

| 医疗 Medical |

# VIP 环球医疗保

## VIP Worldwide MediCare

VWM

YFLife  
萬通保險



《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  
2012-2023  
资本卓越保险服务大奖

未來在我手  
Own the future

## 保障遍全球 呵护您未来

Own your future with peace of mind – wherever you are

卓越的您追求优质生活，自然注重生活上的每个范畴。VIP环球医疗保提供最全面的环球优质医疗方案，随时应您所需，让您可即时获得全面及个人化的医疗服务。无论何时何地，您亦可安心自若，只因“健康”已掌握在您手。

You appreciate the finer things in life and attach great importance to quality. VIP Worldwide MediCare is a highly comprehensive worldwide medical solution that focuses on and commits to excellence in every respect, ensuring that you receive world-class medical treatment in a timely and discreet manner just when you need it most. Wherever you go, you can have absolute peace of mind because you'll know that your health and wellbeing are being taken care of.



# VIP环球医疗保

## VIP Worldwide MediCare

**1** 全面医疗保障高达  
\$70,000,000  
Full Medical Coverage  
up to \$70,000,000



- 适用于标准私家病房  
Applicable to standard private room

**2** 一系列更强保障  
Full Range of  
Extended Coverage



- 非手术癌症治疗、洗肾、物理治疗及手术后家中看护等  
Non-surgical cancer treatments, Renal dialysis, Physiotherapy and Post-surgery home nursing, etc.

**3** 保证终身续保  
Guaranteed Renewals  
for Life



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

**4** 无索偿奖赏  
No Claim Bonus



- 最高可达10%  
Up to 10%

**5** 设每年垫底费  
配合预算  
Annual Deductible for  
Flexible Budgeting



- 4款选择: 每年 0 / 15,000 / 30,000 / 60,000  
港元/澳门元  
4 Options: HK\$/MOP 0 / 15,000 / 30,000 / 60,000

1

## 全面医疗保障高达\$70,000,000 Full Coverage up to \$70,000,000



VIP环球医疗保为您提供标准私家病房的优质医疗保障，全数赔偿因患病或意外受伤而需入院治疗的各项主要住院费用及手术费用，终身保障额高达70,000,000港元/澳门元。

VIP Worldwide MediCare provides quality medical services in standard private room with full reimbursement of the major hospitalization and surgical expenses incurred due to illness or accident. Under the plan, you can enjoy lifetime cover of up to HK\$ / MOP70,000,000.

2

## 一系列更强保障 Full Range of Extended Coverage



计划更提供多项入院前及出院后的延伸保障，于康复路上为您提供更强照顾：

- 非手术癌症治疗：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
- 洗肾
- 辅助治疗：物理治疗、言语治疗、脊骨神经治疗、职业治疗及中医治疗
- 手术后家中看护
- 入院前及出院后门诊

The plan offers a wide range of extended pre- and post-hospitalization benefits, providing you with enhanced protection throughout your recovery journey:

- Non-surgical cancer treatments: Chemotherapy, Radiotherapy, Target Therapy, Hormonal Therapy, Immunotherapy and Proton Beam Therapy
- Renal dialysis
- Ancillary treatments: physiotherapy, speech therapy, chiropractic treatment, occupational therapy and Chinese medical treatment
- Post-surgery home nursing
- Pre- and post- hospitalization outpatient treatment

3

## 保证终身续保 Guaranteed Renewals for Life



无论您的健康状况或索偿纪录如何，VIP环球医疗保为您提供每年续保保证，保障年期最长可达至受保人100岁，让您无后顾之忧。续期保费会于每年续期时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。

VIP Worldwide 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 the Insured's attained age and to the premium rate in effect for the same level of benefit at the time of policy renewal.

## 4

## 无索偿奖赏 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，以及期间并无就基本计划有任何索偿纪录，于支付续期保费时，即可获享无索偿奖赏折扣优惠，优惠金额会按上一个保单年基本计划的“每年保费”的百分比计算，最高可达10%。

Provided that the policy has been in force for at least three consecutive policy years and no claims were made under the Basic 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 of the Basic Plan for the preceding year, up to a maximum of 10%.

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	3%
4	6%
≥5	10%

## 5

## 设每年垫底费 配合预算 Annual Deductible for Flexible Budgeting



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，VIP环球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
- 60,000港元 / 澳门元

您更可于年满50、55、60或65岁的保单周年日<sup>1</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, VIP Worldwide 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 60,000

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>1</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>2</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 hospitalized due to any designated critical illnesses<sup>2</sup>**

## 附注

1. 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。
2. 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。
3. “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、护理及休养的场所、安老院、用作戒毒或戒毒或任何类似用途的地方，均不会被当作“医院”。
4. 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。
5. 以一张额外床位为限。
6. 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，由一位合格护士提供的护理服务。
7. 本公司保留决定合格诊所的权利。
8. 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。
9. 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。
10. 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格护士提供的护理服务。
11. 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。
12. 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。
13. 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。
14. 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。
15. 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。
16. 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。
17. 每年保障总额及最高终身保障总额适用于自选附加保障(如有)。
18. 如要附加牙科保障，必须先投保门诊保障。牙科治疗之日期必须为牙科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180日后。

## Notes

1. 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.
2. 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.
3. "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. 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.
5. Subject to one extra bed.
6. 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.
7. The Company reserves the right to determine the eligibility of a clinic.
8. 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.
9. 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.
10. 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.
11. 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.
12. 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.
13. 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.
14. 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.
15. Applicable if the Insured sustains an Injury due to accident and receives outpatient treatment in the outpatient department of a Hospital within 24 hours.
16. 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.
17. The Annual Limit and the Maximum Lifetime Limit of the Policy are applicable to the Optional Supplementary Benefit(s) (if any).
18. Outpatient Benefit is a pre-requisite for attaching Dental Benefit. The date of dental treatment must be incurred after the policy has been effective continuously for 180 days since the effective date of the Dental Benefit, or approval date of reinstatement, whichever is later.

## 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（“牙科保障”除外，其缴付保费年期及保障年期最长可至受保人75岁）。如在保费到期日起计31日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

除了上述保单终止的情况外，“门诊保障”亦会在所属之“VIP环球医疗保”的保单终止时被终止，而“牙科保障”亦会在“门诊保障”终止时被终止。

若任何递交之索偿带有欺诈成份，万通保险国际有限公司（“万通保险”）有权即时终止本保单，而阁下将须要向万通保险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，万通保险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，万通保险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万通保险过去的索偿纪录、开支、医疗通胀、医疗趋势，以及 / 或因修订保障架构 / 保障级别（如有）而影响预期未来的索偿成本。

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>

### 计划之持续性

续保情况将根据万通保险是否仍然为所有现有保单继续提供该计划而定。若万通保险决定不再向所有已投保此计划的保单持有人提供本计划，万通保险会尽力为受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，即使万通保险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

本计划由万通保险承保及负责，保单持有人的保单权益会受其信贷风险所影响。

### 房间级别

若受保人于住院的任何一天入住的房间级别高于标准私家房（不论自愿与否），万通保险将减低该等住院期间的合资格之医疗费用至百分之二十五。

## Important Information

### Premium Payment Term and Benefit Term

The premium payment term and the benefit term are up to age 100 of the Insured (except for the **Dental Benefit** where the premium payment term and benefit term are up to age 75 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 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

Besides the above conditions for policy termination, the **Outpatient Benefit** will also be terminated when the **VIP Worldwide MediCare** policy to which this Supplementary Benefit is attached terminates, while the **Dental Benefit** will also be terminated when the **Outpatient Benefit** terminates.

If any claim made shall be fraudulent, YF Life Insurance International Ltd. (“YF Life”) shall have the right to terminate this policy immediately and you shall indemnify YF Life and repay all benefits paid in respect of such fraudulent claim. YF Life 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, YF Life 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 YF Life, expenses, medical inflation, medical trend and / or revised benefit structure / level of benefits (if any) which might impact the expected claim costs in the future.

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>

### Continuity of the Plan

Policy renewal is based on the continuing availability of the plan to all existing policies. If YF Life 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 YF Life meets all of its contractual obligations.

### Credit Risk

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

### Ward Type

If the Insured's Confinement is of a class upper than Standard Private Room, whether voluntarily or involuntarily, YF Life shall reduce the eligible medical expenses incurred during such period of Confinement to 25% of the benefit payable.

## 地域保障

### 适用于保障地区为全球（美国除外）

1. 住院保障、手术保障、住院前及出院后之保障、延伸保障及“**门诊保障**”（如适用）只就以下作出赔偿：
  - i. 任何于美国以外之住院、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. 任何于受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，而受保人于事发前365日内于该事发地点居住少于183日。
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受保人于世界各地因合资格意外接受的紧急治疗作出赔偿。
3. “**牙科保障**”（如适用）内之保障将就受保人于世界各地合资格的治疗作出赔偿。

## 保障的限制

### 适用于保障地区为全球

如以下情况发生，合资格之医疗费用将被减低至百分之五十：

1. 受保人在美国住院、入住注册善终院舍、进行之手术、医疗程序 / 医疗及 / 或服务时，于过去365日已于美国居住达183日或以上；及 / 或
2. 受保人于美国之任何住院或在医院日症房或在诊所接受手术并没有获万通保险预先批核（因意外或紧急事故直接引致则除外）。

若发生以上情况 1 及 / 或 情况 2，而受保人同时于住院的任何一天入住的房间级别高于标准私家房（不论自愿与否），我们将减低该等住院期间的合资格之医疗费用至百分之十二点五。

## 更改保障地区的权利

### 适用于保障地区为全球

若受保人于过去365日已于美国居住达183日或以上，万通保险保留绝对权利于任何时间将保障地区由全球更改为全球（美国除外）。

## 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	30日
扁桃腺、增殖腺、疝气的治疗或手术	120日
自选牙科保障	180日 (适用于并非因受伤而导致的牙科治疗)
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 / 爱滋病治疗保障	5年

## 医疗上必须的

万通保险会为受保人医疗上必须的医疗开支作出赔偿。

医疗上必须的指符合以下所有情况：

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

## Geographical Restrictions

### For the Area of Cover being Worldwide (excluding USA)

1. Benefits payable under Hospitalization Benefits, Surgical Benefits, Pre- and Post-Hospitalization Benefits, Extended Benefits and the **Outpatient Benefit** (if applicable) are payable only for
  - i. any Confinement, stay in registered hospice, surgery, medical procedures / treatment and / or service which takes place or is performed outside the United States; 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 less than 183 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.
3. Benefits under the **Dental Benefit** (if applicable) are payable for covered treatment provided to the Insured anywhere in the world.

## Benefit Restrictions

### For the Area of Cover being Worldwide

The eligible medical expenses incurred will be reduced to 50% of the benefit payable if:

1. The Insured has taken up residence in the United States for at least 183 days in the past 365 days at the time of any Confinement, stay in registered hospice, surgery, medical procedures / treatment and / or service which takes place or is performed in the United States; and / or
2. The Insured is under Confinement or undergoes surgical procedures performed in the day case unit of a hospital or in a clinic in the United States without obtaining our pre-authorization unless it is directly due to accident or emergency.

If the above condition 1 and / or 2 occur(s), and at the same time, the Insured's Confinement is of a class upper than Standard Private Room, whether voluntarily or involuntarily, we shall reduce the eligible medical expenses incurred during such period of Confinement to 12.5% of the benefit payable.

## Revision of Area of Cover

### For the Area of Cover being Worldwide

We reserve the absolute right to change the Area of Cover from Worldwide to Worldwide (excluding USA) at any time if the Insured has taken up residence in the United States for at least 183 days in the past 365 days.

## 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	30 days
Treatment or surgery for tonsils, adenoids, hernia	120 days
Optional dental benefit	180 days (For dental treatments not resulted from an Injury)
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

YF Life will cover the Medically Necessary expenses incurred by the Insured.

Medically Necessary means all of the following conditions are met:

- i. consistent with the diagnosis and customary medical treatment for the condition in the Place of Issuance of this policy.
- ii. in accordance with standards of good medical practice in the Place of Issuance of this policy.
- iii. not for the convenience of the Insured and / or the doctor.

### 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。万通保险可参考以下情况（如适用）决定有关医疗费用是否为“合理及惯常的收费”：

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

如万通保险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，万通保险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。

### 适用于VIP环球医疗保

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：

- (1) 在保障生效日起计30日内患上的疾病；
- (2) 保障生效日期前已存在伤病的情况（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）；
- (3) 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、病后康复、托管、疗养或休养；
- (4) 美容或整形外科手术（矫形手术保障除外）；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日），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）；
- (5) 牙科护理或手术（紧急牙齿治疗保障除外）；
- (6) 因怀孕、堕胎、生育或小产及其他由上述情况引致的并发症（妊娠并发症保障除外）；于受保人十七岁生日前出现病征或病状、或已确诊的先天性畸形或反常、绝育或不育（任何性别）及直接或间接与变性手术有关之治疗；
- (7) 医疗实验及 / 或非主流医疗技术 / 程序 / 治疗；
- (8) 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；
- (9) 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）；
- (10) 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）；
- (11) 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；
- (12) 自杀或在神智不清醒的状况下受伤；自残、毒瘾或酒瘾；
- (13) 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；
- (14) 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；
- (15) 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；
- (16) 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；
- (17) 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；
- (18) 传统中药（辅助服务下由中医师所处方的药物除外），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；

### 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”, YF Life may make reference to the followings (if applicable):

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

YF Life reserves the right to adjust any or all benefits payable in relation to any hospital / medical charges which in the opinion of YF Life’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.

### For VIP Worldwide MediCare

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

- (1) Claims due to Sickness occurring within 30 days of the Effective Date of Coverage;
- (2) Pre-existing conditions (which presented signs or symptoms of which the Insured has been aware or should reasonably have been aware);
- (3) General check-up, screening and / or preventive care / checking, genetic testing or counselling, vaccination / immunization, convalescence, custodial or sanatorium care or rest care;
- (4) Cosmetic or plastic surgery, except for Reconstructive Surgery Benefit; refractive errors of the eyes; treatment or surgery 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);
- (5) Dental care or surgery (except for Emergency Dental Benefit);
- (6) Pregnancy, abortion, childbirth or miscarriage, and other complications arising therefrom, except for Pregnancy Complications Benefit; congenital deformities or anomalies which present signs or symptoms, or are diagnosed, before the Insured attains 17 years of age, sterilization or infertility of either gender, treatment directly or indirectly related to a gender change;
- (7) Experimental and / or unconventional medical technology / procedure / therapy;
- (8) Mental disorder, psychological or psychiatric conditions, behavioral problems or personality disorders, except for Psychiatric Treatment Benefit;
- (9) Sleep disorders except for the treatment of sleep apnoea which is life threatening as confirmed by a specialist Doctor;
- (10) Treatment of obesity, weight control programs or bariatric surgery (except when bariatric surgery is necessary as confirmed by a specialist Doctor after failure of conventional treatments);
- (11) 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;
- (12) Suicide, attempted suicide or injuries due to insanity, self-infliction; drug addiction or alcoholism;
- (13) 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;
- (14) 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;
- (15) Hospital Confinement primarily for physiotherapy and / or for the investigation of signs and / or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures;
- (16) Human Immunodeficiency Virus (HIV) Infection (including AIDS), unless meeting the requirement for the HIV / AIDS Treatment Benefit;
- (17) The Insured is hospitalized for Circumcision before the age of 12 and such hospitalization occurs within 2 years of the Effective Date of Coverage;
- (18) Traditional Chinese medicines, except for medicines prescribed by a Chinese Medicine Practitioner under Ancillary Services, 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;

(19) 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日的治疗而维持持续性意识障碍的状态超过60日；

(20) 根据政府条例或其他保险计划而获得赔偿的情况。

#### **适用于“门诊保障”**

除第(3)及(8)项受保于本附加保障的接种疫苗及健康检查保障及精神疾病治疗保障的情况外，以上VIP环球医疗保的不保事项亦适用于“门诊保障”。

#### **适用于“牙科保障”**

本附加保障不会保障在本附加保障的生效日期起计180日内非因受伤而导致的牙科治疗。

除第(5)项受保于本附加保障的情况外，以上VIP环球医疗保的不保事项亦适用于“牙科保障”。

#### **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，因万通保险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中。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，请浏览保监局网站网页[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。

(19) 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;

(20) Expenses for which compensation is payable under any government law or any other insurance policy.

#### **For Outpatient Benefit**

The exclusions of the above points for **VIP Worldwide MediCare** also apply to **Outpatient Benefit** except points no. 3 and 8 to the extent where such occurrence is covered under Vaccinations and Health Checkup Benefit and Psychiatric Treatment Benefit of this Supplementary Benefit.

#### **For Dental Benefit**

This Supplementary Benefit does not cover dental treatments occurring within 180 days of the Effective Date of this Supplementary Benefit if the dental treatments are not resulted from an Injury.

The exclusions of the above points for **VIP Worldwide MediCare** also apply to **Dental Benefit** except point no. 5 to the extent where such occurrence is covered under this Supplementary Benefit.

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

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

# “VIP环球医疗保”一览表

## VIP Worldwide MediCare – at a glance

表一:主要保障

Table 1: Core Benefits

(港元 / 澳门元 HK\$/MOP)

	计划 Plan 1	计划 Plan 2
保障地区 Area of Cover	全球 Worldwide	全球 (美国除外) Worldwide (excluding USA)
<b>保障 Benefits</b>	<b>保障限额 Benefit Limits</b>	
终身保障总额 (适用于第1至30项及附加保障) <b>Lifetime Limit</b> (Applicable to items 1 to 30 and Supplementary Benefits)	70,000,000	
每年保障总额 (适用于第1至30项及附加保障) <b>Annual Limit</b> (Applicable to items 1 to 30 and Supplementary Benefits)	25,000,000	
每年垫底费 (不适用于第8、9、16、31项及附加保障) <b>Annual Deductible Amount</b> (Not applicable to items 8, 9, 16, 31 and Supplementary Benefits)	0 / 15,000 / 30,000 / 60,000	
住院病房级别 Ward Type	标准私家病房 Standard private room	
<b>I. 住院保障<sup>3</sup> Hospitalization Benefits<sup>3</sup></b>		
1. 住院、膳食及一般护理津贴 Room, Board & General Nursing		
2. 住院医生费 In-Hospital Doctor's Call		
3. 住院专科医生费  In-Hospital Specialist's Consultation	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup>	
4. 特别住院费 (住院杂费) Hospital Special Services (Miscellaneous Hospital Expenses)		
5. 深切治疗  Intensive Care		
6. 住院陪床 <sup>5</sup> Hospital Companion Bed <sup>5</sup>		
7. 私家看护费 <sup>6</sup>  Private Nurse's Fee <sup>6</sup>	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup> (每年90日 90 days per year)	



需由注册医生书面建议

Recommendation by a registered doctor in writing is required

I. 住院保障<sup>3</sup> Hospitalization Benefits<sup>3</sup>

## 8. 住房级别下调现金保障

(适用于入住低于受保病房级别的私家医院房间)

**Room and Board Downgrade Cash Benefit**

(Applicable if the room level is lower than the covered room level in a private hospital)

## 9. 政府住院现金保障

(适用于入住香港 / 澳门政府医院大房级别的房间)

**Government Hospital Cash Benefit**

(Applicable to confinement in a general ward of a public hospital in Hong Kong / Macau)

每日1,800 per day  
(每年60日 60 days per year)

## II. 手术保障 Surgical Benefits

## 10. 外科医生手术费

**Surgeon's Fee**

## 11. 麻醉师费

**Anaesthetist's Fee**

## 12. 手术室租金

**Operating Theatre Fee**

13. 门诊手术<sup>7</sup>

(包括外科医生手术费、麻醉师费、手术室租金、诊症费及药费)

**Outpatient Surgery<sup>7</sup>**

(Including Surgeon's Fee, Anaesthetist's Fee, Operating Theatre Fee, Consultation and Medication)

## 14. 医疗装置

– 指定装置

(起搏器 / 冠状动脉血管成形术(通波仔)的支架 / 眼内人造晶体 / 人工心瓣 / 金属或人工关节置换 / 人工韧带置换或植入 / 人工椎间盘)

**Medical Appliances**

– Designated Appliances

(Pace maker / Stents for percutaneous transluminal coronary angioplasty / Intraocular lens / Artificial cardiac valve / Metallic or artificial joints for joint replacement / Prosthetic ligaments for replacement or implantation between bones / Prosthetic intervertebral disc)

– 非指定医疗装置

Non-designated Medical Appliances

全数赔偿<sup>4</sup>  
Full reimbursement<sup>4</sup>

每年100,000 per year

## 15. 在生捐赠者之移植手术费用

**Living Donor Expenses for Transplantation Surgery**

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

## 16. 门诊手术现金保障

(当第13项亦为同一手术作出赔偿时适用)

**Outpatient Surgery Cash Benefit**

(Applicable when item 13 is payable for the same procedure)

每项手术 1,600 per procedure  
(每年1次 1 procedure per year)

## III. 住院前及出院后保障 Pre- and Post- Hospitalization Benefits

<b>17. 住院前门诊<sup>8</sup></b> <b>Pre-hospitalization Outpatient<sup>8</sup></b> - 门诊咨询 Consultation - 药物 Medication - 诊断测试 Diagnostic Tests	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup> (每日1次 1 visit per day)
<b>18. 出院后门诊<sup>9</sup></b> <b>Post-hospitalization Outpatient<sup>9</sup></b> - 门诊咨询 Consultation - 药物 Medication - 伤口护理 Wound Care - 诊断测试 Diagnostic Tests	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup> (每日1次 1 visit per day)
<b>19. 手术后家中看护<sup>10</sup></b>  <b>Post-surgery Home Nursing<sup>10</sup></b>	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup> (每年120日 120 days per year)
<b>20. 辅助服务<sup>11</sup></b> <b>Ancillary Services<sup>11</sup></b> - 物理治疗师 / 脊骨神经治 疗师 / 言语治疗师 / 职业治疗师 Physiotherapist / Chiropractor / Speech Therapist / Occupational Therapist	每年60,000 per year (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 2,000 per visit (每年30次 30 visits per year)
- 中医师 Chinese Medicine Practitioner	每次 800 per visit (每年20次 20 visits per year)
<b>21. 康复中心及其相关治疗</b>  <b>Rehabilitation Centre &amp; Related Treatment</b>	每年 80,000 per year (每年60日 60 days per year)

## IV. 延伸保障 Extended Benefits

<b>22. 癌症治疗保障</b>  <b>Cancer Treatment Benefit</b> - 化疗 Chemotherapy - 电疗 Radiotherapy - 标靶治疗 Target Therapy - 荷尔蒙治疗 Hormonal Therapy - 免疫治疗 Immunotherapy - 质子重离子疗法 Proton Beam Therapy	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup>
<b>23. 洗肾保障</b>  <b>Renal Dialysis Benefit</b>	
<b>24. 精神疾病治疗保障</b>  <b>Psychiatric Treatment Benefit</b>	每年60,000 per year (每年60日 60 days per year)
<b>25. 善终院舍护理服务<sup>12</sup></b> <b>Hospice Care<sup>12</sup></b>	100,000 (以个人计 per Life)



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

	计划 Plan 1	计划 Plan 2
<b>IV. 延伸保障 Extended Benefits</b>		
26. 人类免疫力缺乏病毒 / 艾滋病治疗保障 <sup>13</sup> <b>HIV / AIDS Treatment Benefit<sup>13</sup></b>		800,000 (以个人计 per Life)
27. 矫形手术保障 (适用于回复身体功能或外观, 或重建乳房) <b>Reconstructive Surgery Benefit</b> (For restoration of function of a body part, appearance, or a breast)		300,000 (每项受保疾病计 per covered illness)
28. 妊娠并发症保障 <sup>14</sup>  <b>Pregnancy Complications Benefit<sup>14</sup></b>		全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup>

<b>V. 全球紧急治疗保障 Worldwide Emergency Treatment Benefit</b>		
29. 意外紧急门诊治疗保障 <sup>15</sup> <b>Emergency Outpatient Treatment Benefit<sup>15</sup></b>		全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup>
30. 意外紧急牙齿治疗保障 <sup>16</sup> <b>Emergency Dental Benefit<sup>16</sup></b>		全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup>

<b>VI. 寿险保障 Life Protection</b>		
31. 身故保障 <b>Death Benefit</b>		80,000

表二: 自选附加保障<sup>17</sup>

Table 2 : Optional Supplementary Benefits<sup>17</sup>

(港元 / 澳门元 HK\$/MOP)

保障 Benefits	保障限额 Benefit Limits
<b>A. 门诊保障 Outpatient Benefit</b>	
门诊咨询 <b>Outpatient Consultation</b>	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup> (每年50次, 每日1次 50 visits per year, 1 visit per day)
诊断程序及化验室测试  <b>Diagnostic Procedures and Laboratory Tests</b>	全数赔偿 <sup>4</sup> Full reimbursement <sup>4</sup>
处方药物  <b>Prescribed Medicines and Drugs</b>	每年100,000 per year
另类治疗 <b>Alternative Treatment</b> - 物理治疗师 / 脊骨神经治疗师 / 中医师 Physiotherapist / Chiropractor / Chinese Medicine Practitioner	每年8,000 per year (每日1次 1 visit per day)
精神疾病治疗保障 <b>Psychiatric Treatment Benefit</b>	每次1,000 per visit (每年10次, 每日1次 10 visits per year, 1 visit per day)
接种疫苗及健康检查 <b>Vaccinations and Health Checkup</b>	每年4,000 per year

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

保障 Benefits	保障限额 Benefit Limits
<b>B. 牙科保障<sup>18</sup> Dental Benefit<sup>18</sup></b>	
例行牙科治疗 Routine Dental Treatment	每年6,000 per year
主要之恢复性治疗 Major Restorative Treatment	每年12,000 per year

保单资料 Policy Information			
	VIP环球医疗保 VIP Worldwide MediCare	门诊保障 Outpatient Benefit	牙科保障 <sup>18</sup> Dental Benefit <sup>18</sup>
保单类别 Plan Type	基本计划 Basic Plan	附加保障 Supplementary Benefit	
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当时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至70岁 Age 0-70		
保障年期 Benefit Term	至100岁 To Age 100	至75岁 To Age 75	
缴付保费年期 Premium Payment Term	至100岁 To Age 100	至75岁 To Age 75	

有关保费详情, 请浏览本公司网页 <https://www.yflife.com/sc/Individual/Protect/Medical/VIP-Worldwide-MediCare>.  
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# YFLife 萬通保險

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万通保险国际有限公司  
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# VIP环球医疗保

## VIP Worldwide MediCare

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

已届年龄 Attained Age	计划 Plan 1 全球 Worldwide				计划 Plan 2 全球 Worldwide (美国除外 excluding USA)			
	每年垫底费 Annual Deductible				每年垫底费 Annual Deductible			
	0	15,000	30,000	60,000	0	15,000	30,000	60,000
0	27,688	18,170	14,844	12,221	18,810	12,109	9,703	7,931
1	27,166	17,833	14,570	11,995	18,459	11,885	9,529	7,790
2	26,665	17,505	14,306	11,780	18,123	11,672	9,361	7,655
3	25,948	17,041	13,931	11,473	17,640	11,366	9,119	7,460
4	25,232	16,577	13,553	11,167	17,158	11,062	8,876	7,264
5	24,516	16,110	13,174	10,857	16,674	10,755	8,633	7,069
6	23,800	15,644	12,797	10,549	16,193	10,450	8,390	6,874
7	23,082	15,179	12,419	10,241	15,709	10,144	8,150	6,678
8	22,885	15,050	12,315	10,155	15,577	10,061	8,083	6,625
9	22,687	14,923	12,211	10,070	15,445	9,975	8,017	6,570
10	22,446	14,765	12,078	9,959	15,283	9,872	7,932	6,500
11	22,250	14,634	11,977	9,874	15,150	9,786	7,866	6,448
12	22,054	14,508	11,871	9,791	15,019	9,703	7,799	6,395
13	21,856	14,380	11,768	9,705	14,886	9,620	7,733	6,341
14	21,659	14,251	11,665	9,623	14,753	9,537	7,666	6,286
15	21,463	14,124	11,561	9,537	14,620	9,451	7,601	6,235
16	21,107	13,891	11,372	9,384	14,382	9,301	7,480	6,135
17	20,753	13,664	11,186	9,232	14,143	9,151	7,361	6,039
18	20,396	13,432	10,999	9,079	13,903	8,999	7,241	5,944
19	20,042	13,203	10,814	8,926	13,664	8,847	7,121	5,847
20	19,906	13,133	10,776	8,914	13,573	8,802	7,097	5,841
21	19,550	12,899	10,588	8,757	13,331	8,648	6,976	5,744
22	19,190	12,665	10,399	8,603	13,091	8,496	6,857	5,643
23	20,491	13,514	11,086	9,167	13,969	9,053	7,295	5,999
24	21,796	14,362	11,776	9,728	14,844	9,607	7,737	6,354
25	23,102	15,210	12,464	10,290	15,725	10,165	8,181	6,712
26	24,404	16,055	13,154	10,856	16,600	10,721	8,620	7,068
27	25,710	16,905	13,841	11,417	17,478	11,277	9,060	7,425
28	27,014	17,752	14,530	11,981	18,354	11,833	9,502	7,781
29	27,874	18,311	14,984	12,352	18,934	12,200	9,793	8,016
30	28,648	18,808	15,378	12,669	19,458	12,527	10,046	8,213
31	29,507	19,365	15,833	13,037	20,037	12,892	10,337	8,450
32	30,365	19,924	16,287	13,407	20,612	13,259	10,626	8,685
33	31,222	20,481	16,738	13,779	21,192	13,624	10,917	8,917
34	31,498	20,660	16,884	13,897	21,375	13,743	11,010	8,995
35	31,774	20,839	17,029	14,015	21,559	13,858	11,103	9,067
36	32,050	21,017	17,172	14,133	21,745	13,976	11,194	9,143
37	32,325	21,196	17,320	14,252	21,930	14,095	11,291	9,218
38	32,599	21,375	17,463	14,371	22,116	14,211	11,382	9,292
39	34,282	22,469	18,352	15,097	23,249	14,927	11,951	9,750
40	35,798	23,439	19,126	15,719	24,267	15,564	12,445	10,145

由 2026/01/01 起生效  
With effect from 2026/01/01

# VIP环球医疗保

## VIP Worldwide MediCare

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

已届年龄 Attained Age	计划 Plan 1 全球 Worldwide				计划 Plan 2 全球 Worldwide (美国除外 excluding USA)			
	每年垫底费 Annual Deductible				每年垫底费 Annual Deductible			
	0	15,000	30,000	60,000	0	15,000	30,000	60,000
41	37,473	24,528	20,010	16,441	25,393	16,278	13,011	10,598
42	39,147	25,614	20,891	17,161	26,522	16,994	13,576	11,055
43	40,822	26,703	21,776	17,883	27,650	17,707	14,143	11,512
44	42,669	27,901	22,747	18,676	28,892	18,492	14,766	12,015
45	44,511	29,097	23,719	19,468	30,132	19,279	15,387	12,516
46	46,353	30,297	24,690	20,260	31,373	20,063	16,011	13,018
47	48,199	31,494	25,662	21,053	32,615	20,850	16,632	13,519
48	50,042	32,693	26,634	21,847	33,856	21,636	17,255	14,022
49	52,389	34,217	27,870	22,858	35,435	22,637	18,046	14,659
50	55,111	36,017	29,369	24,107	37,267	23,818	19,007	15,453
51	57,475	37,553	30,618	25,127	38,857	24,824	19,806	16,098
52	59,834	39,088	31,863	26,146	40,449	25,833	20,606	16,740
53	62,197	40,624	33,111	27,166	42,037	26,841	21,405	17,388
54	65,802	42,965	35,014	28,722	44,464	28,379	22,624	18,371
55	69,407	45,309	36,917	30,277	46,889	29,915	23,844	19,356
56	73,010	47,651	38,823	31,833	49,316	31,452	25,062	20,339
57	76,616	49,995	40,725	33,388	51,741	32,990	26,282	21,326
58	80,221	52,337	42,628	34,946	54,169	34,528	27,501	22,310
59	86,171	56,207	45,771	37,514	58,172	37,067	29,512	23,933
60	92,261	60,175	49,002	40,160	62,272	39,668	31,583	25,606
61	98,221	64,049	52,150	42,734	66,283	42,212	33,599	27,234
62	104,182	67,922	55,299	45,306	70,294	44,755	35,616	28,862
63	110,140	71,797	58,448	47,880	74,305	47,295	37,632	30,489
64	117,127	76,343	62,139	50,896	79,008	50,275	39,997	32,398
65	124,191	80,934	65,871	53,947	83,760	53,289	42,387	34,329
66	131,180	85,476	69,562	56,966	88,464	56,271	44,752	36,236
67	138,241	90,067	73,291	60,013	93,219	59,281	47,142	38,165
68	145,231	94,613	76,985	63,031	97,923	62,264	49,506	40,074
69	150,294	97,904	79,658	65,219	101,329	64,424	51,218	41,458
70	153,385	99,749	80,984	66,168	103,400	65,625	52,057	42,046
*71	158,403	103,008	83,626	68,324	106,779	67,763	53,749	43,411
*72	163,406	106,253	86,259	70,470	110,144	69,893	55,435	44,767
*73	168,333	109,451	88,853	72,587	113,463	71,989	57,095	46,105
*74	174,185	113,250	91,933	75,099	117,402	74,485	59,068	47,695
*75	180,020	117,036	95,004	77,603	121,328	76,968	61,034	49,280
*76	185,855	120,822	98,075	80,110	125,254	79,453	63,001	50,864
*77	191,707	124,624	101,153	82,621	129,191	81,944	64,973	52,451
*78	197,541	128,409	104,224	85,129	133,118	84,429	66,939	54,037
*79	204,443	132,891	107,858	88,091	137,766	87,370	69,266	55,911
*80	206,580	134,274	108,977	89,001	139,198	88,273	69,980	56,484
*81	213,330	138,653	112,528	91,899	143,742	91,146	72,253	58,315

\* 只适用于续保 For Renewal Only

由 2026/01/01 起生效  
With effect from 2026/01/01

# VIP环球医疗保

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	每年垫底费 Annual Deductible				每年垫底费 Annual Deductible			
	0	15,000	30,000	60,000	0	15,000	30,000	60,000
*82	220,010	142,990	116,045	94,767	148,236	93,991	74,505	60,129
*83	226,671	147,313	119,549	97,628	152,720	96,825	76,751	61,938
*84	234,606	152,465	123,729	101,033	158,060	100,207	79,425	64,093
*85	242,475	157,572	127,868	104,412	163,354	103,557	82,077	66,228
*86	250,340	162,677	132,008	107,789	168,649	106,908	84,727	68,366
*87	258,207	167,782	136,146	111,165	173,943	110,255	87,378	70,501
*88	266,072	172,888	140,288	114,543	179,237	113,606	90,031	72,637
*89	275,338	178,902	145,163	118,521	185,472	117,550	93,154	75,151
*90	279,428	181,555	147,313	120,271	188,223	119,288	94,526	76,256
*91	288,473	187,425	152,074	124,157	194,309	123,141	97,575	78,713
*92	297,572	193,331	156,860	128,063	200,432	127,014	100,640	81,184
*93	306,670	199,236	161,649	131,966	206,555	130,887	103,708	83,651
*94	314,757	204,484	165,905	135,440	211,998	134,333	106,434	85,850
*95	322,845	209,736	170,162	138,912	217,443	137,776	109,159	88,044
*96	330,917	214,975	174,411	142,378	222,873	141,214	111,878	90,236
*97	339,074	220,270	178,703	145,881	228,365	144,687	114,630	92,453
*98	347,164	225,519	182,961	149,352	233,807	148,132	117,355	94,649
*99	357,563	232,270	188,432	153,817	240,806	152,559	120,860	97,472

\* 只适用于续保 For Renewal Only

# 门诊保障 Outpatient Benefit

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

已届年龄 Attained Age	计划 Plan 1 全球 Worldwide	计划 Plan 2 全球 Worldwide (美国除外 excluding USA)	已届年龄 Attained Age	计划 Plan 1 全球 Worldwide	计划 Plan 2 全球 Worldwide (美国除外 excluding USA)	已届年龄 Attained Age	计划 Plan 1 全球 Worldwide	计划 Plan 2 全球 Worldwide (美国除外 excluding USA)
0	40,674	27,116	34	40,500	27,001	68	210,741	140,495
1	40,674	27,116	35	43,240	28,827	69	220,283	146,856
2	40,674	27,116	36	44,838	29,895	70	230,207	153,473
3	40,674	27,116	37	46,399	30,933	*71	239,749	159,834
4	28,771	19,181	38	47,995	31,998	*72	249,293	166,197
5	28,771	19,181	39	49,036	32,693	*73	258,799	172,535
6	28,771	19,181	40	50,460	33,641	*74	269,940	179,961
7	28,771	19,181	41	51,497	34,333	*75	281,044	187,364
8	28,771	19,181	42	52,574	35,050	*76	292,147	194,766
9	28,771	19,181	43	53,615	35,745	*77	303,287	202,193
10	28,771	19,181	44	56,289	37,527	*78	314,390	209,593
11	28,771	19,181	45	59,375	39,585	*79	327,194	218,130
12	28,771	19,181	46	62,049	41,366	*80	332,444	221,631
13	28,771	19,181	47	64,719	43,147	*81	345,000	229,999
14	28,771	19,181	48	67,391	44,930	*82	357,519	238,346
15	28,771	19,181	49	72,736	48,491	*83	370,036	246,693
16	28,771	19,181	50	78,428	52,287	*84	384,356	256,239
17	28,771	19,181	51	83,736	55,824	*85	398,639	265,761
18	26,413	17,608	52	89,046	59,366	*86	412,956	275,307
19	26,444	17,630	53	94,355	62,903	*87	427,242	284,829
20	26,515	17,677	54	99,143	66,097	*88	441,562	294,375
21	26,552	17,702	55	104,730	69,821	*89	457,746	305,164
22	26,584	17,723	56	109,520	73,014	*90	465,346	310,232
23	27,729	18,486	57	114,309	76,206	*91	481,236	320,825
24	28,876	19,251	58	119,097	79,399	*92	497,159	331,441
25	30,022	20,014	59	124,961	83,307	*93	513,049	342,034
26	31,128	20,754	60	131,206	87,472	*94	530,939	353,960
27	32,277	21,518	61	137,069	91,381	*95	548,792	365,862
28	33,422	22,282	62	142,902	95,269	*96	566,681	377,788
29	33,769	22,513	63	148,763	99,177	*97	584,571	389,716
30	37,897	25,266	64	155,777	103,851	*98	602,427	401,618
31	38,244	25,497	65	186,519	124,347	*99	620,500	413,667
32	38,593	25,729	66	194,604	129,738			
33	38,902	25,936	67	202,689	135,128			

\* 只适用于续保 For Renewal Only

# 牙科保障 Dental Benefit

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

已届年龄 Attained Age	计划 Plan 1 全球 Worldwide	计划 Plan 2 全球 Worldwide (美国除外 excluding USA)
0 - 70		8,873
71 - 74 (只适用于续保 For Renewal Only)		8,873

由 2026/01/01 起生效  
With effect from 2026/01/01