostic tests	Paid in full		

- i Waiting period: 24 months
- ii Waiting period: 12 months
- + Pre-authorisation is required for this benefit and subject to AXA review.
- Pre-authorisation is required after 10 sessions of the same kind of therapy and subject to AXA review.

Summary of benefits (continued)

	Maximum limit per insured person per year (unless otherwise specified)
Area of cover	Worldwide
Physiotherapy [‡]	Paid in full, up to HK\$1,200 per visit, 1 visit per day and up to 20 visits
Speech therapy, oculomotor therapy and occupational therapy ‡	Paid in full, up to HK\$1,200 per visit, 1 treatment for each kind of therapy per day and up to 20 visits in aggregate
Traditional Chinese medicine	Paid in full, up to HK\$1,200 per visit and up to 20 visits
Chiropractic, acupuncturist, osteopathic and homeopath ‡	Paid in full, up to HK\$1,200 per visit, 1 visit for each kind of therapy per day and up to 20 visits in aggregate
Dietician [‡]	Paid in full, up to HK\$1,200 per visit, 1 visit per day and up to 20 visits
Psychiatric and psychological treatment ⁱ	Paid in full, up to HK\$2,000 per visit , 1 visit per day and up to 10 visits in aggregate
Medical prosthesis iii,1	Paid in full, up to HK\$9,600 per item and up to HK\$36,000 in aggregate
Hormone replacement therapy (for the female menopause which has been induced artificially and / or through early onset under age of 40)	Paid in full, up to 18 months per lifetime
Child annual eye and hearing tests (for age of 15 or below only)	Paid in full, up to HK\$1,200 in aggregate, and up to 1 eye test and 1 hearing test
Child wellness tests (for age of 7 or below only)	Paid in full, up to HK\$5,400 and up to 15 times per lifetime
Adult annual check-up iii (for over age of 15 only)	Paid in full, up to HK\$5,400 and 1 check-up
Vaccinations	Paid in full, up to HK\$4,000 in aggregate
OPTIONAL MATERNITY PLAN ¹	
Routine pregnancy iv	Paid in full, up to HK\$96,000 per pregnancy
Non-elective caesarean section, complicated pregnancy and complicated childbirth ^{IV} (for treatment of an eligible medical condition arises during the antenatal stages of pregnancy and during childbirth)	Paid in full, up to HK\$176,000 per pregnancy
Infertility treatment ^{i,+} (for insured person under age of 40 who attempts to give birth to her first child)	Paid in full, up to HK\$24,000 per procedure and up to 3 procedures per lifetime
Congenital, hereditary and birth abnormality iv (this benefit is applicable to the newborn if his / her mother has been covered by the policy for 10 consecutive months or more prior to the newborn's birth. No medical check-up and health information are required for application of the newborn to the policy within 15 days from date of birth)	Paid in full

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- i Waiting period: 24 months
- iii Waiting period: 6 months
- iv Waiting period: 10 months
- $^{\scriptsize +}$ $\,$ Pre-authorisation is required for this benefit and subject to AXA review.
- Pre-authorisation is required after 10 sessions of the same kind of therapy and subject to AXA review.
- Pre-authorisaton is required for any item which cost is over HK\$3,000.

Summary of benefits (continued)

	Maximum limit per insured person per year (unless otherwise specified)	
Area of cover	Worldwide	
OPTIONAL DENTAL PLAN ^{2,iii}		
Maximum limit per year	Up to HK\$24,000	
Routine and preventive	Paid in full, up to HK\$12,000 in aggregate	
Major restorative and implant	Paid in full, up to HK\$16,000 in aggregate	
Orthodontic treatment for an insured child up to age of 16	50% reimbursement, up to HK\$7,200 in aggregate	
OPTIONAL OPTICAL PLAN ²		
Maximum limit per year	Up to HK\$6,400	
Contact lenses, frames and glasses (excluding sunglasses)	Paid in full, limited to 1 ophthalmologist visit and 1 pair of lenses / frames / glasses	
Lasik surgery and lens implants	Paid in full	

Value-added services		
Direct billing for hospitalisation 9,10 Included		
Customer service hotline	24-hour service	
Second medical opinion 9,11 Included		
Worldwide emergency assistance 9,10	Included	

Notes:

- For the benefits and waiting period, please refer to policy contract for the details terms and conditions.
- Pre-authorisation and referral letter are required for some benefit items. Please refer to the Policyholder User Guide which will be provided to you together with the policy contract after your policy takes effect for the detailed terms and conditions.
- 2 These plans are required to be purchased together with the Optional Out-patient Plan and subject to applicable waiting period.
- 9 Please refer to the Policyholder User Guide for details of the value-added services and procedure, which will be provided to you together with the policy contract after your policy takes effect. Please note that the terms of the services and procedures in relation to these value-added services can be amended by AXA from time to time without prior notice.
- 10 These services are provided by a third party service provider which is an independent contractor and is not an agent of AXA or HSBC. AXA and HSBC shall make no representation, warranty or undertaking as to the availability of the services and shall not be liable to the policyholder or the insured person in any respect of any loss, damage, expense, suit, action or proceeding suffered or incurred by the insured person, whether directly or indirectly, arising from or in connection with the services provided or advice given by the third party service provider or its agents, or the availability of such services. AXA reserves the right to amend the terms and conditions thereof from time to time without prior notice.
- 11 The second medical opinion is provided by a medical service provider which is an independent contractor and is not an agent of AXA or HSBC. Neither AXA nor HSBC shall be held responsible for or liable to the policyholder or any of the insured person(s) for anything in relation to such medical opinion given by the medical service provider and hospital. AXA reserves the right to amend the terms and conditions thereof from time to time without prior notice.
- iii Waiting period: 6 months

Annual Premium ^{^ 5}

Basic Plan

Policy Currency	HK\$			
A (in also is a)	Deductible ³ option			
Age group (inclusive)	No Deductible	Option A: HK\$16,000	Option B: HK\$48,000	
14 days - 9	19,648	13,752	9,824	
10 - 17	21,520	15,064	10,760	
18 - 29	26,296	18,408	13,144	
30 - 35	34,640	24,248	17,320	
36 - 40	41,320	28,920	20,656	
41 - 45	45,904	32,136	22,952	
46 - 50	50,496	35,352	25,248	
51 - 55	60,728	42,512	30,368	
56 - 60	73,208	51,248	36,608	
61 - 65	80,432	56,304	40,216	
66 - 70	102,656	71,864	51,328	
71 - 75	134,168	93,920	67,088	
76 - 80	175,352	122,752	87,680	

[^] Levy collected by the Insurance Authority will be imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2867 8611.

³ The deductible option selected for Basic Plan and Optional Out-patient Plan must be the same. Deductible is an aggregate amount of eligible expenses claimed that must be borne by the insured person in each period of insurance before any benefits are payable under the policy.

The premium rates and age range of each group are not guaranteed. The premium payable upon each renewal and the terms of the renewed policy are determined by AXA at its discretion and may not be the same as the existing policy. Please refer to the premium table as shown in this product brochure for details of the premium rates for different plans and options, which may be changed from time to time by AXA at its discretion without prior notification.

Annual Premium ^{^ 5} (continued)

Optional Out-patient Plan

Policy Currency	HK\$			
Ana mana (in aluaina)	Deductible ³ option			
Age group (inclusive)	No Deductible	Option A: HK\$6,000	Option B: HK\$12,000	
14 days - 9	20,824	14,576	10,416	
10 - 17	14,392	10,072	7,192	
18 - 29	21,456	15,024	10,728	
30 - 35	28,272	19,792	14,136	
36 - 40	33,720	23,608	16,864	
41 - 45	37,464	26,224	18,736	
46 - 50	41,216	28,848	20,608	
51 - 55	49,312	34,520	24,656	
56 - 60	59,440	41,608	29,720	
61 - 65	69,272	48,488	34,632	
66 - 70	88,408	61,888	44,200	
71 - 75	115,544	80,880	57,768	
76 - 80	151,008	105,704	75,504	

Optional Maternity Plan¹

Optional Dental Plan²

Optional Optical Plan²

Policy Currency Age group (inclusive)	НК\$
18 - 44	57,824

Policy Currency Age group (inclusive)	HK\$
14 days - 80	11,600

Policy Currency Age group (inclusive)	нк\$
14 days - 17	4,086
18 - 80	5,632

Note:

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Right to return policy

If you change your mind about your policy within 30 days of receipt of your policy for whatever reason, you can simply return the policy for cancellation. Any premium and levy^ you have paid will be refunded in full, provided you have not made a claim or enjoyed any medical services under your policy.

How do I find out more?

Planning for your health protection is important. We recommend you to regularly review your insurance portfolio and adjust in response to your personal needs and market condition changes.

We will be happy to help review your current and future needs and recommend you the right medical plan. You can arrange for a health protection review meeting with us.

Call 2233 3131

Go to www.hsbc.com.hk

Visit any HSBC branch

Main policy exclusions

- Suicide, attempted suicide or self-inflicted injury
- Pre-existing conditions
- Non-medically necessary service provided by the hospital such as TV, radio, telephone or other similar facility
- Abuse of alcohol and drugs
- Cosmetic surgery and aesthetic treatment
- Developmental disorders such as behavioural or learning problems
- Eating disorders
- Experimental treatment or drugs
- Sexually transmitted disease and HIV related disability
- Sexual problems and gender re-assignment
- Treatment received in nursing homes, convalescence homes, health hydros or nature cure clinics
- Treatment by an immediate family member, insured person himself / herself and related enterprise

Notes:

- For the full list of exclusions, please refer to the policy contract for details.
- Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured person on his or her last birthday.
- ^ Levy collected by the Insurance Authority will be imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2867 8611.

Frequently asked questions

Where can I get medical treatment that is covered by Worldwide Elite Medical Plan?

AXA will reimburse you the costs incurred in receiving eligible medical treatments from any registered doctors or hospitals (including general practitioners, specialists or health professionals) worldwide.

How can I make sure that I am fully covered when I need hospitalisation?

We recommend that you contact the 24-hour Worldwide Elite Customer Service Hotline to check the coverage under the policy and to obtain AXA's necessary pre-authorisation before receiving any non-emergency in-patient or day-patient treatment.

Can I get in-patient and day-patient treatment without pre-authorisation?

In general yes, as long as the treatment is covered by the policy. There are specific benefits that require AXA's pre-authorisation, and we recommend you to obtain pre-authorisation for your in-patient and day-patient treatment prior to receiving such treatment to ensure you are fully aware of your coverage under the policy.

Do I need to get pre-authorisation prior to visiting any doctor for out-patient treatment?

Out-patient treatment does not usually require pre-authorisation except for the following benefit items / treatments:

- AIDS or HIV
- · Hospice and palliative
- · Weight loss treatment for morbid obesity
- Medical prosthesis whose cost is over HK\$3,000
- · Infertility treatment

Also, pre-authorisation is required after every 10 sessions of each of the following benefit items / services / therapies: post-hospitalisation ancillary services, physiotherapy, speech therapy, oculomotor therapy, occupational therapy, chiropractic, acupuncturist, osteopathic, homeopathy and dietician. Please refer to the Policyholder User Guide which will be provided to you together with the policy contract after your policy takes effect for details.

Do I need to settle the medical bill first if I am hospitalised?

In case of hospitalisation under our Global Directory of Hospitals ("GDOH"), once a pre-authorisation request is approved, a Letter of Guarantee will be issued to the hospital and AXA will settle the medical bill for you after you have paid the deductible³ amount (where applicable). The list of hospitals under GDOH is available at www.hsbc.com.hk or you can call the Worldwide Elite Customer Service Hotline for the GDOH after policy issuance.

In case of hospitalisation in a hospital not under our GDOH, you will have to settle the bill directly with the hospital first. Then, you can claim reimbursement from us less any deductible³ amount (where applicable) upon submission of original medical bills and required documents. For detailed procedures, please refer to the Policyholder User Guide which will be provided to you together with the policy contract after your policy takes effect.

What should I do if I need emergency help?

No matter where you are, simply call Worldwide Elite Customer Service Hotline to get immediate emergency assistance available 24 hours a day, all year.

Will I be guaranteed to renew my plan even if I have made a claim? Is the premium guaranteed unchanged?

This Plan is guaranteed lifetime renewable⁴ (cover can be renewed up to age of 44 of the insured person for Optional Maternity Plan¹), except where there have / has been overdue payments or shortfall arising from a claim or fraudulent claims. However, the premium rates and age range of each group are not guaranteed. The premium payable upon renewal and the terms of the renewed policy may not be the same as the existing policy and will be determined at the discretion by AXA. Please refer to the premium table as shown in this product brochure for details of the premium rates for different plans and options, which may be changed from time to time by AXA without prior notification.

In the event I find I can no longer afford to pay the premium for this Plan at retirement, is there any option for me to still keep a medical protection plan?

You can either change to a higher deductible³ option at a lower level of premium under this Plan or consider plan conversion. The request must be submitted within 30 days before the policy anniversary and acceptance of the request must be confirmed in writing by AXA in order to be effective.

- 1 This Optional Maternity Plan is only applicable for insured person between age of 18 to 44 and subject to applicable waiting period. Insured person cannot enrol for the Optional Maternity Plan again if she has ever cancelled the Optional Maternity Plan under the same policy.
- 3 The deductible option selected for Basic Plan and Optional Out-patient Plan must be the same. Deductible is an aggregate amount of eligible expenses claimed that must be borne by the insured person in each period of insurance before any benefits are payable under the policy.
- 4 You have a guaranteed right to renew the policy by advance payment of the appropriate annual premium before the due date on each policy anniversary in accordance with the terms of the policy. Renewal of the policy is on an annual basis, with lifetime coverage (cover can be renewed up to age of 44 of the insured person for Optional Maternity Plan¹). AXA reserves our right to terminate the insurance coverage to any or all of the insured person(s) covered under the policy or the policy immediately if the provision of coverage to any or all of the insured person(s) under the policy would result in a breach of applicable laws or regulations. In any event, if the insured person moves to USA as his / her principal country of residence* and / or moves to Japan and / or sanctioned countries as his / her residence and / or address anytime during the period of insurance, the policy will not be renewed at next policy anniversary following our actual knowledge of the change.
- * Principal country of residence is the country where the insured person lives or intends to live for most of the period of insurance being 185 days or more and which will be shown as the place of residence in our records.

我是否需要在住院前支付醫療費用?

若您選擇入住「全球醫院名錄」上所列的醫院,在取得預先批核後,AXA安盛將向該醫院發出付款保證書,並於您繳清自付額³(如適用)後支付有關醫療費用。「全球醫院名錄」可於www.hsbc.com.hk下載,您亦可於保單發出後致電環球滙晉客戶服務熱線查詢「全球醫院名錄」。

若您入住的醫院並不屬於「全球醫院名錄」之列,您必須先行直接向醫院支付醫療費用,然後提交醫療賬單正本及所需文件申請索償(須扣除自付額³,如適用)。有關手續的詳情,請參閱保單持有人指南。有關指南將於保單生效後連隨保單合約提供。

我應該如何取得緊急支援?

不論身處何地,您只需致電環球滙晉客戶服務熱線,便可獲得 全年即時24小時的緊急醫療支援。

如果我曾經提出索償,是否可以保證續保?保費 是否保證維持不變?

本計劃保證可終身續保⁴(自選婦科計劃¹可續保至受保人年滿44歲),但有逾期未繳付保費或有由索償或欺詐索償而致的保障差額欠款除外。然而,保費及各年齡組別並非保證不變的。每次續保時,應繳保費及續保保單的條款,亦可能與現有保單不同,並將由AXA安盛釐定。有關不同計劃及自選項目的保費詳情,請參閱本產品説明書所列的保費表。AXA安盛可不時修訂保費而不作預先通知。

如果我在退休後不能負擔本計劃的保費,我還有沒有其他選擇,可以讓我繼續保留醫療保障計劃?

您可轉換至本計劃下保費較低而自付額³較高的選擇,或考慮轉換至其他保障計劃。有關申請須在保單週年日前30日內遞交, 在AXA安盛以書面形式確認您的申請後,該申請方能生效。

- 1 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- 3 基本計劃及自選門診計劃的自付額選擇必須相同。自付額指在本保單下應支付的任何保障前,受保人於各保險期限內必須承擔的合資格索償開支總額。
- 4 您只需根據保單條款,於每個保單週年日的期限前預先繳付適當的年度保費,便可享續保保證。保單需要每年續保,並可獲終身保障(自選婦科計劃¹可續保至受保人年滿44歲)。若向任何或 所有保單受保人士提供的保障違反適用法律或法規,AXA安盛有權終止任何或所有保單受保人士的保障或即時終止保單。在任何情况下,若受保人於保險期限內移居美國作為其主要居住國* 及/或移居日本及/或受制裁國家作為其居住地及/或地址,於我們得悉有關轉變後,本保單將不能於下個保單週年日續保。
- * 主要居住國是指受保人在保險期限內大部分時間(185日或更長時間)生活或打算生活的國家・該國家將在我們的紀錄顯示為其居住地。

常見問題

在哪裡接受醫療可獲得環球滙晉醫療計劃保障?

全球任何註冊醫生或醫院(包括普通科醫生、專科醫生或健康護理專業人士)所提供的合資格醫療的費用均可獲得AXA安盛賠償。

如何確保我的住院費用可獲全數賠償?

我們建議您先聯絡24小時服務的環球滙晉客戶服務熱線,以查詢保單保障範圍及在接受任何非緊急住院或日間住院治療之前獲得所須的AXA安盛預先批核。

我可否在未獲得預先批核的情況下接受住院及 日間住院治療?

在一般情況下,只要有關治療屬於保單保障範圍內,您將能在未獲得預先批核的情況下獲得治療。不過,由於部分特定保障必須取得AXA安盛的預先批核,我們建議您在接受相關治療前,首先取得住院及日間住院治療的預先批核,以確保您已清楚了解保單的受保範圍。

我是否需要在向門診醫生求診前取得預先批核?

除以下保障項目/治療外,門診毋須取得預先批核:

- 愛滋病或人類免疫缺陷病毒(HIV)
- 安養及紓緩護理
- 病態肥胖減體重治療
- 費用高於3,000港元的假肢
- 不育治療

此外,當您已使用以下保障項目/服務/療程十次後,便須取得預先批核:出院後輔助服務、物理治療、言語治療、動眼神經治療、職業治療、脊骨治療、針灸、整骨療法、順勢療法及營養師。詳情請參閱保單持有人指南。有關指南將於保單生效後連隨保單合約提供。

退保的權利

如果您在收到保單後的30天內,因任何理由認為保障不符合您的需要,您可退還保單,予以取消。如果期間您未有領取任何索償或並未享用保單下的任何醫護服務,您將可獲得退還全數的已付保費及徵費[^]。

了解詳情

未雨綢繆,及早安排您的醫療保障。我們建議您定期檢視您的 保險組合,並因應個人需要及市場情況的轉變而作出調整。

我們樂意助您了解現在及未來的保障需要,並提供適合的醫療 保障計劃建議。您可就健康保障評估約見我們:

致電 2233 3131

瀏覽 www.hsbc.com.hk

親臨 任何一間滙豐分行

主要不受保項目

- 自殺、意圖自殺或自我傷害
- 已存在的病狀
- 由醫院提供的非醫療必需服務,例如:電視、電台、電話或其他類似 設施
- 酗酒及藥物濫用
- 整容外科和美容療程
- 發育異常,例如行為或學習問題
- 飲食失調
- 實驗性治療或藥物
- 性傳染疾病及人類免疫缺陷病毒 (HIV) 的相關殘疾
- 性問題及變性
- 於護理院、療養院、康體水療院或自然療養診所接受的治療
- 來自直系親屬、受保人自己及相關企業提供的治療

註:

- 有關其他不受保項目之詳情,請參考有關保單合約。
- 除文義另有所指外,本產品説明書提及的年齡均指受保人上次生日時的年齡。
- ^ 保單將按適用之徵費率徵收保險業監管局的有關徵費。 欲了解更多詳情・請瀏覽www.axa.com.hk/ia-levy或致電AXA安盛 (852) 2867 8611。

每年保費 ^5 (續)

自選門診計劃

保單貨幣	港元			
年齡組別 (包括首尾年歲)	自付額 ³ 選擇			
	無自付額	選擇 A:6,000港元	選擇B:12,000港元	
14天 - 9歲	20,824	14,576	10,416	
10 - 17嵗	14,392	10,072	7,192	
18 - 29歲	21,456	15,024	10,728	
30 - 35歲	28,272	19,792	14,136	
36 - 40歲	33,720	23,608	16,864	
41 - 45歲	37,464	26,224	18,736	
46 - 50歲	41,216	28,848	20,608	
51 - 55歲	49,312	34,520	24,656	
56 - 60歲	59,440	41,608	29,720	
61 - 65歲	69,272	48,488	34,632	
66 - 70歲	88,408	61,888	44,200	
71 - 75歲	115,544	80,880	57,768	
76 - 80歲	151,008	105,704	75,504	

自選婦科計劃1

年齡 組別(包括 首尾年歲)

18 - 44歲

保單貨幣

自選牙科計劃2

保單貨幣		
年齡 組別(包括 首尾年歲)	港元	年 紅 首

自選眼科計劃2

11,600

保單貨幣 年齡 組別(包括 首尾年歲)	港元
14天 - 17歲	4,086
18 - 80歲	5,632

註:

保費及各年齡組別並不保證不變。每次續保時,應繳保費及續保保單的條款均由AXA安盛釐定,並可能與現有保單不相同。

港元

57,824

保單將按適用之徵費率徵收保險業監管局的有關徵費。 欲了解更多詳情,請瀏覽www.axa.com.hk/ia-levy或致電AXA安盛 (852) 2867 8611。

14天 - 80歲

- 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- 2 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。
- 3 基本計劃及自選門診計劃的自付額選擇必須相同。自付額指在本保單下應支付的任何保障前,受保人於各保險期限內必須承擔的合資格索償開支總額。
- 5 保費率及各年齡組別並非保證。每次續保時,應繳保費及續保保單的條款均由AXA安盛釐定,並可能與現有的保單不相同。有關不同計劃及自選項目的保費詳情,請參閱本產品説明書所列的 保費表。AXA安盛可不時修訂而不作預先通知。

每年保費 ^ 5

基本計劃

坐作印 劃				
保單貨幣	港元			
年齡組別	自付額 ³ 選擇			
年齢組別 (包括首尾年歳)	無自付額	選擇 A:16,000港元	選擇B:48,000港元	
14天 - 9歲	19,648	13,752	9,824	
10 - 17歲	21,520	15,064	10,760	
18 - 29歲	26,296	18,408	13,144	
30 - 35歲	34,640	24,248	17,320	
36 - 40歲	41,320	28,920	20,656	
41 - 45歲	45,904	32,136	22,952	
46 - 50歲	50,496	35,352	25,248	
51 - 55歲	60,728	42,512	30,368	
56 - 60歲	73,208	51,248	36,608	
61 - 65歲	80,432	56,304	40,216	
66 - 70歳	102,656	71,864	51,328	
71 - 75歲	134,168	93,920	67,088	
76 - 80歲	175,352	122,752	87,680	

[^] 保單將按適用之徵費率徵收保險業監管局的有關徵費。 欲了解更多詳情·請瀏覽www.axa.com.hk/ia-levy或致電AXA安盛 (852) 2867 8611。

³ 基本計劃及自選門診計劃的自付額選擇必須相同。自付額指在本保單下應支付的任何保障前,受保人於各保險期限內必須承擔的合資格索償開支總額。

⁵ 保費率及各年齡組別並非保證。每次續保時,應繳保費及續保保單的條款均由AXA安盛釐定,並可能與現有的保單不相同。有關不同計劃及自選項目的保費詳情,請參閱本產品説明書所列的 保費表。AXA安盛可不時修訂而不作預先通知。

保障範圍(續)

	每名受保人每年的最高賠償限額(除非另有説明)		
保障地區	全球		
自選牙科計劃 ².ii			
每年最高限額	上限為 24,000港元		
例行及預防	全額支付,合共上限為12,000港元		
主要修復及植入	全額支付,合共上限為16,000港元		
口腔治療(適用於16歲或以下的受保兒童)	50%賠償額,合共上限為7,200港元		
自選眼科計劃 ²			
每年最高限額	上限為6,400港元		
隱形眼鏡、鏡框及鏡片(不包括太陽眼鏡)	全額支付,只限1次眼科治療及1對眼鏡/鏡框/鏡片		
準分子激光手術及晶片植入	全額支付		

增值服務	
住院直接結算 9.10	已包括
客戶服務熱線	24小時服務
第二醫療意見服務 9,11	已包括
全球緊急支援 9.10	已包括

註:

- 有關保障和等待期,請參閱保單合約的詳細條款及細則。
- 部分保障項目須取得預先批核及轉介信。有關詳細條款及細則,請參閱保單持有人指南。有關指南將於保單生效後連隨保單合約提供。
- 2 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。
- 9 有關增值服務及使用程序的詳情,請參閱保單持有人指南。有關指南將於保單生效後連隨保單合約提供。請注意AXA安盛可不時修訂這些增值服務的條款和程序,而毋須預先通知。
- 10 此項服務由第三者服務機構提供。該機構為獨立的承辦商,並非AXA安盛或滙豐的代理。AXA安盛及滙豐不須就該機構提供之服務供應作出表述、保證或承諾,及不須就受保人因該機構或其 代理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產生之任何損失、損害、費用、起訴、訴訟或法律程序,向保單持有人或受保人承擔任何責任。AXA安盛保留不時修訂有關條款 及細則之權利而不作預先通知。
- 11 第二醫療意見服務是由醫療服務機構提供。該機構為獨立的承辦商,並非AXA安盛或滙豐的代理。AXA安盛或滙豐不須就該醫療服務機構及醫院向保單持有人或任何受保人士所提供的任何醫療意見或任何有關事項而承擔責任或負責。AXA安盛保留不時修訂有關條款及細則之權利而不作預先通知。
- iii 等待期:6個月

保障範圍(續)

	每名受保人每年的最高賠償限額(除非另有説明)
保障地區	全球
物理治療 [‡]	全額支付,每次上限為1,200港元,每日最多1次,而最多20次
言語治療、動眼神經治療及職業治療‡	全額支付,每次上限為1,200港元,每種治療每日1次,而合共最多20次
中醫治療	全額支付,每次上限1,200港元,最多20次
脊骨治療、針灸、整骨療法及順勢療法 [‡]	全額支付,每次上限為1,200港元,每種治療每日1次,而合共最多20次
營養師 [‡]	全額支付,每次上限為1,200港元,每日最多1次治療,最多20次
精神及心理治療	全額支付,每次上限為2,000港元,每日最多1次治療,而合共最多10次
假肢 ""。"	全額支付,每項上限為9,600港元,而合共上限為36,000港元
荷爾蒙補充療法 (為年齡40歲以下治療其人為誘發及或提早出現的女性更年期)	全額支付,終身最多18個月
兒童年度視力及聽覺測驗(只限15歲或以下兒童)	全額支付,合共上限為1,200港元,最多1次視力測驗及1次聽覺測驗
兒童健康檢查(只限7歲或以下兒童)	全額支付,上限為5,400港元,而終身最多15次
成人年度檢驗 !!' (只限15歲以上人士)	全額支付,上限為5,400港元及1次檢驗
接種疫苗	全額支付,合共上限為4,000港元
自選婦科計劃1	
正常懷孕i*	全額支付,每次懷孕上限為96,000港元
非預約剖腹分娩、懷孕併發症及分娩併發症 ^{>>} (治療產前階段及分娩期間出現的合資格醫療狀況)	全額支付,每次懷孕上限為176,000港元
不育治療 : (適用於40歲以下及嘗試懷有第一胎的受保人)	全額支付,每項療程上限為24,000港元,而終身最多可接受3次療程
先天性、遺傳性及分娩異常 (本保障適用於其母親在產子前連續10個月或以上獲保單保障的新生嬰兒。此新生嬰兒由出生日期起計的15天內投保可免除醫療檢驗及毋須提交健康資料)	全額支付

- 1 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- i 等待期:24個月
- iii 等待期:6個月
- iv 等待期:10個月
- + 本保障須取得預先批核並須經AXA安盛審查。
- ‡ 完成10次同類治療後須取得預先批核並須經AXA安盛審查。
- 1 任何價值高於3,000港元的物品須獲得預先批核。

保障範圍(續)

大学院		每名受保人每年的最高賠償限額 (除非另有説明)
全院が以上院後保障 全額支付・最多60日 全額支付・最多為住院/手術前的30日・而毎日最多1次 上院後門診診症 全額支付・最多為住院/手術後的30日・而毎日最多1次 上院後門診診症 全額支付・最多為出院後的30日・而毎日最多1次 上院養輔助服務 (包括物理治療師・高語治療部・病理學家・視軸矯正師或足 を額支付・最多約出院後的30日・而毎種治療毎日最多1次 科書師) **	// 陪纵后	
家居護士・ 全額支付・最多60日 住院前門診診症 全額支付・最多為住院/手術前的30日・而毎日最多1次 出院後輔助服務 (包括物理治療師、言語治療師、病理學家、視輸矯正師或足科整節)・ 全額支付・最多為出院後的30日・而毎種治療毎日最多1次 科整節)・ 全額支付・最多為出院後的30日・而毎種治療毎日最多1次 科整節)・ 全額支付・最多為出院後的30日・而毎種治療毎日最多1次 科整節)・ 全額支付・最多為出院後的30日・而毎種治療毎日最多1次 科整節)・ 全額支付・最多為出院後的30日・而毎種治療毎日最多1次 科整節)・ 全額支付・最多為出院後的30日・而毎種治療毎日最多1次 科整節)・ 全額支付・最多事的 変差事故保障		王环
世院所門診診症 全額支付・最多為住院/ 手術後的30日・而毎日最多1次 出院後輔助服務 (包括物理治療師、言語治療師、病理學家、視輪矯正師或足 料置師)・ 復康治療・ 全額支付・最多為出院後的30日・而每種治療毎日最多1次 料置師)・ を額支付・最多為出院後的30日・而每種治療毎日最多1次 料置師)・ を額支付・最多為出院後的30日・而每種治療毎日最多1次 料置師)・ を額支付・最多為出院後的30日・而每種治療毎日最多1次 を額支付・最多為出院後的30日・而每種治療毎日最多1次 を額支付・最多為出院後的30日・而每種治療毎日最多1次 を額支付・最多為出院後的30日・而每種治療毎日最多1次 を額支付・最多事故保障 全額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付 を額支付・終身最多30日 が認可中心的酗酒或置用薬物治療(包括戒毒治療)・ 全額支付・終身最多30日 が認可中心的酗酒或置用薬物治療(包括戒毒治療)・ 全額支付・終身賠償額上限為480,000港元 病態肥肥減體重治療・ 90%賠償額・終身賠償額上限為100,000港元 病態肥肥減體重治療・ 90%賠償額・終身賠償額上限為100,000港元 積護門診計劃 監土診療 を 額支付・毎月最多15次 を 額支付・合共上限為2,400港元		
出院後門診診症 出院後輔助服務 (包括物理治療師、言語治療師、病理學家、視軸矯正師或足科整師) を		
出院後輔助服務 (包括物理治療師、言語治療師、病理學家・視軸矯正師或足科醫師) * 全額支付、最多為出院後的30日、而每種治療每日最多1次 程験師) * 全額支付、最多90日		·
(包括物理治療師、言語治療師、病理學家、視軸矯正師或足科醫師) * 全額支付、最多為出院後的30日、而每種治療毎日最多1次 (復康治療・ 全額支付、最多90日 ま分類象は陳陳 まの外緊急住院及門診牙科治療	出院後門診診症	全額支付,最多為住院/手術後的30日,而每日最多1次
緊急事故保障 意外緊急住院及門診牙科治療 全額支付 私家陸上救護車 全額支付 緊急意外治療 (在新意外發生後72小時內於醫院門診部或急症室接受的治療) 全額支付 延伸保障 全額支付 療施治療(包括化療及電療) 全額支付 愛滋病或人類免疫缺陷病毒(HIV) (而該等疾病由經證質的職業意外或輸血導致)** 全額支付 安養及紓緩護理** 全額支付 安養及紓緩護理** 全額支付・終身最多30日 於認可中心的酗酒或濫用藥物治療(包括戒毒治療)** 全額支付・終身賠償額上限為480,000港元 病態肥胖減體重治療** 90%賠償額・終身賠償額上限為100,000港元 豬儀費用 終身賠償額上限為24,000港元 自選門診計劃 全額支付・毎月最多15次 處方健康營養品(例如維他命) 全額支付・合共上限為2,400港元	(包括物理治療師、言語治療師、病理學家、視軸矯正師或足	全額支付,最多為出院後的30日,而每種治療每日最多1次
意外緊急住院及門診牙科治療 全額支付 私家陸上救護車 全額支付 緊急意外治療 (在新意外發生後72小時內於醫院門診部或急症室接受的治療) 全額支付 延伸保障 全額支付 磨透析治療 全額支付 癌症治療(包括化療及電療) 全額支付 愛滋病或人類免疫缺陷病毒(HIV) (而該等疾病由經證實的職業意外或輸血導致)** 全額支付 安養及紓緩護理** 全額支付・終身最多30日 於認可中心的酗酒或濫用藥物治療(包括戒毒治療)** 全額支付・終身賠償額上限為480,000港元 病態肥胖減體重治療** 90%賠償額・終身賠償額上限為100,000港元 療養費用 終身賠償額上限為24,000港元 自選門診計劃 全額支付・每月最多15次 處方健康營養品(例如維他命) 全額支付・合共上限為2,400港元	復康治療+	全額支付,最多90日
私家陸上救護車 全額支付 緊急意外治療 (在新意外發生後72小時內於醫院門診部或急症室接受的治療) 全額支付 延伸保障 全額支付 癌症治療(包括化療及電療) 全額支付 愛滋病或人類免疫缺陷病毒(HIV) (而該等疾病由經證實的職業意外或輸血導致) ^{1,4} 全額支付 安養及紓緩護理 "・* 全額支付・終身最多30日 於認可中心的酗酒或濫用藥物治療(包括戒毒治療) ^{1,4} 全額支付・終身賠償額上限為480,000港元 病態肥胖減體重治療 ・* 90%賠償額・終身賠償額上限為100,000港元 療養 月用 終身賠償額上限為24,000港元 自選門診計劃 全額支付・毎月最多15次 處方健康營養品(例如維他命) 全額支付・合共上限為2,400港元	緊急事故保障	
緊急意外治療 (在新意外發生後72小時內於醫院門診部或急症室接受的治療) 全額支付 延伸保障 全額支付 磨症治療(包括化療及電療) 全額支付 愛滋病或人類免疫缺陷病毒 (HIV) (而該等疾病由經證實的職業意外或輸血導致) ** 全額支付 安養及紓緩護理 *** 全額支付・終身最多30日 於認可中心的酗酒或濫用藥物治療(包括戒毒治療) ** 全額支付・終身賠償額上限為480,000港元 病態肥胖減體重治療 ** 90%賠償額・終身賠償額上限為100,000港元 腐儀費用 終身賠償額上限為24,000港元 自選門診計劃 全額支付・毎月最多15次 處方健康營養品(例如維他命) 全額支付・合共上限為2,400港元	意外緊急住院及門診牙科治療	全額支付
延伸保障 全額支付 野透析治療 全額支付 癌症治療(包括化療及電療) 全額支付 愛滋病或人類免疫缺陷病毒(HIV) (而該等疾病由經證實的職業意外或輸血導致) ** 全額支付 安養及紓緩護理 *** 全額支付・終身最多30日 於認可中心的酗酒或濫用藥物治療(包括戒毒治療) ** 全額支付・終身賠償額上限為480,000港元 病態肥胖減體重治療 ** 90%賠償額・終身賠償額上限為100,000港元 角選門診計劃 と額支付・毎月最多15次 處方健康營養品(例如維他命) 全額支付・今共上限為2,400港元	私家陸上救護車	全額支付
腎透析治療 全額支付 癌症治療(包括化療及電療) 全額支付 愛滋病或人類免疫缺陷病毒(HIV) (而該等疾病由經證實的職業意外或輸血導致) い* 全額支付 安養及紓緩護理 い* 全額支付,終身最多30日 於認可中心的酗酒或濫用藥物治療(包括戒毒治療) い* 全額支付,終身賠償額上限為480,000港元 病態肥胖減體重治療 い* 90%賠償額・終身賠償額上限為100,000港元 確養	300000774200	全額支付
癌症治療(包括化療及電療)	延伸保障	
愛滋病或人類免疫缺陷病毒 (HIV) 全額支付 安養及紓緩護理 *** 全額支付・終身最多30日 於認可中心的酗酒或濫用藥物治療 (包括戒毒治療) ** 全額支付・終身賠償額上限為480,000港元 病態肥胖減體重治療 ** 90%賠償額・終身賠償額上限為100,000港元 殯儀費用 終身賠償額上限為24,000港元 自選門診計劃 全額支付・毎月最多15次 處方健康營養品 (例如維他命) 全額支付・合共上限為2,400港元	腎透析治療	全額支付
(而該等疾病由經證實的職業意外或輸血導致) い全額支付安養及紓緩護理 い全額支付・終身最多30日於認可中心的酗酒或濫用藥物治療 (包括戒毒治療) い全額支付・終身賠償額上限為480,000港元病態肥胖減體重治療 い90%賠償額・終身賠償額上限為100,000港元殯儀費用終身賠償額上限為24,000港元自選門診計劃全額支付・毎月最多15次處方健康營養品 (例如維他命)全額支付・合共上限為2,400港元	癌症治療(包括化療及電療)	全額支付
於認可中心的酗酒或濫用藥物治療(包括戒毒治療)。		全額支付
病態肥胖減體重治療 · · · 90%賠償額 · 終身賠償額上限為100,000港元 殯儀費用	安養及紓緩護理 ",+	全額支付,終身最多30日
殯儀費用終身賠償額上限為24,000港元 自選門診計劃 全額支付,每月最多15次慶方健康營養品(例如維他命)全額支付,合共上限為2,400港元	於認可中心的酗酒或濫用藥物治療(包括戒毒治療);+	全額支付,終身賠償額上限為480,000港元
自選門診計劃 全額支付・每月最多15次 慶方健康營養品(例如維他命) 全額支付・合共上限為2,400港元	病態肥胖減體重治療 1.4	90%賠償額,終身賠償額上限為100,000港元
醫生診療 全額支付,每月最多15次 處方健康營養品(例如維他命) 全額支付,合共上限為2,400港元	殯儀費用	終身賠償額上限為24,000港元
處方健康營養品(例如維他命) 全額支付,合共上限為2,400港元	自選門診計劃	
	醫生診療	全額支付,每月最多15次
A 800 (CL) B	處方健康營養品 (例如維他命)	全額支付,合共上限為2,400港元
診斷測試 全額支付	診斷測試	全額支付

- i 等待期:24個月
- ii 等待期:12個月
- + 本保障須取得預先批核並須經AXA安盛審查。
- ‡ 完成10次同類治療後須取得預先批核並須經AXA安盛審查。

保障範圍

下表所列為本計劃的主要保障範圍(受相關的不受保項目所限)。有關保障範圍的詳情和相關條款、細則及不受保項目,請參閱保單合約。

	每名受保人每年的最高賠償限額 (除非另有説明)
保障地區	全球
毎年最高限額	40,000,000港元 (不適用於自選婦科計劃 ¹ 、自選牙科計劃 ² 及自選眼科計劃 ²)
基本計劃(住院及日間住院治療)	
住院及手術保障	
住院收費	全額支付
手術費用	全額支付
手術/醫療設備或假肢(內科)+	全額支付
手術/醫療設備或假肢(外科)*	全額支付,每項上限為36,000港元
住院私家看護 *	全額支付,最多30日
器官移植(不包括捐贈者的費用)	全額支付
家長住院陪床(適用於18歲以下之受保兒童)	全額支付,但須為與受保人同房的額外睡床
精神及心理治療 : *	全額支付,最多30日

- 1 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- 2 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。
- i 等待期:24個月
- + 本保障須取得預先批核並須經AXA安盛審查。

環球滙晉醫療計劃一覽表

保障年期	終身: 自選婦科計劃1則至45歲止					
繕發年齡	14天至80歲;自選	選婦科計劃¹則為18	歲至44歲			
保單續保	保證終身每年續保	保證終身每年續保4				
保費結構	根據已屆年齡每年	根據已屆年齡每年作出調整5				
保單貨幣	港元					
付款方式	每年					
對居住地及地址的 限制	保單持有人及受保人必須: 1) 其主要居住國*並非美國;及 2) 其居住地及/或地址並非日本及/或受制裁國家					
	自付額3選擇	基本計劃	自選門診計劃	自選婦科計劃1	自選牙科計劃 ²	自選眼科計劃 ²
每名受保人每年的	無自付額	雫令	雫	無無無		
自付額3	選擇A	16,000港元	6,000港元		無	
	選擇 B	48,000港元	12,000港元			

- 1 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- 2 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。
- 3 基本計劃及自選門診計劃的自付額選擇必須相同。自付額指在本保單下應支付的任何保障前,受保人於各保險期限內必須承擔的合資格索償開支總額。
- 4 您只需根據保單條款,於每個保單週年日的期限前預先繳付適當的年度保費,便可享續保保證。保單需要每年續保,並可獲終身保障(自選婦科計劃¹可續保至受保人年滿44歲)。若向任何或 所有保單受保人士提供的保障違反適用法律或法規,AXA安盛有權終止任何或所有保單受保人士的保障或即時終止保單。在任何情况下,若受保人於保險期限內移居美國作為其主要居住國* 及/或移居日本及/或受制裁國家作為其居住地及/或地址,於我們得悉有關轉變後,本保單將不能於下個保單週年日續保。
- 5 保費率及各年齡組別並非保證。每次續保時,應繳保費及續保保單的條款均由AXA安盛釐定,並可能與現有的保單不相同。有關不同計劃及自選項目的保費詳情,請參閱本產品説明書所列的 保費表。AXA安盛可不時修訂而不作預先通知。
- * 主要居住國是指受保人在保險期限內大部分時間 (185日或更長時間) 生活或打算生活的國家,該國家將在我們的紀錄顯示為其居住地。

增值服務

住院直接結算服務 9,10

您只需取得預先批核,AXA安盛便將與「全球醫院名錄」上位於全球大部分國家的醫院直接結算符合資格的住院及日間住院治療費用。如您揀選了自付額選擇³,直接結算服務會在您向院方繳清相關醫療費用的指定部分後生效。有關服務的詳情,請參閱保單持有人指南。有關指南將於保單生效後連隨保單合約提供。

24小時客戶服務熱線

不論身處海外或本港,您亦可全年隨時 致電24小時環球滙晉醫療計劃客戶服務 熱線(粵語、普通話及英語),查詢您於 本計劃下的保障範圍及索償等所需資 料。

第二醫療意見服務 9,11

經您的註冊醫生按您的健康狀況作出合 資格的診斷後,我們將根據您的要求協 助您向指定網絡醫院的專科醫生尋求第 二醫療意見。專科醫生隨後將準備書面 醫療報告,提供評估及治療建議。

全球緊急支援 9,10

如果您需要緊急的醫療支援,只需致電環球滙晉客戶服務熱線,我們將提供緊急醫療護送及/或海外轉返服務。

- 3 基本計劃及自選門診計劃的自付額選擇必須相同。自付額指在本保單下應支付的任何保障前,受保人於各保險期限內必須承擔的合資格索償開支總額。
- 9 有關增值服務及使用程序的詳情,請參閱保單持有人指南。有關指南將於保單生效後連隨保單合約提供。請注意AXA安盛可不時修訂這些增值服務的條款和程序,而毋須預先通知。
- 10 此項服務由第三者服務機構提供。該機構為獨立的承辦商,並非AXA安盛或滙豐的代理。AXA安盛及滙豐不須就該機構提供之服務供應作出表述、保證或承諾,及不須就受保人因該機構或其 代理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產生之任何損失、損害、費用、起訴、訴訟或法律程序,向保單持有人或受保人承擔任何責任。AXA安盛保留不時修訂有關條款 及細則之權利而不作預先通知。
- 11 第二醫療意見服務是由醫療服務機構提供。該機構為獨立的承辦商,並非AXA安盛或滙豐的代理。AXA安盛或滙豐不須就該醫療服務機構及醫院向保單持有人或任何受保人士所提供的任何醫療意見或任何有關事項而承擔責任或負責。AXA安盛保留不時修訂有關條款及細則之權利而不作預先通知。

全面涵蓋住院及日間住院費用7

本計劃為大部分合資格的住院收費和手 術費用提供全面保障。此外,我們的保 障範圍亦擴展至:

- 住院前及出院後門診診症
- 復康治療
- 癌症治療及腎透析治療
- 愛滋病或人類免疫缺陷病毒(HIV) (而該等疾病由經證實的職業意外或 輸血導致)
- 酗酒或濫用藥物治療
- 病態肥胖減體重治療
- 家居護士及住院私家看護
- 由恐怖主義或戰爭造成的傷病,而受 保人在事件中為無辜的旁觀者
- 安養及紓緩護理
- 殯儀費用

自選門診計劃7

除可享用普通科醫生、專科醫生或中醫 師的門診服務外,本計劃亦為附加自選 門診計劃的客戶提供以下保障:

- 接種疫苗及處方健康營養品
- 兒童年度視力及聽覺測驗
- 兒童健康檢查及成人年度檢驗
- 精神及心理治療
- 物理治療、言語治療、動眼神經治療 及職業治療
- 脊骨治療、針灸、整骨療法、順勢療 法及營養師
- 荷爾蒙補充療法
- 中醫治療

其他自選保障[,]配合您的特別需要⁷

本計劃靈活提供額外且為市場上嶄新的保障,以配合您的獨特需要,包括:自 選婦科計劃¹、自選牙科計劃²及自選眼 科計劃²,保障範圍包括:

- 不育治療
- 準分子激光手術
- 植牙

投保手續簡易

投保環球滙晉醫療計劃毋須驗身。

家庭成員投保,可享保費折扣

如果 1)您的直系親屬現為本計劃的成員,或 2)您及您的直系親屬同時成功投保本計劃,您將享有10%的保費折扣。 直系親屬包括:

- 配偶
- 伴侶
- 子女8
- 父母

- 1 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- 2 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。
- 7 有關保障及服務的詳情已收錄於本產品説明書的保障範圍部分。
- 8 子女是指保單持有人的任何親生子女、繼子女、合法收養子女或養子女,年齡介乎14天至17歲;若為未婚、財政上完全依賴保單持有人,並為學校、學院或大學的註冊全日制學生(須提供其 就讀學院的書面證明),子女的年齡上限則為23歲。

靈活保障,切合需要

只需兩個簡單步驟,便可度身訂造 保 保 間 記

您可以根據個人的醫療保障需要,揀選 所需的自付額³選擇和自選保障計劃, 度身訂造適合的計劃。

步驟1:決定基本計劃的自付額³ 選擇

您可以因應個人需要揀選不同的每年自 付額選擇。若您已經投保另一項醫療保 障計劃,您可透過自付額選擇享有較低 的保費。

步驟2:選擇適合您的自選保障 計劃

除了滿足您的住院及日間住院保障主要 需要的基本計劃外,您亦可按照個人需 要,附加以下自選保障計劃:

- 自選門診計劃
- 自選婦科計劃1
- 自選牙科計劃2
- 自選眼科計劃2

計劃特點

全球醫療網絡,自選醫生及醫院

無論身在何地,您也可以選擇我們的 「全球醫院名錄」內的醫院或以外的醫生 提供治療服務。我們將根據保單條款, 向您支付合資格索償的醫療費用。

保證終身保障及續保⁴

本計劃的終身保障不設年齡上限,並保證在每個保單週年日終身續保^{4,5,6},完全不受您的健康狀況及過往索償紀錄影響。

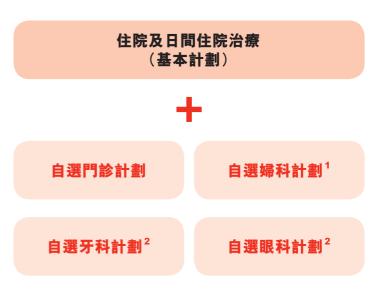
- 1 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。
- 2 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。
- 3 基本計劃及自選門診計劃的自付額選擇必須相同。自付額指在本保單下應支付的任何保障前,受保人於各保險期限內必須承擔的合資格索償開支總額。
- 4 您只需根據保單條款,於每個保單週年日的期限前預先繳付適當的年度保費,便可享續保保證。保單需要每年續保,並可獲終身保障(自選婦科計劃¹可續保至受保人年滿44歲)。若向任何或 所有保單受保人士提供的保障違反適用法律或法規,AXA安盛有權終止任何或所有保單受保人士的保障或即時終止保單。在任何情況下,若受保人於保險期限內移居美國作為其主要居住國* 及/或移居日本及/或受制裁國家作為其居住地及/或地址,於我們得悉有關轉變後,本保單將不能於下個保單週年日續保。
- 5 保費率及各年齡組別並非保證。每次續保時,應繳保費及續保保單的條款均由AXA安盛釐定,並可能與現有的保單不相同。有關不同計劃及自選項目的保費詳情,請參閱本產品説明書所列的 保費表。AXA安盛可不時修訂而不作預先通知。
- 6 本保單將於發生以下任何事件時(以最早者為準)終止:
 - a 保單持有人死亡;或
 - b 寬限期完結時仍未支付本保單任何到期應付的保費;或
 - c 本保單被保單持有人取消:或
 - d 相關司法管轄區頒佈任何法律或規例而使提供本保單下的保險保障變成非法;或
 - e 於保單持有人將其主要居住國*更改為美國及/或將其居住地及/或地址更改為日本及/或受制裁國家的保單週年日或緊接其後的保單週年日:或
 - f 所有受保人的保障範圍因任何原因而終止;或
 - g 未按照向保單持有人發出的相關書面通知中的規定,在15天內繳清任何賠償差額欠款。
- · 主要居住國是指受保人在保險期限內大部分時間 (185日或更長時間) 生活或打算生活的國家,該國家將在我們的紀錄顯示為其居住地。

環球滙晉醫療計劃

我們都希望擁有強健體魄,追求不同的人生目標,與摯愛享受 每個人生階段。然而,即使您已養成良好的生活習慣,亦未必 一定能擁有健康。若果不幸患病或受傷,您需要有充足的資 源,以確保您可以隨時隨地獲得優質的醫療服務。因此,您需 要一個可於人生旅途上為您提供充足支援及照顧您所需的醫療 保障計劃,讓您安心無憂,輕鬆邁步人生。

環球滙晉醫療計劃是一個全面而靈活的醫療保障計劃,可提供 終身高達每年40,000,000港元的住院及日間住院治療(「基本計 劃」)保障,確保您能獲得優質的醫療保障及服務。您亦可於有 需要時支付額外保費,在基本計劃外附加其他自選保障計劃, 以配合個人需要。

環球滙晉醫療計劃的結構



¹ 本自選婦科計劃只適用於18至44歲的受保人,並設有適用的等待期。若受保人曾經取消相同保單下的自選婦科計劃,便不能再次投保本自選婦科計劃。

² 這些計劃必須與自選門診計劃一併購買,並設有適用的等待期。

安盛保險有限公司

郵遞地址:香港九龍尖沙咀郵政局郵政信箱90852號公司地址:香港九龍九龍灣宏遠街1號壹號九龍23樓

環球滙晉醫療計劃(於本產品說明書以下稱為「本計劃」、「您的保單」或「本保單」,視乎情況而定)由**安盛保險有限公司**(「AXA安盛」)承保,AXA安盛已獲香港保險業監管局授權並受其監管。AXA安盛將負責按保單條款為您提供保險保障以及處理索償申請。香港上海滙豐銀行有限公司(「滙豐」)乃根據保險業條例(香港法例第41章)註冊為AXA安盛於香港特別行政區分銷一般保險產品之授權保險代理商。一般保險計劃乃AXA安盛之產品而非滙豐之產品。

有關與滙豐於銷售過程或處理有關交易的金錢糾紛,滙豐將與您把個案提交至金融糾紛調解計劃;此外,有關涉及閣下保單條款及細則的任何糾紛,將直接由AXA安盛與您共同解決。

《合約(第三者權利)條例》(香港法例第623章)(「第三者條例」)並不適用於本保單。任何不是本保單某一方的人士或實體不能根據「第三者條例」強制執行本保單的任何條款。

本產品說明書只提供一般資料,不能構成AXA安盛與任何人士所訂立之任何合約。有關其他詳細條款、細則及不受保項目,請參考有關保單合約。

由安盛保險有限公司刊發

(只適合於香港特別行政區使用) 2018年5月



環球滙晉醫療計劃



