About Zurich

關於蘇黎世

Being part of Zurich Insurance Group, Zurich Insurance (Hong Kong) offers a full range of flexible general insurance and life insurance products for individuals as well as corporate customers, catering to their insurance, protection and investment needs. Our presence in Hong Kong dates back to 1961. We are one of the top five general insurance providers in Hong Kong*.

Zurich Insurance Group (Zurich) is a leading multi-line insurer that serves its customers in global and local markets. With about 55,000 employees, it provides a wide range of property and casualty, and life insurance products and services in more than 215 countries and territories. Zurich's customers include individuals, small businesses, and mid-sized and large companies, as well as multinational corporations. The Group is headquartered in Zurich, Switzerland, where it was founded in 1872. The holding company, Zurich Insurance Group Ltd (ZURN), is listed on the SIX Swiss Exchange and has a level I American Depositary Receipt (ZURVY) program, which is traded over-the-counter on OTCQX. Further information about Zurich is available at www.zurich.com

蘇黎世保險(香港)是蘇黎世保險集團轄下之機構,竭誠為個人、商業及企業客戶提供多方面又靈活的一般保險及人壽保險服務,照顧他們在保險、保障及投資上的需要。集團在香港的業務始於1961年,至今已於本港一般保險市場上成為五大保險公司之一*。

蘇黎世保險集團(蘇黎世)是一家全球領先的多險種保險公司·為全球及本地市場的客戶提供服務。蘇黎世現有僱員約55,000名·為客戶提供各種財產及意外保險和人壽保險產品及服務。公司客戶包括遍及215多個國家和地區的個人、大中小型企業及跨國公司。集團總部設立在瑞士蘇黎世·公司成立於1872年。蘇黎世的控股公司蘇黎世保險集團公司(ZURN)在瑞士證券交易所(SIX Swiss Exchange)上市·具有在OTCQX場外交易的一級美國存託憑證計劃(ZURVY)。請瀏覽www.zurich.com了解有關蘇黎世的更多資訊。

- * Source: Insurance Authority, based on gross premiums, 2018.
- * 資料來源:保險業監管局,按毛保費計算,2018年。

Zurich Insurance Company Ltd (a company incorporated in Switzerland with limited liability) 蘇黎世保險有限公司

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HealthAngel Medical Insurance Plan

「三高保」醫療保險計劃



6 out of 10 Hong Kong people are suffering from one of the Three Highs Conditions¹ Be aware of Three Highs Conditions and its complications

十個香港人 六個有三高1 正視三高及其帶來的併發症

People living in Hong Kong are always busy. Insufficient sleep, poor diet and lack of exercise are not uncommon between you and I. You may be prone to different illnesses if you do not pay attention to these problems. Three Highs Conditions: Hypertension, High Blood Sugar and High Cholesterol, are 3 of the most common health problems in Hong Kong.

香港人生活繁忙,容易有睡眠不足、飲食習慣不良、缺乏運動等問題。這些問題或有機會令您患上都市病。三高,即高血壓、高血糖 及高膽固醇,更是香港最普遍的都市病之一。

Three Highs Conditions

6 out of 10 Hong Kong people are suffering from one of Three Highs Conditions¹ 每10名港人中有6人擁有三高之其中一項

When you are diagnosed with Three Highs Conditions, you may need to keep it under control with long-term medication. Not only can it affect your quality of life, Three Highs Conditions can also lead to huge medical bills as well as fatal complications.

一旦被證實患上三高,您或需長期服藥控制病情,影響生活質素。更不幸的是,三高能引致多種致命併發症,而這些併發症所帶來的 醫療費用更是不菲。



High Cholesterol

About 1 in 5 Hong Kong people who had chronic health conditions was diagnosed with high cholesterol²

每5名患有慢性疾病的港人 有1人患有膽固醇過高



 Stroke 中風



1 out of every 3 people in Hong Kong suffers from hypertension³ 每3名港人 有1人患有高血壓3

1 out of every 10 people in Hong Kong is already a diabetes patient4

High Blood Sugar

每10名香港人 有1人是糖尿病患者

May lead to:

有機會引致的併發症包括:

- Heart Failure 心臟衰竭
- Aneurysm 動脈瘤
- Stroke 中風

有機會引致的併發症包括: Coronary Heart Disease 冠心病 **Kidney Failure** 腎衰竭 Blindness 失明 Stroke 中風

Gangrene 組織壞死

May lead to:

1.Source: Cardiovascular Risk Community Screening Pilot Project, 2010, Hong Kong Medical Association - Hong Kong East Community Network 資料來源: 香港醫學會港島東社區網絡,2010年「港人心血管病危機調查」 2.Source: Thematic Household Survey Report No. 58, 2015, Census and Statistics Department 資料來源: 政府統計處,2015年主題性住戶統計調查第 58 號報告書 3.Source: FAMILY Cohort Findings, 2010, School of Public Health, The University of Hong Kong 資料來源: 香港大學公共衛生學院,2012年「愛 + 人」計劃全港往戶追蹤研究結果 4.Source: Department of Health, 2016, http://www.chp.gov.lk/tr/content/756/44260.html 資料來源: 香港衛生署, 2016, http://www.chp.gov.lk/tr/content/756/44260.html



Offers full cover⁺ to your hospital expenses up to HKD 8 million per year

住院費用 高達800萬港元

HealthAngel Medical Insurance Plan offers protection up to HKD 8 million per year to cover your hospital confinement, treatment and surgical charges in standard semi-private room. With the free annual check up* and a series of designated benefits, you can easily identify, monitor or follow up with your Three Highs Conditions.

「三高保」醫療保險計劃提供高達每年800萬港元的保障額,全數賠償半私家房的住院治療及手術費用。透過年度免費身體檢 查*及一系列的指定保障,我們更可一路助您及早發現、監察或跟進三高情況。

Hospital confinement charges 住院費用

- ✓ Room & board charges 房租及膳食費用
- ✓ Intensive care unit charges 深切治療部費用
- ✓ Medical practitioner's visit charges 醫生巡房費
- ✓ In-hospital specialist consultation fees 住院專科醫生費
- √ Hospital special service charges
- √ In-hospital private nurse's fee[^] 住院的私家看護費用"
- ✓ Accompanying bed charges 陪伴床位費用

Surgical charges No dassification of surgeries 手術費用 0 不設手術分類

- ✓ Anaesthetist's fees 麻醉科醫生費
- ✓ Operating theatre charges
- ✓ Medical appliances charges[^] 醫療裝置費用[^]

Cancer therapy charges 癌症之指定治療費用

- ✓ Radiotherapy charges 放射治療費用
- √ Chemotherapy charges 化療費用
- √ Target therapy charges 標靶治療費用

Daypatient surpleal charges 日症手術費用

Kidney dialysis charges 腎透析費用

Plan Summary 計劃概況

Age Limit	15 days - 75 years old* (Benefit section 7 & 8 are not applicable to insured person enrolled at age 66 to 75)
投保年齡	15 日至75 歲* (第7及8節保障不適用於66至75歲投保之人士)
Renewal Up to	99 years old
續保至	99 歲
Overall Lifetime Limit (HKD) 終生賠償上限 (港元)	30,000,000
Annual Limit (per policy year) (HKD) 保單年度最高賠償額 (港元)	8,000,000
Accommodation Room Types	Standard Semi-private Room [#]
病房類別	半私家房 [#]
Geographical Area Options	1) Asia (including Australia & New Zealand) 亞洲(包括澳洲及新西蘭)
地域選擇	2) Worldwide (excluding North America) 環球但不包括北美洲
Voluntary Deductible Options (HKD)	1) 0
(For Section 1 – 5 only)	2) 38,000
自願性自負額 (港元) (只涵蓋第1至5節)	3) 88,000
Coverage 保障範圍	 Hospital Confinement Cover 住院保障 Surgical Cover 手術費用保障 Pre-Hospitalization and Post Confinement Cover 入院前及出院後保障 Cancer Therapy & Kidney Dialysis Cover 癌症及腎透析保障 Extended Benefits for AIDS / HIV, Emergency Treatment for Accidents and Hospice Care 愛滋病/人體免疫力衰竭病毒、善終服務及緊急意外治療之伸延保障 Zurich Emergency Assistance 蘇黎世緊急支援服務 Three Highs Benefits * 三高保障 Free Annual Medical Checkup* 免費年度身體檢查

[^] Sub-limit applies for specified items 個別項目設有個別限額

⁺ Subject to annual benefit limit, lifetime benefit limit and deductible (if any). Terms and conditions apply. Please refer to the policy documents for details. 受每年保障限額、終身保障限額及自付費(如有)限制 受有關保單條款及細則約束·詳情請參閱保單文件·

Three Highs Benefits and Free Medical Checkup are only applicable to insured person enrolled at or before age 65. 三高保障及免費身體檢查只適用於65歳或之前投保之人十

[#] Should the insured person's hospital confinement is in a Standard Private Room, the reimbursement percentage of the eligible benefits under Section 1 - 5 will be adjusted to 50% of the maximum benefits under the policy. No benefit shall be payable for the insured person confined in any room type with a higher classification than a Standard Private Room.

若受保人於住院時享用私家病房,第1至5節之合資格費用將按保單最高賠償額之百分之五十賠償。若受保人入住任何高於私家病房等級之病房皆不在保障範圍之內。



5 key benefits to protect you against Three Highs Conditions

特設 5 大貼心保障項目,與您勇敢面對三高

Discover 發現

Treatment

治療



Get a Free Annual Medical Checkup

We will cover you for a free annual medical checkup to identify and monitor any of the Three Highs Conditions upon renewal.

免費年度身體檢查

於每年續保時提供免費三高身體檢查,助您及早發現三高狀況。

Clinical and Prescribed Medication Charges

Besides the cost of any hospital confinement and surgical charges, there are medication charges.

門診費用或藥費

我們知道您每年用於治療三高的門診費用或藥費亦不少,所以我們 特別提供每年5,500港元的保障,助您應付這些開支。

Alternative Treatment Benefit

After you are diagnosed with any kind of the designated complications and stabilize your condition. To help you in this situation, we provide up to HKD 10,000 of additional coverage for alternative treatments such as diet, physiotherapy, Chinese medicine or acupuncture after your discharge from the hospital.

另類治療費用保障

當您因特定三高併發症而進行手術後,我們明白您或繼續需要以 不同方法治療及控制三高,因此出院後我們會為您提供10,000港元的 保障,作包括營養師、物理治療、中醫、針灸等的另類治療。



Home Modification & Mobility Aids Allowance

When you are discharged from hospital after surgery as a result of designated complication, some conditions may affect your mobility leading to access difficulties around your home. Once again, we will be there for you providing a lifetime limit of up to HKD 15,000 to support your needs for home renovation and mobility equipment.

Recuperation 休養



家居改裝及購買輔助行動器材津貼

當您因特定三高併發症而進行手術後,我們將提供終生限額高達 15,000港元的保障讓您應付改裝家居及購買輔助行動器材的費用, 以迎合生活需要。

Annual Foot or Eye Exam

Should you be diagnosed with diabetes, we will cover the cost of annual foot or eye exam to check the progression of the disease.

眼或足部年度檢查

一但確診患上糖尿病,我們更可每年提供免費眼或足部檢查,協助 防止病情惡化。





It's all about caring for you 保障由您出發,全心為您



Cashless arrangement service¹

Enjoy cashless arrangement service for hospitalization at private hospitals in Hong Kong. Saving you the trouble to pay any expenses upon discharge

住院免找數服務1

入住本港私家醫院可享住院免找數服務

· 免除出院時需要付款的煩惱



Medical second opinion³

Arrange leading medical centers to provide expert opinion on the treatment plan of your illness to ease your worries

第二醫療意見。

安排頂尖病理學家為您診斷及檢視治療方案 並提供專業意見以減少您的憂慮



Priority appointment service at designated specialist4

Enjoy priority in making appointments with designated renowned specialist⁵, including Cardiologists and Cardiothoracic surgeons

優先預約指定專科醫生服務⁴

專享優先預約著名的指定專科醫生5, 包括心臟病科及心臟手術專家



Overseas emergency medical evacuation or repatriation⁶

Fully cover all the costs of an emergency medical evacuation or repatriation

海外緊急醫療運送及運返的

全數賠償緊急醫療運送及運返之實際費用 於緊急時全力支援您



Renewal up to age 992

Your policy is renewable up to age of 99 years if you as the insured person are between 15 days to 65 years old at policy inception date for Supreme Plan or between age of 66 and 75 years old at policy inception date for Basic Plan

可續保至99歲2

如您作為受保人投保至尊計劃及於首個保單生效日年 齡介乎15日至65歲,或投保基本計劃及於首個保單生 效日年齡介乎者66至75歲,您的保單可續保至99歲



Enjoy premium saving with voluntary deductible

According to your budget or existing insurance coverage, you can select from a choice of voluntary deductibles to enjoy premium savings as well as to supplement any protection gap from your existing group medical insurance

自願性自負額,節省保費開支

你可根據自己的預算或現有保障,選擇以自願性



Registered nurse supported customer service hotline4

Apart from general customer services, our hotline is also supported by registered nurse to provide nursing advisory services

註冊護士支援客戶服務熱線4

除提供一般的客戶服務外,更有註冊護士提供 多方面的專業護理諮詢服務



Arrangement of limousine service⁷

If you have to be hospitalized for over 7 days, we'll bring you home in comfort by helping you to arrange limousine service upon discharge from hospital

安排轎車接送服務

若您住院超過7天,我們可協助您安排轎車 接送出院,讓您以最舒適的方式回家休養



Please contact our insurance intermediaries or call our enrollment hotline 2903 9390.

請聯絡蘇黎世銷售代表或致電投保熱線 2903 9390 了解更多

- I. The service is subject to pre-authorization. 本服務須經預先批核。
- 2. Zurich reserves the right to renew at our discretion and to amend the premium, benefits, terms and conditions upon policy renewal. 於每年續訂保單時,蘇黎世保留酌情每年續保及在續保時調整保費、保障、條款及細
- 3. Service is provided by independent service provider, Zurich will change the arrangement of such service from time to time without prior notice, 服務由獨立服務機構提供,蘇黎世將不時調整有關服務之安排而不作另行通知 4. Only available during office hours: Mon Fri (9:00 a.m. to 5:30 p.m.), except public holidays, 只於辦公時間內適用 星期—至五 (上午9時至下午5時半),公眾期除外。
 5. Call customer service hotline for the list of designated specialist for selection. 請致電客戶服務熱線素取指定專科醫生清單。
 6. Service to be provided and arranged by Zurich Emergency Assistance for emergency cases with medical necessity. Zurich reserves the right of final decision. The covered cost includes cost of transportation, madrical services and medical services are processed in course.

- medical services and medical supplies necessarily incured. 蘇黎世默急支援將對有醫療需要之聚為個案安排及提供服務。蘇黎世保留最終決定權。所支付的費用包括必要的交通、醫療服務及醫療用品實質費用。

Table of Benefits 保障表

Overall Lifetime Limit (HKD) 個人終身賠償限額(港元)	30,000,000
Annual Limit (per policy year) (HKD) 每保單年度最高賠償限額 (港元)	8,000,000
Accommodation Room Types 病房類別	Standard Semi-private Room 標準半私家病房
Geographical Area Options 保障地區	1) Asia (including Australia & New Zealand) 亞洲 (包括澳洲及新西蘭) 2) Worldwide excluding North America 環球不包括北美洲

Geographical Area Options 保障地區	1) Asia (including Australia & New Zealand) 亞洲 (包括澳洲及新西蘭) 2) Worldwide excluding North America 環球不包括北美洲
Coverages ¹	*Maximum Limit per Insured Person (HKD)
保障 ¹	每位受保人之最高賠償額 (港元)
Section 1 - Hospital Confinement Cover 第1節 - 住院保障	
1.1 Room & Board Benefit	Full Cover
房租及膳食費用	全數賠償
1.2 Intensive Care Unit Charges	Full Cover
深切治療部費用	全數賠償
1.3 Medical Practitioner's Visit	Full Cover
醫生巡房費	全數賠償
1.4 In-hospital Specialist Consultation Fees	Full Cover
住院專科醫生費	全數賠償
1.5 Hospital Special Services Charges	Full Cover
醫院雜費	全數賠償
1.6 In-hospital Private Nurse 住院的私家看護費用	
Maximum no. of days (per policy year) 最高日數(每保單年度)	30 days/日
Maximum limit per day	Full Cover
每日最高限額	全數賠償
1.7 Accompanying Bed Benefit (for insured person aged below 18)	Full Cover
陪伴床位保障 (只供年齡18歲以下的受保人)	全數賠償
1.8 Hospital Cash Benefit (for ward confinement in public hospital) 住院現金(在公立醫院內之住院)	
Maximum no. of days (per policy year) 最高日數(每保單年度)	30 days/日
Maximum limit per day 每日最高限額	1,600
Section 2 - Surgical Cover 第2節 - 手術費用保障	
2.1 Surgical Charges	Full Cover
手術費用	全數賠償
2.2 Anaesthetist's Fee	Full Cover
麻醉科醫生	全數賠償
2.3 Operating Theatre Charges	Full Cover
手術室費用	全數賠償
2.4 Day Patient Surgery ²	Full Cover
日症病人手術費用 ²	全數賠償
2.5 Medical Appliances Benefit 醫療裝置	
a. Specific medical aids³	Full Cover
指定醫療裝置/輔助工具³	全數賠償
b. Other medical aids (per policy year) 其他醫療裝置/輔助工具(每保單年度)	80,000

Coverages¹ 保障¹	*Maximum Limit per Insured Person (HKD) 每位受保人之最高賠償額 (港元)
Section 3 - Pre-Hospitalization and Post Confinement Cover 第3節 - 入院前及出院後保障	
3.1 Pre-Hospitalization Outpatient Consultation (within 30 days prior to confinement) 入院前門診諮詢 (入院前30日內)	1 consultation visit 1次門診諮詢
3.2 Post Confinement Outpatient & Therapy Expenses (within 60 days after discharge from confinement) 住院後門診及物理治療 (出院後60日內)	
Maximum limit(per policy year) 最高限額(每保單年度)	10,000
Maximum limit per day 每日最高限額	1,600
3.3 Post Confinement Home Nursing Expenses (within 60 days after discharge from hospitalization) 住院後家居看護 (出院後60日內)	
Maximum no. of day (per policy year) 最高日數(每保單年度)	30 days/日
Maximum limit per day 每日最高限額	1,600
Section 4 - Cancer Therapy & Kidney Dialysis Cover 第4節 - 癌症及腎透析保障	
4.1 Chemotherapy, Radiotherapy and Target Therapy for Cancer 癌症化療、放射治療及標靶治療	Full Cover 全數賠償
4.2 Kidney Dialysis 腎透析	Full Cover 全數賠償
Section 5 - Extended Benefits 第5節 - 伸延保障	
5.1 Emergency outpatient treatment for Accident ⁴ (per accident) 意外緊急門診治療 ⁴ (每宗意外)	2,000
5.2 Accidental Dental Treatment ^s (per accident) 意外牙科治療 ^s (每宗意外)	2,000
5.3 AIDS / HIV Treatment (lifetime limit) 愛滋病/人體免疫力衰竭病毒治療 (終生限額)	500,000
5.4 Hospice Care Benefit ⁶ (lifetime limit) 善終保障 ⁶ (終生限額)	80,000
Section 6 - Zurich Emergency Assistance (arranged by independent service provider) 第6節 - 蘇黎世緊急支援服務 (由獨立服務機構安排)	
6.1 Arrangement of Limousine Service ⁷ (Applicable in Hong Kong) 安排轎車接送服務 ⁷ (適用於香港境內)	Included 包括

Coverages' 保障 ¹	*Maximum Limit per Insured Person (HKD) 每位受保人之最高賠償額 (港元)
6.2 Telephone Medical Advice (Applicable outside Hong Kong) 海外電話醫療顧問服務 (適用於香港境外)	Included 包括
6.3 Medical Service Provider Referral (Applicable outside Hong Kong) 海外轉介醫療服務供應商(適用於香港境外)	Included 包括
6.4 Arrangement of Hospital Admission Deposit (Applicable outside Hong Kong) 海外入院按金保證(適用於香港境外)	Up to US\$15,000 最高為 \$15,000 美元
6.5 Overseas Emergency Medical Evacuation or Repatriation 海外緊急醫療運送或運返服務	Actual Cost 實際費用
Section 7 - Three Highs Benefits 第7節 - 三高保障	
7.1 Medical Expenses Benefit for treatment of Specified Three Highs Conditions ^{8,9} (per policy year) 治療指定三高症 ⁸ 醫療費用保障 ⁹ (每保單年度)	5,500
7.2 Alternative Treatment and Palliative Care ¹⁰ (after Listed Designated Complications ¹¹) (per event) 另類治療及紓緩性護理費用 ¹⁰ (蒙受列明的特定三高併發症後 ¹¹) (每個治療項目)	10,000
7.3 Home Modification & Mobility Aids ¹² (after Listed Designated Complications ¹¹) (lifetime limit) 家居改裝及購買輔助行動用品費用 ¹² (蒙受列明的特定三高併發症後 ¹¹) (終生限額)	15,000
Section 8 - Free Annual Medical Checkup 第8節 - 免費年度身體檢查	
8.1 Annual Health Screening for Three Highs (at designated medical centers) (per policy year) 年度三高身體檢查 (於指定醫護中心進行) (每保單年度)	Once/1次
8.2 Annual foot or eye exam(after diagnosed with diabetes mellitus) (at designated medical centers) (per policy year) 年度足或眼檢查及評估(於確診患上糖尿病後)(於指定醫護中心進行) (每保單年度)	Once/1次
Section 9 – Voluntary Deductible Per Year (Applicable for Section 1 – 5 only) 第9節 - 自願性每年自負額(只適用於第1至第5節)	
Voluntary Deductible Options Per Year 自願性每年自負額選擇	0 / 38,000 / 88,000

1. A 30-day waiting period is applicable for any sickness, disease or condition and a 90-day waiting period is applicable for specific three highs conditions and/or listed designated complications. 30天等候期適用於任何疾病 、病症或症狀。90天等候期適用於指定三高症及 / 或列明的特定三高併發症。2. Covers consultation fee, surgeon's fee, medication charges, operating theatre charges, anaesthetist charges and cost of oxygen and equipment. 賠償主診醫生診症費、外科醫生手術費、在手術期間實際收取的手術費包括手術室費用、「麻醉科醫生」費用、氧氣及儀器及註冊醫生收取的藥費。3. Including pace maker, stents for Percutaneous Transluminal Coronary Angioplasty, intraocular lens, artificial cardiac valve, metallic or artificial joints for joint replacement, prosthetic ligaments for replacement or implantation between bones and prosthetic intervertebra disc. 包括心臟起搏器、經皮冠狀動脈腔內成形術之支架及氣球擴張轉管、 眼角膜晶體;血管瓣膜手術所需的瓣膜、 更換關節手術所需的金屬或人造關節、用於更換或植入骨間韌帶的人工韌帶及 人工腰椎盤。4. For treatment performed within 48 hours from the date of the accident.治療須在意外發生日的48小時內完成。5. For treatment performed within 2 weeks from the date of the accident. Covers consultation, staunch bleeding, tooth extraction and x-ray. 治療必須在意外發生後兩星期內進行。賠償診症、止血、拔牙及X-光費用。6. For stay in hospice for treatment on care and nursing service. 賠償進住註冊善終院舎及其照顧和護理的費用。7. For insured person hospitalized for more than 7 consecutive days, cost to be borne by the insured person. 受保人沒住院認過建讀七天·費用須由受保人支付。8. Specified Three Highs Conditions means the first diagnosis of any one or more of the followings: (i) diabetes mellitus (ii) essential hypertension (iii) dyslipidaemia 指定三高症意指第一次被診斷患上以下疾病之其中一項或者數項: (i) 糖尿病 (ii) 原發性高血壓 / 高血壓 (iii) 血脂異常 / 高膽 圖蘚血症 9. This benefit must be prescribed and recommended by the attending registered medical practitioner in writing and the following covered charges incurred must be medically necessary and solely for the treatment of or monitoring the progress of Specified Three Highs Conditions: (i) Consultation fee charged by General Practitioner (ii) Consultation fee charged by Specialist (iii) Hiring of a private licensed and qualified for nursing care of the pursing care at his/her primary residence at usual country of residence (not a pursing or con lescent home) on daily basis (iv) Charges incurred on medicine prescribed (v) Charges of laboratory tests, imagin or screening test undertaken 此保障須獲主診醫生書面處方及轉介·且下列受保的費用是醫療必須及純為治理或監控指定三高症的癒後:(i) 普通科醫生的諮詢收費 (ii) 專科醫生的諮詢收費 (iii) 持牌及合資格照料及護理糖 尿病人的護士於醫院門診部或註冊診所內提供相關服務的諮詢收費 (iv) 外科藥物的費用 (v) 其他化驗室檢查・影象檢查或測試費用及過程 10. This benefit must be prescribed and recommended by the attending registered medical practitioner and received within 1 year after discharge from his or her hospital confinement as a result of Listed Designated Complications as defined or undergone any kind of surgery as defined as Listed Designated Complications. Covered alternative treatment includes: (i) Consultation fee charged by Chiropractor (ii) Fee charged by Acupuncturist (iii) Fee charged by Homoeopathist (iv) Fee charged by Osteopathist (iv) Physiotherap charges (vii) Occupational therapy charges (viii) Speech and Hearing therapy charges (viii) Consultation fee and charges of Traditional Chinese Medicine on Chinese bonesetter and Chinese herbalist charged by traditional Chinese Medicine Practitioner/Bonesetter (ix) Consultation fee charged by Dietician (x) Acupressure charges (xi) Tui Nai charges (xii) Hypnotism charges (xiii) Rolfing charges (xii) Massage therapy charges (xv) Aromatherapy charges 此保障須由主診醫生處方及轉介,受保服務須於進行列明的特定三高併發症引起的任何類型的手術及從醫院出院後1年之內產生的。受保的諮詢及治療的費用只限於:(i) 脊醫收取的諮詢收費 (ii) 針灸師的收費 (iii) 順勢療法的收費(w) 整脊師的收費(y) 物理治療費用(wi) 職業治療費用(yii)言語及聽覺治療費用(yiii) 中醫、跌打中醫師的諮詢收費及跌打及中草藥費用(xx 營養師的診費(x) 指壓的費用(xi ii) 推拿的費用(xi ii) 催眠費用(xi ii) 化眠費用(xi ii) 化 陳労族公郎以東(W)至済前的以東(W)初注石族東州(W)興味石族東州(W)川吉韶及総東石族東州(WII)千審、政力千審師的話的収東及欧力及十年業東州(W)高餐師的総資(W)有鑑的東州(W)推率的東州(W) 建爾芬費(Kiv) 按摩療法費用(W)香蕉費 11. Listed Designated Complications include: (i) Tokinally invasive surgery for Cornoray Artery Diseases including Angioplasty (iii) Cornoray artery bypass surgery (CABG) (iv) Acute Myocardial Infarction (v) Kidney Transplant (vi) Chronic and Irreversible Renal Failure (vii) Amputation of limbs 列明的特定三高併發症包括:(i)中風 (ii)微創手術(包括血管成形術)的冠狀動脈病治療 (iii)冠狀動脈分流 Acute Mylocaffual inflation (i) Nothing Indispiration (ii) Chronic and intervals and intervals included in Nothing Indispiration (ii) 使性和不可变的对象感谢的衰竭。(ii) 截蔽 12. Overs the actual charges incurred for home modification and purchase of mobility aids if the insured person discharge from hospital confinement after undergone any kind of surgery as defined as Listed Designation Complications during the hospital confinement. 若受保人因列明的特定三高併發症而於住院期間進行任何類型的手術,受保人從醫院出院後被證實有行 動問題,本公司將賠償實際家居改裝及購買輔助行動用品合理及慣常收費。

Major exclusions 主要不受保障項目

This policy will not cover any claim arising directly or indirectly from:

- acquisition of the organ to be used for organ transplantation and all expenses incurred by the donor, who is someone other than the insured person, including all costs incurred by the donor relating to organ donation;
- air travel except as a passenger in a licensed aircraft operated by a licensed commercial air carrier, private jet or helicopter; or engaging in naval or military or armed force or services:
- contraceptive or contraceptive devices, infertility or any other method of inducing pregnancy, sterilization of either sex; any condition resulting from childbirth, miscarriage, abortion, termination of pregnancy, pregnancy including but not limited to pregnancy test, pre-natal care as well as post-natal care and other complications arising from pregnancy;
- any costs incurred by any insured person outside any period of insurance of this
 policy or for any period of insurance of this policy for which the appropriate
 premium has not been paid;
- 5. any expense for health or dietary supplements and all specialized Chinese herbs and/or tonic medicine such as but not limited to bird's nest, lingzhi, any kind of ginseng, American ginseng, radix ginseng silvestris, cordceps sinensis, agaricus blazei murill, sika deer antler, donkey-hide gelatin, hippocampus, antelope horn powder, placenta hominis, musk, and pearl powder, etc:
- any pre-existing condition or related conditions;
- any treatment including services and supplies which are not medically necessary and are not consistent with customary medical treatment or diagnosis;
- any treatment or expenses incurred within the waiting period except those arising out of an accidental injury;
- charges for non-medical services such as telephone, television, radio, telex, extra and guest meals, extra bed or similar facilities, personal items, medical report charges and the alike;
- congenital abnormalities arising out of the same or resulting therefrom, including but not limited to epilepsy, strabismus, hydrocephalus, and hernia;
- convalescence, custodial or rest care or sanitaria care, or treatment received in any home, health hydro, nature cure clinic, sanatorium or long term care facility;
- cosmetic surgery or plastic surgery for purposes of beautification except as medically necessitated by an injury or accident;
- 13. dental work or surgery, unless procedures necessitated by damage to sound natural teeth as a result of an injury or accident occurring during the period of insurance. Benefit is payable purely for emergency condition and to alleviate the pain and in a legally registered dental clinic or hospital but in all circumstances shall not cover any restorative or remedial work, the use of any precious metals, orthodontic treatment of any kind, replacement of natural teeth, denture and prosthetic services such as bridges and crowns, their replacement and related expenses:
- 14. disease or sickness arising from asbestos;
- any treatment provided outside of geographical area unless as the result of an emergency.
- experimental treatment and drugs, unproven or pioneering medical and surgery techniques:
- refractive defects of the eyes, eye tests or fitting of glasses or surgical correction of nearsightedness;
- general check-up, vaccination or inoculations for immunization; quarantine purposes which is not medically necessary; expenses relating to sleep test for sleep
- 19. ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the
- 20. combustion of nuclear fuel, or from any nuclear weapons material;
- professional sports, or where the insured person would or could earn any remuneration from engaging in such sport or race or participating in any illegal
- 22. suicide, attempted suicide, intentional self-injury, insanity or any functional disorder or psychiatric condition of the mind, including but not confined to psychoses, neuroses, depression of any kind, anxiety, anorexia nervosa, bulimia, gender reassignment, schizophrenia and other behavioral disorders; abuse of alcohol, drugs or other addictive substances and any costs associated from such dependency or abuse;
- treatment by any person other than a registered medical practitioner or by any person who ordinarily resides in the insured person's home;
- 24. treatment for learning difficulties in child(ren), such as dyslexia or behavioural problems, attention deficit, hyperactivity disorder, or development problems such as shortness of stature;
- 25. treatment of obesity, or treatment for the purpose of weight reduction or gain regardless of the existence of morbid or comorbid conditions, removing fat or surplus tissue:
- venereal diseases, sexually-transmitted diseases, communicable disease requiring by law isolation or quarantine:
- 27. war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, direct participation in strike, riot or civil commotion or any kinds of participation in any act of terrorism:
- HIV (Human Immunodeficiency Virus) and/or HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and or any mutant derivative or variations thereof however caused or however named, except under the circumstance covered by Section 5.3 – AIDS / HIV treatment Benefit under Part 3 – Benefits; and
- 29. Any disability resulting directly or indirectly from or in respect in any confinement primarily for the physiotherapy or for the investigation of signs and/or symptoms with diagnostic image, laboratory investigation or other diagnostic procedures.
- 30. Any cyber act that results in accident, disability, sickness and/or injury.

本保單將不會承保因下列事故直接或間接引致之索償:

- 1. 購買器官作器官移植·以及並非受保人本身為器官捐贈者而招致的所有 費用·包括與捐贈器官有關的費用:
- 飛行除非以乘客身份乘搭由持牌商業航空公司營運的正式持牌航機、私人飛機或直昇機;或服役於海軍、軍事或武裝部隊;
- 3. 避孕劑或避孕用具·男女兩性的不育或任何方式的人工受孕·絕育手術 ;任何因婦產、流產、墮胎、終止懷孕、懷孕引致的狀況、包括但不限 於分娩測試·產前、產後護理及其他有關併發症;
- 4. 受保人並非於本保單保險期內招致的費用·或於本保單保險期內欠繳保 費期間招致的費用·
- 5. 任何保健食品或飲食補給品及所有專門中藥材及/或滋補藥物的費用 .包括但不限於燕窩、靈芝、任何種類人参、花旗參、野生參、蟲草、 姬松茸、鹿茸、阿膠、海馬、羚羊角粉、紫河車、麝香及珍珠末等;
- 6. 投保前已存在之傷疾或與此有關的疾病狀況;
- 7. 任何非醫療必需所招致的治療或服務開支;
- 8. 任何於等候期內所引起的治療或費用,因意外損傷導致除外;
- 非醫療服務費用·如電話、電視、電台、電訊、額外及訪客膳食、加床或同類設施、個人物品、醫療報告的收費;
- 10. 先天性缺陷,包括但不限於癲癇、斜視、腦積水、疝氣;
- 11. 療養、監護療養或靜養,或任何於家中、水療中心、自然療法診所、療養院或長期護養院接受的治療;
- 12. 以美容為目的之美容手術或整容手術·惟因意外的損傷導致醫療必需的 治療除外:
- 13. 任何性質的牙科手術。本公司會賠償天然健全牙齒於保險期內因意外導致的損傷。本保障只適用於緊急下紓減痛楚的治療,但治療必須於合法註冊牙醫診所或醫院進行。儘管有前文規定,本保障並不涵蓋任何修復性或補救治療、任何貴金屬用料、任何性質之矯牙手術、更換天然牙齒、假牙及矯形服務如齒橋、齒冠及其更換及相關費用;
- 14. 石棉導致的疾病:
- 15. 除非純粹因意外引起或屬於緊急情況·任何於保障地區境外所接受之治療·
- 16. 試驗性治療及藥物、未經證明或先導的藥物及手術技術;
- 17 眼部驗光毛病、例行眼部測試、配眼鏡糾正視力或折視矯正手術:
- 18. 一般身體檢查、疫苗注射或預防針、非醫療必需的間離、睡眠窒息測試
- 19. 任何核子燃料或核子武器物料燃燒後所產生的核子廢料所引致的電離子 輻射或放射性污染:
- 20. 購置或使用特製支架、器材、設備・包括但不限於器官、義肢裝置、助 聽器、人工耳蝸植入術、輪椅、拐杖、假牙、或任何其他同類設備・惟 列於第三部份 2.5節 – 醫療裝置的保障除外;
- 21. 職業運動、任何形式的競賽·或因受保人參與此等運動、競賽賺取報酬 或參與任何非法活動:
- 22. 自殘、企圖自殺、蓄意自我傷殘、精神失常或神經系統失調或精神疾病 .包括但不限於精神病、神經官能症、任何類別抑鬱症、焦慮症、厭食 症、暴食症、變性手術、精神分裂症及其他行為失常病症、酗酒、濫藥 或其他
- 23. 成癮的事物及其引起之費用;由非醫生或通常居於受保人家中的人士 提供的治療·
- 24. 兒童學習障礙的治療·例如閱讀困難或行為問題、專注不足/過度活躍症,或發育障礙如身形矮小;
- 25. 肥胖的治療或所有以增加或減少體重為目的之治療(無論是否屬於病態肥胖或有否並存疾病)、消除脂肪或多餘組織;
- 26. 性病、透過性傳染疾病、法律規定隔離或檢疫的傳染病;
- 27. 戰爭、侵略、外敵入侵、敵對局面(不論正式宣戰與否)、內戰、叛亂、革命、暴亂、軍事政變或奪權行動、直接參與罷工、暴動或內亂或以任何方式參予恐怖活動;
- 28. 人類免疫力缺乏病毒及/或人類免疫力缺乏病毒有關疾病·包括愛滋病及/或其任何突變、衍生或變異所引致或因此而命名·受保於本保單第5.3 節-愛滋病/人體免疫力衰竭病毒治療除外;及
- 29. 任何只為物理治療·診斷影像、化驗測試或其他檢驗程序而住院·以調查任何直接或間接因傷疾引起之徵狀或病徵。
- 30. 任何由網絡行為引致的意外、傷疾、疾病及/或損傷。

This brochure is only an illustration and does not constitute any part of the insurance contract. For full terms and conditions and exclusions, please refer to the policy document itself which shall prevail in case of inconsistency. Zurich Insurance Company Ltd reserves the right of final approval and decision. (The English version shall prevail in case of inconsistency between the English and Chinese versions.)

本宣傳資料只供參考之用,並不構成保險合約的一部份,有關此項保障計劃的內容細則及不承保事項將詳列於保單之內,如有任何差異,均以保單內之條款細則為準,蘇黎世保險有限公司保留最終批核及決定權。 (如中文譯本與英文有異,概以英文本為準。)

Important notes

重要事項

- The policy shall remain in force for a period of 1 year from the policy effective date and this policy will be automatically renewed at our discretion. We reserve the right to alter the terms and conditions, including but not limited to the premiums, benefits, benefits amount or exclusions of this policy at the time of renewal of any period of insurance by giving 30 days' written notice to you.
- You have the right to cancel the policy by returning the policy to us and attaching a notice signed by you requesting cancellation within the cooling-off period i.e., 21 days immediately following the day of delivery of this policy. In the event that no claim payment has been or is to be made, we will refund to you all the premiums you have paid without interest. In the event that a benefit payment has been made or is to be made , no refund of premium shall be made. After the cooling-off period, you have the right to cancel this policy by giving 30 days' advance notice in writing to us. In such event, we will refund the unearned premium actually paid by you provided that no claim has been made during the period starting from the policy effective date to the date on which the cancellation takes effect ("Policy Period").
- We reserve the right to declare the policy void from the policy effective date and may refuse to refund any applicable premium paid and/or we may request you to return all monies paid by us for previous claims if (i) you have incorrectly stated the health information of the insured person, (ii) omitted material information during enrollment or (iii) provided fraudulent documentation or fraudulently represented information during enrollment or when making a claim.
- We reserve the right to revise or adjust the premium under the
 - According to our applicable premium rate at the time of renewal (which will be based on several factors, including but not limited to medical price inflation, projected future medical costs, claims experience and expenses incurred by you and/ or in relation to this product, and any changes in benefit) by giving thirty (30) days' advance written notice to
 - The premium rate should be adjusted automatically according to the attained age of the insured person at the time of renewal

Claims procedure 索償程序

1. For application of Cashless Arrangement Service for **Hospitalization:**

Cashless Arrangement Service is rendered by the service provider which is nominated by us, and this service is available for private hospitals in Hong Kong only. If you require such service, please make your application by following the procedures below

- (i) Call our Customer Service Hotline through +852 2903 9382
- to obtain Pre-assessment Application Form.

 (ii) Complete Parts I & II of the Pre-assessment Application Form by you and your attending medical practitioner and return it to the service provider by fax +852 2802 6633 or email zurich.medical@hk.zurich.com not less than 3 working days prior to your admission to the hospital.
- (iii) After receiving your application, the service provider will inform you whether your application is approved within 3 working days. Should the pre-assessment be approved, the service provider will contact the hospital for direct settlement arrangement.

The assessment is based on information provided by you before admission. The actual reimbursement is subject to the information supplied by your attending medical practitioner and the hospital after you are discharged from the hospital, actual circumstances and details of the insurance coverage, exclusion clauses, terms and conditions stated in the policy and any other relevant document.

You will be required to authorize us to collect shortfall in payment on medical expenses, if any, from a credit card account designated by you. If hospitalization is due to illness/injury or sickness classified under an exclusion, application of this service will not be accepted.

2. For non-direct settlement claim:

refer to the policy terms and conditions.

- Notify us within 30 days from the date of treatment in hospitals or when a claim arises.
- Complete the claim form and supply us the original documents as appropriate.

For details of the required documents under different claims, please

- 1. 從保單生效日起計,本保單會維持生效1年及由本公司酌情每年 自動續保。惟本公司保留權利在任何保險期之續保前30日向您提 供書面通知以更改保單條款,包括但不限於保費、保障、保障額
- 或不再味事場。 您有權在冷靜期內即緊接保單交付予閣下之日起計的21日內交還 保單及附上您的簽署之書面通知書要求取消保單。若未曾獲賠償 或沒有將獲發的賠償 ·本公司將會把您已付之保費無息全數退還 。若您曾獲賠償或將獲得賠償,則不獲發還保費。在冷靜期過後 您可於30日前向本公司提出書面通知以取消此保單,如在該保 單生效日至取消保單生效日(保障期)期間無索償紀錄, 您已繳
- 本主义自主状况所等主义自任保护,所谓流来最高。 交之全年但未到期之保費將根據適用之比率計算扣減並退還。 若()您就受保人健康狀況作出了失實聲明,(i)在投保申請中遺漏 重要資料,或(iii)在投保申請或索價時提供了欺詐性的文件或有 欺詐成分的申述,本公司有權宣告保單自保單生效日起無效,並 可能拒絕退還已繳交的相關保費, 及 / 或可能要求您退還過去索 償中本公司支付的所有款項。
- 本公司保留權利,在以下情況更改或調整保費
 - 本公司會根據續保時的適用保費率調整保費(將基於多個因素·包括但不限於醫療通脈,預期未來醫療費用,理賠紀錄及您及/或這產品招致之費用,及保障之更改)·並於調整保費 前30天以書面通知您
 - 於續保時,保費將按受保人之實際年齡自動調整。

1. 申請住院免找數服務程序住院免找數服務

在院免找數服務由本公司所委任的服務機構代表提供服務,及 此服務衹適用於香港之私家醫院。申請手續如下:

- (i) 致電本公司的客戶服務熱線 +852 2903 9382 索取住院評
- (ii) 由您和您的主診醫生填妥預先住院評估申請表之甲及乙部 份·並在入院前不少於三個工作天傳真至+852 2802 6633 或電郵至 zurich.medical@hk.zurich.com 本公司 授權的服務機構代表作入院評估
- (iii) 收到申請後,本公司所委任的服務機構代表將在三個工作 天內評估您之申請及通知您申請是否得到接納。如申請被 接納,本公司所委任的服務機構代表會聯絡醫院作直接結

在院評估是基於閣下入院前提供之資料。實際賠償金額將根據 索償表格提供之資料、實際情況、保單上列明之保障項目、不 承保事項、條款及細則等所約束。

您須提供治療資料及授權本公司從您的信用卡帳戶收取醫療費 用的差額(如有)。如因不受保事項的任何損傷或疾病而引致 入院,申請均不會獲接納

2. 申請住院索償程序

步驟 1: 入院後30日內書面通知本公司;

步驟 2:向本公司提交填妥之賠償申報表及所需正本的證明文

就有關不同索償所需的證明文件,請參閱保單條款及細則。

Product limitation 產品限制

We only cover the charges and/or expenses of the insured person on medically necessary and reasonable and customary basis

"Medically necessary" means the necessity to have a treatment or medical service of the injury or sickness involved which are widely accepted by medical practitioners as effective, appropriate and essential based upon recognized standards of the health care specialty involved and which are:

- consistent with the diagnosis and is the customary medical treatment for the condition; and
- (ii) in accordance with standards of good and prudent medical practice; and
- (iii) not furnished primarily for the convenience of medical practitioner or any other medical service providers; and
- (iv) furnished at the most appropriate level of sufficient to safely and adequately treat the insured person's disability and are performed in the least costly setting required for the treatment of a covered disability; and
- not rendered primarily for diagnostic tests, diagnostic scanning purpose, imaging examination, laboratory test or physiotherapy without medical treatment, medication or surgery.

Note: (i)–(iv) apply to all circumstances, whereas (v) applies to day patient case or hospital confinement only.

For the avoidance of doubt, experimental, screening and preventive services or supplies are not considered as "Medically Necessary/Medi-

"Reasonable and Customary Charges" means in relation to a fee, a charge or an expense, any fee or expense which:

- is charged for treatment, supplies or medical services that are medically necessary and in accordance with standards of good medical practice for the care of an injured or ill person under the care, supervision or order of a medical practitioner;
- does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is
- (iii) does not include charges that would not have been made if no insurance existed.

We reserve the right to determine whether any particular hospital/medical charge is a reasonable and customary charge with reference including but not limited to any relevant publication or information made available, such as schedule of fees, by the government, relevant authorities and recognized medical association in the locality. We also reserve the right to adjust any or all benefits payable in relation to any hospital/medical charges which is not a reasonable and customary charge based on the above mentioned reference

我們只會根據醫療必需和合理及慣常的原則,為受保人所需支付的

「醫療必需」是指損傷或疾病必需或有需要之照顧、治療或醫療服務・並此等治療在專業認可的醫學標準中普遍接受為有效、適當及不可缺的、並以下列各項作為提供有關服務之必要性: (i) 因應有關診斷或治療而所需;及

- 符合良好及謹慎的行醫標準;及 (iii) 非純為醫生或任何其他醫療服務供應商之方便;及
- (iv) 以合理及慣常收費的標準為受保損傷或疾病進行的治療收費;
- (v) 藥物或接受任何手術下·使用醫療服務的目的並非純為診斷檢查、診斷掃描、影像檢查、化驗檢查或物理治療。 註: (i)至(iv)項適用於所有情況·惟第(v)項只適用於日症病人或住

為免生疑,任何實驗,診斷檢查及預防性服務將不被視為醫療必

「合理及慣常收費」是指就任何費用、收費或開支而言,符合以下 規定的費用或開支

- 受傷或患病人士在醫生按照良好醫療守則的護理標準下所提供 醫療必需的照顧,監管或指示而收取的治療、用品或醫療服務

- (ii) 不超過當地同類治療、用品或醫療服務的正常收費水平;及 (iii) 並不包括如非有投購保險便不會招致的費用。 本公司保留權利釐定個別醫院/醫療費用是否屬於合理及慣常收費 ・參考的基準包括但不限於任何可取得的相關刊物或資料・例如當 地政府、相關部門及認可醫療協會公佈的收費表。如根據上述參考 資料,任何醫院/醫療費用並非合理及慣常收費,本公司保留權利 調整任何或所有應付賠償的金額。