

CTF Life
周大福人壽

MediChamp

Insurance Plan

Health+ Series



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MediChamp Insurance Plan

Eager to champion your life by a smart decision? **Chow Tai Fook Life Insurance Company Limited ("CTF Life" / "We")** presents **MediChamp Insurance Plan ("MediChamp" / this "Plan")** which provides top-notch medical services and comprehensive support, all under a one-stop global medical solution. This enables you to get cutting-edge medical care whether seeking treatment in Hong Kong or overseas. Simply make up your mind and apply for this Plan to live a champion life.



Before treatment

- ✓ PrimeChamp Doctor Network and 24-hour hotline[#]
- ✓ Chinese and Western Medicine Cancer Treatment in mainland China and Case Management Services[#]
- ✓ Out-patient consultation for Pre-Confinement and Pre-surgery
- ✓ Claimable Amount Estimate Service[#]
- ✓ Pre-authorization and Direct Billing Service[#]
- ✓ Second Medical Opinion Service[#]
- ✓ China Accompany & VIP Channel Service[#]



Receiving treatment

- ✓ Full Benefit for hospitalisation and surgical expense
- ✓ Cancer Care (including Specifically Approved Personalised Drugs and 5-year monitoring)



After treatment

- ✓ Out-patient consultation for Post-Confinement and Post-surgery
- ✓ Traditional Chinese Medicine Treatment
- ✓ Post-Confinement Ancillary Treatment and Rehabilitation
- ✓ Post-Surgical Home Nursing
- ✓ Stroke and Heart Attack Rehabilitation
- ✓ Home Nursing Referral Service[#]



Benefits

- ✓ Newborn Cash
- ✓ DNA Test for Immediate Family Member under Cancer Care
- ✓ No Claim Annual Deductible Discount
- ✓ Free Health Check-up Service

[#] This is an item under Medical Value-added Service and does not constitute part of this Plan. For details, please refer to remark 18 in this Product Brochure.

High Overall Lifetime Limit offers the ultimate peace of mind to you

Guaranteed renewal^{1,2}

MediChamp provides an overall lifetime limit of up to **HKD140 million**³. This Plan guarantees that your eligibility or renewal will not be affected by any claim you have made or any changes in your health condition, allowing you to **renew your cover until 128 years of age**¹ for truly worry-free medical protection through life.

Multiple options with flexibility to suit your needs

MediChamp offers **3 choices of Area of Coverage** in Asia and worldwide, along with **4 Annual Deductible options**⁴. What's more, you can opt for benefits to cover out-patient, dental⁵ and/ or maternity care⁶, providing you total healthcare solution.

Your protection needs may change at different life stages. You can enjoy the following benefits within 31 days before the Policy Anniversary that is on or immediately following your 50th, 55th, 60th or 65th birthday. There is no further evidence of insurability of the Insured is required^{7,8} regardless of your health condition, so you can obtain the protection you need with ease for retirement:

- option to change insurance plan at specified ages⁷
- option to reduce Annual Deductible (not applicable to the plan with 0 Annual Deductible Amount)⁸
- option to upgrade Area of Coverage at specified ages⁸

Comprehensive protection and quality treatment

Full benefit for hospitalisation and surgical expense

MediChamp offers comprehensive medical protection. This Plan provides full coverage for the charges of room and board, daily doctor's visits, your miscellaneous hospital expenses during Confinement, Out-patient Surgical Expenses, etc[^]. We will also reimburse the expenses for Pre / Post-Confinement / Surgery Out-patient consultation and medication as well as the Post-Confinement medical expenses in relation to Ancillary Treatment and rehabilitation.

Prime protection for serious illnesses

- **Cancer** – It takes time for overseas quality drugs to be registered in Hong Kong. If the Insured is unfortunately diagnosed with cancer and required a drug which hasn't been registered by the Department of Health in Hong Kong, MediChamp will pay **up to HKD800,000 for Specifically Approved Personalised Drugs**⁹ prescribed by the attending cancer specialist of the Insured and is recommended by a medical practitioner with special permission from the Department of Health in Hong Kong. This allows the Insured to gain access to advance drug for the most suitable treatment.

First-in-market*

We will fully cover[^] the expenses incurred by range of cancer treatments (including but not limited to chemotherapy, hormonal therapy, radiotherapy, targeted therapy, immunotherapy and proton therapy) and the actual charges of genetic profiling test for identifying the most appropriate treatment. Actual charges incurred for the consultation, laboratory test(s) and the diagnostic test(s) undertaken to monitor the Insured's response and progress of the Insured's recovery after completion of Active Treatment performed for a Cancer under the supervision of a Medical Practitioner are also fully covered[^] in full in terms of monitoring up to 5 years after the completion of Active Treatment of cancer.

If the Insured is unfortunately diagnosed with cancer, this Plan will provide an allowance up to HKD5,000 for immediate family member¹⁰ to undergo DNA tests¹¹ for peace of mind.

- **Stroke and heart attack** – MediChamp offers additional rehabilitation benefit in the event of a stroke or heart attack, covering the expenses of chiropractic care, physiotherapy, speech therapy or other treatments prescribed by cardiologist. The benefit even covers home facility enhancement prescribed by occupational therapist so you can concentrate on recovery without financial worry.

* "First-in-market" item is designed by CTF Life and concluded based on the same type of medical insurance plans among life insurance companies in the market in January 2018.

[^] The benefit item shall be subject to the overall lifetime benefit limit, the Annual Limit, the Annual Deductible, etc. For details, please refer to the Benefit Schedule, the Supplementary Benefits Benefit Schedule and the Policy Document.

New Parents Benefits

- **Newborn Cash¹²** – A congratulatory HKD3,000 cash will be given to celebrate the birth of the Insured's newborn baby.
- **Pregnancy Complications¹³** – the actual charges of treatment(s) and consultation(s) will be covered if the Insured is unfortunately diagnosed with the covered pregnancy complications.
- **ICU Daily Cash for Premature Newborn Child¹⁴** – Cash benefit for Insured's prematurely-born baby¹⁴'s stay in Intensive Care Unit (ICU) upon birth.

No Claim Annual Deductible Discount^{15,16}

If no Living Benefit is paid or payable for 2 consecutive effective policy years, MediChamp offers a 10% of the Annual Deductible Discount in the following Policy Year. This discount applies to your plan's original Annual Deductible Amount. You can enjoy this discount once every 2 Policy Years if the conditions mentioned above are met. This discount can be **accumulated up to a maximum of 100%** of the Annual Deductible Amount, which means the Annual Deductible Amount can be reduced to 0. If a Living Benefit is paid or payable for a Policy Year, the No Claim Annual Deductible Discount will be reset to 0% in next Policy Year.

No Claim Annual Deductible Discount will NOT be affected by benefit of the following items:

- Out-patient Surgical Expenses
- Hospital Cash
- Out-patient Surgery Cash
- Newborn Cash¹²
- ICU Daily Cash for Premature Newborn Child¹⁴
- Free Health Check-up Service¹⁷

Extended caring protection and professional medical assistance

Free Health Check-up Service¹⁷

Regular health check-up can help discover hidden disease(s) at the early stage. In order to offer you comprehensive health protection, a free Health Check-up Service¹⁷ will be provided on the 3rd Policy Anniversary of this Plan and once every 3 Policy Years thereafter, which helps you learn about your health status.

Medical Value-added Service¹⁸

To address your medical needs other than protection, this service renders you with one-stop medical services. It's including:



PrimeChamp Doctor Network and 24-hour hotline



Chinese and Western Medicine Cancer Treatment in mainland China and Case Management Services



Claimable Amount Estimate Service



Pre-authorization and Direct Billing Service



Second Medical Opinion Service



China Accompany & VIP Channel Service

For details, terms and condition of Medical Value-added Service, please refer to CTF Life website or contact your financial consultant.

Worldwide Emergency Assistance Services¹⁸

You can use our free 24-hour Worldwide Emergency Assistance Services regardless of where you may be. This includes all arrangements and claims for emergency medical evacuation or repatriation, as well as repatriation of remains and compassionate visits etc., providing you with support at any time.

For any enquiry, please contact your financial consultant / call Customer Service Hotline at 2866 8898, Partnership Concierge Hotline at 3192 8333 or Premier Business Hotline at 3192 8388.

At-a-Glance Table

Basic Information					
	Core Benefits		Optional Supplementary Benefits		
	Apply as Basic Plan	Apply as Rider (attach to designated Basic Plans)	Supplementary Out-patient Benefit	Supplementary Dental Benefit ⁵	Supplementary Maternity Benefit ⁶
Issue Age	15 days to age 75		15 days to age 70		Age 18 to 45
Coverage Period	Up to 128 years of age	Up to 128 years of age	Up to 75 years of age		Up to 50 years of age
		Or until the Plan End Date of the designated Basic Plan (whichever is the earlier)			
Policy Currency	HKD	HKD / USD			
Premium Mode	Monthly / semi-annual / annual payment				
Product core nature	Medical Protection Plan (Reimbursement)				
Product Main Objective	Reimburse the medical expenses incurred during hospital Confinement				

Benefit Schedule

Core Benefits ^{15,19}	Maximum Limit (HKD) ⁸		
Area of Coverage ²⁰	Worldwide ²¹	Worldwide (exclude USA)	Asia
<ul style="list-style-type: none"> (A) Living Benefits due to non-Accident / non-Emergency 		Worldwide	
<ul style="list-style-type: none"> (A) Living Benefits due to Accident / Emergency 	Worldwide		
(A) Living Benefits ^{16,19}			
Room Level ^{1*,22}	Standard Private		Inside Hong Kong, Macau, Australia & New Zealand: Semi-private Outside Hong Kong, Macau, Australia & New Zealand: Standard Private
Annual Limit	40,000,000		30,000,000
Overall Lifetime Limit	140,000,000		65,000,000
Annual Deductible	0	0 / 18,000 / 38,000 / 68,000	
I. Confinement Benefits ²³			
1. Room and Board	Fully covered		
2. Intensive Care [®]			
3. Daily Doctor's Visits			
4. In-patient Specialist's Fee [®]			
5. Miscellaneous Hospital Expenses			
6. Hospital Companion Bed ²⁴			
7. Private Nursing Care Fee ^{®25}	Fully covered	Fully covered (up to 60 days per Policy Year)	
II. Surgical Benefits			
1. In-patient Surgical Expenses	Fully covered		
2. Anesthetist's Fee			
3. Operating Theatre Fee			
4. Out-patient Surgical Expenses			

Core Benefits ^{15,19}	Maximum Limit (HKD) ⁸	
5. Medical Appliances		
a. Specified Items 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 / prosthetic intervertebral disc	Fully covered	
b. Non-specified Items (per lifetime) Prosthetic device other than benefit item II (5a)	200,000	
6. Reconstructive Surgery ²⁶		
a. Surgery ²⁷ (per Policy Year)	500,000	300,000
b. Device / Materials (per lifetime)	200,000	
III. Pre / Post-Confinement and Pre / Post-Surgical Benefits		
1. Pre-Confinement and Pre-Surgical Expenses Out-patient consultations, diagnostic tests and western medication prescribed (up to 30 days) within 30 days before Confinement or undergoing the Out-patient surgery	Fully covered (maximum 1 visit per day)	
2. Post-Confinement and Post-Surgical Expenses Out-patient consultations, diagnostic tests and western medication prescribed (up to 30 days) within 120 days after the discharge from hospital / completion of Out-patient surgery	Fully covered (maximum 1 visit per day)	
3. Traditional Chinese Medicine Treatment (per visit) ²⁶ Within 120 days after the discharge from hospital / Out-patient surgery providing that the Out-patient consultation and medication are provided by registered Chinese medical practitioner	1,600	600
	(maximum 1 visit per day and up to 30 visits per Policy Year)	
4. Post-Surgery Home Nursing ²⁵ Within 200 days after the discharge from hospital / Out-patient surgery	Fully covered (up to 200 days per Policy Year)	
5. Post-Confinement Ancillary Treatment ^{26,28} (per visit) Within 100 days after the discharge from hospital / Out-patient surgery, which means consultation with Chiropractor, Physiotherapist, Speech Therapist or Occupational Therapist	1,500	1,200
	(maximum 1 visit per day)	
	50,000	30,000
	(maximum limit per Policy Year)	
6. Rehabilitation ²⁶ (per Policy Year) For stay and treatment in rehabilitation centre, and within 90 days after the discharge from hospital	200,000	100,000
7. Hospice Care ^{26,29} (per lifetime)	200,000	100,000
IV. Special Care Benefits		
1. Advanced Diagnostic Imaging (In-patient or out-patient) ³⁰	Fully covered	
2. Stroke & Heart Attack Rehabilitation (After discharge from hospital)		
a. Home Facility Enhancement ²⁶ (per lifetime) Designated home facility enhancements such as widening passageways, adapting bathroom facilities and the provision of specialized furniture, which is prescribed by an Occupational Therapist	80,000	60,000
b. Chiropractor / Physiotherapist / Speech Therapist / Occupational Therapist ^{26,31} For consultation and treatment	1,000 per visit (maximum 1 visit per day and up to 30 visits per Policy Year) / 120,000 (per lifetime)	
c. Neurologist / Cardiologist / Neurosurgeon ^{26,31} For consultation, treatment and Western Medication prescribed		
d. Chinese Medical Practitioner ^{26,31} For consultation with treatment and medicines prescribed		
e. Disability Subsidy (per month) ³² For disability continued more than 6 months	8,000	6,000
	(Up to 24 months per lifetime)	

Core Benefits ^{15,19}	Maximum Limit (HKD) ⁸	
3. Cancer Care		
a. Consultation, Medication and consultation and diagnostic tests conducted for examination and diagnosis of a Cancer of the Insured, and Western Medication prescribed during consultation	Fully covered	
b. Cancer Treatment [®] Cover Active Treatment for covered cancer, including but not limited to chemotherapy, hormonal therapy, radiotherapy, targeted therapy, immunotherapy and proton therapy		
c. Genetic Profiling Test [®] A medical test which helps identify effective therapies for the Cancer and formulate customized medical management		
d. Monitoring Within 5 years from completion of Active Treatment, covering expenses of consultation, laboratory tests and diagnostic tests		
e. Specifically Approved Personalised Drugs [®] (per cancer) ⁹	800,000	500,000
f. DNA Test for Immediate Family Member ¹¹ (per cancer, per immediate family member) Provide cancer DNA test to immediate family members ¹⁰	5,000	3,000
	maximum 2 immediate family members ¹⁰	
4. Kidney Dialysis^{®, 33}	Fully covered	
5. HIV / AIDS Treatment (per lifetime)^{26,34}	1,000,000	
6. In-patient Psychiatric Treatment^{+, 26, 35}	300,000	100,000
7. Organ Transplant^{®, 36} Include all the medical expenses of the living donor	Fully covered	
8. Hospital Cash		
a. Hong Kong Government Hospital (per day) ³⁷ ; or	2,000 (up to 60 days per Policy Year)	1,200
b. Lower Room Level (per day); or	2,000 (up to 60 days per Policy Year)	1,200
c. Intensive Care Unit (per day)	2,000 (up to 60 days per Policy Year)	1,200
9. Out-patient Surgery Cash Applicable when benefit item II (4) is payable for the same procedure	3,000 (maximum 1 procedure per Policy Year)	1,800
V. New Parents Benefits		
1. Newborn Cash¹² (per Newborn Child)	3,000	
2. Pregnancy Complications^{®, 13}	Fully covered	
3. ICU Daily Cash for Premature Newborn Child¹⁴ (per day)	2,000 (up to 10 days per Premature Newborn Child)	1,200

Core Benefits ^{15,19}	Maximum Limit (HKD) ^{&}	
VI. Emergency Treatment Benefits (Accident)		
1. Emergency Out-patient Treatment due to accident ³⁸	Fully covered	
2. Emergency Dental Treatment due to accident ³⁹		
(B) Compassionate Death Benefit	150,000	100,000
(C) Additional Death Benefit for Organ Donor⁴⁰	150,000	100,000
(D) Special Coverage		
1. Waiver of Annual Deductible Benefit for Severe Urban Chronic Disease (if applicable) Medical expenses incurred for Confinement caused by Cancer, Stroke or Heart Attack	Waiver of Annual Deductible in respect of all benefits in relation to such disease	
2. Option to Change Insurance Plan at specified ages ⁷ (if applicable)	Apply within 31 days before the Policy Anniversary that is on or immediately following the Insured's 50 th , 55 th , 60 th or 65 th birthday ⁷	
3. Option to Reduce Annual Deductible (not applicable to the plan with 0 Annual Deductible) ⁸	Apply within 31 days before the Policy Anniversary that is on or immediately following the Insured's 50 th , 55 th , 60 th or 65 th birthday ⁸	
4. Option to Upgrade Area of Coverage at specified ages ⁸ (if applicable)	Apply within 31 days before the Policy Anniversary that is on or immediately following the Insured's 50 th , 55 th , 60 th or 65 th birthday ⁸	
5. No Claim Annual Deductible Discount (if applicable) ^{15,16} No claims for 2 consecutive years	10% of Annual Deductible Discount (once every 2 Policy Years), it can be accumulated up to 100% of Annual Deductible	
6. Free Worldwide Emergency Assistance Services ¹⁸ Including but not limited to the arrangement and payment of the following items: <ul style="list-style-type: none"> Emergency medical evacuation / repatriation Transportation of mortal remains to home country or usual country of residence Compassionate visit Return of minor child to home country or usual country of residence 	8,000,000 (per incident)	
7. Free Health Check-up Service ¹⁷	A free Health Check-up Service will be provided on the 3 rd Policy Anniversary of this Plan and once every 3 Policy Years thereafter	

& Please contact your consultant should you need the Benefit Schedule in USD.

+ The benefit will be changed if you are hospitalised in a different room level. For details, please refer to remark 22.

® Recommendation by a registered medical practitioner in writing is required.

Supplementary Benefits Schedule

Supplementary Benefits ⁴¹	Maximum Limit (HKD) ^{&}	
Area of Coverage ^{20,21}	Only applicable to Asia	
I. Supplementary Out-patient Benefit^{+,1,41,42} (per Policy Year)		
1. Out-patient Consultation ⁴³ Including consultation fee and prescribed Western Medication (up to 30 days)	Fully covered (maximum 1 consultation per day and up to 50 visits per Policy Year)	
2. Ancillary Service ^{®,44} Registered Chinese medical practitioner / Chiropractor / Physiotherapist	10,000 (maximum 1 visit for each type of treatment per day)	
3. Psychiatric Treatment	20,000 (up to 1 visit per day and up to 15 visits per Policy Year)	
4. Laboratory Tests and Diagnostic Imaging [®]	Fully covered	
5. Prescribed Medicines and Drugs [®]	100,000	
6. Health Check-up and Vaccination ⁴⁵	4,000 (for 1 Health Check-up and 1 course of vaccination)	

Supplementary Benefits ⁴¹	Maximum Limit (HKD) ⁸
II. Supplementary Dental Benefit^{+1.5, 41.42} (per Policy Year)	
1. Routine Dental Treatment	
a. Tooth Fillings	7,600
b. Tooth Extraction (except removal of wisdom tooth or impacted tooth)	
c. X-ray (including oral panoramic x-ray)	
d. Inlays & Onlays (except gold inlays and onlays)	
e. Drainage of Abscesses	
f. Root Canal Work	
g. Periodontal Surgery other than for Cosmetic Purposes	
h. Routine Oral Examination (once every Policy Year)	
i. Scaling and Polishing (once every Policy Year)	
2. Major Restorative Treatment	
a. Removal of Wisdom Tooth or Impacted Tooth	14,400
b. New or Repair of Dentures	
c. New or Repair of Crown (excluding gold crowns)	
d. New or Repair of Bridge Work (excluding gold bridge work)	
e. Implants	
f. Pins for Cusp Restoration	
g. Apicoectomy	
h. Orthodontic Treatment	
III. Supplementary Maternity Benefit^{+1.6, 41.42} (per pregnancy)	
1. Normal Delivery ²⁶	
a. Pre-natal Check-up	50,000
b. Post-natal Check-up	
c. Normal Delivery	
2. Caesarean Section ²⁶	
a. Pre-natal Check-up	100,000
b. Post-natal Check-up	
c. Caesarean Section	

⁸ Please contact your consultant should you need the Benefit Schedule in USD.

⁺ Subject to the Annual Limit and Overall Lifetime Limit specified as such in the Benefit Schedule of the MediChamp Insurance Plan.

[®] Recommendation by a registered medical practitioner in writing is required.

The product information in this document does not contain the full terms of this Plan (including Optional Supplementary Benefits) and the full terms can be found in the Policy Document.

This Plan may be purchased as a standalone plan without bundling with other type(s) of insurance product. You are required to read the relevant product brochure, the Policy Provisions and the illustrations presented by your licensed insurance intermediary of this Plan (including Optional Supplementary Benefits) in order to fully understand the details of the definitions, charges, product features, exclusions, and conditions of payment of claims, etc. plus complete terms and conditions.

Remarks:

1. While this Plan is in force, subject to all of the terms and conditions of this Plan and provided that this Plan continues to be available for renewal and the requirements of remark 2 are met, we shall guarantee to renew MediChamp Insurance Plan (including Optional Supplementary Benefits) every year during the Coverage Period specified in At-a-Glance table. For avoidance of doubt, the Supplementary Out-patient Benefit, the Supplementary Dental Benefit and the Supplementary Maternity Benefit shall cease when MediChamp Insurance Plan is terminated.
2. Should the Insured changes their country of residence or occupation or job duties, notification in writing should be sent to us no later than one month upon such change. If the Insured changes their country of residence, we reserve the right to adjust the premium on the Policy Anniversary immediately following the date of change of country of residence in accordance with the then prevailing premium rates as specified by us. If the Insured changes occupation or job duties: (1) for those which is/are then classified by us as non-insurable (you have the right to request such classification at any time), we reserve the right to terminate this Plan and return any unused premium on a pro-rata basis; or (2) for those which is/are then classified by us as having an occupation or job duties which is/are more hazardous than that/those of the Insured as stated in the application for this Policy or last communication to us, we reserve the right to adjust the premium based on the then prevailing premium rate as specified by us (you have the right to request such classification and the rules/basis of premium adjustment at any time) and charge the premium difference from the date on which the Insured changed his/her occupation or job duties.
3. Not applicable to Plans with Area of Coverage in Asia.
4. Only applicable to Plans with Area of Coverage Worldwide (excl. USA) and Asia.
5. Supplementary Dental Benefit must be enrolled together with Supplementary Out-patient Benefit.
6. Supplementary Maternity Benefit must be enrolled together with Supplementary Out-patient Benefit and Supplementary Dental Benefit.
7. After this Plan has been in force for at least 3 years and subject to our then prevailing rules, you may apply to convert this Plan to a designated medical plan available and offered by us at that time at the Policy Anniversary that is on or immediately following Insured's 50th, 55th, 60th or 65th birthday. You must make a written request to us in our prescribed form within 31 days before the relevant Policy Anniversary without providing further evidence of insurability of the Insured. Once we approve the written request, this Plan will be terminated automatically and cannot be reinstated. The amount of premium of the new designated medical plan will be determined based on the attained age of the Insured and the then prevailing premium rate as specified by us at the time of plan change. Please refer to Policy Provision for details.
8. Subject to our then prevailing rules, you may apply for this option by making a written request to us in our prescribed form within 31 days before the Policy Anniversary that is on or immediately following Insured's 50th, 55th, 60th or 65th birthday. No further evidence of insurability of the Insured is required but the amount of premium will be subject to change. It is allowed to exercise the option of reducing Annual Deductible (not applicable to the plan with 0 Annual Deductible Amount) and option to upgrade Area of Coverage at specified ages once respectively and is irrevocable once exercised. Option to upgrade Area of Coverage at specified ages is only applicable when this Plan has been in force for at least 3 years and the residency of the Insured is different from the Area of Coverage as specified in the Benefit Schedule in policy of this Plan at the time of application.
9. Specifically Approved Personalised Drugs must be approved by and registered with the regulatory authority for pharmaceutical products in USA, Europe or Japan, and is not registered with the Department of Health in Hong Kong and is imported to Hong Kong from USA / Europe / Japan (as applicable) for treatment of the Insured's Cancer under the Import Licence (Form 3) granted by the Department of Health in Hong Kong. The Drugs must be a Medically Necessary for treatment of the Insured's Cancer and is prescribed and clinically appropriate in compliance with the regulatory requirements in USA / Europe / Japan (as applicable) with respect to indications and dosages, frequency and duration as confirmed and documented by the attending cancer Specialist who is responsible for such Cancer treatment and the ongoing medical management of the Insured. Such Specialist must be a registered Medical Practitioner in Hong Kong. No benefit is payable unless you have obtained our authorization before application for the Import Licence (Form 3) is filed with the Department of Health in Hong Kong.
10. Immediate family member refers to the legally married spouse or a child or parent of the Insured.
11. We will reimburse the actual charges up to and not exceeding the Reasonable and Customary Charges for the fee incurred for DNA test performed on an Immediate Family Member in relation to the Cancer suffered by the Insured, provided that the DNA test is performed within 1 year after the date of the Unequivocal Diagnosis of the Cancer of the Insured, subject to the Maximum Limit per person per Cancer of the Insured and the maximum number of Immediate Family Members specified in the Benefit Schedule.
12. We will pay the Newborn Cash upon the birth of every child of the Insured provided that the date of birth must be after 12 months from the Policy Effective Date or the date of reinstatement (whichever is later).
13. We will reimburse the actual charges up to and not exceeding the Reasonable and Customary Charges for the Insured's Confinement and Medically Necessary surgical procedures in a Hospital as recommended in writing by the Insured's attending Medical Practitioner due to covered pregnancy complications provided that the date of Unequivocal Diagnosis must be after 12 months from the Policy Effective Date or the date of reinstatement (whichever is later). Once this benefit is paid, all other Living Benefits as provided in the Benefit Schedule shall cease to be payable with respect to the same Confinement.
14. If the Insured's child is born before 32 weeks of gestation, is Confined in an ICU at birth, and the date of birth is after 12 months from the Policy Effective Date or the date of reinstatement (whichever is later), we will pay an ICU Daily Cash for Premature Newborn Child benefit for each day the child is Confined in the ICU up to the maximum number of calendar days as specified in the Benefit Schedule.
15. Where you have 2 claims for Living Benefits in respect of charges incurred by or for the Insured on 2 different dates, if the latter claim is furnished to us ahead of the former one such that we have paid a Living Benefit for the latter claim by applying a No Claim Annual Deductible Discount which would not have been granted had the former claim been furnished to us first ("Illegitimate No Claim Annual Deductible Discount"), we will, before we pay any benefit for the former claim, deduct therefrom any excess amount of benefit which we have paid for the latter claim due to application of the Illegitimate No Claim Annual Deductible Discount. For avoidance of doubt, where the commencement and the end of a Confinement or Stay fall into 2 different Policy Years, the applicable Annual Deductible and Annual Limit for such Confinement or Stay shall be the Annual Deductible and Annual Limit of the Policy Year in which the date of commencement of Confinement or Stay falls, and this shall apply to the calculation of all Living Benefit claim.
16. Except the Disability Subsidy benefit, Hospital Cash benefit, Out-patient Surgery Cash benefit, Newborn Cash benefit and ICU Daily Cash for Premature Newborn Child benefit, the amount of a Living Benefit is equal to the actual charges incurred by or for the Insured (up to and not exceeding the Reasonable and Customary Charges) less the higher of (i) the Annual Deductible (if any) and (ii) the actual amount reimbursed or recoverable under any law, medical programs or insurance policies provided by any governments, companies or other insurance providers, as evidenced by the certified copy of medical receipt(s) which is / are satisfactory to us ("Compensation"). Where the above equation yields a negative figure, no Living Benefit shall be paid. Irrespective of whether a Living Benefit is payable, the Annual Deductible (if any) for the relevant Policy Year shall be reduced by deducting therefrom (i) the amount of Compensation (if any) and (ii) the difference between the amount of the actual charges incurred by or for the Insured and the Compensation (if any). In no event shall the Annual Deductible (if any) for the relevant Policy Year be reduced to lower than 0.
17. "Free Health Check-up Service" are provided by the third party service provider designated by us and will be performed at medical clinics designated by us. We reserve the right to terminate or change the terms and conditions of the relevant services without prior notice and assumes no responsibility of the services provided by the third party service provider. The scope of health checkup service of "Free Health Checkup Service" is determined by us at the time of providing the free health checkup service. "Free Health Check-up Service" means the Policy Owner does not need to pay any fees for the designated health check-up services provided by the Plan. If the Insured receives check-up services other than the designated services, he/she needs to pay for relevant fees.
18. Medical Value-added Service and Free Worldwide Emergency Assistance Services are provided by the third party service provider and does not constitute part of this Plan. Chow Tai Fook Life Insurance Company Limited reserves the right to change the details, terms and conditions of Medical Value-added Service and Free Worldwide Emergency Assistance Services without prior notice and assumes no responsibility of the services provided by the third-party service provider. These services do not require additional premium. For details, terms and conditions of Medical Value-added Service, please refer to the CTF Life website or contact your financial consultant.
19. Claims for core benefit items (A) I – VI (excluding Benefits IV(2e), IV(8-9) and V(1,3) in Benefit Schedule) and supplementary benefits must comply with the principle of "Reasonable and Customary". For the definition of "Reasonable and Customary", please refer to point 7 of Important Notice.
20. Unless it is necessitated by Accident or Emergency, no Living Benefits or benefit shall be payable under this Plan (including Optional Supplementary Benefits) for any Confinement / Stay, surgery, medical treatment, consultation, check-up and/ or service which takes place outside the Area of Coverage. Asia means Afghanistan, Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, North Korea, Pakistan, Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan, Australia, New Zealand and Vietnam.
Worldwide (excl. USA) means worldwide excluding the United States of America (USA) and US Minor Outlying Islands.
Worldwide means worldwide.

21. We shall reduce the amount of Living Benefits payable to 60% of the original amount of benefit if: (i) the Insured has taken up residence in the USA for 183 calendar days or more within 12 months immediately before the commencement of Confinement / Stay, medical treatment and/or service in the USA; or (ii) the Insured is Confined / Stays or undergoes Out-patient surgery in the USA without having first obtained our pre-authorization unless necessitated by Accident or Emergency. Applications for pre-authorization will not be considered unless all required documents and written proof are received by us no less than 2 weeks before the date of Confinement / Stay or Out-patient surgery.
22. If the Insured is Confined in a room level of hospital accommodation higher than his / her entitled room level of hospital accommodation, whether voluntarily or involuntarily, we shall reduce the amount of benefits payable, for details:

The entitled room level under this Plan	Actual Confined room level	The amount of benefits payable shall be reduced to the following percentage of original amount of benefit
Standard private room under "Worldwide", "Worldwide (excl. USA)" or "Asia" (outside Hong Kong, Macau, Australia & New Zealand) plan	Above standard private room	25%
	Above semi-private and up to standard private room	50%
Semi-private room under "Asia" (inside Hong Kong, Macau, Australia & New Zealand) plan	Above standard private room	25%

23. (Applicable to non-Hong Kong resident Insured only) This Plan only covers any Injury or Illness which is Unequivocally Diagnosed in, and any Confinement, consultation, test, treatment, surgery and nursing service which take place in and medical appliances which are purchased / hired in the People's Republic of China (except Hong Kong and Macau) in a Hospital that is classified by the government of the People's Republic of China as Grade 3A or in a Hospital which is in the list of approved hospitals as determined by us from time to time and such list of approved hospitals will be provided to the Owner upon request.
24. This benefit is restricted to 1 extra bed for 1 person to accompany the Insured.
25. This benefit is restricted to nursing services provided by 1 Licensed or Graduate Nurse during any given period of time.
26. Once claim for this medical procedure is payable, no any other Living Benefits will be payable in respect of same medical procedure under this Plan.
27. If a benefit for In- / Out-patient Surgical Expenses is paid for an Injury, we will reimburse the actual charges for reconstructive surgeries incurred within 12 calendar months from the date of Accident. If a benefit for In-/Out-patient Surgical Expenses is paid for an Illness and the Insured undergoes mastectomy (one breast or both), we will reimburse the actual charges for reconstructive surgeries incurred for reconstruction of the Insured's breast(s) within 12 calendar months from the date of the mastectomy.
28. The Insured may only choose to visit any one of Chiropractor, Physiotherapist, Speech Therapist or Occupational Therapist for consultation per day.
29. We will reimburse the actual charges up to and not exceeding the Reasonable and Customary Charges for the Insured's Stay in a registered hospice to receive care and nursing services provided by the hospice if the Insured has been Unequivocally Diagnosed and certified as having no more than 12 calendar months to live from the date of the Unequivocal Diagnosis and certification. This benefit is only payable once per lifetime of the Insured.
30. Limited to Echocardiogram (ECHO), Magnetic Resonance Imaging (MRI), Computerized Tomography Scan (CT Scan) and Positron Emission Tomography Scan (PET Scan).
31. The Insured may only choose to visit any one of Chiropractor, Physiotherapist, Speech Therapist, Occupational Therapist, Neurosurgeon, Neurologist, Cardiologist or Chinese Medical Practitioner for consultation per day.
32. We will pay this benefit if the Insured suffers a Stroke or Heart Attack, and as a result thereof, (i) becomes unable to perform 3 or more Activities of Daily Living for at least 6 consecutive months from the date of Unequivocal Diagnosis of Stroke or Heart Attack ("Eligible Disability") and (ii) stays in a premises other than a Hospital during the period of Eligible Disability.
33. Only applicable if the Insured is suffering from chronic and irreversible failure of the function of all kidney(s) and requires regular long-term dialysis.
34. If the Insured is Confined for Illness or Injury, we will reimburse the actual charges up to and not exceeding the Reasonable and Customary Charges for the Medically Necessary treatment of HIV Infection (including Acquired Immunodeficiency Syndrome) of the Insured during the Confinement. This benefit is only payable if the signs or symptoms of HIV Infection (including Acquired Immunodeficiency Syndrome) first occur after the Policy has been effective for 5 consecutive Policy Years. This benefit is only payable once per lifetime of the Insured and is subject to the Maximum Limit per lifetime specified in the Benefit Schedule.
35. The relevant Illness must be diagnosed after 12 policy months from the Policy Effective Date or the date of reinstatement (whichever is later).
36. Organ transplant benefit is only payable if the Insured undergo the designated organ transplant operation after this Plan has been effective for 1 uninterrupted Policy Year. We will reimburse the actual charges up to and not exceeding the Reasonable and Customary Charges for the Insured's Confinement and Medically Necessary operation in a Hospital for the receipt of heart, kidney, liver, lung, pancreas, bone marrow transplantation or transplantation of hematopoietic stem cells as a result of hematopoietic function damage or malignant tumour of the blood forming system from a legally certified and verified source of donation as recommended in writing by the Insured's attending Medical Practitioner. We will also reimburse the actual charges incurred by the living donor up to but not exceeding the Reasonable and Customary Charges for the living donor's Confinement and the designated organ transplant operation in a Hospital. The cost of acquisition of any organs otherwise than in accordance with the laws of the place of organ transplant operation and the cost for transportation of the organ is not covered. Once this benefit is paid, all other Living Benefits as provided in the Benefit Schedule shall cease to be payable with respect to the same transplantation.
37. The charges incurred during the Confinement is not higher than the public charges for eligible persons prescribed by the Hospital Authority of Hong Kong from time to time.
38. We will reimburse the actual charges up to and not exceeding the Reasonable and Customary Charges for Emergency treatment or procedures performed in the Hospital if the Insured sustains an Injury and is treated on Out-patient basis in the out-patient department of a Hospital within 24 hours of the Accident which caused the Injury.
39. We will reimburse the actual charges for Emergency dental treatment due to Accident provided to the Insured and necessitated solely by an Injury caused to sound natural teeth provided such treatment is provided within 30 calendar days of the Accident and in a legally registered dental clinic or Hospital. This benefit shall limit to specific exclusions.
40. If, after the death of the Insured, a major organ of the Insured is donated and transplanted in Hong Kong, we shall pay to the Beneficiary the Additional Death Benefit for Organ Donor as shown in the Benefit Schedule to this Plan. This benefit is only payable once irrespective of the number of organs donated. For the definition of major organ, please refer to the Policy Provision.
41. Only applicable to customers who live in Hong Kong holding Hong Kong identity card and choose to attach the plan with 0 Annual Deductible and specific Area of Coverage.
42. We will not cover any Confinement, surgery, consultation, diagnosis, check-ups and / or services beyond the Area of Coverage. If any Confinement, surgery, consultations, diagnosis, check-ups, services and / or dental treatment have been paid or payable under any laws or other Out-patient / Maternity / Dental benefit or other policy, except those conforming to all other provisions under Supplementary Out-patient Benefit / Supplementary Maternity Benefit / Supplementary Dental Benefit and not been covered or payable under such laws or benefits, such Confinement, surgery, consultations, diagnosis, check-ups, services and / or dental treatment will not be paid additionally. In determining such extent, we reserve our right to apply such compensation or benefit(s) (whether itemized or not) to adjust any such charges in a manner we may consider appropriate.
43. Once this benefit is payable, no other benefit will be payable in respect of such consultation and prescribed Western Medication under Supplementary Out-patient Benefit.
44. The Insured may only choose to visit any one of Chinese Medical Practitioner (including the consultation fee and prescribed medication), Chiropractor or Physiotherapist for consultation per day.
45. We will reimburse the actual charges for 1 health check-up and 1 course of vaccination per Policy Year after 90 calendar days from the Plan Effective Date or, in the case of reinstatement, the effective date of reinstatement of this Plan (whichever is later).

MediChamp Insurance Plan – Basic Plan / Rider Annual Premium Table^{1,2} (HKD)

Future premiums will be reviewed and adjusted annually if necessary to reflect continuous medical inflation and overall claim experience under this Plan. First year premium of this Plan is based on the premiums stated below according to your current attained age, but cannot be regarded as the actual premiums payable by you in the future. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year.

Area of Coverage Plan and Annual Deductible	Worldwide	Worldwide (excl. USA)				Asia			
	0	0	18,000	38,000	68,000	0	18,000	38,000	68,000
Age									
0 - 20	27,408	14,995	6,508	5,836	5,093	8,919	4,001	3,439	3,095
21	30,356	15,442	6,849	6,166	5,223	9,069	4,104	3,542	3,187
22	32,995	15,962	7,215	6,495	5,375	9,286	4,242	3,656	3,290
23	35,318	16,551	7,580	6,825	5,564	9,560	4,402	3,783	3,417
24	37,321	17,199	7,958	7,143	5,789	9,905	4,585	3,932	3,542
25	39,008	17,930	8,346	7,474	6,048	10,306	4,803	4,093	3,691
26	40,376	18,732	8,748	7,792	6,342	10,776	5,044	4,264	3,852
27	41,436	19,592	9,159	8,122	6,661	11,315	5,319	4,459	4,025
28	42,179	20,536	9,573	8,440	7,015	11,910	5,618	4,678	4,207
29	42,604	21,537	10,009	8,759	7,403	12,576	5,949	4,895	4,402
30	42,710	22,622	10,444	9,077	7,828	13,298	6,305	5,136	4,608
31	43,994	23,447	10,692	9,348	8,086	13,757	6,489	5,308	4,746
32	45,456	24,249	10,893	9,584	8,312	14,170	6,637	5,457	4,860
33	47,095	25,004	11,033	9,820	8,500	14,536	6,752	5,594	4,975
34	48,910	25,723	11,116	10,032	8,653	14,858	6,821	5,720	5,067
35	50,913	26,405	11,141	10,221	8,783	15,133	6,855	5,835	5,136
36	51,951	26,511	11,328	10,374	8,805	15,189	6,935	5,926	5,193
37	52,788	26,618	11,541	10,516	8,841	15,259	7,016	5,984	5,251
38	53,425	26,724	11,764	10,622	8,865	15,316	7,085	6,042	5,286
39	53,861	26,830	12,012	10,715	8,901	15,385	7,142	6,076	5,296
40	54,097	26,937	12,271	10,775	8,924	15,441	7,200	6,088	5,308
41	55,347	27,455	12,696	11,187	9,265	15,958	7,429	6,317	5,515
42	56,808	28,116	13,191	11,706	9,726	16,623	7,715	6,614	5,777
43	58,470	28,917	13,757	12,330	10,280	17,437	8,060	6,970	6,098
44	60,333	29,860	14,382	13,049	10,939	18,399	8,448	7,383	6,489
45	62,408	30,933	15,077	13,875	11,706	19,524	8,897	7,865	6,924
46	63,786	32,289	15,597	14,346	12,118	20,108	9,263	8,127	7,177
47	65,060	33,845	16,103	14,759	12,496	20,623	9,630	8,357	7,417
48	66,251	35,577	16,586	15,125	12,826	21,059	10,009	8,552	7,623
49	67,335	37,499	17,057	15,442	13,097	21,425	10,397	8,724	7,818
50	68,325	39,609	17,517	15,714	13,333	21,712	10,788	8,862	7,979
51	70,966	41,283	18,166	16,162	13,722	22,366	11,177	9,183	8,219
52	74,102	42,933	18,874	16,633	14,123	23,087	11,567	9,550	8,471
53	77,721	44,571	19,628	17,140	14,548	23,879	11,968	9,951	8,735
54	81,823	46,186	20,441	17,670	14,995	24,751	12,369	10,397	9,011
55	86,409	47,778	21,313	18,225	15,467	25,691	12,770	10,879	9,298
56	90,181	49,535	22,433	19,392	16,409	26,998	13,298	11,406	9,779
57	94,001	51,339	23,683	20,784	17,507	28,476	13,859	11,968	10,330
58	97,867	53,189	25,051	22,386	18,791	30,128	14,467	12,576	10,960
59	101,781	55,076	26,536	24,214	20,240	31,949	15,120	13,229	11,658
60	105,754	57,008	28,151	26,265	21,856	33,945	15,820	13,917	12,427
61	113,745	62,514	30,685	28,516	23,906	37,189	17,368	15,144	13,436
62	123,106	69,221	33,608	30,968	26,230	40,961	19,237	16,577	14,581
63	133,833	77,167	36,921	33,644	28,799	45,259	21,415	18,215	15,855
64	145,940	86,314	40,634	36,520	31,628	50,098	23,914	20,074	17,254
65	159,426	96,688	44,726	39,621	34,717	55,462	26,723	22,126	18,778
66	171,850	103,774	47,767	41,931	36,921	58,844	28,718	23,788	20,291
67	184,854	110,574	50,714	44,113	39,008	61,917	30,643	25,461	21,874
68	198,410	117,094	53,567	46,175	40,965	64,679	32,501	27,135	23,536
69	212,532	123,330	56,324	48,120	42,803	67,133	34,299	28,819	25,290
70	227,221	129,282	58,989	49,946	44,524	69,277	36,042	30,517	27,112
71	238,279	136,025	61,912	52,635	46,576	72,923	37,968	32,064	28,466
72	249,136	142,675	64,812	55,381	48,592	76,579	39,872	33,590	29,806
73	259,804	149,241	67,689	58,176	50,561	80,259	41,763	35,103	31,124
74	270,260	155,724	70,530	61,040	52,494	83,961	43,632	36,582	32,420
75	280,527	162,114	73,335	63,963	54,392	87,687	45,489	38,048	33,704

MediChamp Insurance Plan – Basic Plan / Rider Annual Premium Table^{1,2} (HKD)

Area of Coverage Plan and Annual Deductible	Worldwide	Worldwide (excl. USA)				Asia			
	0	0	18,000	38,000	68,000	0	18,000	38,000	68,000
Age	The premiums stated below are applicable to renewal only ³								
76	290,595	168,420	76,117	66,934	56,242	91,425	47,324	39,494	34,953
77	300,473	174,633	78,876	69,965	58,069	95,185	49,135	40,926	36,191
78	310,140	180,751	81,611	73,064	59,837	98,956	50,934	42,324	37,407
79	319,618	186,787	84,298	76,212	61,583	102,762	52,711	43,713	38,599
80	328,895	192,739	86,975	79,418	63,279	106,579	54,476	45,075	39,779
81	336,817	197,549	89,096	81,611	64,801	109,618	55,749	46,154	40,777
82	344,338	202,088	91,112	83,673	66,251	112,541	56,918	47,162	41,717
83	351,458	206,344	92,986	85,595	67,629	115,327	57,973	48,103	42,611
84	358,154	210,316	94,754	87,387	68,950	117,998	58,937	48,963	43,448
85	364,460	214,018	96,393	89,038	70,200	120,531	59,784	49,765	44,250
86	370,342	217,437	97,914	90,547	71,390	122,951	60,529	50,499	44,996
87	375,824	220,572	99,306	91,925	72,510	125,231	61,182	51,163	45,683
88	380,905	223,437	100,578	93,163	73,571	127,399	61,721	51,760	46,337
89	385,574	226,019	101,733	94,271	74,562	129,440	62,157	52,275	46,922
90	389,829	228,316	102,758	95,238	75,493	131,354	62,490	52,734	47,473
91	394,155	231,677	104,257	96,677	76,612	133,485	63,327	53,479	48,183
92	398,163	235,002	105,741	98,079	77,721	135,560	64,175	54,224	48,882
93	401,853	238,290	107,204	99,470	78,806	137,567	65,035	54,970	49,569
94	405,213	241,532	108,665	100,826	79,878	139,504	65,905	55,714	50,247
95	408,255	244,750	110,103	102,146	80,928	141,385	66,777	56,448	50,923
96	410,977	247,921	111,517	103,454	81,965	143,206	67,649	57,182	51,576
97	413,382	251,068	112,933	104,728	82,978	144,961	68,531	57,916	52,218
98	415,469	254,168	114,323	105,978	83,981	146,658	69,426	58,650	52,860
99	417,226	257,246	115,704	107,204	84,959	148,285	70,331	59,371	53,479
100	418,663	260,275	117,070	108,395	85,926	149,856	71,236	60,094	54,098
101	422,848	262,880	118,237	109,478	86,786	151,359	71,948	60,689	54,638
102	427,080	265,509	119,428	110,574	87,658	152,872	72,669	61,297	55,187
103	431,347	268,162	120,619	111,683	88,531	154,396	73,392	61,917	55,737
104	435,662	270,838	121,821	112,791	89,415	155,944	74,126	62,536	56,300
105	440,024	273,549	123,046	113,923	90,311	157,502	74,871	63,154	56,861
106	444,421	276,283	124,273	115,066	91,206	159,074	75,617	63,784	57,422
107	448,865	279,054	125,511	116,210	92,127	160,667	76,373	64,427	57,996
108	453,356	281,836	126,773	117,376	93,046	162,271	77,140	65,070	58,581
109	457,883	284,653	128,034	118,543	93,977	163,899	77,909	65,723	59,165
110	462,469	287,506	129,318	119,734	94,920	165,539	78,688	66,376	59,762
111	467,090	290,383	130,615	120,937	95,863	167,189	79,480	67,041	60,357
112	471,758	293,282	131,912	122,139	96,818	168,863	80,270	67,717	60,954
113	476,473	296,218	133,232	123,366	97,796	170,548	81,073	68,394	61,573
114	481,248	299,177	134,565	124,591	98,775	172,257	81,886	69,082	62,180
115	486,058	302,171	135,919	125,841	99,753	173,977	82,700	69,769	62,810
116	490,915	305,189	137,276	127,103	100,755	175,719	83,526	70,469	63,431
117	495,830	308,241	138,643	128,375	101,758	177,473	84,362	71,168	64,071
118	500,781	311,330	140,033	129,660	102,782	179,250	85,212	71,879	64,714
119	505,790	314,442	141,436	130,957	103,808	181,038	86,059	72,601	65,356
120	510,849	317,590	142,851	132,265	104,846	182,849	86,919	73,324	66,009
121	515,952	320,761	144,277	133,586	105,895	184,683	87,791	74,057	66,675
122	521,115	323,968	145,716	134,919	106,956	186,529	88,674	74,802	67,339
123	526,326	327,209	147,179	136,273	108,017	188,397	89,556	75,548	68,016
124	531,596	330,475	148,651	137,630	109,101	190,278	90,450	76,305	68,691
125	536,912	333,788	150,136	139,008	110,198	192,180	91,355	77,072	69,380
126	542,276	337,124	151,634	140,400	111,294	194,106	92,273	77,840	70,068
127	547,699	340,495	153,154	141,801	112,413	196,044	93,190	78,620	70,767

Remarks:

- Renewal premium will base on your attained age and the applicable premium table at the time of renewal. Premiums are non-guaranteed, we will review and adjust the premium to reflect continuous medical inflation and overall claim experience under this Plan. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year. During the review, we may consider factors including but not limited to claim costs incurred from all policies under this Plan and the expected claim outgo in the future which reflects medical trends, medical cost inflation and the change in the product features revision.
- The annual premium table is for reference only, please contact your consultant for premiums in monthly and semi-annual payment mode.
- While this Plan is in force, subject to all of the terms and conditions of this Plan and provided that this Plan continues to be available for renewal and the requirements of remark 2 are met, we shall guarantee to renew this Plan (including Optional Supplementary Benefits) during the Coverage Period specified in At-a-Glance table each year regardless of your health status or claim history. For avoidance of doubt, the Supplementary Out-patient Benefit, the Supplementary Dental Benefit and the Supplementary Maternity Benefit shall cease when MediChamp Insurance Plan is terminated.

Effective Date: 23 November 2024

MediChamp Insurance Plan – Rider Annual Premium Table^{1,2} (USD)

Future premiums will be reviewed and adjusted annually if necessary to reflect continuous medical inflation and overall claim experience under this Plan. First year premium of this Plan is based on the premiums stated below according to your current attained age, but cannot be regarded as the actual premiums payable by you in the future. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year.

Area of Coverage Plan and Annual Deductible	Worldwide	Worldwide (excl. USA)				Asia			
	0	0	2,250	4,750	8,500	0	2,250	4,750	8,500
Age									
0 - 20	3,426	1,874	814	730	637	1,115	500	430	387
21	3,795	1,930	856	771	653	1,134	513	443	398
22	4,124	1,995	902	812	672	1,161	530	457	411
23	4,415	2,069	948	853	696	1,195	550	473	427
24	4,665	2,150	995	893	724	1,238	573	492	443
25	4,876	2,241	1,043	934	756	1,288	600	512	461
26	5,047	2,342	1,094	974	793	1,347	631	533	482
27	5,180	2,449	1,145	1,015	833	1,414	665	557	503
28	5,272	2,567	1,197	1,055	877	1,489	702	585	526
29	5,326	2,692	1,251	1,095	925	1,572	744	612	550
30	5,339	2,828	1,306	1,135	979	1,662	788	642	576
31	5,499	2,931	1,337	1,169	1,011	1,720	811	664	593
32	5,682	3,031	1,362	1,198	1,039	1,771	830	682	608
33	5,887	3,126	1,379	1,228	1,063	1,817	844	699	622
34	6,114	3,215	1,390	1,254	1,082	1,857	853	715	633
35	6,364	3,301	1,393	1,278	1,098	1,892	857	729	642
36	6,494	3,314	1,416	1,297	1,101	1,899	867	741	649
37	6,599	3,327	1,443	1,315	1,105	1,907	877	748	656
38	6,678	3,341	1,471	1,328	1,108	1,915	886	755	661
39	6,733	3,354	1,502	1,339	1,113	1,923	893	760	662
40	6,762	3,367	1,534	1,347	1,116	1,930	900	761	664
41	6,918	3,432	1,587	1,398	1,158	1,995	929	790	689
42	7,101	3,515	1,649	1,463	1,216	2,078	964	827	722
43	7,309	3,615	1,720	1,541	1,285	2,180	1,008	871	762
44	7,542	3,733	1,798	1,631	1,367	2,300	1,056	923	811
45	7,801	3,867	1,885	1,734	1,463	2,441	1,112	983	866
46	7,973	4,036	1,950	1,793	1,515	2,514	1,158	1,016	897
47	8,133	4,231	2,013	1,845	1,562	2,578	1,204	1,045	927
48	8,281	4,447	2,073	1,891	1,603	2,632	1,251	1,069	953
49	8,417	4,687	2,132	1,930	1,637	2,678	1,300	1,091	977
50	8,541	4,951	2,190	1,964	1,667	2,714	1,349	1,108	997
51	8,871	5,160	2,271	2,020	1,715	2,796	1,397	1,148	1,027
52	9,263	5,367	2,359	2,079	1,765	2,886	1,446	1,194	1,059
53	9,715	5,571	2,454	2,143	1,819	2,985	1,496	1,244	1,092
54	10,228	5,773	2,555	2,209	1,874	3,094	1,546	1,300	1,126
55	10,801	5,972	2,664	2,278	1,933	3,211	1,596	1,360	1,162
56	11,273	6,192	2,804	2,424	2,051	3,375	1,662	1,426	1,222
57	11,750	6,417	2,960	2,598	2,188	3,560	1,732	1,496	1,291
58	12,233	6,649	3,131	2,798	2,349	3,766	1,808	1,572	1,370
59	12,723	6,885	3,317	3,027	2,530	3,994	1,890	1,654	1,457
60	13,219	7,126	3,519	3,283	2,732	4,243	1,978	1,740	1,553
61	14,218	7,814	3,836	3,565	2,988	4,649	2,171	1,893	1,680
62	15,388	8,653	4,201	3,871	3,279	5,120	2,405	2,072	1,823
63	16,729	9,646	4,615	4,206	3,600	5,657	2,677	2,277	1,982
64	18,243	10,789	5,079	4,565	3,954	6,262	2,989	2,509	2,157
65	19,928	12,086	5,591	4,953	4,340	6,933	3,340	2,766	2,347
66	21,481	12,972	5,971	5,241	4,615	7,356	3,590	2,974	2,536
67	23,107	13,822	6,339	5,514	4,876	7,740	3,830	3,183	2,734
68	24,801	14,637	6,696	5,772	5,121	8,085	4,063	3,392	2,942
69	26,567	15,416	7,041	6,015	5,350	8,392	4,287	3,602	3,161
70	28,403	16,160	7,374	6,243	5,566	8,660	4,505	3,815	3,389
71	29,785	17,003	7,739	6,579	5,822	9,115	4,746	4,008	3,558
72	31,142	17,834	8,102	6,923	6,074	9,572	4,984	4,199	3,726
73	32,476	18,655	8,461	7,272	6,320	10,032	5,220	4,388	3,891
74	33,783	19,466	8,816	7,630	6,562	10,495	5,454	4,573	4,053
75	35,066	20,264	9,167	7,995	6,799	10,961	5,686	4,756	4,213

MediChamp Insurance Plan – Rider Annual Premium Table^{1,2} (USD)

Area of Coverage Plan and Annual Deductible	Worldwide	Worldwide (excl. USA)				Asia			
	0	0	2,250	4,750	8,500	0	2,250	4,750	8,500
Age	The premiums stated below are applicable to renewal only ³								
76	36,324	21,053	9,515	8,367	7,030	11,428	5,916	4,937	4,369
77	37,559	21,829	9,860	8,746	7,259	11,898	6,142	5,116	4,524
78	38,768	22,594	10,201	9,133	7,480	12,370	6,367	5,291	4,676
79	39,952	23,348	10,537	9,527	7,698	12,845	6,589	5,464	4,825
80	41,112	24,092	10,872	9,927	7,910	13,322	6,810	5,634	4,972
81	42,102	24,694	11,137	10,201	8,100	13,702	6,969	5,769	5,097
82	43,042	25,261	11,389	10,459	8,281	14,068	7,115	5,895	5,215
83	43,932	25,793	11,623	10,699	8,454	14,416	7,247	6,013	5,326
84	44,769	26,290	11,844	10,923	8,619	14,750	7,367	6,120	5,431
85	45,558	26,752	12,049	11,130	8,775	15,066	7,473	6,221	5,531
86	46,293	27,180	12,239	11,318	8,924	15,369	7,566	6,312	5,625
87	46,978	27,572	12,413	11,491	9,064	15,654	7,648	6,395	5,710
88	47,613	27,930	12,572	11,645	9,196	15,925	7,715	6,470	5,792
89	48,197	28,252	12,717	11,784	9,320	16,180	7,770	6,534	5,865
90	48,729	28,540	12,845	11,905	9,437	16,419	7,811	6,592	5,934
91	49,269	28,960	13,032	12,085	9,577	16,686	7,916	6,685	6,023
92	49,770	29,375	13,218	12,260	9,715	16,945	8,022	6,778	6,110
93	50,232	29,786	13,401	12,434	9,851	17,196	8,129	6,871	6,196
94	50,652	30,192	13,583	12,603	9,985	17,438	8,238	6,964	6,281
95	51,032	30,594	13,763	12,768	10,116	17,673	8,347	7,056	6,365
96	51,372	30,990	13,940	12,932	10,246	17,901	8,456	7,148	6,447
97	51,673	31,384	14,117	13,091	10,372	18,120	8,566	7,240	6,527
98	51,934	31,771	14,290	13,247	10,498	18,332	8,678	7,331	6,608
99	52,153	32,156	14,463	13,401	10,620	18,536	8,791	7,421	6,685
100	52,333	32,534	14,634	13,549	10,741	18,732	8,905	7,512	6,762
101	52,856	32,860	14,780	13,685	10,848	18,920	8,994	7,586	6,830
102	53,385	33,189	14,929	13,822	10,957	19,109	9,084	7,662	6,898
103	53,918	33,520	15,077	13,960	11,066	19,300	9,174	7,740	6,967
104	54,458	33,855	15,228	14,099	11,177	19,493	9,266	7,817	7,038
105	55,003	34,194	15,381	14,240	11,289	19,688	9,359	7,894	7,108
106	55,553	34,535	15,534	14,383	11,401	19,884	9,452	7,973	7,178
107	56,108	34,882	15,689	14,526	11,516	20,083	9,547	8,053	7,250
108	56,670	35,230	15,847	14,672	11,631	20,284	9,643	8,134	7,323
109	57,235	35,582	16,004	14,818	11,747	20,487	9,739	8,215	7,396
110	57,809	35,938	16,165	14,967	11,865	20,692	9,836	8,297	7,470
111	58,386	36,298	16,327	15,117	11,983	20,899	9,935	8,380	7,545
112	58,970	36,660	16,489	15,267	12,102	21,108	10,034	8,465	7,619
113	59,559	37,027	16,654	15,421	12,225	21,319	10,134	8,549	7,697
114	60,156	37,397	16,821	15,574	12,347	21,532	10,236	8,635	7,773
115	60,757	37,771	16,990	15,730	12,469	21,747	10,338	8,721	7,851
116	61,364	38,149	17,160	15,888	12,594	21,965	10,441	8,809	7,929
117	61,979	38,530	17,330	16,047	12,720	22,184	10,545	8,896	8,009
118	62,598	38,916	17,504	16,208	12,848	22,406	10,652	8,985	8,089
119	63,224	39,305	17,680	16,370	12,976	22,630	10,757	9,075	8,170
120	63,856	39,699	17,856	16,533	13,106	22,856	10,865	9,166	8,251
121	64,494	40,095	18,035	16,698	13,237	23,085	10,974	9,257	8,334
122	65,139	40,496	18,215	16,865	13,370	23,316	11,084	9,350	8,417
123	65,791	40,901	18,397	17,034	13,502	23,550	11,195	9,444	8,502
124	66,450	41,309	18,581	17,204	13,638	23,785	11,306	9,538	8,586
125	67,114	41,724	18,767	17,376	13,775	24,023	11,419	9,634	8,673
126	67,785	42,141	18,954	17,550	13,912	24,263	11,534	9,730	8,759
127	68,462	42,562	19,144	17,725	14,052	24,506	11,649	9,828	8,846

Remarks:

- Renewal premium will base on your attained age and the applicable premium table at the time of renewal. Premiums are non-guaranteed, we will review and adjust the premium to reflect continuous medical inflation and overall claim experience under this Plan. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year. During the review, we may consider factors including but not limited to claim costs incurred from all policies under this Plan and the expected claim outgo in the future which reflects medical trends, medical cost inflation and the change in the product features revision.
- The annual premium table is for reference only, please contact your consultant for premiums in monthly and semi-annual payment mode.
- While this Plan is in force, subject to all of the terms and conditions of this Plan and provided that this Plan continues to be available for renewal and the requirements of remark 2 are met, we shall guarantee to renew this Plan (including Optional Supplementary Benefits) during the Coverage Period specified in At-a-Glance table each year regardless of your health status or claim history. For avoidance of doubt, the Supplementary Out-patient Benefit, the Supplementary Dental Benefit and the Supplementary Maternity Benefit shall cease when MediChamp Insurance Plan is terminated.

Effective Date: 23 November 2024

MediChamp Insurance Plan - Supplementary Out-patient Benefit Annual Premium Table^{1,2}

Future premiums will be reviewed and adjusted annually if necessary to reflect continuous medical inflation and overall claim experience under this Plan. First year premium of the Supplementary Out-patient Benefit under this Plan is based on the premiums stated below according to your current attained age, but cannot be regarded as the actual premiums payable by you in the future. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year.

Age	Policy Currency		Age	Policy Currency	
	HKD	USD		HKD	USD
0 - 4	21,386	2,674	The premiums stated below are applicable to renewal only ³		
5 - 18	16,396	2,049	71	120,759	15,094
19	15,256	1,906	72	126,093	15,762
20	14,114	1,765	73	131,487	16,436
21	14,662	1,833	74	136,952	17,120
22	15,208	1,901	75	142,465	17,808
23	15,766	1,970	76	148,049	18,506
24	16,313	2,040	77	153,681	19,210
25	16,871	2,109	78	159,384	19,923
26	17,429	2,179	79	165,146	20,644
27	18,000	2,249	80	170,968	21,372
28	18,558	2,321	81	177,514	22,189
29	19,128	2,391	82	184,226	23,028
30	19,698	2,463	83	191,129	23,892
31	20,269	2,534	84	198,223	24,778
32	20,852	2,605	85	205,482	25,686
33	21,422	2,678	86	212,932	26,616
34	22,004	2,750	87	220,547	27,568
35	22,586	2,824	88	228,353	28,545
36	23,180	2,896	89	236,349	29,543
37	23,762	2,970	90	244,511	30,564
38	24,356	3,044	91	252,277	31,784
39	24,950	3,118	92	264,483	33,060
40	25,544	3,194	93	275,128	34,391
41	26,565	3,322	94	286,201	35,776
42	27,683	3,460	95	297,726	37,215
43	28,871	3,608	96	309,679	38,710
44	30,142	3,767	97	322,082	40,260
45	31,485	3,936	98	334,913	41,864
46	32,922	4,115	99	348,184	43,523
47	34,431	4,303	100	361,895	45,237
48	36,023	4,503	101	365,520	45,690
49	37,687	4,712	102	369,167	46,146
50	39,445	4,931	103	372,862	46,608
51	41,536	5,192	104	376,592	47,074
52	43,746	5,469	105	380,359	47,545
53	46,098	5,763	106	384,161	48,020
54	48,569	6,071	107	387,997	48,501
55	51,159	6,395	108	391,883	48,986
56	53,892	6,736	109	395,804	49,475
57	56,743	7,093	110	399,760	49,969
58	59,713	7,464	111	403,752	50,469
59	62,827	7,853	112	407,792	50,974
60	66,058	8,258	113	411,866	51,484
61	69,979	8,747	114	415,990	51,998
62	74,113	9,265	115	420,148	52,518
63	78,485	9,811	116	424,353	53,044
64	83,096	10,387	117	428,596	53,574
65	87,919	10,990	118	432,885	54,110
66	92,980	11,622	119	437,209	54,652
67	98,256	12,282	120	441,581	55,198
68	103,769	12,972	121	446,001	55,749
69	109,519	13,689	122	450,457	56,307
70	115,483	14,436	123	454,959	56,870
			124	459,509	57,439
			125	464,108	58,014
			126	468,753	58,594
			127	473,434	59,179

Remarks:

- Renewal premium will base on your attained age and the applicable premium table at the time of renewal. Premiums are non-guaranteed, we will review and adjust the premium to reflect continuous medical inflation and overall claim experience under this Plan. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year. During the review, we may consider factors including but not limited to claim costs incurred from all policies under this Plan and the expected claim outgo in the future which reflects medical trends, medical cost inflation and the change in the product features revision.
- The annual premium table is for reference only, please contact your consultant for premiums in monthly and semi-annual payment mode.
- While this Plan is in force, subject to all of the terms and conditions of this Plan and provided that this Plan continues to be available for renewal and the requirements of remark 2 are met, we shall guarantee to renew this Plan (including Optional Supplementary Benefits) during the Coverage Period specified in At-a-Glance table each year regardless of your health status or claim history. For avoidance of doubt, the Supplementary Out-patient Benefit, the Supplementary Dental Benefit and the Supplementary Maternity Benefit shall cease when MediChamp Insurance Plan is terminated.

Effective Date: 23 November 2024

MediChamp Insurance Plan - Supplementary Dental Benefit Annual Premium Table^{1,2}

Future premiums will be reviewed and adjusted annually if necessary to reflect continuous medical inflation and overall claim experience under this Plan. First year premium of the Supplementary Dental Benefit under this Plan is based on the premiums stated below according to your current attained age, but cannot be regarded as the actual premiums payable by you in the future. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year.

Age	Policy Currency	
	HKD	USD
0 - 70	6,178	773
The premiums stated below are applicable to renewal only ³		
71 - 74	6,178	773

MediChamp Insurance Plan - Supplementary Maternity Benefit Annual Premium Table^{1,2}

Future premiums will be reviewed and adjusted annually if necessary to reflect continuous medical inflation and overall claim experience under this Plan. First year premium of the Supplementary Maternity Benefit under this Plan is based on the premiums stated below according to your current attained age, but cannot be regarded as the actual premiums payable by you in the future. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year.

Age	Policy Currency	
	HKD	USD
0 - 17	Not applicable	
18	27,564	3,445
19	30,415	3,802
20	33,267	4,158
21	36,106	4,513
22	38,851	4,857
23	41,513	5,188
24	44,079	5,510
25	46,562	5,820
26	48,950	6,119
27	51,255	6,406
28	53,465	6,683
29	55,591	6,948
30	57,623	7,204
31	57,872	7,233
32	57,718	7,216
33	57,172	7,146
34	56,221	7,027
35	54,878	6,859
36	53,132	6,641
37	50,993	6,374
38	48,451	6,057
39	45,516	5,689
40	42,178	5,272
41 - 45	42,178	5,272
The premiums stated below are applicable to renewal only ³		
46 - 49	42,178	5,272

Remarks:

1. Renewal premium will base on your attained age and the applicable premium table at the time of renewal. Premiums are non-guaranteed, we will review and adjust the premium to reflect continuous medical inflation and overall claim experience under this Plan. We will notify the Policy Owner in writing at least 30 days before the Renewal Effective Date about the actual premium payable for the coming year. During the review, we may consider factors including but not limited to claim costs incurred from all policies under this Plan and the expected claim outgo in the future which reflects medical trends, medical cost inflation and the change in the product features revision.
2. The annual premium table is for reference only, please contact your consultant for premiums in monthly and semi-annual payment mode.
3. While the Supplementary Out-patient Benefit, the Supplementary Dental Benefit and the Supplementary Maternity Benefit is in force, subject to all of the terms and conditions of this Plan and provided that this Plan continues to be available for renewal and the requirements of remark 2 are met, we shall guarantee to renew regardless of your health status or claim history.

Effective Date: 23 November 2024

Important Information

1. Cooling-off Right

If you wish to exercise your cooling-off right, you can cancel the policy and obtain a refund of premium and levy paid by giving a written notice to us. Such notice must be signed by you and submitted to our office at 7/F, NEO, 123 Hoi Bun Road, Kwun Tong, Kowloon within 21 calendar days immediately following the day of delivery of the policy or the Cooling-off Notice to you or your nominated representative (whichever is the earlier). The Cooling-off Notice should inform you of the availability of the policy and expiry date of the cooling-off period.

2. Key Product Risks

i. Non-payment of Premium

If there is any non-payment of premiums on or before the end of the Grace Period of 31 days from its due date, this Plan / Supplementary Out-patient Benefit / Supplementary Dental Benefit / Supplementary Maternity Benefit will automatically be terminated and you will lose your protection under this Plan.

ii. Termination

The Insured's coverage under this Plan and / or Optional Supplementary Benefits shall be automatically terminated on the earliest of the followings:

1. any premium under this Plan and / or Optional Supplementary Benefits remains in default at the end of the Grace Period; unless the automatic non-forfeiture provisions, contribution interruption provision or premium holiday provision (as the case may be) of the basic plan added to this Plan becomes applicable; or
2. the basic plan added to this Plan (if applicable) is cancelled or surrendered or terminated; or
3. the basic plan added to this Plan is converted into paid-up or extended term insurance policy under the non-forfeiture option provision of such basic plan (if applicable); or
4. the death of the Insured; or
5. your request to cancel or terminate this Plan and/or Optional Supplementary Benefits is accepted by us; or
6. the aggregate amount of Living Benefits paid or payable under the Benefit Provisions of this Plan reaches the Overall Lifetime Limit; or
7. your cancellation notice of this Plan and/or Optional Supplementary Benefits under the Renewal Provisions is received by us within the requisite period specified in the Renewal Provisions; or
8. the option to change insurance plan under specified ages is exercised successfully; or
9. the Plan End Date of the basic plan of this Plan and / or Optional Supplementary Benefits.

Optional Supplementary Benefits shall be automatically terminated on the earliest of the followings:

1. any premium under Optional Supplementary Benefits remains in default at the end of the Grace Period; unless the automatic non-forfeiture provisions, contribution interruption provision or premium holiday provision (as the case may be) of the basic plan added to this Plan becomes applicable; or
2. MediChamp Insurance Plan is cancelled or terminated; or
3. your request to cancel or terminate the Optional Supplementary Benefits is accepted by us; or
4. your cancellation notice under the Renewal Provisions is received by us within the requisite period specified in the Renewal Provisions; or
5. the Plan End Date of Optional Supplementary Benefits
6. [applicable to Rider: I. Supplementary Out-patient Benefit] this Plan is cancelled or terminated; or
7. [applicable to Rider: I. Supplementary Out-patient Benefit] this Plan or Supplementary Out-patient Benefit is cancelled or terminated; or
8. [applicable to Rider: I. Supplementary Out-patient Benefit] this Plan or Supplementary Dental Benefit or Supplementary Maternity Benefit is cancelled or terminated.

If this Plan / Optional Supplementary Benefits is terminated, subject to the Renewal Provisions, any premium(s) paid for the Policy Year will not be refunded. Termination of this Plan/including Optional Supplementary Benefits shall not affect your claims under this Plan / including Optional Supplementary Benefits arising before the date of termination. Payment or acceptance of any premium subsequent to termination shall not create any liability on our part but we shall refund any such premium received by us without interest.

In relation to expenses incurred due to an Illness or Injury before termination of this Plan/including Optional Supplementary Benefits, no benefit will be provided by this Plan/including Optional Supplementary Benefits since the date of its termination.

iii. Inflation Risk

When you review the benefits shown in the benefit illustrations, please note that the cost of living in the future is likely to be higher than it is today due to inflation. In that case you will receive less in real terms even if we meet all of our contractual obligations under the policy.

iv. Other Key Product Risks

- Basic plan of MediChamp Insurance Plan is issued in HK dollars while Rider / Optional Supplementary Benefits are issued in HK dollars or US dollars. If you apply MediChamp Insurance Plan as Rider, you can specify the policy currency at the time of application. Policy currency cannot be altered once the policy has been issued.
- The premiums received by us in a currency different from your policy currency or the bill of medical expenses in a currency different from your policy currency, will be converted to the policy currency at the prevailing exchange rate determined by us from time to time with reference to market rates. All monies payable under this Plan (including Optional Supplementary Benefits) will be paid in Hong Kong dollars, or in the policy currency upon your request. The amount payable by us in a currency different from your policy currency will be converted at the prevailing exchange rate determined by us from time to time with reference to market rates. Therefore, it may be subject to foreign exchange risks in the process of currency conversion.
- MediChamp Insurance Plan (including Optional Supplementary Benefits) is an insurance policy issued by us. The insurance benefits are subject to our credit risks.

3. Exclusions

Notwithstanding anything stated in this Plan (including Optional Supplementary Benefits), we shall not pay any benefits under this Plan (including Optional Supplementary Benefits) for expenses arising directly or indirectly from or caused by any of the following:

- i. the Insured's sickness, disease or illness which occurs during the first 30 calendar days from the Policy Effective Date or the date of reinstatement, whichever is the later;
- ii. self-destruction, any intentional self-inflicted injury, or attempted suicide, while sane or insane;
- iii. war (whether it is declared or not), invasion, act of foreign enemies, hostilities, strike, riot and/or civil commotion, civil war, rebellion, revolution, insurrection, terrorist acts, military or usurped power;
- iv. hereditary diseases, birth defects, congenital anomalies, developmental disorders such as learning, speech and behaviour; the signs and symptoms of which manifest or diagnosis for which is made before the Insured attains the age of 17;
- v. pregnancy (including child birth, miscarriage, or abortion) and complication resulting therefrom or relating thereto and surrogacy except to the natural birth under Supplementary Maternity Benefit (including miscarriage), caesarean delivery and the pregnancy complications specified in New Parents Benefits;
- vi. any elective surgery or treatment, cosmetic surgery or treatment, plastic or reconstructive surgery or treatment (except to the extent covered by the Reconstructive Surgery provision of the Surgical Benefits provision);
- vii. dental care and treatment (except to the benefits specified in the Emergency Dental Treatment due to Accident under the Emergency Treatment Benefits and the Routine Dental Treatment provisions under Supplementary Dental Benefit);
- viii. any act of the Insured contrary to the law of the country or territory in which the act is committed;
- ix. treatment of injuries sustained from playing professional sport or base jumping, cliff diving, flying in an unlicensed aircraft or as a learner, free climbing, mountaineering with or without ropes, scuba diving to a depth of more than 10 metres, trekking to a height of over 2,500 metres, bungee jumping, canyoning, hang gliding, hot air balloon, paragliding or microlighting, parachuting, potholing, skiing off piste, or any other winter sports activity carried out off piste;
- x. under the influence of intoxicants, alcohol, narcotics, drugs or sedatives, unless, in the case of drug consumption, it is proved that such drug was taken in accordance with proper medical prescription or treatment, or any kind of substance abuse;
- xi. nuclear fission, nuclear fusion, ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuels or nuclear weapons material;

- xii. while the Insured is engaging in naval, military or airforce services, or any operation or combat duty with any armed force of any country, territory, or international organization;
- xiii. sexually transmitted diseases irrespective of cause, testing for sexually transmitted diseases, infection with Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS) and / or any mutations, derivations or variations, AIDS Related Complex (ARC) and complications resulting therefrom or relating thereto except to the extent covered by the HIV / AIDS Treatment benefit under the Special Care Benefits provision;
- xiv. any Confinement, surgery, medical treatment, procedures, investigations, services and/or supplies for which Compensation or Reimbursement is payable under any law, medical program, or insurance policy provided by any governments, companies or other insurance providers;
- xv. birth control, infertility treatment, assisted reproduction, foetal surgery, sexual problem or sex changes;
- xvi. mental illness or disorder, psychiatric or psychological illness or disorder, nervous or mood disorder except to the extent covered by the In-patient Psychiatric Treatment benefit under the Special Care Benefits provisions and the Psychiatric Treatment under Supplementary Out-patient Benefit;
- xvii. bank charges, expenses incurred for the provision of medical and hospital bills, certificates, documentation, information or other evidence as required by CTF Life;
- xviii. routine preventive health checks (except the benefit as mentioned under the Free Health Check-up Service provision) and vaccinations (except to the Health Check-up Service and vaccinations under Supplement Out-patient Benefit);
- xix. prostheses, orthotic devices, corrective devices and medical appliances not required for a surgical operation;
- xx. experimental drugs and treatment which have not been approved by the government, relevant authorities and recognized medical association in the locality;
- xxi. over-the-counter medication and nutrient supplement not prescribed by a Medical Practitioner, and any of the following traditional Chinese medicines: (a) agaricus blazei murill, (b) antelope horn powder, (c) antler, (d) cordyceps, (e) cubilose, (f) donkey-hide gelatin, (g) ganoderma, (h) all kinds of ginseng, (i) hippocampus, (j) moschus, (k) pearl powder and (l) placenta hominis, and any other Chinese herbs and/or tonic medicine as determined by CTF Life in its absolute discretion from time to time;
- xxii. organ transplant services (including but not limited to the cost incurred in connection with identifying and procuring a replacement organ, all associated transportation costs and administrative costs) except to the extent covered by the Organ Transplant benefit under the Special Care Benefits provisions; any expenses and/or charges incurred by the Insured in respect of (a) mechanical or animal organs, except where a mechanical appliance is temporarily used to maintain bodily function whilst awaiting transplant, (b) purchase of a donor organ from any source or (c) harvesting and storage of stem cells, as a preventative measure against possible future disease;
- xxiii. Sleep disorders including insomnia, snoring, sleep-related breathing problems unless there is medical proof that the Insured is suffering from sleep apnoea. In these circumstances, we will only pay the actual charges up to and not exceeding the Reasonable and Customary Charges for Confinement for (a) one sleep study per year and (b) surgery, only if Medically Necessary;
- xxiv. treatment of obesity (including morbid obesity), weight control program or bariatric surgery;
- xxv. Confinement whilst the Insured is (a) Confined for more than 90 consecutive days, and (b) in a persistent vegetative state characterized by wakefulness without awareness for more than 28 consecutive days during such Confinement;
- xxvi. Treatment or surgery for tonsils, adenoids, hernia, cataract, sinus related conditions, piles / fissure / fistula-in-ano / rectal prolapse or a disease peculiar to the female generative organs until the Insured has been continuously covered under this Plan for a period of 120 calendar days immediately preceding such treatment or surgery provided it is not Pre-Existing Condition;
- xxvii. any Confinements, surgery, medical treatments, investigations, services or supplies which are not Medically Necessary; any charges which exceed the Reasonable and Customary Charges as determined by CTF Life or
- xxviii. any Confinements primarily for the purpose of allied health services including but not limited to physiotherapy, occupational therapy and speech therapy.

Apart from the items mentioned above, the exclusion list below is also applicable to Supplementary Maternity Benefit:

- a. the infant is being given birth in a place where neither parent of the infant is a legal resident or citizen of the place of birth
- b. any medical expenses or fees for nursery care incurred by the infant during the Confinement

4. Pre-existing Condition

We will not pay any benefits arising directly or indirectly from a Pre-existing Condition (as specified hereinafter) if such condition is not fully disclosed in the Application.

A Pre-existing Condition is the existence of:

- i. a condition of the Insured for which medical advice, diagnosis, care or treatment is recommended or received before the Policy Effective Date or the date of any reinstatement (whichever is later); or
- ii. any sign or symptom within a five-year period immediately preceding the Policy Effective Date or the date of any reinstatement (whichever is later).

5. Premium Adjustment and Product Features Revision

i. Premium Adjustment

While this Plan is in force, subject to all of the terms and conditions of this Plan and provided that this Plan continues to be available for renewal and the requirements of remark 2 are met, we shall guarantee to renew MediChamp Insurance Plan (including Optional Supplementary Benefits) during the Coverage Period specified in At-a-Glance table each year regardless of your health status or claim history. For avoidance of doubt, the Supplementary Out-patient Benefit, the Supplementary Dental Benefit and the Supplementary Maternity Benefit shall cease when MediChamp Insurance Plan is terminated. The rates of premiums are not guaranteed. In order to provide you with continuous protection, we will review and adjust the premium of your plan from time to time and make adjustment at the end of every Policy Year if necessary and notify you in writing at least 30 days before the Renewal Effective Date. During the review, we may consider factors including but not limited to the following:

- claim costs incurred from all policies under this Plan / Supplementary Out-patient Benefit / Supplementary Dental Benefit / Supplementary Maternity Benefit and the expected claim outgo in the future which reflects medical trends, medical cost inflation and the change in the product features revision
- historical investment returns and the future outlook of the product's backing asset
- policy surrenders and lapses
- expenses directly related to the policy and indirect expenses allocated to this product

ii. Change of Occupation

If the Insured changes his occupation or job duties, you should inform us in writing accordingly as soon as practicable but in no event later than 1 month after such a change. We reserve the right (i) to terminate this Plan and return any unused premium on a pro-rata basis if the Insured changes to or is engaged in such occupation or job duties which is/are then classified by us as non-insurable (you have the right to request such classification at any time); or (ii) to adjust the premium according to the then prevailing premium rate as specified by us and charge the premium difference from the date on which the Insured changes his occupation or job duties if such occupation and job duties is / are classified by us as more hazardous than that/those of the Insured as stated in the application for this Plan or last communicated to us (you have the right to request such classification and the rules/basis for premium adjustment at any time). If no written notice is served in the manner as mentioned above and the Insured suffers from Injury while he is engaged in a different occupation or job duties which is / are then classified by us as non-insurable or doing anything pertaining to such non-insurable occupation or job duties, we shall not be liable for any claims arising from and/or as a result of such Injury and we shall be entitled to forthwith terminate this Plan.

iii. Change of Residence

If the Insured changes his/her country of residence, you are required to inform us in writing as soon as practicable and in any event within 1 month after the change. As a result of the change of country of residence, we reserve the right to adjust the premium on the Policy Anniversary immediately following the date of change of country of residence in accordance with the then prevailing premium rates as specified by us.

If no written notice is served in the manner as mentioned above before we receive a notice of claim for Living Benefits, and if the premiums that have been paid are less than that which should have been paid had we been notified of the change of country of residence earlier, then you owe a shortfall in premium to us. We reserve the right to collect from you the shortfall with interest counting from the Policy Anniversary immediately following the date of change of country of residence to the date on which we receive your notice of claim.

iv. Product Features Revision

We reserve the right to revise the benefits and / or any terms / conditions. We will issue a written notice to inform you if there is any revision in advance upon policy renewal or before end of a Policy Year. We will notify you in writing at least 30 days before the Renewal Effective Date. The revised premium, benefits and/or clauses / conditions will take effect automatically on the Renewal Effective Date unless you notify us in our prescribed form to cancel this Plan / Optional Supplementary Benefits within 30 calendar days from the Renewal Effective Date. In the case where a payment of the revised premium is made to us before we receive your notice of cancellation, we shall refund such premium without interest.

6. Effective Date

The below items will be effective on the following dates:

Items	Effective counting from Policy Effective Date or the date of reinstatement of this Plan, whichever is later
Accidental injury	Immediately
Core Benefits	
Illness	After 30 days
Treatment or surgery for tonsils, adenoids, hernia, cataract, sinus related conditions, piles / fissure / fistula-in-ano / rectal prolapse or a disease peculiar to the female generative organs	After 120 days
In-patient Psychiatric treatment	After 12 months
Organ Transplant	After 12 months (Count from the Policy Effective Date of this Plan)
New Parents Benefits	After 12 months
Free Health Check-up Service	3 years (Count from the Policy Effective Date of this Plan)
HIV / AIDS Treatment	After 5 years (Count from the Policy Effective Date of this Plan)
Optional Supplementary Benefits	
Supplementary Out-patient Benefit	After 30 days
Supplementary Out-patient Benefit - Health Check-up and Vaccination	After 90 days
Supplementary Dental Benefit	After 180 days
Supplementary Maternity Benefit	After 12 months

7. Eligible Medical Benefit Expenses

Claims of Eligible Medical Benefit Expenses must comply with the principles of **“Reasonable and Customary Charges”** and **“Medically Necessary”**. **“Reasonable and Customary Charges”** means under the similar conditions at local and treatment provided by persons with equivalent experience and professional status, the amount of service charge cannot be greater than the medical expense of a similar illness or injury with Reasonable and Customary levels.

“Medically Necessary” means Confinement, treatment, procedure, supplies or other medical services:

- i which are required for the diagnosis or direct treatment of the Insured's Illness or Injury; and
- ii which are appropriate with regard to the signs and symptoms of the Insured's Illness or Injury; and
- iii which are generally accepted by the medical profession in Hong Kong as effective, appropriate and essential based upon recognized standards of the health care specialty involved; and
- iv which are not of an experimental, preventive, screening or investigative nature; and
- v (for Confinement only) where the Insured's Illness or Injury could not safely and adequately be treated while not being Confined; and
- vi (for Out-patient surgery only) where the Insured's Illness or Injury could not safely and adequately be treated without surgery.

We reserve the right to make any discretionary adjustment for claim settlement based on above principles.

8. Claim Procedure

If you would like to make a claim, you must notify us in written notice within 20 days from the date the Insured undergoes an operation, procedure, treatment and / or the commencement date of Confinement of the Insured, and send us the appropriate forms and relevant proof within 90 days from the date the Insured being first diagnosed or receives treatment for the Illness or Injury. You can get the appropriate claim forms from your financial consultant or call the CTF Life customer service hotline on 2866 8898.

9. Medical Examination

Where a claim occurs, we shall have the right to require the Insured to be examined by a Medical Practitioner appointed by us at our cost.

10. Reinstatement

If this Plan (including Optional Supplementary Benefit) lapses and terminates due to non-payment of any premium, this Plan (including Optional Supplementary Benefit) may be reinstated subject to the following conditions:

- i. the request for reinstatement must be made by you in writing and in our prescribed form within 6 months after the due date of the premium in default; and
- ii. you must provide satisfactory evidence to us that the Insured is still insurable; and
- iii. any unpaid premium must be paid in full with interest to be determined by us; and
- iv. the application for reinstatement and the terms of reinstatement must be approved by us in writing.

Unless otherwise agreed in writing by us, any claim arising, made or accrued after termination due to non-payment of any premium but before the reinstatement effective date (if applicable) of this Plan / Supplementary Out-patient Benefit / Supplementary Dental Benefit / Supplementary Maternity Benefit shall not be accepted or allowed at any time.

Such reinstatement shall only cover losses resulting from Injury sustained after the date of reinstatement and losses due to Illness commencing more than 30 calendar days after such date.

The information in this document is intended as a general summary for your reference only and does not constitute financial, investment or taxation advice or advice of whatsoever kind. You are recommended to seek professional advice from your independent advisors if you find it necessary. Please refer to the Policy Provision for the full terms and conditions.

This document is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or a solicitation to buy or provision of any of our products outside Hong Kong. Chow Tai Fook Life Insurance Company Limited hereby declares that it has no intention to offer to sell, to solicit to buy or to provide any of its products in any jurisdiction other than Hong Kong in which such offer to sell or solicitation to buy or provision of any product of Chow Tai Fook Life Insurance Company Limited is illegal under the laws of that jurisdiction.

A person who is not a party to the policy (including but not limited to the Insured and the beneficiary) has no right to enforce any terms of the policy. The Contracts (Rights of Third Parties) Ordinance does not apply to the policy nor any document issued pursuant to the policy.

CTF Life

周大福人壽

Chow Tai Fook Life Insurance Company Limited
(Incorporated in Bermuda with limited liability)

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