

# BOC Flexi Voluntary Health Insurance Scheme Certified Plan

(Number:F00028)

*Bank of China Group Insurance Company Limited (“BOCG Insurance”) registers with the Hong Kong Special Administrative Region Government as a Voluntary Health Insurance Scheme provider.*

Healthcare costs are rising with the advancement of technology. An adequate insurance coverage would be needed in your pursuit of an ideal lifestyle. Bank of China Group Insurance Company Limited (“BOCG Insurance”) is delighted to present “BOC Flexi Voluntary Health Insurance Scheme Certified Plan” (“the Plan”). The plan is an individual indemnity hospital insurance plan. Apart from hospital and surgical expenses, the Plan also covers “Extra serious sickness benefit ” and “Pregnancy complications” etc., to provide you with a comprehensive coverage. You can also upgrade the Plan with “Supplementary major medical benefit” and “Upgraded benefits” , it gives you peace of mind and helps you cope with the ever-increasing medical expense.

## **Product Highlights:**

### **1. Guaranteed renewal to 100 years old<sup>1</sup>**

Period of insurance of the Plan is 1 year, and the Plan offers guaranteed renewal on yearly basis to 100 years old<sup>1</sup>. Regardless of the Insured Person’s health conditions or claim history, the Insured Person can rest assured that faces different health conditions. His or her policy will be renewable on the Insured Person after the policy has taken into effect.

### **2. Tax deduction<sup>2</sup>**

The Plan is the Voluntary Health Insurance Scheme Certified Plan. The premium of the Plan can be available for tax deduction<sup>2</sup> if it fulfills the requirements under “Inland Revenue Ordinance” published by the Hong Kong Special Administrative Region(HKSAR). You can protect family and your own, and reduce the tax burden at the same time.

### **3. Coverage extended to include unknown pre-existing conditions**

In accordance with the terms and benefits of the Plan, the coverage is included unknown pre-existing conditions. Waiting period and reimbursement arrangement for First policy year is no coverage; Second policy year is 25% reimbursement; Third policy year is 50% reimbursement; Fourth policy year onwards is full coverage (i.e. 100%).

#### 4. Coverage of clinical surgery

Covers day case surgery<sup>3</sup> performed in a hospital or clinical surgery at clinic<sup>3</sup>.

#### 5. Several additional benefits All-round protection

To care of different conditions and needs, the Plan provides several additional benefits; you can have more support and protection.

Inpatient :	Outpatient:	Post- Confinement :	During emergency accident :
<ul style="list-style-type: none"><li>• Extra bed accommodation fee</li><li>• Medical appliances (specific items)</li><li>• Extra serious sickness benefit</li><li>• Pregnancy complications</li></ul>	<ul style="list-style-type: none"><li>• Renal dialysis (outpatient)</li></ul>	<ul style="list-style-type: none"><li>• Post-hospitalisation home nursing fee</li></ul>	<ul style="list-style-type: none"><li>• Emergency outpatient fee</li></ul>

#### 6. Option Benefits More Flexible

Medical expenses raise frequency in Hong Kong; so the advance medical treatments are expensive. If you hope an adequate protection in the future, you can choose “Supplementary major medical benefit” and “Upgraded benefits” to upgrade benefit limit of medical appliances and prescribed non-surgical cancer treatments.

#### 7. 24-hour worldwide emergency assistance services<sup>4</sup> (These extra services are in addition to the Plan.)

To provide 24-hour worldwide emergency assistance service, you can enjoy a hospital deposit guarantee of up to HK\$40,000 in the event of emergency hospital confinement outside Hong Kong.

**8. Free Best Doctors® Services<sup>5</sup> (These extra services are in addition to the Plan.)**

Eligible customers can enjoy the Services via phone and online channel, the Services include:

<b>Assistance needs</b>	<b>Scope of Services</b>	<b>Services usage limit</b>
<b>Health Consultation Services</b>		
Looking for general health information when body have symptoms	<ul style="list-style-type: none"> <li>• 24 hours Services Hotline : (852) 800 965 804</li> <li>• AskTheExpert Service<sup>6</sup> Answers general medical questions by over 50,000 worldwide medical specialists.</li> <li>• Doctor Online Service<sup>7</sup> General Practitioners provide answers to general medical questions customers submitted from online.</li> </ul>	Unlimited
<b>InterConsultation Service<sup>8</sup></b>		
An in-depth review of a patient's medical condition for more serious or long-term sickness cases.	A Best Doctors® expert reviews the patient's medical records and provides a detailed report, with recommendation on treatment.	Per once for each "qualifying sickness" <sup>9</sup>

**Remarks :**

1. The Plan offers guaranteed renewal to 100 years old. BOCG Insurance reserves the right for all policies covered under BOC Flexi Voluntary Health Insurance Scheme Certified Plan to adjust standard premiums on a portfolio basis and amend the terms and/or benefits limit from time to time in accordance with the prevailing VHIS compliance requirements (including obtaining the prior approval from the Food and Health Bureau of the Government of the Hong Kong Special Administrative Region before the change, if applicable) upon renewal for the coming policy year. For details of

arrangement, please refer to the policy.

2. The Policy Holder must meet all the eligibility requirements set out under the law and by the Hong Kong Internal Revenue Department (IRD) before the Policy Holder can qualify for and receive these tax deductions. For details on tax deductions, please visit [www.vhis.gov.hk](http://www.vhis.gov.hk). Any general tax information is merely being provided for the Policy Holder's convenience, and the Policy Holder should not rely on such information in making any tax-related decisions. The Policy Holder should always consult with an appropriately qualified tax advisor if in doubt. Please note that tax law and regulations are subject to change and may affect the classification of Plan and any related tax benefits including the criteria for eligibility. BOCG Insurance is not responsible for updating the Policy Holder on any such changes in laws, regulations or interpretations. Please refer to the website of the Inland Revenue Department (IRD) or contact the IRD directly for any tax related enquiries.
3. "Day Case Surgery" means any surgery performed in the day case procedure centre or hospital that does not require hospitalisation. "Clinical Surgery" means surgery that can be undertaken at the clinic.
4. 24-hour worldwide emergency assistance services are extra services provided under (but not forming part of the) BOC Flexi Voluntary Health Insurance Scheme Certified Plan. If the Policy Holder wishes to unsubscribe this service, please send a written notice to BOCG Insurance.
5. "Best Doctors® Services" are extra services under the Plan. If the Policy Holder would like to cancel the Services, please send a written notice to Bank of China Group Insurance Company Limited ("BOCG Insurance").
6. AskTheExpert Service: This service is an answer to an identified need to provide an alternative solution for the Insured Person needing fast answers to medical questions that do not require a review of the Insured Person's medical records. As such the AskTheExpert Service will not be able to provide any diagnostic recommendations. The designated medical services provider ("Services Provider") will base on the concerns, medical history and timeframes of the Insured Person to recommend whether AskTheExpert or InterConsultation Service is the most appropriate.
7. Doctor Online Service: This service provides answers through English for informational and educational purposes only, and under no circumstances for the delivery of medical diagnosis or treatment recommendations. This is a

reference service available to all Insured Persons in lieu of them searching for information on their own. The answers provided do not imply or result in any kind of contractual or any other type of relationship between the Insured Person and the Services Provider. Furthermore, the answers are not a medical consultation regarding the Insured Person's specific condition but instead focus on general medical information. This service shall not answer questions about conditions requiring immediate medical attention.

8. InterConsultation Service: If the patient's medical condition has not first been reviewed and reported by a doctor who is duly qualified and legally registered as such to practice western medicine in Hong Kong, the service shall not be available for the Services Provider's review.
9. Qualifying sickness is under any medical condition considered to be of a critical, chronic or degenerative nature as well as those that affect the ability of an individual to continue performing their normal daily activity. Exclusions from the InterConsultation services are as follows: acute conditions (of short duration), minor chronic illness, psychiatric conditions, dental problems, and patients currently admitted in hospital.

**Plan Certification Number :**

<b>Number</b>	<b>Benefit items</b>
F00028-01-000-02	Basic plan <sup>^</sup>
F00028-01-001-02	Basic plan <sup>^</sup> + upgraded benefits 1
F00028-01-002-02	Basic plan <sup>^</sup> + upgraded benefits 2
F00028-01-003-02	Basic plan <sup>^</sup> + upgraded benefits 3
F00028-01-004-02	Basic plan <sup>^</sup> + supplementary major medical benefit
F00028-01-005-02	Basic plan <sup>^</sup> + supplementary major medical benefit + upgraded benefits 1
F00028-01-006-02	Basic plan <sup>^</sup> + supplementary major medical benefit + upgraded benefits 2
F00028-01-007-02	Basic plan <sup>^</sup> + supplementary major medical benefit + upgraded benefits 3

<sup>^</sup> Basic plan included Part I Basic benefits + Part II Additional benefits

## Benefit Schedule

Benefit items <sup>(1)</sup>	Benefit limit (in HK\$)
<b>Part I – Basic benefits</b>	
(a) Room and board	\$1,450 per day Maximum 180 days per Policy Year
(b) Miscellaneous charges	\$18,000 per Policy Year
(c) Attending doctor’s visit fee	\$1,450 per day Maximum 180 days per Policy Year
(d) Specialist’s fee <sup>(2)</sup>	\$6,000 per Policy Year
(e) Intensive care	\$4,000 per day Maximum 25 days per Policy Year
(f) Surgeon’s fee	Per surgery, subject to surgical category for the surgery/procedure in the Schedule of Surgical Procedures – <ul style="list-style-type: none"> <li>· Complex           \$50,000</li> <li>· Major             \$30,000</li> <li>· Intermediate   \$15,000</li> <li>· Minor             \$6,500</li> </ul>
(g) Anaesthetist’s fee	35% of Surgeon’s fee payable <sup>(5)</sup>
(h) Operating theatre charges	35% of Surgeon’s fee payable <sup>(5)</sup>
(i) Prescribed Diagnostic Imaging Tests <sup>(2) (3)</sup>	\$30,000 per Policy Year Subject to 30% Coinsurance
(j) Prescribed Non-surgical Cancer Treatments <sup>(4)</sup>	\$100,000 per Policy Year
(k) Pre- and post-Confinement/ Day Case Procedure outpatient care <sup>(2)</sup>	\$650 per visit, up to \$4,000 per Policy Year <ul style="list-style-type: none"> <li>· 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure</li> <li>· 3 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)</li> </ul>
(l) Psychiatric treatments (Applicable territorial scope of cover is Mainland China, Hong Kong, Macau only)	\$40,000 per Policy Year

<b>Part II – Additional benefits</b>	
(a) Extra bed accommodation fee	\$800 per day Maximum 180 days per Policy Year
(b) Medical appliances (specific items) (Applicable territorial scope of cover is Mainland China, Hong Kong, Macau only)  Including pacemaker, stents for percutaneous transluminal coronary angioplasty, intraocular lens, artificial cardiac valve, metallic or artificial joints for joint replacement, prosthetic ligaments for replacement or implantation between bones, and prosthetic intervertebral disc.	\$20,000 per Policy Year
(c) Extra serious sickness benefit This benefit covers cancer, cardiomyopathy, coma, coronary artery bypass grafting, heart valve replacement, kidney failure, liver failure, major burns, stroke, tuberculosis treatment.	\$50,000 per Policy Year
(d) Renal dialysis (outpatient)	\$100,000 per Policy Year
(e) Pregnancy complications This benefit shall be payable for Eligible Expenses incurred after 1 year from the Policy Effective Date.	\$50,000 per Policy Year
(f) Post-hospitalisation home nursing fee (Applicable territorial scope of cover is Mainland China, Hong Kong, Macau only)	\$500 per day Maximum 180 days per Policy Year
(g) Emergency outpatient fee	\$2,500 per Policy Year

Benefit items <sup>(1)</sup>	Benefit limit (in HK\$)		
<b>Part III - Optional benefits</b>			
(a) Supplementary major medical benefit (Applicable territorial scope of cover is Mainland China, Hong Kong, Macau only, but this benefit can be extended to worldwide coverage due to Accident or Emergency.)	Subject to 20% Coinsurance <sup>(6)</sup> (which is equivalent to 80% reimbursement rate) Annual limit: Aged 75 or below: \$400,000 per Policy Year Aged 76 or above: \$100,000 per Policy Year		
(b) Upgraded benefits	Plan 1	Plan 2	Plan 3
i. Upgraded medical appliances (Applicable territorial scope of cover is Mainland China, Hong Kong, Macau only)			
(aa) Specified items Including pacemaker, stents for percutaneous transluminal coronary angioplasty, intraocular lens, artificial cardiac valve, metallic or artificial joints for joint replacement, prosthetic ligaments for replacement or implantation between bones, and prosthetic intervertebral disc	\$100,000 per Policy Year	\$200,000 per Policy Year	\$300,000 per Policy Year
(bb) Non-specified items For other medical appliances not specified in (aa) above	\$50,000 per Policy Year	\$100,000 per Policy Year	\$150,000 per Policy Year
Maximum limit for (aa) Specified items and (bb) Non-specified items	\$100,000 per Policy Year	\$200,000 per Policy Year	\$300,000 per Policy Year
ii. Upgraded Prescribed Non-surgical Cancer Treatments <sup>(4)</sup> (Applicable territorial scope of cover is Mainland China, Hong Kong, Macau only)	\$200,000 per Policy Year	\$400,000 per Policy Year	\$600,000 per Policy Year



<b>Other limits</b>	<b>(in HK\$)</b>
Annual Benefit Limit for benefit items Part I – Part II (76 years old below)	Nil
Annual Benefit Limit for benefit items Part I – Part II (76 years old or above)	\$450,000 per Policy Year
Lifetime Benefit Limit for benefit items Part I – Part III	Nil

Notes -

- (1) Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above, unless otherwise specified.
- (2) BOCG Insurance shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by attending doctor or Registered Medical Practitioner.
- (3) Tests covered here only include computed tomography (“CT” scan), magnetic resonance imaging (“MRI” scan), positron emission tomography (“PET” scan), PET-CT combined and PET-MRI combined.
- (4) Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- (5) The percentage here applies to the Surgeon's fee actually payable or the benefit limit for the Surgeon's fee according to the surgical categorisation, whichever is the lower.
- (6) An adjustment factor shall apply if the Insured Person's average daily room and board charges incurred during such Confinement is higher than the benefit limit per day set forth in the Benefit Schedule for benefit payable under Part I (a).

The adjustment factor shall be calculated as follows:

Benefit limit per day for room & board set forth in the Benefit Schedule  
 ÷ Average daily room and board charges incurred during Confinement