

環球優越
自願醫保計劃
Global Prestige
VHIS Plan

自願醫保認可產品 (編號: F00035)
VHIS Certified Plan (No. F00035)





環球優越自願醫保計劃 Global Prestige VHIS Plan

我們明白，你嚮往過優質的生活，亦對自己 and 家人的健康保障非常重視。因此我們特別推出「**環球優越自願醫保計劃**」（「本計劃」）。

本計劃符合自願醫保的要求並屬醫務衛生局認可的自願醫保靈活計劃，所繳交之保費可申請稅項扣減。本計劃為你提供優越及高透明度的環球保障，確保你在有需要時可獲得最佳的治療和照顧，讓你安心享受生活。

你的醫療費用可獲全數賠償¹每年高達港幣40,000,000元。此外，你更可使用保柏於本港首創的「專屬健康大使服務」，此服務包括保柏的24小時健康專線，並可在你患病時提供個人化的支援。

本靈活計劃除了涵蓋自願醫保計劃要求的基本醫療保障外，更提供額外醫療保障、身體檢查保障、免找數服務等。

We understand that you want the best in life, especially when it comes to the health of you and your family. To give you full peace of mind, we offer the **Global Prestige VHIS Plan** ("this plan").

This plan fulfills the Voluntary Health Insurance Scheme (VHIS) requirements and is certified by the Health Bureau as a VHIS Flexi Plan. Premiums paid for this plan are eligible for claiming tax deduction. This plan provides superior protection and support on a worldwide basis plus a commitment to ensuring transparency, so you will be assured of the best treatment and care whenever you need it.

Your medical expenses will be fully covered¹ up to HK\$40 million every year. In addition, you can count on Bupa's HealthPro Concierge Service. The first of its kind in Hong Kong, this service includes Bupa's 24/7 Healthline and additional personalised support for illnesses.

This flexi plan provides enhanced benefits, medical check-up benefits, cashless service and more in addition to the basic benefits of the VHIS Standard Plan.

¹ 有關全數賠償所涵蓋的項目，請參閱保障摘要。全數賠償只適用於合資格費用，並受限於保障摘要所列的每年保障限額及自付費。你須符合所訂程序以享有全數賠償，詳情請參閱保單。

¹ Please refer to the Summary of Benefits for the items eligible for full cover. Full cover is only applicable to eligible expenses and subject to the annual benefit limit and deductible set out in the Summary of Benefits. You need to follow the required procedures to enjoy full cover. Please refer to the Policy for details.

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HealthPro
Concierge Service



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Free benefits
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網上管理你的保單
Manage your
policy online



保柏—你的明智之選
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計劃選項 Plan options

自願醫保計劃類別 VHIS Plan type: 靈活計劃 Flexi plan

環球優越自願醫保計劃 (至臻 - HK\$0 自付費)
Global Prestige VHIS Plan (Signature - HK\$0 Deductible)

環球優越自願醫保計劃 (至臻 - HK\$12,000 自付費)
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Global Prestige VHIS Plan (Signature - HK\$80,000 Deductible)



計劃概要 Plan overview

保障一覽表 Cover at a glance

保障地域範圍 Territorial scope of cover	免費保障及服務 ² Free benefits and services ²
全球 Worldwide	免費保柏國際援助計劃 Free Bupa Worldwide Assistance Programme
病房級別 Ward class	專屬健康大使服務 HealthPro Concierge Service
標準私家房 Standard private room	24小時情緒解碼熱線 24-hour Mental Health Service Hotline
每年保障限額 Annual benefit limit	自選保障 ² Optional benefits ²
HK\$40,000,000	門診保障 Clinical Benefit
終身保障限額 Lifetime benefit limit	牙科及視力保障 Dental and Optical Benefit
無 Nil	醫療卡 Medical card
保障期 Period of cover	有 Yes
一年，可每年續保至終身 One year, renewable yearly for life	
投保前未知的已有病症 Unknown pre-existing conditions	
當保單生效後，隨即保障投保前未知的已有病症及8歲起出現徵狀或確診的先性疾病，受保單之一般不保事項約束 Unknown pre-existing conditions and congenital conditions with symptoms appearing or diagnosed from age 8 are covered as soon as your policy is in effect, subject to the policy's General Exclusions	

² 自選保障（門診、牙科及視力保障）及免費保障及服務並不屬自願醫保認可產品的一部分，有關之保費不可用作申請稅項扣減，亦不適用於家庭折扣。

² Optional benefits (Clinical, Dental and Optical Benefit) and free benefits and services are not part of the VHIS certified plan. The premiums paid are not eligible for claiming tax deduction and any family discounts.



計劃概要 Plan overview

投保資格 Eligibility

保單持有人 Policy holder

18歲或以上
Aged 18 or above

受保人 Insured person

保單持有人 Policy holder

保單持有人之配偶、子女、孫子女

Policy holder's spouse, child, grandchild

保單持有人或其配偶之父母、(外) 祖父母、兄弟姊妹

Policy holder or policy holder's spouse's parents,
grandparents, siblings

保單持有人之同居伴侶或其父母、子女

Policy holder's domestic partner or his/her parents or child

投保年齡 Issue age

保單生效時年齡介乎出生日起至80歲(包括首尾歲數)

From birth to 80 years (inclusive) at policy commencement

投保 Application

投保前無須進行醫療檢查³

No medical examinations are required³

續保 Renewal

保證終身續保⁴

Guaranteed lifetime renewal⁴

³ 如你於投保時的身高體重比例屬過重、過輕或年齡為65歲或以上，保柏或會要求你提交健康檢查報告，以便處理你的申請。

⁴ 保柏保證每年續保你的保障至終身，惟你須符合保單條款及細則內所列明的續保要求。

³ If your Body Mass Index is considered as overweight, underweight or you're aged 65 or above at enrolment, Bupa may ask you to submit a check-up report as part of your health insurance application process.

⁴ Bupa guarantees that your cover can be renewed every year for life, as long as you meet the requirements as stated in the renewal provisions of your policy terms and conditions.



計劃概要 Plan overview

折扣優惠 Discounts

家庭折扣 Family discounts

兩名合資格家庭成員一同投保：9折

2 eligible family members enrol together: 10% discount

三名或以上合資格家庭成員一同投保：85折

3 or more eligible family members enrol together: 15% discount

稅項扣減⁵ Tax deduction⁵

每年可用作申請稅項扣減的合資格保費上限為每位受保人港幣8,000元（不包括保費徵費）。申請稅項扣減的保單數目或受保人數不設上限。

Claim a tax deduction of up to HK\$8,000 in qualifying premiums per insured person per year (excluding premium levy). There's no limit on the number of policies or insured persons claimed.

⁵ 每名投保合資格醫療保障計劃（獲醫務衛生局認可之自願醫保計劃）的納稅人均可就合資格保費扣稅。每年可用作申請稅項扣減的保費上限為每名受保人港幣8,000元。受保人與保單持有人之關係須列載於稅務局的《稅務條例》（第112章）中「指明親屬」列表上。保費須於課稅年度內繳付方符合該課稅年度的申請稅項扣減資格。稅項扣減適用於2019年4月1日起生效的認可產品，不包括其他自選保障。每名納稅人可申請稅項扣減的受保人數及／或保單數目不設上限。為同居伴侶、孫子女、同居伴侶之父母／子女購買的保單並不符合稅項扣減的資格。請瀏覽 www.bupa.com.hk/tc/taxfaq/ 了解更多稅項扣減詳情。

⁵ Any Hong Kong taxpayer who has purchased an eligible health insurance plan (certified by the Health Bureau as VHIS) can claim a tax deduction on qualifying premiums up to HK\$8,000 per insured person each year. The relationship between the taxpayer and the insured person must be included in the list of "specified relatives" in Inland Revenue Ordinance (Cap. 112). You can claim the deduction in the same tax year when the premium was paid. The deduction is available for certified plans, but not any other Optional Benefits, with policy effective date of 1 April 2019 or later. There is no limit on the number of insured persons and/or policies claimed by each taxpayer. Policies purchased for a domestic partner, grandchild(ren) or domestic partner's parents/children are not eligible for tax deduction. For details about tax deduction, please visit www.bupa.com.hk/en/taxfaq/.



自願醫保計劃詳情 VHIS Plan details

「環球優越自願醫保計劃」(至臻) 提供高達每年港幣 40,000,000 元優越的醫療保障，全數賠償¹ 入住標準私家房的合資格醫療開支，更不設終身保障限額，讓你安心享有優質的治療。

Global Prestige VHIS Plan (Signature) provides generous cover of up to HK\$40 million every year. Your eligible medical expenses incurred in standard private rooms can be covered in full¹. There's also no lifetime benefit limit, so you can enjoy high-quality treatments with ease.



認可的自願醫保計劃 Certified VHIS plan

本計劃為認可的自願醫保計劃，涵蓋所有自願醫保產品特點，包括於本港醫院進行的精神科住院治療、訂明診斷成像檢測、訂明非手術癌症治療等。

This plan is certified as VHIS compliant. It includes all VHIS features such as coverage for inpatient psychiatric treatments in Hong Kong, prescribed diagnostic imaging tests, prescribed non-surgical cancer treatments and more.



全數賠償醫療費用¹ Full cover for medical expenses¹

無論你身處何地，均可獲得相同保障 — 入住標準私家房的開支，如外科醫生費及深切治療均可獲全數賠償，以每年保障限額為限。

Expenses such as surgeon fees and intensive care are covered in full up to your annual benefit limit at the standard private room level worldwide.



環球保障 Worldwide coverage

不論你身處何方，本計劃都為你提供優越的保障及支援。即使你於海外居住或旅遊，仍可享有完全相同的保障⁶。

No matter where you are in the world, this plan provides superior protection and support. Your benefits will be the same⁶ even if you're travelling or staying overseas.



免找數服務⁷ Cashless service⁷

憑保柏醫療卡，你可於本港指定的私家醫院⁸和保柏特選的診所⁹接受治療或求診，而無須找數，非常方便。如在海外接受治療，你只須預先致電保柏，便可享用此服務。我們會直接向醫院或醫生支付合資格費用¹⁰。

With your Bupa medical card, you can enjoy cashless service at designated private hospitals⁸ and Bupa appointed clinics⁹ in Hong Kong. For overseas hospitalisation, you can enjoy this service by calling Bupa to make the necessary arrangements. We'll settle your eligible expenses directly with the hospital or doctor¹⁰.



自願醫保計劃詳情 VHIS Plan details



保障投保前未知的已有病症 Enhanced cover including unknown pre-existing conditions

投保前未知的已有病症及8歲起出現徵狀或確診的先天性疾病均可獲保障，受保單之一般不保事項約束。你亦可選擇通過核保及繳付附加保費，保障投保前已有病症。

Your policy covers unknown pre-existing conditions and congenital conditions with symptoms appearing or diagnosed from age 8, subject to the policy's General Exclusions. You can also choose cover for pre-existing conditions, subject to underwriting and an additional premium.



選擇自付費 支付保費更輕鬆 More affordable healthcare with deductible options

提供4項自付費選擇，幫助你大幅減低保費。自付費是指每年在獲得保賠賠償前你需要負責的合資格醫療費用。

你可於以下任何一個歲數（50歲、55歲、60歲、65歲、70歲、75歲、80歲或85歲）的續保日前的30日內調低或取消自付費而無須重新核保，讓你在退休後更靈活地計劃預算。

自付費並不適用於任何自選保障如「門診保障」，當你索償這些自選保障時，即可獲得賠償所有合資格的醫療費用，你無須自付部分金額。

Choose from four deductible options to lower your premium. A deductible is the amount of eligible expenses that you must pay each year before Bupa will reimburse your eligible medical expenses.

You can choose to lower or remove your deductible within 30 days before the renewal date without re-underwriting at any one of the following ages (50, 55, 60, 65, 70, 75, 80 or 85). This provides more flexibility for budget planning after retirement.

The deductible won't apply to any optional benefits such as our Clinical Benefit. That means you'll receive reimbursement once you've incurred eligible medical expenses.



全面照顧康復需要 Comprehensive care for a full recovery

本計劃延伸跟進護理保障，不論任何病症，均全數賠償所有入院／日間手術前90日內及出院／完成日間手術後365日內所有相關門診護理的費用。額外保障更涵蓋康復治療、註冊中醫師診症及人工裝置等，即使不幸患上慢性疾病或癌症等嚴重疾病，也可獲全面的照顧。

This plan offers extended follow-up for any condition. You can enjoy full cover for all related outpatient expenses within 90 days before or 365 days after confinement or day case procedure. The enhanced benefits also include coverage for rehabilitation, consultation with a registered Chinese medicine practitioner, prosthetic device and so on. You'll be well protected in case of any chronic diseases or serious illnesses like cancer.



充裕保障 輕鬆應付癌症治療 Generous protection for cancer treatment

如確診癌症，我們會豁免你所選的自付費（如有），讓你的癌症治療費用可直接獲得賠償。訂明非手術癌症治療，如化療、放射性治療（包括但不限於質子治療）、標靶治療、免疫治療等，均可獲全數賠償，以每年保障限額為限。你可安心接受治療，無需擔心醫療開支預算。

With this plan, you don't need to worry about medical bills adding up if you're diagnosed with cancer. We'll waive your chosen deductible (if any) so that your cancer treatment expenses will be covered straightaway. What's more, treatments such as chemotherapy, radiotherapy (including but not limited to proton therapy), targeted therapy, immunotherapy and more are fully covered up to your annual benefit limit so you can focus on recovery.



自願醫保計劃詳情 VHIS Plan details



保證終身續保 Guaranteed lifetime renewal

保柏保證終身續保你的保障，無論你因保單生效後所患疾病索償多少，保費只會根據你的年齡而調整⁴。

Bupa guarantees that your cover can be renewed for life. Your premium will only be based on your age no matter how much you claim after your policy is in effect⁴.



按年齡組別劃一保費至69歲 Flat premiums by age group until age 69

大部分醫療保險均會根據你的年齡而每年增加保費。本計劃為69歲或以下的客戶提供按指定年齡組別劃分的劃一保費¹¹，讓你較容易計劃財務安排。

Most health insurance plans increase premium annually based on your age. This plan offers a flat premium¹¹ for customers within specific age groups up to 69 years old. This makes it easier for you to plan your finance.



符合稅項扣減資格 Eligible for tax deduction

此計劃屬認可的自願醫保計劃，每年可用作申請稅項扣減的合資格保費上限為每名受保人港幣8,000元⁵。

This plan is certified as VHIS compliant. You can claim a tax deduction on qualifying premiums up to a limit of HK\$8,000 per insured person each year⁵.



身體檢查保障 Medical check-up benefit

由會籍第二年開始，你可自由選擇體檢中心及檢查項目，然後向保柏索償每年最高港幣4,800元的身體檢查，不限檢查次數；或於指定的體檢中心每年免費接受全面的身體檢查一次（只適用於18歲或以上的受保人，檢查涵蓋項目如血脂檢查、肝臟檢查、冠心病測試、腎功能測試、腫瘤標誌物檢查等）。

Starting from the second year, you can select your choice of medical check-up(s) at any medical centre and then submit multiple medical check-up claims to Bupa up to a maximum benefit limit of HK\$4,800 per year. Alternatively you can receive a free comprehensive health assessment at designated health screening centres every year (only applicable to insured persons aged 18 or above; assessment items may include screening for lipids, liver function, renal function, coronary risk, tumour markers, etc.).

⁶ 關於在香港以外進行器官移植手術的總保障限額除外。環球優越自願醫保計劃（至臻）向非急症治療提供的保障亦針對受保人接受治療前於美國逗留的時間而有所不同。詳情請參閱保單。環球醫療保障受限於適用之當地法律及法規。

⁷ 如你於香港的指定私家醫院接受治療，以下項目可享免找數服務：認可產品之保障摘要上1) 基本保障下所列的項目(a) - (j)，以及2) 額外保障下所列的項目(a)、(b)及(d)。如在海外接受治療，你只須預先致電保柏作出所須安排，便可享用免找數服務。你須按照所訂程序以享免找數服務。詳情請參閱保單及會員指引。

⁸ 你可瀏覽 <https://www.bupa.com.hk/medical-insurance/global-prestige/>，查閱指定的香港私家醫院名單。此名單可能會不時更改。

⁹ 如你投保了自選門診保障，你於保柏特選診所接受指定的門診保障亦可享免找數服務。詳情請參閱保單及會員指引。請登入保柏的客戶服務網站查閱最新的保柏特選診所名單。此名單可能會不時更改。

¹⁰ 保柏會向醫院及診所直接支付你的合資格醫療費用，以「保柏尊貴寶卡」的信用額及保障限額為限，如有任何不合資格的醫療費用和自付費，你須退還有關費用。詳情請參閱常見問題1。

¹¹ 你的保費仍然或會因醫療通脹等因素而有所調整。

⁶ Except the aggregate benefit limit in relation to organ transplant surgery. Coverage for Non-Emergency Treatment in Global Prestige VHIS Plan (Signature) varies according to the Insured Person's duration of stay in the United States prior to receiving the treatment. Please refer to the Policy for details. Worldwide medical coverage is subject to applicable local laws and regulations.

⁷ If you receive treatment at designated private hospitals in Hong Kong, you can enjoy cashless service for the following items: items (a) - (j) listed under 1) Basic Benefits and items (a), (b) and (d) listed under 2) Enhanced Benefits in the Summary of Benefits for the Certified Plan. For overseas hospitalisation, you can enjoy cashless service by calling Bupa to make the necessary arrangements. You need to follow the required procedures to enjoy cashless service. Please refer to the Policy and membership guide for details.

⁸ For the list of designated private hospitals in Hong Kong, please visit <https://www.bupa.com.hk/medical-insurance/global-prestige/>. This list is subject to change from time to time.

⁹ If you've enrolled in the optional Clinical Benefit, you can also enjoy cashless service at Bupa appointed clinics for covered clinical benefits. Please refer to the Policy and membership guide for details. Please log in to Bupa's customer service portal to view the latest list of Bupa appointed clinics. This list is subject to change from time to time.

¹⁰ Bupa will directly pay your eligible medical expenses to the hospitals and clinics subject to the Bupa Gold Card's credit limit and benefit limit. You will need to reimburse Bupa for any ineligible medical expenses and selected deductible, if any. Please refer to Frequently Asked Question 1 for details.

¹¹ Your premium may be adjusted due to medical inflation or other factors.



重要資料 Important information

本冊子乃資料摘要，僅供參考之用。請務必細閱完整的保險保單，以了解計劃之保障範圍、一般不保事項、條款及細則。

我們想幫助你在投保前了解本計劃。請細閱以下資料。

等候期

本計劃下之認可產品及其他自選保障之等候期如下：

認可產品	<ul style="list-style-type: none">- 不設等候期，保單生效後即可獲得保障。- 懷孕併發症之保障只會賠償在保單生效日後首 12 個月之後受孕並因而引起的相關併發症。- 身體檢查保障將於第二個保單年度起生效。
自選門診保障	不設等候期，保單生效後即可獲得保障。
自選牙科及視力保障	個別牙科項目於受保人連續受保於此保障六個月或以上，方可獲得賠償，詳情請參閱保障摘要。

冷靜期

若你並非完全滿意這份保單，你有權改變主意。你可於冷靜期（即保單文件交付予你後 21 日內）取消你的保單。請以書面方式提出取消保單之要求，並連同所有保單文件交回保柏。若你並無獲得任何賠償，將可獲全數退還已繳保費。

詳情請參閱隨迎新信件附上的「保單冷靜期通知」。

取消保單權益

你可在 30 日前以書面方式通知保柏要求取消你的保單。但請留意取消保單只適用於該保單年度內沒有就保單獲得任何賠償的情況。

This brochure is a product summary for reference only. You are strongly advised to read and understand the coverage, general exclusions, terms and conditions of the complete insurance policy.

We want to help you understand this plan before you enrol. Please read the information below carefully.

Waiting period

The waiting period for the certified plan and other optional benefits are as follows:

Certified Plan	<ul style="list-style-type: none">- No waiting period, coverage starts as soon as your policy is in effect.- Complications of pregnancy will be payable provided that such complication results from a conception which occurred 12 months after the policy effective date.- Medical Check-up Benefit is effective from the second policy year.
Optional Clinical Benefit	No waiting period, coverage starts as soon as your policy is in effect.
Optional Dental and Optical Benefit	Certain dental items will be payable after you have been continuously covered under this benefit for six months or more. Please refer to the Summary of Benefits for details.

Cooling-off period

If you're not fully satisfied with this plan, you have the right to change your mind. You can cancel your plan during the cooling-off period (i.e., within 21 days after the delivery of policy documents to you). You'll need to make your cancellation request in writing and return all your policy documents to Bupa. Then you'll receive a full refund of the premiums paid as long as no benefits have been paid.

Please refer to the "Notice on cooling-off period of your Policy" enclosed in your welcome pack for details.

Cancellation rights

You can cancel your policy at any time by giving 30 days' written notice to Bupa. However, cancellation is only available if no benefits have been paid during the relevant policy year.



重要資料 Important information

有關核保之資料披露

在投保申請期間，你應以最高誠信向保柏披露所有重要事實。如果你不確定某個事實是否重要，則應將其披露。若你未有披露或披露失實資料以致影響保柏的風險評估，將會影響你的保障權益，後果包括保單被取消、施加提升保費／不受保障項目或索償款項被調低。

自付費

自付費指每保單年度在保柏應付賠償金額前，必須由你承擔的合資格醫療費用。本計劃設有四項自付費選擇：HK\$0、HK\$12,000、HK\$40,000或HK\$80,000。自付費不適用於任何自選保障，如門診保障。若你使用醫療卡支付費用，你須於稍後向保柏付還自付費金額。若你沒有使用醫療卡，有關自付費金額將在保柏應賠償支付的費用中扣除。詳情請參閱保單及保障摘要。

索償步驟

任何索償須按照保柏所訂的索償程序進行。所有有關該索償的所須文件正本須於出院後或接受治療後90天內遞交，否則保柏將不能處理你的賠償，或會導致索償被拒。

保費調整

每名受保人的首期保費會根據年齡、健康狀況、保障選擇等因素而定。

你的保費並不會因曾作出索償而被調高。然而，續保保費或會因年齡遞增而相應調整。保柏可按醫療通脹、一般營運開支及因應醫療開支增加而作出的保障改動等因素，向所有同一類別保單調整標準保費率。在此情況下，同一類別保單指所有相同保障等級並具備相同條款及細則和保障表的環球優越自願醫保計劃（至臻）保單（即HK\$0自付費計劃、HK\$12,000自付費計劃等均為獨立的類別）。

Disclosure of information for underwriting

During the insurance application process, it's important that you act with utmost good faith and disclose all material facts to Bupa. If you are uncertain as to whether a fact is material, then it should be disclosed. If you fail to disclose or misrepresent a material fact which may impact Bupa's risk assessment, this will raise questions about your entitlement to insurance benefits. Consequences may include cancellation of your policy, application of an increased premium/exclusions or reduction of entitlement to claims payments.

Deductible

A deductible is the amount of eligible expenses that you must pay each policy year before Bupa will reimburse your eligible medical expenses. With this plan, you can choose from 4 deductible options: HK\$0, HK\$12,000, HK\$40,000, HK\$80,000. The deductible won't apply to any optional benefits such as Clinical Benefit. If you use your medical card to pay your expenses, you'll need to reimburse Bupa for the deductible amount afterwards. If you don't use your medical card, then Bupa will reimburse your eligible medical expenses after subtracting the deductible amount. Please refer to the Policy and Summary of Benefits for details.

Claims procedure

Any claim must be made following Bupa's claim procedures. All necessary original documents must be submitted within 90 days after discharge from hospital or completion of medical service. Otherwise, we won't be able to process your claim and it may be rejected.

Premium adjustment

Each insured person's initial premium is primarily determined based on factors such as age, health conditions and choice of coverage.

Any claims you make won't affect your premium at renewal. However, renewal premiums may still increase as you get older. Bupa may adjust the standard premium rate on an overall portfolio basis with reference to factors such as medical inflation, general operating expenses and revision of benefits to cover increasing medical expenses. In this case, the portfolio is all Global Prestige VHIS Plan (Signature) policies with the same level of coverage under the same terms and conditions and benefit schedule (i.e., one portfolio each for all HK\$0 Deductible, HK\$12,000 Deductible plans and so on).



重要資料 Important information

續保

本保單生效期為期一年並會自動續保及收取保費，除非你以書面提出取消保單。無論你在投保後的健康狀況有任何改變，保柏保證每年續保你的保障至終身，只要你符合保單條款及細則內列明的續保要求。

我們了解每個人人生階段有不同的保險需要，因此你可在每年續保時，靈活更改你的保障項目。若你選擇增加保障項目或減低自付費金額（如適用），你須填寫健康聲明作核保之用。核保須經保柏批准。請注意，你不可於保單生效日起或距離上次更改自付費後的24個月內申請減低自付費金額。

保柏可於每年續保時更改保單條款及保障，以符合自願醫保計劃認可產品的最新要求。所有改動將由醫務衛生局批核並於續保前以書面提前通知保單持有人。

繳付保費

本計劃為醫務衛生局認可的自願醫保計劃，就認可產品所繳付的保費可用作申請稅項扣減（不包括其他自選保障）。詳情請瀏覽 www.bupa.com.hk/taxfaq/。

你應按申請時所選擇的繳費方式年繳或月繳保費。只要符合續保的資格條件，保柏將於保單續保時從自動轉賬戶口或信用卡戶口自動扣取續保保費，除非我們接獲你的其他指示。

另外，保柏將給予60日繳交保費的寬限期，由保費到期日起計。你的保單於寬限期內仍然生效，惟在收到保費前，你將不會獲支付任何賠償，直至保費已獲繳清。若在寬限期屆滿後你仍未繳清保費，你的保單會於保費到期日起終止。

終止保單

你的保單將在以下情況時自動終止：

1. 在60日繳費寬限期屆滿時仍未繳交保費；
2. 受保人身故；或
3. 保柏不再獲《保險業條例》授權承保或繼續承保本保單。

Renewal

This policy will last for 1 year and will be renewed with premium payments collected automatically, unless you submit a written request to cancel your policy. Bupa guarantees that your cover can be renewed every year for life as long as you meet the requirements as stated in the renewal provisions of your policy terms and conditions, regardless of any changes in your health condition.

We understand that your healthcare needs may change throughout your life, so you have the flexibility to change your benefits every year upon renewal. If you wish to add any benefit(s) or reduce the deductible amount in future (if applicable), you will need to complete a health declaration form for medical underwriting purposes. Approval will be subject to underwriting. Please note that you can't apply to reduce your deductible amount within 24 months of the policy effective date or any previous change in deductible.

Bupa may revise the policy terms and benefits every year at renewal in order to comply with the latest VHIS requirements. All changes will be certified by the Health Bureau and are subject to prior written notice to the policy holder upon renewal.

Payment of premiums

This is a VHIS plan certified by the Health Bureau. The premiums paid under the certified plan are eligible for claiming tax deduction (excluding Optional Benefits). Please refer to www.bupa.com.hk/taxfaq/ for details.

You should pay your premium annually or monthly, based on the payment method selected during the application process. If you've fulfilled the eligibility criteria for renewal, we will charge your premium automatically at the next policy renewal, unless we have received other instructions from you.

In addition, you're allowed a 60-day grace period after the premium due date to complete the payment process. During that time, your policy will still be in effect but no benefits will be paid until the premium is paid. However, if you still haven't paid your premium when the grace period ends, your policy will be terminated from the premium due date.

Termination of your policy

Your policy will be terminated automatically in the following situations:

1. non-payment of premiums after a grace period of 60 days after the premium due date;
2. upon the death of the insured person; or
3. Bupa has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this policy.



重要資料 Important information

轉換至新的保險計劃

如你現時正受保於另一健康保障計劃並且取消該計劃以加入此計劃，你的保障範圍或會有所改變。例如，於你的前計劃下可獲賠償的已存在病症將不獲受保，除非該些病症已被披露並獲保柏接納。當你轉換保險公司、從團體計劃轉換到個人計劃或從非自願醫保計劃轉換到自願醫保計劃（反之亦然）時，請留意保障範圍的差異。

一般不保事項

1. 任何非醫療所需治療、治療程序、藥物、檢測或服務的費用。
2. 若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。惟若該等程序或服務是在註冊醫生建議下因而進行醫療所需的診斷，或無法以為日症病人提供醫療服務的方式下有效地進行的傷病治療，則不屬此項。
3. 在保單生效日前，因感染或出現人體免疫力缺乏病毒（“HIV”）及其相關的傷病所招致的費用。不論保單持有人或受保人在遞交投保申請文件（若本公司在本保單之條款及保障第一部分第8節提出要求，則包括相關必需資料的任何更新及改動）時是否知悉，若此傷病在保單生效日前已存在，本保單之條款及保障則不會賠償此傷病。若無法證明初次感染或出現此傷病的時間，則此傷病於保單生效日起計五（5）年內發病，將被推定為於保單生效日前已感染或出現；若在這五（5）年後發病，將被推定為於保單生效日後感染或出現。
惟本第3節的不保事項並不適用於因性侵犯、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，有關賠償將按本保單之條款及保障內其他條款處理。
4. 因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（HIV及其相關的傷病將按本一般不保事項第3節處理）的醫療服務費用。

Changing to a new insurance plan

If you're currently enrolled in a different health insurance plan and you cancel it to enrol in this plan, there may be changes to your coverage. For example, pre-existing conditions payable under your previous plan won't be covered unless they've been disclosed and accepted by Bupa. Please be mindful of the differences in coverage when you change insurers, from a group plan to an individual plan or from a non-VHIS plan to a VHIS plan (and vice versa).

General exclusions

1. Expenses incurred for treatments, procedures, medications, tests or services which are not medically necessary.
2. Expenses incurred 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, unless such procedure or service is recommended by a registered medical practitioner for medically necessary investigation or treatment of a disability which cannot be effectively performed in a setting for providing medical services to a day patient.
3. Expenses arising from human immunodeficiency virus (“HIV”) and its related disability, which is contracted or occurs before the policy effective date. Irrespective of whether it is known or unknown to the policy holder or the insured person at the time of submission of application, including any updates of and changes to such requisite information (if so requested by the company under Section 8 of Part 1 of the Policy Terms and Benefits) such disability shall be generally excluded from any coverage of the Policy Terms and Benefits if it exists before the policy effective date. If evidence of proof as to the time at which such disability is first contracted or occurs is not available, manifestation of such disability within the first five (5) years after the policy effective date shall be presumed to be contracted or occur before the policy effective date, while manifestation after such five (5) years shall be presumed to be contracted or occur after the policy effective date.
However, the exclusion under this entire Section 3 shall not apply where HIV and its related disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the Policy Terms and Benefits shall apply.
4. Expenses incurred for medical services as a result of disability arising from or consequential upon 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 (except for HIV and its related disability, where Section 3 of these General exclusions applies).



重要資料 Important information

5. 以下服務的收費 –
 - (a) 以美容或整容為目的的服務，惟受保人因意外而受傷，並於意外後一(1)年內接受的必要醫療服務則不屬此項；或
 - (b) 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，包括但不限於眼部屈光治療、角膜激光矯視手術 (LASIK)，以及任何相關的檢測、治療程序及服務。
 6. 預防性治療及預防性護理的費用，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、或僅因受保人及/或其家人過往病歷而進行的篩查或監測程序、頭髮重金屬元素分析、接種疫苗或健康補充品。為免存疑，本第6節並不適用於 –
 - (a) 為了避免因接受其他醫療服務引起的併發症而進行的治療、監測、檢查或治療程序；
 - (b) 移除癌前病變；
 - (c) 為預防過往傷病復發或其併發症的治療；及
 - (d) 任何受保於本保單之條款及保障補充文件二第2及3節身體檢查的保障。
 7. 牙科醫生進行的牙科治療及口腔頷面手術的費用，惟受保人因意外引致在住院期間接受的急症治療及手術則不屬此項。出院後的跟進牙科治療及口腔手術則不會獲得賠償。
 8. 除受保於本保單條款及保障補充文件一第2(e)節懷孕併發症的保障外，下列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；任何性別的結紮或變性；不育（包括體外受孕或任何其他人工受孕）；以及性機能失常，包括但不限於任何原因導致的陽萎、不舉或早泄。
 9. 購買屬耐用用品的醫療設備及儀器的費用，包括但不限於輪椅、床及家具、呼吸道壓力機及面罩、可攜式氧氣及氧氣治療儀器、血液透析機、運動設備、眼鏡、助聽器、特殊支架、輔助步行器具、非處方藥物、家居使用的空氣清新機或空調及供熱裝置。為免存疑，住院期間或日間手術當日所租用的醫療設備及儀器則不屬此項。
5. Any charges in respect of services for –
 - (a) beautification or cosmetic purposes, unless necessitated by injury caused by an accident and the insured person receives the medical services within one (1) year of the accident; or
 - (b) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
 6. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the insured person and/or his family members, hair mineral analysis (HMA), immunisation or health supplements. For the avoidance of doubt, this Section 6 does not apply to –
 - (a) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other medical services provided;
 - (b) removal of pre-malignant conditions;
 - (c) treatment for prevention of recurrence or complication of a previous disability; and
 - (d) any medical check-up benefits payable under Sections 2 and 3 of Supplement 2 of the Policy Terms and Benefits.
 7. Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident. Follow-up dental treatment or oral surgery after discharge from hospital shall not be covered.
 8. Except for the complications of pregnancy benefit payable under Section 2(e) of Supplement 1 of the Policy Terms and Benefits, expenses incurred for 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; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
 9. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during confinement or on the day of the day case procedure.



重要資料 Important information

10. 除受保於本保單之條款及保障補充文件一第2(h)節住院或指定治療後由註冊中醫師提供之診症或針灸的保障外，傳統中醫治療的費用，包括但不限於中草藥治療、跌打、針灸、穴位按摩及推拿，以及另類治療，包括但不限於催眠治療、氣功、按摩治療、香薰治療、自然療法、水療法、順勢療法及其他類似的治療。
11. 按接受治療、治療程序、檢測或服務所在地的普遍標準（或尚未經當地認可機構批准）界定為實驗性或未經證實醫療成效的醫療技術或治療程序的費用。
12. 受保人年屆八（8）歲前發病或確診的先天性疾病所招致的醫療服務費用。
13. 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。
14. 因戰爭（不論宣戰與否）、內戰、侵略、外敵行動、敵對行動、叛亂、革命、起義、或軍事政變或奪權事故所招致的治療費用。

醫療所需

保柏只會根據「醫療所需」和「合理及慣常」的原則，為受保人所需支付的費用及／或開支作出賠償。

「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：

- 需要註冊醫生的專業知識或轉介；
- 符合該傷病的診斷及治療所需；
- 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，而非主要為對受保人、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；
- 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
- 按主診註冊醫生審慎的專業判斷，以最適當的水平向受保人安全及有效地提供。

評估該次住院是否醫療所需的考慮因素包括：急症治療、全身麻醉、醫院專用設備的必要性等。如該次住院被視為非醫療所需，保障賠償將會作出調整。

10. Except for the consultation or acupuncture by a Registered Chinese Medicine Practitioner after Confinement or specific treatments benefit payable under Section 2(h) of Supplement 1 of the Policy Terms and Benefits, expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments.
11. Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
12. Expenses incurred for medical services provided as a result of congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of eight (8) years.
13. Eligible expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
14. Expenses incurred for treatment for disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

Medically necessary

We only cover the expenses of the insured person when they are medically necessary and reasonable and customary.

“Medically necessary” means the need for a medical service for the purpose of investigating or treating the relevant disability in accordance with the generally accepted standards of medical practice. This service must:

- require the expertise of, or be referred by, a registered medical practitioner;
- be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
- be in accordance with standards of good and prudent medical practice, and not be primarily for the convenience or the comfort of the insured person, his/her family, caretaker or the attending registered medical practitioner;
- be provided 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
- be at the most appropriate level which, in the professional judgment of the attending registered medical practitioner, can be safely and effectively provided to the insured person.

Additional factors will be considered to assess whether a hospitalisation is medically necessary, e.g. the need for emergency treatment, general anaesthesia, specific equipment in hospital, etc. If a hospitalisation is considered not medically necessary, benefits payable will be adjusted.

重要資料 Important information

合理及慣常

「合理及慣常」是指就醫療服務的收費而言，對情況類似的人士（例如同性別及相近年齡），就類似傷病提供類似治療、服務或物料時，不超過當地相關醫療服務供應者收取的一般收費範圍的水平。合理及慣常的收費水平由我們合理及絕對真誠地決定，在任何情況下，此收費不得高於實際收費。

保柏必須參照以下資料（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。

器官移植手術的特別條款

器官移植手術的賠償將因應手術所進行的地區而有所不同。如手術於香港以外地區進行，你應取得保柏的預先批准，以享有本計劃下的最高賠償。

香港	香港以外地區
無須預先批准，賠償以保障摘要上所示的每年保障限額為限： 每保單年度 HK\$40,000,000	必須取得保柏的預先批准，賠償以保障摘要上所示的金額為限： 每保單年度 HK\$2,400,000

如你於香港以外進行器官移植手術而未有取得必須的預先批准，保障將根據自願醫保標準計劃條款及保障作出賠償。

Reasonable and customary

In relation to a charge for medical services, “reasonable and customary” means a level which does not exceed the general range of charges being charged by relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar age, for a similar disability, as reasonably determined by Bupa in utmost good faith. The reasonable and customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is reasonable and customary, we will make reference to the following (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 relevant sources in the locality where the treatments, services or supplies are provided.

Special conditions for organ transplant surgery

For organ transplant surgery, your benefits will be paid differently depending on the location of the surgery. If your surgery is performed outside Hong Kong, you should get pre-approval from Bupa to maximise your cover.

In Hong Kong	In other areas outside Hong Kong
No pre-approval required, with coverage up to the annual benefit limit in the Summary of Benefits: HK\$40,000,000 per policy year	Pre-approval from Bupa is required, with coverage up to the amount shown in the Summary of Benefits: HK\$2,400,000 per policy year

If you don't get the necessary pre-approval and receive surgery outside Hong Kong, the VHIS Standard Plan Terms and Benefits will apply.



重要資料 Important information

選擇病房級別及自願升級的調整

不論你在住院時入住任何病房級別，合資格醫療費用均可獲得賠償。然而，如入住高於標準私家房以上的病房（包括總統套房、貴賓房或豪華房），所獲的賠償將會按下述作出調整：

$$\frac{\text{住院醫院所收取標準私家房的房間費用範圍中最高的每日病房收費}}{\text{受保人在級別高於標準私家房的病房住院期間，實際的每日病房收費}} \times 100\%$$

惟因以下原因入住較高級別的病房則除外：

- 在接受急症治療的情況下醫院指定病房級別或較之為低的病房級別床位短缺；
- 需要住院隔離導致需要入住特定級別的病房；或
- 任何其他不涉及受保人個人對住院病房級別偏好的原因。

就美國之限制

若受保人於美國接受任何非急症治療，並於該治療之前的連續十二(12)個月內在美國逗留之時間（不論一次或多次逗留）累積達一百八十三(183)日或以上（包括到達及離境日子），於本保單條款及保障第六部分第 3(a)至(l)節及補充文件一第2節(a)、(b)、(d)至(k)節就非急症治療所招致的合資格費用及／或其他費用，須在計算應付的總保障金額時減少至百分之五十(50%)。詳情請參閱補充文件五。

本計劃由保柏（亞洲）有限公司承保。保柏（亞洲）有限公司已獲保險業監管局授權於香港特別行政區經營一般保險，並受其監管。

本冊子乃資料摘要，僅供參考之用。有關計劃之詳盡保障範圍、一般不保事項、條款及細則，請參閱保單。

This plan is insured by Bupa (Asia) Limited. Bupa (Asia) Limited is authorised and regulated by the Insurance Authority in Hong Kong to carry out general insurance business in the HKSAR.

This brochure is a product summary for reference only. Please refer to the Policy for detailed coverage, general exclusions, terms and conditions.

Choice of ward class and adjustment for voluntary upgrade

Your eligible expenses will be covered regardless of your confined ward class. However, if you are confined in room of class higher than standard private room (including suite, VIP or deluxe room), your coverage will be adjusted as follows:

$$\frac{\text{The highest daily room charge of a range of standard private room at the confined hospital}}{\text{The actual daily room charge for each such day of insured person's confinement at a room of class higher than standard private room}} \times 100\%$$

The adjustments above will apply except when the upgrade in ward class is due to:

- unavailability of a standard private room or lower ward class due to room shortage at the hospital for emergency treatment;
- confinement in isolation that requires a specific ward class; or
- any other reason not involving the insured person's own individual preference for the confined ward class.

Restriction on the United States

If the Insured Person has stayed in the United States, for a period or periods of aggregating one hundred and eighty-three (183) days or more (including the date of arrival and departure) within the twelve (12) consecutive months immediately prior to receiving non-Emergency Treatment, any Eligible Expenses and/or other expenses incurred for such non-Emergency Treatment payable under Sections 3(a) to (l) of Part 6 of the Terms and Benefits and Sections 2(a), (b), (d) – (k) of Supplement 1 shall be reduced to fifty percent (50%) in the calculation of the total benefit amount payable. Please refer to Supplement 5 for details.



自選保障² Optional benefits²

本計劃提供自選「門診保障」和「牙科及視力保障」。

This plan offers an optional Clinical Benefit and the Dental and Optical Benefit.



門診保障 Clinical Benefit

門診保障特設精神科相關治療及臨床心理輔導保障，而其他項目，如普通科醫生、專科醫生、診斷成像及化驗等均可獲賠償。

投保門診保障更可享受視像診症服務，安坐家中讓醫生為你進行視像診症。詳情請瀏覽 www.bupa.com.hk/vc。受條款及細則約束。

Our Clinical Benefit is specially designed to include coverage for psychiatric-related treatments and psychological counselling, as well as general practitioners, specialists, diagnostic imaging and laboratory tests and more.

You can enjoy video consultation services if you've enrolled in Clinical Benefit. Consult doctors through a video call comfortably and safely at home. Visit www.bupa.com.hk/vc for details. Terms and conditions apply.



牙科及視力保障 Dental and Optical Benefit

牙科保障包括洗牙、補牙及脫牙、牙痛急症、牙冠及牙橋、牙齒矯正等牙科治療。

視力保障涵蓋由註冊西醫或註冊視光師進行之診症費、眼科檢查或檢驗，以及矯正視力的隱形眼鏡或一副眼鏡（每保單年度）。

Our Dental Benefit covers dental expenses such as scaling and polishing, fillings and extractions, accident emergency treatment, crowns and bridges, orthodontic treatment and more.

Our Optical Benefit covers consultations, eye checks or examinations performed by a registered medical practitioner or registered optometrist, as well as contact lenses or one pair of glasses for optical correction per policy year.

² 自選保障（門診、牙科及視力保障）及免費保障及服務並不屬自願醫保認可產品的一部分，有關之保費不可用作申請稅項扣減，亦不適用於家庭折扣。

² Optional benefits (Clinical, Dental and Optical Benefit) and free benefits and services are not part of the VHIS certified plan. The premiums paid are not eligible for claiming tax deduction and any family discounts.



專屬健康大使服務 HealthPro Concierge Service

保柏在本港首創的「專屬健康大使服務」，為你提供個人化的健康管理支援和協助，減低你的憂慮。你可隨時致電 24 小時健康專線查詢健康問題。如入住本港私家醫院，保柏的健康顧問會親身在治療及康復期間全程提供協助。

The first of its kind in Hong Kong, Bupa's HealthPro Concierge Service offers personalised healthcare support and guidance to minimise your worries. You'll have access to round-the-clock healthcare assistance with our 24/7 Healthline. If you're admitted to a local private hospital, you'll have a personal Care Manager by your side through treatment and recovery.



當你遇上關於健康的問題時，需要協助

你可致電保柏的 24 小時健康專線獲得廣東話、英文及普通話的協助。此專線由保柏的健康管理團隊 24 小時接聽¹²，助你了解病徵、診斷及治療方案等。保柏的專業團隊亦可為你提供嬰幼兒照顧、樂齡、減壓及養生等保健資訊。

When you need healthcare assistance

Call Bupa's 24/7 Healthline for support in English, Cantonese and Mandarin. A team of qualified nurses and health management professionals are available 24 hours a day¹² to discuss symptoms, treatment options and more. Bupa's professionals can also provide preventive health information at any time, including tips on caring for babies and young children, aging, stress relief and wellness.



當你患病時

- 保柏可根據你的指定情況或需要為你提供診所及醫院名單以供參考，更可為你預約選定的診症及治療服務。
- 你可獲得醫療專家為你提供專業的第三意見，助你釋除疑慮。
- 保柏的健康顧問會全程跟進你的狀況，讓你了解治療計劃、協助索償及安排復康護理等。

When you're unwell

- Receive a list of clinics and hospitals based on your specific condition or needs for your reference, as well as set up appointments for your selected consultations and treatments.
- Get a second opinion from a panel of medical specialists to clarify any doubts.
- A personal Care Manager will help you throughout your illness, from overseeing your treatment to managing claims and arranging rehabilitation care.



當你有慢性疾病時

保柏會為你提供生活習慣建議及支援，助你控制病情。

When you have a chronic condition

You'll receive personalised lifestyle coaching and support to help you manage your condition.



當身處海外遇上健康問題時，需要支援

- 當你計劃前往海外治療或於外遊時需要非緊急醫護服務，保柏的專業團隊會為你提供有關協助。
- 若你居住中國內地及計劃來港接受醫療服務，可致電 24 小時免費國語熱線，保柏會為你預約醫療服務及安排往返交通。

When you need overseas healthcare support

- Get help to make arrangements for treatment outside of Hong Kong or non-emergency medical services while travelling.
- Call our 24/7 toll-free Mandarin hotline from Mainland China for assistance with medical appointments and travel logistics in Hong Kong.

使用專屬健康大使服務並不需額外費用。若建議的治療或服務並不在你的「環球優越自願醫保計劃」（至臻）之賠償範圍內，你便須支付有關費用。

The use of HealthPro Concierge Service is free of charge. If the treatment or services recommended aren't covered under your Global Prestige VHIS Plan (Signature), you'll need to pay the fees.



全方位癌症支援服務 助你重踏健康人生 Comprehensive cancer care support: helping you embark on a healthier life

當面對癌症治療的挑戰時，保柏的癌症支援服務將成為你的最強後盾。我們結合不同的專業醫療團隊，為你提供全面的癌症治療、支援及關懷服務。主要服務包括：
When facing the challenges of cancer treatment, Bupa Cancer Care is your strongest ally. Bringing together a connected team approach, we offer you an integrated cancer care support system. Our main services include:



護士專線
Dedicated nurse hotline



個人化治療計劃
Tailored treatment plan



特快預約服務
Fast-tracked booking



綜合健康支援
Allied health support

我們全程積極跟進並將治療信息透明化，全心全意陪伴你走過抗癌之路的每一步。

By providing transparent information and proactive follow-ups, we are devoted to walk along with you at every step of your cancer care journey.

掃描二維碼了解更多

Scan the QR code to learn more





如何享用此服務 How you could benefit from this service



一名49歲男士
經理
A man aged 49
Manager

「我發現如廁時大便帶血已有一段時間，最初以為只是痔瘡發作，沒有加以理會。最近一次，我開始發覺身體可能出現問題，於是致電保柏的24小時健康專線尋求專業意見。保柏的健康管理團隊立即為我約見醫生進行檢查。

雖然我未達政府大腸癌篩查計劃的受助年齡，幸好我有一份保柏的醫療保險計劃，並有專屬的保柏健康顧問為我安排約見專科醫生並進行大腸鏡檢查。

當檢查結果證實我患上大腸癌時，我很擔心，也自責沒有及早檢查。醫生向我建議了不同的治療方案，而我的保柏健康顧問更為我提供專業意見，耐心地為我詳細解釋所有治療方案、解答我的疑問，讓我可以選擇最適合我的治療方法。

在我開始接受治療後，我的保柏健康顧問及其團隊繼續全程幫助我，替我跟進索償、提供飲食建議等。由於我有高血壓的問題，他更為我安排接受「慢性疾病管理計劃」的服務。

現時我已日漸康復，雖然血壓有時仍然稍高。我很感謝一班醫生和護士的悉心照料，更衷心感激保柏沿途一直陪伴著我。」

“I’d noticed some blood in my stool for some time, but I thought it might just be haemorrhoids. Finally, I decided that something could be wrong and called Bupa’s 24-hour Healthline. They helped me to make a doctor’s appointment to get my symptoms checked as soon as possible.

At my age, I didn’t qualify for the government’s colorectal cancer screening programme. Luckily, I had Bupa insurance and a designated Bupa Care Manager. She helped arrange a specialist appointment, where I was prescribed a colonoscopy.

When the colonoscopy results showed that I had colorectal cancer, I was worried. I was also angry at myself for not seeking treatment sooner. Still, my doctor gave me a few treatment options to consider. I was so thankful I could turn to my Bupa Care Manager for advice. She patiently explained the details and answered all my questions so I could make the right decision.

My Bupa Care Manager and her team continued to help me once I started treatment—from assistance with claim forms to nutrition advice and more. In addition, she arranged for me to receive support from the Chronic Conditions Programme, as I also have high blood pressure.

Now my cancer is in remission, though my blood pressure is still a bit high. I’m so grateful to the doctors and nurses who took care of me, but also to Bupa for being there every step of the way.”

免費保障及服務² Free benefits and services²

為感謝你信任保柏，我們特別為你提供保費折扣優惠及一系列免費保障及服務。

We're grateful that you've put your trust in Bupa. We promise to offer you special discounts and a series of free benefits and services.



家庭折扣¹³ Family discounts¹³

若你與家人一同投保，可按人數享有保費折扣：

- 兩名合資格家庭成員一同投保：9折
- 三名或以上合資格家庭成員一同投保：85折

You'll enjoy a family discount when enrolling with your family members:

- 2 eligible family members enrol together: 10% discount
- 3 or more eligible family members enrol together: 15% discount



免費保柏國際援助計劃¹⁴ Free Bupa Worldwide Assistance Programme¹⁴

凡投保環球優越自願醫保計劃（至臻），均可獲贈「免費保柏國際援助計劃」。當你於海外及國內需要醫療支援時，此計劃可為你提供協助。

With the Global Prestige VHIS Plan (Signature), you'll also receive our free worldwide assistance programme. It provides medical support and assistance if you need help while overseas or in mainland China.



24小時情緒解碼熱線¹⁵ 24-hour Mental Health Service Hotline¹⁵

除了身體健康，我們亦關注你的情緒健康。此服務由我們特選的服務供應商及其經驗豐富的合資格輔導人員及臨床心理學家團隊提供。你可隨時致電熱線以獲得輔導人員的免費情緒支援及個人化輔導服務。如有需要，輔導人員更可為你安排接受臨床心理學家的面談輔導服務。請放心，你所提供的資料均會保密。

Besides offering coverage for your physical health, we also care about your mental health. This service is provided by our selected service providers and their team of qualified and experienced counsellors and clinical psychologists. Through the hotline, counsellors offer free emotional support and personalised advice. They can also arrange face-to-face counselling services with a clinical psychologist if needed. Rest assured that all information provided will be kept in strict confidence.

¹³ 家庭折扣只適用於認可產品之標準保費及其附加保費，不適用於環球優越自願醫保計劃下其他自選保障的保費。合資格家庭成員須全部同時受保於環球優越自願醫保計劃，方可獲得折扣。

¹⁴ 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障，請透過書面通知保柏。

¹⁵ 24小時情緒解碼熱線適用於18歲或以上的受保人，18歲以下的受保人需於保單持有人或監護人陪同下使用此服務。受條款及細則約束，詳情請參閱保單。

¹³ Family discounts will be applied to the standard premium and premium loading of the certified plan only, but not any other optional benefits under the Global Prestige VHIS Plan. The discount will be valid as long as the eligible family members are all covered under a Global Prestige VHIS Plan at the same time.

¹⁴ The Free Bupa Worldwide Assistance Programme is not part of the VHIS certified plan. Please inform Bupa in writing if you don't want to receive this free benefit.

¹⁵ The 24-hour Mental Health Service Hotline is applicable to insured persons aged 18 or above. Insured persons aged below 18 must be accompanied by the policy holder or guardian to use this service. Terms and conditions apply. Please refer to the Policy for details.



網上管理你的保單 Manage your policy online

你可隨時隨地透過保柏的一站式客戶服務網站及手機應用程式 **myBupa** 管理你的保單、查詢索償狀態，甚至領取會員特別優惠。

Bupa's one-stop online customer service portal and smartphone app **myBupa** provides quick and easy access to your policy whenever you need it. Manage your policy and claims on the go or redeem special discounts for Bupa customers.



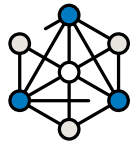
會籍文件 e-Documents

查閱及下載重要的會籍文件，包括保單及保障資料、會員指引等。
View and download important documents including your Policy and Benefit Information, membership guide and more.



網上索償 Claims assistance

網上提交索償、查詢索償狀況，或查閱差額通知書。
Submit claims, track your claims status or view shortfall invoices.



搜尋網絡醫生 Network doctors finder

透過地點或專科分類，搜尋香港網絡醫生及診所資料。
Search for network doctors and clinics around Hong Kong by location or specialty.



會籍資料 Your profile

網上更新你的聯絡資料。
Update your contact information at any time.



尊享優惠 Exclusive offers

查閱及領取各式服務及產品的特別優惠。
View and redeem special offers on a variety of services and products.



Blua Health 助你贏健康賺獎賞

Manage your health and earn rewards in Blua Health

健康是你最寶貴的財富，保持健康的身心，是對自己及家人最大的承諾。**Blua Health** 應用程式透過 AI 科技助你管理健康，達成目標更可賺積分換禮品，輕鬆收獲健康！你更可利用「診症預約」及「配藥易」功能以獲得更全面的健康方案，滿足你日常的健康需求和長期的健康目標，助你更有效地管理健康！

Staying healthy is the greatest commitment you can make to yourself and your family. **Blua Health** helps you manage your health with AI powered health-tracking technology. You can also earn points to redeem rewards for healthy living. Keep moving to earn more! By using the “eBooking” and “ePharmacy” features, you will receive a comprehensive health solution to support both your everyday health needs and long-term wellness goals, helping you manage your health more efficiently!

	免費使用多項健康互動功能 Enjoy a variety of free health app features		30秒AI評估你的身心健康 Assess your health in 30 seconds with AI technology		一站式預約多項醫療服務 One-stop booking for multiple medical services
	與AI教練隨時隨地一起健身 Exercise with AI coach anytime, anywhere		賺取積分以換領健康獎賞 Earn points to redeem rewards for healthy living		簡單幾步即可訂購處方藥 Order prescription medications in just a few steps

立即下載 **Blua Health**，未來健康由你掌握！

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Blua Health 由保柏集團成員、香港註冊公司 Horizon Health and Care Limited 提供、發佈及營運。

Blua Health 並不是醫療設備，也不會提供個性化的醫療建議。該應用程式的內容並不能代替專業醫護人員的醫療建議、診斷或治療。如有任何關於醫療狀況的問題，請立即尋求醫生或其他合資格醫療服務提供者的建議。

Blua Health is offered, distributed and operated by Horizon Health and Care Limited, a company registered in Hong Kong under the Bupa Group.

Blua Health is not a medical device, and it does not provide personalised medical advice. The contents of the mobile app cannot replace the medical advice, diagnosis and treatment of medical professionals. If you have any question on your medical condition, please seek advice immediately from doctor or other qualified medical service provider.



保柏 — 你的明智之選 Why choose Bupa

保柏是國際醫療保健專家，我們致力為客戶提供多元化的醫療保險計劃，助你應付不同人生階段的需要。

We're a global healthcare specialist providing a wide range of comprehensive and flexible insurance plans to suit every life stage and lifestyle.



信譽卓著的醫療保健專家 Our reputation and expertise in healthcare

我們於香港及世界各地提供醫療保險及醫療保健服務

- 於全球服務超過5,000萬客戶
- 保柏集團自1947年起為大眾服務，並於1976年設立香港分部
- 作為保柏集團的一份子，卓健醫療透過逾1,600個服務點，包括旗下卓健醫療中心，連同聯營診所，為市民及社區服務

Providing healthcare funding and provision for people in Hong Kong and beyond

- Globally we serve over 50 million customers
- Bupa Group has been serving since 1947 and established our presence in Hong Kong in 1976
- As part of Bupa, Quality HealthCare provides primary care services through a network of over 1,600 service points in Hong Kong, including Quality HealthCare Medical Centres and affiliated clinics



賠償服務 Claim service

我們承諾為你提供快捷簡便的索償服務

- 超過98%之門診索償和住院索償於5個工作天完成賠償處理
- 網上索償服務
- 當賠償辦妥後，你將收到通知

Promising you a quick and easy claims process

- Over 98% of clinical claims and hospital claims are settled within 5 working days
- Submit claims online
- Notifications when your claim has been processed



24小時支援 Our round-the-clock support

全面支援，讓你隨時隨地管理保單及掌握健康

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Allowing you to manage your policy and your health at your convenience via

- 24-hour telephone support
- Online customer service portal myBupa



計劃選項及概要
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and overview

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VHIS Plan details

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Important
information

自選保障
Optional benefits

專屬健康大使服務
HealthPro
Concierge Service

立即投保！ Enrol now!

投保「環球優越自願醫保計劃」(至臻)，為你未來的健康做好保障。

We hope you'll choose our Global Prestige VHIS Plan (Signature) for continuous coverage throughout your lifetime.



致電投保
Phone enrolment

致電保柏的健康管理顧問或聯絡你的保險顧問投保。

Call Bupa's Health Management Consultant or contact your insurance consultant for enrolment.



網上報價
Online quotation

瀏覽我們的網站 <https://www.bupa.com.hk/medical-insurance/global-prestige/>。

Visit our website at <https://www.bupa.com.hk/medical-insurance/global-prestige/>.



常見問題

Frequently asked questions

1. 如何使用「保柏尊貴寶卡」以享用住院免找數服務？

若你須於香港指定的私家醫院接受治療及手術，保柏會直接向醫院支付你的合資格醫療費用，每次住院以信用額港幣100萬元為限。你須先自行繳付超過信用額或賠償限額的醫療費用，然後向保柏申請索償。如有任何差額和自付費，你須向保柏退還有關費用。

你可瀏覽 <https://www.bupa.com.hk/medical-insurance/global-prestige/>，查看指定的香港私家醫院名單，此名單可能會不時更改。

如在海外接受治療，你只須預先致電保柏，便可享受此服務。

你須符合保單內之所有條件，方可享用免找數服務。詳情請參閱保單及會員指引。

2. 如我需要住院，哪些情況下不能使用「保柏尊貴寶卡」？

你的「保柏尊貴寶卡」不適用於認可產品之保障摘要上1) 基本保障下所列的項目 (k) 入院前或出院後／日間手術前後的門診護理及項目 (l) 精神科治療，以及 2) 額外保障下所列的項目 (c)、(e) - (j)。請先支付醫療費用，然後再向保柏申請索償。

3. 如何申請索償？

使用「保柏尊貴寶卡」可享用住院免找數服務而無須申請初步保障審核或索償。如你未能使用「保柏尊貴寶卡」，你需於接受治療後90日內向保柏申請索償。你可選擇填妥索償申請表連同所有所需文件交回保柏，或使用保柏客戶服務網站的網上索償服務。請參閱會員指引以了解有關詳情及部分受保項目所要求的預先批准程序。

1. How do I use my Bupa Gold Card for cashless service in hospital?

If you receive treatment or undergo procedures at designated private hospitals in Hong Kong, Bupa will pay your eligible medical expenses to the hospital directly up to the credit limit of HK\$1 million per confinement. You'll need to pay any medical expenses exceeding the credit limit or benefit limit and submit a claim to Bupa for reimbursement. You'll need to reimburse Bupa for the selected deductible and shortfall, if any.

For the list of designated private hospitals in Hong Kong, please visit <https://www.bupa.com.hk/medical-insurance/global-prestige/>. This list is subject to change from time to time.

For overseas hospitalisation, you can enjoy cashless service by calling Bupa to make the necessary arrangements.

You must fulfill all the conditions stated in your Policy to use the Bupa Gold Card for cashless service. Please refer to the Policy and membership guide for more details.

2. If I'm admitted to hospital, are there any situations when I can't use my Bupa Gold Card?

Your Bupa Gold Card can't be used for item (k) pre- and post-Confinement/Day Case Procedure outpatient care and item (l) psychiatric treatments listed under 1) Basic Benefits and items (c), (e) - (j) listed under 2) Enhanced Benefits in the Summary of Benefits for the Certified Plan. Please pay your expenses first and submit a claim to Bupa afterwards.

3. How do I make a claim?

You don't need to get pre-authorisation or make a claim if you use your Bupa Gold Card for cashless hospitalisation. In the event that you can't use the Bupa Gold Card, you'll need to submit a claim to Bupa within 90 days of receiving treatment. You can either submit a completed claim form and all required documents to Bupa, or use the eClaims service on our online customer service portal. Please refer to the membership guide for more details and the required pre-approval procedures for some benefit items.



常見問題

Frequently asked questions

4. 若我入住了標準私家房以外的病房，賠償會怎樣計算？

你可入住標準私家房或以下級別的病房以享受本計劃的完整保障。如你自願地入住了高於標準私家房級別的病房，保柏會按調整值比率賠償你的合資格費用。詳情請參閱保單。

5. 是否設有最低住院時數？日症及門診手術可獲得賠償嗎？

此計劃沒有最低住院時數限制。而日症及門診手術亦可獲得賠償，此類治療包括打石膏、傷口縫合、電療、化療等。

6. 投保此計劃後，我可怎樣享用稅項扣減？

每名投保合資格醫療保障計劃（獲醫務衛生局認可之自願醫保計劃）的香港納稅人可就合資格保費扣稅。每年可用作申請稅項扣減的保費上限為每名受保人港幣8,000元。受保人與保單持有人之關係須列載於稅務局的《稅務條例》（第112章）中「指明親屬」列表上。

保費須於課稅年度內繳付方符合該課稅年度的申請稅項扣減資格。稅項扣減適用於由2019年4月1日起生效的認可產品，不包括其他自選保障。

每名納稅人可用以申請稅項扣減的計劃及／或受保人數目均不設上限。為同居伴侶、孫子女、同居伴侶之父母／子女購買的保單並不符合稅項扣減的資格。

為幫助你申請稅項扣減，你將於每年4月底前收到保柏發出的保費支付紀錄。如對稅項扣減有任何疑問，請聯絡稅務局或參考網頁 www.bupa.com.hk/taxfaq/。

4. What happens if I'm hospitalised at a different ward class than standard private room?

You can enjoy full benefit coverage for hospitalisation at standard private room level or lower. If you're voluntarily hospitalised at a higher ward class, Bupa will only reimburse a percentage of your eligible expenses based on an adjustment factor. Please refer to the Policy for details.

5. Is there any minimum length of hospital stay? Are day case surgeries and clinical procedures also covered?

No, there's no minimum number of hours that you must stay in hospital while receiving treatment. Day case surgeries and clinical procedures are covered as well. These include treatments such as plaster casts, wound sutures, radiotherapy and chemotherapy.

6. How can I receive a tax deduction for purchasing this plan?

Any Hong Kong taxpayer who has purchased an eligible health insurance plan (certified by the Health Bureau as VHIS) can claim a tax deduction on qualifying premiums up to HK\$8,000 per insured person each year. The relationship between the taxpayer and the insured person must be included in the list of "specified relatives" in Inland Revenue Ordinance (Cap. 112).

You can claim the deduction in the same tax year when the premium was paid. The deduction is available for certified plans, but not any other optional benefits, with policy effective date of 1 April 2019 or later.

There is no limit on the number of insured persons and/or policies claimed by each taxpayer. Policies purchased for a domestic partner, grandchild(ren) or domestic partner's parents/children are not eligible for tax deduction.

To help with the tax deduction process, you'll receive Premium payment record from Bupa by the end of April each year. If you have any questions, please contact the Inland Revenue Department or visit our website at www.bupa.com.hk/taxfaq/.



常見問題

Frequently asked questions

7. 「環球優越自願醫保計劃」(至臻) 與「保柏自願醫保計劃」(標準計劃) 有何分別?

特點	「環球優越自願醫保計劃」(至臻)	保柏自願醫保計劃
每年保障限額	HK\$40,000,000	HK\$420,000
自付費	HK\$0 / HK\$12,000 / HK\$40,000 / HK\$80,000	不設自付費選擇
基本保障 (如病房及膳食、 雜項開支、 主診醫生巡房費等)	全數賠償	以個別項目的賠償限額為限
額外保障	有 (如私家看護費、陪床費、 急症意外門診保障等)	不適用
身體檢查保障	有	不適用
免費保障	保柏尊貴寶卡及住院免找數、專屬 健康大使服務、24小時情緒解碼熱線、 保柏國際援助計劃	不適用
其他自選保障	門診保障、牙科及視力保障	不適用

詳情請參閱個別計劃之保單。

8. 此計劃會賠償就醫療費用而徵收的增值稅和商品及服務稅嗎?

會。根據保單條款及保障，就本計劃涵蓋的醫療費用及開支而徵收的增值稅和商品及服務稅，將作為合資格費用予以賠償。請留意，增值稅和商品及服務稅並不適用於香港產生的醫療費用。然而，若你在其他地方尋求治療，這些稅務費用或會適用。

7. What're the differences between Global Prestige VHIS Plan (Signature) and Bupa MyBasic VHIS Plan (standard plan)?

Features	Global Prestige VHIS Plan (Signature)	Bupa MyBasic VHIS Plan
Annual Benefit Limit	HK\$40,000,000	HK\$420,000
Deductible	HK\$0 / HK\$12,000 / HK\$40,000 / HK\$80,000	No deductible options
Basic Benefits (e.g. Room and board, Miscellaneous charges, Attending doctor's visit, etc.)	Full cover	Subject to item limits
Enhanced Benefits	Yes (e.g. Private nursing, Companion bed, Emergency outpatient treatment for Accidents, etc.)	Not applicable
Medical Check-up Benefit	Yes	Not applicable
Free Benefits	Bupa Gold Card and cashless hospitalisation, HealthPro Concierge Service, 24-hour Mental Health Service Hotline, Bupa Worldwide Assistance Programme	Not applicable
Other Optional Benefits	Clinical Benefit, Dental and Optical Benefit	Not applicable

Please refer to the Policy of the respective plans for details.

8. Does this plan include coverage for value-added tax (VAT) and goods and services tax (GST) levied on medical expenses?

Yes. VAT and GST levied on medical fees and expenses that are covered under this plan will also be paid as eligible expenses according to the policy terms and benefits. Please note that VAT and GST are not applied to medical expenses incurred in Hong Kong. However, they may be applicable if you seek treatment elsewhere.

保柏（亞洲）有限公司
Bupa (Asia) Limited

香港九龍觀塘
海濱道 77 號
海濱匯第 2 座 6 樓
6/F, Tower 2,
The Quayside,
77 Hoi Bun Road,
Kwun Tong, Kowloon,
Hong Kong

電話 Telephone: (852) 2517 5175
傳真 Facsimile: (852) 2548 1848
www.bupa.com.hk



Bupa Hong Kong



環球優越自願醫保計劃(至臻) Global Prestige VHIS Plan (Signature)



保障摘要 Summary of Benefits

2025年3月1日版本 1 March 2025 Edition

環球優越自願醫保計劃(至臻)提供以下選擇(括號內數字為自願醫保認可產品編號):

Global Prestige VHIS Plan (Signature) offers the options below (VHIS certification numbers in brackets):

- \$0 自付費 \$0 Deductible (F00035-05-000-01)
- \$12,000 自付費 \$12,000 Deductible (F00035-06-000-01)
- \$40,000 自付費 \$40,000 Deductible (F00035-07-000-01)
- \$80,000 自付費 \$80,000 Deductible (F00035-08-000-01)

A 認可產品之保障摘要 Summary of Benefits for the Certified Plan

保障地域範圍 Area of cover	全球 ^{①②③} Worldwide ^{①②③}
保障病房級別 Covered ward class	標準私家房 [®] Standard Private Room [®]
保障限額 Benefit limits	於香港以外 Outside Hong Kong 每保單年度 \$2,400,000 per Policy Year (必須取得本公司之預先批准) (Subject to pre-approval by the Company)
	香港 Hong Kong 受每年保障限額所規限 Subject to Annual Benefit Limit
	1) 基本保障及 2) 額外保障下所有保障項目的每年保障限額 Annual Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits 每保單年度 \$40,000,000 per Policy Year
1) 基本保障及 2) 額外保障下所有保障項目的終身保障限額 Lifetime Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits 無 Nil	
1) 基本保障及 2) 額外保障下所有保障項目之自付費 Deductible for all benefit items under 1) Basic Benefits and 2) Enhanced Benefits 每保單年度 \$0 / \$12,000 / \$40,000 / \$80,000 per Policy Year	
癌症 ^{④⑤} 之全額賠償 - 豁免自付費 First-dollar coverage - Deductible waived for Cancer ^{④⑤}	若受保人 - • 患上癌症 ^{④⑤} ; 及 • 在主診註冊醫生的書面建議下直接因癌症 ^{④⑤} 接受任何醫療服務, 則就該醫療服務所需付的自付費餘額(如有)將被減至零元(\$0)。 If the Insured Person - • suffers from Cancer ^{④⑤} ; and • upon the written recommendation of the attending Registered Medical Practitioner, receives any Medical Services as a direct result of the Cancer ^{④⑤} , the remaining balance of Deductible (if any) shall be reduced to zero dollars (\$0) for such Medical Services.

1) 基本保障 Basic Benefits

保障項目 ^⑥ Benefit items ^⑥	賠償限額 (港元) Benefit limit (in HKD)	
a 病房及膳食 Room and board	全數賠償 ^⑨ Full cover ^⑨	
b 雜項開支 Miscellaneous charges	全數賠償 ^⑨ Full cover ^⑨ (受2) 額外保障下保障項目(i)「人工裝置」的賠償限額所規限 Subject to benefit limit of benefit item (i) Prosthetic Device under 2) Enhanced Benefits)	
c 主診醫生巡房費 Attending doctor's visit fee	全數賠償 ^⑨ Full cover ^⑨	
d 專科醫生費 ^⑤ Specialist's fee ^⑤		
e 深切治療 Intensive care		
f 外科醫生費 (不限手術類別) Surgeon's fee (regardless of the surgical category)		
g 麻醉科醫生費 (不限手術類別) Anaesthetist's fee (regardless of the surgical category)		
h 手術室費 (不限手術類別) Operating theatre charges (regardless of the surgical category)		
i 訂明診斷成像檢測 ^{⑤⑦} Prescribed Diagnostic Imaging Tests ^{⑤⑦}		
j 訂明非手術癌症治療 ^⑥ Prescribed Non-surgical Cancer Treatments ^⑥		
k 入院前或出院後 / 日間手術前後的門診護理 ^⑥ Pre- and post-Confinement / Day Case Procedure outpatient care ^⑥		全數賠償 ^⑨ 以下列明的診症 ^⑩ : <ul style="list-style-type: none"> ◦ 住院 / 日間手術前超過90日所進行的一次門診或急症診症; ◦ 住院 / 日間手術前90日內所進行的所有門診或急症診症; 及 ◦ 出院 / 日間手術後365日內的所有跟進門診 Full cover ^⑨ for the following specified visits ^⑩ : <ul style="list-style-type: none"> ◦ 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure taking place more than 90 days before admission or Day Case Procedure; ◦ All prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 90 days before admission or Day Case Procedure; and ◦ All follow-up outpatient visits per Confinement/Day Case Procedure (within 365 days after discharge from Hospital or completion of Day Case Procedure)
l 精神科治療 Psychiatric treatments		全數賠償 ^⑨ Full cover ^⑨

2) 額外保障 Enhanced Benefits

保障項目 ^⑥ Benefit items ^⑥	賠償限額 (港元) Benefit limit (in HKD)
a 私家看護費 ^⑤ Private nursing ^⑤	全數賠償 ^⑨ Full cover ^⑨ (每保單年度最多90日 Maximum 90 days per Policy Year)
b 陪床費 Companion bed	全數賠償 ^⑨ Full cover ^⑨
c 急症意外門診保障 Emergency outpatient treatment for Accidents	
d 日症病人洗腎 ^⑤ Day Patient kidney dialysis ^⑤	
e 懷孕併發症 Complications of pregnancy	每保單年度 \$300,000 per Policy Year
f 康復治療 Rehabilitation	每日 \$4,000 per day (每保單年度每傷病最多90日 Maximum 90 days per Disability per Policy Year) (必須取得本公司之預先批准 Subject to pre-approval of the Company)
g 善終服務及緩和治療 ^⑤ Hospice and palliative care ^⑤	每保單年度 \$160,000 per Policy Year
h 住院或指定治療後由註冊中醫師提供之診症或針灸 Consultation or acupuncture by a Registered Chinese Medicine Practitioner after Confinement or specific treatments	每次 \$880 per visit (每保單年度最多20次 Maximum 20 visits per Policy Year)
i 人工裝置 ^⑤ Prosthetic Device ^⑤	每保單年度每項裝置 \$160,000 per item per Policy Year
j 因中風而提升家居設備 ^⑤ Home facility enhancement due to Stroke ^⑤	每保單年度 \$120,000 per Policy Year (須於中風出院後緊接其後的180日內完成) (Completed within 180 days after discharge from Hospital due to Stroke)
k 非住院睡眠窒息症測試 ^⑤ Non-Confinement sleep apnea test ^⑤	全數賠償 ^⑨ 非住院睡眠窒息症測試及以下列明的診症 ^⑩ : <ul style="list-style-type: none"> ◦ 非住院睡眠窒息症測試前超過90日所進行的一次門診; ◦ 非住院睡眠窒息症測試前90日內所進行的所有門診; 及 ◦ 非住院睡眠窒息症測試後365日內的所有跟進門診 Full cover ^⑨ for non-Confinement sleep apnea test and the following specified visits ^⑩ : <ul style="list-style-type: none"> ◦ 1 prior outpatient visit per non-Confinement sleep apnea test taking place more than 90 days before such sleep apnea test; ◦ All prior outpatient visits per non-Confinement sleep apnea test taking place within 90 days before such sleep apnea test; and ◦ All follow-up outpatient visits per non-Confinement sleep apnea test (within 365 days after completion of such sleep apnea test)

3) 身體檢查保障 Medical Check-up Benefits

由第二個保單年度開始, 受保人可於每個保單年度選擇以下保障項目(i) 或 (ii) -

- (i) 於香港其中一間指定之體檢中心出示本公司發出的換領信, 以接受免費身體檢查服務一次 (不適用於年齡18歲以下之受保人); 或
(ii) 申請索償一次或多於於保單年度內接受身體檢查服務之費用, 最高賠償限額為每保單年度 \$4,800。

Starting from the second Policy Year, the Insured Person can enjoy either option (i) or (ii) below per Policy Year -

- (i) Redeem one free medical check-up service at one of the designated health screening centres in Hong Kong by presenting the redemption letter issued by the Company (not applicable to Insured Persons below Age 18); or
(ii) Reimburse the fees charged for one or more medical check-up service(s) conducted within the Policy Year up to a maximum benefit limit of \$4,800 per Policy Year.

註解 Notes

- ① 身體檢查保障下的免費身體檢查服務只適用於本公司於香港指定之體檢中心。詳情請參閱補充文件二。
- ② 就香港以外進行的器官移植手術。
 - (i) 如取得本公司之預先批准：1) 基本保障下保障項目 (a) - (i) 及 (k)，以及 2) 額外保障下保障項目 (a)、(b)、(f)、(g)、(h) 及 (i) 將按上表中的相應賠償限額賠償；
 - (ii) 如沒有取得本公司之預先批准：1) 基本保障下保障項目 (a) - (i) 及 (k) 將按標準計劃條款及保障的相應賠償限額賠償及 2) 額外保障下的保障將不獲賠償；及
 - (iii) 詳情請參閱補充文件一。
- ③ 若受保人於美國接受任何非急症治療，並於該治療之前的連續十二(12)個月內在美國逗留之時間(不論一次或多次逗留)累積達一百八十三(183)日或以上(包括到達及離境日子)，於條款及保障第六部分第 3(a)至 (l)節及補充文件一第 2 節 (a)、(b)、(d)至 (k)節就非急症治療所招致的合資格費用及/或其他費用，須在計算應付的總保障金額時減少至百分之五十(50%)。詳情請參閱補充文件五。
- ④ 詳情請參閱補充文件六及癌症的定義受不保條件限制。
- ⑤ 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。
- ⑥ 除非另有註明，同一項目的合資格費用或受保障之費用不可獲 1) 基本保障下 (a) - (l) 項及 2) 額外保障下 (a) - (i) 項多於一個保障項目的賠償。
- ⑦ 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。
- ⑧ 治療只包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。
- ⑨ 全數賠償是指不設分項賠償限額。
- ⑩ 就住院/日間手術/非住院睡眠窒息症測試前的門診或急症診症(如適用)所招致之合資格費用索償，須於 (a) 受保人出院當日或 (b) 進行日間手術/非住院睡眠窒息症測試當日(視情況而定)起 90 天內提交予本公司。
- ⑪ 你必須入住標準私家房級別或以下的病房。若你住院時自願地入住標準私家房級別以上的病房，所有合資格賠償將乘以調整值作出調整。有關調整值計算方法，請參閱補充文件五。
- ⑫ The free medical check-up service under medical check-up benefit is available at the Company's designated health screening centres in Hong Kong only. Please refer to Supplement 2 for details.
- ⑬ For organ transplant surgery performed outside Hong Kong -
 - (i) with the pre-approval of the Company: Benefits payable for benefit items (a) - (i) and (k) of 1) Basic Benefits and (a), (b), (f), (g), (h) and (i) of 2) Enhanced Benefits will be subject to their corresponding benefit limits in the table above;
 - (ii) without the pre-approval of the Company: Benefits payable for benefit items (a) - (i) and (k) of 1) Basic Benefits will be subject to the corresponding benefit limits under the Standard Plan Terms and Benefits and no benefits shall be payable under 2) Enhanced Benefits; and
 - (iii) Please refer to Supplement 1 for details.
- ⑭ If the Insured Person has stayed in the United States, for a period or periods of aggregating one hundred and eighty-three (183) days or more (including the date of arrival and departure) within the twelve (12) consecutive months immediately prior to receiving non-Emergency Treatment, any Eligible Expenses and/or other expenses incurred for such non-Emergency Treatment payable under Sections 3(a) to (l) of Part 6 of the Terms and Benefits and Sections 2(a), (b), (d) - (k) of Supplement 1 shall be reduced to fifty percent (50%) in the calculation of the total benefit amount payable. Please refer to Supplement 5 for details.
- ⑮ Please refer to Supplement 6 for details and the definition of Cancer is subject to excluded conditions.
- ⑯ The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
- ⑰ Unless otherwise specified, Eligible Expenses or covered expenses incurred in respect of the same item shall not be recoverable under more than one item in the table for items (a) - (l) of 1) Basic Benefits and items (a) - (k) of 2) Enhanced Benefits.
- ⑱ 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.
- ⑲ Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- ⑳ Full cover shall mean no itemised benefit sublimit.
- ㉑ Claims for the Eligible Expenses incurred on prior outpatient visits or Emergency consultations (if applicable) shall be submitted to the Company within 90 days after (a) the date on which the Insured Person is discharged from the Hospital or (b) the date on which the Day Case Procedure/non-Confinement sleep apnea test is performed, as the case may be.
- ㉒ You must be Confined at the Standard Private Room level or lower. If you are voluntarily Confined in a room at a higher level, benefits payable in respect of all eligible claims shall be multiplied by an adjustment factor. Please refer to Supplement 5 for the calculation of the adjustment factor.

詳情請瀏覽 <https://www.bupa.com.hk/tc/medical-insurance/global-prestige/> 參閱保單及保障資料。

Please refer to the Policy and Benefit Information at <https://www.bupa.com.hk/en/medical-insurance/global-prestige/> for details.

以下為環球優越自願醫保計劃的免費保障及服務，並非認可產品的一部分。

The following are the free benefits and services under Global Prestige VHIS Plan and they are not part of the Certified Plan.

B 免費保障及服務 Free Benefits and Services

1) 「保柏尊貴寶卡」及住院免找數 Bupa Gold Card and cashless hospitalisation

投保本計劃後，你將獲發「保柏尊貴寶卡」，憑卡可享用住院免找數、免索償服務。

- 若你須入住香港的指定私家醫院，本公司會直接向醫院支付你的合資格醫療費用，每次住院以信用額港幣 100 萬為限。而超過信用額的醫療費用，保單持有人須自行向醫院繳付有關費用，然後向本公司提出索償。你可瀏覽 <https://www.bupa.com.hk/tc/medical-insurance/global-prestige/>，查看指定的香港私家醫院名單，此名單可能會不時更改。
- 如在海外接受治療，你只須預先致電保柏，便可享用此服務。
- 免找數服務並不適用於認可產品之保障摘要上 1) 基本保障下列的項目 (k) 入院前或出院後/日間手術前後的門診護理及項目 (l) 精神科治療，以及 2) 額外保障下列的項目 (c)、(e) - (j)。請先支付醫療費用，然後再向本公司申請索償。
- 如有任何差額和自付費，保單持有人須向本公司退還有關費用，詳情請參閱保單。

You'll receive a Bupa Gold Card after enrolling in this plan. You can enjoy cashless hospitalisation without submitting any claims.

- If you are admitted to a designated private Hospital in Hong Kong, the Company will pay your eligible medical expenses to the Hospital directly up to the credit limit of HK\$1 million per confinement. For those medical expenses exceeding the credit limit, the Policy Holder is required to pay the expenses to the Hospital and then submit a claim to the Company for reimbursement. For the list of designated private Hospitals in Hong Kong, please visit <https://www.bupa.com.hk/en/medical-insurance/global-prestige/>. This list is subject to change from time to time.
- For overseas hospitalisation, you can enjoy this service by calling Bupa to make the necessary arrangements.
- Cashless service is not applicable to item (k) pre- and post-Confinement/Day Case Procedure outpatient care and item (l) psychiatric treatments listed under 1) Basic Benefits and items (c), (e) - (j) listed under 2) Enhanced Benefits in the Summary of Benefits for the Certified Plan. Please settle your payment first and submit a claim to the Company.
- You may need to reimburse the Company for the amount of selected Deductible and Shortfall, if any. Please refer to the Policy for more details.

2) 專屬健康大使服務 HealthPro Concierge Service

「專屬健康大使服務」由醫生、合資格護士和健康管理團隊組成，為你提供個人健康管理支援服務，包括：

24小時健康專線

提供每天24小時支援服務，為你解答健康問題，包括怎樣照顧患病小孩或長者，以助你了解病徵、診斷及治療方案等。保柏的專業團隊亦可為你提供嬰幼兒照顧、樂齡、減壓及養生等保健資訊。

醫療中心選擇及預約診症

可根據你的指定情況或需要為你提供診所及醫院名單以供參考，更為你預約選定的診症及治療服務。

健康顧問

若入住本港私家醫院，保柏的健康顧問會全程協助，讓你了解你的治療詳情和醫療開支預算，替你處理有關入院、出院後跟進治療及索償等事宜。

第二醫療意見

如在診斷和治療上遇到各種疑慮，由醫療專業人士組成之團隊可為你提供專業的意見。

慢性疾管理計劃

提供控制慢性疾如糖尿病、高血壓的建議，包括生活習慣建議及跟進病情等服務。

非緊急環球健康支援

無論你身在海外時遇上健康問題需要支援，或計劃於海外接受治療，均可為你尋找合適醫生、預約及協助安排翻譯服務。

中國內地居民服務

提供每天24小時免費國語熱線，為你預約在香港接受的醫療服務及安排往返交通。

The HealthPro Concierge Service gives you access to personal healthcare support delivered by a team of doctors, qualified nurses and health management professionals including:

24-hour Healthline

24/7 guidance on health-related queries, from how to care for a sick child or elderly relative to discussing your symptoms, diagnosis and treatment options. Bupa's professionals can also provide preventive health information at any time, including tips on caring for babies and young children, aging, stress relief and wellness.

Healthcare Centre Choices and Appointment Making

Provide a list of clinics and hospitals based on your specific condition or needs for your reference, as well as set up appointments for your selected consultations and treatments.

Care Manager

A personal Care Manager will follow you throughout your hospital stay in a local private Hospital to help you understand your treatment plan and obtain cost estimates, as well as facilitate admission, follow-up treatments after discharge and claims.

Second Medical Opinion

Clarify any doubts about your diagnosis and proposed treatment by obtaining medical advice from a panel of medical specialists.

Chronic Conditions Programme

Lifestyle coaching and follow-up services to help you manage chronic conditions such as diabetes and hypertension.

Non-emergency Global Healthcare Support

Locate suitable doctors, arrange medical appointments and support language translation either when you are in need overseas, or plan to travel for treatment.

Mainland China Residents Service

24/7 toll-free hotline in Mandarin offering help with booking medical appointments for healthcare services in Hong Kong and arranging travel logistics.

- 「專屬健康大使服務」建議的服務之有關費用由受保人自付，除非該費用在保單下屬合資格的賠償。
- 醫生會於辦公時間內支援護士解答問題。辦公時間為星期一至五，上午9時至下午6時（香港時間），公眾假期除外。
- 請瀏覽 www.bupa.com.hk/PDF/healthpro-concierge-service.pdf 查閱專屬健康大使服務的條款及細則。
- Any fees for the services suggested by HealthPro Concierge Service will be paid by the Insured Person unless otherwise covered by benefits under the Policy.
- Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon - Fri, from 9am to 6pm (Hong Kong time), except public holidays.
- Please refer to www.bupa.com.hk/PDF/healthpro-concierge-service.pdf for the terms and conditions of the HealthPro Concierge Service.

3) 免費保柏國際援助計劃 Free Bupa Worldwide Assistance Programme

提供海外及中國住院按金墊支服務，全數支付緊急醫療運送費用及送返香港後高達港元12萬的額外住院保障，並設有24小時熱線提供旅遊、醫療或法律資訊及支援。

Provides admission deposit in the event of hospitalisation overseas and in China, unlimited cover for emergency medical evacuation and repatriation, and an extra hospital benefit of HK\$120,000 after repatriation to Hong Kong. A 24-hour hotline for travel, medical or legal information and assistance is also available.

- 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障，請以書面通知保柏。
- 這項服務是保柏聘用之服務供應商（「服務供應商」）負責提供並受條款及細則約束。服務供應商為獨立的承辦商，並非保柏的代理。保柏不須就受保人因服務供應商或其代理提供之服務或建議或該等服務之供應而直接或間接蒙受或招致之任何損失、損害、費用、起訴、訴訟或法律程序，向保單持有人或受保人承擔任何責任。
- The Free Bupa Worldwide Assistance Programme is not part of the VHIS Certified Plan. Please inform Bupa in writing if you don't want to receive this free benefit.
- These services are provided by the Service Provider(s) engaged by Bupa and terms and conditions apply. The Service Provider is a third party service provider, which is an independent contractor and is not an agent of Bupa. Bupa shall not be liable to the Policy Holder or Insured Person in any respect of any loss, damage, expense, suit, action or proceeding suffered or incurred by the Insured Person, whether directly or indirectly, arising from or in connection with the services provided or advice given by the Service Provider(s) or its agent, or the availability of such services.

4) 24小時情緒解碼熱線 24-hour Mental Health Service Hotline

此服務由保柏特選的服務供應商及其經驗豐富的合資格輔導人員及臨床心理學家團隊提供。你可隨時致電熱線以獲得輔導人員的免費情緒支援及個人化輔導服務。如有需要，輔導人員更可為你安排接受臨床心理學家的面談輔導服務（每保單年度四次）。請放心，你所提供的資料均會保密。

請瀏覽保柏網站 www.bupa.com.hk/pdf/mentalhotline.pdf 查閱24小時情緒解碼熱線的條款及細則。

This service is provided by Bupa's selected service providers and their team of qualified and experienced counsellors and clinical psychologists. Through the hotline, counsellors offer free emotional support and personalised advice. They can also arrange face-to-face counselling services with a clinical psychologist if needed (four times per Policy Year). Rest assured that all information provided will be kept in strict confidence.

Please refer to Bupa's website at www.bupa.com.hk/pdf/mentalhotline.pdf for the terms and conditions of the 24-hour Mental Health Service Hotline.

- 24小時情緒解碼熱線適用於18歲或以上的受保人，18歲以下的受保人需於保單持有人或監護人陪同下使用此服務。
- The 24-hour Mental Health Service Hotline is applicable to insured persons aged 18 or above. Insured persons aged below 18 must be accompanied by the policy holder or guardian to use this service.

以下為環球優越自願醫保計劃的自選保障，並非認可產品的一部分並且不適用於申請稅項扣減。

The optional benefits of the Global Prestige VHIS Plan shown below are not part of the Certified Plan and are not eligible for claiming tax deduction.

C 自選保障之保障摘要 Summary of Benefits for Optional Benefits

1) 門診保障 [®] Clinical Benefit [®]	賠償限額 (港元) Benefit limit (in HKD)
保障地區 Area of cover	全球 Worldwide
每年最高賠償額 Overall Annual Limit	\$300,000
a 普通科醫生 General practitioner	全數賠償 Full cover (只限診症費/診療費) (Consultation fee/Treatment fee only)
b 專科醫生 Specialist	
c 家中應診 Home consultation	
d 物理治療師 [®] Physiotherapist [®] ◦ 須獲註冊醫生書面轉介 ◦ Subject to written referral from a Registered Medical Practitioner	
e 脊醫 [®] Chiropractor [®] ◦ 須獲註冊醫生書面轉介 ◦ Subject to written referral from a Registered Medical Practitioner	
f 中醫師 Chinese herbalist	每次診治 \$600 per visit (包括診症費、基本中藥費用、針灸治療及推拿；亦支付由註冊中醫師處方並由合法來源 (不論是否於該註冊中醫師的門診診所) 取得之基本醫療所需中藥費用) (including consultation fee, basic Chinese Medicines, acupuncture and tui na; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))
g 跌打醫師 Chinese bonesetter	
h 精神科相關治療 [®] Psychiatric-related treatments [®]	每保單年度 \$36,000 per Policy Year (包括診症費、醫療所需西藥費用、基本中藥費用、針灸治療、診斷成像及化驗) (including consultation fee, Medically Necessary Western Medication, basic Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)
i 臨床心理輔導 [®] Psychological counselling [®] ◦ 須獲精神科醫生書面轉介 ◦ Subject to written referral from a Psychiatrist	每保單年度 \$33,000 per Policy Year
j 整骨治療師 Osteopath	每次診治 \$1,200 per visit (只包括診治肌肉、骨骼和關節的費用) (Includes treatment fee for muscles, bones and joints only)
k 足病治療師 [®] Podiatrist [®] ◦ 須獲註冊醫生書面轉介 ◦ Subject to written referral from a Registered Medical Practitioner	每次診治 \$1,200 per visit (包括診症費、醫療所需外塗藥物、矯形機械服務及治療等醫療費用) (Includes consultation fee and charges for Medically Necessary topical medicament, orthomechanical services and procedures)
l 診斷成像及化驗 [®] Diagnostic imaging and laboratory tests [®] ◦ 須獲註冊醫生 (適用於所有診斷成像及化驗) 或註冊中醫師/脊醫 [®] (只適用於 X 光及化驗) 書面轉介 ◦ Subject to written referral from a Registered Medical Practitioner for all diagnostic imaging and laboratory tests, or from a Registered Chinese Medicine Practitioner or Chiropractor [®] for X-ray only and laboratory tests	全數賠償 Full cover
m 處方西藥 Prescribed Western Medication	每保單年度 \$50,000 per Policy Year (經由註冊醫生處方並由合法來源取得之醫療所需西藥費用) (Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source)
n 接種疫苗 Vaccination	每保單年度 \$9,500 per Policy Year (包括乙型肝炎、卡介苗、小兒麻痺、白喉、百日咳、破傷風混合、麻風、流行性乙型腦炎、腦膜炎、甲型肝炎、麻疹、流行感冒及其他由香港政府或世界衛生組織不時推薦的疫苗接種) (covers vaccinations for Hepatitis B, Bacillus Calmette-Guerin (BCG), polio (poliomyelitis), diphtheria-pertussis-tetanus, Leprosy, Japanese encephalitis, Meningitis, Hepatitis A, Measles, Influenza and other vaccinations recommended by the Hong Kong Government or World Health Organisation from time to time)

每保單年度內有關上文 1a - 1k 項之診治次數上限合共為 60 次，其中項目 1f - 1g 及項目 1j - 1k 之診治次數上限合共為每保單年度各 20 次。每一項目以每日最多一次為限。
Maximum number of visits per Policy Year for items 1a - 1k above in aggregate is 60 in total, with a sub-limit of 20 visits per Policy Year for items 1f - 1g and items 1j - 1k respectively. Subject to a maximum of one visit per item per day.

2) 牙科及視力保障 Dental and Optical Benefit	賠償限額 (港元) Benefit limit (in HKD)
牙科保障 Dental Benefit	
<ul style="list-style-type: none"> ◦ 洗牙 Scaling and polishing ◦ 定期口腔檢查 Routine oral examination ◦ 口腔X光及藥物 Intraoral X-ray and medications ◦ 補牙及脫牙 Fillings and extractions ◦ 膿瘡排放 Drainage of abscesses ◦ 齒尖或齒邊修復 Pins for cusp restoration ◦ 牙髓治療 (杜牙根) Root canal treatment ◦ 牙周手術 Periodontal surgery ◦ 緊急意外治療 (包括X光、緊急牙痛舒緩、臨時補牙、藥物、膿瘡切割及排放) Accident emergency treatment (including X-ray, temporary pain relief, temporary fillings, medication, incision and drainage of abscess) ◦ 活動假牙、牙冠及牙橋 (只適用於因意外而導致) Dentures, crowns and bridges (Only if necessitated by an Accident) 	每保單年度 \$9,000 per Policy Year
你必須連續受保於此保障6個月或以上，方可獲得以下項目之賠償。 The following items are payable provided that you have been continuously covered under this Benefit for 6 months or more.	
<ul style="list-style-type: none"> ◦ 牙冠及牙橋 Crowns and bridges ◦ 根尖切除術 Apicoectomy ◦ 鑲牙 Gold inlay ◦ 部分或全軟組織阻生 Partial and complete soft-tissue impaction ◦ 牙骨阻生 Bony impaction ◦ 牙齒矯正 Orthodontic treatment ◦ 全視牙照 Panoramic film ◦ 牙膠 Night-guard or mouth-guard 	每保單年度 \$15,000 per Policy Year
視力保障 Optical Benefit	
<ul style="list-style-type: none"> ◦ 此保障將支付由註冊醫生或註冊視光師進行之診症費、眼科檢查或檢驗，以及矯正視力的隱形眼鏡或一副眼鏡。 This benefit shall cover the expenses incurred for consultation, eye check or examinations performed by a Registered Medical Practitioner or Registered Optometrist, as well as contact lenses or one pair of glasses for optical correction. ◦ 醫療所需的眼科檢查或檢驗之合資格費用只可於門診保障或視力保障兩者其中之一下賠償。 Eligible expenses for Medically Necessary eye check-up or examinations can be covered under Clinical Benefit or Optical Benefit but not both. 	每保單年度 \$3,000 per Policy Year

註解 Notes

④ 關於門診保障

- 使用「保柏尊貴寶卡」於保柏尊貴寶特選服務供應商接受獲保障的門診治療可享受找數服務。你可在本公司的網站查閱最新的特選服務供應商名單。此名單可能會不時更改。
- 門診保障下的普通科醫生、專科醫生及中醫師亦涵蓋由視像診症服務供應商的普通科醫生、專科醫生及中醫師的醫療診症服務的診症費。此保障亦涵蓋指定的視像診症服務供應商的藥物運送費用 (包括普通科醫生)。指定的視像診症服務供應商名單可於本公司的網站查閱，本公司會不時更改及更新此名單。
- ④ 於轉介信發出日起計6個月內，可就相同或相關病症使用該轉介信。若須診治全新或不相關的病症，則須提交新的轉介信。
- ④ 此保障適用於精神、心理、情緒或行為症狀、認知障礙症 (包括阿茲海默氏症) 及帕金森病的門診診治 (因濫用藥物及酗酒而引致或相關的症狀或疾病除外)。若此保障下的費用亦同時受保於門診保障下的其他項目，有關費用只可獲此項目之賠償，而不會獲得其他項目之賠償。
- ④ 部分診斷影像中心或不接受由註冊中醫及/或脊醫轉介的某些X光及化驗。如有疑問，請直接聯絡有關中心。

④ About Clinical Benefit

- The Bupa Gold Card can also be used to enjoy cashless service for covered clinical expenses incurred at Bupa Gold Appointed Services Providers. Please visit the Company's website to view the latest list of providers. This list is subject to change from time to time.
- General practitioner, specialist and Chinese herbalist under Clinical Benefit also cover consultation fee charged by the general practitioners, specialists and Chinese herbalists of video consultation service providers. This benefit shall also cover the medication delivery charge incurred by designated video consultation service providers (general practitioner only). The list of designated video consultation service providers can be found at the Company's website. The list may be updated and amended by the Company from time to time.
- ④ A referral letter is valid for the same or related medical condition for 6 months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.
- ④ This benefit is applicable to treatment for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease (except for conditions caused by or related to drug abuse and alcoholism). If the expenses under this benefit are also covered under other benefit items in this Clinical Benefit, the expenses for such items shall be exclusively paid under this item h and no benefit shall be payable under other benefit items.
- ④ Some diagnostic centres may not accept referrals from a Registered Chinese Medicine Practitioner and/or Chiropractor for certain X-ray and laboratory tests. If you have any queries, please contact the centres directly.

有關詳情及本保障摘要內大楷詞語之定義，請參閱保單。

Please refer to the Policy for details and definitions of the capitalised terms in this Summary of Benefits.

環球優越自願醫保計劃 (至臻) Global Prestige VHIS Plan (Signature)



保費表 Premium Table

2025年3月1日版本 1 March 2025 Edition

環球優越自願醫保計劃 (至臻) 提供以下選擇 (括號內數字為自願醫保認可產品編號) :

Global Prestige VHIS Plan (Signature) offers the options below (VHIS certification numbers in brackets):

- \$0 自付費 \$0 Deductible (F00035-05-000-01)
- \$12,000 自付費 \$12,000 Deductible (F00035-06-000-01)
- \$40,000 自付費 \$40,000 Deductible (F00035-07-000-01)
- \$80,000 自付費 \$80,000 Deductible (F00035-08-000-01)

A 認可產品之標準保費表 Standard Premium Schedule for the Certified Plan

以港元計算 All figures in HKD

年齡 Age	\$0 自付費 \$0 Deductible		\$12,000 自付費 \$12,000 Deductible		\$40,000 自付費 \$40,000 Deductible		\$80,000 自付費 \$80,000 Deductible	
	按年 Annual	按月 Monthly	按年 Annual	按月 Monthly	按年 Annual	按月 Monthly	按年 Annual	按月 Monthly
0 - 9	23,079	2,077	14,757	1,328	10,674	961	7,228	651
10 - 25	22,319	2,009	13,136	1,182	12,474	1,123	10,353	932
26 - 44	47,312	4,258	30,054	2,705	23,533	2,118	22,121	1,991
45 - 59	76,312	6,868	49,556	4,460	43,349	3,901	39,234	3,531
60 - 69	129,767	11,679	93,964	8,457	70,215	6,319	64,820	5,834
70	191,862	17,268	138,927	12,503	103,814	9,343	95,837	8,625
71	203,494	18,314	147,350	13,262	110,107	9,910	101,647	9,148
72	214,351	19,292	155,211	13,969	115,982	10,438	107,070	9,636
73	224,349	20,191	162,451	14,621	121,392	10,925	112,065	10,086
74	233,375	21,004	168,986	15,209	126,276	11,365	116,573	10,492
75	242,690	21,842	175,731	15,816	131,316	11,818	121,226	10,910
76	251,034	22,593	181,773	16,360	135,831	12,225	125,394	11,285
77	256,701	23,103	185,877	16,729	138,897	12,501	128,225	11,540
78	262,444	23,620	190,036	17,103	142,005	12,780	131,094	11,798
79	265,400	23,886	192,176	17,296	143,604	12,924	132,570	11,931
80	268,390	24,155	194,341	17,491	145,222	13,070	134,064	12,066
以下保費只供續保之用 The premiums below are for Renewal only								
81	271,413	24,427	196,530	17,688	146,858	13,217	135,574	12,202
82	274,470	24,702	198,744	17,887	148,512	13,366	137,101	12,339
83	277,562	24,981	200,983	18,088	150,185	13,517	138,645	12,478
84	280,689	25,262	203,246	18,292	151,876	13,669	140,207	12,619
85	283,850	25,547	205,536	18,498	153,587	13,823	141,786	12,761
86	287,048	25,834	207,851	18,707	155,317	13,979	143,383	12,904
87	290,281	26,125	210,192	18,917	157,067	14,136	144,999	13,050
88	293,551	26,420	212,560	19,130	158,836	14,295	146,632	13,197
89	296,858	26,717	214,954	19,346	160,625	14,456	148,284	13,346
90	300,202	27,018	217,376	19,564	162,435	14,619	149,954	13,496
91	303,583	27,322	219,824	19,784	164,264	14,784	151,643	13,648
92	307,003	27,630	222,301	20,007	166,115	14,950	153,351	13,802
93	310,461	27,941	224,805	20,232	167,986	15,119	155,079	13,957
94	313,958	28,256	227,337	20,460	169,878	15,289	156,825	14,114
95	317,495	28,575	229,898	20,691	171,792	15,461	158,592	14,273
96	321,071	28,896	232,487	20,924	173,727	15,635	160,378	14,434
97	324,688	29,222	235,106	21,160	175,684	15,812	162,185	14,597
98	328,345	29,551	237,754	21,398	177,663	15,990	164,012	14,761
99+	332,044	29,884	240,433	21,639	179,664	16,170	165,859	14,927

B 自選保障之保費表 Premium Schedule for Optional Benefits

自選保障並非自願醫保認可產品的一部分，自選保障之保費不可用作申請稅項扣減。

Optional benefits are not part of the Certified Plan. The premiums paid for optional benefits are not eligible for claiming tax deduction.

以港元計算 All figures in HKD

1) 門診保障 Clinical Benefit 額外保費 Additional Premium		
年齡 Age	按年 Annual	按月 Monthly
0 - 9	31,687	2,852
10 - 25	35,642	3,208
26 - 44	44,814	4,033
45 - 59	46,684	4,202
60+	84,777	7,630

2) 牙科及視力保障 Dental and Optical Benefit 額外保費 Additional Premium		
	按年 Annual	按月 Monthly
所有年齡 All ages	7,376	664

C 家庭折扣 Family Discounts

兩名合資格家庭成員一同投保 2 eligible family members enrol together	三名或以上合資格家庭成員一同投保 3 or more eligible family members enrol together
9折 10% discount	85折 15% discount

備註 Remarks

- 此標準保費表並未包括由保險業監管局徵收的保費徵費。請瀏覽 https://www.ia.org.hk/tc/infocenter/faqs/faqs_levy.html 了解詳情。
- 所需支付保費將於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
- 本公司在有需要時會向所有同一類別保單調整標準保費表。以上列出的標準保費並不能視為實際未來所需支付的標準保費。本公司會在每個保單年度終結前以書面形式通知保單持有人來年實際所需支付的保費(包括附加保費(如適用))及保費徵費。
- 受保單的條款及細則約束。
- 以上折扣只適用於認可產品的標準保費及附加保費(如有)，不適用於其他自選保障。
- This Standard Premium schedule does not include levy which is collected by the Insurance Authority. Please visit https://www.ia.org.hk/en/infocenter/faqs/faqs_levy.html for details.
- The actual premiums payable will be adjusted at each Renewal based on the age of the Insured Person according to the prevailing Standard Premium schedule.
- The Company may adjust the Standard Premium schedule on a Portfolio basis if necessary. The listed Standard Premiums above are not indicative of the future Standard Premiums. The Company will send out a written notice to the Policy Holders before each end of Policy Year regarding the actual premiums payable (including Premium Loading, if applicable) and levy of the coming year.
- Subject to terms and conditions of the Policy.
- The above discount applies to Standard Premiums and Premium Loadings (if any) of the Certified Plan only, but not other optional benefits.