

| 自願醫保 VHIS |

「稅」安心醫療計劃 TaxVantage Plus Medical Plan

TVP

YFLife
萬通保險



《iMONEY 智富雜誌》優秀保險企業大獎2019
最佳醫療保障



資本卓越銀行及金融大獎
2012-2020
資本卓越保險服務大獎

未來在我手
Own the future

靈活保障 掌握健康未來

Own your future with
more flexibility



保證終身續保

Guaranteed renewals for life



不設終身保障限額

No lifetime benefit limit



自由選擇

Freedom to choose



保障範圍廣泛

Extensive coverage



為投保前未知的已有病症
提供保障

Coverage of unknown
pre-existing conditions



扣稅優惠

Tax deductible



免費估算服務

Free quote before you commit



無索償保費折扣

No claim premium discount



自選附加保障

Optional supplementary benefits

全面醫療服務 隨時候命

「稅」安心醫療計劃為你提供多元化醫療保障，涵蓋手術、治療及住院等保障。

保障更全面

「稅」安心醫療計劃讓你享有更優越的保障，包括非手術癌症治療、家中看護津貼及洗腎保障等。你可按需要自選額外醫療保障，以享更安心保障。

香港政府全力推動

萬通保險國際有限公司已註冊成為香港特別行政區政府食物及衛生局認可的自願醫保的產品提供者。你的「稅」安心醫療計劃中合乎資格的保費可享有稅務扣除優惠，每年可申請扣稅的保費上限為每名受保人8,000港元，而你為家人投保所繳的保費，亦可用作扣稅，讓你節省更多。

Access to comprehensive medical services

The **TaxVantage Plus Medical Plan** provides you with comprehensive coverage for surgeries, therapies and hospitalization benefits.

Comprehensive benefits

With TaxVantage Plus Medical Plan, you can enjoy upgraded benefits, including non-surgical cancer treatments, home nursing and renal dialysis, etc. For extra peace of mind, you may choose to attach supplementary medical benefits to the plan.

An initiative backed by the HKSAR

YF Life Insurance International Ltd. is registered as a provider for the Voluntary Health Insurance Scheme ("VHIS") implemented by the Food and Health Bureau of the HKSAR. Qualifying premiums paid for your TaxVantage Plus Medical Plan are tax deductible, up to HK\$8,000 per Insured Person per year. You may also include any premiums you paid for your family members' policies when claiming a tax deduction.

「稅」安心醫療計劃是自願醫保計劃下的認可靈活計劃，較標準計劃提供更全面的保障及較高的保障額，有關詳情，請瀏覽本公司網頁 www.yflife.com/VHIS/FlexiPlan。

The TaxVantage Plus Medical Plan is a Certified Flexi Plan under the VHIS, providing wider coverage and higher benefit amount compared to the Standard Plan. For details, please refer to our company website at www.yflife.com/VHIS/FlexiPlan.

「稅」安心醫療計劃 — 靈活保障安心享

TaxVantage Plus Medical Plan – peace of mind with flexible care

1

保證終身續保 Guaranteed renewals for life



無論你的身體狀況出現任何改變，計劃亦保證續保至100歲。

You are guaranteed the right to renew your plan even if you experience changes to your health. For extra peace of mind, your coverage will last up to the age of 100.

2

不設終身保障限額 No lifetime benefit limit



本計劃提供高達200萬港元的每年保障限額，可每年還原，並不設終身限額。

The plan offers an annual benefit limit up to HK\$2,000,000, which will be refreshed annually with no Lifetime Benefit Limit.

3

自由選擇 Freedom to choose



- 所有保障均全球適用（精神科治療¹及洗腎保障²除外）
- 可自由選擇醫療服務提供者³
- 可自由選擇病房級別
- All benefits are applicable worldwide (except for psychiatric treatment¹ and renal dialysis²)
- Free choice of healthcare services providers³
- Free choice of ward class



全球適用
Applicable worldwide



任選醫療服務
提供者
Free choice of healthcare
services providers



任選病房級別
Free choice of
ward class



4

保障範圍廣泛 Extensive coverage



本計劃涵蓋的醫療保障項目包括：

- 住院及手術費用
- 日間手術⁴
- 入院前、出院後及日間手術前後的門診護理
- 診斷成像檢測⁵，包括CT、MRI、PET、PET-CT及PET-MRI
- 非手術癌症治療，包括放射治療、化療、標靶治療、免疫治療及荷爾蒙治療
- 精神科治療¹
- 醫療意外事故的一筆過賠償⁶

其他保障項目包括：

- 家中看護津貼
- 意外的額外津貼
- 洗腎保障²
- 自選額外醫療保障

The plan covers the following medical benefit items:

- hospitalization and surgery fees
- day case procedure⁴
- outpatient care for pre- and post- Confinement / Day case procedure
- prescribed diagnostic imaging tests⁵, including CT, MRI, PET, PET-CT and PET-MRI
- non-surgical cancer treatments, including radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy
- psychiatric treatment¹
- lump sum benefit against medical negligence⁶

Other benefit items include:

- home nursing
- additional benefit for accident
- renal dialysis²
- optional extra major medical benefit

5

為投保前未知的已有病症提供保障 Coverage of unknown pre-existing conditions



為使你安心無憂，計劃涵蓋保單持有人及 / 或受保人在投保時不察覺，及理應不察覺的已有病症，並不設等候期。

For your total peace of mind, the plan covers pre-existing conditions that the Policy Holder and/or Insured Person was not aware of and would not reasonably have been aware of at the time of taking up the plan, without any waiting period.

6

無索償保費折扣

No claim premium discount



- 只要在續保時保單已於本公司從不間斷地連續生效達三個保單年或以上，以及期間並無就本計劃有任何索償紀錄，於支付續期保費時，即可獲享無索償保費折扣
- 折扣金額會按上一保單年的「每年保費」的百分比計算，最高可達15%
- A 'no claim premium discount' will be offered upon paying the renewal premium, provided that the policy has been in force and no claims have been made for at least three consecutive Policy Years
- The discount is a percentage, of up to 15%, of the annual premium for the previous Policy Year

連續生效及無索償保單年期 Consecutive years of policy in force and without claims	無索償保費折扣率 No claim premium discount rate
3	5%
4	10%
≥ 5	15%

7

扣稅優惠

Tax deductible



你的「稅」安心醫療計劃保費可享有稅務扣除優惠。有關稅務扣除詳情，請瀏覽香港特別行政區政府食物及衛生局網頁www.vhis.gov.hk/tc/consumer_corner/tax-deduction.html。

Your TaxVantage Plus Medical Plan premiums are tax deductible. For details of the tax deduction arrangement, please refer to the website of the Food and Health Bureau of the HKSAR at www.vhis.gov.hk/en/consumer_corner/tax-deduction.html.

8

免費估算服務

Free quote before you commit



於接受任何治療或醫療手術前，你更可免費使用賠償金額估算服務⁷。

You're entitled to receive a free estimate of the claimable amount⁷ for any potential treatment or procedure before committing to it.

自選附加保障 (下列保障不適用於扣稅⁸⁾)

Optional supplementary benefits

(the following benefits are non-tax deductible⁸⁾)



你更可額外附加以下兩項保障計劃，以獲得更全面的保障：

For extra peace of mind, you may attach supplementary benefits to the plan:

額外癌症多重保

- 為治療癌症提供充裕的資金，每次癌症可獲賠償的實際治療費用可高達200萬港元⁹

Extra Cancer Benefit

- provides adequate financial support for cancer therapy, with a maximum reimbursement of actual expenses per cancer up to HK\$2,000,000⁹

住院現金津貼

- 若受保人不幸因傷病住院留醫達8小時，計劃會提供現金津貼¹⁰以彌補住院期間的收入損失
- 若需要接受深切治療，計劃更會提供雙倍的現金津貼，即每日高達2,400港元

Hospital Income Benefit

- provides cash benefit¹⁰ to offset any temporary income loss if the Insured Person is Confined for eight hours or more due to Disability
- while receiving treatment in an Intensive Care Unit, this Benefit will be doubled, up to HK\$2,400 per day



附註

1. 精神科治療只在專科醫生建議下，並且於香港境內住院接受的治療，方可獲保障。
2. 洗腎治療只包括在註冊醫生建議下，以(1)住院病人身份於全球各地接受治療或(2)日症病人身份於香港接受治療，方可獲保障。
3. 指在其所在地註冊為醫院的機構或註冊的西醫。
4. 日間手術指受保人在具備康復設施的診所、日間手術中心或醫院內因檢查或治療而進行醫療所需的外科手術。
5. 設30%共同保險，保單持有人需支付實際醫療開支的30%。
6. 若受保人因醫院的醫護人員的疏忽行為或未有遵照合理及慣常的標準而直接導致死亡或完全及永久傷殘，計劃會提供保障表內訂明之醫療意外事故保障賠償。本保障只會就每宗事故作出一次賠償。
7. 受保人必須附上由醫院及 / 或主診註冊醫生所估算的金額予本公司。而該估算只供參考，最終的賠償金額必須按實際費用證明而釐定。
8. 此等保障並非認可計劃之一部分。
9. 不包括(1)因接受癌病治療導致的併發症和不良反應而需要接受治療的費用；(2)手術費用（除特別註明外）；(3)住院及膳食費用。
10. 同一受保人於本公司投保的所有住院現金津貼及原銀奉還住院現金計劃的每日總保障額最高為1,200港元，而所有住院現金津貼、原銀奉還住院現金計劃、終身醫療保障計劃、一世醫療保及住院現金保百分百保費回贈計劃的每日總保障額最高為2,000港元。本公司將保留隨時修訂最高每日總保障額之權利，而無須事先通知。
11. 除非另有註明，同一項目的合資格費用不可獲表中多於一個保障項目的賠償。
12. 本公司有權要求有關書面建議的證明，例如轉介信或由主診醫生或註冊醫生在索償申請表內提供的陳述。
13. 此百分比適用於外科醫生費實際賠償的金額或根據手術分類下外科醫生費的保障限額，以較低者為準。
14. 檢測只包括電腦斷層掃描（“CT”掃描）、磁力共振掃描（“MRI”掃描）、正電子放射斷層掃描（“PET”掃描）、PET-CT組合及PET-MRI組合。
15. 治療只包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。
16. 有關詳情，請參閱條款及保障細則。
17. 國際專業醫療網絡所提供的服務現時由國際救援（亞洲）公司提供。現時，每次徵詢第二醫療意見的費用為500港元，而轉介手續費為500美元，受保人需自付所有就醫的行政費及其他有關費用。國際救援（亞洲）公司保留調整收費及醫院數目的權利，有關的更改將不作另行通知。本公司保留隨時更改或終止提供本服務的權利。
18. 只適用於18歲或以上的受保人。
19. 若受保人不幸因傷病住院留醫達8小時，計劃會提供現金津貼。每症保障期最長達1,000日。
20. 本公司會於保單週年日不少於30天前，以書面通知有關修訂的保障或保費。
21. 若保障不獲續保，本公司會於保單週年日不少於30天前以書面通知。

Notes

1. Only covers the psychiatric treatment recommended by a Specialist during Confinement in Hong Kong.
2. Only covers renal dialysis treatments under the recommendation of the attending Registered Medical Practitioner, and (1) as an Inpatient worldwide or (2) as a Day Patient in Hong Kong.
3. Refers to a registered Hospital medical practitioner of western medicine under the relevant territory.
4. Day Case Procedure refers to a Medically Necessary surgical procedure for investigation or treatment performed in a medical clinic, or day case procedure centre or Hospital with facilities for recovery.
5. Subject to 30% Coinsurance, Policy Holder is required to pay 30% of the actual medical expenses as evidenced.
6. If the Insured Person dies or suffers from Total and Permanent Disability directly as a consequence of any negligent action or failure to observe reasonable and customary standards by a healthcare professional of the relevant Hospital, the medical negligence benefit as stated in the Benefit Schedule shall be payable. The benefit shall be made once only for each incident.
7. The Policy Holder shall provide the Company with the estimated fees to be incurred as furnished by the Hospital and/or attending Registered Medical Practitioner. The estimate is for reference only, and the actual amount claimable shall be subject to the final expenses as evidenced.
8. These benefits are not part of the Certified Plan.
9. The followings are not included: (1) treatment undergone solely for complications and adverse effects of cancer treatment; (2) cost of surgical procedures except specifically covered; (3) room and board charges.
10. The maximum combined daily benefit from both Hospital Income Benefit and Money-Back Hospital Income Protector for the same Insured Person with our company is HK\$1,200. And the maximum combined daily benefit from Hospital Income Benefit, Money-Back Hospital Income Protector, Lifetime Health Protector, Whole Life MediCare and Refundable Hospital Cash Plan for the same Insured Person with our company is HK\$2,000. The Company reserves the right to make adjustments of the maximum combined daily benefit without any prior notice.
11. Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table unless otherwise specified.
12. The Company shall have the right to ask for proof of recommendation, e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
13. 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.
14. 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.
15. Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
16. Please refer to the Terms and Benefits for more details.
17. MediNet Pro is currently provided by Inter Partner Assistance Hong Kong Ltd. The current administration fee for each Second Medical Opinion is HK\$500. For each referral to medical treatment in the USA, the current administration fee is US\$500. The Insured is also responsible for paying the administration fee and for any medical treatment and other related costs in the USA. Inter Partner Assistance Hong Kong Ltd. reserves the right to review the price and the number of hospitals from time to time without prior notice. The Company reserves the right to change or discontinue this service at any time.
18. Only applicable to the Insured age of 18 or above.
19. A daily cash benefit will be paid if the Insured Person is Confined for eight hours or more due to Disability, up to a maximum of 1,000 days.
20. A written notice will be given no less than 30 days prior to each policy anniversary date regarding the adjustment of benefit coverage or premium.
21. A written notice will be given no less than 30 days prior to each policy anniversary date regarding the non-renewal of benefits.

重要資料

繳付保費年期及保障年期

繳付保費年期及保障年期最長可至受保人100歲（「住院現金津貼」除外，其繳付保費年期及保障年期最長可至受保人75歲）。如在保費到期日起計31天寬限期屆滿前仍未繳付保費，保單的所有保障即於保費到期日起當日終止。

終止

本保單將在以下情況時自動終止，以最先者為準：

- 保單持有人決定取消本保單或不再續保
- 在寬限期屆滿時仍未繳交保費
- 受保人身故翌日
- 本公司不再獲《保險業條例》授權承保或繼續承保本保單

除了上述保單終止的情況外，「額外癌症多重保」亦會在下列任何情況下被終止：

- (i) 所屬之「『稅』安心醫療計劃」的保障終止時
- (ii) 在總保障賠償已達最高終身保障總額後
- (iii) 於每年續期時，本公司於保單週年日的30天前以書面通知保單持有人本保障不獲續保

除了上述保單終止的情況外，「住院現金津貼」亦會於每年續期時，本公司於保單週年日的30天前以書面通知保單持有人本保障不獲續保的情況下被終止。

修訂條款及保障及調整保費

如接獲所需保費（根據受保人當時實際年齡及當時同類保障級別的保費率計算），保單會於每個保單週年續保一年。為配合醫療科技的進步及確保能持續為你提供保障，在每次續期時，本公司保留修訂條款及保障及調整保費之權利。保費會因應某些因素而作出調整，這些因素包括但不限於本公司過去的索償紀錄、開支、醫療通脹、醫療趨勢，以及 / 或因修訂保障架構 / 保障級別（如有）而影響預期未來的索償成本。

通脹風險

將來的醫療費用有機會因通脹而較現時的費用高。因此，保費率及 / 或保障的級別可能會不時作出調整，此外，即使本公司按保單條款履行合約義務，保單持有人獲得的金額的實質價值可能較少。

信貸風險

本計劃由萬通保險國際有限公司承保及負責，保單持有人的保單權益會受其信貸風險所影響。

醫療所需

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

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

Important Information

Premium Payment Term and Benefit Term

The premium payment term and the benefit term are up to age 100 of the Insured Person (except for **Hospital Income Benefit** where the premium payment term and benefit term are up to age 75 of the Insured Person). If the premium is not paid before the end of the 31-day grace period from such premium due date, all coverage under the policy will be terminated immediately on the date on which the unpaid premium is first due.

Termination

The policy shall be automatically terminated on the earliest of the followings:

- The Policy Holder decides to cancel this policy or not to renew this policy
- Non-payment of premiums after the grace period ends
- The day immediately following the death of the Insured Person
- The Company has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this policy

Besides the above conditions for policy termination, the **Extra Cancer Benefit** will also be terminated when one of the following events occurs:

- (i) The **TaxVantage Plus Medical Plan** to which the supplementary benefit is attached terminates
- (ii) The total benefit payment reaches the maximum lifetime limit
- (iii) At annual renewal, the Company gives the Policy Holder a 30-day written notice prior to the policy anniversary regarding non-renewal of the benefit

Besides the above conditions for policy termination, the **Hospital Income Benefit** will also be terminated if at annual renewal, the Company gives the Policy Holder a 30-day written notice prior to the policy anniversary regarding non-renewal of the benefit.

Revision of Terms and Benefit and Premium Adjustment

The policy will be renewed at each policy anniversary for another one year upon receipt of the payment of the required premium (based on the attained age of the Insured Person and at the premium rate in effect of the same level of benefit at the time of renewal). In order to keep pace with the medical advancement and to provide you with continuous protection, the Company reserves the right to revise the Terms and Benefits and adjust the premium on each renewal. The major factors to consider for premium adjustment include, but are not limited to, the claim experience of the Company, expenses, medical inflation, medical trend and/or revised benefit structure / level of benefits (if any) which might impact the expected claim costs in the future.

Inflation Risk

Medical costs in the future are likely to be higher than they are today due to inflation. As a result, the premium rates and/or the benefit levels may be reviewed from time to time, and the Policy Holder might receive less in real terms even if the Company meets all of its contractual obligations.

Credit Risk

This plan is underwritten by YF Life Insurance International Ltd. The insurance benefits are held solely responsible by the Company and subject to its credit risk.

Medically Necessary

This means the need to have medical service for the purpose of investigating or treating the relevant Disability in accordance with the generally accepted standards of medical practice and such medical service must:

- (i) require the expertise of, or be referred by, a Registered Medical Practitioner;
- (ii) be consistent with the diagnosis and necessary for the investigation and treatment of the Disability;
- (iii) be rendered in accordance with standards of good and prudent medical practice, and not be rendered primarily for the convenience or the comfort of the Insured Person, his family, caretaker or the attending Registered Medical Practitioner;
- (iv) be rendered in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- (v) be furnished at the most appropriate level which, in the prudent professional judgment of the attending Registered Medical Practitioner, can be safely and effectively provided to the Insured Person.

合理及慣常

指就醫療服務的收費而言，對情況類似的人士（例如同性別及相近年齡），就類似傷病提供類似治療、服務或物料時，不超過當地相關醫療服務供應者收取的一般收費範圍的水平。合理及慣常的收費水平由萬通保險國際有限公司合理及絕對真誠地決定，在任何情況下，此收費不得高於實際收費。

萬通保險國際有限公司必須參照以下資料（如適用）以釐定合理及慣常收費：

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

主要不保事項

適用於「『稅』安心醫療計劃」

與下列項目相關或由其引致的費用，將不獲賠償：

1. 受保人年屆8歲前發病或確診的先天性疾；
2. 非醫療所需而引致的費用；
3. 純粹為接受診斷程序或專職醫療服務而住院；
4. 美容或整容為目的的服務（除非受保人因意外引致受傷而必要）；牙科治療或口腔颌面手術（除非因意外引致在住院期間接受急症治療及手術）；矯正視力或屈光不正的服務，而該等視力問題可透過驗配眼鏡或隱形眼鏡矯正；購買屬耐用品的醫療設備及儀器；傳統中醫治療；
5. 普遍標準界定為實驗性、未經證實醫療成效或尚未經認可機構批准的醫療技術或治療程序；
6. 預防性治療及預防性護理；
7. 產科狀況及其併發症；節育或恢復生育；任何性別的結紮或變性；不育；性機能失常；
8. 倚賴或過量服用藥物、酒精、毒品或類似物質（或受其影響）、故意自殘身體或企圖自殺或參與非法活動；
9. 戰爭、內戰、侵略、外敵行動、敵對行動、叛亂、革命、起義、或軍事政變或奪權事故；
10. 在保單生效日前，感染或出現人體免疫力缺乏病毒及其相關的傷病；
11. 根據法律或其他醫療或保險計劃而獲得賠償的情況

適用於「額外癌症多重保」

「額外癌症多重保」的保障範圍將不包括以上適用於「『稅』安心醫療計劃」的第2、5、8、9及11項，以及以下情況：

1. 投保前已有病症（情況包括病症已被確診、出現受保人已察覺或理應察覺的病徵或症狀、或已尋求、獲得或接受病症的醫療建議或治療）；
2. 於保障生效日的60天內出現的不適或疾病；
3. 一般身體檢查、病後復康、託管、療養或休養；
4. 美容或整容為目的的服務（除非列明於此保障的保障範圍內）；
5. 鑑定癌症的遺傳性基因測試或任何基於基因測試結果而進行之治療；
6. 預防性檢查；預防癌症的疫苗；
7. 未經確診患上癌症而進行的癌症治療；
8. 核子武器物料、核子燃料所導致的輻射或電離子擴散污染；
9. 感染或出現人體免疫力缺乏病毒及其相關的傷病

Reasonable and Customary

This means, in relation to a charge for Medical Service, such level which does not exceed the general range of charges being charged by the relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar Age, for a similar Disability, as reasonably determined by YF Life Insurance International Ltd. in utmost good faith. The Reasonable and Customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is Reasonable and Customary, YF Life Insurance International Ltd. shall make reference to the followings (if applicable):

- (i) treatment or service fee statistics and surveys in the insurance or medical industry;
- (ii) internal or industry claim statistics;
- (iii) gazette published by the Government; and / or
- (iv) other pertinent source of reference in the locality where the treatments, services or supplies are provided.

Key Exclusions

For TaxVantage Plus Medical Plan

The policy will not pay any benefits in relation to or arising from the followings:

1. Congenital Conditions manifested or diagnosed before the age of 8 years of the Insured Person;
2. Expenses incurred which are not Medically Necessary;
3. Confinement solely for the purpose of diagnostic procedures or allied health services;
4. Beautification or cosmetic purposes (unless necessitated by injury caused by an accident); dental treatment and oral and maxillofacial procedures (except for emergency treatment and surgery during Confinement arising from an accident); correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens; purchase of durable medical equipment or appliances; traditional Chinese medicine treatment;
5. Experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority;
6. Prophylactic treatment or preventive care;
7. Maternity conditions and its complications; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility; sexual dysfunction;
8. Dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide or illegal activity;
9. Acts of war, civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power;
10. Human Immunodeficiency Virus and its related Disability which is contracted or occurs before the Policy Effective Date;
11. Expenses which have been reimbursed under any government law, medical program or insurance policy

For Extra Cancer Benefit

The exclusions of the above points nos. 2, 5, 8, 9 and 11 for **TaxVantage Plus Medical Plan** also apply to **Extra Cancer Benefit**. In addition, **Extra Cancer Benefit** will not pay any benefits in relation to or arising from the followings:

1. Pre-existing Conditions (which have been diagnosed, presented signs or symptoms of which the Insured Person has been aware or should reasonably have been aware, or medical advice or treatment has been sought, recommended or received);
2. Any Sickness or Disease occurred within 60 days after the Effective Date of Coverage;
3. General check-up, convalescence, custodial or sanatorium care or rest care;
4. Beautification or cosmetic purposes (except specifically covered under this benefit);
5. Genetic testing or any treatment undergone based on genetic test results;
6. Preventative screening or checkups; vaccines for the prevention of Cancer;
7. Any treatment modality undergone without a definite diagnosis of the presence of Cancer;
8. Waste nuclear weapons material, ionizing radiation or contamination by radioactivity from any nuclear fuel;
9. Human Immunodeficiency Virus and its related Disability

適用於「住院現金津貼」

「住院現金津貼」的保障範圍將不包括以上適用於「『稅』安心醫療計劃」第7、8及9項，以及以下情況：

1. 於保障生效日起計15天內患上疾病；
2. 投保前已有病症（情況包括病症已被確診、出現受保人已察覺或理應察覺的病徵或症狀、或已尋求、獲得或接受病症的醫療建議或治療）；
3. 一般身體檢查、病後復康、託管、療養或休養；
4. 美容或整容為目的的服務；牙科治療或口腔頷面手術（除非因意外所致在住院期間接受急症治療及手術）；矯正視力或屈光不正的服務，而該等視力問題可透過驗配眼鏡或隱形眼鏡矯正；傳統中醫治療；
5. 有關扁桃腺、增殖腺、疝氣的治療（除非保單已生效達120天）；
6. 先天性畸形或反常；
7. 參與駕駛或騎術競賽；
8. 核子武器物料、核子燃料所導致的輻射或電離子擴散污染；
9. 感染或出現人體免疫力缺乏病毒及其相關的傷病

核保準則

核保準則大致可分為可保利益、健康風險、職業風險、財務核保、地區風險和生活習慣等因素。用於核保的資料包括客戶的家族史、過往和現在的健康狀況、職業狀況、居住地方、財政狀況及準受保人和準保單持有人或／及受益人的關係。

提供資料責任及未符合這要求的後果

在投保時，你／你們必須提供一切知悉或據常理知悉的資料，因萬通保險國際有限公司會按照所提供的資料評核接受投保及決定保險條款。提供資料的責任將會在投保申請表的簽署日期或任何補充文件的簽署日期（以較後日期為準）完成。你／你們若不清楚某一事項是否重要，請將該事項填寫於申請書內。若未符合以上要求，該保單可能因此而作廢。

其他資料

有關索償程序，請瀏覽本公司網頁<https://corp.yflife.com/tc/Hong-Kong/Individual/Services/Claims-Corner>。如對本產品有任何投訴，可致電本公司客戶服務熱線2533 5555，或瀏覽本公司網頁內資料www.yflife.com/VHIS/FlexiPlan。

保費徵費

保監局會透過保險公司向所有保單持有人，為其於香港續發之保單，於每次繳付保費時收取徵費。有關徵費之詳情，請瀏覽保監局網站專頁www.ia.org.hk/tc/levy。

保單冷靜期及取消保單的權利

如保單未能滿足你的要求，你可以書面方式要求取消保單，連同保單退回本公司（香港灣仔駱克道33號萬通保險大廈27樓），並確保本公司的辦事處於交付保單的21個曆日內，或向你／你的代表人交付《通知書》（說明已經可以領取保單和冷靜期屆滿日）後起計的21個曆日內（以較早者為準）收到書面要求。於收受書面要求後，保單將被取消，你將可獲退回已繳保費金額及你所繳付的徵費（若曾獲賠償或將獲得賠償，則不獲發還保費），但不包括任何利息。

退保

如需申請退保，你只需填妥、簽署並寄回由本公司提供的特定表格，以及你的有效身份證明文件副本及固定住址證明（如適用），本公司將安排退保事宜。

For Hospital Income Benefit

The exclusions of the above points nos. 7, 8 and 9 for **TaxVantage Plus Medical Plan** also apply to **Hospital Income Benefit**. In addition, **Hospital Income Benefit** will not pay any benefits in relation to or arising from the followings:

1. Claims due to Sickness or Disease occurring within 15 days of Effective Date of Coverage;
2. Pre-existing Conditions (which have been diagnosed, presented signs or symptoms of which the Insured Person has been aware or should reasonably have been aware, or medical advice or treatment has been sought, recommended or received);
3. General check-up, convalescence, custodial or sanatorium care or rest care;
4. Beautification or cosmetic purposes; dental treatment and oral and maxillofacial procedures (except for emergency treatment and surgery during Confinement arising from an accident); correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens; traditional Chinese medicine treatment;
5. Treatment for tonsils, adenoids or hernia (which occurred within 120 days after the Effective Date of Coverage);
6. Congenital deformities or anomalies;
7. Racing on horse or wheels;
8. Waste nuclear weapons material, ionizing radiation or contamination by radioactivity from any nuclear fuel;
9. Human Immunodeficiency Virus and its related Disability

Underwriting factors

Underwriting factors include insurable interest, health risk, occupational risk, financial justification, residential risk and lifestyle. Material facts and information on consumers for underwriting purpose include client's family history, physical history, physical findings, occupation details, place of residence, financial information and relationship between proposed Insured Person and proposed Policy Holder or/and Beneficiary.

Duty of disclosure and the consequences of not making full disclosure

You are required to disclose in the application all information you know or could reasonably be expected to know because YF Life Insurance International Ltd. will rely on what you have disclosed in this application to accept the risk and the terms of insurance. Your duty of disclosure ends on the signing date of application or the supplementary form(s), whichever is later. If you are in doubt as to whether a fact is material, please disclose it in the application. Failure to comply with this requirement may render the policy issued voidable.

Other Information

For details of the procedures for making claims, please refer to our website at <https://corp.yflife.com/en/Hong-Kong/Individual/Services/Claims-Corner>. If you have a complaint about this product, please report it via our customer service hotline at 2533 5555, or refer to the details in our website at www.yflife.com/VHIS/FlexiPlan.

Premium Levy

The Insurance Authority (IA) imposes a levy on insurance premiums from policy for all new and in-force insurance policies issued in Hong Kong. For details about the levy, please visit the dedicated IA webpage at www.ia.org.hk/en/levy.

Cooling-off Period and Right of Cancellation

If you are not satisfied with the policy, you may return it under a signed covering letter to us (27/F, YF Life Tower, 33 Lockhart Road, Wanchai, Hong Kong) within 21 calendar days after the delivery of the policy or delivery of the Notice (which states that the policy is available for collection and the expiry date of the cooling-off period) to you or your representative, whichever is earlier. We will cancel the policy upon receipt of your written request and refund all premiums and levy you paid (no refund can be made if a benefit payment has been made, is to be made or impending), without any interest.

Surrender

You may surrender the policy by submitting a written request on the forms prepared for such purposes together with a copy of your valid identification document and permanent address proof (if applicable). We will arrange the policy surrender.



一覽表

At a glance

表一：「稅」安心醫療計劃
Table 1: TaxVantage Plus Medical Plan

	賠償限額 Benefit Limit (港元HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M	計劃 Plan 4	計劃 Plan 4M
自願醫保認可 產品編號 VHIS Plan Certification Number	F00020- 01-000-02	F00020- 01-001-02	F00020- 02-000-02	F00020- 02-001-02	F00020- 03-000-02	F00020- 03-001-02	F00020- 04-000-02	F00020- 04-001-02
保障項目 ¹¹ Benefit Items ¹¹								
(I) 基本保障 Basic benefits								
a. 病房及膳食 Room and board	每日 \$840 per day		每日 \$1,520 per day		每日 \$3,000 per day		每日 \$5,050 per day	
	(每保單年度最多180日 Maximum 180 days per Policy Year)							
b. 雜項開支 Miscellaneous charges	\$15,000		\$18,000		\$23,000		\$35,000	
	(每保單年度 per Policy Year)							
c. 主診醫生 巡房費 Attending doctor's visit fee	每日 \$840 per day		每日 \$1,520 per day		每日 \$3,000 per day		每日 \$5,050 per day	
	(每保單年度最多180日 Maximum 180 days per Policy Year)							
d. 專科醫生費 ¹² Specialist's fee ¹²	\$8,000		\$8,700		\$9,500		\$13,800	
	(每保單年度 per Policy Year)							
e. 深切治療 Intensive care	每日 \$5,000 per day		每日 \$7,000 per day		每日 \$8,600 per day		每日 \$11,200 per day	
	(每保單年度最多25日 Maximum 25 days per Policy Year)							
f. 外科醫生費 (每項手術，按手術表劃分的手術分類) Surgeon's fee (Per surgery, subject to surgical category for the surgery/procedure in the Schedule of Surgical Procedures)								
複雜 Complex	\$70,000		\$87,500		\$112,500		\$147,500	
大型 Major	\$42,000		\$52,500		\$67,500		\$88,500	
中型 Intermediate	\$21,000		\$26,250		\$33,750		\$44,250	
小型 Minor	\$8,400		\$10,500		\$13,500		\$17,700	

	賠償限額 Benefit Limit (港元HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M	計劃 Plan 4	計劃 Plan 4M
g. 麻醉科醫生費 Anaesthetist's fee	外科醫生費的40% ¹³ 40% of Surgeon's fee payable ¹³							
h. 手術室費 Operating theatre charges	外科醫生費的40% ¹³ 40% of Surgeon's fee payable ¹³							
i. 訂明診斷成像 檢測 ^{12,14} Prescribed Diagnostic Imaging Tests ^{12,14}	\$25,000		\$30,000		\$35,000		\$40,000	
	(每保單年度 per Policy Year) 設30%共同保險 Subject to 30% Coinsurance							
j. 訂明非手術癌 症治療 ¹⁵ Prescribed Non-surgical Cancer Treatments ¹⁵	\$82,000		\$96,000		\$110,000		\$124,000	
	(每保單年度 per Policy Year)							
k. 入院前或出院 後 / 日間手術 前後的門診護 理 ¹² Pre- and post- Confinement / Day Case Procedure outpatient care ¹²	每次\$600 per visit Up to \$3,300		每次\$900 per visit Up to \$4,950		每次\$1,400 per visit Up to \$7,700		每次\$2,100 per visit Up to \$11,550	
	(每保單年度 per Policy Year) – 住院 / 日間手術前最多1次門診或急症診症 – 出院 / 日間手術後90日內最多3次跟進門診 – 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure – 3 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)							
l. 精神科治療 ¹ Psychiatric treatments ¹	\$34,000		\$45,000		\$60,000		\$80,000	
	(每保單年度 per Policy Year)							
(II) 其他保障 Other benefits								
a. 家中看護 津貼 ¹² Home nursing ¹²	每日 \$475 per day		每日 \$620 per day		每日 \$935 per day		每日 \$1,365 per day	
	(每保單年度最多60日 Maximum 60 days per Policy Year)							
b. 洗腎保障 ¹² Renal dialysis ¹²	\$30,300		\$60,250		\$90,400		\$120,480	
	(每十年期 per 10-year period)							
c. 意外的額外 津貼 Additional benefit for Accident	\$12,000		\$18,000		\$22,000		\$34,000	
	(每保單年度 per Policy Year)							

	賠償限額 Benefit Limit (港元HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M	計劃 Plan 4	計劃 Plan 4M
d. 身故保障 Death benefit	\$5,000		\$10,000		\$15,000		\$20,000	
e. 醫療意外事故保障 Medical negligence benefit	\$175,000		\$200,000		\$250,000		\$300,000	
f. 自選額外醫療保障 ¹⁶ Optional extra major medical benefit ¹⁶	-	\$120,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance	-	\$200,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance	-	\$400,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance	-	\$600,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance
(I)基本保障項目(a) – (I)及(II)其他保障項目(a) – (c)的每年保障限額 Annual Benefit Limit for (I) basic benefit items (a) – (I) and (II) other benefits items (a) – (c)	\$600,000		\$850,000		\$1,350,000		\$2,000,000	
	(每保單年度 per Policy Year)							
(I)基本保障項目(a) – (I)及(II)其他保障項目(a) – (f)的終身保障限額 Lifetime Benefit Limit for (I) basic benefit items (a) – (I) and (II) other benefits items (a) – (f)	無 Nil							
其他 Others								
無索償保費折扣 No claim premium discount	5-15%							
賠償金額估算 ⁷ Estimate of the claimable amount ⁷	免費 Free							

表二：額外癌症多重保

Table 2 : Extra Cancer Benefit

(此保障不適用於扣稅⁸ this benefit is non-tax deductible⁸)

保障 Benefit	保障概要 Summary	(港元HK\$)		
		計劃 Plan 1	計劃 Plan 2	計劃 Plan 3
每次癌症最高保障總額 Overall Per Cancer Limit		\$1,000,000	\$1,500,000	\$2,000,000
最高終身保障總額 Maximum Lifetime Limit		\$3,000,000	\$4,500,000	\$6,000,000
治療保障 ⁹ Medical Treatment Benefit ⁹				
標靶治療 Target Therapy	醫院、醫院日症房、癌症專科醫生、癌症診所或香港 / 澳門的診所提供的治療，以及相關藥物（包括在家自行口服藥物）。而化療更包括輸血及作為輔助化療的粒細胞集落刺激因子注射。 Medical treatment performed in a Hospital, the day case unit of a Hospital, Cancer Specialist, Cancer Clinic, or clinic in Hong Kong/Macau. Plus, the cost of drugs (including oral drugs taken at home). For Chemotherapy, blood transfusion and Granulocyte Colony Stimulating Factor are also covered.	並無個別治療項目的保障上限 賠償按實際費用支付 No limit per course of medical treatment, full reimbursement of actual charges incurred		
電療 Radiotherapy				
荷爾蒙治療 Hormonal Therapy				
免疫療法 Immunotherapy				
化療 Chemotherapy				
皮膚癌之激光手術 Laser Surgery for Skin Cancer	進行手術之外科醫生及麻醉師、手術室、獲處方的藥物、診斷之放射學 / 化驗、護理、醫生 / 專科醫生巡房等的費用。 The fees for performing the procedure, including surgeon, anesthetist, operating theatre, prescribed medication, nursing, diagnostic radiology or laboratory charges, Doctor or specialist visit.			
食道癌、肺癌及皮膚癌之光動力治療 Photodynamic Therapy for Esophagus, Lung or Skin Cancers				
冷凍手術 Cryosurgery				
射頻消融術 Radiofrequency Ablation				
抗排斥及止嘔藥物 Anti-Rejection and Anti-Nausea Drugs	於治療期間須使用之抗排斥及止嘔藥物。 Anti-rejection and anti-nausea medication during the treatment of cancer.			
醫療診症及診斷保障 Medical Consultation and Diagnostic Benefit				
癌症診斷檢查 Cancer Diagnostic Investigation	化驗、X光檢查、CT掃描、磁力共振、PET掃描、細針抽吸細胞術(FNAC)、病理組織學或細胞學活檢、其他醫療必需的癌症診斷檢查費用，以及找出合適化療藥物的基因測試。 Laboratory tests, X-ray, CT, MRI, PET Scans, fine needle aspiration cytology (FNAC), histopathology or cytology biopsies, other investigation modalities deemed medically necessary, and genetic testing to aid the identification of appropriate chemotherapy drugs.	並無個別治療項目的保障上限 賠償按實際費用支付 No limit per course of medical treatment, full reimbursement of actual charges incurred		

癌症監測檢查 Cancer Monitoring Investigation	為監測接受治療後的反應和進展，以及為排除癌症復發，於完成治療後5年內的跟進及診斷檢查。 Physical examinations and diagnostic tests to monitor the response and progress of the cancer treatment received, and follow-up evaluation to rule out any relapse of cancer for up to 5 years from the completion of cancer treatment.	並無個別治療項目的保障上限 賠償按實際費用支付 No limit per course of medical treatment, full reimbursement of actual charges incurred		
治療前或治療後診症 (每次診症金額及次數上限) Pre or Post-Treatment Consultation (Max. limit per visit & no. of visits)	接受癌症治療前及完成治療後5年內的癌症專科醫生診症。 Cancer specialist consultation before and up to 5 years after the completion of cancer treatment.	每次 \$1,000 per visit		
		20次 visits	30次 visits	40次 visits
國際專業醫療網絡¹⁷ MediNet Pro¹⁷	「美國專科醫生提供第二醫療意見」及「安排赴美就醫」。 "Second Medical Opinion provided by US Medical Specialists" and "Quality Treatment Referrals in the USA".	✓	✓	✓

額外護理保障 Extra Care Benefit

中醫診症 (每次診症金額及次數上限) Chinese Herbalist Consultation (Max. limit per visit & no. of visits)	癌症治療期間及完成治療後5年內與癌症相關的中醫治療。 Chinese medical practitioner consultation during and up to 5 years after the completion of the cancer treatment.	每次 \$600 per visit		
		20次 visits	30次 visits	40次 visits
紓緩護理 Palliative Care	為減輕患者不適或治療的副作用，而接受的內科和外科治療。 Medical and surgical treatment to relieve the Insured Person's discomfort or side-effects due to the treatment.	\$20,000	\$30,000	\$40,000
矯形手術 Reconstructive Surgery	因患癌症而需為面部及 / 或乳房重塑或重建而進行手術所需的外科醫生、麻醉師、手術室、處方藥物、診斷之放射學 / 化驗、護理、醫生 / 專科醫生巡房及植入物的費用。 Procedures to reshape or rebuild the face and/or breast, including surgeon, anesthetist, operating theatre, prescribed medication, diagnostic radiology or laboratory charges, nursing, Doctor or specialist visit, and cost of implants.	並無個別治療項目的保障上限 賠償按實際治療費用支付 No limit per course of medical treatment, full reimbursement of actual charges incurred		

壽險保障 Life Protection

延續壽險保障 (以每張額外癌症多重保計算之最高保障額) Extension of Life Protection (maximum aggregate Sum Insured for each Extra Cancer Benefit)	\$500,000	\$750,000	\$1,000,000
身故保障¹⁸ Death Benefit¹⁸	\$1,000	\$1,500	\$2,000

表三：住院現金津貼

Table 3 : Hospital Income Benefit

(此保障不適用於扣稅⁸ this benefit is non-tax deductible⁸)

	保障額 Benefit (港元HK\$)		
	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3
a. 每日保障 ¹⁹ Daily Benefit ¹⁹	\$600	\$900	\$1,200
b. 深切治療 Intensive Care (每日 per day)	\$1,200	\$1,800	\$2,400
c. 身故保障 ¹⁸ Death Benefit ¹⁸	\$5,000	\$10,000	\$15,000
d. 24小時全球保障 24-Hour Worldwide Coverage	適用 Applicable		

投保資料 Basic Information

	「稅」安心醫療計劃 TaxVantage Plus Medical Plan	額外癌症多重保 Extra Cancer Benefit	住院現金津貼 Hospital Income Benefit
投保年齡 (以上次生日年齡計算) Issue Age (At Last Birthday)	0至80歲 Age 0-80	0至70歲 Age 0-70	0至65歲 Age 0-65
保障年期 Benefit Term	至100歲 To Age 100	至100歲 To Age 100	至75歲 To Age 75
繳付保費年期 Premium Payment Term	至100歲 To Age 100	至100歲 To Age 100	至75歲 To Age 75

保單資料 Policy Information

保單類別 Plan Type	基本計劃 Basic Plan	附加保障 Supplementary Benefit
保單貨幣單位 Currency	港元 HK\$	
保費 ²⁰ Premium ²⁰	<ul style="list-style-type: none"> - 保證每年續保，保費並非保證。續期保費會按受保人當時實際年齡及同類保障級別的保費率作出調整。如符合無索償保費折扣要求，續期保費可享有折扣 - 保費按每年/ 每半年/ 每季/ 每月繳付 - Guaranteed yearly renewable, the premium is non-guaranteed. The renewal premium will be adjusted based on the Insured Person's attained age and at the premium rate in effect of the same level of benefit at the time of policy renewal. If the requirements for no claim premium discount are fulfilled, a discount on the renewal premium can be enjoyed. - Annual / Semi-annual / Quarterly / Monthly Payment 	<ul style="list-style-type: none"> - 每年續期，保費並非保證。續期保費會按受保人當時實際年齡及同類保障級別的保費率作出調整 - 保費按每年/ 每半年/ 每季/ 每月繳付 - Yearly renewable, the premium is non-guaranteed. The renewal premium will be adjusted based on the Insured Person's attained age and at the premium rate in effect of the same level of benefit at the time of policy renewal. - Annual / Semi-annual / Quarterly / Monthly Payment

保單資料 Policy Information

	「稅」安心醫療計劃 TaxVantage Plus Medical Plan	額外癌症多重保 Extra Cancer Benefit	住院現金津貼 Hospital Income Benefit
稅務扣減 Tax Deduction	適用 Eligible	不適用 Not eligible	
最低保障額 Minimum Sum Insured	計劃 Plan 1	計劃 Plan 1	\$600
最高保障額 Maximum Sum Insured	計劃 Plan 4M	計劃 Plan 3	\$1,200 ¹⁰
續保 Renewability	保證 Guaranteed	非保證 ²¹ Non-guaranteed ²¹	
保障類別 Type of Benefit	償款產品 — 賠償實際住院及醫療費用 (受限於計劃內每項保障的最高保障額) Indemnity Product – Reimburses the actual hospitalization and medical expenses (subject to the maximum limit of each benefit item of the plan)	償款產品 — 賠償實際治療費用 ⁹ 、額外護理、癌症診症及診斷費用 Indemnity Product – Reimburses the actual medical treatment expenses ⁹ , extra care, cancer consultation and diagnosis expenses	非償款產品 — 於住院期間提供每日現金保障 Non-indemnity Product – Provides daily cash benefits during the period of hospitalization

有關保費、條款及保障詳情，請瀏覽本公司網頁 www.yflife.com/VHIS/FlexiPlan。

For premium rates and Terms and Benefits, please refer to our company website at www.yflife.com/VHIS/FlexiPlan.

以上為計劃的一般資料，只供參考之用，並非保單的一部份，亦未涵蓋保單的所有條款。有關保障範圍、詳情及條款，以及不保事項，請參閱保單的條款及保障。如有垂詢，歡迎與本公司之顧問、特許分銷商或保險經紀聯絡，或致電客戶服務熱線：香港 (852) 2533 5555。

The above contains general information and is for reference only. It does not form part of the policy and does not contain the full terms of the policy. Please refer to the Terms and Benefits of the policy for benefit coverage, exact terms and conditions and exclusions. For enquiries, please contact our consultants, franchised agents or brokers, or call our Customer Service Hotline: Hong Kong (852) 2533 5555.

YFLife

萬通保險

萬通保險國際有限公司為港交所上市公司雲鋒金融集團成員，集團的主要股東包括雲鋒金融控股有限公司以及「全美5大壽險公司」之一的美國萬通人壽保險公司。憑藉雄厚實力及穩健可靠的背景，我們承諾為客戶提供專業及科技化的一站式風險及財富管理，以及強積金服務，一起建構非凡未來。

YF Life Insurance International Limited is a member of publicly listed Yunfeng Financial Group Limited, whose major shareholders include Yunfeng Financial Holdings Limited and Massachusetts Mutual Life Insurance Company, one of the "Five Largest US Life Insurance Companies". Leveraging our robust financial background and solid reliability, we are committed to creating a brighter future for our customers by providing professional and technology-enhanced one-stop risk- and wealth-management consulting services, as well as MPF services.

Own the future.



Facebook



Instagram



WeChat



YouTube

註：雲鋒金融控股有限公司及美國萬通人壽保險公司間接持有雲鋒金融集團。「全美5大壽險公司」乃按2020年5月18日《FORTUNE 500》公佈的「互惠壽險公司」及「上市股份壽險公司」2019年度收入排名榜合併計算。

Remarks: Yunfeng Financial Holdings Limited and Massachusetts Mutual Life Insurance Company have an indirect shareholding in Yunfeng Financial Group Limited. The "Five Largest US Life Insurance Companies" is ranked according to the aggregate results of "Insurance: Life, Health (Mutual)" and "Insurance: Life, Health (Stock)" on total revenues for 2019, and based on the FORTUNE 500 as published on May 18, 2020.

萬通保險國際有限公司
YF Life Insurance International Ltd.
www.yflife.com

客戶服務：
香港尖沙咀廣東道9號港威大廈6座12樓1208室
澳門蘇亞利斯博士大馬路320號澳門財富中心8樓A座
Customer Service:
Suite 1208, 12/F, Tower 6, The Gateway, 9 Canton Road, Tsimshatsui, Hong Kong
Avenida Doutor Mario Soares No. 320, Finance and IT Center of Macau,
8 Andar A, Macau



「稅」安心醫療計劃 (獨立保單)

TaxVantage Plus Medical Plan (Standalone Plan)

每年保費 (港元) Annual Premium (HK\$)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 1		計劃 Plan 1M		計劃 Plan 2		計劃 Plan 2M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
0-17	2,622	2,784	3,023	3,207	4,106	4,378	4,870	5,192
18	2,653	3,260	3,055	3,756	4,150	5,099	4,923	6,048
19	2,683	3,378	3,090	3,891	4,199	5,315	4,981	6,304
20	2,715	3,459	3,127	3,986	4,251	5,423	5,043	6,433
21	2,745	3,687	3,165	4,248	4,306	5,778	5,108	6,854
22	2,780	3,874	3,204	4,463	4,368	6,072	5,179	7,202
23	2,818	4,022	3,245	4,635	4,431	6,305	5,255	7,479
24	2,854	4,212	3,287	4,852	4,493	6,602	5,329	7,831
25	2,888	4,377	3,328	5,041	4,556	6,868	5,403	8,145
26	2,924	4,502	3,371	5,187	4,621	7,067	5,479	8,382
27	2,964	4,669	3,414	5,380	4,690	7,334	5,561	8,699
28	3,004	4,834	3,460	5,569	4,761	7,599	5,645	9,012
29	3,051	4,999	3,514	5,758	4,845	7,865	5,744	9,326
30	3,104	5,164	3,576	5,948	4,946	8,129	5,862	9,639
31	3,196	5,328	3,683	6,139	5,093	8,395	6,037	9,954
32	3,287	5,495	3,787	6,331	5,226	8,661	6,196	10,269
33	3,382	5,680	3,897	6,544	5,363	8,952	6,358	10,616
34	3,459	5,884	3,986	6,776	5,491	9,264	6,509	10,985
35	3,561	6,098	4,103	7,024	5,637	9,589	6,683	11,371
36	3,594	6,325	4,139	7,285	5,667	9,928	6,719	11,773
37	3,687	6,573	4,248	7,571	5,824	10,283	6,905	12,197
38	3,829	6,881	4,410	7,926	6,038	10,693	7,160	12,688
39	3,996	7,165	4,605	8,254	6,327	11,138	7,501	13,214
40	4,211	7,461	4,850	8,594	6,633	11,596	7,865	13,759
41	4,483	7,708	5,165	8,880	7,148	12,034	8,471	14,275
42	4,779	8,027	5,505	9,247	7,587	12,534	8,994	14,869
43	5,103	8,354	5,878	9,623	8,062	13,048	9,559	15,477
44	5,415	8,784	6,237	10,118	8,583	13,736	10,176	16,293
45	5,624	9,222	6,480	10,623	8,873	14,430	10,521	17,115
46	6,001	9,709	6,913	11,181	9,489	15,156	11,249	17,978
47	6,395	10,106	7,367	11,641	10,050	15,820	11,919	18,765
48	6,773	10,499	7,800	12,090	10,611	16,482	12,586	19,546
49	7,135	10,896	8,218	12,550	11,176	17,144	13,256	20,330
50	7,398	11,288	8,523	13,002	11,628	17,805	13,789	21,110
51	7,854	11,657	9,047	13,427	12,345	18,422	14,641	21,842
52	8,236	12,021	9,488	13,845	12,951	19,035	15,359	22,566
53	8,621	12,384	9,930	14,263	13,563	19,646	16,083	23,288
54	9,010	12,744	10,378	14,676	14,178	20,252	16,813	24,006
55	9,404	13,102	10,832	15,088	14,799	20,856	17,549	24,717
56	9,811	13,469	11,299	15,511	15,442	21,465	18,312	25,439
57	10,239	13,841	11,792	15,940	16,106	22,075	19,098	26,162
58	10,687	14,252	12,310	16,414	16,709	22,714	19,820	26,920

此標準保費表並未包括由保險業監管局徵收的保費徵費。

以上保費為每年保費。每半年保費、每季保費及每月保費為每年保費乘以一個因數，而該因數就每半年保費、每季保費及每月保費分別為0.52、0.262及0.0883。

This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.

The above premiums are annual premiums. Half-yearly premiums, quarterly premiums and monthly premiums are equal to annual premiums multiplied by a factor, with the factor equals to 0.52, 0.262 and 0.0883 for half-yearly premiums, quarterly premiums and monthly premiums respectively.

由2022/01/01起生效
With effect from 2022/01/01

「稅」安心醫療計劃 (獨立保單)

TaxVantage Plus Medical Plan (Standalone Plan)

每年保費 (港元) Annual Premium (HK\$)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 1		計劃 Plan 1M		計劃 Plan 2		計劃 Plan 2M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
59	11,151	14,660	12,842	16,885	17,439	23,345	20,686	27,669
60	11,631	15,066	13,395	17,352	18,203	23,977	21,590	28,418
61	12,119	15,480	13,958	17,828	19,095	24,565	22,640	29,119
62	12,609	15,910	14,523	18,322	19,890	25,104	23,582	29,765
63	13,119	16,363	15,111	18,844	20,709	25,845	24,554	30,643
64	13,632	17,148	15,699	19,749	21,536	26,995	25,532	32,010
65	14,149	18,013	16,294	20,747	22,364	28,522	26,514	33,813
66	14,541	18,896	16,748	21,762	22,986	30,080	27,251	35,651
67	14,952	19,800	17,220	22,804	23,747	31,646	28,147	37,501
68	15,362	20,747	17,693	23,892	24,525	33,237	29,063	39,380
69	16,112	21,793	18,556	25,099	25,775	34,893	30,541	41,344
70	16,929	22,857	19,497	26,324	27,088	36,557	32,098	43,318
71	17,501	23,563	20,107	27,072	27,850	37,846	32,956	44,764
72	17,918	24,250	20,526	27,780	28,560	38,887	33,726	45,908
73	18,099	24,591	20,701	28,126	28,882	39,361	34,069	46,425
74	18,274	24,838	20,900	28,407	29,175	39,562	34,412	46,667
75	18,590	24,887	21,259	28,458	29,683	39,598	35,006	46,713
76	18,760	24,962	21,451	28,542	29,876	39,684	35,237	46,809
77	19,048	25,032	21,779	28,621	30,338	39,741	35,781	46,878
78	19,350	25,094	22,125	28,692	30,829	39,803	36,359	46,952
79	19,849	25,129	22,694	28,730	31,628	39,835	37,302	46,991
80	20,350	25,144	23,267	28,747	32,430	39,853	38,246	47,013
81*	20,950	25,159	23,953	28,766	33,394	39,874	39,384	47,039
82*	21,347	25,171	24,407	28,778	34,022	39,891	40,125	47,059
83*	21,735	25,182	24,850	28,791	34,642	39,909	40,856	47,080
84*	22,116	25,199	25,286	28,813	35,257	39,929	41,580	47,103
85*	22,477	25,211	25,699	28,824	35,757	39,947	42,173	47,125
86*	22,603	25,223	25,843	28,838	36,032	39,966	42,493	47,147
87*	22,727	25,238	25,984	28,855	36,205	39,984	42,699	47,169
88*	22,849	25,251	26,125	28,871	36,378	40,003	42,905	47,191
89*	22,973	25,262	26,265	28,884	36,551	40,020	43,110	47,211
90*	23,092	25,277	26,401	28,900	36,722	40,039	43,314	47,233
91*	23,219	25,291	26,547	28,916	36,897	40,059	43,521	47,258
92*	23,343	25,303	26,691	28,931	37,071	40,077	43,728	47,280
93*	23,465	25,317	26,829	28,948	37,244	40,094	43,934	47,300
94*	23,590	25,332	26,971	28,964	37,416	40,114	44,137	47,324
95*	23,711	25,344	27,111	28,976	37,589	40,132	44,342	47,344
96*	23,836	25,357	27,251	28,992	37,764	40,151	44,548	47,366
97*	23,960	25,371	27,394	29,008	37,937	40,169	44,755	47,389
98*	24,084	25,384	27,535	29,023	38,112	40,187	44,962	47,410
99*	24,209	25,397	27,680	29,037	38,285	40,207	45,168	47,433

*只適用於續保。For renewal only.

此標準保費表並未包括由保險業監管局徵收的保費徵費。

以上保費為每年保費。每半年保費、每季保費及每月保費為每年保費乘以一個因數，而該因數就每半年保費、每季保費及每月保費分別為0.52、0.262及0.0883。

This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.

The above premiums are annual premiums. Half-yearly premiums, quarterly premiums and monthly premiums are equal to annual premiums multiplied by a factor, with the factor equals to 0.52, 0.262 and 0.0883 for half-yearly premiums, quarterly premiums and monthly premiums respectively.

由2022/01/01起生效
With effect from 2022/01/01

「稅」安心醫療計劃 (獨立保單)

TaxVantage Plus Medical Plan (Standalone Plan)

每年保費 (港元) Annual Premium (HK\$)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 3		計劃 Plan 3M		計劃 Plan 4		計劃 Plan 4M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
0-17	6,829	6,907	8,021	8,111	9,376	9,535	12,576	12,790
18	6,919	7,997	8,125	9,390	9,444	10,127	12,665	13,584
19	7,016	8,443	8,238	9,914	9,521	10,748	12,771	14,417
20	7,111	8,544	8,351	10,034	9,598	11,270	12,872	15,118
21	7,207	9,097	8,465	10,683	9,686	11,906	12,991	15,969
22	7,306	9,562	8,579	11,231	9,775	12,431	13,111	16,672
23	7,403	9,929	8,694	11,659	9,886	12,828	13,261	17,205
24	7,504	10,389	8,813	12,200	10,006	13,346	13,420	17,903
25	7,604	10,807	8,930	12,691	10,123	13,856	13,580	18,587
26	7,708	11,111	9,052	13,049	10,245	14,223	13,742	19,075
27	7,823	11,522	9,187	13,527	10,375	14,728	13,917	19,754
28	7,962	11,933	9,348	14,012	10,524	15,234	14,117	20,434
29	8,119	12,344	9,532	14,496	10,706	15,738	14,361	21,108
30	8,299	12,757	9,745	14,981	10,915	16,244	14,640	21,785
31	8,538	13,171	10,025	15,466	11,202	16,747	15,022	22,461
32	8,745	13,580	10,271	15,944	11,452	17,252	15,360	23,137
33	9,002	14,011	10,572	16,452	11,768	17,859	15,783	23,951
34	9,184	14,479	10,784	17,004	11,980	18,527	16,068	24,847
35	9,422	14,968	11,064	17,575	12,216	19,206	16,386	25,756
36	9,448	15,488	11,094	18,187	12,521	19,891	16,794	26,679
37	9,574	16,040	11,245	18,833	12,625	20,584	16,936	27,608
38	9,879	16,634	11,600	19,532	12,964	21,304	17,388	28,574
39	10,415	17,267	12,230	20,275	13,765	22,101	18,464	29,643
40	11,076	17,914	13,007	21,037	14,578	22,951	19,555	30,782
41	11,982	18,591	14,068	21,829	15,754	23,841	21,130	31,976
42	12,666	19,282	14,873	22,640	16,628	24,762	22,301	33,211
43	13,510	20,062	15,865	23,556	17,735	25,749	23,787	34,536
44	14,429	21,171	16,942	24,857	18,944	27,162	25,408	36,429
45	14,874	22,285	17,464	26,165	19,501	28,571	26,155	38,320
46	15,769	23,397	18,517	27,471	20,662	29,981	27,712	40,212
47	16,778	24,508	19,702	28,776	22,010	31,392	29,518	42,101
48	17,652	25,619	20,727	30,080	23,217	32,801	31,138	43,993
49	18,601	26,736	21,840	31,394	24,460	34,210	32,806	45,881
50	19,396	27,849	22,775	32,702	25,501	35,622	34,203	47,774
51	20,607	28,895	24,194	33,926	26,888	36,937	36,062	49,539
52	21,636	29,930	25,403	35,144	28,335	38,251	38,003	51,300
53	22,664	30,961	26,610	36,352	29,851	39,552	40,038	53,047
54	23,699	31,988	27,824	37,560	31,448	40,849	42,180	54,786
55	24,737	33,010	29,043	38,758	33,130	42,137	44,435	56,511
56	25,796	34,027	30,290	39,951	34,530	43,420	46,312	58,234
57	26,869	35,035	31,548	41,137	36,303	44,695	48,687	59,943
58	27,696	36,037	32,521	42,314	37,739	45,965	50,615	61,646

此標準保費表並未包括由保險業監管局徵收的保費徵費。

以上保費為每年保費。每半年保費、每季保費及每月保費為每年保費乘以一個因數，而該因數就每半年保費、每季保費及每月保費分別為0.52、0.262及0.0883。

This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.

The above premiums are annual premiums. Half-yearly premiums, quarterly premiums and monthly premiums are equal to annual premiums multiplied by a factor, with the factor equals to 0.52, 0.262 and 0.0883 for half-yearly premiums, quarterly premiums and monthly premiums respectively.

由2022/01/01起生效
With effect from 2022/01/01

「稅」安心醫療計劃 (獨立保單)

TaxVantage Plus Medical Plan (Standalone Plan)

每年保費 (港元) Annual Premium (HK\$)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 3		計劃 Plan 3M		計劃 Plan 4		計劃 Plan 4M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
59	28,957	37,037	34,000	43,487	39,595	47,225	53,106	63,338
60	30,319	38,029	35,599	44,651	41,483	48,480	55,635	65,020
61	31,857	38,712	37,404	45,454	43,688	49,263	58,594	66,070
62	33,258	39,820	39,050	46,756	45,772	50,598	61,387	67,859
63	34,699	40,769	40,741	47,868	47,892	51,771	64,232	69,435
64	36,335	42,356	42,662	49,731	50,084	53,863	67,172	72,241
65	38,037	44,635	44,659	52,408	52,312	57,029	70,159	76,484
66	39,781	47,650	46,708	55,945	54,648	60,834	73,292	81,590
67	41,538	50,681	48,771	59,505	57,059	64,659	76,525	86,718
68	43,316	53,459	50,859	62,766	59,605	68,160	79,939	91,411
69	45,215	56,218	53,088	66,008	62,231	71,640	83,461	96,080
70	47,184	58,965	55,399	69,233	65,003	75,098	87,180	100,718
71	48,679	60,746	56,983	71,107	67,208	77,333	89,865	103,404
72	49,910	62,437	58,207	72,814	69,196	79,455	92,176	105,841
73	50,441	63,200	58,709	73,561	70,250	80,395	93,397	106,885
74	51,098	64,074	59,465	74,565	71,170	81,669	94,609	108,562
75	51,968	65,368	60,466	76,057	72,392	83,475	96,214	110,941
76	52,430	66,284	60,998	77,116	73,042	84,746	97,065	112,619
77	53,193	67,201	61,880	78,176	74,112	86,015	98,481	114,298
78	53,997	68,108	62,815	79,232	75,235	87,480	99,974	116,245
79	55,348	68,523	64,388	79,714	77,123	87,839	102,482	116,722
80	56,676	68,545	65,932	79,739	78,978	88,095	104,946	117,062
81*	58,580	68,568	68,146	79,768	81,639	88,352	108,482	117,403
82*	59,325	68,587	69,015	79,788	82,687	88,607	109,875	117,742
83*	60,362	68,610	70,219	79,814	84,132	88,863	111,796	118,084
84*	61,379	68,630	71,403	79,839	85,555	89,117	113,688	118,420
85*	62,069	68,652	72,207	79,864	86,524	89,375	114,974	118,763
86*	62,687	68,676	72,926	79,889	87,314	89,630	116,024	119,102
87*	62,992	68,694	73,280	79,913	87,669	89,886	116,497	119,439
88*	63,296	68,716	73,635	79,941	88,022	90,142	116,966	119,782
89*	63,598	68,737	73,986	79,962	88,378	90,399	117,436	120,124
90*	63,903	68,759	74,341	79,988	88,732	90,655	117,910	120,465
91*	64,207	68,777	74,693	80,009	89,087	90,910	118,378	120,801
92*	64,511	68,801	75,048	80,038	89,442	91,167	118,851	121,145
93*	64,815	68,825	75,402	80,067	89,797	91,424	119,324	121,486
94*	65,119	68,844	75,754	80,087	90,153	91,679	119,796	121,824
95*	65,424	68,867	76,110	80,116	90,507	91,935	120,265	122,164
96*	65,727	68,886	76,462	80,137	90,862	92,193	120,739	122,508
97*	66,035	68,909	76,819	80,161	91,216	92,448	121,209	122,844
98*	66,339	68,929	77,172	80,187	91,572	92,705	121,682	123,185
99*	66,641	68,953	77,524	80,214	91,926	92,961	122,153	123,527

*只適用於續保。For renewal only.

此標準保費表並未包括由保險業監管局徵收的保費徵費。

以上保費為每年保費。每半年保費、每季保費及每月保費為每年保費乘以一個因數，而該因數就每半年保費、每季保費及每月保費分別為0.52、0.262及0.0883。

This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.

The above premiums are annual premiums. Half-yearly premiums, quarterly premiums and monthly premiums are equal to annual premiums multiplied by a factor, with the factor equals to 0.52, 0.262 and 0.0883 for half-yearly premiums, quarterly premiums and monthly premiums respectively.

由2022/01/01起生效
With effect from 2022/01/01

額外癌症多重保 (附加保障)

Extra Cancer Benefit (Supplementary Benefit)

每年保費 (港元) Annual Premium (HK\$)

上次生日年齡 Age of Last Birthday	男性非吸煙者 Male Non-smoker			男性吸煙者 Male smoker			女性非吸煙者 Female Non-smoker			女性吸煙者 Female smoker		
	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3
0-14	465	630	750	N/A	N/A	N/A	475	642	775	N/A	N/A	N/A
15	466	634	759	467	638	762	477	652	785	487	665	800
16	467	639	769	469	645	776	480	663	797	526	719	865
17	474	649	781	480	663	807	491	679	822	570	784	948
18	486	663	804	501	693	846	509	705	858	614	850	1,032
19	498	685	829	526	729	891	535	740	905	659	916	1,116
20	516	713	867	552	767	941	566	783	960	704	982	1,200
21	536	743	909	581	810	997	607	841	1,022	752	1,052	1,288
22	556	773	950	611	853	1,053	648	897	1,095	800	1,122	1,376
23	578	805	991	641	897	1,109	690	958	1,169	849	1,193	1,462
24	603	843	1,033	673	941	1,165	734	1,020	1,243	899	1,265	1,548
25	629	880	1,076	705	985	1,221	780	1,081	1,317	951	1,336	1,634
26	656	917	1,119	737	1,029	1,279	828	1,144	1,391	1,005	1,410	1,721
27	683	954	1,163	769	1,075	1,337	880	1,210	1,465	1,061	1,487	1,809
28	710	991	1,210	801	1,121	1,395	934	1,278	1,539	1,125	1,564	1,901
29	739	1,028	1,260	835	1,167	1,453	988	1,348	1,623	1,191	1,646	2,006
30	772	1,070	1,307	887	1,233	1,513	1,057	1,441	1,728	1,268	1,747	2,126
31	807	1,114	1,355	960	1,326	1,616	1,135	1,548	1,857	1,351	1,860	2,259
32	845	1,163	1,404	1,099	1,509	1,827	1,303	1,774	2,125	1,537	2,102	2,531
33	884	1,213	1,461	1,238	1,694	2,040	1,471	2,002	2,396	1,744	2,381	2,861
34	926	1,267	1,524	1,377	1,883	2,266	1,639	2,231	2,668	2,001	2,727	3,269
35	978	1,339	1,612	1,516	2,075	2,500	1,807	2,458	2,940	2,284	3,109	3,723
36	1,032	1,414	1,706	1,655	2,268	2,737	1,975	2,687	3,214	2,570	3,494	4,178
37	1,093	1,498	1,812	1,794	2,460	2,974	2,143	2,920	3,487	2,870	3,904	4,669
38	1,154	1,584	1,919	1,933	2,654	3,211	2,311	3,149	3,762	3,171	4,314	5,162
39	1,215	1,671	2,028	2,072	2,848	3,452	2,479	3,379	4,037	3,472	4,724	5,653
40	1,286	1,772	2,154	2,211	3,043	3,694	2,647	3,604	4,312	3,773	5,134	6,145
41	1,357	1,878	2,300	2,350	3,239	3,936	2,815	3,833	4,591	4,074	5,544	6,638
42	1,486	2,055	2,506	2,519	3,475	4,227	2,987	4,069	4,877	4,375	5,955	7,130
43	1,616	2,235	2,728	2,754	3,799	4,623	3,164	4,311	5,168	4,676	6,366	7,622
44	1,824	2,525	3,085	3,135	4,329	5,273	3,345	4,558	5,465	5,007	6,818	8,167
45	2,055	2,848	3,483	3,531	4,877	5,944	3,528	4,808	5,765	5,363	7,304	8,751
46	2,302	3,194	3,914	3,972	5,494	6,705	3,714	5,064	6,074	5,740	7,821	9,375
47	2,570	3,574	4,391	4,430	6,138	7,507	3,906	5,328	6,395	6,135	8,361	10,025
48	2,838	3,956	4,871	4,910	6,816	8,355	4,117	5,617	6,744	6,565	8,948	10,731
49	3,114	4,351	5,373	5,409	7,523	9,241	4,341	5,929	7,127	7,019	9,575	11,494
50	3,396	4,755	5,888	5,931	8,264	10,173	4,570	6,247	7,517	7,482	10,213	12,269
51	3,692	5,180	6,429	6,497	9,070	11,191	4,806	6,574	7,917	7,980	10,903	13,115
52	4,057	5,702	7,091	7,143	9,987	12,346	5,070	6,945	8,380	8,529	11,668	14,055
53	4,542	6,392	7,962	8,009	11,210	13,873	5,343	7,333	8,865	9,083	12,442	15,013
54	5,159	7,265	9,055	9,243	12,946	16,036	5,616	7,717	9,350	9,638	13,217	15,973
55	5,865	8,264	10,307	10,662	14,942	18,519	5,899	8,113	9,836	10,203	14,004	16,937
56	6,677	9,415	11,752	12,083	16,944	21,017	6,187	8,521	10,349	10,770	14,797	17,919
57	7,577	10,699	13,377	13,504	18,955	23,541	6,491	8,954	10,894	11,357	15,626	18,955
58	8,479	11,985	15,002	14,926	20,970	26,068	6,822	9,428	11,496	11,965	16,485	20,035
59	9,382	13,273	16,628	16,348	22,988	28,600	7,155	9,908	12,130	12,590	17,380	21,173
60	10,289	14,563	18,255	17,770	25,008	31,137	7,530	10,451	12,809	13,215	18,278	22,311
61	11,196	15,853	19,880	19,192	27,031	33,677	7,905	10,986	13,488	13,841	19,178	23,450
62	12,103	17,145	21,506	20,614	29,054	36,221	8,280	11,524	14,169	14,474	20,084	24,596
63	13,011	18,438	23,133	22,036	31,080	38,795	8,655	12,076	14,893	15,223	21,143	25,933
64	14,009	19,865	24,954	23,816	33,624	42,031	9,061	12,674	15,675	16,120	22,432	27,578
65	15,170	21,546	27,114	25,701	36,351	45,532	9,539	13,384	16,612	17,280	24,106	29,721
66	16,418	23,356	29,445	27,652	39,165	49,135	10,181	14,337	17,869	18,945	26,531	32,857
67	18,257	25,986	32,781	29,967	42,465	53,304	11,113	15,711	19,668	20,740	29,231	36,272
68	20,305	28,927	36,527	32,771	46,463	58,360	12,280	17,421	21,895	22,594	31,933	39,773
69	22,401	31,945	40,383	35,885	50,921	64,019	13,624	19,389	24,456	24,464	34,635	43,331

此標準保費表並未包括由保險業監管局徵收的保費徵費。

以上保費為每年保費。每半年保費、每季保費及每月保費為每年保費乘以一個因數，而該因數就每半年保費、每季保費及每月保費分別為0.52、0.262及0.0883。

This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.

The above premiums are annual premiums. Half-yearly premiums, quarterly premiums and monthly premiums are equal to annual premiums multiplied by a factor, with the factor equals to 0.52, 0.262 and 0.0883 for half-yearly premiums, quarterly premiums and monthly premiums respectively.

由2022/01/01起生效
With effect from 2022/01/01

額外癌症多重保 (附加保障)
Extra Cancer Benefit (Supplementary Benefit)

每年保費 (港元) Annual Premium (HK\$)

上次生日年齡 Age of Last Birthday	男性非吸煙者 Male Non-smoker			男性吸煙者 Male smoker			女性非吸煙者 Female Non-smoker			女性吸煙者 Female smoker		
	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3
70	24,559	35,042	44,325	39,150	55,598	69,961	15,125	21,588	27,317	26,340	37,342	46,897
71*	26,821	38,292	48,470	42,416	60,277	75,907	16,662	23,847	30,267	28,534	40,502	50,935
72*	29,111	41,599	52,707	45,972	65,387	82,422	18,238	26,137	33,221	30,880	43,878	55,247
73*	31,418	44,936	56,992	49,763	70,836	89,368	19,819	28,445	36,216	33,535	47,711	60,158
74*	33,773	48,350	61,386	53,723	76,531	96,636	21,406	30,766	39,231	36,345	51,771	65,364
75*	16,644	22,576	26,915	28,040	38,038	45,355	9,379	12,727	15,181	18,266	24,781	29,550
76*	17,487	23,720	28,280	29,328	39,787	47,442	9,824	13,331	15,902	19,016	25,799	30,765
77*	18,339	24,877	29,660	30,546	41,440	49,415	10,277	13,946	16,636	19,707	26,737	31,885
78*	19,193	26,036	31,043	31,651	42,941	51,207	10,740	14,576	17,388	20,332	27,587	32,901
79*	20,017	27,154	32,376	32,597	44,225	52,739	11,186	15,181	18,111	21,087	28,613	34,127
80*	20,667	28,036	33,428	33,315	45,200	53,904	11,593	15,734	18,771	21,495	29,169	34,793
81*	21,004	28,493	33,974	34,122	46,297	55,214	11,938	16,202	19,330	22,002	29,858	35,618
82*	21,191	28,748	34,279	34,586	46,928	55,969	12,200	16,558	19,756	22,344	30,324	36,176
83*	21,278	28,866	34,421	34,661	47,031	56,094	12,356	16,771	20,011	22,482	30,512	36,401
84*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
85*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
86*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
87*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
88*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
89*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
90*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
91*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
92*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
93*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
94*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
95*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
96*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
97*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
98*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474
99*	21,315	28,918	34,484	34,662	47,033	56,097	12,429	16,870	20,130	22,528	30,574	36,474

*只適用於續保。For renewal only.

住院現金津貼 (附加保障)
Hospital Income Benefit (Supplementary Benefit)

每年保費 (港元) Annual Premium (HK\$)

上次生日年齡 Age of Last Birthday	計劃 Plan 1 每日保障 Daily Benefit \$600		計劃 Plan 2 每日保障 Daily Benefit \$900		計劃 Plan 3 每日保障 Daily Benefit \$1,200	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
0-17	510	510	-	-	-	-
18-30	540	702	810	1,053	1,080	1,404
31-35	552	718	828	1,076	1,104	1,435
36-40	570	741	855	1,112	1,140	1,482
41-45	720	900	1,080	1,350	1,440	1,800
46-50	828	994	1,242	1,490	1,656	1,987
51-55	1,320	1,584	1,980	2,376	2,640	3,168
56-60	1,560	1,716	2,340	2,574	3,120	3,432
61-65	1,950	2,145	2,925	3,218	3,900	4,290
66-70*	2,438	2,681	3,656	4,023	4,875	5,363
71-74*	3,170	3,486	4,753	5,230	6,338	6,972

*只適用於續保。For renewal only.

此標準保費表並未包括由保險業監管局徵收的保費徵費。
以上保費為每年保費。每半年保費、每季保費及每月保費為每年保費乘以一個因數，而該因數就每半年保費、每季保費及每月保費分別為0.52、0.262及0.0883。
This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.
The above premiums are annual premiums. Half-yearly premiums, quarterly premiums and monthly premiums are equal to annual premiums multiplied by a factor, with the factor equals to 0.52, 0.262 and 0.0883 for half-yearly premiums, quarterly premiums and monthly premiums respectively.