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Hospitalization & Surgical Expenses Benefit

If as a result of Injury or Sickness, an Insured is necessarily confined in a Hospital, the Company will reimburse the amount of actual necessary and reasonable expenses incurred but not to exceed the maximum amounts and the stipulated Reimbursement Percentage indicated in the Schedule of Benefits below.

Benefits Category	Benefit Items	Maximum Benefit Amount (HKD)	Maximum No. of Visits (Days)	Reimbursement Percentage
HS	Daily Hospital Room & Board (per daily benefit limit, maximum number of days per Disability)	400	182	100
	Daily Doctor's Visit (1 visit/day, per daily benefit limit, maximum number of visits per Disability) (Including 1 visit of Pre-Hospitalization Out-patient Benefit) (Including Post Hospitalization Out-patient Benefit within 6 weeks after discharge from Hospital)	400	91	100
	Miscellaneous Hospital Expenses (per Disability overall limit)	3,800		100
	Surgical Fees			
	▶ Complex Operation	23,200		100
	▶ Major Operation	11,600		100
	▶ Intermediate Operation	5,800		100
	▶ Minor Operation	2,900		100
	(per Disability overall limit, subject to Surgical Schedule)			
	Anaesthetist's Fees			
	▶ Complex Operation	6,960		100
	▶ Major Operation	3,480		100
	▶ Intermediate Operation	1,740		100
	▶ Minor Operation	870		100
	(per Disability overall limit, subject to Surgical Schedule)			
	Operating Theatre Fees			
	▶ Complex Operation	6,960		100
	▶ Major Operation	3,480		100
	▶ Intermediate Operation	1,740		100
	▶ Minor Operation	870		100
	(per Disability overall limit, subject to Surgical Schedule)			
	Intensive Care Room & Board (per Disability overall limit)	4,800		100
	Private Nursing (per daily benefit limit, maximum number of days per Disability) (Subject to written referral by a Physician)	160	91	100

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Benefits Category	Benefit Items	Maximum Benefit Amount (HKD)	Maximum No. of Visits (Days)	Reimbursement Percentage
HS	Daily Hospital Cash Benefit (for government ward bed only) (in lieu of the Daily Hospital Room and Board Benefit) (per daily benefit limit, maximum number of days per Disability)	200	182	100
	Hospital Income for Coordination of Benefit (per daily benefit limit, maximum number of days per Disability)	200	182	100
	Clinical Surgery Cash Allowance Applicable when the following procedure is performed in a day surgery center: gastroscopy (including esophagogastroduodenoscopy) / colonoscopy / cystoscopy / arthroscopy / colposcopy / bronchoscopy (per daily benefit limit, maximum number of days per Disability)	400	1	100
	Compassionate Death (for employees only)	10,000		100

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Major Medical Benefit

If as a result of Injury or Sickness, an Insured is necessarily confined in a Hospital for which benefits are payable under the Hospitalization & Surgical Expenses Benefit, the Company will reimburse the Insured up to the maximum amounts indicated in the Schedule of Benefits below, the stipulated Reimbursement Percentage of eligible excess hospital expenses which remain after the Maximum Benefits under the Hospitalization & Surgical Expenses Benefit have been exhausted for that Disability and after deduction of the Deductible amount indicated in the Schedule of Benefits below. If the Insured is confined to a higher level of Hospital facilities and services than that the Insured is entitled to, the respective Adjustment Factor will be applied.

Benefits Category	Benefit Items	Maximum Benefit Amount (HKD)	Maximum No. of Visits (Days)	Reimbursement Percentage
MM	Major Medical (per Disability overall limit) (reimbursement % depending on accommodation levels)	25,000		80
	Deductible per Disability	0		
	Entitled level of hospital accommodation	Ward		

Notes:

1. The reimbursement percentage in respect of the benefits stated shall be a percentage of the actual expenses incurred. Such percentage shall be the amount stated under each benefit item above.
2. Any Referral Letter issued by a Physician shall be valid for 6 months from the date of issuance, unless otherwise stated.
3. The details of the Adjustment Factor is shown as below:

Ward to Semi-Private:	50%
Ward to Private:	25%
Ward to Deluxe:	12.5%
Semi-Private to Private:	50%
Semi-Private to Deluxe:	25%
Private to Deluxe:	50%