



**Blue Cross 藍十字**  
An **AIA** Company 友邦保險成員公司



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



2024年1月生效  
With effect from Jan 2024

## 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」）乃友邦保險控股有限公司之子公司，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。藍十字通過龐大的分銷渠道銷售其產品，包括友邦香港營業團隊、網上平台、直銷渠道、東亞銀行網絡、保險代理和經紀，以及旅行社。

藍十字在2023年獲標普全球評級分別授予財務實力評級A+（展望穩定）及發行人信用評級A+（展望穩定）。

Blue Cross (Asia-Pacific) Insurance Limited (“Blue Cross”) is a subsidiary of AIA Group Limited. 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 distributes its products through various channels, including AIA agency force, online platform, direct sales, BEA network, insurance agents and brokers, as well as travel agencies.

In 2023, Blue Cross was assigned financial strength rating of A+ (stable outlook) and issuer credit rating of A+ (stable outlook) by S&P Global Ratings.

### 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。收受所需文件後，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。

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

此小冊子並不包含保單的完整條款且只供參考之用，中英文版本如有差異，以英文版本為準。有關詳盡條款及細則及所有不保之事項，概以保單為準。

This brochure does not contain the full terms of the policy and 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.



## 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<sup>1</sup>、每年綜合最高賠償額、自付額<sup>2</sup>及病房級別<sup>3</sup>  
Your choice of Cover Area<sup>1</sup>, Overall Annual Limit, Deductible<sup>2</sup> and Type of Accommodation<sup>3</sup> as required
- 3項自選附加保障：門診保障、產科保障<sup>4</sup>、牙科保障  
3 Optional Benefits: Outpatient Benefits, Maternity Benefits<sup>4</sup>, 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

- 免費周年身體檢查  
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<sup>5</sup>、優先出院免結賬<sup>6</sup>、24小時全球緊急援助、護理諮詢專線  
Second Medical Opinion, Pre-hospitalisation Claim Assessment<sup>5</sup>, Cashless Priority Discharge<sup>6</sup>, 24-hour Worldwide Emergency Aid, Nursing Care Hotline

### 保證續保至99歲<sup>7</sup> Guaranteed renewal up to age 99<sup>7</sup>

- 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

### 環球保障<sup>1</sup> Worldwide coverage<sup>1</sup>

- 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

- 無需驗身  
No medical examination is required

## 計劃特點 Plan Highlights

### 無索償折扣<sup>8</sup> No claim discount<sup>8</sup>

- 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（自選附加保障之保費除外）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 paid for Optional 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 above	15%

- 任何就緊急門診治療或門診手術現金津貼<sup>9</sup>（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<sup>9</sup> (if applicable) will not affect the insured's eligibility for the No Claim Discount.

### 家庭折扣<sup>10</sup> Family discount<sup>10</sup>

於保單生效日/續保日（以適用者為準），若受保於同一份「大亨」醫療保險計劃保單的合資格家庭成員<sup>11</sup>人數達2名或以上，該保單可獲以下家庭折扣。

If the number of eligible family members<sup>11</sup> insured under the same Tycoon Medical Insurance Plan policy on the policy effective date/renewal date (as applicable) reaches 2 or more, such policy can enjoy family discount specified below.

受保合資格家庭成員的人數 Number of Eligible Family Members Insured	家庭折扣 Family Discount
2名成員 2 members	5%
3名成員或以上 3 members or more	10%

## 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<sup>1</sup>。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。

本計劃提供多種不同的自付額<sup>2</sup>，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<sup>4</sup>、牙科保障，更周全地保障您及家人的健康。

如選擇門診保障及年繳保費，您將獲發E.O.S.醫療卡，於任何藍十字網絡診所接受普通科醫生診症，中醫治療或專科醫生診症。

## 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：全科、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；另外亦提供更具靈活性的門診手術現金津貼<sup>9</sup>，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。

## 免費第二醫療意見諮詢

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 areas<sup>1</sup>: "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).

To match your personal needs, the Plan offers various choices of deductible<sup>2</sup>, 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 Benefits<sup>4</sup>, and Dental Benefits.

If premium is paid annually for Optional Outpatient Benefits, you will be issued with an Executive Outpatient Service (E.O.S.) Card which entitles you to use it at Blue Cross network clinics for general practitioner's consultations, Chinese medicine practitioner treatments or specialist's consultations.

## 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: general practice, bone-setting and acupuncture, chiropractic, physiotherapy, etc.), accident treatment costs (including reconstructive surgery), etc. What's more, the Outpatient Surgery Cash Allowance<sup>9</sup> 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 bone marrow transplants), AIDS treatments, etc.

## Free 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個工作天致電熱線提交相關資料，或於網上填寫「入院前索償評估」表格，我們即按您的保單估算可賠償金額<sup>5</sup>，讓您在財務上更有預算，安心接受治療。

## 優先出院免結賬<sup>6</sup>

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。

## 保證續保至99歲<sup>7</sup>

此保單有效期為一年。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。

## 免費周年身體檢查 (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。

## 24小時全球緊急援助

我們為您提供24/7服務，若您身處外地需緊急支援，可隨時致電熱線，由專人為您安排代繳入院按金、提供當地醫療或法律轉介等，以確保您於緊急情況下得到所需協助。

## 藍十字護理諮詢專線

我們明白您在日常生活護理上需要專業的意見，因此，特意為您提供專屬的護理諮詢專線解答您的疑問，諮詢範圍包括手術後護理、日常長者護理、孕婦護理、幼兒及兒童護理。

## Blue Cross HK 手機應用程式

貴為 Super Care 會員，您可享一站式數碼醫療保險服務包括定位功能搜尋網絡醫生、網上醫生預約、視像診症、QR code 或電子醫療卡快速門診登記及完成診症、以及3步即時遞交索償<sup>12</sup>，更可隨時隨地查閱索償記錄。

## Pre-hospitalisation Claim Assessment

Simply make a call to our hotline and provide related information, or complete the Pre-hospitalisation Claim Assessment Form online at least 3 working days prior to hospitalisation or treatment. We will help you to estimate the eligible claim amount<sup>5</sup> based on your policy coverage, allowing you to plan your budget in advance and undergo treatment with peace of mind.

## Cashless Priority Discharge<sup>6</sup>

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.

## Guaranteed Renewal up to Age 99<sup>7</sup>

The period of cover of this policy is 1 year. Upon successful enrolment, we guarantee your policy will be renewable till age 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 a free checkup programme to help you detect early diseases and monitor your health conditions.

## 24-hour Worldwide Emergency Aid

We are here for you 24/7. Simply call our hotline when you need assistance in an emergency situation while travelling overseas, and our dedicated officers will provide you with all-round assistance such as hospital admission deposit guarantee service, local medical or legal referral service, etc.

## Blue Cross Nursing Care Hotline

We understand you need professional advice on daily care, and we are here to provide you with an exclusive nursing care hotline to answer your enquiries about post-surgery care, daily care for elderly, maternity care, infant and child care.

## “Blue Cross HK” Mobile App

As a Super Care member, you can enjoy one-stop digital medical insurance services including location-based network doctors search, online doctor appointment, video consultation, speedy registration and completion for outpatient consultation with QR code/e-medical card, and 3-step instant claim submission<sup>12</sup>, keeping track of claim status round-the-clock.



Blue Cross HK App



## 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 of your choice, 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<sup>1</sup> Cover Area<sup>1</sup>

#### 然後，選擇保障地域 Next, select the Cover Area

- 環球<sup>^</sup> Worldwide<sup>^</sup>
- 環球（北美除外） Worldwide (excluding North America)

2

### 自付額<sup>2</sup> Deductible<sup>2</sup>

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<br>Platinum and<br>Gold Plans | - US\$0<br>- US\$5,000<br>- US\$8,000 | ▪ 銀計劃<br>Silver Plan | - US\$0<br>- US\$2,000<br>- US\$5,000 |
|--|---------------------------------------|----------------------|---------------------------------------|

3

### 自選附加保障<sup>#</sup> Optional Benefits<sup>#</sup>

#### 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<sup>4</sup> Maternity Benefits<sup>4</sup>
- 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.

# 門診保障、產科保障和牙科保障是本計劃的自選附加保障。詳情請參閱相關的保障範圍一覽表和保費表。  
Outpatient Benefits, Maternity Benefits and Dental Benefits are the Optional Benefits available for this Plan.  
For details, please refer to respective Schedule of Benefits and premium tables.



## 「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。假如相關保障項目的合資格費用為US\$12,000以及自付額為US\$5,000，藍十字將會賠償US\$7,000，而客戶將要承擔餘下之US\$5,000。

### 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 Insured Per Year (US\$)	節省之基本保障保費 Savings on Basic Benefits Premium				
	白金 - 環球 Platinum - Worldwide	金 - 環球 Gold - Worldwide	白金 - 環球 (北美除外) Platinum - Worldwide (Excluding North America)	金 - 環球 (北美除外) Gold - Worldwide (Excluding North America)	銀 - 環球 (北美除外) Silver - Worldwide (Excluding North America)
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. If the eligible expenses incurred for a relevant benefit item is US\$12,000 and the deductible of US\$5,000, Blue Cross will reimburse US\$7,000 and the customer will have to bear the remaining US\$5,000.

### 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.

## Choices 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，由於好朋友身患乳癌，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

Recommended Plan:

**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\$3,372	US\$7,495

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 world-wide 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可以由兩份醫療保險共同支付：

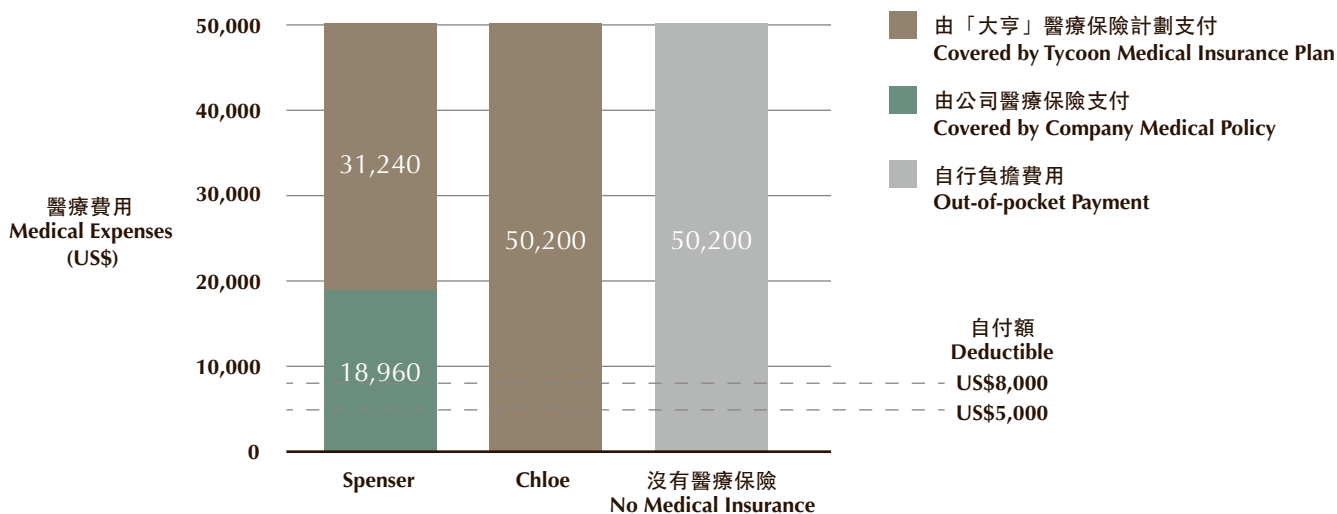
If, after enrolling in the Tycoon Medical Insurance Plan, Spenser needs to undergo a coronary angioplasty that costs US\$50,200, the medical expenses can be covered by the 2 medical plans as follows:

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\$)	<b>50,200</b>	<b>18,960</b>	<b>31,240</b>

- 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。
- 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.
- 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)，所以他無需負擔任何費用。
- 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\$7,495	-
US\$5,000	US\$3,372	節省 Save 55%
US\$8,000	US\$2,623	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 <sup>13</sup> (每受保人)* Overall Lifetime Limit <sup>13</sup> (Per insured)*	7,000,000		3,500,000
病房級別 <sup>3</sup> Type of Accommodation <sup>3</sup>	私家房 Private Room		私家房/ 半私家房 <sup>^</sup> Private Room/ Semi-private Room <sup>^</sup>

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

<sup>^</sup>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 <sup>†</sup> Basic Benefits <sup>†</sup>			

### 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 <sup>‡</sup> Anaesthetist's Fees <sup>‡</sup>			
4. 手術室費用 <sup>‡</sup> Operating Theatre Fees <sup>‡</sup>			
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 <sup>9</sup> Outpatient Surgery Cash Allowance <sup>9</sup>	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)	5,000	3,500	2,500
最高支付100%合資格費用 Up to 100% of the eligible expenses			
14. 每天住院現金津貼 (僅適用於入住香港合資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 in Hong Kong 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 <sup>Δ</sup> Hospital Income for Double Benefit <sup>Δ</sup> (最長45天) (Max. 45 days)	150	120	100
每天 Per Day			

<sup>†</sup>於扣除自付額後(如適用)，藍十字將根據保障項目A-D之賠償額支付合資格費用。

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

<sup>‡</sup>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.

<sup>Δ</sup>若受保人獲得藍十字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，藍十字方作出賠償，本保障將賠償按保障範圍一覽表中所列限額，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 Blue Cross, regardless of whether it is an individual or group policy, if Blue Cross 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」<sup>14</sup>及「醫療必要」<sup>15</sup>的開支。Note: All expenses incurred must be Reasonable and Customary<sup>14</sup> and Medically Necessary<sup>15</sup>.

## 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
<b>基本保障<sup>†</sup> Basic Benefits<sup>†</sup></b>			
<b>B. 入院前及出院後保障 Pre- and Post-Hospitalisation Benefits</b>			
1. 入院／日症手術 <sup>‡</sup> 前門診診症 Pre-Hospitalisation/Day Case Procedure <sup>‡</sup> Outpatient Consultation (入院／日症手術 <sup>‡</sup> 前30天內) (Within 30 days prior to hospitalisation/day case procedure <sup>‡</sup> )	全數賠償 Full Cover		
2. 出院／日症手術 <sup>‡</sup> 後門診診症 Post-Hospitalisation/Day Case Procedure <sup>‡</sup> Outpatient Consultation (出院／日症手術 <sup>‡</sup> 後60天內) (Within 60 days after hospitalisation/day case procedure <sup>‡</sup> )	全數賠償 Full Cover		
3. 出院／日症手術 <sup>‡</sup> 後輔助治療 Post-Hospitalisation/Day Case Procedure <sup>‡</sup> Auxiliary Treatment (出院／日症手術 <sup>‡</sup> 後60天內) (Within 60 days after hospitalisation/day case procedure <sup>‡</sup> ) - 中醫治療 (全科、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 (General Practice, 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		
<b>C. 特別治療保障 Special Treatment Benefits</b>			
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	全數賠償 Full Cover		
3. 器官移植 Organ Transplant	全數賠償 Full Cover		
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 (只限住院治療) (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 (只限住院治療) (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	
<b>D. 意外治療保障 Accident Treatment Benefits</b>			
1. 緊急門診治療 Emergency Outpatient Treatment	全數賠償 Full Cover		
2. 受損牙齒 Damaged Teeth	全數賠償 Full Cover		
3. 矯形修復手術 Reconstructive Surgery (只限住院治療) (Inpatient treatment only)	全數賠償 Full Cover		

<sup>†</sup> 於扣除自付額後 (如適用)，藍十字將根據保障項目A-D之賠償額支付合資格費用。

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

<sup>‡</sup> 「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, or 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」<sup>14</sup>及「醫療必要」<sup>15</sup>的開支。Note: All expenses incurred must be Reasonable and Customary<sup>14</sup> and Medically Necessary<sup>15</sup>.

## 免費周年身體檢查

專為「白金」及「金」計劃而設的免費周年身體檢查，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:

### 周年身體檢查 Annual Health Checkup

#### 檢查項目 Checkup Items

- |   |   |
|---|---|
| 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<br>(i) 全血計算<br>(ii) 紅血球沉降率<br>(iii) 血小板量 | 2. Anaemia and blood diseases screening<br>(i) Complete blood count<br>(ii) ESR<br>(iii) Platelet               |
| 3. 血型及血因子類別<br>(i) 血型及血因子                           | 3. Blood grouping<br>(i) ABO blood group and Rh factor  |
| 4. 糖尿病檢查<br>(i) 血糖                                  | 4. Diabetic screening<br>(i) Glucose  |
| 5. 痛風症檢查<br>(i) 尿酸                                  | 5. Gout screening<br>(i) Uric acid  |
| 6. 心肺病檢查<br>(i) 胸部X光檢查及報告<br>(ii) 心電圖及報告            | 6. Heart and lung diseases screening<br>(i) Chest X-ray with report<br>(ii) Electrocardiogram (ECG) with report |
| 7. 心臟病及中風檢查<br>(i) 高低密度膽固醇                          | 7. Heart disease and stroke risk factors screening<br>(i) HDL, LDL  |
| 8. 腸病檢查<br>(i) 大便常規檢查                               | 8. Intestinal diseases screening<br>(i) Stool (routine examination)   |
| 9. 血脂肪檢查<br>(i) 總膽固醇<br>(ii) 三酸甘油酯                  | 9. Lipids pattern screening<br>(i) Cholesterol total<br>(ii) Triglycerides                                      |
| 10. 肝功能試驗<br>(i) 谷草轉氨酶<br>(ii) 谷丙轉氨酶                | 10. Liver function tests<br>(i) SGOT (AST)<br>(ii) SGPT (ALT)   |
| 11. 腎功能試驗<br>(i) 肌肝酸<br>(ii) 尿素<br>(iii) 小便常規檢查     | 11. Renal function tests<br>(i) Creatinine<br>(ii) Urea<br>(iii) Urine (routine examination)                    |
| 12. 甲狀腺功能試驗<br>(i) 甲狀腺素 (T4)                        | 12. Thyroid function test<br>(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			
<b>A. 門診保障 Outpatient Benefits</b>			
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（全科、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 <sup>△</sup> Chinese Medicine Practitioner Treatment (General Practice, Bone-setting and Acupuncture), Chiropractic, Physiotherapy, Homeopathy, Osteopathy, Hypnotherapy and Mental Treatment <sup>△</sup>	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 - 周年身體檢查 <sup>△</sup> Annual Health Checkup <sup>△</sup> - 周年眼科檢查 <sup>△</sup> Annual Eye Examination <sup>△</sup> - 周年牙科檢查 <sup>△</sup> Annual Dental Examination <sup>△</sup> - 疫苗注射 Vaccinations	650		
<b>B. 產科保障<sup>4</sup> Maternity Benefits<sup>4</sup></b>			
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		
<b>C. 牙科保障 Dental Benefits</b>			
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) - 補牙、脫牙、X光、鑲嵌、覆蓋、膿瘡排放、齒根管治療、牙周病手術及相關的藥物使用 Tooth fillings, tooth extractions, X-ray, inlays, onlays, drainage of abscesses, root canal work, periodontal surgery and the related medications	2,000		
3. 修復治療 Restoration Treatments (等候期：90天) (Waiting period: 90 days) - 脫除智慧齒或阻生齒、新置或修復假牙/齒冠/齒橋、牙齒植入或矯正治療、麻醉、修復齒尖的牙冠釘、齒根尖切除術、軟組織/牙骨阻生、金牙鑲嵌及覆蓋及相關的藥物使用 Removal of wisdom tooth/impacted tooth, new or repair of dentures/crowns/bridges, implants or orthodontic treatment, anaesthesia, pins for cusp restoration, apicoectomy, soft-tissue/bony impaction, gold inlays and onlays and the related medications	3,000		

\* 另類治療和X光診斷及化驗需具備書面轉介；而處方藥物則需處方信件。For Alternative Treatments and Diagnostic X-rays and Laboratory Tests, referral letter is required; while prescription letter is required for Prescribed Medicines and Drugs.

<sup>△</sup> 由精神科醫生或心理學家提供之治療，需具備書面轉介。If the treatment is performed by a Psychiatrist or a Psychologist, a referral letter is required.

<sup>△</sup> 每年一次。Once per year.

註：所有費用必須為「合理慣例」<sup>14</sup>及「醫療必要」<sup>15</sup>的開支。Note: All expenses incurred must be Reasonable and Customary<sup>14</sup> and Medically Necessary<sup>15</sup>.



## 計劃摘要 Plan Summary

產品名稱 Product Name	「大亨」醫療保險計劃 Tycoon Medical Insurance Plan
購買目的及需要 Purchase Objectives and Needs	為將來的醫療需要作準備： Prepare for future health care needs: <ul style="list-style-type: none"> <li>▪ 支付醫療費用；及</li> <li>▪ 彌補住院期間之收入損失</li> </ul> To settle medical expenses; and To compensate for the loss of income during hospital confinement
產品類型 Product Type	償款，但包含非償款現金保障 Indemnity, but incorporated with non-indemnity cash benefits
保單期 Period of Cover	1 年 Year
投保年齡 Enrolment Age	12日至70歲 <sup>^</sup> Age 12 days to age 70 <sup>^</sup>
保單續保 Policy Renewal	每年續保至99歲（保證） <sup>7</sup> Annual renewal up to age 99 (guaranteed) <sup>7</sup>
保單貨幣 Policy Currency	美元 USD
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 <sup>2</sup> Deductible <sup>2</sup>	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 <sup>16</sup> Cooling-off Period <sup>16</sup>	40日 Days
繳費模式 Payment Mode	年繳／半年繳／月繳 Annual / Semi-annual / Monthly

<sup>^</sup> 產科保障的投保年齡為18至44歲，並保障至46歲。Enrolment age of Maternity Benefits is 18 to 44 and coverage up to age 46.

\* 不適用於銀計劃。Not applicable to Silver Plan.

## 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、逗留或留學於美國的受保人、或計劃在未來12個月內於美國居住、逗留或留學的受保人、或美國公民，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個月或以上居住於美國，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。
  - 若受保人於過去12個月內有6個月或以上居住、逗留或留學於英國或加拿大，其在該地區享有的醫療服務及／或治療的應獲保障將受限於符合索償資格的費用之60%。緊急事故下接受的治療及／或服務則不在此限。
  - 若受保人有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：中國、英國、加拿大、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, insured who has resided or have stayed/studied in the United States for 6 months or more in the past 12 months, or insured is planning to reside, stay or study in the United States in the next 12 months, or the United States 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 the United States for 6 months or more in the past 12 months.
  - For insured who has resided, stayed or studied in Canada or United Kingdom for 6 months or more in the past 12 months, the benefit payable for medical services and/or treatments provided to the insured in such region shall be limited to 60% of the eligible expenses except for emergency treatment and/or service.
  - No geographical loading will be applied if the insured resides in countries including but not limited to the following countries for 6 months or more: China, United Kingdom, Canada, 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's 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.
- Deductible is only applicable to the Basic Benefits. With respect to the 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 the insured and is irrevocable. The change shall only take effect on renewal and subject to the approval of Blue Cross.
- If the 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」以進行申請及審批手續。藍十字有權拒絕發出「住院付款保證書」或加設住院掛賬限額。藍十字可隨時發出書面通知以終止或暫停任何免付賬醫療服務，並保留所有與免付賬醫療服務相關事項及爭議的最終決定權。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代為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。

此外，藍十字亦保留停止發售或中止本計劃及對保單作出更改的權利。若藍十字決定停止發售或中止本計劃，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。

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：食道胃十二指腸內窺鏡檢查、結腸鏡檢查、膀胱鏡檢查、關節鏡檢查、陰道鏡檢查、支氣管鏡檢查、視網膜脫落的修補手術及宮腔鏡檢查。
10. 如在獲得家庭折扣後未能於保單生效日或續保日當日滿足所述的合資格家庭成員人數要求，藍十字將會按照同一要求重新計算相關保單年度的家庭折扣。在藍十字的合理要求下，保單持有人須向藍十字交還已經扣減的家庭折扣及重新計算實際合資格的家庭折扣之差額。
11. 就家庭折扣而言，「合資格家庭成員」指保單持有人及/或其配偶/子女/父母/兄弟姊妹/祖父母/孫/法定監護人/配偶的父母。
12. 任何索償申請須於出院或完成有關的醫療服務當日起計90天內遞交。客戶可經藍十字網頁或 Blue Cross HK 手機應用程式遞交已填妥的賠償申請表及所需之完整文件予藍十字。賠償申請表可於藍十字網頁下載。

## 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 application and approval process at least 4 working days prior to admission. Blue Cross reserves the right to not issue the Letter of Guarantee (LOG) or issue the LOG with a particular limit. Blue Cross may withdraw or suspend any credit facilities service anytime by giving a written notice. All matters and disputes in relation to credit facilities services will be subject to the final decision of Blue Cross. The liability of Blue Cross under the policy is limited to indemnify the insured for the eligible medical expenses payable in accordance with 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.

In addition, Blue Cross also reserves the right to cease offering or suspend this Plan and to make changes to the policy. If Blue Cross decides to cease offering or suspend this Plan, Blue Cross will endeavour to transfer the insured to another available medical insurance plan.

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: oesophagogastroduodenoscopy, colonoscopy, cystoscopy, arthroscopy, colposcopy, bronchoscopy, repair of retinal detachment and hysterectomy.
10. In the event that the required number of eligible family members set out as at the policy effective date or renewal date cannot be fulfilled after a family discount has been applied, the family discount shall be recalculated for the relevant policy year(s) based on same requirement specified. The policyholder shall repay to Blue Cross the difference between the family discount already applied by Blue Cross and the recalculated actual eligible family discount upon Blue Cross reasonable demand.
11. For the purpose of family discount, "eligible family member" refers to the policyholder and/or his spouse/children/parents/brothers/sisters/grandparents/grandchildren/legal guardian/parents-in-law.
12. Any claims must be submitted within 90 days after discharge from hospital or the date on which relevant medical services are performed and completed. Customer can submit a completed claim form and required full documentation to Blue Cross via Blue Cross website or "Blue Cross HK" mobile app. Claim form can be downloaded from Blue Cross website.

## 重要事項

13. 「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。
14. 「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。
15. 「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) 在該情況下以最具有成本效益的方式和設定提供。
16. 客戶可在冷靜期內行使權利取消保單及獲發還全數已付保費及保費徵費，但行使此項權利時，必須符合以下條件：
  - (a) 取消要求必須由保單持有人簽署，藍十字必須於冷靜期內直接收到該要求。冷靜期為緊接保單或冷靜期通知書交付予保單持有人或其指定代表之日起計的40日期間內，以較早者為準。為免生疑問，交付保單或冷靜期通知書當天並不包括在計算40日期間內。然而，若第40日當天並非工作天，則冷靜期將包括隨後的工作天的一天在內；及
  - (b) 如曾經因索償而獲得賠償，則不會獲發還保費。

冷靜期過後，客戶可向藍十字發出不少於7天的書面通知以取消保單。如於首個受保期內符合以下條件：a) 無任何索償；b) 無尚未繳付之每年保費；及c) 所有醫療卡（如有）及優惠券（如有）從未被使用及已被退還予藍十字，客戶可獲無息退還部分已繳保費。詳情請參閱保單條款及細則。

此外，保單會在以下情況自動終止，以最先者為準：a) 當該受保人的終身最高賠償額之100%已全數支付；b) 當於受保期內所有受保人的年齡均達至100歲，該受保期的最後一天；c) 當保單持有人取消保單，或當本保單因沒有繳付保費或根據保單條款及細則所列的情形被取消；或 d) 本保單最後一名在生之受保人身故當日。

## Important Notes

13. 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.
14. "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.
15. "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.
16. Customer may exercise the right to cancel the policy with full refund of paid premiums and levy during the cooling-off period. The cancellation right is subject to the following conditions:
  - (a) The request to cancel must be signed by the policyholder and received directly by Blue Cross within the cooling-off period. The cooling-off period is the period of 40 days immediately following the day of the delivery to the policyholder or the nominated representative of the policyholder, of the policy or the cooling-off notice, whichever is the earlier. For the avoidance of doubt, the day of delivery of the policy or the cooling-off notice is not included for the calculation of the 40-day period. However, if the last day of the 40-day period is not a working day, the period shall include the next working day; and
  - (b) No refund can be made if a claim payment has been made.

Customer can request to cancel the policy after the cooling-off period by giving 7 days prior written notice to Blue Cross. Customer may be entitled to a refund of part of the premium paid without interest during the first period of insurance if the following conditions are fulfilled: a) no claims have been made; b) there is no outstanding annual premium under the policy; and c) all healthcare cards (if any) and coupons (if any) are not being used and are returned to Blue Cross. Please refer to the terms and conditions of policy for details.

In addition, the policy shall be automatically terminated on the earliest of the following: a) when 100% of the Overall Lifetime Limit of such insured is paid; b) the last day of the period of insurance in which all insureds have attained the age of 100; c) when the policyholder cancels the policy, or the policy is cancelled due to non-payment of premiums or any circumstance as set out in the terms and conditions of policy; or d) the date of death of the last remaining life insured under the policy.

## 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、復康、休養、療養或專職醫療服務，包括但不限於物理治療、職業治療及言語治療而住院。
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. 除保單條款及細則內有關「矯形修復手術」項目所訂明外，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）、非處方藥物等。
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往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, rehabilitation, rest cures, sanatoria care or allied health service, including but not limited to, physiotherapy, occupational therapy and speech therapy.
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. Except as otherwise provided in the Terms and Conditions for "Reconstructive Surgery" in the policy, 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), over-the-counter drugs, 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、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、拔罐、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, 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, cupping, 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, riot, 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.

### 注意：

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**Blue Cross 藍十字**

An **AIA** Company 友邦保險成員公司



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**Blue Cross (Asia-Pacific) Insurance Limited**  
藍十字(亞太)保險有限公司



**Blue Cross 藍十字**  
An AIA Company 友邦保險成員公司



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2024年1月生效  
With effect from Jan 2024

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

## 保費表 Premium Table (US\$)

### 1. 基本保障 Basic Benefits

計劃級別 Plan Level		白金 Platinum									
環球 Worldwide											
自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000
年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual
0	4,786	2,155	1,676	34	6,582	2,962	2,303	68	30,300	13,635	10,605
1	4,786	2,155	1,676	35	6,652	2,994	2,327	69	31,310	14,089	10,959
2	4,786	2,155	1,676	36	6,725	3,027	2,354	70	32,299	14,535	11,304
3	4,713	2,122	1,650	37	6,792	3,055	2,377	以下保費只適用於續保 The premiums below are for renewal only			
4	4,647	2,091	1,627	38	6,862	3,087	2,401	71	33,422	15,040	11,699
5	4,573	2,058	1,600	39	7,174	3,228	2,511	72	34,516	15,532	12,081
6	4,501	2,026	1,575	40	7,495	3,372	2,623	73	35,642	16,039	12,475
7	4,430	1,994	1,551	41	7,812	3,515	2,734	74	36,936	16,621	12,928
8	4,361	1,962	1,528	42	8,133	3,659	2,846	75	38,126	17,157	13,345
9	4,293	1,930	1,501	43	8,462	3,808	2,962	76	39,432	17,745	13,801
10	4,219	1,897	1,477	44	8,839	3,978	3,094	77	40,781	18,351	14,273
11	4,152	1,869	1,453	45	9,218	4,148	3,226	78	42,166	18,976	14,758
12	4,137	1,861	1,447	46	9,589	4,315	3,356	79	43,613	19,626	15,266
13	4,126	1,857	1,444	47	9,963	4,483	3,487	80	45,041	20,268	15,765
14	4,098	1,843	1,434	48	10,346	4,656	3,621	81	46,556	20,950	16,293
15	4,085	1,838	1,430	49	10,842	4,878	3,796	82	48,026	21,611	16,808
16	4,076	1,835	1,428	50	11,346	5,106	3,972	83	49,370	22,216	17,279
17	4,053	1,824	1,420	51	11,860	5,337	4,151	84	50,930	22,919	17,826
18	4,044	1,820	1,416	52	12,366	5,565	4,328	85	52,478	23,615	18,367
19	4,051	1,822	1,417	53	12,887	5,800	4,511	86	54,000	24,300	18,900
20	4,066	1,830	1,423	54	13,594	6,117	4,758	87	55,510	24,979	19,429
21	4,219	1,897	1,477	55	14,317	6,443	5,011	88	57,024	25,660	19,959
22	4,425	1,992	1,549	56	15,034	6,765	5,263	89	58,777	26,450	20,572
23	4,669	2,102	1,634	57	15,764	7,094	5,517	90	60,532	27,239	21,186
24	4,955	2,229	1,733	58	16,513	7,430	5,780	91	62,283	28,027	21,799
25	5,109	2,300	1,788	59	17,699	7,964	6,194	92	64,020	28,810	22,408
26	5,515	2,482	1,929	60	18,924	8,515	6,622	93	65,761	29,593	23,017
27	5,761	2,591	2,017	61	20,192	9,086	7,067	94	67,318	30,294	23,561
28	5,957	2,680	2,085	62	21,477	9,665	7,515	95	68,873	30,993	24,106
29	6,115	2,752	2,139	63	22,786	10,254	7,974	96	70,421	31,689	24,647
30	6,233	2,805	2,181	64	24,294	10,933	8,503	97	71,969	32,386	25,189
31	6,312	2,840	2,210	65	25,809	11,615	9,033	98	73,523	33,085	25,733
32	6,355	2,860	2,225	66	27,367	12,314	9,579	99	73,595	33,118	25,759
33	6,507	2,928	2,277	67	28,899	13,005	10,114				



# 1. 基本保障 Basic Benefits

計劃級別 Plan Level	金 Gold										
環球 Worldwide											
自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000
年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual
0	4,300	1,935	1,506	34	6,099	2,745	2,136	68	27,912	12,560	9,770
1	4,300	1,935	1,506	35	6,167	2,775	2,158	69	28,791	12,955	10,077
2	4,300	1,935	1,506	36	6,223	2,800	2,178	70	29,650	13,343	10,378
3	4,243	1,909	1,486	37	6,275	2,823	2,196	以下保費只適用於續保 The premiums below are for renewal only			
4	4,191	1,886	1,467	38	6,337	2,852	2,217	71	30,685	13,808	10,739
5	4,137	1,861	1,447	39	6,613	2,976	2,315	72	31,692	14,261	11,092
6	4,079	1,836	1,428	40	6,898	3,105	2,414	73	32,740	14,733	11,458
7	4,026	1,812	1,409	41	7,184	3,233	2,515	74	33,955	15,279	11,884
8	3,972	1,787	1,390	42	7,481	3,368	2,620	75	35,021	15,759	12,258
9	3,911	1,761	1,369	43	7,783	3,502	2,725	76	36,252	16,312	12,687
10	3,854	1,733	1,350	44	8,120	3,654	2,841	77	37,538	16,893	13,138
11	3,800	1,710	1,331	45	8,454	3,803	2,959	78	38,877	17,496	13,608
12	3,790	1,706	1,326	46	8,790	3,955	3,075	79	40,199	18,091	14,070
13	3,775	1,698	1,320	47	9,121	4,105	3,193	80	41,503	18,677	14,526
14	3,763	1,693	1,318	48	9,464	4,260	3,313	81	42,919	19,313	15,021
15	3,745	1,685	1,310	49	9,892	4,452	3,462	82	44,276	19,924	15,497
16	3,734	1,680	1,307	50	10,333	4,650	3,617	83	45,462	20,459	15,912
17	3,716	1,673	1,300	51	10,789	4,855	3,776	84	46,814	21,067	16,384
18	3,698	1,664	1,296	52	11,237	5,056	3,933	85	48,171	21,677	16,860
19	3,726	1,677	1,304	53	11,701	5,265	4,096	86	49,476	22,265	17,317
20	3,749	1,687	1,312	54	12,335	5,551	4,318	87	50,779	22,851	17,773
21	3,980	1,791	1,392	55	12,975	5,839	4,542	88	52,075	23,434	18,226
22	4,280	1,926	1,497	56	13,623	6,131	4,767	89	53,577	24,109	18,753
23	4,492	2,020	1,572	57	14,273	6,423	4,996	90	55,077	24,784	19,275
24	4,761	2,143	1,666	58	14,953	6,728	5,233	91	56,556	25,450	19,793
25	4,853	2,183	1,698	59	16,029	7,213	5,610	92	58,041	26,119	20,315
26	5,304	2,387	1,857	60	17,167	7,724	6,009	93	59,517	26,782	20,831
27	5,513	2,480	1,929	61	18,358	8,261	6,425	94	60,838	27,377	21,292
28	5,671	2,552	1,985	62	19,580	8,811	6,852	95	62,164	27,974	21,759
29	5,812	2,615	2,034	63	20,828	9,373	7,291	96	63,484	28,568	22,218
30	5,891	2,651	2,061	64	22,244	10,010	7,784	97	64,801	29,160	22,680
31	5,925	2,666	2,073	65	23,683	10,658	8,291	98	66,111	29,749	23,139
32	5,895	2,654	2,064	66	25,178	11,330	8,812	99	66,231	29,803	23,181
33	6,033	2,714	2,111	67	26,631	11,984	9,320				

# 1. 基本保障 Basic Benefits

計劃級別 Plan Level	白金 Platinum										
環球 Worldwide (北美除外 Excluding North America)											
自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000
年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual
0	2,714	1,357	1,087	34	3,693	1,848	1,477	68	17,069	8,534	6,827
1	2,714	1,357	1,087	35	3,734	1,868	1,494	69	17,647	8,824	7,060
2	2,714	1,357	1,087	36	3,777	1,888	1,510	70	18,216	9,107	7,287
3	2,675	1,337	1,070	37	3,814	1,907	1,527	以下保費只適用於續保 The premiums below are for renewal only			
4	2,635	1,318	1,054	38	3,854	1,927	1,541				
5	2,589	1,296	1,036	39	4,031	2,015	1,612	71	18,835	9,418	7,533
6	2,555	1,278	1,022	40	4,219	2,110	1,687	72	19,461	9,729	7,784
7	2,512	1,256	1,004	41	4,399	2,200	1,761	73	20,084	10,042	8,032
8	2,469	1,234	988	42	4,588	2,294	1,836	74	20,802	10,401	8,321
9	2,426	1,213	970	43	4,773	2,387	1,909	75	21,484	10,742	8,594
10	2,380	1,191	951	44	4,988	2,493	1,995	76	22,203	11,101	8,881
11	2,341	1,171	936	45	5,201	2,601	2,082	77	22,951	11,476	9,182
12	2,331	1,165	932	46	5,416	2,708	2,166	78	23,705	11,852	9,481
13	2,323	1,161	929	47	5,638	2,819	2,255	79	24,520	12,260	9,809
14	2,315	1,158	926	48	5,852	2,926	2,341	80	25,330	12,665	10,131
15	2,306	1,154	923	49	6,132	3,066	2,452	81	26,175	13,087	10,470
16	2,299	1,148	920	50	6,418	3,208	2,567	82	27,005	13,503	10,802
17	2,283	1,142	913	51	6,714	3,357	2,687	83	27,774	13,886	11,110
18	2,279	1,139	911	52	7,000	3,500	2,800	84	28,681	14,341	11,473
19	2,279	1,139	911	53	7,291	3,645	2,916	85	29,583	14,791	11,832
20	2,281	1,141	912	54	7,702	3,852	3,081	86	30,471	15,235	12,188
21	2,338	1,169	935	55	8,114	4,056	3,246	87	31,355	15,679	12,542
22	2,414	1,208	966	56	8,522	4,261	3,408	88	32,240	16,121	12,896
23	2,557	1,279	1,023	57	8,939	4,469	3,575	89	33,274	16,637	13,310
24	2,709	1,355	1,083	58	9,366	4,682	3,747	90	34,305	17,151	13,722
25	2,818	1,409	1,127	59	10,041	5,020	4,017	91	35,332	17,666	14,133
26	3,027	1,513	1,211	60	10,730	5,365	4,293	92	36,355	18,177	14,541
27	3,169	1,585	1,267	61	11,439	5,719	4,575	93	37,384	18,692	14,954
28	3,291	1,645	1,317	62	12,152	6,077	4,860	94	38,302	19,150	15,321
29	3,377	1,689	1,351	63	12,877	6,439	5,152	95	39,215	19,607	15,686
30	3,455	1,728	1,381	64	13,710	6,855	5,483	96	40,131	20,066	16,053
31	3,516	1,759	1,408	65	14,561	7,281	5,824	97	41,038	20,519	16,416
32	3,564	1,782	1,424	66	15,420	7,710	6,169	98	41,949	20,976	16,780
33	3,654	1,827	1,462	67	16,269	8,135	6,508	99	41,986	20,993	16,794

# 1. 基本保障 Basic Benefits

計劃級別 Plan Level	金 Gold										
環球 Worldwide (北美除外 Excluding North America)											
自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000	自付額 Deductible	0	5,000	8,000
年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual
0	2,326	1,163	930	34	3,240	1,620	1,297	68	14,908	7,454	5,963
1	2,326	1,163	930	35	3,271	1,637	1,309	69	15,390	7,695	6,156
2	2,326	1,163	930	36	3,303	1,652	1,322	70	15,875	7,938	6,351
3	2,299	1,148	920	37	3,332	1,665	1,333	以下保費只適用於續保 The premiums below are for renewal only			
4	2,264	1,132	905	38	3,369	1,684	1,348				
5	2,235	1,119	893	39	3,520	1,761	1,408	71	16,414	8,207	6,566
6	2,198	1,100	879	40	3,679	1,840	1,471	72	16,951	8,476	6,780
7	2,170	1,086	868	41	3,840	1,920	1,535	73	17,499	8,749	7,000
8	2,133	1,067	854	42	4,001	2,001	1,601	74	18,135	9,067	7,255
9	2,102	1,050	840	43	4,164	2,083	1,665	75	18,718	9,360	7,488
10	2,070	1,035	827	44	4,351	2,176	1,741	76	19,360	9,681	7,744
11	2,038	1,020	815	45	4,538	2,269	1,816	77	20,018	10,009	8,007
12	2,024	1,012	808	46	4,715	2,358	1,887	78	20,696	10,349	8,279
13	2,015	1,007	806	47	4,899	2,449	1,960	79	21,410	10,705	8,564
14	2,011	1,004	804	48	5,089	2,545	2,036	80	22,108	11,055	8,844
15	2,004	1,002	802	49	5,321	2,661	2,128	81	22,852	11,425	9,140
16	1,995	998	798	50	5,564	2,782	2,225	82	23,576	11,788	9,431
17	1,991	995	797	51	5,803	2,903	2,321	83	24,232	12,116	9,693
18	1,981	991	792	52	6,051	3,027	2,421	84	24,998	12,500	9,999
19	1,984	992	793	53	6,300	3,151	2,520	85	25,763	12,882	10,306
20	1,991	995	797	54	6,652	3,325	2,661	86	26,509	13,254	10,603
21	2,067	1,034	826	55	7,000	3,500	2,800	87	27,254	13,627	10,902
22	2,166	1,083	867	56	7,354	3,677	2,942	88	27,990	13,995	11,197
23	2,287	1,143	915	57	7,708	3,854	3,083	89	28,857	14,429	11,543
24	2,430	1,214	971	58	8,072	4,036	3,228	90	29,714	14,857	11,885
25	2,503	1,252	1,002	59	8,665	4,332	3,466	91	30,574	15,287	12,228
26	2,709	1,355	1,083	60	9,265	4,634	3,708	92	31,426	15,714	12,571
27	2,830	1,414	1,132	61	9,894	4,947	3,958	93	32,282	16,142	12,914
28	2,929	1,464	1,172	62	10,537	5,268	4,215	94	33,045	16,522	13,218
29	3,003	1,501	1,201	63	11,182	5,591	4,473	95	33,805	16,902	13,523
30	3,074	1,538	1,231	64	11,924	5,961	4,770	96	34,573	17,287	13,830
31	3,106	1,553	1,243	65	12,680	6,340	5,073	97	35,334	17,667	14,133
32	3,135	1,567	1,253	66	13,454	6,727	5,382	98	36,089	18,043	14,436
33	3,206	1,604	1,281	67	14,207	7,104	5,684	99	36,128	18,063	14,451

# 1. 基本保障 Basic Benefits

計劃級別 Plan Level											
銀 Silver											
環球 Worldwide (北美除外 Excluding North America)											
自付額 Deductible	0	2,000	5,000	自付額 Deductible	0	2,000	5,000	自付額 Deductible	0	2,000	5,000
年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年繳 Annual
0	1,487	966	670	34	2,071	1,345	932	68	9,512	6,183	4,281
1	1,487	966	670	35	2,090	1,358	940	69	9,826	6,387	4,423
2	1,487	966	670	36	2,110	1,372	949	70	10,129	6,583	4,557
3	1,468	956	661	37	2,125	1,381	957	以下保費只適用於續保 The premiums below are for renewal only			
4	1,446	939	650	38	2,151	1,398	968				
5	1,424	926	641	39	2,246	1,458	1,011	71	10,476	6,810	4,714
6	1,405	913	631	40	2,347	1,527	1,056	72	10,818	7,033	4,869
7	1,384	899	623	41	2,452	1,594	1,103	73	11,168	7,259	5,026
8	1,359	884	612	42	2,554	1,660	1,148	74	11,572	7,523	5,207
9	1,336	868	602	43	2,657	1,728	1,197	75	11,946	7,764	5,375
10	1,319	858	594	44	2,782	1,808	1,252	76	12,355	8,030	5,560
11	1,298	844	584	45	2,893	1,881	1,302	77	12,776	8,304	5,749
12	1,296	841	583	46	3,010	1,958	1,355	78	13,211	8,587	5,945
13	1,287	837	579	47	3,127	2,033	1,408	79	13,664	8,881	6,149
14	1,281	834	576	48	3,249	2,111	1,462	80	14,112	9,173	6,351
15	1,279	831	575	49	3,401	2,210	1,530	81	14,588	9,481	6,564
16	1,274	827	573	50	3,549	2,308	1,598	82	15,051	9,782	6,773
17	1,271	826	572	51	3,709	2,411	1,670	83	15,466	10,052	6,960
18	1,263	821	569	52	3,865	2,512	1,738	84	15,955	10,371	7,179
19	1,269	825	571	53	4,026	2,617	1,812	85	16,436	10,684	7,397
20	1,271	826	572	54	4,241	2,755	1,908	86	16,918	10,995	7,613
21	1,319	858	594	55	4,469	2,905	2,012	87	17,388	11,301	7,826
22	1,384	899	623	56	4,692	3,050	2,111	88	17,864	11,611	8,039
23	1,462	950	658	57	4,923	3,200	2,215	89	18,413	11,969	8,285
24	1,548	1,005	696	58	5,154	3,350	2,320	90	18,965	12,327	8,534
25	1,599	1,038	719	59	5,526	3,591	2,486	91	19,511	12,683	8,779
26	1,726	1,122	778	60	5,915	3,846	2,662	92	20,058	13,038	9,027
27	1,804	1,174	813	61	6,314	4,105	2,841	93	20,602	13,389	9,271
28	1,871	1,215	841	62	6,721	4,370	3,026	94	21,093	13,710	9,492
29	1,919	1,247	863	63	7,137	4,639	3,212	95	21,572	14,021	9,707
30	1,960	1,273	881	64	7,609	4,945	3,424	96	22,064	14,342	9,927
31	1,982	1,289	892	65	8,095	5,262	3,643	97	22,546	14,654	10,146
32	1,995	1,298	897	66	8,587	5,581	3,865	98	23,031	14,969	10,364
33	2,046	1,329	922	67	9,065	5,892	4,079	99	23,060	14,988	10,377

## 2. 自選附加保障 Optional Benefits

門診保障 Outpatient Benefits								
保障地域 Cover Area	環球 Worldwide	環球 (北美除外) Worldwide (Excluding North America)	保障地域 Cover Area	環球 Worldwide	環球 (北美除外) Worldwide (Excluding North America)	保障地域 Cover Area	環球 Worldwide	環球 (北美除外) Worldwide (Excluding North America)
年齡 Age	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual	年齡 Age	年繳 Annual	年繳 Annual
0	8,570	5,437	34	7,397	4,693	68	36,705	23,288
1	8,570	5,437	35	7,961	5,048	69	38,835	24,640
2	8,570	5,437	36	8,524	5,408	70	40,963	25,990
3	8,491	5,386	37	9,094	5,767	以下保費只適用於續保 The premiums below are for renewal only		
4	8,227	5,218	38	9,656	6,125			
5	7,947	5,045	39	9,681	6,141	71	43,092	27,344
6	7,590	4,816	40	9,706	6,157	72	45,225	28,693
7	7,232	4,591	41	9,729	6,174	73	47,356	30,043
8	6,875	4,365	42	9,755	6,190	74	49,829	31,610
9	6,518	4,138	43	9,780	6,204	75	52,298	33,177
10	6,158	3,908	44	10,417	6,607	76	54,771	34,750
11	5,801	3,678	45	11,047	7,009	77	57,244	36,319
12	5,845	3,709	46	11,683	7,410	78	59,716	37,889
13	5,886	3,734	47	12,317	7,816	79	62,540	39,676
14	5,926	3,759	48	12,948	8,215	80	65,360	41,466
15	5,965	3,785	49	14,518	9,209	81	68,184	43,253
16	6,005	3,810	50	16,082	10,206	82	71,004	45,048
17	6,049	3,836	51	17,650	11,198	83	73,823	46,838
18	6,088	3,861	52	19,215	12,191	84	76,993	48,847
19	6,127	3,887	53	20,780	13,184	85	80,166	50,862
20	6,170	3,913	54	21,851	13,864	86	83,334	52,868
21	6,208	3,939	55	22,919	14,542	87	86,507	54,881
22	6,249	3,962	56	23,995	15,220	88	89,674	56,891
23	6,402	4,062	57	25,060	15,899	89	93,185	59,117
24	6,551	4,156	58	26,131	16,578	90	96,695	61,347
25	6,698	4,253	59	27,081	17,182	91	100,206	63,573
26	6,852	4,347	60	28,029	17,784	92	103,717	65,803
27	7,004	4,442	61	28,980	18,384	93	107,228	68,028
28	7,152	4,538	62	29,926	18,989	94	111,685	70,857
29	7,088	4,496	63	30,879	19,590	95	116,147	73,686
30	7,025	4,456	64	32,042	20,331	96	120,604	76,512
31	6,958	4,417	65	33,209	21,069	97	125,066	79,344
32	6,895	4,371	66	34,375	21,808	98	129,526	82,178
33	6,831	4,332	67	35,540	22,549	99	129,526	82,178

## 2. 自選附加保障 Optional Benefits

產科保障 Maternity Benefits					
環球 Worldwide					
年齡 Age	年繳 Annual	年齡 Age	年繳 Annual	年齡 Age	年繳 Annual
18	6,012	28	11,333	38	10,285
19	6,012	29	11,753	39	9,769
20	6,512	30	12,191	40	9,277
21	7,058	31	12,643	41	8,812
22	7,648	32	12,383	42	8,812
23	8,285	33	12,130	43	8,812
24	8,975	34	11,883	44	8,812
25	9,727	35	11,640	以下保費只適用於續保 The premium below is for renewal only	
26	10,539	36	11,402		
27	10,929	37	10,829	45	8,812

牙科保障 Dental Benefits	
環球 Worldwide	
年齡 Age	年繳 Annual
0 - 70	1,410
以下保費只適用於續保 The premium below is for renewal only	
71 - 99	1,410

注釋：

- 年齡以最近生日日期計算。如您下一個生日是在投保日期起計 6 個月之內，保費率將以下一個生日年齡計算，否則以目前年齡計算。如保單生效日期與投保日期不同，即以保單生效日期決定已屆年齡。
- 「0」歲指出生滿 12 日。
- 以月繳或半年繳的保費會被徵收分別 5% 及 2.5% 的附加費。月繳保費金額及附加費 = 年繳保費金額 × 0.0875。半年繳保費金額及附加費 = 年繳保費金額 × 0.5125。應付總金額以收款票據所示為準。
- 藍十字（亞太）保險有限公司（「藍十字」）保留在續保時調整保費，例如因應受保人年齡的調整、增加額外保障等，及更改條款及細則的權利。
- 保險業監管局將按照法例透過保險公司向投保人收取保費徵費。如欲得悉更多有關保險業監管局收取徵費的資料，請瀏覽藍十字網頁 [http://bluecross.com.hk/document/general/levy\\_collection](http://bluecross.com.hk/document/general/levy_collection)。
- 上述注釋適用於本文件的所有保費表。

Remarks :

- Age refers to the nearest birthday. If your next birthday falls within the coming 6 months from the enrolment date, the premium rate will be charged according to your next age attained. Otherwise, it will be charged based on your current age. Policy effective date will be used to determine the age attained if it is different from the enrolment date.
- Age "0" means age 12 days.
- Premiums to be paid by monthly or semi-annual payment modes are subject to a surcharge of 5% and 2.5% respectively. Premium amount with surcharge for monthly payment mode = annual premium amount × 0.0875. Premium amount with surcharge for semi-annual payment mode = annual premium amount × 0.5125. Please refer to the debit note for the total amount payable.
- Blue Cross (Asia-Pacific) Insurance Limited ("Blue Cross") reserves the right to adjust the premium upon policy renewal due to, for example, age-related adjustment of insured or subscription to additional benefits, etc. and revise the terms and conditions of the policy.
- The Insurance Authority will collect a levy on insurance premiums from policyholders through insurance companies in accordance with the law. For further information about the levy imposed by the Insurance Authority, please visit Blue Cross website at [http://bluecross.com.hk/document/general/levy\\_collection](http://bluecross.com.hk/document/general/levy_collection).
- The above remarks are applicable to all premium tables listed herein.