

醫療保險

Health Insurance

# 滙豐自願醫保靈活計劃

## HSBC Voluntary Health Insurance Flexi Plan

全面醫療保障 靈活守護您與摯愛

All-round medical protection combining security and flexibility

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**HSBC Life**  
滙豐保險

滙豐人壽保險（國際）有限公司  
HSBC Life (International) Limited

## 靈活迎合所需 提供全面保障

人生變幻無常，世事未必盡如人意。當醫療通脹不斷加劇，而對優質醫療服務的需求亦不斷上升，這時候，保障自己與摯愛減低未來疾病帶來的影響便顯得更為重要。

滙豐自願醫保靈活計劃（「滙豐靈活醫保」或「您的保單」）不但涵蓋滙豐自願醫保標準計劃的基本醫療保障，更務求為您與摯愛提供全面醫療保障，讓您可於私營機構使用優質的醫療服務。如納稅人本人或其配偶為保單持有人，可就每課稅年度繳付的合資格保費作稅務扣減<sup>1</sup>，每名受保人每年上限為港幣 8,000 元。

### 產品特點概覽



這是在自願醫保計劃框架下，由政府認可的個人償款住院保險產品。

註冊自願醫保產品的提供者	滙豐人壽保險（國際）有限公司
認可產品類別	靈活計劃
認可產品名稱	滙豐自願醫保靈活計劃
合資格的稅務扣減金額	納稅人本人或其配偶為保單持有人，可就每課稅年度繳付的合資格保費作稅務扣減，每名受保人每年上限為港幣 8,000 元。

本產品冊子僅提供基本資料，並不構成保險合約的部分。有關條款、細則及不保事項的詳情，請參閱有關保單條款。

## 計劃特點

### 保障未知的已有病症而不設等候期<sup>2</sup>



我們會從保單生效日起，為您合資格的疾病提供全面的醫療保障<sup>3</sup>，當中包括未知的已有病症<sup>2</sup>。

### 可享全港私家醫院免找數服務，減輕顧慮



您只要獲得我們的預先批核，便毋須擔心任何在香港的預付醫療費用。本公司將保留預先批核申請或免找數批核之最終決定權。

### 90 日家中看護服務，支援復康旅程



我們明白家中看護對康復過程十分重要。所以，如您在出院或完成日間手術後需要專業合資格護士的照顧，我們可提供最多 90 日的家中看護服務，協助您專心休養。

## 全面醫療保障，全方位守護健康



### 全額支付<sup>3</sup> 住院及手術費用

當您面對醫療需要，我們將全額支付您的**住院及手術費用**而不設細項賠償限額，讓您毋須擔心不可預期的醫療開支。



### 涵蓋手術及非手術癌症治療

假若您不幸確診癌症，我們會為合資格的治療費用提供**全額保障**，當中包括手術及非手術治療（例如標靶治療及免疫治療等），金額高達您所選計劃的每年總保障限額。



### 額外保障

計劃更備有例如**器官移植的捐贈者保障**、**醫療裝置<sup>4</sup>**及**復康保障**等，全面照顧您的醫療所需。

## 計劃特點

### 靈活選項，輕鬆無憂



#### 靈活計劃選項

4 個計劃選項（銅級、銀級、金級和鑽級）、3 個不同地域<sup>5</sup> 保障範圍，以及由港幣 0 元至港幣 100,000 元 4 個等級的每年自付費以供選擇，迎合您的醫療所需。

您亦可於 55 歲生日當天或其後每隔 5 年的生日（例如 60 歲、65 歲、70 歲生日等）的續保日前，調低或取消自付費一次而毋須重新核保。



#### 病房級別細則簡單，免卻不滿的索償結果

我們會根據您所選醫院自訂的病房級別作定義。您只需跟從計劃可享病房級別作出選擇，而毋須擔心索償調整。

### 增值服務，無論在家或外地均享保障



#### 中國內地住院保證免收按金服務<sup>6</sup>

當您在中國內地遇有身體受傷或突發疾病，您只需於超過 200 間的指定醫院出示身份證明文件及印有「任中橫」標誌的醫療卡，便可即時預約治療，不用預先繳付住院按金。



#### 第二醫療意見<sup>7</sup>

如您不幸確診保單中所列的任何嚴重疾病，我們可協助您於醫療網絡名單上的網絡醫生或其他醫療專家尋求第二醫療意見。



#### 全球緊急支援<sup>8</sup>

您可自動享有由我們合作夥伴 AXA 國際援助提供的全球緊急支援。當您身處海外公幹或旅行時，一旦遇上緊急事故，只需聯絡 24 小時緊急援助中心，便可獲得協助。



#### 醫療禮賓服務<sup>9</sup> \*專為滙豐靈活醫保（鑽級）受保人而設

如您（受保人）須接受的治療屬醫療所需，您可致電醫療禮賓服務熱線，我們將委派醫療禮賓顧問為您服務。無論是否選擇網絡醫生，均可代您預約診症服務，以及處理保險有關文件，包括入院預先批核及醫療費用索償表格等。

每次在香港住院，您可免費使用一次貴賓車安排服務，往返醫院及香港市區住所/ 工作地點，舒適直達。請於最少一個工作天前預約，服務受醫療禮賓服務詳細條款及細則約束，並視乎服務供應商於有關期間貴賓車的供應情況而定。

## 保費折扣，唯您與摯愛專享



### 無索償折扣<sup>10</sup>

我們為您送上**無索償折扣**的保費優惠，以鼓勵您保持身體健康。如您連續 3 年沒有索償或未曾作出索償，便可以享有保費折扣，而折扣會如下圖所示，隨無索償期的年度逐年遞增：

於續保前的無索償期	無索償折扣百分比
連續 3 個保單年度	5%
連續 4 個保單年度	10%
連續 5 個或往後保單年度	15%



### 家庭成員投保， 專享折扣優惠

您可獲享 **10% 保費折扣** 優惠，如：

1. 您的「家庭成員」為「滙豐自願醫保靈活計劃」的現有受保人；或
2. 您與您的「家庭成員」同時成功投保

符合享有家庭成員保費折扣人士：

- 保單持有人；
- 保單持有人的配偶或伴侶<sup>11</sup>；
- 保單持有人或保單持有人配偶或伴侶<sup>11</sup> 的子女（包括繼子女及合法領養子女）；
- 保單持有人或保單持有人配偶或伴侶<sup>11</sup> 的父母（包括繼父母及合法之無血緣關係的父母）；
- 保單持有人或保單持有人配偶或伴侶<sup>11</sup> 的兄弟姐妹（包括繼兄弟姐妹及合法之無血緣關係的兄弟姐妹）；或
- 保單持有人或保單持有人配偶或伴侶<sup>11</sup> 的祖父母/ 外祖父母（包括繼祖父母/ 外祖父母及合法之無血緣關係的祖父母/ 外祖父母）

## 參考 Chris 的個案







### 索償事例 — 緊急與意外住院

保單持有人及受保人	Chris	每年保障限額	港幣 5,000,000 元
投保年齡 <sup>12</sup>	45	每年自付費	港幣 16,000 元
保障級別	銅級	每年保費	港幣 8,259 元
		保單生效日期	2020 年 8 月 1 日

**情境：**2021 年 1 月，Chris 踢足球時足踝受傷骨折，在香港浸信會醫院接受住院治療及骨折固定手術，總醫療費用為港幣 50,000 元。在「滙豐靈活醫保」的保障下，於扣除自付費港幣 16,000 元後，港幣 34,000 元的索償金額獲得全數賠償。

半年後，Chris 的醫生（亦為本公司的網絡醫生）建議拆除踝骨固定裝置，並安排於 7 月 1 至 3 日在香港浸信會醫院住院及接受手術。他在入院前計劃申請免找數服務。

### 幾個簡單步驟，享用便捷免找數服務

- 
**預約診症**  
Chris 致電醫療索償服務熱線，查詢計劃的保障範圍，並與他所選定的網絡醫生直接預約求診。
- 
**求診**  
在香港浸信會醫院登記時，出示個人身份證明文件及醫療卡。
- 
**申請預先批核**  
經醫生確認拆除固定裝置手術是醫療所需，Chris 簽署預先批核申請表，並由醫生遞交。醫生向本公司提供有關醫療資料及治療費用報價（港幣 45,000 元）。
- 
**預先批核獲得確認**  
於 5 個工作日內，本公司致電 Chris 通知預先批核結果，他亦收到確認信，獲得港幣 45,000 元免找數預先批核限額，以繳付是次住院及治療費用。
- 
**通知網絡醫生有關預先批核結果**  
本公司通知網絡醫生有關預先批核結果及免找數限額。
- 
**接受治療**  
他於香港浸信會醫院出示身份證明文件及醫療卡，安排住院或治療。

於住院期間及出院之前，他可享用免找數服務，惟預先批核須獲確認。

### 節省稅款

此外，Chris 每年更可就每課稅年度繳付的合資格保費獲享扣稅優惠<sup>1</sup>：

受保人	已付保單年費 (視乎年齡/產品)	扣稅總額 (每名受保人上限為港幣 8,000 元)	節省稅款總額 (假設稅率 <sup>13</sup> 為 15%)
 Chris	港幣 8,259 元	港幣 8,000 元	<b>港幣 1,200 元</b>

上述例子僅供說明，並未包括任何折扣優惠。有關預先批核、醫療索償程序及增值服務的詳情，請參閱 <https://www.hsbc.com.hk/zh-hk/> 上的「用戶指南」（滙豐>保險>醫療保險>滙豐自願醫保計劃）。

實際所節省的稅款視乎香港特別行政區稅務局對每個個案的檢查及協議。如有任何疑問，應向專業的稅務顧問諮詢。以上賠償還視乎項目的保障範圍及限額，由本公司根據逐一個案而定。詳情請參閱「保障表」部分。

## 保障表

以下是保單的保障重點摘要。請參閱保單條款，以獲取完整的條款、保障、相關細則及不保事項。

滙豐自願醫保靈活計劃					
		銅級	銀級	金級	鑽級
計劃摘要	每年自付費	認可產品編號			
	無	F00049-01-000-02	F00049-05-000-02	F00049-09-000-02	F00049-13-000-02
	港幣 16,000 元	F00049-02-000-02	F00049-06-000-02	F00049-10-000-02	F00049-14-000-02
	港幣 50,000 元	F00049-03-000-02	F00049-07-000-02	F00049-11-000-02	F00049-15-000-02
	港幣 100,000 元	F00049-04-000-02	F00049-08-000-02	F00049-12-000-02	F00049-16-000-02
保單年期	保證每年續保至受保人 100 歲				
投保年齡 <sup>12</sup>	15 天至 80 歲				
保障級別					
保障項目 (a) - (I) 及額外保障 (I) - (VI) 的每年保障限額	每保單年度 港幣 5,000,000 元	每保單年度 港幣 25,000,000 元	每保單年度 港幣 30,000,000 元	每保單年度 港幣 40,000,000 元	
保障項目 (a) - (I) 及額外保障 (I) - (VI) 的終身保障限額	港幣 20,000,000 元		無		
地域範圍限制	大中華 <sup>(1)</sup>	亞洲 <sup>(1)</sup> 、澳洲及紐西蘭		全球 <sup>(1)</sup>	
可享病房級別	普通房	半私家房	標準私家房		
保障項目 <sup>(2)</sup>					
(a) 病房及膳食	全額支付 <sup>(3)</sup>				
(b) 雜項開支	全額支付 <sup>(3)</sup> (受規限於額外保障 (II) 「醫療裝置」的保障限額)				
(c) 主診醫生巡房費	全額支付 <sup>(3)</sup>				
(d) 專科醫生費 <sup>(4)</sup>	全額支付 <sup>(3)</sup>				
(e) 深切治療	全額支付 <sup>(3)</sup> (每保單年度最多 30 日)				
(f) 外科醫生費	全額支付 <sup>(3)</sup> 不論手術的分類				
(g) 麻醉科醫生費	全額支付 <sup>(3)</sup> 不論手術的分類				
(h) 手術室費	全額支付 <sup>(3)</sup> 不論手術的分類				
(i) 訂明診斷成像 檢測 <sup>(4) (5)</sup>	全額支付 <sup>(3)</sup>				
(j) 訂明非手術癌症 治療 <sup>(6)</sup>	全額支付 <sup>(3)</sup>				
(k) 入院前或出院後/ 日間手術 前後的門診 護理 <sup>(4)</sup>	全額支付 <sup>(3)</sup> 以下列明之診症： <ul style="list-style-type: none"> <li>• 住院/日間手術前最多一次門診或急症診症</li> <li>• 出院/日間手術後 90 日內最多三次跟進門診</li> </ul>				
(l) 精神科治療	每保單年度 港幣 30,000 元	每保單年度 港幣 30,000 元	每保單年度 港幣 30,000 元	每保單年度 港幣 50,000 元	每保單年度 港幣 50,000 元
額外保障					
(l) 出院後/日間 手術後的門診 物理治療 <sup>(4)</sup>	每保單年度 港幣 3,000 元	每保單年度 港幣 6,000 元	每保單年度 港幣 10,000 元	每保單年度 港幣 30,000 元	每保單年度 港幣 30,000 元
(出院/日間手術後 90 日內及只有當保障項目 (k) 的保障耗盡時才作出賠償，最多每日一次)					

## 保障表

滙豐自願醫保靈活計劃				
	銅級	銀級	金級	鑽級
(II) 醫療裝置		指定項目：全額支付 <sup>(3)</sup> 其他項目：每保單年度港幣 150,000 元		指定項目：全額支付 <sup>(3)</sup> 其他項目：每保單年度港幣 300,000 元
(III) 住院陪床		全額支付 <sup>(3)</sup>		
(IV) 門診洗腎		全額支付 <sup>(3)</sup>		
(V) 家中看護 <sup>(4)</sup>		(出院/日間手術後 90 日內；限於每日由一位合資格護士提供家中看護服務及每保單年度最多 90 日)		
(VI) 器官移植的捐贈者保障		器官移植總額之 30%		
(VII) 私人看護 <sup>(4)</sup>		全額支付 <sup>(3)</sup> (限於每日由一位合資格護士提供私人看護服務及每保單年度最多 30 日)		
(VIII) 復康保障 <sup>(4)</sup>		每保單年度港幣 80,000 元，每保單年度最多 90 日		
(IX) 善終服務和安寧療護 <sup>(4)</sup>		不適用		每保單年度港幣 80,000 元，每保單年度最多 30 日
(X) 中醫門診		不適用		每次港幣 600 元 每日最多一次門診， 每次出院後/日間手術後最多十次門診 (出院後/日間手術後 90 日內適用)
(XI) 意外急症門診治療		全額支付 <sup>(3)</sup>		
<b>其他保障</b>				
(I) 恩恤身故賠償		港幣 10,000 元		
(II) 較低級別病房現金保障	不適用		每日港幣 2,000 元 (每次住院最多十日)	
(III) 身體檢查保障	不適用		每保單年度港幣 1,000 元 (由第二保單年度開始)	每保單年度港幣 2,000 元 (由第二保單年度開始)

## 註：

- (1) 大中華是指中國內地、香港、澳門及台灣。亞洲是指阿富汗、孟加拉、不丹、汶萊、大中華、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、菲律賓、新加坡、南韓、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。全球是指無地域限制範圍。只適用於香港的精神科治療及較低級別病房現金保障除外。詳情請參閱額外保障條款批註。
- (2) 同一項目的合資格費用不可獲上述表中多於一個保障項目的賠償(另有說明除外)。
- (3) 全額支付是指按本計劃的條款及保障應支付的合資格費用及其他費用。
- (4) 本公司有權要求有關書面建議的證明，例如轉介信或由主診醫生或註冊醫生在索償申請表內提供的陳述。
- (5) 檢測只包括電腦斷層掃描("CT" 掃描)、磁力共振掃描("MRI" 掃描)、正電子放射斷層掃描("PET" 掃描)、PET-CT 組合及 PET-MRI 組合。
- (6) 治療只包括放射性治療(包括質子治療)、化療、標靶治療、免疫治療及荷爾蒙治療。

此保障表受限於保單條款的條款和保障，並應與保單條款一併閱讀。











## 重要事項

### 核保的披露責任

您必須披露所有影響本公司作出核保決定的資料。本公司有權就失實陳述或欺詐的情況宣告保單無效。若您在提交文件中，錯誤申報非健康資料（包括但不限於年齡），本公司有權根據正確資料調整過去、現在及將來的保費或宣告保單無效。

### 冷靜期

「滙豐自願醫保靈活計劃」是一份政府認可的醫療保險計劃，其並非等同於或類似任何類型的銀行存款。部分保費將付作保險及相關之費用，包括但不限於開立保單，售後服務及索償之費用。

如您對保單不滿意、或保單之保障跟您原有的保險計劃之保障重疊或高於您的需要，您有權以書面通知要求滙豐人壽保險（國際）有限公司取消保單及取回所有已繳交的保費及保費徵費。如要取消，您要求取消保單的書面通知必須由您簽署並由滙豐人壽保險（國際）有限公司位於香港九龍深旺道 1 號滙豐中心 1 座 18 樓的辦事處於「冷靜期」內直接收到（即是為緊接本條款及保障和保單資料頁或冷靜期通知書交付予您或您的指定代表之日起計的 21 個曆日內（以較早者為準））。

若曾獲賠償或將獲得賠償，則不獲發還保費。上述取消的權利並不適用於續保。在此情況下，本條款及保障將被視為由保單生效日起無效，本公司亦無須承擔任何賠償責任。

### 取消保單

冷靜期過後，若您在該保單年度期間沒有就本條款及保障獲得任何賠償，您可以在 30 日前以書面方式通知本公司要求取消本條款及保障。

### 保費調整

首次保費將根據您於保單簽發時的年齡及其他因素（包括但不限於您的風險級別，以及保單之保障級別）計算。保費並非保證不變，本公司可在任何一個保單週年日更改保費。根據「滙豐自願醫保靈活計劃」的條款及保障第四部分第二節所述，本公司將有權在續保時按當時採用的標準保費表向所有同一類別保單調整標準保費。我們考慮的因素包括但不限於 (i) 本公司的索償及保單續保率及 (ii) 預期未來的理賠支出（反映所有保單因醫療趨勢、醫療成本通脹及計劃內容改動所帶來的影響）。

### 自殺條款

若受保人於本計劃的保單生效日起計一年內自殺身故，無論自殺當時受保人的神志是否正常，將不獲支付本保單應付的恩恤身故賠償。

## 重要事項

### 保單終止條款

我們有權於以下任何情況之下終止您的保單：

- 保單持有人在 31 天的寬限期屆滿時仍未繳交保費；
- 受保人身故翌日；
- 本公司不再獲《保險業條例》授權承保或繼續承保本保單；或
- 若本保單在適用於保單持有人或受保人的法律下已經或將會不合法

有關終止條款的詳情請參閱保單條款。

### 醫療所需

「醫療所需」是指按照一般公認的醫療標準，就診斷或治療相關傷病接受醫療服務的需要，而醫療服務必須符合下列條件

- (a) 需要註冊醫生的專業知識或轉介；
- (b) 符合該傷病的診斷及治療所需；
- (c) 按良好而審慎的醫學標準及主診註冊醫生審慎的專業判斷提供，而非主要為對您、其家庭成員、照顧人員或主診註冊醫生帶來方便或舒適而提供；
- (d) 在環境最適當及符合一般公認的醫療標準的設備下，提供醫療服務；及
- (e) 按主診註冊醫生審慎的專業判斷，以最適當的水平向您安全及有效地提供

### 合理及慣常

本公司必須參照以下資料（如適用）以釐定合理及慣常收費：

- 由保險或醫學業界進行的治療或服務費用統計及調查；
- 公司內部或業界的賠償統計；
- 政府憲報；及/ 或
- 提供治療、服務或物料當地的其他相關參考資料

### 適用法例

本保單必須在香港簽發並受香港法律管轄及闡釋。本公司及保單持有人均同意遵從香港法院的司法裁判權。

## 主要風險

### 信貸風險及無力償債風險

「滙豐靈活醫保」乃一份由我們簽發的保單。您須承受我們的信貸風險，因您支付的所有保費將成為我們資產的一部分，惟您對我們的任何資產均沒有任何權利或擁有權。在任何情況下，您只可向我們追討賠償。

### 延誤或漏繳到期保費的風險

如有任何延誤或漏繳到期保費，可能會導致保單終止。若您的保單失效，將不獲發還已繳保費。

### 通脹風險

您必須考慮通貨膨脹風險，因為這可能導致將來的生活費較今天的為高。由於通貨膨脹風險的緣故，您須預期即使我們已盡其所能履行保單責任，您或您所指定的受益人將來收到的實質金額仍可能較低。

## 主要不保事項

### 主要不保事項

本公司將不會賠償與下列項目相關或由其引致的費用：

- 非醫療所需治療、治療程序、藥物、檢測或服務。
- 純粹為接受診斷程序或專職醫療服務（包括但不限於物理治療、職業治療及言語治療）而住院，該住院期間所招致的全部或部分費用。
- 在保單生效日前，因感染或出現人體免疫力缺乏病毒 ("HIV") 及其相關的傷病，惟因性侵犯、醫療援助、器官移植、輸血或捐血、或出生時受 HIV 感染所引致的傷病則除外。
- 倚賴或過量服用藥物、酒精、毒品或類似物質（或受其影響）、故意自殘身體或企圖自殺、參與非法活動、或性病及經由性接觸傳染的疾病或其後遺症。
- 以美容或整容為目的的服務，惟因意外而受傷除外，或矯正視力或屈光不正的服務，而該等視力問題可透過驗配眼鏡或隱形眼鏡矯正，包括但不限於角膜激光矯視手術。
- 預防性治療及預防性護理，包括但不限於並無症狀下的一般身體檢查、定期檢測或篩查程序。
- 牙科醫生進行的牙科治療及口腔頷面手術，惟因意外引致在住院期間接受的急症治療及手術則除外。
- 醫療服務及輔導服務的費用 - 產科狀況及其併發症，包括但不限於懷孕、分娩、墮胎或流產的診斷檢測；節育或恢復生育。
- 購買屬耐用用品的醫療設備及儀器，包括但不限於輪椅、助聽器及非處方藥物等。
- 傳統中醫治療（適用於鑽級之中醫門診除外），包括但不限於中草藥治療、跌打、針灸以及另類治療，包括但不限於氣功、按摩治療、香薰治療。
- 實驗性或未經證實醫療成效的醫療技術或治療程序。
- 受保人 8 歲前發病或確診的先天性疾病。
- 已獲任何法律，或由任何政府、僱主或第三方提供的醫療或保險計劃賠償的合資格費用。
- 戰爭（不論宣戰與否）、內戰、侵略、外敵行動、敵對行動、叛亂、革命、起義、或軍事政變或奪權事故。

上述只供參考，有關全部及詳細不保事項，請參閱此計劃之保單條款。



## 註

1. 合資格的稅務扣減只適用於保單持有人或其配偶，並且為香港納稅人。就自願醫保保單繳付的合資格保費（不包括保費徵費）可獲得之稅務扣減，將於每個課稅年度根據扣除保費折扣（如有）後之已繳保費計算。實際所節省的稅款可能低於例子款項，而且視乎香港特別行政區稅務局對每個個案的檢查及協議。如欲獲取更多資訊，請瀏覽 [www.ird.gov.hk](http://www.ird.gov.hk) 或尋求獨立的稅務建議。
2. 「投保前已有病症」是指受保人於保單簽發日或保單生效日（以較早日期為準）前已存在的任何不適、疾病、受傷、生理、心理或醫療狀況或機能退化，包括先天性疾病。在以下情況發生時，一般審慎人士理應已可察覺到投保前已有病症 - (a) 病症已被確診；或 (b) 病症已出現清楚明顯的病徵或症狀；或 (c) 已尋求、獲得或接受病症的醫療建議或治療。本公司可對在投保申請文件及任何其後就相關申請提交予本公司的資料或文件中披露的投保前已有病症加設個別不保項目。「未知的投保前已有病症」指保單持有人及/或受保人在投保時不察覺，及理應不察覺的投保前已有病症。有關詳細條款及細則，請參閱保單條款。
3. 全額支付指根據本保單的條款及保障所支付的實際合資格醫療費用及其他費用。
4. 如進行植入醫療裝置的外科手術產生的外科醫生費，本保障將賠償下列項目的合資格費用：
  - a) 指定項目
 

於符合醫療所需的手術或置換程序中植入受保人體內的下列醫療裝置：

    - i) 起搏器；
    - ii) 經皮冠狀動脈腔內成形術的支架；
    - iii) 單聚焦眼內人造晶體；
    - iv) 人工心瓣；
    - v) 金屬或人工關節置換；
    - vi) 用於更換或植入骨間的人工韌帶；及
    - vii) 人工椎間盤。
  - b) 其他項目
 

就任何其他因醫療所需植入受保人體內的醫療裝置，本保障須支付該醫療裝置需收取的金額。

若需了解本保障詳情，請參閱保單條款中的條款及細則。
5. 對於滙豐自願醫保靈活計劃，您可就計劃選項獲享以下地域範圍的全額支付金額：
  - 銅級 — 大中華；
  - 銀級及金級 — 亞洲、澳洲及紐西蘭；
  - 鑽級 — 全球

您亦可享有滙豐自願醫保標準計劃的全球保障，但須受限於保單列明的自付費，詳情請參閱保單條款。

	大中華 <sup>(1)</sup>	亞洲 <sup>(1)</sup> 、澳洲及紐西蘭	全球 <sup>(1)</sup>
銅級	全額支付(設有港幣 5 百萬元每年保障限額及港幣 2 千萬元終身保障限額)	標準計劃保障	
銀級	全額支付(設有港幣 2 千 5 百萬元每年保障限額，並無終身保障限額)	標準計劃保障	
金級	全額支付(設有港幣 3 千萬元每年保障限額，並無終身保障限額)	標準計劃保障	
鑽級	全額支付(設有港幣 4 千萬元每年保障限額，並無終身保障限額)		

6. 中國內地住院保證免收按金服務是由非本公司之代理的獨立承辦商（「獨立服務供應商」）作協辦機構提供的自選服務，並須受以下條款約束：
  - a) 此服務的條款須受免費中國內地住院按金保證服務之條款及細則約束。滙豐人壽保險（國際）有限公司（「本公司」）保留不時修訂有關條款及細則之權利而不作預先通知。
  - b) 此為自選服務，客戶可透過書面通知本公司選擇退出。
  - c) 受保人使用任何獨立服務供應商之服務，將須受獨立服務供應商（可不時修訂）的條款及細則約束。
  - d) 本公司不須就該機構提供之服務作表述、保證及承諾。
  - e) 本公司不須就以下任何及全部情況向保單持有人或受保人承擔任何責任：(i) 由任何中國內地指定醫院提供的任何療程及服務。(ii) 任何由協辦機構或獨立服務供應商提供的行動、活動、服務或回覆，或 (iii) 不須就受保人及/或保單持有人因該協辦機構、獨立服務供應商或其代理提供之任何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。
7. 第二醫療意見是由獨立的醫療服務機構提供。該機構為獨立的承辦商，並非本公司的代理。本公司不須就該醫療機構及/或醫院向保單持有人或任何受保人士所提供的醫療意見及任何有關事項而承擔責任。本公司不時修訂有關條款及細則之權利而不作預先通知。
8. 此服務受全球緊急支援服務之條款及細則約束。本公司保留不時修訂有關條款及細則之權利而不作預先通知。這項是自選服務，客戶可以書面通知本公司退出這項服務。

9. 醫療禮賓服務並不屬於滙豐靈活醫保保單的一部分。有關醫療禮賓服務及貴賓車安排服務詳情，請參閱本公司的網站所列條款及細則：  
<https://www.hsbc.com.hk/zh-hk/insurance/products/medical/vhis/flexi/>

有關醫療禮賓服務部分條款及細則的簡略摘要如下：

- a) 醫療禮賓服務（「醫療禮賓服務」）專為滙豐自願醫保靈活計劃（「滙豐靈活醫保」）（鑽級）合資格客戶而設，並須受本文所有條款及細則約束。
  - b) 對於醫療禮賓服務，「合資格客戶」僅指滙豐靈活醫保（鑽級）有關保單的合資格受保人。
  - c) 醫療禮賓服務只適用於關於合資格客戶有關保單的情況，並受本文所有條款約束。
  - d) 任何人士或保單持有人如非滙豐靈活醫保（鑽級）受保人，均不可視為醫療禮賓服務合資格客戶。
  - e) 在任何情況下，醫療禮賓服務及貴賓車安排服務須受滙豐保險所定條款及細則約束。
  - f) 於任何及所有情況下，即使已安排或確認有關預約，醫療禮賓服務及貴賓車安排服務仍須視乎供應情況而定。以下任何事項並無保證：a) 無論已否預約，均不保證可與醫生會面或接受醫生診治；b) 無論已否預約，均不保證可安排或準時提供貴賓車服務。
  - g) 滙豐保險有權隨時及不時酌情更改及修訂本條款及細則，並可取消及/或終止醫療禮賓服務提供的任何服務。對於本條款及細則的任何更改，或滙豐保險就醫療禮賓服務行使任何酌情權而可能造成的任何直接或間接損失、損害、利益損失或支出，滙豐保險毋須承擔責任。
  - h) 如因任何延誤或未能履行任何醫療禮賓服務或有關事項，而造成任何直接或間接損失、損害、利益損失或傷害，滙豐保險毋須承擔責任。有關情況包括但不限於以下所述：
    - i) 超出滙豐保險或滙豐保險任何服務供應商合理控制範圍以外的任何事件；或
    - ii) 滙豐保險無法合理預期的任何事件；或
    - iii) 關乎任何服務供應商或獨立承辦商（包括但不限於任何汽車公司及醫療供應商）的任何事宜、延遲、服務、服務水準、遺漏、意外或事件；或
    - iv) 任何醫療禮賓服務或任何貴賓車安排服務的任何延遲或無法使用情況；或
    - v) 關乎任何醫療禮賓服務或任何貴賓車安排服務的任何服務質素。
  - i) 滙豐於醫療禮賓服務擔任協調角色，目標是於滙豐保險指定服務範圍內，並受本文所有條款及細則約束下，為合資格客戶提供特定支援。即使在此刊載任何內容，滙豐保險並不提供亦不會提供以下任何服務：a) 須具備有關醫療業務牌照的任何醫療服務；b) 須具備有關汽車業務牌照的運輸服務。合資格客戶如有危急或嚴重事故，需要緊急救援服務，應直接聯絡救護車而非使用醫療禮賓服務。
  - j) 於香港安排貴賓車接送服務（「貴賓車安排服務」），只為受保於滙豐靈活醫保（鑽級）的合資格客戶提供，並受本文所有條款約束：
 

於本文所有條款及細則約束下，滙豐保險將於有關保單有效期間協助合資格客戶與第三方服務供應商安排，於滙豐保險指定的香港境內服務地區提供貴賓車接送服務，往返住所/工作地點及醫院（須符合有關保單定義）。貴賓車安排服務只限須於本港醫院接受治療及住院的合資格客戶，並於有關期間符合以下貴賓車安排服務的醫療準則（「貴賓車安排服務的醫療準則」）：

於本條款及細則有效的有關期間，如受保人（須為合資格客戶）患上有關保單定義的傷病，並經有關保單定義的註冊醫生建議，根據醫療所需住院接受治療（須符合有關保單定義）。
10. 在扣除無索償折扣後，本公司須就前 5 個保單年度作出的索償按「本保單」支付賠償，則無索償折扣應納入相關應付索償而重新計算，及保單持有人須向本公司交回重新計算的金額與實際支付予保單持有人的無索償折扣之間的差額。
11. 伴侶是指與保單持有人忠誠地保持持續、以及唯一的關係的人士（不論同性或異性）。請注意雖然保單的保障延申至伴侶，但基於香港現行法例，伴侶未能享有稅款扣減<sup>1</sup>的優惠。
12. 除文義另有所指外，本產品冊子提及的年齡均指受保人上一次生日的年齡。
13. 就 2020/21 課稅年度而言，標準稅率為 15%。

## 更多資料

策劃未來的理財方案，是人生的重要一步。我們樂意助您評估目前及未來的需要，讓您進一步了解「滙豐靈活醫保」如何助您實現目標。歡迎蒞臨滙豐分行，以安排進行理財計劃評估。

**瀏覽** [www.hsbc.com.hk/insurance](http://www.hsbc.com.hk/insurance)

**親臨** 任何一間滙豐分行



您可透過二維碼  
瀏覽產品的相關網頁。

# 滙豐自願醫保靈活計劃

## 滙豐人壽保險(國際)有限公司

HSBC Life (International) Limited 滙豐人壽保險(國際)有限公司(「本公司」或「我們」)是於百慕達註冊成立之有限公司。本公司為滙豐集團旗下從事承保業務的附屬公司之一。

## 香港特別行政區辦事處

香港九龍深旺道1號滙豐中心1座18樓

本公司獲保險業監管局(「保監局」)授權及受其監管,於香港特別行政區經營長期保險業務。

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)註冊為本公司於香港特別行政區分銷人壽保險之保險代理機構。「滙豐自願醫保靈活計劃」為本公司之產品而非滙豐之產品,由本公司所承保並只擬在香港特別行政區透過滙豐銷售。本公司將負責為您提供保險保障,而我們的合作夥伴安盛保險有限公司則負責保單之醫療網絡管理。

對於滙豐與您之間因銷售過程或處理有關交易而產生的合資格爭議(定義見金融糾紛調解計劃的金融糾紛調解中心的職權範圍),滙豐須與您進行金融糾紛調解計劃程序;此外,有關涉及您上述保單條款及細則的任何糾紛,將直接由本公司與您共同解決。

本公司對本產品冊子所刊載資料的準確性承擔全部責任,並確認在作出一切合理查詢後,盡其所知所信,本產品冊子並無遺漏足以令其任何聲明具誤導成份的其他事實。本產品冊子所刊載之資料乃一摘要。有關詳盡的條款及細則,請參閱您的保單。

2022年3月

## 滙豐人壽保險(國際)有限公司榮獲以下獎項:

HSBC Life (International) Limited  
(Digital Policy Value Projections)



投委會  
IFEC  
投資者及理財教育獎  
Investor and Financial  
Education Award 2021



由滙豐人壽保險(國際)有限公司(註冊成立於百慕達之有限公司)刊發  
Issued by HSBC Life (International) Limited (Incorporated in Bermuda with limited liability)



## Flexible and comprehensive coverage to meet your needs

Life can be surprising, but not always in desirable ways. At a time when medical inflation is accelerating with the rising demand for quality medical services, it is important to safeguard your future and that of your loved ones against the consequences of unexpected illnesses.

HSBC Voluntary Health Insurance Flexi Plan (“HSBC VHIS Flexi Plan” or “your policy”) is designed to provide you and your loved ones with all-round medical coverage, including access to quality medical care in the private sector, in addition to the basic benefits of HSBC Voluntary Health Insurance Standard Plan. **Taxpayer who or whose spouse is the policyholder may claim up to HKD8,000 in tax deduction<sup>1</sup> on qualifying premiums paid per insured person per year.**

### Product features at a glance



**This is a standalone individual indemnity hospital insurance plan certified under Voluntary Health Insurance Scheme (VHIS).**

<b>Registered VHIS provider</b>	HSBC Life (International) Limited
<b>Type of certified plan</b>	Flexi Plan
<b>Name of certified plan</b>	HSBC Voluntary Health Insurance Flexi Plan
<b>Eligible tax deduction amount</b>	A taxpayer who or whose spouse is the policyholder is entitled to a maximum annual deduction of HKD8,000 in respect of qualifying premiums for each insured person paid in each year of assessment

This product brochure contains general information only. It does not form part of a contract of insurance. For detailed terms, conditions and exclusions, please refer to the relevant Policy Provisions.

## Key features

### No waiting period for unknown pre-existing conditions<sup>2</sup>



We will provide you with the full medical coverage<sup>3</sup> immediately starting from the policy's effective date for any eligible illnesses, including those arising from unknown pre-existing conditions<sup>2</sup>.

### Cashless Arrangement in Hong Kong's private hospitals to minimise hassle



You won't need to worry about any **upfront out-of-pocket expenses** in a medical situation in Hong Kong as long as you have obtained pre-authorisation from us. The final decision of the pre-authorisation application or direct billing approval is subject to the discretion of the Company.

### 90-day home nursing services to support your recovery journey



We understand the importance of home nursing services to recovering patients. We will provide up to 90 days of **home nursing service** if you need a qualified nurse after your hospital discharge or the completion of a day case procedure.

### All-round medical protection to provide comprehensive care



#### Full coverage<sup>3</sup> for hospitalisation and surgical fees

In the event that you require medical care, we will fully cover your **hospitalisation and surgical fees without sub-limits**, thus removing any uncertainty about out-of-pocket expenses.



#### Surgical and non-surgical cancer treatments are both covered

If you are unfortunately diagnosed with cancer, we will provide **full coverage of eligible treatment expenses**, both surgical or non-surgical (eg targeted therapy and immunotherapy, etc.) up to the total annual benefit limit of your chosen plan.



#### Additional benefits

Such as **donor's benefit for organ transplantation, medical implants<sup>4</sup> and rehabilitation benefit** can give you a more comprehensive medical care.

## Key features

### Flexible options for your peace of mind



#### Flexible plan options



**4 plan options (Bronze, Silver, Gold and Diamond), coverage for 3 geographic locations/regions<sup>5</sup> and 4 levels of annual deductibles** ranging from HKD0 to HKD100,000 are available to suit your medical needs.

You also have 1 opportunity per lifetime to remove or decrease the deductible without re-underwriting before the policy renewal date, specifically on the insured person's 55<sup>th</sup> birthday; or every 5 years thereafter (ie on the 60<sup>th</sup>, 65<sup>th</sup>, 70<sup>th</sup> birthday, etc.).



#### Simple hospital-defined ward class levels to avoid undesirable claim outcome

We will follow your chosen **hospital's own definitions** of ward class levels. You just need to choose the room type as per your plan coverage, secure in the knowledge that no claim adjustment will be applied.

### Value-added services for your protection at home and abroad



#### Free hospital admission deposit guarantee service<sup>6</sup> in mainland China

In the event of injury or unforeseen illness while you are in mainland China, you may reserve immediate medical treatment at over 200 designated hospitals without paying an admission deposit in advance, upon presenting your identification documents and your medical card with the MedPass logo.



#### Second medical opinion<sup>7</sup>

If you are unfortunately diagnosed with any of the critical illnesses covered in your policy, we can help you obtain a second medical opinion upon request from a network doctor or other medical experts.



#### Worldwide emergency assistance<sup>8</sup>

You will automatically be entitled to the worldwide emergency assistance service provided by our partner, AXA Assistance. In the event of an emergency during a business trip or holiday, you can simply call the 24-hour worldwide emergency and medical helpline for assistance.



#### Medical Concierge Service<sup>9</sup> \*for insured person of HSBC VHIS Flexi Plan (Diamond level) only

If you (as an insured person) ever require medically necessary treatment, you may receive support from our Medical Concierge Consultant via the medical concierge service hotline. Whether you prefer a network or non-network doctor, we may assist you with making medical appointments, as well as handling insurance-related documentation including pre-authorisation for hospital admission and claim submission for reimbursement.

You may also enjoy a complimentary round-trip limousine service within Hong Kong between one downtown location from home/work to hospital for in-patient treatment in Hong Kong. A reservation of at least one working day in advance is required, subject to the detailed terms and conditions of Medical Concierge Service and availability of a limousine from our service provider at the relevant time.

## Premium discounts for you and your loved ones



### No claim discount<sup>10</sup>

You can enjoy a **no-claim discount** on your premium for taking good care of your health. If you have not received any benefit or submitted a claim for 3 consecutive years, you will start to enjoy a premium discount which increases each year with your claim free period as follows:

Claim-free period preceding a renewal date	No-claim discount percentage
3 consecutive policy years	5%
4 consecutive policy years	10%
5 or more consecutive policy years	15%



### Family discount

A **10% premium discount** will be offered if

1. Your family member(s) is currently insured under HSBC Voluntary Health Insurance Flexi Plan; or
2. You and your family member(s) successfully enrol for the policy at the same time

Eligibility for enjoying the family discount:

- The policyholder;
- Spouse or partner<sup>11</sup> of the policyholder;
- Child of the policyholder or the policyholder's spouse or partner<sup>11</sup> (including any step-child and legally adopted child);
- Parents of the policyholder or the policyholder's spouse or partner<sup>11</sup> (including any step-parents and legally adoptive parents);
- Siblings of the policyholder or the policyholder's spouse or partner<sup>11</sup> (including any step-siblings and legally adoptive siblings); and
- Grandparents of the policyholder or the policyholder's spouse or partner<sup>11</sup> (including any step-grandparents and legally adoptive grandparents)

## Let's look at Chris's story







### Claim case illustration – Accident and Emergency

<b>Policyholder and insured person</b>	Chris	<b>Annual benefit limit</b>	HKD5,000,000
<b>Issue age<sup>12</sup></b>	45	<b>Annual deductible amount</b>	HKD16,000
<b>Benefit level</b>	Bronze	<b>Annual premium</b>	HKD8,259
		<b>Policy effective date</b>	1 Aug, 2020

**Scenario:** Chris suffered an ankle fracture from a football game in January 2021. He made a reimbursement claim of HKD50,000 for his HSBC VHIS Flexi Plan coverage, which was due to Hong Kong Baptist Hospital ("HKBH") for treatment of the ankle fracture and bone fixation surgery. He was fully reimbursed for HKD34,000 after applying the deductible of HKD16,000 for the claims.

Half a year later, his doctor (who is in the Company's network doctor list) advised him to have the bone fixation devices removed. Chris would like to apply for pre-authorisation to enjoy the Cashless Arrangement service for the planned HKBH admission from 1-3 July 2021.


#### Take these simple steps to enjoy cashless convenience

- 1  **Book appointment**  
Chris called the medical claims service hotline to ask about his coverage, and made his appointment with his preferred network doctor directly.
- 2  **Medical consultation**  
He presented his personal identification document and medical card during registration at HKBH.
- 3  **Pre-authorisation request submission**  
Once his doctor confirmed that the removal of the fixation devices is medically necessary, Chris signed a pre-authorisation request form and his doctor handled the submission for him.  
His doctor provided the Company with his medical and treatment information as well as the **treatment expense quotation (HKD45,000)**.
- 4  **Receive pre-authorisation confirmation**  
The Company then informed Chris of the result of his pre-authorisation request via telephone within 5 working days. He received a confirmation letter granting him a **HKD45,000 guaranteed cashless pre-approval limit** for the planned admission and treatment.
- 5  **Pre-authorisation notification to network doctor**  
The Company also notified the network doctor of the pre-authorisation assessment result and approved credit limit.
- 6  **Receive treatment**  
Chris simply presented his personal identification document and medical card at HKBH for admission and treatment.

During confinement and before his discharge from hospital, he can also enjoy the Cashless Arrangement, subject to the approval and confirmation of the pre-authorisation.

#### Tax efficiency

Moreover, Chris can also enjoy tax deduction<sup>1</sup> on qualifying premiums paid in each year of assessment:

Insured person	Annual premium paid (Depending on age/product)	Tax-deductible amount (Capped at HKD8,000 per insured person)	Amount of tax saved (Assuming 15% tax rate <sup>13</sup> )
 Chris	HKD8,259	HKD8,000	<b>HKD1,200</b>

The above example is for illustrative purposes only without discounts. For more details of the pre-authorisation, medical claim procedures and value-added services, please refer to the User Guide on [www.hsbc.com.hk](http://www.hsbc.com.hk) (HSBC > Insurance > Medical Plans > HSBC Voluntary Health Insurance Scheme).

The actual tax saving is subject to review and agreement by the Inland Revenue Department of the Hong Kong SAR on a case by case basis. You should always consult with a professional tax advisor if in doubt. The above is also subject to plan coverage and item sub-limit, which will be determined by the Company at the discretion on a case by case basis. Please refer to the "Benefit schedule" section for details.



## Benefit schedule

Below is a summary of the key benefits of the policy. Please refer to your Policy Provisions for the full list of benefits, terms, conditions and exclusions.

HSBC Voluntary Health Insurance Flexi Plan					
		Bronze level	Silver level	Gold level	Diamond level
<b>Product summary</b>	<b>Annual deductible</b>	<b>Certification number</b>			
	Nil	F00049-01-000-02	F00049-05-000-02	F00049-09-000-02	F00049-13-000-02
	HKD16,000	F00049-02-000-02	F00049-06-000-02	F00049-10-000-02	F00049-14-000-02
	HKD50,000	F00049-03-000-02	F00049-07-000-02	F00049-11-000-02	F00049-15-000-02
	HKD100,000	F00049-04-000-02	F00049-08-000-02	F00049-12-000-02	F00049-16-000-02
<b>Policy term</b>	Guaranteed renewable annually up to age 100 of the insured person				
<b>Issue age<sup>12</sup></b>	15 days to age 80				
<b>Benefit level</b>					
<b>Annual benefit limit for benefit items (a) - (I) and enhanced benefits (I) - (VI)</b>		HKD5,000,000 per policy year	HKD25,000,000 per policy year	HKD30,000,000 per policy year	HKD40,000,000 per policy year
<b>Lifetime benefit limit for benefit items (a) - (I) and enhanced benefits (I) - (VI)</b>		HKD20,000,000		Nil	
<b>Geographic limitation</b>		Greater China <sup>(1)</sup>	Asia <sup>(1)</sup> , Australia and New Zealand		Worldwide <sup>(1)</sup>
<b>Entitled ward class</b>		General ward	Semi-private room		Standard private room
<b>Benefit items<sup>(2)</sup></b>					
(a) Room and board					Full cover <sup>(3)</sup>
(b) Miscellaneous charges					Full cover <sup>(3)</sup> (subject to limit of benefit (II) "medical implants" under enhanced benefits)
(c) Attending doctor's visit fee					Full cover <sup>(3)</sup>
(d) Specialist's fee <sup>(4)</sup>					Full cover <sup>(3)</sup>
(e) Intensive care					Full cover <sup>(3)</sup> (Maximum 30 days per policy year)
(f) Surgeon's fee					Full cover <sup>(3)</sup> regardless of the surgical category
(g) Anaesthetist's fee					
(h) Operating theatre charges					
(i) Prescribed diagnostic imaging tests <sup>(4)(5)</sup>					Full cover <sup>(3)</sup>
(j) Prescribed non-surgical cancer treatments <sup>(6)</sup>					Full cover <sup>(3)</sup>
(k) Pre- and post-confinement/Day case procedure outpatient care <sup>(4)</sup>					Full cover <sup>(3)</sup> for the following specified visits: <ul style="list-style-type: none"> <li>• 1 prior outpatient visit or emergency consultation per confinement/day case procedure</li> <li>• 3 follow-up outpatient visits per confinement/day case procedure (within 90 days after discharge from hospital or completion of day case procedure)</li> </ul>
(l) Psychiatric treatments					HKD30,000 per policy year
					HKD50,000 per policy year
<b>Enhanced benefits</b>					
(I) Post-confinement/Day case procedure outpatient physiotherapy <sup>(4)</sup>		HKD3,000 per policy year	HKD6,000 per policy year	HKD10,000 per policy year	HKD30,000 per policy year
					(within 90 days after discharge from hospital or completion of day case procedure and payable only if benefit item (k) is exhausted, maximum 1 visit per day)

## Benefit schedule

HSBC Voluntary Health Insurance Flexi Plan			
	Bronze level	Silver level	Diamond level
(II) Medical implants		Specified items: Full cover <sup>(3)</sup> Other items: HKD150,000 per policy year	Specified items: Full cover <sup>(3)</sup> Other items: HKD300,000 per policy year
(III) Companion bed		Full cover <sup>(3)</sup>	
(IV) Outpatient kidney dialysis		Full cover <sup>(3)</sup>	
(V) Home nursing <sup>(4)</sup>	(within 90 days after discharge from hospital or completion of day case procedure; home nursing services provided by 1 qualified nurse per day for a maximum of 90 days per policy year)	Full cover <sup>(3)</sup>	
(VI) Donor's benefit for organ transplantation		30% of total transplantation cost	
(VII) Private nursing <sup>(4)</sup>	(private nursing services provided by 1 qualified nurse per day for a maximum of 30 days per policy year)	Full cover <sup>(3)</sup>	
(VIII) Rehabilitation benefit <sup>(4)</sup>		HKD80,000 per policy year, up to 90 days per policy year	
(IX) Hospice and palliative <sup>(4)</sup>		N/A	HKD80,000 per policy year, up to 30 days per policy year
(X) Chinese medicine practitioner outpatient care		N/A	HKD600 per visit Maximum 1 follow-up outpatient visit per day, maximum 10 follow-up outpatient visits per confinement/day case procedure (within 90 days after discharge from hospital or completion of day case procedure)
(XI) Emergency outpatient treatment for accident		Full cover <sup>(3)</sup>	
<b>Other benefits</b>			
(I) Compassionate death benefit		HKD10,000	
(II) Cash benefit for lower ward class	N/A		HKD2,000 per day (Maximum 10 days per confinement)
(III) Check-up benefit	N/A		HKD1,000 per policy year (Starting from the 2 <sup>nd</sup> policy year)   HKD2,000 per policy year (Starting from the 2 <sup>nd</sup> policy year)

### Notes:

- (1) Greater China shall mean mainland China, Hong Kong, Macau and Taiwan. Asia shall mean Afghanistan, Bangladesh, Bhutan, Brunei, Greater China, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Philippines, Singapore, South Korea, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam. Worldwide shall mean no geographical limitation. Except for psychiatric treatment and cash benefit for lower ward class are applicable to Hong Kong only. Please refer to the Additional Benefit Provisions Endorsement for more details.
- (2) Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above, unless otherwise specified.
- (3) Full cover shall mean the actual amount of eligible expenses and other expenses charged and payable in accordance to the terms and benefits of your policy.
- (4) The Company shall have the right to ask for proof of recommendation, eg a written referral or testifying statement on the claim form by the attending doctor or a registered medical practitioner.
- (5) Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
- (6) Treatments covered here only include radiotherapy (including proton therapy), chemotherapy, targeted therapy, immunotherapy and hormonal therapy.

This benefit schedule is subject to and shall be read together with the terms and benefits of the Policy Provisions.









## Important notes

### Disclosure obligation for underwriting

You are required to declare all requisite information that would affect the underwriting decisions of the Company. The Company has the right to declare the policy void due to any misrepresentation or fraud. If the non-health related information of the insured person (including but not limited to age) is misstated in the application, the Company may adjust the premium, for the past, current or future policy year, or declare the policy void on the basis of the correct information.

### Cooling-off period

HSBC Voluntary Health Insurance Flexi Plan is a government certified health insurance plan, which is not equivalent or similar to any kind of bank deposit. Part of the premium pays for the insurance and related costs including, but not limited to, policy acquisition, maintenance and claims costs.

If you are not satisfied with your policy, or our plan's coverage overlaps with your other existing protection plans coverage or exceed your needs, you have a right to cancel it within the cooling-off period and obtain a refund of any premiums and levies paid by giving a written notice to HSBC Life (International) Limited. Your request to cancel must be signed by you and received directly by the office of HSBC Life (International) Limited at 18/F, Tower 1, HSBC Centre, 1 Sham Mong Road, Kowloon, Hong Kong within the cooling-off period (that is, a period of 21 calendar days immediately following the day of the delivery to you or your nominated representative of these terms and benefits and the policy schedule or the cooling-off notice; whichever is the earlier).

No refund can be made if a benefit payment has been made, is to be made or impending. The above cancellation right shall not apply at renewal. In such event, these terms and benefits shall be deemed to have been void from the policy effective date and the Company shall not be liable to pay any benefit.

### Policy cancellation

You can request to cancel the policy after the cooling-off period by giving 30 days prior written notice to the Company, provided that there has been no benefit payment during the relevant policy year.

### Premium adjustment

The initial premium is based on the age of the insured person at the time of policy issuance and other factors including but not limited to risk class of the insured person and the benefit level of your policy. Premiums are not guaranteed and may be changed by the Company at any of the policy anniversaries. In accordance with Section 2 of Part 4 of the Terms and Benefits of HSBC Voluntary Health Insurance Flexi Plan, the Company shall have the right to adjust the standard premium at renewal according to the prevailing standard premium schedule adopted by the Company on an overall portfolio basis. We consider factors including but not limited to (i) the Company's claims and policy persistency experience and (ii) expected claim outgo in future (reflecting the impact of medical trend, medical cost inflation and product feature revisions).

### Suicide

If the insured person commits suicide within 1 year from the policy effective date of the policy, whether sane or insane, no compassionate death benefit will be payable under this policy.

## Important notes

### Termination conditions

We have the right to terminate your policy under any of the following circumstances:

- Non-payment of premiums after a grace period of 31 days after the premium due date;
- The day immediately following the death of the insured person;
- The Company has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write the policy; or
- If this policy is or becomes illegal under the law applicable to the policyholder or the insured person

Please refer to the Policy Provisions for detailed terms and conditions on termination.

### Medically necessary

It refers to the need to have medical service for the purpose of investigating or treating the relevant disability in accordance with the generally accepted standards of medical practice and such medical service must

- (a) Require the expertise of, or be referred by, a registered medical practitioner;
- (b) Be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
- (c) Be rendered in accordance with standards of good and prudent medical practice, and not be rendered primarily for the convenience or the comfort of the insured person, his family, caretaker or the attending registered medical practitioner;
- (d) Be rendered in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- (e) Be furnished at the most appropriate level which, in the prudent professional judgment of the attending registered medical practitioner, can be safely and effectively provided to the insured person

### Reasonable and customary

In determining whether a charge is Reasonable and Customary, the Company shall make reference to the followings (if applicable):

- Treatment or service fee statistics and surveys in the insurance or medical industry;
- Internal or industry claim statistics;
- Gazette published by the Government; and/or
- Other pertinent source of reference in the locality where the treatments, services or supplies are provided

### Applicable laws

This policy is issued in Hong Kong and shall be governed by and construed in accordance with the laws of Hong Kong. The Company and policyholder agree to be subject to the exclusive jurisdiction of the Hong Kong courts.



## Key risks

**Credit and insolvency risks**

HSBC VHIS Flexi Plan is an insurance policy issued by us. **You are subject to our credit risk** because all your premiums paid become part of our assets. You do not have any rights or ownership over any of our assets. You can only claim against us under all circumstances.

**Risk from the delay or missing the payment of premiums due**

Delayed or missed payments **may lead to a discontinuation of your policy**. If your policy is lapsed, you will not get back the premium you have paid.

**Inflation risk**

You must take into account the **risk of inflation, which will likely cause the future cost of living to rise**. With inflation in place, you should expect that **you or your assigned beneficiary(ies) will receive an amount that is less in real terms in the future**, even if we have done our best to serve your policy.

## Key exclusions

### Key exclusions

**Under these terms and benefits, the Company shall not pay any benefits in relation to or arising from the following expenses:**

- Treatments, procedures, medications, tests or services which are not medically necessary.
- For the whole or part of the confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy.
- HIV and its related disability, which is contracted or occurs before the policy effective date, except for sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth.
- The dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae.
- Services for beautification or cosmetic purposes, unless necessitated by injury caused by an accident, or correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to LASIK.
- Prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions.
- Dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident.
- Medical services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control.
- Purchase of durable medical equipment or appliances including but not limited to wheelchairs, hearing aids and over-the-counter drugs etc.
- Traditional Chinese medicine treatment, except for the Chinese Medicine Practitioner outpatient care benefit payable under Diamond plan, including but not limited to herbal treatment, bone-setting, acupuncture, and other forms of alternative treatment including but not limited to qigong, massage therapy and aromatherapy.
- Experimental or unproven medical technology or procedure.
- Congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of 8 years.
- Eligible expenses which have been reimbursed under any law, or medical programme or insurance policy provided by any government, company or other third party.
- War (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

The above list is for reference only. Please refer to your Policy Provisions for the full list of exclusions.

## Endnotes

- Tax deduction eligibility is only applicable to policyholders or his/her spouse who are Hong Kong taxpayers. Tax deduction for the qualifying premiums paid under VHIS policy (not including levy) will be based on the premiums paid after deducting the premium discount (if any) for each year of assessment. The actual tax saving may be lower than the illustrated amount and is subject to review and agreement by the Inland Revenue Department of the Hong Kong SAR on a case by case basis. For more information, please refer to [www.ird.gov.hk](http://www.ird.gov.hk) or seek independent tax advice.
- Pre-existing condition(s) shall mean, in respect of the insured person, any sickness, disease, injury, physical, mental or medical condition or physiological degradation, including congenital condition, that has existed prior to the policy issuance date or the policy effective date, whichever is earlier. An ordinary prudent person shall be reasonably aware of a pre-existing condition, where - (a) it has been diagnosed; (b) it has manifested clear and distinct signs or symptoms; or (c) medical advice or treatment has been sought, recommended or received. The Company may impose case-based exclusion(s) to the pre-existing condition(s) notified to the Company in the application for the plan and any subsequent information or document submitted to the Company for the purpose of the application. Unknown pre-existing condition(s) refers to any pre-existing condition(s) that the policyholder and/or insured person was not aware and would not reasonably have been aware of at the time of application. Please refer to the Policy Provisions for the full and detailed terms and conditions.
- Full coverage shall mean the actual amount of eligible expenses and other expenses charged and payable in accordance to the terms and benefits of this policy.
- If surgeon's fee charged on a surgical procedure for placement of a medical implant, this is payable for the eligible expenses charged on the following items:
  - Specified items  
For the following medical implants implanted in the insured person's body during surgery or used in replacement procedures which are medically necessary:
    - pace maker;
    - stents for percutaneous transluminal coronary angioplasty;
    - monofocal intraocular lens;
    - artificial cardiac valve;
    - metallic or artificial joints for joint replacement;
    - prosthetic ligaments for replacement or implantation between bones; and
    - prosthetic intervertebral disc.
  - Other items  
For any other medically necessary medical device placed inside the insured person's body, the cost of such medical device shall be payable under this benefit. For the details of the benefit, please refer to the terms and conditions in Policy Provisions.
- For HSBC Voluntary Health Insurance Flexi Plan, the full coverage amount can be received for the following countries/regions depending on the plan level:
  - Bronze level – Greater China;
  - Silver & Gold level – Asia, Australia and New Zealand;
  - Diamond level – Worldwide

You are also eligible to enjoy the benefits of HSBC Voluntary Health Insurance Standard Plan, which includes worldwide coverage but subject to the deductible amount of the policy. Please refer to Policy Provisions for more details.

	Greater China <sup>(1)</sup>	Asia <sup>(1)</sup> , Australia and New Zealand	Worldwide <sup>(1)</sup>
Bronze	Full coverage with HKD5m annual benefit limit and HKD20m lifetime benefit limit	Standard Plan benefits	
Silver	Full coverage with HKD25m annual benefit limit and no lifetime benefit limit		Standard Plan benefits
Gold	Full coverage with HKD30m annual benefit limit and no lifetime benefit limit		Standard Plan benefits
Diamond	Full coverage with HKD40m annual benefit limit and no lifetime benefit limit		

- The free hospital admission deposit guarantee service (in mainland China) is an optional service that may be provided by an assistance company which is an independent contractor ("Independent Service Provider") that is not an agent of the Company, subject to all of the following terms:
  - The provision of services is subject to the terms and conditions of the free hospital admission deposit guarantee service in mainland China. HSBC Life (International) Limited ("the Company") reserves the right to amend its terms and conditions, from time to time without prior notice.
  - This is an optional service. Clients can opt-out the services by writing to the Company.
  - The provision of the service shall be further subject to the terms and conditions as may be determined by the Independent Service Provider, from time to time, for any use of the Independent Service Provider's service by the insured person.
  - The Company shall not make (and does not make) any representation, warranty or undertaking as to the availability of the services.
  - The Company shall not be liable to the policyholder or the insured person in any respect of any and all of the following: (i) any medical treatment and services which may be provided by any of the designated hospitals in mainland China or any health care service provider in anywhere, (ii) any action, activity, service or response in respect of any assistance company, or Independent Service Provider or (iii) any and all loss, damage, expense, suit, action or proceeding suffered or incurred (which may be incurred or suffered) by the insured person, and/or the policyholder, whether directly or indirectly, arising from or in connection with any of the services provided or advice given by the assistance company, Independent Service Provider or its agents, or the availability of such services.
- The second medical opinion is provided by a medical service provider which is an independent contractor and is not an agent of the Company. The Company shall not be held responsible for or liable to the policyholder or of the insured person for anything in relation to such medical opinion given by the medical service provider and/or hospital. The Company reserves the right to amend the terms and conditions thereof from time to time without prior notice.
- The provision of services is subject to the terms and conditions of the worldwide emergency assistance. The Company reserves the right to amend the terms and conditions thereof from time to time without prior notice. This is an optional service. Clients can opt-out the services by writing to the Company.

9. Medical Concierge Service is not a part of the policy in respect of HSBC VHIS Flexi Plan. For more details of the Medical Concierge Service and Limousine Arrangement Service, please refer to the detailed terms and conditions on our website: <https://www.hsbc.com.hk/insurance/products/medical/vhis/flexi/>. A brief summary of some of the terms and conditions of our Medical Concierge Service as follows:
- a) The Medical Concierge service (the "Medical Concierge Service") is only applicable to Eligible Customers in respect of HSBC Voluntary Health Insurance ("HSBC VHIS") Flexi Plan (Diamond level), subject to all the terms and conditions herein.
  - b) Regarding Medical Concierge Service, "Eligible Customers" shall mean eligible insured person(s) in respect of the Relevant Policy issued in respect of HSBC VHIS Flexi Plan (Diamond level) only.
  - c) Medical Concierge Service shall only be applicable for matters concerning the Relevant Policy for Eligible Customers, subject to all the terms herein.
  - d) Any policyholder or person who is not an insured person of HSBC VHIS Flexi Plan (Diamond level) shall not constitute an Eligible Customer for the Medical Concierge Service.
  - e) The Medical Concierge Service and Limousine Arrangement Service shall, at all times, be subject to the terms and conditions as determined by HSBC Life.
  - f) The Medical Concierge Service and Limousine Arrangement Service shall be subject to availability, under any and all circumstances, even if a relevant appointment has been arranged or confirmed. There is no guarantee in respect of any of the following: a) availability of a doctor or accessibility to a doctor, regardless of whether an appointment has been arranged or not; and b) availability or punctuality of the limousine arrangement, regardless of whether an appointment has been arranged or not.
  - g) HSBC Life shall have the right to change and revise these terms and conditions of Medical Concierge Service and Limousine Arrangement Service (at its discretion) at any time and from time to time, and the offers for any Medical Concierge Service may be withdrawn and/or terminated by HSBC Life at its discretion. HSBC Life shall not be liable for any loss, damages, costs or expenses which may arise (directly or indirectly) from any change of these terms and conditions, or any exercise of HSBC Life's discretion in respect of the Medical Concierge Service.
  - h) HSBC Life shall not be liable for any loss, damage, costs, or injury (which may arise directly or indirectly) from any failure of, or delay in the performance of any matters or services under or related to the Medical Concierge Service, including but not limited to circumstances where such failure or delay is relating to:
    - i) any matters which are beyond the reasonable control of HSBC Life or any of HSBC Life's service provider(s), or
    - ii) any matters which could not reasonably have been foreseen by HSBC Life, or
    - iii) any matter, delay, service, service standard, omission, accident or incident relating to any service providers or independent contractors, including but not limited to any vehicle company and any medical provider(s), or
    - iv) any unavailability, or delay of any Medical Concierge Service or any Limousine Arrangement Service, or
    - v) quality of any service relating to any Medical Concierge Service or any limousine arrangement.
  - i) HSBC's role under the Medical Concierge Service is a facilitator, with the objective to provide specified support to Eligible Customers within HSBC Life's designated scope of services, subject to all the terms and conditions herein. Notwithstanding anything stated herein, HSBC Life does not and shall not provide any kind of the following services: a) medical services or any kind of services which require licensing in the medical field; b) transportation services which require licensing relating to vehicles. Eligible Customers who need emergency service or are in critical or serious condition should directly arrange for an ambulance, and should not use our Medical Concierge Service.
  - j) Hong Kong transportation arrangements for limousine service may be arranged for Eligible Customers who are insured persons of HSBC VHIS Flexi Plan (Diamond level) only ("Limousine Arrangement Service"), subject to all of the following:
 

Subject to all the terms and conditions, HSBC Life will assist Eligible Customers to arrange a third party service provider to arrange local limousine transportation within HSBC Life's designated scope of limousine service areas in Hong Kong during the term of the Relevant Policy from home/workplace to Hospital (as defined in the Relevant Policy), or vice versa, provided that the use of Limousine Arrangement Service shall be restricted to those Eligible Customers who need to be hospitalised for in-patient treatment in Hong Kong; and meet the medical criteria for Limousine Arrangement Service at the relevant time ("Medical Criteria for Limousine Arrangement Service") as follows:

during the relevant period while these terms and conditions are in force, the insured person (being an Eligible Customer), as a result of a Disability (as defined in the Relevant Policy) and upon the recommendation of a registered medical practitioner (as defined in the Relevant Policy), is Confined (being Medically Necessary) in a Hospital (as defined in the Relevant Policy).
10. If after a no claim discount has been deducted, a claim incurred in respect of previous five (5) policy years becomes payable under this policy, the no claim discount shall be re-calculated by taking into account the relevant claim payable, and the policyholder shall return to the Company immediately the difference between the recalculated amount (in respect of no claim discount) and the no claim discount actually paid to the policyholder.
11. Partner shall mean a person (of the same or opposite gender) with whom an individual is committed in a continuous and exclusive relationship. Please note that even though the policy coverage extends to partner(s), partner policies will not be eligible for tax deduction<sup>1</sup> under the current laws of Hong Kong.
12. Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured person on his or her last birthday.
13. For the year of assessment 2020/21, the standard tax rate is 15%.

## More information

Planning for your financial future is important. Let us review your current and future needs to help you decide if HSBC VHIS Flexi Plan is the right product to help you fulfil your goals. You can visit any HSBC branch and arrange for a financial planning review with us.

**Click** [www.hsbc.com.hk/insurance](http://www.hsbc.com.hk/insurance)

**Visit** any HSBC branch



You can find more information about the product on HSBC's website by scanning the QR code.

# HSBC Voluntary Health Insurance Flexi Plan

## HSBC Life (International) Limited

HSBC Life (International) Limited (“the Company”, “we” or “us”) is incorporated in Bermuda with limited liability, and is one of the HSBC Group’s insurance underwriting subsidiaries.

## Hong Kong Special Administrative Region office

18/F, Tower 1, HSBC Centre, 1 Sham Mong Road, Kowloon, Hong Kong

The Company is authorised and regulated by the Insurance Authority (“IA”) to carry on long-term insurance business in the Hong Kong Special Administrative Region.

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 agency of the Company for the distribution of life insurance products in the Hong Kong Special Administrative Region. HSBC Voluntary Health Insurance Flexi Plan is a product of the Company but not HSBC, underwritten by the Company and it is only intended for sale through HSBC in the Hong Kong Special Administrative Region. The Company will be responsible for providing your insurance coverage, while our partner, AXA General Insurance Hong Kong Limited will handle network management under your policy.

In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between HSBC and you out of the selling process or processing of the related transaction, HSBC is required to enter into a Financial Dispute Resolution Scheme process with you; however, any dispute over the contractual terms of the above insurance product should be resolved between the Company and you directly.

The Company accepts full responsibility for the accuracy of the information contained in the product brochure and confirms, having made all reasonable enquiries, that to the best of its knowledge and belief there are no other facts the omission of which would make any statement misleading. The information shown therein is intended as a general summary. Please refer to your insurance policy for the detailed terms and conditions.

March 2022

HSBC Life (International) Limited is the proud winner of the following awards:

HSBC Life (International) Limited  
(Digital Policy Value Projections)



投資者及理財教育獎  
Investor and Financial  
Education Award 2021

