

# 「稅」優選醫療計劃

## TaxVantage PrimeChoice Medical Plan

TVPC





# 優選醫療 靈活安享

## PrimeChoice Medical Care for Flexible Peace of Mind

為締造更精彩的人生，您需要一份全面而靈活的醫療保障，來照顧不同的健康保障需要。

「稅」優選醫療計劃（「此計劃」）就住院、手術、日間手術、其他治療等多方面的醫療費用提供保障，更可根據個人需要，選擇額外附加保障，讓您倍感安心。

萬通保險國際有限公司已註冊成為香港特別行政區政府認可的自願醫保計劃的產品提供者。透過此計劃，您可就合資格保費申請稅務扣除，而每名受保人的每年合資格保費扣稅額上限為8,000港元。同時，您為家人投保所繳的合資格保費亦可作稅務扣除之用，助您節省更多應繳稅款。



「稅」優選醫療計劃是自願醫保計劃下的認可靈活計劃，提供相對標準計劃較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](http://www.yflife.com)。

在申請稅務扣減前，您必須符合香港特別行政區稅務局發出的任何指引及《稅務條例》規定的所有資格要求。在此提供的任何一般稅務資訊僅供參考之用，您不應僅按此作出任何稅務決定。如有疑問，必需諮詢合資格的專業稅務顧問。請注意稅務法律、規定或詮釋可能會隨時更改，或會影響申領稅項扣除的合資格條件等任何有關稅務優惠的內容。對於未能適時知會您有關這些法律、規定或詮釋的更改，以及其對您所帶來的影響，我們概不承擔任何責任。有關任何稅務查詢，請直接與稅務局聯絡。

The **TaxVantage PrimeChoice Medical Plan** is a Certified Flexi Plan under the Voluntary Health Insurance Scheme ("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](http://www.yflife.com).

Before applying for tax deductions, you must comply with any guidelines issued by the Inland Revenue Department of the Hong Kong Special Administrative Region ("HK SAR") and all eligibility requirements stipulated in the Inland Revenue Ordinance. Any general tax information provided here is for reference only and you should not make any tax decisions solely on it. If in doubt, you must consult a qualified professional tax advisor. Please note that tax laws, regulations or interpretations may change at any time, which may affect the eligibility conditions for claiming tax deductions and any relevant tax benefits. We are not responsible for any failure to promptly notify you of changes in these laws, regulations or interpretations and their impact on you. For any tax enquiries, please contact the Inland Revenue Department directly.



To enjoy a more fulfilling life, you need comprehensive and flexible medical protection to take care of your health. **TaxVantage PrimeChoice Medical Plan** (the "Plan") provides you with extensive coverage on medical expenses for hospitalization, surgeries, Day Case Procedure, other therapies, etc. For extra peace of mind, you may choose to attach supplementary benefits to the Plan based on your needs.

YF Life Insurance International Ltd. is registered as a provider for the VHIS implemented by the government of the HKSAR. You can claim tax deduction for qualifying premiums paid for the Plan, up to HK\$8,000 per Insured Person per year. Meanwhile, the qualifying premiums you pay for your family members' policies can also be applied for tax deductions, reducing your tax liability even further.



- ✓ 保障範圍廣泛  
Extensive Coverage
- ✓ 不設終身保障限額  
No Lifetime Benefit Limit
- ✓ 保障未知的已有病症而無需等候期  
No Waiting Period for Unknown Pre-existing Conditions
- ✓ 保證終身續保  
Guaranteed Renewal for Life
- ✓ 合資格保費可申請扣稅  
Tax Deduction Claim for Qualifying Premiums
- ✓ 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

# 「稅」優選醫療計劃

## TaxVantage PrimeChoice Medical Plan

1

### 保障範圍廣泛 Extensive Coverage



此計劃的所有保障均全球適用(精神科治療<sup>1</sup>及洗腎保障<sup>2,3</sup>除外)，讓您自由選擇醫療服務提供者<sup>4</sup>。

All benefits in the Plan are applicable worldwide (except for psychiatric treatment<sup>1</sup> and renal dialysis<sup>2,3</sup>). You are free to choose healthcare services providers<sup>4</sup>.

#### 此計劃涵蓋的醫療保障項目包括 The Plan covers the following medical benefit items:

住院期間的費用 Expenses incurred during hospitalization	病房及膳食、雜項開支、主診醫生巡房費、外科醫生費、手術室費及住院陪床 <sup>5</sup> 等 Room and board, miscellaneous charges, attending doctor's visit fee, Surgeon's fee, operating theatre charges, hospital companion bed <sup>5</sup> , etc.
日間手術 <sup>6</sup> Day Case Procedure <sup>6</sup>	可於診所、日間手術中心或醫院進行簡單的日間手術 <sup>6</sup> ，例如白內障切除、腸鏡、胃鏡、內窺鏡清除膀胱結石，而無須住院 Simple Day Case Procedures <sup>6</sup> , such as removal of cataract, colonoscopy, gastroscopy, and removal of stones in bladder by endoscopic treatment, can be performed in a medical clinic or day case procedure center or Hospital, without the need for hospitalization
住院前後 / 手術前後的保障 Pre- and post-Confinement / surgery benefit	入院前或出院後 / 日間手術 <sup>6</sup> 前後的門診護理 <sup>3</sup> 、家中看護津貼 <sup>3</sup> Pre- and post-Confinement / Day Case Procedure <sup>6</sup> outpatient care <sup>3</sup> , home nursing <sup>3</sup>
延伸保障 Extended benefits	訂明診斷成像檢測 <sup>3,7</sup> (包括CT、MRI、PET、PET-CT及PET-MRI)、訂明非手術癌症治療 (包括放射治療、化療、標靶治療、免疫治療及荷爾蒙治療)、洗腎保障 <sup>2,3</sup> 、第二索償現金津貼 <sup>8</sup> 、醫療意外事故保障 <sup>9</sup> 等 Prescribed Diagnostic Imaging Tests <sup>3,7</sup> (including CT, MRI, PET, PET-CT and PET-MRI), Prescribed Non-surgical Cancer Treatments (including radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy) and renal dialysis <sup>2,3</sup> , second claim cash benefit <sup>8</sup> , medical negligence benefit <sup>9</sup> , etc.
自選額外醫療保 <sup>10</sup> Optional supplementary major medical benefit <sup>10</sup>	就指定的保障項目超出賠償額之合資格醫療費用提供80%的額外賠償 An 80% additional benefit is provided for Eligible Expenses that exceed the maximum limit of designated benefit items

2

## 不設終身保障限額 No Lifetime Benefit Limit



此計劃提供高達200萬港元的每年保障限額，並可每年還原，而不設終身限額。

The Plan offers an Annual Benefit Limit up to HK\$2,000,000, which will be refreshed annually with no Lifetime Benefit Limit.

3

## 保障未知的已有病症而無需等候期 No Waiting Period for Unknown Pre-existing Conditions



為使您安心無憂，此計劃涵蓋投保時受保人的未知的已有病症，並不設等候期。

For your total peace of mind, the Plan covers unknown Pre-existing Conditions of the Insured Person at the time of taking out the Plan, without any waiting period.

4

## 保證終身續保 Guaranteed Renewal for Life



無論您的身體狀況出現任何改變，此計劃亦保證續保至100歲。

You are guaranteed the right to renew the Plan to age 100 even if you experience changes to your health.

## 5

## 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3個保單年度或以上，以及期間並無就此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」
- 折扣金額會按緊接上一保單年度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 3 consecutive Policy Years
- The discount is a percentage, of up to 15%, of the annual premium for the immediate 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%

## 6

## 合資格保費可申請扣稅

## Tax Deduction Claim for Qualifying Premiums



您的「**稅**」**優選醫療計劃**保費可申請稅務扣除。有關稅務扣除詳情，請瀏覽香港特別行政區政府自願醫保計劃網頁([www.vhis.gov.hk/tc/consumer\\_corner/tax-deduction.html](http://www.vhis.gov.hk/tc/consumer_corner/tax-deduction.html))及稅務局網頁([www.ird.gov.hk/chi/](http://www.ird.gov.hk/chi/))。

You may make tax deduction claim for your **TaxVantage PrimeChoice Medical Plan** premiums. For details of the tax deduction arrangement, please refer to the VHIS website ([www.vhis.gov.hk/en/consumer\\_corner/tax-deduction.html](http://www.vhis.gov.hk/en/consumer_corner/tax-deduction.html)) and Inland Revenue Department website ([www.ird.gov.hk/eng/](http://www.ird.gov.hk/eng/)) of government of the HKSAR.

## 7

## 免費估算服務

## Free Quote before You Commit



於接受任何治療或醫療手術前，您更可免費使用賠償金額估算服務<sup>11</sup>。

You are entitled to receive a free estimation of the claimable amount<sup>11</sup> for any potential treatment or procedure before committing to it.





您亦可選擇以下的附加保障，讓您更加安心：  
(下列附加保障的保費不可用於扣稅<sup>12</sup>)

#### 額外癌症多重保

- 為治療癌症提供充裕的資金，每次癌症<sup>13</sup>可獲賠償的合資格費用可高達200萬港元<sup>14</sup>

#### 住院現金津貼

- 若受保人不幸因傷病住院達8小時，可獲得每日最高達2,000港元的現金津貼<sup>15</sup>，而每症的保障期可長達1,000日<sup>16</sup>
- 若受保人需要接受深切治療，將獲得雙倍的現金津貼，即每日高達4,000港元
- 24小時保障，適用全球各地<sup>17</sup>

You may also choose to enjoy the following supplementary benefits for extra peace of mind:

(The premiums for following supplementary benefits are non-tax deductible<sup>12</sup>)

#### Extra Cancer Benefit

- In order to provide adequate financial support for cancer therapy, a maximum reimbursement of Eligible Expenses Per Cancer<sup>13</sup> will be payable up to HK\$2,000,000<sup>14</sup>

#### Hospital Income Benefit

- Provides a daily cash benefit<sup>15</sup> of up to HK\$2,000 if the Insured Person is confined for 8 hours or more due to Disability, up to a maximum of 1,000 days<sup>16</sup>
- While receiving treatment in an Intensive Care Unit, this benefit will be doubled, up to HK\$4,000 per day
- 24-hour coverage available all around the world<sup>17</sup>



# 一覽表

## At a glance

	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 1+	計劃 Plan 1M+	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M
自願醫保認可 產品編號 VHIS Certification Numbers	F00080- 01-000-01	F00080- 01-001-01	F00080- 02-000-01	F00080- 02-001-01	F00080- 03-000-01	F00080- 03-001-01	F00080- 04-000-01	F00080- 04-001-01

表一：「稅」優選醫療計劃

Table 1: TaxVantage PrimeChoice Medical Plan

	賠償限額 Benefit Limit (港元 HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 1+	計劃 Plan 1M+	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M
保障項目 <sup>18</sup> Benefit Items <sup>18</sup>								
(I) 基本保障 Basic benefits								
a. 病房及膳食 Room and board	每日 \$1,000 per day		每日 \$1,200 per day		每日 \$2,200 per day		每日 \$4,000 per day	
	(每保單年度最多180日 Maximum 180 days per Policy Year)							
b. 雜項開支 Miscellaneous charges	\$14,500		\$16,000		\$21,000		\$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 \$900 per day		每日 \$1,000 per day		每日 \$1,800 per day		每日 \$3,700 per day	
	(每保單年度最多180日 Maximum 180 days per Policy Year)							
d. 專科醫生費 <sup>3</sup> Specialist's fee <sup>3</sup>	\$6,000		\$8,000		\$8,700		\$10,000	
	(每保單年度 per Policy Year)							
e. 深切治療 Intensive care	每日 \$4,500 per day		每日 \$5,000 per day		每日 \$7,000 per day		每日 \$11,000 per day	
	(每保單年度最多90日 Maximum 90 days per Policy Year)						(每保單年度最多120日 Maximum 120 days per Policy Year)	



表一：「稅」優選醫療計劃（續）

Table 1: TaxVantage PrimeChoice Medical Plan (Cont'd)

	賠償限額 Benefit Limit (港元 HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 1+	計劃 Plan 1M+	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M
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	\$60,000		\$70,000		\$85,000		\$120,000	
大型 Major	\$30,000		\$35,000		\$42,500		\$60,000	
中型 Intermediate	\$15,000		\$17,500		\$21,250		\$30,000	
小型 Minor	\$6,000		\$7,000		\$8,500		\$12,000	
g. 麻醉科醫生費 Anaesthetist's fee								
	外科醫生費的35% <sup>19</sup> 35% of Surgeon's fee payable <sup>19</sup>							
h. 手術室費 Operating theatre charges								
	外科醫生費的35% <sup>19</sup> 35% of Surgeon's fee payable <sup>19</sup>							
i. 訂明診斷成像檢測 <sup>3,7,20</sup> Prescribed Diagnostic Imaging Tests <sup>3,7,20</sup>								
	\$22,500		\$25,000		\$30,000		\$35,000	
	(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 <sup>21</sup> Prescribed Non-surgical Cancer Treatments <sup>21</sup>								
	\$80,000		\$82,000		\$96,000		\$124,000	
	(每保單年度 per Policy Year)							
k. 入院前或出院後 / 日間手術 <sup>6</sup> 前後的門診護理 <sup>3</sup> Pre- and post-Confinement / Day Case Procedure <sup>6</sup> outpatient care <sup>3</sup>								
	每次\$580 per visit 高達 Up to \$3,000		每次\$600 per visit 高達 Up to \$3,300		每次\$900 per visit 高達 Up to \$4,950		每次\$1,400 per visit 高達 Up to \$7,700	
	(每保單年度 per Policy Year)							
	– 住院 / 日間手術 <sup>6</sup> 前最多1次門診或急症診症 – 出院 / 日間手術 <sup>6</sup> 後90日內最多3次跟進門診 – 1 prior outpatient visit or Emergency consultation per Confinement / Day Case Procedure <sup>6</sup> – 3 follow-up outpatient visits per Confinement / Day Case Procedure <sup>6</sup> (within 90 days after discharge from Hospital or completion of Day Case Procedure <sup>6</sup> )							
l. 精神科治療 <sup>1</sup> Psychiatric treatments <sup>1</sup>								
	\$30,000		\$34,000		\$45,000		\$60,000	
	(每保單年度 per Policy Year)							

表一：「稅」優選醫療計劃（續）

Table 1: TaxVantage PrimeChoice Medical Plan (Cont'd)

	賠償限額 Benefit Limit (港元 HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 1+	計劃 Plan 1M+	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M
(II) 額外保障 Enhanced benefits								
a. 住院陪床 <sup>5</sup> Hospital companion bed <sup>5</sup>	每日 \$400 per day		每日 \$600 per day		每日 \$800 per day		每日 \$1,000 per day	
	(每保單年度最多180日 Maximum 180 days per Policy Year)							
b. 家中看護津貼 <sup>3</sup> Home nursing <sup>3</sup> (適用於出院後起計 60日內 Applicable within 60 days after discharge)	每日 \$400 per day		每日 \$600 per day		每日 \$900 per day		每日 \$1,800 per day	
	(每保單年度最多60日 Maximum 60 days per Policy Year)							
c. 洗腎保障 <sup>2,3</sup> Renal dialysis <sup>2,3</sup>	\$25,000		\$30,000		\$60,000		\$90,000	
	(每10年期 per 10-year period)							
d. 自選額外 醫療保 <sup>10</sup> Optional supplementary major medical benefit <sup>10</sup>	無 Nil	\$100,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance 參見表一 A Refer to Table 1A	無 Nil	\$120,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance 參見表一 A Refer to Table 1A	無 Nil	\$200,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance 參見表一 A Refer to Table 1A	無 Nil	\$400,000 (每保單年度 per Policy Year) 設20% 共同保險 Subject to 20% Coinsurance 參見表一 A Refer to Table 1A



表一：「稅」優選醫療計劃（續）

Table 1: TaxVantage PrimeChoice Medical Plan (Cont'd)

	賠償限額 Benefit Limit (港元 HK\$)							
	計劃 Plan 1	計劃 Plan 1M	計劃 Plan 1+	計劃 Plan 1M+	計劃 Plan 2	計劃 Plan 2M	計劃 Plan 3	計劃 Plan 3M
(III) 其他保障 Other benefits								
a. 第二索償現金津貼 <sup>8</sup> Second claim cash benefit <sup>8</sup>	每日\$300 per day	每日\$300 per day	每日\$600 per day	每日\$1,200 per day	(每保單年度最多90日 Maximum 90 days per Policy Year)			
b. 身故保障 Death benefit	\$5,000	\$5,000	\$10,000	\$15,000				
c. 醫療意外事故保障 <sup>9</sup> Medical negligence benefit <sup>9</sup>	\$150,000	\$175,000	\$200,000	\$250,000				
(I)基本保障項目(a) – (I)及(II)額外保障項目(a) – (c)的每年保障限額 Annual Benefit Limit for (I) basic benefit items (a) – (I) and (II) enhanced benefits items (a) – (c)	\$550,000	\$600,000	\$850,000	\$2,000,000	(每保單年度 per Policy Year)			
(I)基本保障項目(a) – (I)及(II)額外保障項目(a) – (d)的終身保障限額 Lifetime Benefit Limit for (I) basic benefit items (a) – (I) and (II) enhanced benefits items (a) – (d)	無 Nil							
其他 Others								
無索償保費折扣 No Claim Premium Discount	5-15%							
賠償金額估算 <sup>11</sup> Estimation of the claimable amount <sup>11</sup>	免費 Free							

表一A：自選額外醫療保<sup>10</sup>

Table 1A : Optional Supplementary Major Medical Benefit<sup>10</sup>

受保住院 病房級別 <sup>22</sup> Covered room level <sup>22</sup>	賠償限額 Benefit Limit (港元 HK\$)			
	計劃 Plan 1M	計劃 Plan 1M+	計劃 Plan 2M	計劃 Plan 3M
	普通病房 Ward		半私家病房 Semi-Private Room	標準私家病房 Standard Private Room

若病房及膳食、雜項開支、主診醫生巡房費、專科醫生費<sup>3</sup>、深切治療、外科醫生費、麻醉師費、手術室費及住院陪床<sup>5</sup>超過表一所列的每保單年度保障限額，而超出之金額可另獲賠償80%，並以下列各項的最高保障額為上限。

If the expenses incurred for room and board, miscellaneous charges, attending doctor's visit fee, Specialist Fee<sup>3</sup>, intensive care, Surgeon's fee, Anaesthetist's fee, operating theatre charges and hospital companion bed<sup>5</sup> exceed the benefit payable per Policy Year as shown in Table 1, 80% of the exceeding amount will be reimbursed subject to the limit of each of the following item.

病房及膳食 Room and board	每日\$1,000 per day	每日\$1,200 per day	每日\$2,200 per day	每日\$4,000 per day
	(由住院第181日起 Payable from 181 <sup>st</sup> day of Confinement in Hospital)			
主診醫生巡房費 Attending doctor's visit fee	每日\$900 per day	每日\$1,000 per day	每日\$1,800 per day	每日\$3,700 per day
	(由住院第181日起 Payable from 181 <sup>st</sup> day of Confinement in Hospital)			
深切治療 Intensive care	每日\$4,500 per day	每日\$5,000 per day	每日\$7,000 per day	每日\$11,000 per day
	(由住院第91日起 Payable from 91 <sup>st</sup> day of Confinement in Hospital)			(由住院第121日起 Payable from 121 <sup>st</sup> day of Confinement in Hospital)
住院陪床 <sup>5</sup> Hospital companion bed <sup>5</sup>	每日\$400 per day	每日\$600 per day	每日\$800 per day	每日\$1,000 per day
	(由住院第181日起 Payable from 181 <sup>st</sup> day of Confinement in Hospital)			
每年保障限額 Annual Benefit Limit	\$100,000	\$120,000	\$200,000	\$400,000



表二：額外癌症多重保<sup>12</sup>

(此保障的保費不可用於扣稅 the premium for the benefit is non-tax deductible)

Table 2 : Extra Cancer Benefit<sup>12</sup>

(港元 HK\$)

保障 Benefit	保障概要 Summary	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3
每次癌症 <sup>13</sup> 最高保障總額 Overall Per Cancer <sup>13</sup> 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 <sup>14</sup> Medical Treatment Benefit <sup>14</sup>				
標靶治療 Targeted 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 <sup>23</sup> 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 <sup>23</sup> 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.			
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、註冊醫生 / 專科醫生巡房等的費用。 The fees for performing the procedure, including surgeon, anaesthetist, operating theatre, prescribed medication, nursing, diagnostic radiology, or laboratory charges, Registered Medical Practitioner or Specialist visit.			賠償按合資格費用支付，但不可超出每次癌症 <sup>13</sup> 最高保障總額上限 Full reimbursement of Eligible Expenses incurred, but it cannot exceed the maximum coverage limit for Per Cancer <sup>13</sup>
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				
止嘔及抗排斥藥物 Anti-nausea and Anti-rejection Drugs	於癌症的積極治療期間須使用之止嘔及抗排斥藥物。 Anti-Nausea and Anti-Rejection drugs during the Active 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，以及找出合適治療藥物的基因測試。 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.			賠償按合資格費用支付，但不可超出每次癌症 <sup>13</sup> 最高保障總額上限 Full reimbursement of Eligible Expenses incurred, but it cannot exceed the maximum coverage limit for Per Cancer <sup>13</sup>

**表二：額外癌症多重保<sup>12</sup>（續）**（此保障的保費不可用於扣稅 the premium for the benefit is non-tax deductible）  
**Table 2 : Extra Cancer Benefit<sup>12</sup> (Cont'd)**（港元 HK\$）

保障 Benefit	保障概要 Summary	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3
癌症監測檢查 <sup>24</sup> Cancer Monitoring Investigation <sup>24</sup>	為監測接受治療後的反應和進展，以及為排除癌症復發，於完成癌症的積極治療後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 the Active Treatment of Cancer.	賠償按合資格費用支付，但不可超出每次癌症 <sup>13</sup> 最高保障總額上限 Full reimbursement of Eligible Expenses incurred, but it cannot exceed the maximum coverage limit for Per Cancer <sup>13</sup>		
治療前或治療後的診症 (每次診症金額及次數上限) Pre or Post-treatment Consultations (Max. limit per visit & no. of visits)	接受癌症的積極治療前及治療完成後5年內的癌症專科醫生診症費。 Cancer Specialist consultation charges before and up to 5 years after the completion of the Active Treatment of Cancer.	每次1,000 per visit		
		20次 visits	30次 visits	40次 visits
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 Consultations (Max. limit per visit & no. of visits)	癌症治療期間及完成癌症的積極治療後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 Active Treatment of Cancer.	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、註冊醫生 / 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, anaesthetist, operating theatre, prescribed medication, diagnostic radiology or laboratory charges, nursing charges, Registered Medical Practitioner or Specialist visit charges, and cost of implants.	賠償按合資格費用支付，但不可超出每次癌症 <sup>13</sup> 最高保障總額上限 Full reimbursement of Eligible Expenses incurred, but it cannot exceed the maximum coverage limit Per Cancer <sup>13</sup>		
壽險保障 Life Protection				
人壽保障復效權益 <sup>25</sup> (以每張額外癌症多重保計算之最高保障額) Death Benefit Revival Option <sup>25</sup> (maximum aggregate sum insured for each Extra Cancer Benefit)		500,000	750,000	1,000,000
身故保障 <sup>26</sup> Death Benefit <sup>26</sup>		1,000	1,500	2,000



表三：住院現金津貼<sup>12</sup>

(此保障的保費不可用於扣稅 the premium for the benefit is non-tax deductible)

Table 3 : Hospital Income Benefit<sup>12</sup>

(港元 HK\$)

	每症最高保障額 Max. Benefit per Disability				
	計劃 Plan 1	計劃 Plan 2	計劃 Plan 3	計劃 Plan 4	計劃 Plan 5
每日保障 <sup>15,16,17</sup> Daily Benefit <sup>15,16,17</sup>	600	900	1,200	1,500	2,000
深切治療 <sup>16,17</sup> Intensive Care <sup>16,17</sup>	1,200	1,800	2,400	3,000	4,000
身故保障 <sup>26</sup> Death Benefit <sup>26</sup>	5,000	10,000	15,000	20,000	25,000
24小時全球保障 <sup>17</sup> 24-hour Worldwide Coverage <sup>17</sup>	適用 Applicable				

保單資料 Policy Information			
	「稅」優選醫療計劃 TaxVantage PrimeChoice Medical Plan	額外癌症多重保 Extra Cancer Benefit	住院現金津貼 Hospital Income Benefit
保單類別 Plan Type	基本計劃 Basic Plan	附加保障 <sup>12</sup> Supplementary Benefit <sup>12</sup>	
保單貨幣 Policy Currency	港元 HK\$		
保費 <sup>27</sup> Premium <sup>27</sup>	<ul style="list-style-type: none"><li>- 保費並非保證。續期保費會每年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</li><li>- 保費按每年/ 每半年/ 每季/ 每月繳付</li><li>- The premium is non-guaranteed. The renewal premium will be adjusted yearly based on the Insured Person'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 requirements for no claim premium discount are fulfilled, a discount on the renewal premium can be enjoyed</li><li>- Annual / Semi-annual / Quarterly / Monthly Payment</li></ul>	<ul style="list-style-type: none"><li>- 保費並非保證。續期保費會每年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。無索償保費折扣並不適用</li><li>- 跟隨基本計劃的繳費方式</li><li>- The premium is non-guaranteed. The renewal premium will be adjusted yearly based on the Insured Person's attained age and at the premium rate in effect according to the same level of benefit at the time of policy renewal. No claim premium discount is not applicable</li><li>- Same payment mode as the Basic Plan</li></ul>	
申請稅務扣減 Claim for Tax Deduction	適用 Eligible	不適用 Not eligible	
續保 Renewability	保證 Guaranteed	非保證 <sup>28</sup> Non-guaranteed <sup>28</sup>	

## 保單資料 (續) Policy Information (Cont'd)

	「稅」優選醫療計劃 TaxVantage PrimeChoice Medical Plan	額外癌症多重保 Extra Cancer Benefit	住院現金津貼 Hospital Income Benefit
保障類別 Type of Benefit	償款產品 — 賠償合資格住院及醫療費用 (受限於此計劃內每項保障的最高保障額) Indemnity Product – Reimburses the eligible hospitalization and medical expenses (subject to the maximum limit of each benefit item of the Plan)	償款產品 — 賠償合資格治療費用 <sup>14</sup> 、額外護理、癌症診症及診斷費用 Indemnity Product – Reimburses the eligible medical treatment expenses <sup>14</sup> , 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 <sup>15,16,17</sup> Non-indemnity Product – Provides daily cash benefits <sup>15,16,17</sup> during the period of hospitalization

## 投保資料 Basic Information

	「稅」優選醫療計劃 TaxVantage PrimeChoice 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	計劃 Plan 1 0至65歲 Age 0-65	計劃 Plan 2-5 18至65歲 Age 18-65
保障年期 Benefit Term	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75歲 To Age 75	

有關保費、條款及保障詳情，請瀏覽本公司網頁 [www.yflife.com](http://www.yflife.com)。

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

## 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. 洗腎治療只包括在主診註冊醫生建議下，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. 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註冊醫生在索償申請表內提供的陳述。
4. 指在其所在地註冊為醫院的機構及註冊的西醫。
5. 以一張額外床位為限。
6. 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。
7. 設30%共同保險，保單持有人需支付實際醫療開支的30%。
8. 如受保人已在其他保險公司獲得合資格費用的部份賠償，並於「**稅**」**優選醫療計劃**可獲賠償，本公司會支付第二索償現金津貼。
9. 若受保人因醫院的醫護人員的疏忽行為或未有遵照合理的標準而直接導致發生事故後30天內死亡或完全及永久傷殘，此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。
10. 設20%共同保險及就不同保障計劃設有不同最高賠償限額。若受保人實際入住之病房級別高於自選額外醫療保下受保住院病房級別，本公司將根據病房級別調整因子而調整自選額外醫療保之賠償金額，詳情請參考「重要資料」內的「選擇病房級別限制」。
11. 保單持有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。
12. 此等保障並不屬於自願醫保認可產品的一部分，並須繳付額外保費。
13. 兩次或以上的癌症確診會被視為同一次癌症，除非(i)其後的癌症屬不同病理學及組織學類型（無論是發生於相同或不同器官）並且不是任何之前已確診的癌症的復發，而其首次確診日期必須是緊接之前的癌症的首次確診日期最少一年之後；或(ii)其後的癌症是前次相關癌症的復發，而其首次確診日期是在前次相關癌症的五年無癌症期完結之後。
14. 不包括(1)因接受癌症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。
15. 同一受保人於本公司投保的所有**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港元或250美元。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。
16. 如受保人因精神病而引致住院，則每症最長保障期為90日。
17. **住院現金津貼**適用全球各地，包括北美洲、歐洲、澳洲、紐西蘭、日本、星加坡、馬來西亞、台灣、南韓、香港及澳門；即使於其他地區住院留醫（包括深切治療部留醫），亦可獲50%賠償額，住院留醫以每日600港元為限，深切治療部留醫以每日1,200港元為限，而保障期則長達90日。
18. 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。

## Remarks

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 (i) as an Inpatient worldwide or (2) as a Day Patient in Hong Kong.
3. 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 Registered Medical Practitioner.
4. Refers to a registered Hospital and Registered Medical Practitioner of western medicine under the relevant territory.
5. Subject to one extra bed.
6. Day Case Procedure refers to a Medically Necessary surgical procedure for investigation or treatment to the Insured Person performed in a medical clinic, or day case procedure centre or Hospital with facilities for recovery.
7. Subject to 30% Coinsurance, Policy Holder is required to pay 30% of the actual medical expenses as evidenced.
8. If benefits are payable under the **TaxVantage PrimeChoice Medical Plan** after Eligible Expenses have been partly paid or reimbursed by another insurance company, the Company shall pay the second claim cash benefit.
9. If the Insured Person dies or suffers from Total and Permanent Disability directly within 30 days of an incident as a consequence of any negligent action or failure to observe reasonable 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.
10. Subject to 20% Coinsurance and maximum reimbursement of different plan levels. If the actual room level of the confinement is of a level higher than the covered room level under optional supplementary major medical benefit, the Company will adjust the benefits paid under optional supplementary major medical benefit subject to the room level adjustment factor. For details, please refer to Restriction in the Choice of Room Level under Important Information.
11. 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.
12. These benefits are not part of the VHIS Certified Plan and subject to payment of additional premium.
13. Two or more Cancer diagnoses are considered as the same Cancer except where (i) the subsequent Cancer is of a different pathological and histological type (whether it occurs in the same or a different organ), and is not a Recurrence of any previously diagnosed Cancer and is first diagnosed at least 1 year after the date of first diagnosis of the immediate preceding Cancer, or (ii) the subsequent Cancer is a Recurrence of the Relevant Preceding, but has been first diagnosed after a 5 year Cancer Waiting Period from a previously diagnosed Cancer.
14. 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.
15. 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 or US\$250. The Company reserves the right to make adjustments of the maximum combined daily benefit without any prior notice.
16. For confinement in respect of the Insured Person's Disability due to mental illness, the Daily Benefit for up to 90 days shall be payable for each Disability.
17. The **Hospital Income Benefit** is available all over the world, including North America, Europe, Australia, New Zealand, Japan, Singapore, Malaysia, Taiwan, South Korea, Hong Kong and Macau. For hospitalization (including hospitalization in an Intensive Care Unit) in other areas, half of the benefit is available, limited to HK\$600 for each day of hospitalization and HK\$1,200 for each day of hospitalization in an Intensive Care Unit, for up to a maximum of 90 days.
18. 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.



19. 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。
20. 檢測包括電腦斷層掃描（「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。
21. 治療包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。
22. 「普通病房」是指一間於香港的醫院分類為低於半私家病房級別的房間，包括分類為普通病房或標準病房的房間。對於沒有相應病房級別分類的醫院或於香港以外的任何醫院，普通病房是指醫院內設有多於兩張病床的房間，但不包括住院陪床。
- 「半私家病房」是指一間於香港的醫院分類為半私家病房的房間。對於沒有相應病房級別分類的醫院或於香港以外的任何醫院，半私家病房是指醫院內設有共用浴室 / 淋浴間並提供 (i) 一張床或兩張床的房間；或 (ii) 最多雙人使用的房間。在上述各種情況下，半私家病房不包括設有廚房、飯廳或客廳之任何更高級別病房。
- 「標準私家病房」是指一間於香港的醫院分類為標準私家病房的房間。對於沒有相應病房級別分類的醫院或於香港以外的任何醫院，標準私家病房是指受保人在住院期間入住設有私人設施（只包括睡房及浴室 / 淋浴間）並只供受保人私人使用的病房。在上述各種情況下，標準私家病房不包括設有廚房、飯廳或客廳之任何更高級別病房。
23. 本公司保留決定在香港 / 澳門之合資格診所的權利。
24. 跟進評估不包括專為防止癌症復發而採用的長期荷爾蒙治療或類似的長期治療輔助方法。
25. 人壽保障復效權益會在受保人76歲當日屆滿。
26. 只適用於18歲或以上的受保人。如保單持有人並非受保人，其在保障生效期間身故，本公司會根據保單條款及保障，支付一次過賠償額125美元予受益人。
27. 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。
28. 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。
19. 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.
20. Tests covered here include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
21. Treatments covered here include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
22. "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).
- "Semi-private Room" shall mean a room categorised as a Semi-private room by a Hospital in 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 higher class with its own kitchen, dining or sitting room(s).
- "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 Person'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 higher class with its own kitchen, dining or sitting room(s).
23. The Company reserves the right to determine the eligibility of a clinic in Hong Kong / Macau.
24. Follow-up Evaluation will not include any long term Hormonal Therapy or any similar long term adjuvant treatment modality prescribed only to prevent recurrence of Cancer.
25. The Death Benefit Revival Option expires on the Insured Person's 76<sup>th</sup> birthday.
26. Only applicable to the Insured Person age of 18 or above. If the Policy Holder is not the Insured Person, the Company shall pay a lump sum equal to US\$125 to the Beneficiary upon his / her death which occurs while this Benefit is in force and subject to the Terms and Benefits of this Policy.
27. 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.
28. 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』優選醫療計劃」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

#### 甲、適用於「『稅』優選醫療計劃」

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)，本保障會於每個保單週年獲續期一年。為配合醫療科技的進步及確保能持續為受保人提供保障，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，並會於每個保單週年日不少於30日前以書面通知保單持有人有關更改。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。保證續保至本保障之保障到期日。

#### 乙、適用於「額外癌症多重保」

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)，本附加保障會於每個保單週年獲續期一年。為配合醫療科技的進步及確保能持續為受保人提供保障，在每次續期時，本公司保留更改保障內容及保費之權利，及保留不批准本附加保障續保的權利，並會於每個保單週年日不少於30日前以書面通知保單持有人有關更改。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。本附加保障不獲續保將不會影響受保人在本附加保障期滿前出現的保障索償。

#### 丙、適用於「住院現金津貼」

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)，本附加保障會於每個保單週年獲續期一年。為配合醫療科技的進步及確保能持續為受保人提供保障，在每次續期時，本公司保留更改保障內容及保費之權利，及保留不批准本附加保障續保的權利，並會於每個保單週年日不少於30日前以書面通知保單持有人有關更改。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。本附加保障不獲續保將不會影響受保人在本附加保障期滿前出現的保障索償。

## 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 PrimeChoice 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

#### A. For TaxVantage PrimeChoice Medical Plan

The benefit 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 the Insured Person with continuous protection, the Company reserves the right to revise the Terms and Benefits and adjust premium on each renewal, and notifies the Policy Holder the related changes by giving the Policy Holder 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. Renewal is guaranteed up to the Benefit Expiry Date of this benefit.

#### B. For Extra Cancer Benefit

The supplementary benefit 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 the Insured Person with continuous protection, the Company reserves the right to change the benefit and premium, and the right not to renew this supplementary benefit on each renewal, and notifies the Policy Holder the related changes by giving the Policy Holder 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. Non-renewal of this supplementary benefit will not affect the Insured Person's benefit claims under this supplementary benefit arising before the expiration date of this supplementary benefit.

#### C. For Hospital Income Benefit

The supplementary benefit 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 the Insured Person with continuous protection, the Company reserves the right to change the benefit and premium, and the right not to renew this supplementary benefit on each renewal, and notifies the Policy Holder the related changes by giving the Policy Holder 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. Non-renewal of this supplementary benefit will not affect the Insured Person's benefit claims under this supplementary benefit arising before the expiration date of this supplementary benefit.

### 通脹風險

將來的醫療費用有機會因通脹而較現時的费用高。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

本計劃由本公司承保及負責，保單持有人的保單權益會受其信貸風險所影響。若我們無法按保單的承諾履行其財務責任，您可能損失保單的保障。

### 選擇病房級別限制（只適用於「自選額外醫療保」）

若受保人於住院的任何一天入住病房之病房級別高於「稅」優選醫療計劃的保障表內所列明之指定病房級別，以下所示的病房級別調整因子將應用於該相關住院日所計算超出「稅」優選醫療計劃最高保障額的可獲賠償開支：

於保障表內所列明之指定病房級別	受保人於住院期間實際入住的病房級別	病房級別調整因子
普通病房	半私家病房	50%
普通病房	標準私家病房或以上	25%
半私家病房	標準私家病房	50%
半私家病房	標準私家病房以上	25%
標準私家病房	標準私家病房以上	25%

選擇病房級別限制將不會應用於以下情況：

- (i) 在接受急症治療時，因房間短缺而無法入住指定病房級別；
- (ii) 因病情需要隔離而入住特定級別的病房；或
- (iii) 不涉及保單持有人及 / 或受保人個人偏好的其他原因。

「自選額外醫療保」的賠償將按照以下公式計算，並受限於表一A所列的限額：

(超出表一A所列的限額之可獲賠償開支 x 80% x 病房級別調整因子 (如適用))

### 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。

### 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。

### 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 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 coverage of Policy.

### Restriction in the Choice of Room Level (Applicable to optional supplementary major medical benefit only)

If on any day of Confinement, the Insured Person is Confined in a room of room level higher than the covered room level as specified in the Benefit Schedule of **TaxVantage PrimeChoice Medical Plan**, the room level adjustment factor set out below shall be applied to the Eligible Expenses in excess of the maximum amount payable under **TaxVantage PrimeChoice Medical Plan** in relation to such days of Confinement:

Covered room level as specified in the Benefit Schedule	Actual room level occupied by the Insured Person 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 ward or 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 Holder and / or the Insured Person.

The benefit of optional supplementary major medical benefit shall be payable according to the following formula, subject to the limit stated in Table 1A:

(Exceeding Eligible Expenses of the limit stated in Table 1 x 80% x room level adjustment factor (if applicable))

### 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.

### 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.



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

##### 甲、適用於「『稅』優選醫療計劃」

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病；
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）；牙科治療或口腔頰面手術（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。

##### 乙、適用於「額外癌症多重保」

「額外癌症多重保」的主要不保事項將包括甲部份第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。

##### 丙、適用於「住院現金津貼」

「住院現金津貼」的主要不保事項將包括甲部份第7、8及9項，以及以下情況：

1. 於保障生效日起計15天內患上的疾病；
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；牙科治療或口腔頰面手術（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；傳統中醫治療；有關扁桃腺、增殖腺、疝氣的治療（除非保單已生效達120天）；

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

##### A. For TaxVantage PrimeChoice 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.

##### B. For Extra Cancer Benefit

The exclusions of the above points nos. 2, 5, 8, 9 and 11 of Part A also apply to **Extra Cancer Benefit**, plus 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.

##### C. For Hospital Income Benefit

The exclusions of the above points nos. 7, 8 and 9 of Part A also apply to **Hospital Income Benefit**, plus 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. 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、財務核保和地區風險等因素。用於核保的資料包括標準健康核保問卷（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

本保單是基於您和受保人於投保申請表內提供給我們的資料。重要的是，您和受保人對所提供的資料都是真實和準確的，因為這些資料有助於我們決定您和受保人是否符合本保單的資格。如果您或受保人提供給我們的資料不準確、誤導或被誇大，您應該立即通知我們。如您或受保人未有提供準確及真實的資料，或您或受保人提供誤導或被誇大的資料，本保單的保障可能會受到影響。

於本保單作為依據的投保申請內，或任何足以影響本保單的任何事項、或有關依據本保單提出任何索償事宜中，如有任何詐騙、關鍵性的錯誤陳述或隱瞞，我們有絕對權決定本保單自成立之日起無效及本保單的所有索償失效。任何已支付的保費，將在此情況下不被發還及沒收。

#### 其他資料

有關索償程序，請瀏覽本公司網頁<https://www.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](http://www.yflife.com)。

#### 保費徵費

保監局會透過保險公司向所有保單持有人，為其於香港緒發之保單，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](http://www.ia.org.hk/tc/levy)。

#### 保單冷靜期及取消保單的權利

如保單未能滿足您的要求，您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，或向您 / 您的代表人交付《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。於收妥書面要求後，保單將被取消，您將可獲退回已繳保費金額及您所繳付的徵費，但不包括任何利息。若曾獲賠償或將獲得賠償，則不獲發還保費。

#### 退保

如需申請退保，您只需填妥、簽署並寄回由本公司提供的特定表格，本公司將安排退保事宜。

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 and residential risk. Information used for underwriting purpose includes Standardized Underwriting Questionnaire (client's family history, past and current health conditions), 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

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

#### Other Information

For details of the procedures for making claims, please refer to our website at <https://www.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](http://www.yflife.com).

#### 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](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 (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 the levy you paid, 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. We will arrange the policy surrender.

**「稅」優選醫療計劃**由萬通保險國際有限公司（「萬通保險」）承保。您可以選擇單獨投保本計劃，毋須同時投保其他類型的保險產品，除非該計劃只設附加保障選項，而必須附加於基本計劃。此產品冊子只提供一般資料，僅作參考之用，並非保單的一部分，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 / 保單文件。此產品冊子不能作為萬通保險與任何人士或團體所訂立之任何合約。

此產品冊子僅旨在香港傳閱，不能詮釋為萬通保險在香港境外提供或出售或游說購買、要約、招攬及建議任何保險產品。如您現時本人不是身在香港境內，萬通保險將無法向您提供有關產品及優惠。您和相關各方應尋求獨立的財務、稅務及法律建議。

儘管萬通保險已謹慎處理此產品冊子所載列之資料，但萬通保險並不會對其內容的準確性作任何明示或暗示擔保，亦不會承擔任何相關責任。若內容與相關保單合同之間存在任何不一致或歧義，則以相關保單合同為準。如有垂詢或欲索取保單文件之範本，歡迎與本公司之顧問、特許分銷商或保險經紀聯絡。其他查詢請致電客戶服務熱線：

香港(852) 2533 5555。

**TaxVantage PrimeChoice Medical Plan** 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 Hong Kong 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 Hong Kong. If you are not currently in Hong Kong, 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, franchised agents, or brokers. For other enquiries, please call our Customer Service Hotline: Hong Kong (852) 2533 5555.

## 客戶服務

香港：香港尖沙咀廣東道9號港威大廈6座12樓1211室

澳門：澳門蘇亞利斯博士大馬路320號澳門財富中心8樓A座

萬通保險客戶服務熱線：香港(852) 2533 5555 澳門(853) 2832 2622

中國內地免費熱線：香港400 842 3983 澳門400 842 3607



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## Customer Service

Hong Kong: Suite 1211, 12/F, Tower 6, The Gateway,

9 Canton Road, Tsimshatsui, Hong Kong

Macau: Avenida Doutor Mario Soares No. 320,

Finance and IT Center of Macau, 8 Andar A, Macau

Customer Service Hotline: Hong Kong (852) 2533 5555

Macau (853) 2832 2622

Mainland China Toll-Free: Hong Kong 400 842 3983

Macau 400 842 3607

萬通保險國際有限公司(萬通保險)的主要權益股東\*包括擁有174年歷史、美國五大壽險公司\*\*之一的Massachusetts Mutual Life Insurance Company (美國萬通)，以及雲鋒金融控股有限公司等。

萬通保險與Barings (霸菱) 為長久戰略合作夥伴，憑藉獨佔鰲頭的環球投資實力與合作網絡，攜金融科技創新強勁動能，居香港保險業領先地位。

\*美國萬通及雲鋒金融控股有限公司為間接持有萬通保險國際有限公司的股份。

\*\*美國五大壽險公司乃按2025年6月2日《FORTUNE 500》公佈的「互惠壽險公司」及「上市股份壽險公司」2024年收入排行榜合併計算。

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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萬通保險國際有限公司

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# 「稅」優選醫療計劃 (獨立保單)

每年保費 (港元) Annual Premium (HK\$)

## TaxVantage PrimeChoice Medical Plan (Standalone Plan)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 1		計劃 Plan 1M		計劃 Plan 1+		計劃 Plan 1M+	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
0	3,689	3,114	5,675	4,790	4,326	3,653	6,656	5,619
1	3,543	3,028	5,449	4,658	4,154	3,552	6,392	5,464
2	3,395	2,942	5,224	4,526	3,982	3,451	6,127	5,309
3	3,249	2,857	4,998	4,394	3,810	3,351	5,862	5,155
4	3,103	2,770	4,774	4,262	3,639	3,249	5,600	4,999
5	2,957	2,685	4,548	4,130	3,467	3,149	5,335	4,845
6	2,831	2,597	4,354	3,996	3,320	3,047	5,107	4,687
7	2,705	2,512	4,162	3,863	3,173	2,945	4,882	4,531
8	2,580	2,425	3,969	3,730	3,027	2,844	4,656	4,376
9	2,455	2,338	3,776	3,596	2,879	2,742	4,429	4,218
10	2,329	2,251	3,583	3,463	2,732	2,641	4,203	4,063
11	2,325	2,238	3,577	3,442	2,727	2,624	4,196	4,037
12	2,322	2,224	3,572	3,421	2,724	2,608	4,190	4,013
13	2,318	2,210	3,565	3,399	2,719	2,592	4,182	3,988
14	2,314	2,196	3,559	3,379	2,714	2,577	4,175	3,964
15	2,310	2,182	3,553	3,357	2,709	2,560	4,168	3,938
16	2,342	2,311	3,602	3,554	2,746	2,710	4,226	4,169
17	2,374	2,439	3,652	3,752	2,785	2,861	4,283	4,401
18	2,431	2,566	3,740	3,948	2,852	3,010	4,387	4,631
19	2,492	2,662	3,834	4,095	2,924	3,122	4,497	4,803
20	2,555	2,731	3,931	4,201	2,997	3,204	4,611	4,928
21	2,606	2,881	4,009	4,433	3,057	3,380	4,702	5,200
22	2,659	2,997	4,091	4,611	3,119	3,516	4,798	5,408
23	2,714	3,081	4,174	4,741	3,182	3,615	4,896	5,560
24	2,769	3,193	4,261	4,913	3,249	3,746	4,998	5,762
25	2,826	3,283	4,347	5,051	3,315	3,851	5,099	5,924
26	2,835	3,347	4,362	5,148	3,326	3,926	5,117	6,039
27	2,843	3,437	4,374	5,286	3,336	4,031	5,131	6,201
28	2,853	3,523	4,388	5,419	3,346	4,132	5,147	6,357
29	2,868	3,607	4,412	5,548	3,364	4,231	5,175	6,508
30	2,890	3,688	4,445	5,673	3,389	4,325	5,214	6,654
31	2,995	3,822	4,608	5,880	3,514	4,483	5,405	6,897
32	3,099	3,959	4,767	6,090	3,635	4,644	5,592	7,144
33	3,209	4,108	4,936	6,321	3,764	4,820	5,790	7,414
34	3,303	4,271	5,080	6,571	3,873	5,010	5,959	7,708
35	3,419	4,447	5,260	6,842	4,010	5,216	6,169	8,025
36	3,424	4,607	5,268	7,087	4,016	5,404	6,179	8,313
37	3,487	4,781	5,365	7,355	4,091	5,608	6,293	8,627

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2026/01/01起生效

With effect from 2026/01/01

# 「稅」優選醫療計劃 (獨立保單)

每年保費 (港元) Annual Premium (HK\$)

## TaxVantage PrimeChoice Medical Plan (Standalone Plan)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 1		計劃 Plan 1M		計劃 Plan 1+		計劃 Plan 1M+	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
38	3,592	4,998	5,526	7,689	4,213	5,863	6,482	9,020
39	3,722	5,200	5,725	7,999	4,366	6,100	6,716	9,384
40	3,889	5,406	5,983	8,317	4,561	6,341	7,018	9,756
41	4,079	5,539	6,275	8,521	4,785	6,497	7,361	9,995
42	4,281	5,717	6,586	8,796	5,022	6,706	7,725	10,317
43	4,500	5,899	6,922	9,075	5,278	6,919	8,120	10,645
44	4,699	6,148	7,229	9,458	5,512	7,212	8,479	11,095
45	4,802	6,398	7,389	9,842	5,634	7,504	8,667	11,545
46	5,085	6,622	7,822	10,187	5,964	7,768	9,176	11,950
47	5,378	6,777	8,273	10,426	6,308	7,949	9,705	12,230
48	5,649	6,917	8,691	10,641	6,626	8,114	10,194	12,482
49	5,908	7,053	9,088	10,851	6,930	8,273	10,661	12,728
50	6,079	7,177	9,351	11,041	7,130	8,419	10,969	12,952
51	6,464	7,328	9,944	11,274	7,582	8,596	11,664	13,225
52	6,792	7,470	10,450	11,492	7,968	8,763	12,257	13,480
53	7,121	7,606	10,955	11,701	8,353	8,922	12,850	13,726
54	7,456	7,736	11,471	11,901	8,746	9,074	13,455	13,960
55	7,797	7,859	11,994	12,091	9,145	9,219	14,069	14,183
56	8,235	8,112	12,669	12,479	9,660	9,515	14,861	14,638
57	8,702	8,369	13,387	12,875	10,208	9,817	15,704	15,103
58	9,195	8,654	14,147	13,312	10,787	10,150	16,594	15,615
59	9,710	8,937	14,939	13,749	11,390	10,483	17,523	16,127
60	10,250	9,221	15,769	14,186	12,024	10,817	18,497	16,640
61	10,866	9,615	16,716	14,791	12,746	11,278	19,609	17,351
62	11,497	10,027	17,688	15,425	13,486	11,761	20,748	18,093
63	12,164	10,461	18,713	16,093	14,268	12,271	21,950	18,877
64	12,846	11,119	19,762	17,106	15,068	13,042	23,182	20,065
65	13,548	11,845	20,843	18,223	15,891	13,894	24,449	21,376
66	14,150	12,528	21,769	19,275	16,598	14,697	25,535	22,610
67	14,780	13,238	22,738	20,367	17,336	15,529	26,671	23,890
68	15,424	13,985	23,729	21,514	18,092	16,404	27,834	25,237
69	16,425	14,812	25,268	22,787	19,267	17,375	29,641	26,730
70	17,520	15,661	26,953	24,093	20,550	18,371	31,615	28,262
71	17,922	15,745	27,573	24,223	21,024	18,469	32,344	28,414
72	18,346	15,834	28,224	24,359	21,519	18,573	33,107	28,574
73	18,784	15,930	28,897	24,508	22,033	18,687	33,897	28,749
74	19,196	16,020	29,532	24,646	22,517	18,792	34,641	28,911
75	19,505	16,092	30,007	24,758	22,880	18,877	35,200	29,041

此標準保費表並未包括由保險業監管局徵收的保費徵費。

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由2026/01/01起生效

With effect from 2026/01/01

# 「稅」優選醫療計劃 (獨立保單)

每年保費 (港元) Annual Premium (HK\$)

## TaxVantage PrimeChoice Medical Plan (Standalone Plan)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 1		計劃 Plan 1M		計劃 Plan 1+		計劃 Plan 1M+	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
76	19,817	16,163	30,487	24,866	23,246	18,960	35,762	29,168
77	20,127	16,235	30,964	24,977	23,609	19,044	36,321	29,299
78	20,442	16,308	31,449	25,090	23,979	19,131	36,891	29,432
79	20,760	16,384	31,939	25,205	24,352	19,218	37,465	29,566
80	21,191	16,458	32,601	25,320	24,857	19,306	38,241	29,701
81*	21,555	16,541	33,162	25,448	25,286	19,404	38,901	29,851
82*	21,910	16,621	33,707	25,569	25,701	19,495	39,539	29,993
83*	22,245	16,696	34,223	25,686	26,095	19,585	40,145	30,130
84*	22,587	16,773	34,750	25,805	26,495	19,676	40,762	30,270
85*	22,883	16,837	35,204	25,903	26,841	19,750	41,294	30,384
86*	23,012	16,864	35,403	25,944	26,994	19,782	41,528	30,433
87*	23,144	16,890	35,606	25,984	27,148	19,813	41,766	30,480
88*	23,270	16,918	35,800	26,028	27,297	19,846	41,995	30,531
89*	23,403	16,946	36,005	26,071	27,453	19,878	42,235	30,581
90*	23,539	16,974	36,214	26,113	27,612	19,910	42,480	30,631
91*	23,673	17,003	36,420	26,158	27,769	19,945	42,722	30,684
92*	23,813	17,032	36,636	26,202	27,933	19,977	42,974	30,735
93*	23,949	17,060	36,845	26,246	28,093	20,012	43,219	30,787
94*	24,088	17,089	37,058	26,290	28,255	20,045	43,470	30,839
95*	24,233	17,119	37,282	26,337	28,426	20,080	43,733	30,893
96*	24,373	17,148	37,497	26,382	28,590	20,115	43,985	30,947
97*	24,521	17,179	37,724	26,428	28,763	20,150	44,251	31,000
98*	24,666	17,209	37,947	26,475	28,933	20,186	44,512	31,055
99*	24,817	17,239	38,180	26,521	29,110	20,221	44,785	31,110

\* 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。

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由2026/01/01起生效

With effect from 2026/01/01

# 「稅」優選醫療計劃 (獨立保單)

每年保費(港元) Annual Premium (HK\$)

## TaxVantage PrimeChoice Medical Plan (Standalone Plan)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 2		計劃 Plan 2M		計劃 Plan 3		計劃 Plan 3M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
0	6,160	5,200	9,476	7,999	12,024	10,149	18,498	15,614
1	5,915	5,057	9,100	7,779	11,546	9,870	17,763	15,185
2	5,671	4,914	8,724	7,559	11,068	9,591	17,027	14,754
3	5,426	4,770	8,347	7,338	10,591	9,312	16,293	14,325
4	5,181	4,626	7,972	7,117	10,115	9,031	15,561	13,892
5	4,936	4,483	7,595	6,896	9,636	8,750	14,825	13,462
6	4,726	4,338	7,271	6,673	9,226	8,467	14,194	13,026
7	4,518	4,194	6,950	6,451	8,818	8,185	13,566	12,592
8	4,309	4,049	6,629	6,229	8,410	7,904	12,938	12,159
9	4,099	3,904	6,306	6,005	8,002	7,620	12,310	11,723
10	3,889	3,760	5,983	5,784	7,592	7,338	11,679	11,289
11	3,883	3,736	5,972	5,748	7,578	7,293	11,659	11,219
12	3,877	3,714	5,964	5,713	7,567	7,249	11,642	11,151
13	3,870	3,690	5,954	5,677	7,555	7,203	11,622	11,081
14	3,864	3,668	5,944	5,643	7,541	7,159	11,601	11,014
15	3,857	3,645	5,933	5,607	7,529	7,114	11,582	10,943
16	3,910	3,858	6,016	5,935	7,633	7,531	11,742	11,585
17	3,964	4,072	6,098	6,265	7,738	7,949	11,904	12,230
18	4,061	4,286	6,246	6,594	7,925	8,366	12,193	12,871
19	4,162	4,445	6,403	6,838	8,124	8,676	12,499	13,348
20	4,267	4,560	6,565	7,015	8,329	8,901	12,814	13,693
21	4,352	4,812	6,695	7,402	8,495	9,392	13,069	14,449
22	4,441	5,005	6,831	7,700	8,667	9,770	13,334	15,030
23	4,531	5,146	6,971	7,917	8,845	10,045	13,607	15,454
24	4,625	5,333	7,115	8,203	9,027	10,410	13,888	16,014
25	4,719	5,482	7,260	8,434	9,211	10,702	14,170	16,464
26	4,734	5,589	7,284	8,598	9,242	10,908	14,218	16,782
27	4,748	5,739	7,304	8,829	9,267	11,202	14,258	17,232
28	4,763	5,883	7,328	9,050	9,298	11,483	14,305	17,666
29	4,789	6,023	7,368	9,265	9,349	11,756	14,382	18,085
30	4,825	6,158	7,423	9,473	9,419	12,020	14,490	18,492
31	5,002	6,382	7,695	9,819	9,763	12,458	15,020	19,167
32	5,175	6,610	7,961	10,170	10,102	12,903	15,540	19,852
33	5,359	6,861	8,244	10,555	10,459	13,393	16,091	20,604
34	5,515	7,132	8,485	10,973	10,765	13,923	16,561	21,420
35	5,710	7,427	8,783	11,425	11,145	14,497	17,146	22,303
36	5,719	7,694	8,798	11,835	11,163	15,017	17,173	23,102
37	5,824	7,984	8,959	12,282	11,368	15,583	17,488	23,975

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。

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由2026/01/01起生效

With effect from 2026/01/01



# 「稅」優選醫療計劃 (獨立保單)

每年保費 (港元) Annual Premium (HK\$)

## TaxVantage PrimeChoice Medical Plan (Standalone Plan)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 2		計劃 Plan 2M		計劃 Plan 3		計劃 Plan 3M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
38	5,999	8,348	9,229	12,842	11,711	16,293	18,015	25,067
39	6,214	8,684	9,561	13,360	12,131	16,950	18,663	26,077
40	6,495	9,028	9,991	13,889	12,677	17,623	19,503	27,111
41	6,812	9,250	10,480	14,230	13,297	18,055	20,456	27,777
42	7,150	9,548	10,999	14,688	13,956	18,637	21,470	28,673
43	7,514	9,850	11,560	15,155	14,668	19,230	22,565	29,583
44	7,847	10,267	12,072	15,795	15,318	20,040	23,566	30,831
45	8,020	10,684	12,339	16,436	15,656	20,855	24,086	32,084
46	8,491	11,059	13,063	17,013	16,574	21,586	25,499	33,209
47	8,981	11,318	13,817	17,412	17,531	22,093	26,970	33,988
48	9,434	11,551	14,513	17,771	18,415	22,548	28,331	34,690
49	9,866	11,779	15,178	18,120	19,257	22,992	29,626	35,372
50	10,151	11,986	15,616	18,439	19,814	23,396	30,482	35,993
51	10,795	12,238	16,607	18,828	21,071	23,889	32,417	36,752
52	11,344	12,475	17,452	19,192	22,142	24,352	34,066	37,464
53	11,892	12,702	18,294	19,542	23,213	24,795	35,711	38,146
54	12,452	12,919	19,156	19,875	24,305	25,218	37,393	38,796
55	13,020	13,125	20,030	20,192	25,414	25,620	39,098	39,414
56	13,753	13,546	21,158	20,839	26,846	26,443	41,301	40,680
57	14,532	13,977	22,357	21,502	28,368	27,283	43,642	41,973
58	15,356	14,451	23,625	22,232	29,976	28,208	46,117	43,396
59	16,217	14,925	24,948	22,961	31,654	29,133	48,699	44,820
60	17,118	15,399	26,335	23,690	33,414	30,059	51,405	46,244
61	18,146	16,056	27,917	24,702	35,422	31,342	54,495	48,219
62	19,201	16,744	29,539	25,760	37,480	32,684	57,661	50,284
63	20,313	17,469	31,251	26,876	39,651	34,101	61,001	52,463
64	21,452	18,568	33,003	28,567	41,875	36,246	64,423	55,764
65	22,624	19,782	34,807	30,433	44,165	38,614	67,945	59,407
66	23,631	20,923	36,354	32,189	46,127	40,843	70,964	62,835
67	24,682	22,108	37,972	34,013	48,181	43,156	74,124	66,394
68	25,758	23,354	39,628	35,929	50,281	45,588	77,355	70,135
69	27,429	24,736	42,199	38,055	53,543	48,286	82,374	74,285
70	29,258	26,154	45,011	40,236	57,112	51,053	87,864	78,543
71	29,930	26,294	46,047	40,453	58,426	51,327	89,886	78,965
72	30,638	26,443	47,134	40,680	59,805	51,616	92,007	79,409
73	31,368	26,604	48,259	40,930	61,232	51,932	94,203	79,896
74	32,057	26,755	49,319	41,160	62,577	52,225	96,272	80,346
75	32,573	26,875	50,113	41,346	63,585	52,460	97,824	80,708

此標準保費表並未包括由保險業監管局徵收的保費徵費。

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由2026/01/01起生效

With effect from 2026/01/01

# 「稅」優選醫療計劃 (獨立保單)

每年保費 (港元) Annual Premium (HK\$)

## TaxVantage PrimeChoice Medical Plan (Standalone Plan)

已屆年齡 Attained Age	標準保費 Standard Premium							
	計劃 Plan 2		計劃 Plan 2M		計劃 Plan 3		計劃 Plan 3M	
	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
76	33,094	26,992	50,914	41,526	64,602	52,690	99,388	81,061
77	33,612	27,113	51,712	41,712	65,613	52,926	100,943	81,424
78	34,139	27,236	52,521	41,901	66,641	53,166	102,525	81,793
79	34,670	27,360	53,339	42,092	67,678	53,408	104,119	82,166
80	35,389	27,485	54,444	42,285	69,081	53,652	106,278	82,542
81*	35,999	27,624	55,383	42,498	70,270	53,923	108,108	82,959
82*	36,590	27,756	56,292	42,701	71,426	54,181	109,885	83,354
83*	37,151	27,883	57,154	42,896	72,519	54,428	111,567	83,734
84*	37,721	28,011	58,033	43,095	73,634	54,680	113,283	84,124
85*	38,215	28,118	58,792	43,258	74,596	54,887	114,763	84,442
86*	38,431	28,163	59,124	43,327	75,017	54,975	115,411	84,577
87*	38,651	28,207	59,462	43,394	75,448	55,060	116,073	84,708
88*	38,861	28,253	59,787	43,466	75,860	55,152	116,708	84,849
89*	39,085	28,301	60,130	43,539	76,295	55,244	117,376	84,990
90*	39,311	28,346	60,479	43,610	76,738	55,333	118,057	85,128
91*	39,535	28,396	60,823	43,685	77,174	55,429	118,729	85,275
92*	39,769	28,442	61,182	43,757	77,631	55,521	119,431	85,416
93*	39,995	28,490	61,532	43,831	78,072	55,614	120,112	85,561
94*	40,227	28,539	61,888	43,905	78,525	55,708	120,807	85,705
95*	40,471	28,589	62,263	43,983	79,000	55,807	121,539	85,856
96*	40,703	28,639	62,620	44,059	79,455	55,903	122,238	86,003
97*	40,950	28,689	63,000	44,136	79,938	56,001	122,980	86,155
98*	41,192	28,739	63,372	44,213	80,408	56,099	123,706	86,306
99*	41,445	28,789	63,761	44,290	80,902	56,197	124,464	86,457

\* 只適用於續保 For Renewal Only

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With effect from 2026/01/01

# 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

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。

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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2026/01/01起生效

With effect from 2026/01/01

# 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
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
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

\* 只適用於續保 For Renewal Only

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 With effect from 2026/01/01



# 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
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		計劃 Plan 4 每日保障 Daily Benefit \$1,500		計劃 Plan 5 每日保障 Daily Benefit \$2,000	
	男 Male	女 Female	男 Male	女 Female	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	1,350	1,755	1,800	2,340
31-35	552	718	828	1,076	1,104	1,435	1,380	1,795	1,840	2,393
36-40	570	741	855	1,112	1,140	1,482	1,425	1,853	1,900	2,470
41-45	720	900	1,080	1,350	1,440	1,800	1,800	2,250	2,400	3,000
46-50	828	994	1,242	1,490	1,656	1,987	2,070	2,485	2,760	3,313
51-55	1,320	1,584	1,980	2,376	2,640	3,168	3,300	3,960	4,400	5,280
56-60	1,560	1,716	2,340	2,574	3,120	3,432	3,900	4,290	5,200	5,720
61-65	1,950	2,145	2,925	3,218	3,900	4,290	4,875	5,363	6,500	7,150
66-70*	2,438	2,681	3,656	4,023	4,875	5,363	6,095	6,703	8,127	8,937
71-74*	3,170	3,486	4,753	5,230	6,338	6,972	7,925	8,715	10,567	11,620

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9

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