

| 医疗 Medical |

# 优裕医疗保 Prestige MediCare

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《iMONEY 智富杂志》优秀保险企业大奖2019

最佳医疗保障



资本卓越银行及金融大奖  
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资本卓越保险服务大奖

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优裕医疗保为追求优质生活的您提供一站式医疗保障，一旦不幸患病或意外受伤，可即时就医接受优质的治疗，让您早日重拾健康，重投优裕生活。

Prestige MediCare is a one-stop medical insurance solution for the discerning individual. In the unfortunate event of your falling ill or suffering injury in an accident, the plan enables you to receive prompt, quality medical treatment, giving you total peace of mind as you recover and get your life back in order.





# 优裕医疗保

## Prestige MediCare

1

终身医疗保障  
高达\$30,000,000

Lifetime Medical  
Protection up to \$30,000,000



- 全数赔偿入院治疗前、中及后期的实际医疗开支  
Full reimbursement of the actual expenses incurred before, during and after in-hospital treatment
- 不设个别项目限额  
Without limit on individual benefit items

2

设每年垫底费  
保费更相宜

Annual Deductible for  
Lower Premium



- 4款选择：每年 0 / 15,000 / 30,000 / 100,000  
港元 / 澳门元  
4 Options: HK\$/MOP 0 / 15,000 / 30,000 / 100,000
- 垫底费越高 保费越相宜  
The higher the deductible, the lower the premium

3

保证每年续保  
至100岁

Guaranteed Annual  
Renewal up to Age 100



- 终身保障至100岁  
Whole life protection up to age 100

4

无索偿保费折扣  
No Claim Bonus



- 最高可达15%  
Up to 15%

5

人寿保障  
Life Protection



- 身故保障  
Death Benefit

1

# 终身医疗保障高达\$30,000,000

## Lifetime Medical Protection up to \$30,000,000



优裕医疗保全数赔偿因患病或意外受伤而需入院治疗前、中及后的实际医疗开支，不设个别项目限额，并提供多项额外津贴、康复治疗、延伸保障，以至全球紧急治疗保障。计划的终身保障额高达30,000,000港元 / 澳门元及年度保障额高达10,000,000港元 / 澳门元。

**Prestige MediCare** provides full reimbursement of the actual expenses incurred before, during and after your in-hospital treatment, due to sickness or accident, without any limit on individual benefit items. It also offers rehabilitation support, extended benefits and worldwide emergency treatment. Under the plan, you can enjoy a maximum lifetime limit of HK\$ / MOP30,000,000 and an annual limit of as much as HK\$ / MOP10,000,000.

	全数赔偿 <sup>1</sup> Full Reimbursement <sup>1</sup>	额外津贴 Extra Benefits
入院治疗前 Pre-Hospitalization	门诊治疗 <sup>2</sup> Outpatient Treatment <sup>2</sup>	
入院治疗中 <sup>3</sup> In-Hospital <sup>3</sup>	<p><b>住院费用 Hospitalization Benefits</b> 入住半私家病房 / 标准私家病房 (按入院的地区而定) Semi-private Room / Standard Private Room (according to the location of hospitalization)</p> <p><b>手术费用 Surgical Benefits</b> 包括外科医生手术费、麻醉师费及手术室租金 Including the Surgeon's Fee, Anesthetist Fee and Operating Theatre Fee</p> <p><b>指定医疗装置 Designated Medical Appliances</b> 例如冠状动脉血管成形术 (通波仔) 的支架、眼内人造晶体及人工韧带置换或植入 e.g. stents for percutaneous transluminal coronary angioplasty, intraocular lens and prosthetic ligaments for replacement or implantation between bones</p> <p><b>门诊手术费用 Outpatient Surgery</b> 于医院日症房或诊所<sup>4</sup>进行承保的门诊手术，例如：白内障切除、肠镜、胃镜、内窥镜清除膀胱结石等 Covering outpatient surgical procedures in the day-case unit of a hospital or in a clinic<sup>4</sup>, e.g. Cataract Removal, Colonoscopy, Gastrosocopy, Removal of stones in bladder by endoscopic means</p> <p><b>深切治疗 Intensive Care</b></p> <p><b>私家看护<sup>5</sup> Private Nurse<sup>5</sup></b></p> <p><b>住院陪床<sup>6</sup> Hospital Companion Bed<sup>6</sup></b></p>	<p><b>其他医疗装置 Other Medical Appliances</b></p> <p><b>在生捐赠者之移植手术费用 Living Donor Expenses for Transplantation Surgery</b></p> <p><b>门诊手术现金保障 Outpatient Surgery Cash Benefit</b></p>
入院治疗后 Post-Hospitalization	<p>门诊治疗<sup>7</sup> Outpatient Treatment<sup>7</sup></p> <p>手术后家中看护<sup>8</sup> Post-surgery Home Nursing<sup>8</sup></p>	<p><b>辅助服务<sup>9</sup> Ancillary Services<sup>9</sup></b> 包括物理治疗、言语治疗、职业治疗、脊骨神经治疗 Including physiotherapy, speech therapy, occupational therapy, chiropractic services 中医治疗 Chinese Medicine Practitioner</p> <p><b>复康中心及其相关治疗 Rehabilitation Centre &amp; Related Treatment</b></p>
延伸保障 Extended Benefits	<p><b>癌症治疗 Cancer Treatment</b> 包括化疗、电疗、标靶治疗、荷尔蒙治疗、免疫治疗及质子重离子疗法 Including Chemotherapy, Radiotherapy, Target Therapy, Hormonal Therapy, Immunotherapy and Proton Beam Therapy</p> <p><b>洗肾 Renal Dialysis</b></p> <p><b>妊娠并发症保障<sup>10</sup> Pregnancy Complications Benefit<sup>10</sup></b></p> <p><b>全球紧急门诊<sup>11</sup>及牙齿治疗<sup>12</sup>保障 Worldwide Emergency Outpatient<sup>11</sup> and Dental Treatment<sup>12</sup> Benefits</b></p>	<p><b>精神疾病治疗 Psychiatric Treatment</b></p> <p><b>善终院舍护理服务<sup>13</sup> Hospice Care<sup>13</sup></b></p> <p><b>人类免疫力缺乏病毒 / 爱滋病治疗<sup>14</sup> HIV / AIDS Treatment<sup>14</sup></b></p> <p><b>矫形手术保障 Reconstructive Surgery Benefit</b></p>



## 2

## 设每年垫底费 保费更相宜

## Annual Deductible for Lower Premium



无论您正考虑投保一份全新住院保障计划，又或想就现有住院计划加添保障，优裕医疗保都能灵活配合您的需要。计划提供4款每年垫底费金额以供选择，垫底费越高，保费便越相宜：

- 0港元 / 澳门元
- 15,000港元 / 澳门元
- 30,000港元 / 澳门元
- 100,000港元 / 澳门元

您更可于年满50、55、60或65岁的保单周年日<sup>15</sup>，选择将每年垫底费金额调低而无须再次提交健康申报，随后的保费将按所选的每年垫底费金额作出调整。

No matter whether you are planning to take out a new hospital plan or top up your existing plan, Prestige MediCare is the ideal solution. The plan offers four Annual Deductible options to suit your needs: the higher the deductible, the lower the premium.

- HK\$ / MOP 0
- HK\$ / MOP 15,000
- HK\$ / MOP 30,000
- HK\$ / MOP 100,000

You may change to a lower Annual Deductible before the policy anniversaries on or after your 50<sup>th</sup>, 55<sup>th</sup>, 60<sup>th</sup> or 65<sup>th</sup> birthday<sup>15</sup> without having to submit any satisfactory proof of insurability. The premium thereafter will be adjusted according to the Annual Deductible selected.

如患上任何指定的严重疾病<sup>16</sup>而需入院接受治疗，您将可获豁免扣减每年垫底费金额

The Annual Deductible will be waived if you are confined in a Hospital due to any designated critical illnesses<sup>16</sup>

## 3

## 保证每年续保至100岁

## Guaranteed Annual Renewal up to Age 100



无论您的健康状况或索偿纪录如何，优裕医疗保为您提供每年续保保证，保障年期最长可达至投保人100岁，让您无后顾之忧。续期保费会于每年续期时根据当时医疗费用通胀率、投保人实际年龄及同类保障级别的保费率计算。

Prestige MediCare guarantees annual renewal up to age 100 regardless of your health condition or claim records, allowing you to enjoy total peace of mind. Renewal premium will be adjusted based on medical inflation, attained age of the Insured and at the premium rate in effect for the same level of benefit at the time of renewal.



## 4

## 无索偿保费折扣

### No Claim Bonus



只要在续保时保单已于本公司从不间断地连续生效达三个保单年或以上，以及期间并无就本计划有任何索偿纪录，于支付续期保费时，即可获享无索偿保费折扣优惠，优惠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%。

Provided that the policy has been in force for three consecutive policy years and no claims were made under the plan, you will be entitled to a No Claim Bonus discount upon paying the renewal policy premium. The discount is based on a percentage of the annual premium for the preceding 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%

## 5

## 人寿保障

### Life Protection



若受保人不幸身故，计划会支付80,000港元 / 澳门元的身故保障。

In the unfortunate event that the Insured passes away, a death benefit of HK\$ / MOP80,000 will be paid.

若因医院的病房情况而未能安排入住受保级别的病房，可获得的赔偿如下：

If the confinement is not the same as the Covered Room level, the benefit payment will be as follows:

住院病房级别 Ward Type	香港、澳洲或 纽西兰 HK, Australia or New Zealand	全球 <sup>17</sup> (亚洲除外) Worldwide <sup>17</sup> (excluding Asia)	亚洲 <sup>18</sup> (香港、澳洲及纽西兰除外) Asia <sup>18</sup> (excluding HK, Australia and New Zealand)
半私家病房级别 (即与他人共用卫生间 / 浴室的单人房间或予二人共用的房间) <b>Semi-private Room</b> (i.e. a single-bed with a shared bath / shower room or a room shared by two people)	全数赔偿 <b>Full reimbursement</b>		全数赔偿 + 每日1,000港元 / 澳门元现金保障 (适用于入住私家医院，每个保单年最多60日)
低于半私家病房级别 (例如三人或四人病房等) <b>Lower than Semi-private Room</b> (e.g. 3-bedded or 4-bedded room, etc.)	全数赔偿 + 每日1,000港元 / 澳门元现金保障 (适用于入住私家医院，每个保单年最多60日) <b>Full reimbursement + Cash benefit of HK\$ / MOP1,000 per day</b> (Applicable to private hospitals, max. 60 days per policy year)		<b>Full reimbursement + Cash benefit of HK\$ / MOP1,000 per day</b> (Applicable to private hospitals, max. 60 days per policy year)
标准私家病房级别 (即连浴室的标准单人房) <b>Standard Private Room</b> (i.e. a basic single occupancy room with adjoining bathroom)	赔偿 50% <b>50% Reimbursement</b>		全数赔偿 <b>Full reimbursement</b>
高于标准私家病房级别 (即较标准私家病房更佳及具备较多设施的房间) <b>Above Standard Private Room</b> (i.e. any room with upgraded amenities and is more superior than a Standard Private Room)	赔偿 25% <b>25% Reimbursement</b>		

注：全球<sup>17</sup>(亚洲除外)的保障只适用于急症或意外，并受相关条款所限。

Note: The benefit coverage for Worldwide<sup>17</sup> (excluding Asia) is only applicable to Emergent Condition or accident and subject to terms and conditions.

## 附注

1. 须为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，即不超过当地的一般标准收费水平。
2. 适用于受保人在医院住院或进行门诊手术前31日内就同一伤病所进行的门诊，以每日一次为限。
3. 为有效控制计划成本，使保费维持于可负担水平，“医院”指包括具备提供主要手术服务设施及全职医护服务的医院。所有主要为提供复康、护理及休养的院舍、安老院、用作戒酒或戒毒或任何类似用途的地方，均不会被当作“医院”。
4. 本公司保留决定合资格诊所的权利。
5. 由主诊医生建议并由医院安排，于医院住院接受手术后或被调出深切治疗部后的住院期间，由一位合资格护士提供的护理服务，以每个保单年最多60日为限。
6. 以一张额外床位为限。
7. 适用于受保人于医院出院或进行门诊手术后的60日内就同一伤病所进行的门诊，以每日一次为限。
8. 由主诊医生建议，于医院住院接受手术后或入住深切治疗部后起计60日内，在家中接受由一位合资格护士提供的护理服务，以每个保单年最高60日为限。
9. 由主诊医生建议，并只适用于受保人出院或进行门诊手术后的90日内就同一伤病所进行的辅助服务，以每日一次为限。
10. 受保障之妊娠并发症只包括异位妊娠、葡萄胎妊娠、播散性血管内之凝血机制障碍、先兆子痫、流产、先兆流产、医疗需要之人工流产、胎儿夭折、因产后出血切除子宫、子痫、羊水栓塞及妊娠肺栓塞。妊娠并发症之确诊日期必须为保障生效日期或批准保单复效日期（以较后者为准）起计持续生效300日后。
11. 适用于受保人因意外而受伤24小时内于医院门诊部进行的门诊治疗。
12. 紧急牙齿治疗适用于受保人于意外发生后两星期内，于注册牙医诊所或医院内接受为意外前属健全自然牙齿作出的紧急治疗（包括咨询、止血、X-光、拔牙及根管治疗）。此项保障不会就任何恢复和补救工作、任何贵金属的使用及矫正治疗作出赔偿，并且不保障任何由饮食引致的受伤、由正常磨损引致的损坏或由擦牙或任何其他口腔卫生护理程序引致的损坏。
13. 经注册医生诊断，受保人因患病以致其寿命很可能不会多于12个月，因而入住注册善终院舍。此项保障只限支付一次，并以100,000港元 / 澳门元为限。
14. 只适用于保单持续生效五年后首次发生该等病征或病状的疾病。此项保障只限支付一次，并以800,000港元 / 澳门元为限。

## Notes

1. 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 in the locality.
2. Applicable to the charges actually incurred in connection with the Insured's consultation with a Doctor on an outpatient basis (subject to one visit per day) within 31 days preceding the Insured's Hospital Confinement or the outpatient surgical procedures.
3. To keep the plan as economical and affordable as possible, "Hospital" refers to an entity which provides facilities for major surgery and full-time nursing service and is not primarily a convalescent or nursing home, rest home, home for the aged, a place for rehabilitation for alcoholics or drug addicts, or for any similar purpose.
4. The Company reserves the right to determine the eligibility of a clinic.
5. Nursing services provided by a Qualified Nurse following surgery or the Insured's discharge from Intensive Care Unit and while the Insured is still Confined in Hospital. It must be recommended by the Insured's attending Doctor and arranged by the Hospital. This benefit is subject to a maximum of 60 days per policy year.
6. Subject to one extra bed.
7. Applicable to the charges in connection with the Insured's consultation with a Doctor in respect of the same Disability on an outpatient basis (subject to one visit per day) within 60 days following the discharge from Hospital or the outpatient surgical procedures performed.
8. Nursing services provided by a Qualified Nurse at home within 60 days immediately after the Insured's discharge from the Hospital following surgery or admission to the Intensive Care Unit and upon the recommendation by the Insured's attending Doctor. This benefit is subject to a maximum of 60 days per policy year.
9. Applicable to any treatment performed on the Insured (subject to one visit per day) for the same Disability for which the Insured has been Confined in Hospital or undergone outpatient surgical procedures, and which takes place within 90 days immediately after the Insured's discharge or the surgery and upon the recommendation by the Insured's attending Doctor.
10. The covered pregnancy complications shall only be restricted to ectopic pregnancy, molar pregnancy, disseminated intravascular coagulopathy, pre-eclampsia, miscarriage, threatened abortion, medically prescribed induced abortion, foetal death, postpartum hemorrhage requiring hysterectomy, eclampsia, amniotic fluid embolism and pulmonary embolism of pregnancy. The date of diagnosis of the covered pregnancy complications must be after the policy has been effective continuously for 300 days since Effective Date of Coverage or approval date of reinstatement, whichever is later.
11. Applicable if the Insured sustains an Injury due to accident and receives outpatient treatment in the outpatient department of a Hospital within 24 hours.
12. Applicable if the Insured sustains Injury as a result of an accident and receives emergency treatment within 2 weeks of the accident, which is necessitated to tooth / teeth which was healthy natural right before the accident. This benefit will be paid for dental treatment performed in a legally registered dental clinic or Hospital including consultation, staunch bleeding, x-ray, tooth extraction and root canal work. This benefit shall not pay for any restorative treatment, the use of any precious metals and orthodontic treatment. It shall not cover any treatment for Injury caused by eating or drinking, damage caused by normal wear and tear, or damage caused by tooth brushing or any other oral hygiene procedure.
13. This benefit will be paid if the Insured stays in a registered hospice following a diagnosis, in the opinion of a Doctor, is highly likely to lead to the Insured's death within 12 months of such diagnosis. This benefit is only payable once and the maximum amount payable is HK\$ / MOP100,000.
14. Applicable only if the signs or symptoms of the illness first occur after the policy has been effective for five years continuously. This benefit is only payable once and the maximum amount payable is HK\$ / MOP800,000.

15. 须于50、55、60或65岁生日后的保单周年前，递交书面要求行使减低每年垫底费权益。减低每年垫底费权益只可行使一次并不可撤销。新的每年垫底费将适用于每年垫底费减低后发生的伤病所作出之索偿。
16. 指定严重疾病包括非初期癌症、心肌病、慢性肝衰竭、慢性肺病、冠状动脉（回接）手术、暴发性病毒性肝炎、心脏病、心瓣置换、肾衰竭、主要器官移植、帕金森病、肺动脉高血压、类风湿性关节炎、中风、主要动脉手术及末期病症。
17. 适用于受保人于旅途中因疾病引致之急症或意外引致的受伤而须于世界各地进行医疗上必须的紧急治疗，而受保人于事发前365天内于该事发地点居住不超过60天。“急症”指非预料之内的状况，而有关的症状或病征与其诊断或治疗不能相距超过二十四小时。
18. 适用的亚洲地区包括：香港、澳门、中国内地、澳洲、纽西兰、台湾、日本、新加坡、泰国、马来西亚、印尼、菲律宾、越南、南韩、北韩、印度、孟加拉、不丹、汶莱、柬埔寨、哈萨克、吉尔吉斯、老挝、马尔代夫、蒙古、缅甸、尼泊尔、巴基斯坦、斯里兰卡、塔吉克、东帝汶、土库曼、乌兹别克及阿富汗。
15. Request for reduction of the Annual Deductible must be submitted in writing before the policy anniversary on or immediately following the 50<sup>th</sup>, 55<sup>th</sup>, 60<sup>th</sup> or 65<sup>th</sup> birthday of the Insured. This option can be exercised once only and is irrevocable. Claims in respect of a Disability occurring after reduction of the Annual Deductible shall be subject to the reduced Annual Deductible.
16. Designated critical illnesses include Later-stage Cancer, Cardiomyopathy, Chronic Liver Failure, Chronic Lung Disease, Coronary Artery Bypass Surgery, Fulminant Viral Hepatitis, Heart Attack, Heart Valve Replacement, Kidney Failure, Major Organ Transplantation, Parkinson's Disease, Pulmonary Arterial Hypertension, Rheumatoid Arthritis, Stroke, Surgery to Aorta and Terminal Illness.
17. Any Medically Necessary emergency treatment anywhere in the world for an Emergent Condition caused by Sickness or an Injury due to accident of the Insured during the trip of the Insured, given the Insured resided in the place of such incident for no more than 60 days in the past 365 days from the date of incident. Emergent Condition means an unexpected condition that is acute in nature wherein the initial sign and symptom, and the consultation or treatment for this condition cannot be and are not separated by more than 24 hours.
18. Applicable to territories in Asia, including Hong Kong, Macau, mainland China, Australia, New Zealand, Taiwan, Japan, Singapore, Thailand, Malaysia, Indonesia, the Philippines, Vietnam, South Korea, North Korea, India, Bangladesh, Bhutan, Brunei, Cambodia, Kyrgyzstan, Kazakhstan, Laos, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Sri Lanka, Tajikistan, Timor-Leste, Turkmenistan, Uzbekistan and Afghanistan.

## 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 / 保障将会终止：

- 于保障到期日当日
- 宽限期届满
- 保单持有人呈交书面要求终止本保单
- 受保人身故
- 当接受住院 / 治疗 / 手术而作出赔偿后，在总保障赔偿已达最高终身保障总额后

若任何递交之索偿带有欺诈成份，万通保险国际有限公司（“本公司”）有权即时终止本保单，而阁下将须要向本公司赔偿并偿还就该带有欺诈成份之索偿所有已获支付的保障。在任何该等情况下，本公司亦有权向阁下追讨就任何与该终止及带有欺诈成份之索偿相关之损失。

### 保障及保费调整

视乎我们是否持续提供本医疗计划，如接获所需保费（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），保单会于每个保单周年保证获续期一年。为配合医疗科技的进步及确保能持续为你提供保障，在每次续期时，本公司保留更改保障内容及保费之权利，并会于每个保单周年日不少于30日前以书面通知你有关更改。保费会因应某些因素而作出调整，这些因素包括但不限于本公司过去的索偿纪录、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。

## 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 the premium due date, all coverage under the policy will be terminated.

### Termination

The policy / benefit will be terminated when one of the following events occurs:

- On the Benefit Expiry Date
- The Grace Period ends
- The policy owner submits a written request to terminate this policy
- The Insured dies
- Upon the Confinement / treatment / surgery resulting in the total benefit payment reaches the maximum lifetime limit

If any claim made shall be fraudulent, YF Life Insurance International Ltd. (“the Company”) shall have the right to terminate this policy immediately and you shall indemnify the Company and repay all benefits paid in respect of such fraudulent claim. The Company shall have the right to recover from you any cost in relation to such termination and such fraudulent claim.

### Benefit and Premium Adjustment

Subject to the continual availability of this medical plan, the policy is guaranteed to 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 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 change the benefit and premium on each renewal, and notifies you the related changes 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 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.



有关本计划过往保费增长率资料, 请浏览本公司网页:



香港:

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



澳门:

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

For relevant historical premium increases rates of this plan, please visit our website:



Hong Kong:

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



Macau:

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

### 计划之持续性

续保情况将根据本公司是否仍然为所有现有保单继续提供该计划而定。若本公司决定不再向所有已投保此计划的保单持有人提供本计划, 本公司会尽力为投保人投保另一个当时可提供的医疗保障计划。

### 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, 保单持有人获得的金额的实质价值可能较少。

### 信贷风险

本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。

### 地域保障

1. 住院保障、手术保障、住院前及出院后之保障及延伸保障只就以下作出赔偿:
  - i. 任何于亚洲之住院、入住注册善终院舍、进行之手术、医疗程序 / 医疗及 / 或服务; 及
  - ii. 任何于投保人旅途中因疾病引致之急症或意外引致的受伤而须于世界各地进行医疗上必须的紧急治疗, 而投保人于事发前365天内于该事发地点居住不超过60天。
2. 全球紧急治疗保障内之紧急门诊治疗保障及紧急牙齿治疗保障将就投保人于世界各地因合资格意外接受的紧急治疗作出赔偿。

### 房间级别

若投保人于住院的任何一天入住的房间级别高于受保病房 (不论自愿与否), 本公司会按照以下方式减低该等住院期间的合资格之医疗费用:

- i. 如于香港、澳洲、纽西兰或亚洲以外任何地方住院而住院的房间级别高于半私家病房但不高于标准私家病房, 该等住院期间的合资格之医疗费用将减低至百分之五十; 或
- ii. 如住院的房间级别高于标准私家病房, 该等住院期间的合资格之医疗费用将减低至百分之二十五。

### Continuity of the Plan

Policy renewal is based on the continuing availability of the plan to all existing policies. If the Company decides to no longer offer the plan to all policy owners already enrolled, we will endeavor to enroll the insured in another medical plan available at that time.

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

### Credit Risk

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

### Geographical Restrictions

1. Benefits payable under Hospitalization Benefits, Surgical Benefits, Pre- and Post-Hospitalization Benefits and Extended Benefits are payable only for
  - i. any Confinement, stay in registered hospice, surgery, medical procedures / treatment and / or service which takes place or is performed in Asia; and
  - ii. any Medically Necessary emergency treatment anywhere in the world for an Emergent Condition caused by Sickness or an Injury due to accident of the Insured during the trip of the Insured, given the Insured resided in the place of such incident for no more than 60 days in the past 365 days from the date of incident.
2. Benefits payable under Emergency Outpatient Treatment Benefit and Emergency Dental Benefit of Worldwide Emergency Treatment are payable for covered accident for emergency treatment provided to the Insured anywhere in the world.

### Ward Type

If the insured's confinement is of a class above the covered room level, whether voluntarily or involuntarily, the Company shall reduce the eligible medical expenses during confinement as following:

- i. if the room of class for such confinement is upper than semi-private room but not upper than standard private room in Hong Kong, Australia, New Zealand, or anywhere else out of Asia, the eligible medical expenses incurred during such period of confinement shall be reduced to 50% of the benefit payable; or
- ii. if the room of class for such confinement is upper than standard private room, the eligible medical expenses incurred during such period of confinement shall be reduced to 25% of the benefit payable.

## 等候期

指定项目的保障会于以下日期生效：

项目	生效日期 (由保障生效日期起计)
意外受伤	即时
疾病	即时
扁桃腺、增殖腺、疝气的治疗或手术	120日
妊娠并发症保障	300日
包皮环截术而住院	2年 (或受保人十二岁的生日, 取其较早者)
人类免疫力缺乏病毒 / 艾滋病治疗保障	5年

## 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：

- 因应诊断结果而施行于本保单的签发地区之一般惯常使用的医治方法。
- 根据于本保单的签发地区既定之良好医疗守则。
- 并非就受保人或医生之方便而进行。

## 合理及惯常的收费

指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“合理及惯常的收费”：

- 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；
- 医疗行业的收费调查；
- 内部保险赔偿统计数据；
- 受保障程度或水平；及 / 或
- 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份或全部赔偿金额。

## 主要不保事项

受保人若在保单日期起计一年内自杀，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索偿（身故保障除外）将不获赔偿：

- 保障生效日期前已存在伤病的情况或已存在伤病复发情况（包括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）；
- 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；
- 美容或整形外科手术（矫形手术保障除外）；牙科护理或手术（紧急牙齿治疗保障除外）；眼球的折射毛病；有关扁桃腺、增殖腺、疝气的治疗或手术（除非保单已生效达120天），购买或使用的医疗辅助器具及装置（除非该医疗辅助器具及装置包括于手术保障内之医疗装置）；
- 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（妊娠并发症保障除外）；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；
- 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，精神疾病治疗保障除外；

## Waiting Period

Coverage for specific items will be effective on the following dates:

Items	Effective Date (after the Effective Date of Coverage)
Accidental injury	Immediately
Sickness	Immediately
Treatment or surgery for tonsils, adenoids, hernia	120 days
Pregnancy Complications Benefit	300 days
Confinement for Circumcision	2 years (or on the Insured's 12 <sup>th</sup> birthday, whichever is earlier)
HIV/AIDS Treatment Benefit	5 years

## Medically Necessary

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

Medically Necessary means all of the following conditions are met:

- consistent with the diagnosis and customary medical treatment for the condition in the Place of Issuance of this Policy.
- in accordance with standards of good medical practice in the Place of Issuance of this Policy.
- not for the convenience of the insured and / or the Doctor.

## Reasonable and Customary Charges

This means a charge for medical care which 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", the Company may make reference to the followings (if applicable):

- the gazette issued by the local government which sets out the fees for the private patient services in public hospitals;
- industrial medical fee survey;
- internal claim statistics;
- extent or level of benefit insured; and / or
- 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.

## Key Exclusions

If the Insured commits suicide, whether sane or insane, within one year from the Policy Date, no Death Benefit will be payable.

This Policy does not pay any benefit claims (except for Death Benefit) caused directly or indirectly resulting from the following:

- Pre-existing conditions (which presented signs or symptoms of which the Insured has been aware or should reasonably have been aware);
- General check-up, screening and / or preventive care / checking, genetic testing or counselling, vaccination / immunization, convalescence, custodial or sanatorium care or rest care;
- Cosmetic or plastic surgery, except for Reconstructive Surgery Benefit; dental care or surgery (except for Emergency Dental Benefit); refractive errors of the eyes; treatment for tonsils, adenoids, hernia (which occurred within 120 days after the Effective Date of Coverage); procurement or use of medical appliances and medical devices (unless such medical appliances and medical devices are covered by Medical Appliances under Surgical Benefit);
- Any condition resulting from pregnancy, abortion, childbirth or miscarriage, pre-natal care as well as post-natal care, and other complications arising therefrom, except for Pregnancy Complications Benefit; congenital deformities or anomalies, sterilization or infertility of either gender, treatment directly or indirectly related to a gender change;
- Experimental and / or unconventional medical technology / procedure / therapy;
- Mental disorder, psychological or psychiatric conditions, behavioral problems or personality disorders, except for Psychiatric Treatment Benefit;



- 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、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）；
- 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；
- 自杀或在神智不清醒的状况下受伤；自残、毒瘾或酒瘾；
- 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；
- 由战争或叛乱、民间骚动或参与任何非法行为引致；核子武器物料、核子燃料所导致的辐射或电离扩散污染，除非是由恐怖主义行为引致及当受保人于海外的旅程中发生；
- 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；
- 人体免疫能力缺乏病毒（包括爱滋病），除非符合“人类免疫力缺乏病毒 / 爱滋病治疗保障”的情况；
- 受保人在12岁前及保单日期后2年内因接受包皮环截术而住院；
- 传统中药，包括：姬松茸、羚羊角尖粉、鹿茸、冬虫夏草、燕窝、花胶、灵芝、各种人参、海马、麝香、珍珠粉及紫河车；
- 于住院时受保人没有接受积极治疗；或受保人于医院接受超过连续180天的治疗而维持持续性意识障碍的状态超过60天；
- 根据政府条例或其他保险计划而获得赔偿的情况。

#### 提供资料责任及未符合这要求的后果

在投保时，你/你们必须提供一切知悉或据常理知悉的资料，因本公司会按照所提供的资料评核接受投保及决定保险条款。提供资料的责任将会在投保申请表的签署日期或任何补充文件的签署日期（以较后日期为准）完成。你/你们若不清楚某一事项是否重要，请将该事项填写于申请书内。若未符合以上要求，该保单可能因此而作废。

#### 索偿程序

有关索偿程序，请浏览本公司网页：

香港: <https://www.yflife.com/sc/Hong-Kong/Individual/Services/Claims-Corner>

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

#### 保费征费（只适用于香港）

保监局会透过保险公司向所有保单持有人，为其于香港续发之保单，于每次缴付保费时收取征费。有关征费之详情，请浏览保监局网站专页[www.ia.org.hk/tc/levy](http://www.ia.org.hk/tc/levy)。

#### 保单冷静期及取消保单的权利

如保单未能满足你的要求，你可以书面方式要求取消保单，连同保单退回本公司（香港：香港湾仔骆克道33号万通保险大厦27楼 / 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），并确保本公司的办事处于交付保单的21个日历日内，或向你 / 你的代表人交付《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，你将可获退回已缴保费金额及你所缴付的征费（适用于香港），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。

#### 退保

如需申请退保，你只需填妥、签署并寄回由本公司提供的特定表格，以及你的有效身份证明文件副本及固定住址证明（如适用），本公司将安排退保事宜。

- Sleep disorders except for the treatment of sleep apnoea which is life threatening as confirmed by a specialist Doctor;
- Treatment of obesity, weight control programs or bariatric surgery (except when bariatric surgery is necessary as confirmed by a Doctor after failure of conventional treatments);
- 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; drug addiction or alcoholism;
- 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;
- Acts of war, riot, civil commotion, participating in any illegal activity; waste nuclear weapons material, ionizing radiation or contamination by radioactivity from any nuclear fuel, except it is caused by terrorist act and occurs while the Insured is travelling overseas;
- Hospital Confinement primarily for physiotherapy and / or for the investigation of signs and / or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures;
- Human Immunodeficiency Virus (HIV) Infection (including AIDS), unless meeting the requirement for the HIV / AIDS Treatment Benefit;
- The Insured is hospitalized for Circumcision before the age of 12 and such hospitalization occurs within 2 years of the Effective Date of Coverage;
- Traditional Chinese medicines, including: agaricus blazei murill, antelope horn powder, antler, cordyceps, cubilose, donkey-hide gelatin, ganoderma, all kinds of ginseng, hippocampus, moschus, pearl powder and placenta hominis;
- 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 during Hospital Confinement whilst staying in Hospital for more than 180 consecutive days;
- Expenses for which compensation is payable under any government law or any other insurance policy.

#### Duty of Disclosure and the Consequences of Not Making Full Disclosure

You are required to disclose in application all information you know or could reasonably be expected to know because the Company 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.

#### Claims Procedures

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

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

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

#### Premium Levy (Applicable to Hong Kong only)

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](http://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 (Hong Kong: 27/F, YF Life Tower, 33 Lockhart Road, Wanchai, Hong Kong / Macau: 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 and levy you paid (applicable to Hong Kong only), without any interest. No refund can be made if a benefit payment has been made, is to be made or impending.

#### 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.

# “优裕医疗保”一览表

## Prestige MediCare – at a glance

(港元HK\$ / 澳门元MOP)

保障 Benefits	保障限额 Benefit Limits
<b>每年保障总额</b> <b>Annual Limit</b>	10,000,000
<b>最高终身保障总额</b> <b>Maximum Lifetime Limit</b>	30,000,000
<b>每年垫底费<sup>15,16</sup></b> <b>Annual Deductible Amount<sup>15,16</sup></b>	0 / 15,000 / 30,000 / 100,000
<b>受保地区及住院病房级别</b> <b>Covered Territory &amp; Ward Type</b>	香港、澳洲或纽西兰：半私家病房 HK, Australia or New Zealand: Semi-private room  亚洲 <sup>18</sup> （香港、澳洲及纽西兰除外）：标准私家病房 Asia <sup>18</sup> (excluding HK, Australia and New Zealand) : Standard private room  全球 <sup>17</sup> （亚洲除外）：半私家病房（只适用于急症或意外，并受相关条款所限） Worldwide <sup>17</sup> (excluding Asia): Semi-private room (Only applicable to Emergent Condition or accident and subject to terms and conditions)
入院治疗前 Pre-Hospitalization	
<b>住院前门诊<sup>2</sup></b> <b>Pre-hospitalization Outpatient<sup>2</sup></b> – 药物 Medication – 诊断测试 Diagnostic Tests	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup> (每日1次 1 visit per day)
入院治疗中 In-Hospital	
<b>1. 住院保障 Hospitalization Benefits</b>	
<b>住院、膳食及一般护理津贴</b> <b>Room, Board &amp; General Nursing</b>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup>
<b>住院医生费</b> <b>In-Hospital Doctor's Call</b>	
<b>住院专科医生费</b> <b>In-Hospital Specialist's Consultation</b>	
<b>特别住院费（住院杂费）</b> <b>Hospital Special Services (Miscellaneous Hospital Expenses)</b>	
<b>深切治疗</b> <b>Intensive Care</b>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup> (每个保单年最多60日 Max. 60 days per policy year)
<b>住院陪床<sup>6</sup></b> <b>Hospital Companion Bed<sup>6</sup></b>	
<b>私家看护费<sup>5</sup></b> <b>Private Nurse's Fee<sup>5</sup></b>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup> (每个保单年最多60日 Max. 60 days per policy year)
<b>住房级别下调现金保障</b> (适用于入住低于受保病房级别的私家医院房间) <b>Room and Board Downgrade Cash Benefit</b> (Applicable if the room level is lower than the covered room level in a private hospital)	每日1,000 / day (每个保单年最多60日 Max. 60 days per policy year)
<b>政府住院现金保障</b> (适用于入住香港 / 澳门政府医院大房级别的房间) <b>Government Hospital Cash Benefit</b> (Applicable to confinement in a general ward of a public hospital in Hong Kong / Macau)	
 需由注册医生书面建议 Recommendation by a registered doctor in writing is required	



## 2. 手术保障 Surgical Benefits

<b>外科医生手术收费</b> <b>Surgeon's Fee</b>	
<b>麻醉师费</b> <b>Anaesthetist's Fee</b>	
<b>手术室租金</b> <b>Operation Theatre Fee</b>	
<b>门诊手术<sup>4</sup></b> (包括外科医生手术费、麻醉师费、手术室租金、诊症费及药费) <b>Outpatient Surgery<sup>4</sup></b> (Including Surgeon's Fee, Anaesthetist's Fee, Operating Theatre Fee, Consultation and Medication)	
<b>医疗装置</b> <b>Medical Appliances</b> <ul style="list-style-type: none"> <li>- 起搏器 Pace maker</li> <li>- 冠状动脉血管成形术 (通波仔) 的支架 Stents for percutaneous transluminal coronary angioplasty</li> <li>- 眼内人造晶体 Intraocular lens</li> <li>- 人工心瓣 Artificial cardiac valve</li> <li>- 金属或人工关节置换 Metallic or artificial joints for joint replacement</li> <li>- 人工韧带置换或植入 Prosthetic ligaments for replacement or implantation between bones</li> <li>- 人工椎间盘 Prosthetic intervertebral disc</li> </ul>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup>
<b>其他医疗装置</b> <b>Other Medical Appliances</b>	100,000 (每个保单年最高保障额 Max. limit per policy year)
<b>在生捐赠者之移植手术费用</b> <b>Living Donor Expenses for Transplantation Surgery</b>	器官捐赠者及接受者之手术费用总和的30% 30% of the total transplantation cost of both donor and receiver (每个保单年最高保障额 Max. limit per policy year)
<b>门诊手术现金保障</b> (当门诊手术亦为同一手术作出赔偿时适用) <b>Outpatient Surgery Cash Benefit</b> (Applicable when Outpatient Surgery Benefit is payable for the same procedure)	每项手术 1,600 per procedure (每个保单年1次 1 procedure per policy year)

## 入院治疗后 Post-Hospitalization

<b>出院后门诊<sup>7</sup></b> <b>Post-hospitalization Outpatient<sup>7</sup></b> <ul style="list-style-type: none"> <li>- 药物 Medication</li> <li>- 伤口护理 Wound Care</li> <li>- 诊断测试 Diagnostic Tests</li> </ul>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup> (每日1次 1 visit per day)
<b>手术后家中看护<sup>8</sup></b> <b>Post-surgery Home Nursing<sup>8</sup></b>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup> (每个保单年最多60日 Max. 60 days per policy year)
<b>辅助服务<sup>9</sup></b> <b>Ancillary Services<sup>9</sup></b> <ul style="list-style-type: none"> <li>- 物理治疗师 / 言语治疗师 / 职业治疗师 / 脊骨神经治疗师                Physiotherapist / Speech Therapist / Occupational Therapist / Chiropractor</li> <li>- 中医治疗 Chinese Medicine Practitioner</li> </ul>	45,000 (每日1次, 每个保单年最高合计保障额 1 visit per day, max. aggregate limit per policy year)
	每次最高 Max. 1,500 per visit (每个保单年最多30次 Max. 30 visits per policy year)
	每次最高 Max. 600 per visit (每个保单年最多15次 Max. 15 visits per policy year)

 需由注册医生书面建议  
 Recommendation by a registered doctor in writing is required

<b>康复中心及其相关治疗</b> <b>Rehabilitation Centre &amp; Related Treatment</b>	<div></div> 50,000 (每个保单年最高保障额, 最多60日 Max. limit per policy year / Max. 60 days)
<b>延伸保障 Extended Benefits</b>	
<b>癌症治疗保障</b> <b>Cancer Treatment Benefit</b>	<div></div>
<ul style="list-style-type: none"> <li>- 化疗 Chemotherapy</li> <li>- 电疗 Radiotherapy</li> <li>- 标靶治疗 Target Therapy</li> <li>- 荷尔蒙治疗 Hormonal Therapy</li> <li>- 免疫治疗 Immunotherapy</li> <li>- 质子重离子疗法 Proton Beam Therapy</li> </ul>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup>
<b>洗肾保障</b> <b>Renal Dialysis Benefit</b>	<div></div>
<b>精神疾病治疗保障</b> <b>Psychiatric Treatment Benefit</b>	<div></div> 40,000 (每个保单年最多60日 Max. 60 days per policy year)
<b>善终院舍护理服务<sup>13</sup></b> <b>Hospice Care<sup>13</sup></b>	100,000 (个人最高保障额 Max. limit per Life)
<b>人类免疫力缺乏病毒 / 爱滋病治疗保障<sup>14</sup></b> <b>HIV / AIDS Treatment Benefit<sup>14</sup></b>	800,000 (个人最高保障额 Max. limit per Life)
<b>矫形手术保障</b> <b>Reconstructive Surgery Benefit</b>	<div></div> 200,000 (每项受保疾病最高保障额 Max. limit per covered illness)
<b>妊娠并发症保障<sup>10</sup></b> <b>Pregnancy Complications Benefit<sup>10</sup></b>	全数赔偿 <sup>1</sup> Full reimbursement <sup>1</sup>
<div></div> 需由注册医生书面建议 Recommendation by a registered doctor in writing is required	





## 全球紧急治疗保障 Worldwide Emergency Treatment Benefit

紧急门诊治疗保障<sup>11</sup>

Emergency Outpatient Treatment Benefit<sup>11</sup>

全数赔偿<sup>1</sup>

Full reimbursement<sup>1</sup>

紧急牙齿治疗保障<sup>12</sup>

Emergency Dental Benefit<sup>12</sup>

## 寿险保障 Life Protection

身故保障

Death Benefit

80,000

## 保单资料 Policy Information

保单类别

Plan Type

基本计划

Basic Plan

保单货币单位

Currency

香港保单: 港元

Policy Issued in Hong Kong: HK\$

澳门保单: 澳门元 / 港元

Policy Issued in Macau: MOP / HK\$

保费

Premium

保证每年续期, 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

Guaranteed 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 of the same level of benefit at the time of policy renewal

保费按每年 / 每半年 / 每季 / 每月缴付

Annual / Semi-annual / Quarterly / Monthly Payment

保障类别

Type of Benefit

偿款产品 — 赔偿实际住院及医疗费用

(受限于计划内每项保障的最高保障额)

Indemnity Product - Reimburses the actual hospitalization and medical expenses

(subject to the maximum limit of each benefit item of the plan)

## 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 - 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](http://www.yflife.com)。

For premium rates, please refer to our website at [www.yflife.com](http://www.yflife.com).

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# YFLife 萬通保險

万通保险国际有限公司为港交所上市公司云锋金融集团成员，集团的主要股东包括云锋金融控股有限公司以及 Fortune 500 “全美5大寿险公司”之一的美国万通人寿保险公司。凭借雄厚实力及稳健可靠的背景，我们承诺为客户提供专业及科技化的一站式风险及财富管理，以及强积金服务，协助客户规划未来，体现“未来在我手”的品牌承诺。

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万通保险国际有限公司  
YF Life Insurance International Ltd.  
www.yflife.com

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Avenida Doutor Mario Soares No. 320, Finance and IT Center of Macau,  
8 Andar A, Macau



优裕医疗保  
Prestige MediCare (PMC)

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

上次生日年龄 Age at Last Birthday	每年垫底费 Annual Deductible			
	0	15,000	30,000	100,000
0	14,667	8,071	6,331	4,551
1	14,384	7,916	6,209	4,463
2	14,116	7,769	6,093	4,379
3	13,729	7,556	5,927	4,262
4	13,343	7,344	5,759	4,140
5	12,953	7,130	5,593	4,022
6	12,566	6,917	5,426	3,900
7	12,180	6,704	5,258	3,782
8	12,071	6,645	5,213	3,749
9	11,964	6,587	5,165	3,713
10	11,838	6,515	5,109	3,672
11	11,733	6,458	5,063	3,641
12	11,625	6,399	5,017	3,607
13	11,518	6,340	4,971	3,572
14	11,414	6,281	4,926	3,543
15	11,306	6,224	4,878	3,507
16	11,113	6,117	4,797	3,447
17	10,923	6,014	4,713	3,388
18	10,732	5,906	4,633	3,330
19	10,539	5,801	4,550	3,271
20	10,435	5,753	4,515	3,249
21	10,326	5,699	4,481	3,229
22	10,129	5,593	4,398	3,167
23	10,838	5,982	4,704	3,388
24	11,546	6,372	5,011	3,608
25	12,255	6,763	5,317	3,830
26	12,964	7,152	5,622	4,052
27	13,669	7,545	5,930	4,273
28	14,378	7,935	6,241	4,494
29	14,844	8,193	6,442	4,639
30	15,244	8,397	6,594	4,747
31	15,705	8,651	6,795	4,893
32	16,175	8,908	6,999	5,036
33	16,638	9,164	7,198	5,181
34	16,788	9,247	7,262	5,227
35	16,936	9,329	7,328	5,274
36	17,087	9,411	7,392	5,321
37	17,235	9,493	7,457	5,366
38	17,386	9,574	7,521	5,414
39	18,297	10,076	7,915	5,697
40	19,092	10,516	8,256	5,930
41	19,997	11,018	8,647	6,213
42	20,905	11,517	9,039	6,493
43	21,813	12,018	9,430	6,774
44	22,809	12,566	9,860	7,086
45	23,809	13,116	10,293	7,393
46	24,808	13,667	10,723	7,704
47	25,805	14,216	11,155	8,015
48	26,802	14,766	11,588	8,324
49	28,073	15,467	12,136	8,717

由 2025/01/01 起生效  
With effect from 2025/01/01



优裕医疗保  
Prestige MediCare (PMC)

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

上次生日年龄 Age at Last Birthday	每年垫底费 Annual Deductible			
	0	15,000	30,000	100,000
50	29,617	16,353	12,857	9,257
51	30,899	17,061	13,413	9,660
52	32,181	17,769	13,970	10,060
53	33,462	18,476	14,526	10,458
54	35,419	19,556	15,375	11,072
55	37,375	20,636	16,222	11,685
56	39,332	21,715	17,070	12,294
57	41,287	22,795	17,921	12,908
58	43,244	23,875	18,771	13,517
59	46,473	25,658	20,171	14,526
60	49,409	27,184	21,369	15,379
61	52,618	28,948	22,755	16,379
62	55,827	30,716	24,145	17,378
63	59,040	32,481	25,531	18,376
64	62,804	34,551	27,159	19,550
65	66,609	36,643	28,806	20,731
66	70,373	38,714	30,435	21,902
67	74,175	40,808	32,079	23,089
68	77,942	42,878	33,708	24,260
69	80,667	44,378	34,886	25,108
70	83,202	45,731	35,824	25,785
71*	85,935	47,236	36,999	26,633
72*	88,657	48,729	38,172	27,476
73*	91,338	50,202	39,327	28,308
74*	94,526	51,956	40,697	29,294
75*	97,701	53,700	42,062	30,276
76*	100,877	55,446	43,432	31,261
77*	104,062	57,199	44,805	32,250
78*	107,239	58,943	46,172	33,234
79*	110,994	61,007	47,789	34,397
80*	112,163	61,651	48,293	34,759
81*	115,840	63,671	49,873	35,899
82*	119,475	65,668	51,439	37,024
83*	123,099	67,660	52,998	38,147
84*	127,420	70,036	54,860	39,485
85*	131,700	72,387	56,703	40,813
86*	135,984	74,742	58,548	42,143
87*	140,265	77,095	60,389	43,467
88*	144,547	79,447	62,232	44,794
89*	149,589	82,218	64,404	46,354
90*	151,820	83,448	65,367	47,049
91*	156,747	86,150	67,484	48,573
92*	161,697	88,873	69,618	50,108
93*	166,649	91,594	71,749	51,644
94*	171,051	94,012	73,645	53,007
95*	175,453	96,436	75,539	54,373
96*	179,846	98,849	77,432	55,732
97*	184,287	101,289	79,342	57,109
98*	188,688	103,710	81,239	58,474
99*	188,688	103,710	81,239	58,474

\* 只适用于续保 For Renewal Only

由 2025/01/01 起生效  
With effect from 2025/01/01