

YFLife
萬通保險

医疗 Medical

医+全护保

E+Total Care

ETC



湾区互通 保障无界

Bay Area Connectivity with Boundless Protection

澳门虽然人口不多，但近年面对人口老化加速、医疗通胀、医疗资源有限以及慢性疾病普及化，让许多澳门家庭倍感压力。如今，随着大湾区医疗资源互联互通、跨境转诊机制的建立及医学结果的跨境互认，澳门正开启跨境就医的新模式。

医+全护保（“此计划”）突破地域限制，涵盖粤港澳大湾区、中国大陆及世界各地的合资格医疗开支，就住院、手术、住院前后/手术前后及其他治疗提供全额赔偿方案，并不设终身限额。健康无界，保障随行。我们全面守护您的每一段健康旅程，让您享受轻松就医的自由。

Although Macau has a small population, it has faced significant pressure in recent years due to accelerated aging, rising medical costs, limited healthcare resources, and the prevalence of chronic diseases, impacting many families in the region. Today, with the interconnection of healthcare resources in the Greater Bay Area, the establishment of a cross-border referral mechanism, and the mutual recognition of medical results across borders, Macau's cross-border healthcare is entering a new model.

E+ Total Care (the “Plan”) breaks through regional limitations, covering eligible medical expenses in the Guangdong-Hong Kong-Macao Greater Bay Area, Mainland China, and around the world. It offers full reimbursement solution for hospitalization, surgery, pre- and post-hospitalization/ surgical treatments, providing comprehensive protection without a lifetime cap. Health knows no boundaries; protection follows you. We safeguard your every health journey, allowing you to enjoy the freedom of seeking medical care with ease.

医+全护保

E+ Total Care

- 全数赔偿环球医疗费用保障
Full Global Medical Expense
Reimbursement Protection
- 重设每年保障总额
Annual Limit Reset
- 保障未知的已有病症而无需等候期
No Waiting Period for Unknown
Pre-existing Conditions
- 强化医疗安全网
Enhanced Medical Safety Net
- 保障年期长达100岁
Benefit Term up to Age 100
- 无索偿奖赏
No Claim Bonus

1

全数赔偿环球医疗费用保障

Full Global Medical Expense Reimbursement Protection



医+全护保提供全数环球医疗费用赔偿¹，涵盖受保人于世界各地因患病或意外受伤而产生的住院、手术、住院前后/手术前后治疗^{2,3}的合格医疗费用，而不设分项赔偿限额，并提供癌症治疗及洗肾保障，以及其他延伸保障。受保人更可于指定医院入住标准私家病房或半私家病房⁴，让治疗康复过程更加舒适惬意。

E+ Total Care provides full global medical expenses reimbursement¹ for the Insured, covering eligible medical expenses incurred from hospitalization, surgery, and pre- and post-hospitalization/surgery treatments^{2,3} due to illness or accidental injury worldwide, without itemized benefit sub-limits. It also offers cancer treatment and renal dialysis benefits, along with other extended benefits. The Insured is also entitled to a Standard Private Room or Semi-Private Room⁴ at the Designated Hospitals for a more comfortable recovery journey.

此计划涵盖以下的医疗保障项目 The Plan covers the following medical benefit items:

住院保障 Hospitalization Benefits	住院及膳食、杂项开支、住院医生费、住院专科医生费、深切治疗 ⁵ 及住院陪床 ⁶ Room and Board, Miscellaneous Charges, In-hospital Doctor's Call, In-hospital Specialist Consultation, Intensive Care ⁵ and Hospital Companion Bed ⁶
手术保障 Surgical Benefits	外科医生的手术收费 ² 、麻醉师费 ² 、手术室费 ² Surgeon's Fee ² , Anaesthetist's Fee ² , Operating Theatre Fee ²
住院前后/手术前后之保障 Pre- and Post-Hospitalization/ Surgery Benefits	住院前后/手术前后门诊保障 ^{2,3} 、手术后家中看护 ⁷ Pre- And Post-Hospitalization/Surgery Outpatient Treatment Benefit ^{2,3} , Post-Surgery Home Nursing ⁷
延伸保障 Extended Benefits	癌症治疗保障 ⁸ 、洗肾保障 ⁸ 、癌症治疗保障及洗肾保障的额外保障 ⁹ 、第二索偿现金津贴 ¹⁰ Cancer Treatment Benefit ⁸ , Renal Dialysis Benefit ⁸ , Additional Benefit for Cancer Treatment Benefit and Renal Dialysis Benefit ⁹ , Second Claim Cash Benefit ¹⁰
其他 Others	医疗意外事故保障 ¹¹ 、身故保障 Medical Negligence Benefit ¹¹ , Death Benefit

2

重设每年保障总额

Annual Limit Reset



此计划提供680,000港元 / 680,000澳门元的每年保障总额，保障总额适用于指定保障项目并于每保单年重设，全数支付合资格的医疗费用。全数赔偿¹有助简化赔偿机制及索偿程序，补足各项费用的差异，让您可以有更大的灵活度去选择适切的治疗方案，不受分项赔偿限额及终身限额所限。即使因伤病而需在不同保单年接受长期治疗，您仍可持续得到保障。

The Plan offers a maximum coverage of HK\$680,000 / MOP680,000 annually. The Annual Limit is applicable to designated benefit items and will reset each policy year, fully covering eligible medical expenses. Full reimbursement¹ helps simplify the compensation mechanism and claims process, and address any cost differences. You can have greater flexibility in selecting appropriate treatment options, without being constrained by itemized benefit sub-limits or lifetime caps. Even if you require long-term treatment across different policy years due to illness or injury, you will still receive continued coverage.

3

保障未知的已有病症而无需等候期

No Waiting Period for Unknown Pre-existing Conditions



为使您安心无忧，此计划涵盖受保人在投保时的未知的已有病症，并不设等候期。

For your total peace of mind, the Plan covers unknown pre-existing conditions of the Insured at the time of policy enrollment, without any waiting period.

4

强化医疗安全网

Enhanced Medical Safety Net



癌症治疗及洗肾通常都需要数月甚至数年的漫长过程，而且所费不菲，所以此计划特设癌症治疗保障及洗肾保障的额外保障⁹，在每年保障总额之上额外提供680,000港元 / 680,000澳门元的保障以支付相关治疗的医疗开支，让有需要的受保人安心接受治疗，无需为持续的医疗开支而过于担忧。

Cancer treatment and renal dialysis are often lengthy processes that can last months or even years, and can be very costly. Therefore, the Plan provides Additional Benefit for Cancer Treatment Benefit and Renal Dialysis Benefit⁹. In addition to the Annual Limit, an extra HK\$680,000 / MOP 680,000 will be offered for the Insured in need to support the medical expenses of the relevant treatments, ensuring they can undergo treatment with greater peace of mind, without having to worry excessively about ongoing medical expenses.

5

保障年期长达100岁

Benefit Term up to Age 100



此计划提供每年续保，保障年期可长达受保人100岁。为了让您时刻可享有充裕的保障，应付越来越高昂的医疗费用，本公司可能会于每次续保¹²时检讨及调整各项保障及保费，续期保费会根据受保人当时实际年龄及适用之同类保障级别当时的保费率计算。

The Plan provides annual renewal with a benefit term up to age 100 of the Insured. To ensure you are well covered for higher medical expenses, the Company may review and adjust the respective benefits and premium at each renewal¹². The renewal premium will be adjusted based on the attained age of the Insured and the premium rate in effect for the same level of benefit at the time of renewal.

6

无索偿奖赏
No Claim Bonus



为奖励您维持健康生活，只要您在续保时保单已于本公司无间断地连续生效达3个保单年或以上，以及期间并无就此计划有任何索偿纪录，于支付续期保费时，便可获享“无索偿奖赏”¹³，其奖赏金额会按上一保单年的每年保费的百分比计算，最高可达15%。

To reward you for maintaining a healthy lifestyle, provided that the Policy has been in force for 3 consecutive policy years and no claims were made under the Plan, you will be entitled to a “No Claim Bonus”¹³ upon paying the renewal policy premium. The bonus is based on a percentage of the annual premium of the preceding policy year, up to a maximum of 15%.

连续生效及无索偿保单年期 Consecutive years of Policy in force and without claims	无索偿奖赏折扣率 No Claim Bonus Rate
3	5%
4	10%
≥ 5	15%



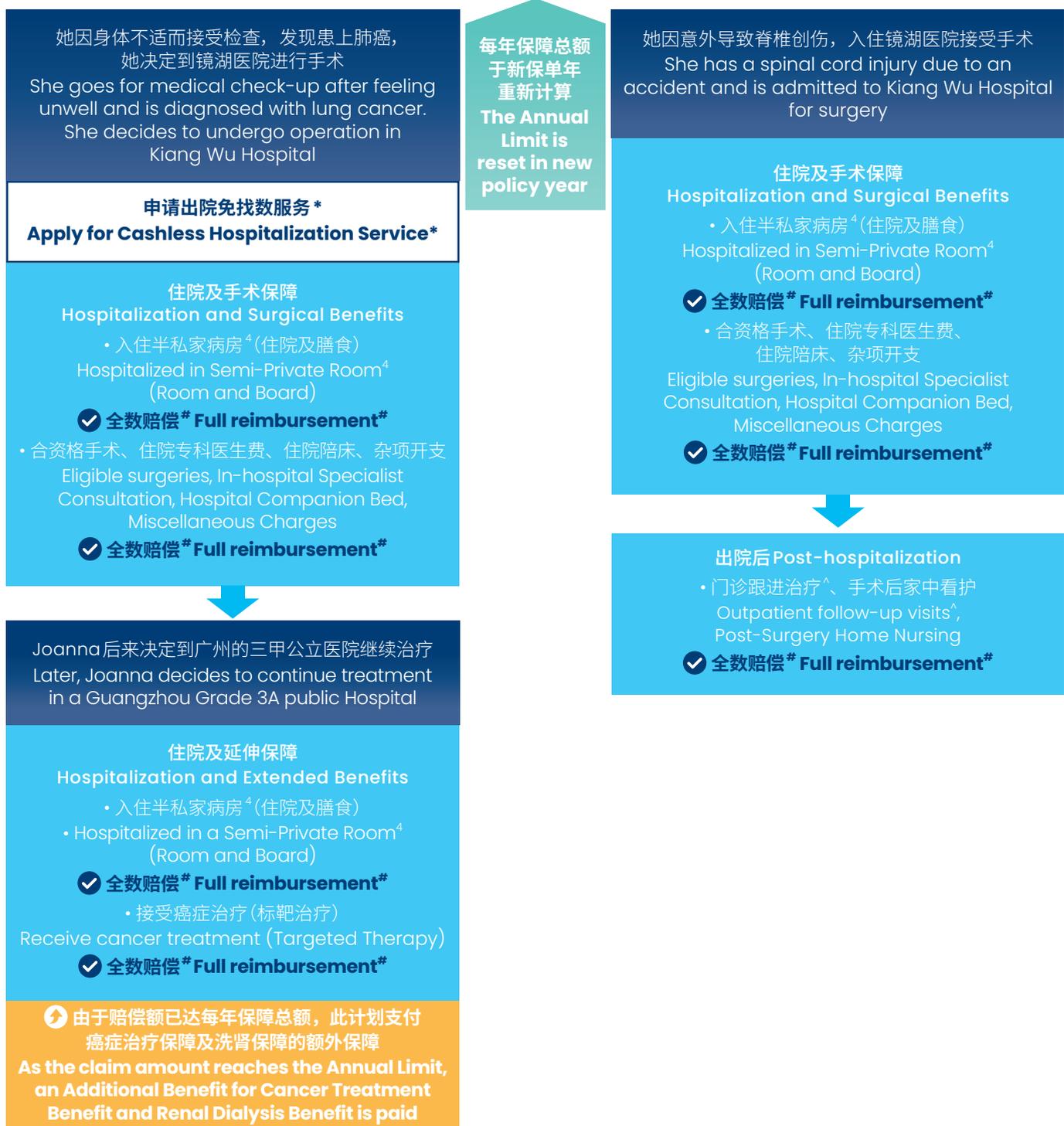
例子 Example

住在澳门的 Joanna 投保 **医+全护保**，以便在世界各地享有不设分项赔偿限额的全额赔偿¹ 医疗保障。

Joanna, living in Macau, takes out **E+ Total Care** to enjoy worldwide medical coverage with full reimbursement¹ and no itemized benefit sub-limits.

每年保障总额 Annual Limit: HK\$/MOP680,000 港元 / 澳门元

●●●●● 保单年 Policy Year 1 ●●●●● ●●●●● 保单年 Policy Year 2 ●●●●●



附注 Notes:

* 有关“出院免找数服务”的详情，请参考 YF GO! 增值服务的服务单张：<https://www.yflife.com/sites/default/files/VAS/Service-Flyer-SC.pdf>
For the details of Cashless Hospitalization Service, please refer to the Service Flyer of YF Go! Value-added Services:
<https://www.yflife.com/sites/default/files/VAS/Service-Flyer-EN.pdf>

全数赔偿以每年保障总额 680,000 港元 / 680,000 澳门元为限。
Full reimbursement is subject to an Annual Limit of HK\$680,000 / MOP680,000.

^ 保障出院后 / 完成门诊手术起计 60 日内的 3 次门诊治疗。
Cover 3 follow-up outpatient visits within 60 days after discharge from Hospital or completion of the Outpatient Surgery.

医+全护保一览表

E+ Total Care – at a glance

(港元HK\$ / 澳门元MOP)

保障 Benefits	保障限额 Benefit Limits
受保地区 Covered Areas	全球 Worldwide
受保住院病房级别¹⁴ Covered Room Level ¹⁴	澳门的指定医院住院：半私家病房 ⁴ 中国内地的指定医院(组别A)住院：标准私家病房 ⁴ 中国内地的指定医院(组别B)住院：半私家病房 ⁴ 非指定医院的住院：普通病房 ¹⁵ Confinement in the Designated Hospitals in Macau: Semi-Private Room ⁴ Confinement in the Designated Hospitals (Group A) in Mainland China: Standard Private Room ⁴ Confinement in the Designated Hospitals (Group B) in Mainland China: Semi-Private Room ⁴ Confinement in non-Designated Hospitals: Ward ¹⁵
每年保障总额 (适用于保障项目(a)-(m)) Annual Limit (Applicable to benefit items (a)-(m))	680,000
终身保障限额 Lifetime Limit	没有 Nil
住院保障 Hospitalization Benefits	
(a) 住院及膳食 Room and Board	全数赔偿 ¹ Full reimbursement ¹
(b) 杂项开支 Miscellaneous Charges	
(c) 住院医生费 In-hospital Doctor's Call	
(d) 住院专科医生费 In-hospital Specialist Consultation	
(e) 深切治疗 ⁵ Intensive Care ⁵	
(f) 住院陪床 ⁶ Hospital Companion Bed ⁶	
手术保障 Surgical Benefits	
(g) 外科医生的手术收费 ² Surgeon's Fee ²	全数赔偿 ¹ Full reimbursement ¹
(h) 麻醉师费 ² Anaesthetist's Fee ²	
(i) 手术室费 ² Operating Theatre Fee ²	
住院前后 / 手术前后之保障 Pre- and Post-Hospitalization/Surgery Benefits	
(j) 住院前后 / 手术前后的门诊保障 ^{2,3} Pre- And Post-Hospitalization/ Surgery Outpatient Treatment Benefit ^{2,3}	全数赔偿 ¹ Full reimbursement ¹
(k) 手术后家中看护 ⁷ (每保单年最高保障日数) Post-Surgery Home Nursing ⁷ (Max. days per policy year)	全数赔偿 ¹ Full reimbursement ¹ (60日 days)

保障 Benefits	保障限额 Benefit Limits
延伸保障 Extended Benefits	
(l) 癌症治疗保障 ⁸ Cancer Treatment Benefit ⁸ – 化疗 Chemotherapy – 电疗 Radiotherapy – 标靶治疗 Targeted Therapy – 荷尔蒙治疗 Hormonal Therapy – 免疫治疗 Immunotherapy	全数赔偿 ¹ Full reimbursement ¹
(m) 洗肾保障 ⁸ Renal Dialysis Benefit ⁸	全数赔偿 ¹ Full reimbursement ¹
(n) 癌症治疗保障及洗肾保障的额外保障 ⁹ (每保单年) Additional Benefit for Cancer Treatment Benefit and Renal Dialysis Benefit ⁹ (per policy year)	680,000
(o) 第二索偿现金津贴 ¹⁰ (每保单年最高保障日数) Second Claim Cash Benefit ¹⁰ (Max. days per policy year)	每日 300 per day (90 日 days)
其他 Others	
(p) 医疗意外事故保障 ¹¹ Medical Negligence Benefit ¹¹	100,000
(q) 身故保障 Death Benefit	5,000
保单资料 Policy Information	
保单类别 Plan Type	基本计划 Basic Plan
保单货币 Policy Currency	港元 / 澳门元 HK\$ / MOP
保费 ¹² Premium ¹²	<ul style="list-style-type: none"> - 每年续期，保费并非保证。续期保费会按受保人当时实际年龄及同类保障级别的保费率作出调整 - 如符合无索偿奖赏要求，续期保费可享有高达15%折扣 - 保费按每年 / 每半年 / 每季 / 每月缴付 - Yearly renewable; the premium is non-guaranteed. The renewal premium will be adjusted based on the Insured's attained age and at the premium rate in effect according to the same level of benefit at the time of policy renewal - If the No-Claim Bonus conditions are fulfilled, a discount up to 15% on the renewal premium can be enjoyed - Annual/Semi-annual/Quarterly/ Monthly Payment
保障类别 Type of Benefit	偿款产品 — 赔偿合资格住院及医疗费用 (受限于此计划内每项保障的最高保障额(如适用)) Indemnity Product – Reimburses the eligible hospitalization and medical expenses (subject to the maximum limit of each benefit item of the Plan, if applicable)
投保资料 Basic Information	
投保年龄 (以上次生日年龄计算) Issue Age (At Last Birthday)	0至70岁 Age 0-70
保障年期 Benefit Term	至100岁 To Age 100
缴付保费年期 Premium Payment Term	至100岁 To Age 100

有关保费详情，请浏览本公司网页 www.yflife.com/sc。

For the details of premiums, please refer to our company website at www.yflife.com/en.

产品概览 Product Highlights	产品特点 Product Features	例子 Example	一览表 At a Glance	注 Remarks	重要资料 Important Information
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注

- 全数赔偿是指不设分项赔偿限额，只适用于赔偿合格费用的实际金额，并受每年保障总额，以及产品册子及保单文件上的其他条件所限。全数赔偿只适用于某些保障项目。适用于医疗上必须的治疗及手术，赔偿金额须符合“合理及惯常”的收费，即不超过由当地具有类似地位的医疗服务机构于当地就相类同的疾病或受伤，为相同年龄和性别人士提供治疗、医疗服务或供应品之一般标准收费。有关全数赔偿的条款、不保事项及限制的详情，请参阅保单文件。
- 亦适用于因伤病并由医生建议而(i)在医院日症房或(ii)在香港及澳门地域内的诊所进行医疗上必须的手术。我们保留决定合资格诊所的权利。
- 住院前后/手术前后门诊保障只适用于住院/门诊手术前的31日内的1次门诊治疗费用，以及出院后/完成门诊手术起计60日内的3次门诊治疗费用。
- “标准私家病房”是指一间于香港的医院分类为标准私家病房的房间。对于没有相应病房级别分类的医院或于香港以外的任何医院，标准私家病房是指受保人在住院期间入住设有私人设施(只包括睡房及浴室/淋浴间)并只供受保人私人使用的病房。在上述各种情况下，标准私家病房不包括设有厨房、饭厅或客厅之任何以上等级病房。
“半私家病房”是指一间于香港的医院分类为半私家病房的房间。对于没有相应病房级别分类的医院或于香港以外的任何医院，半私家病房是指医院内设有共用浴/淋浴间并提供(i)一张床或两张床的房间；或(ii)最多双人使用的房间。在上述各种情况下，半私家病房不包括设有厨房、饭厅或客厅之任何以上等级病房。
标准私家病房只适用于中国内地的指定医院(组别A)住院。半私家病房则适用于澳门的指定医院及中国内地的指定医院(组别B)住院。
有关指定医院名单，请浏览万通保险网站 www.yflife.com/sc。本公司有绝对酌情权就指定医院名单不时作出更改、更新或修订，任何更改均被视为于本公司网页公布之日生效，无论与否另行发出通知。
- 为免存疑，已获保障赔偿的入住深切治疗部期间所需的住院及膳食实际开支，不会再获住院及膳食保障的赔偿。
- 以一张额外床位为限。
- 本公司有权要求有关书面建议的证明，例如转介信或由主诊医生在索偿申请表内提供的陈述。保障只限于在任何时段由最多一位合格护士提供的护理服务，不论合资格之住院次数。
- 适用于在医院、在医院日症房或在香港及澳门的诊所接受癌症治疗及洗肾。
- 若受保人合资格并接受癌症治疗保障及/或洗肾保障所涵盖的治疗以及该保单年已支付或将获支付之保障赔偿总额已达相关保单年度之每年保障总额，我们将支付癌症治疗保障及洗肾保障的额外保障。保障的金额将相等于超出上述癌症治疗保障及/或洗肾保障下应支付的金额的合理及惯常的实际收取的治疗费用，以每保单年最高保障额680,000港元/680,000澳门元为限。
- 如受保人已在其他保险公司就住院或门诊手术的费用获得部份赔偿，并于此计划可获赔偿，本公司会支付第二索偿现金津贴。
- 若受保人因医院的医护人员的疏忽行为或未有遵照合理及惯常的标准而直接导致发生已证实之事故后30天内身故，而已证实之事故符合保单文件的特定要求，则此计划会一次过支付医疗意外事故保障予受益人。
- 我们保留不批准保单续保及修订保障或保费的权利，并会于保单周年日30天前以书面通知您。保单不获续保将不会影响受保人在保单期满前出现的保障索偿。
- 在已给付无索偿奖赏后，如我们就过往任何保单年期的索偿而支付保障，在保单内需支付的赔偿金额内将扣除该等已给付无索偿奖赏的金额。

Remarks

- Full reimbursement shall mean no itemized benefit sub-limit and is only applicable to the reimbursement of the actual amount of eligible expenses, and is subject to the Annual Limit and other conditions as stated in the product brochure and the policy document. Full reimbursement applies to certain benefit items only. Applicable to treatment and surgical procedures that are Medically Necessary. Reimbursement will be made on a “Reasonable and Customary” basis, i.e., the charge does not exceed the general level of charges being made by medical service providers of similar standing in the locality where the charge is incurred for similar treatment, services or supplies to individuals of the same gender and age, for a similar disease or injury. Please refer to the policy document for details of the terms, conditions, exclusions and limitations of full reimbursement.
- Also applicable to Medically Necessary surgical procedure, recommended and performed by a Doctor due to Disability, (i) in the day case unit of a Hospital or (ii) in a clinic in Hong Kong and Macau. We reserve the right to determine the eligibility of a clinic.
- Pre- And Post-Hospitalization/Surgery Outpatient Treatment Benefit covers 1 outpatient visit within 31 days preceding the Confinement/Outpatient Surgery and 3 outpatient visits within 60 days after discharge from Hospital or completion of the Outpatient Surgery.
- “Standard Private Room” shall mean a room categorised as a Standard Private room by a Hospital in Hong Kong. For Hospitals without the corresponding ward class categorisation or any Hospitals outside Hong Kong, a Standard Private Room shall mean a room for Insured’s private use during the Confinement with its own private facilities including a bedroom and bath/shower room(s) only. In any case mentioned above, a Standard Private Room shall exclude any room of upper class with its own kitchen, dining or sitting room(s).
“Semi-Private Room” shall mean a room categorised as a Semi-Private room by a Hospital Hong Kong. For Hospitals without the corresponding ward class categorisation or any Hospitals outside Hong Kong, a Semi-Private Room shall mean: (i) a single or two-bedded room; or (ii) a room with maximum double occupancy, and with a shared bath/shower room in a Hospital. In any case mentioned above, a Semi-Private Room shall exclude any room of upper class with its own kitchen, dining or sitting room(s).
Standard Private Room is only applicable to Confinement in the Designated Hospitals (Group A) in Mainland China. Semi-Private Room is applicable to Confinement in the Designated Hospitals in Macau and Designated Hospitals (Group B) in Mainland China.
For the list of Designated Hospitals, please visit YF Life’s website at www.yflife.com/en. The list of Designated Hospitals may be varied, updated and amended from time to time at the Company’s discretion, and any change shall be deemed as effective on the date of publication on the Company’s website irrespective of whether any separate notice is given.
- For the avoidance of doubt, the room and board charges sustained during such Confinement in an Intensive Care Unit so incurred and payable under the benefit shall not be payable under the Room and Board benefit.
- Subject to one extra bed.
- The Company shall have the right to ask for proof of recommendation, e.g., written referral or testifying statement on the claim for by the attending Doctor. The benefit is restricted to nursing services provided by a maximum of one Qualified Nurse during any given time slot regardless of the number of eligible Confinements.
- Applicable to Cancer Treatment and Renal Dialysis performed in a Hospital, in the day case unit of a Hospital or in a clinic in Hong Kong and Macau.
- We shall pay the Additional Benefit for Cancer Treatment Benefit and Renal Dialysis Benefit if the Insured is eligible for and receives treatment covered under the Cancer Treatment Benefit and/or Renal Dialysis Benefit, and the total benefit amount paid or payable for the policy year has reached the Annual Limit of the relevant policy year. The amount of the benefit shall be equal to the Reasonable and Customary charges actually incurred for such treatment in excess of the amount payable under the Cancer Treatment Benefit and/or Renal Dialysis Benefit above, subject to a maximum limit of HK\$680,000 / MOP680,000 per policy year.
- If benefits are payable under the Plan after expenses for a Confinement or an Outpatient Surgery has been partly paid or reimbursed by another insurance company, the Company shall pay the Second Claim Cash Benefit.
- If the Insured passes away directly within 30 days of a proven incident, which fulfils the specific requirements stated in the policy document, as a consequence of any negligent action or failure to observe reasonable and customary standards by a healthcare professional of the relevant Hospital, a lump sum of Medical Negligence Benefit shall be payable to the Beneficiary.
- We reserve the right not to renew this Benefit and to adjust the benefit coverage or premium by giving 30 days’ notice in writing to you prior to any policy anniversary. Non-renewal of the Policy will not affect the Insured’s benefit claims under the Policy arising before the expiration date of the Policy.
- In the event that a benefit in respect of any previous policy year becomes payable by us after a No Claim Bonus has been given, the No Claim Bonus given shall be deducted from the benefit payable in the Policy.

14. 若受保人实际入住之病房级别高于受保住院病房级别，本公司将根据病房级别调整因子而调整赔偿金额，详情请参考“重要资料”内的“选择病房级别限制”。
15. “普通病房”是指一间于香港的医院分类为低于半私家病房级别的房间，包括分类为普通病房或标准病房的房间。对于没有相应病房级别分类的医院或于香港以外的任何医院，普通病房是指医院内设有多于两张病床的房间，但不包括住院陪床。

14. If the actual room level of the confinement is of a level higher than the Covered Room Level, the Company will adjust the benefits paid subject to the room level adjustment factor. For details, please refer to “Restriction in the Choice of Room Level” in “Important Information”.
15. “Ward” shall mean a room categorised as a ward class lower than a Semi-private Room including the room categorised as a general ward or standard room by a Hospital in Hong Kong. For Hospitals without the corresponding ward class categorisation or any Hospitals outside Hong Kong, a Ward shall mean a room in a Hospital with more than 2 patient beds (not including hospital companion bed).

重要资料

缴付保费年期及保障年期

缴付保费年期及保障年期最长可至受保人100岁。如在保费到期日起计31天宽限期届满前仍未缴付保费，保单的所有保障将会终止。

终止

在下列任何情况下，保单的所有保障将会终止：

- 于保单之保单周年(但可根据附载于保单内之续保条款每年续保或根据保单所提供的方式保单复效)。但在任何情况下，保单会在保单最后的保障到期日终止
- 您呈交书面要求终止保单，而您的要求获我们接纳
- 受保人身故
- 在宽限期届满前，到期的保费仍未能缴付

续保

在每保单周年及于保单之保障到期日前，如我们预先获获所需的保费，而该保费乃根据受保人当时实际年龄及当时同类保障级别的保费率计算，保单便会获得续保一年。我们保留不批准保单续保的权利，并会于保单周年日30天前以书面通知您。保单不获续保将不会影响受保人在本保单期届满前出现的保障索偿。

保障及保费调整

我们保留修改及/或修订保障的结构、保障的级别、保障限制及规范及/或保单之保费的权利，并会于每保单周年不少于30天前以书面方式通知您。

保费会因应某些因素而作出调整，这些因素包括但不限于万通保险过去的索偿纪录、开支、医疗通胀、医疗趋势，以及/或因修定保障架构/保障级别(如有)而影响预期未来的索偿成本。

已修订保障的结构、保障的级别、保障的限制及规范及/或保费的生效日期会列明于上述通知书内。如您拒绝接纳已修订的保障及/或保费，您必须以书面方式通知我们，该书面通知必须获我们收到作实，而保单将于上述通知书日期的下一个保费到期日自动终止。

有关此计划过往保费增长率资料，请浏览本公司网页：



澳门：
<https://www.yflife.com/sc/Macau/Individual/Services/Useful-Information/Historical-Premium-Increase-Rates/>

Important Information

Premium Payment Term and Benefit Term

The premium payment term and the benefit term are up to age 100 of the Insured. 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.

Termination

All coverage under the Policy will be terminated when one of the following events occurs:

- On the policy anniversary of the Policy (subject to annual renewal as stated under the Renewal clause of the Policy or reinstatement thereof in such manner as provided in the Policy). But in any event, the Policy will terminate on the latest Benefit Expiry Date of the Policy
- You submit a written request to terminate the Policy and your request is accepted by us
- The Insured passes away
- The due premium is still unpaid at the end of the Grace Period

Renewal

At each policy anniversary and before the Benefit Expiry Date of the Policy, the Policy will be renewed for another one year upon receipt of the payment of the required premium in advance by us at the premium rate in effect of the same level of benefit of the then attained age of the Insured on the date of renewal. We reserve the right not to renew the Policy by giving 30 days' notice in writing to you prior to any policy anniversary. Non-renewal of the Policy will not affect the Insured's benefit claims under the Policy arising before the expiration date of the Policy.

Benefit and Premium Adjustment

We reserve the right to amend and/or revise the benefit structure, level of benefits, benefit limitations and restrictions, and/or premiums of the Policy by giving you a written notice no less than 30 days prior to each policy anniversary.

The major factors to consider for premium adjustment include, but not limited to, the claim experience of YF Life, 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.

The revised benefit structure, level of benefits, benefit limitations and restrictions, and/or premiums shall take effect on the date specified in such notification unless you decline the revised benefits and/or premiums in writing to us and received by us in which case the Policy shall automatically be terminated on the next premium due date following the date of such notification.

For relevant historical premium increase rates of the Plan, please visit our website:



Macau:
<https://www.yflife.com/en/Macau/Individual/Services/Useful-Information/Historical-Premium-Increase-Rates/>

通胀风险

将来的医疗费用有机会因通胀而较现时的费用高。因此，保费率及/或保障的级别可能会不时作出调整。此外，即使本公司按保单条款履行合约义务，您获得的金额的实质价值可能较少。

信贷风险

此计划由本公司承保及负责，保单持有人的保单权益会受其信贷风险所影响。若我们无法按保单的承诺履行其财务责任，您可能损失保单的价值及其保障。

汇率风险

如选择的保单货币并非本地货币，阁下须承受汇率风险。汇率可能波动，因而影响您以本地货币计算时所需缴付保费及利息的金额。

选择病房级别限制

若受保人于住院的任何一天入住病房之病房级别高于受保住院病房级别，以下所示的病房级别调整因子将应用于该相关住院日的保障：

受保住院病房级别	受保人于住院期间实际入住的病房级别	病房级别调整因子
普通病房	半私家病房	50%
普通病房	标准私家病房或以上	25%
半私家病房	标准私家病房	50%
半私家病房	标准私家病房以上	25%
标准私家病房	标准私家病房以上	25%

选择病房级别限制将不会应用于以下情况：

- (i) 在接受急症治疗时，因房间短缺而无法入住受保住院病房级别；
- (ii) 因病情需要隔离而入住特定级别的病房；或
- (iii) 不涉及保单持有人及/或受保人个人偏好的其他原因。

医疗上必须的

本公司会为受保人医疗上必须的医疗开支作出赔偿。

医疗上必须的指符合以下所有情况：

- (i) 因应诊断结果而施行一般惯常使用的医治方法；
- (ii) 根据既定之良好医疗守则；
- (iii) 并非就受保人及/或医生之方便而进行；及
- (iv) 不可以安全地在较低医疗护理水平的情况下进行。

合理及惯常的

指医疗上必须的及不超过由当地具有类似地位的医疗服务机构于当地就相类同的疾病或受伤，为相同年龄和性别人士提供治疗、医疗服务或供应品之一般标准收费。“合理及惯常的”收费于任何情况下不得超过实际收费。本公司可参考以下情况(如适用)决定有关医疗费用是否为“合理及惯常的”：

- (i) 由当地政府宪报就其公立医院为私家病人提供医疗服务所定的收费；
- (ii) 医疗行业的收费调查；
- (iii) 内部保险赔偿统计数据；
- (iv) 受保保障程度或水平；及/或
- (v) 其他相关的参考资料。

如本公司之公司医生认为任何医院/医疗费用并非合理及惯常的收费，本公司保留权利调整部分或全部赔偿金额。

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 you might receive less in real terms even if the Company meets all of its contractual obligations.

Credit Risk

The Plan is underwritten by the Company. The insurance benefits are held solely responsible by the Company and subject to its credit risk. If we are unable to satisfy the financial obligations of the Policy, you may lose the value of Policy and its coverage.

Exchange Rate Risk

Should you choose a policy currency other than the local currency, you are subject to exchange rate risk. Exchange rates fluctuate from time to time, which may affect the premium and benefit amounts in local currency.

Restriction in the Choice of Room Level

If on any day of Confinement, the Insured is Confined in a room of room level higher than the Covered Room Level, the room level adjustment factor set out below shall be applied to the benefits payable in relation to such days of Confinement:

Covered Room Level	Actual room level occupied by the Insured during Confinement	Room level adjustment factor
Ward	Semi-Private Room	50%
Ward	Standard Private Room or above	25%
Semi-Private Room	Standard Private Room	50%
Semi-Private Room	Above Standard Private Room	25%
Standard Private Room	Above Standard Private Room	25%

The restriction in the choice of room level shall not be applied under the following circumstances:

- (i) Unavailability of accommodation at the Covered Room Level due to room shortage for Emergency Treatment;
- (ii) Isolation reasons that require a specific class of accommodation; or
- (iii) Other reasons not involving personal preference of the Policy Owner and/or the Insured.

Medically Necessary

The Company will cover the Medically Necessary expenses incurred by the Insured.

Medically Necessary means all of the following conditions are met:

- (i) Consistent with the diagnosis and customary medical treatment for the condition;
- (ii) In accordance with standards of good medical practice;
- (iii) Not for the convenience of the Insured and/or the Doctor; and
- (iv) Cannot be safely delivered in a lower level of medical care.

Reasonable and Customary

This means a charge for medical care which is Medically Necessary and does not exceed the general level of charges being made by medical service providers of similar standing in the locality where the charge is incurred for similar treatment, services or supplies to individuals of the same gender and age, for a similar disease or injury. The "Reasonable and Customary" charges shall not in any event exceed the actual charges incurred. In determining whether an expense is "Reasonable and Customary", we may make reference to the followings (if applicable):

- (i) the gazette issued by the local government which sets out the fees for the private patient services in public hospitals;
- (ii) industrial medical fee survey;
- (iii) internal claim statistics;
- (iv) extent or level of benefit insured; and/or
- (v) Other pertinent source of reference.

The Company reserves the right to adjust any or all benefits payable in relation to any Hospital/medical charges which in the opinion of the Company's doctor is not a Reasonable and Customary charge.

不保事项

受保人若在保单日期或批准保单复效申请当天(以较后者为准)起计一年内自杀, 无论其是否在神智清醒的情况下, 将不获支付任何身故保障赔偿。

因以下一种或多种情况而直接或间接引致的受伤或疾病, 将不获赔偿(身故保障除外):

- 在保障生效日期前或在批准保单复效前(以较后者日期为准)已存在伤病的情况或已存在伤病复发情况, 且受保人已察觉或在一般情况下应可察觉的有关病征或病状;
- 因怀孕、堕胎、生育或小产、产前及产后护理及其他由上述情况引致的并发症等;
- 毒瘾、酒瘾或滥用/ 依赖酒精;
- 美容或整形外科手术;
- 于受保人17岁生日前出现病征或病状、或已确诊的先天性畸形或反常、绝育或不育(任何性别)及直接或间接与变性手术有关之治疗;
- 牙科护理或手术;
- 一般身体检查、普查及/或预防性护理或检验、基因测试或遗传咨询辅导、接种及疫苗注射、病后复康、托管、疗养或休养、或非根据导致需要住院、治疗或诊症之状况的诊断及治疗而引致的开支;
- 医疗实验及/或非主流医疗技术/程序/治疗;
- 精神紊乱、心理或精神疾病、行为问题或人格障碍(包括但不限于焦虑症、抑郁症或紧张);
- 睡眠疾病(除非由专科医生确认是危及生命的睡眠窒息症治疗);
- 治疗过度肥胖(包括病态肥胖)、控制体重计划或减肥手术(除非由专科医生于传统治疗方法失败后确认是必须的减肥手术);
- 扁桃腺、增殖腺、疝气的治疗或手术, 而该治疗或手术在保障生效日期后120天内进行;
- 眼球的折射毛病或需以眼镜帮助矫正的情况;
- 为受保人利益所购买或使用的医疗辅助器具及装置, 包括但不限于眼镜、隐形眼镜、助听器或轮椅;
- 作为器官捐赠者捐赠器官、有关于寻找及采购替换器官而须支付的移植服务费用、所有相关的运输费用及行政费用;
- 自杀、企图自杀或因神智不清醒、自残或精神状态异常的状况下而受伤;
- 受保人进行水肺潜水、参加任何非徒步进行的比赛、辅以绳索或由向导带领的攀山活动;
- 由战争(无论宣布或未宣布)、叛乱、民间骚动、革命或参与任何非法行为((例如盗窃、滥用药物或袭击)而直接或间接引致受伤、疾病或身体不适;
- 由燃烧核子武器物料、核子燃料或废料所导致的辐射或电离扩散污染的情况而直接或间接引致受伤、疾病或身体不适, 除非该等住院、治疗及/或收费是直接因为核子扩散污染而引致, 而核子扩散污染是: (i) 由恐怖主义行为引致; (ii) 当受保人于其永久居住国家或地方以外的旅程中发生; 及(iii) 受保人并非恐怖分子参与其中。就此不保事项, 燃烧将包括任何自燃核子程序, 或由石棉引致疾病或身体不适;
- 任何只为物理治疗及/或为病征及/或病状而进行之诊断影像、化验室检查或其他诊断程序之住院;

Exclusions

If the Insured commits suicide, whether sane or insane, within one year from the Policy Date or within one year from the date we approve the reinstatement application, whichever is later, no Death Benefit will be payable.

The Policy will not pay any benefit claims (except for Death Benefit) caused by Sickness or Injury resulting directly or indirectly, by one or more of the following:

- Pre-existing conditions or recurrence of chronic pre-existing conditions which existed before the Effective Date of Coverage or the date we approve the reinstatement application, whichever is later, in respect of the Insured and which presented signs or symptoms of which the Insured has been aware or should reasonably have been aware;
- Any condition resulting from pregnancy, abortion, childbirth or miscarriage, pre-natal care as well as post-natal care, and other complications arising therefrom;
- Drug addiction or alcoholism or alcohol abuse/dependency;
- Cosmetic or plastic surgery;
- Congenital deformities or anomalies which present signs or symptoms, or are diagnosed, before the Insured attains 17 years of age, sterilization or infertility of either gender, treatment directly or indirectly related to a gender change;
- Dental care or surgery;
- General check-up, screening and/or preventive care/checking, genetic testing or counselling, vaccination/immunization, convalescence, custodial or sanatorium care or rest care, or expenses incurred not in accordance with the diagnosis and treatment of the condition for which the Confinement/treatment/consultation is required;
- Experimental and/or unconventional medical technology/procedure/therapy;
- Mental disorder, psychological or psychiatric conditions, behavioral problems or personality disorder, including but not limited to anxiety, depression or stress;
- Sleep disorders except for the treatment of sleep apnoea which is life threatening as confirmed by a Doctor (who shall be a qualified specialist in this medical profession);
- Treatment of obesity (including morbid obesity), weight control programs or bariatric surgery (except when bariatric surgery is necessary as confirmed by a Doctor who shall be a qualified specialist in this medical profession after failure of conventional treatments by Doctor);
- Treatment or surgery for tonsils, adenoids, hernia, which occurred within 120 days after the Effective Date of Coverage;
- Refractive errors of the eyes or their correction by glasses;
- Procurement or use of medical appliances and medical devices for the benefit of the Insured including but not limited to spectacles, contact lenses, hearing aids or wheelchairs;
- Organ donation as the Organ Donor, transplant service for which the cost incurred in connection with identifying and procuring a replacement organ and all associated transportation costs and administrative costs;
- Suicide, attempted suicide or injuries due to insanity, self-infliction or functional disorder of mind;
- Scuba diving or engaging in or taking part in race other than on foot, mountaineering involving the use of ropes or guides by the Insured;
- Injury, disease or sickness arising directly or indirectly from war (declared or undeclared), riot, civil commotion, revolution, or any warlike operation or from participating in any illegal activity such as, but not limited to robbery, drug abuse or assault;
- Injury, disease or sickness arising directly or indirectly from waste nuclear weapons material, ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel, except where the Confinement, treatments and/or charges are made/performed/incurred as a direct result of such nuclear contamination which (i) is caused by terrorist act and (ii) occurs while the Insured is travelling outside the Insured's permanent residence country or place and (iii) the Insured is not involved as a terrorist. For the purpose of this exclusion only, combustion shall include any self-sustaining process of nuclear fission, or disease or sickness arising from asbestos;
- Any Hospital Confinement primarily for physiotherapy and/or for the investigation of signs and/or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures;

- 根据政府条例或其他保险计划而获得赔偿的情况；
- 人体免疫能力缺乏病毒及/或任何与此症相关的情况，包括爱滋病及/或任何因此病症而出现的变种、衍生状态或变异；
- 受保人因接受包皮环截而住院的第一天在其12岁生日前。如受保人因接受包皮环截而住院的第一天在保障生效日期前2年后，此项保障限制将不适用；
- 传统中医治疗的费用，包括但不限于中草药治疗、跌打、针灸、穴位按摩及推拿，以及另类治疗，包括但不限于催眠治疗、气功、按摩治疗、香薰治疗、自然疗法、水疗法、顺势疗法及其他类似的治疗；
- 任何不属受保人医疗上必须的住院、检查、服务或供应品；或任何超出合理及惯常的收费；
- 于住院时受保人没有接受积极治疗；或受保人维持持续性意识障碍的状态(包括但不限于持续性植物人、昏迷)超过60天并于医院接受超过连续180天的治疗；或
- 在保单计划表或修订文件内所有注明之不保情况(如有)。

提供资料责任及未符合这要求的后果

保单是基于您和受保人于投保申请内提供给我们的资料。重要的是，您和受保人对所提供的资料都是真实和准确的，因为这些资料有助于我们决定您和受保人是否符合保单的资格。如果您或受保人提供给我们的资料不准确、误导或被夸大，您应该立即通知我们。如您或受保人未有提供准确及真实的资料，或您或受保人提供误导或被夸大的资料，保单的保障可能会受到影响。

于保单作为依据的投保申请内，或任何足以影响保单的任何事项、或有关依据保单提出任何索偿事宜中，如有任何诈骗、关键性的错误陈述或隐瞒，我们有绝对权决定保单自成立之日起无效及保单的所有索偿失效。任何已支付的保费，将在此情况下不被发还及没收。

索偿程序

如在接受治疗或手术前须查询有关索偿资格、可赔偿金额估算、赔偿限额或回复此类查询的时限之服务承诺，请致电本公司客户服务热线：(853) 2832 2622。

有关索偿程序，请浏览本公司网页

澳门：<https://www.yflife.com/sc/Macau/Individual/Services/Claims-Corner>

保单冷静期及取消保单的权利

如保单未能满足您的要求，您可以书面方式要求取消保单，连同保单退回本公司(澳门苏亚利斯博士大马路320号澳门财富中心8楼A座)，并确保本公司的办事处于交付保单的21个日历日内，或向您/您的代表人交付《通知书》(说明已经可以领取保单和冷静期届满日)后起计的21个日历日内(以较早者为准)收到书面要求。

于收妥书面要求后，保单将被取消，您将可获退回已缴保费金额，但不包括任何利息。若曾获赔偿或将获得赔偿，则不获发还保费。

期满及退保

如需申请退保，您只需填妥、签署并寄回由本公司提供的特定表格，本公司将安排退保事宜。

如需索取有关表格，请联络您的持牌保险中介人或致电本公司客户服务热线：(853) 2832 2622。

于保单期满时，本公司将致函通知您，并会安排保单终止事宜。

- Any disability for which compensation is payable under any government law or for which benefits are payable under any other insurance policy except to the extent that such charges are not reimbursed by such laws or other policies;
- Human Immunodeficiency Virus (HIV) Infection and/or any HIV-related conditions including Acquired Immune Deficiency Syndrome (AIDS) and/or any mutations, derivations or variations thereof;
- The first day of Confinement for Circumcision of the Insured occurs before the Insured's 12th birthday. This benefit restriction will not be applied if the first day of Confinement for Circumcision occurs beyond 2 years after the Effective Date of Coverage;
- Expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments;
- Any Confinement, treatment, investigation, services or supplies which are not Medically Necessary to the Insured; or any charges which exceed the Reasonable and Customary charges;
- No active treatment is performed on the Insured during Hospital Confinement; or the Insured is in state of continuous disorder of consciousness for more than 60 days (including but not limited to persistent vegetative state, coma) during Hospital Confinement whilst staying in Hospital for more than 180 consecutive days; or
- All excluded condition(s) as specified in the Policy Schedule or endorsement(s), if any.

Duty of disclosure and the consequences of not making full disclosure

The Policy is based on the information you and the Insured gave us in your insurance application. It is important that you and the Insured were truthful and accurate with all of the information provided, as this information helped us to decide if you and the Insured were eligible for the Policy. You should let us know immediately if the information you or the Insured gave us was inaccurate, misleading, or exaggerated. If you or the Insured did not provide accurate and truthful information, or you or the Insured gave misleading or exaggerated information, the benefits under the Policy may be affected.

If there is any fraud, material misstatement or concealment in the insurance application on which the Policy is based, or in relation to any other matter affecting the Policy, or in connection with the making of any claim under the Policy, we shall have the sole and absolute discretion to render the Policy null and void from the date of inception and forfeit all claims. Any premium paid shall not be refundable and shall be forfeited.

Claims Procedures

If you wish to make an enquiry on the eligibility of a claim, claimable amount estimate and reimbursement limit before undergoing a treatment or procedure, or our service pledge on the response time to such enquiries, please contact our Customer Service Hotline at (853) 2832 2622.

For details of the procedures for making claims, please refer to our website at

Macau: <https://www.yflife.com/en/Macau/Individual/Services/Claims-Corner>

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 (Avenida Doutor Mario Soares No. 320, Finance and IT Center of Macau, 8 Andar A, Macau) 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 you paid, without any interest. No refund can be made if a benefit payment has been made, is to be made or impending.

Maturity and Surrender

You may surrender the Policy by submitting a written request on the forms prepared for such purposes. We will arrange the policy surrender. You may contact your licensed insurance intermediary or contact our Customer Service Hotline at (853) 2832 2622 to get a copy of the form. Upon policy maturity, we will send a notification letter to you and will arrange policy termination accordingly.

医+全护保由万通保险国际有限公司(“万通保险”)承保。您可以选择单独投保此计划，毋须同时投保其他类型的保险产品，除非该计划只设附加保障选项，而必须附加于基本计划。

此产品册子只提供一般资料，仅作参考之用，并非保单的一部分，亦未涵盖保单的所有条款。有关保障范围、详情及条款，以及不保事项，请参阅保单的条款及保障/保单文件。此产品册子不能作为万通保险与任何人士或团体所订立之任何合约。

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E+ Total Care is underwritten by YF Life Insurance International Limited (“YF Life”). You can always choose to take out these plans as a standalone plan without enrolling with other type(s) of insurance product at the same time, unless such plans are only available as a supplementary benefit which needs to be attached to a basic plan.

This product brochure provides information for general 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/policy documents for exact benefit coverage, terms and conditions, and exclusions. This product brochure does not represent a contract between YF Life and anyone or any entity else.

This product brochure is intended to be distributed in Macau only. It shall not be construed as an offer to sell or a solicitation of an offer or recommendation to purchase or sale or provision of any insurance product of YF Life outside Macau. If you are not currently in Macau, YF Life will not be able to provide you with related products and offers. You and other interested parties should seek independent financial, tax, and legal advice.

Although care is taken in preparing this product brochure, YF Life disclaims any express or implied warranty as to the accuracy of the content and any liability with respect to it. In the event of any conflict or inconsistency between the contents of this product brochure and the relevant policy contracts, the relevant policy contract shall prevail. For enquiries or to obtain a sample policy document, please contact our consultants. For other enquiries, please call our Customer Service Hotline: Macau (853) 2832 2622.

客户服务

澳门：澳门苏亚利斯博士大马路320号澳门财富中心8楼A座
 万通保险客户服务热线：澳门 (853) 2832 2622
 中国内地免费热线：澳门 400 842 3607

Customer Service

Macau: Avenida Doutor Mario Soares No. 320,
 Finance and IT Center of Macau, 8 Andar A, Macau
 Customer Service Hotline: Macau (853) 2832 2622
 Mainland China Toll-Free: Macau 400 842 3607

万通保险国际有限公司（万通保险）的主要权益股东*包括拥有174年历史、美国五大寿险公司**之一的Massachusetts Mutual Life Insurance Company（美国万通），以及云锋金融控股有限公司等。

万通保险与Barings（霸菱）为长久战略合作伙伴，凭藉独占鳌头的环球投资实力与合作网络，携金融科技创新强劲动能，居香港保险业领先地位。

*美国万通及云锋金融控股有限公司为间接持有万通保险国际有限公司的股份。

**美国五大寿险公司乃按2025年6月2日《FORTUNE 500》公布的“互惠寿险公司”及“上市股份寿险公司”2024年收入排行榜合并计算。

The major shareholders* of YF Life Insurance International Limited (YF Life) include Massachusetts Mutual Life Insurance Company (MassMutual), which itself has 174 years of experience and is one of the Five Largest US Life Insurance Companies**, as well as Yunfeng Financial Holdings Limited, among others.

YF Life is a long-term strategic partner of Barings. We stay at the forefront of Hong Kong's insurance industry with our superior global investment capabilities, extensive partnership network, and fintech innovation.

* MassMutual and Yunfeng Financial Holdings Limited have indirect shareholdings in YF Life Insurance International Limited.

**The "Five Largest US Life Insurance Companies" are ranked according to the results of "Insurance: Life, Health (Mutual)" and "Insurance: Life, Health (Stock)" on total revenues for 2024, and based on the FORTUNE 500 as published on June 2, 2025.



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REDnote

医+全护保 E+Total Care

每年保费 (港元/澳门元) Annual Premium (HK\$/MOP)

已届年龄 Attained Age	男 Male	女 Female	已届年龄 Attained Age	男 Male	女 Female	已届年龄 Attained Age	男 Male	女 Female
0	6,118	5,244	34	5,535	7,080	68	26,338	23,556
1	5,714	4,980	35	5,606	7,296	69	28,034	24,976
2	5,308	4,717	36	5,675	7,577	70	29,893	26,440
3	4,904	4,453	37	5,744	7,888	71*	30,581	26,582
4	4,498	4,189	38	5,872	8,269	72*	31,303	26,731
5	4,095	3,926	39	6,042	8,625	73*	32,050	26,896
6	4,018	3,863	40	6,270	8,994	74*	32,754	27,046
7	3,940	3,798	41	6,570	9,156	75*	33,283	27,168
8	3,864	3,735	42	6,893	9,391	76*	33,814	27,287
9	3,787	3,671	43	7,239	9,625	77*	34,344	27,409
10	3,710	3,605	44	7,557	9,966	78*	34,880	27,534
11	3,750	3,611	45	7,723	10,301	79*	35,424	27,658
12	3,790	3,616	46	8,216	10,643	80*	36,158	27,785
13	3,831	3,621	47	8,739	10,879	81*	36,782	27,926
14	3,872	3,626	48	9,229	11,083	82*	37,384	28,059
15	3,913	3,629	49	9,701	11,287	83*	37,957	28,187
16	3,974	3,801	50	10,039	11,466	84*	38,542	28,319
17	4,036	3,975	51	10,705	11,762	85*	39,045	28,425
18	4,143	4,147	52	11,274	12,048	86*	39,265	28,470
19	4,248	4,259	53	11,848	12,326	87*	39,490	28,515
20	4,363	4,323	54	12,438	12,599	88*	39,706	28,562
21	4,433	4,605	55	13,037	12,863	89*	39,934	28,609
22	4,498	4,829	56	13,838	13,462	90*	40,166	28,657
23	4,572	5,008	57	14,692	14,079	91*	40,394	28,705
24	4,641	5,232	58	15,605	14,747	92*	40,632	28,753
25	4,713	5,433	59	16,548	15,431	93*	40,865	28,801
26	4,752	5,579	60	17,549	16,120	94*	41,102	28,851
27	4,790	5,776	61	18,598	16,666	95*	41,351	28,901
28	4,832	5,967	62	19,677	17,237	96*	41,587	28,951
29	4,884	6,159	63	20,812	17,838	97*	41,840	29,002
30	4,947	6,348	64	21,974	18,804	98*	42,086	29,051
31	5,101	6,521	65	23,170	19,880	99*	42,345	29,104
32	5,248	6,685	66	24,188	21,052			
33	5,410	6,877	67	25,253	22,268			

*只适用于续保 For Renewal Only