



A New Altitude

In Health Protection

vPrime Medical Plan

is a Flexi Plan certified by the Hong Kong Special Administrative Region Government under the Voluntary Health Insurance Scheme ("VHIS") (Certification Number: F00045)

vPrime Medical Plan

Success brings with it ever greater responsibility. To prepare yourself for the ups and downs, highs and lows on your extraordinary life journey, what you need is a comprehensive and transparent medical insurance plan. vPrime Medical Plan (“the Plan”), certified by the Hong Kong Special Administrative Region Government (“Government”), is designed to take protection against the unexpected up a notch. For medical costs arising from the whole treatment journey from pre-Confinement to rehabilitation, the Plan offers full cover¹ for hospitalisation and surgical expenses without itemised benefit limits. To take the best care of you, a professional team selects and arranges the medical treatments that suit your needs as part of the ancillary services. Apart from accompanying you during tough times, this Plan offers wellness incentives for staying healthy and extra discounts for multiple purchases on top of tax savings² to protect you and your loved ones at a prime level.

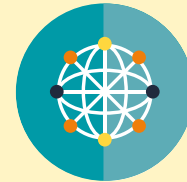
Key Features of vPrime Medical Plan



Full Cover¹ for Hospitalisation and Surgical Expenses, up to HKD8 million per Policy Year



Guaranteed Renewable Prime Protection up to Age 100



Covers Unknown Pre-existing Conditions Starting from the 31st Day



Broadening the Safety Net



Extra Support for Stroke Rehabilitation



Boosted Flexibility with a Variety of Deductible³ Options



Wellness Incentives for You and Your Loved Ones to Stay in Shape



Tax Savings²

Add-On Features



First-dollar Coverage - Deductible³ Waived for Designated Crises^{4,5}



Protecting your precious Newborns^{4,6}



Professional Medical Assistance Services^{4,7} for all-round care



Full Cover¹ for Hospitalisation and Surgical Expenses, up to HKD8 million per Policy Year

As peace of mind is one of life's true luxuries, the Plan provides full cover¹ on medical expenses incurred for hospitalisation and surgery. With no itemised benefit limits to restrict its reimbursement amount, the Plan entitles you to reimbursements of the Eligible Expenses up to HKD8,000,000 per Policy Year and up to HKD45,000,000 per life.

In addition, whenever and wherever you require Emergency medical attention, the Plan will offer full cover¹ on the eligible medical expenses, including Emergency outpatient accidental treatment and Emergency outpatient dental treatment⁸. No matter how far you are from home, you are always close to the help you need.



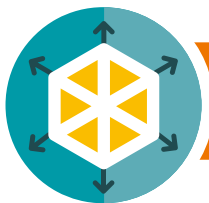
Guaranteed Renewable Prime Protection up to Age 100

The Plan is guaranteed Renewable until you reach the Age of 100 (attained age), so you can simply focus on reaching new heights, secure in the knowledge that you are protected by medical privileges throughout the years.



Covers unknown Pre-existing Conditions Starting from the 31st Day

Any illness, Disease or Congenital Condition⁹ that was an unknown Pre-existing Condition at the time of Application is also fully covered by the Plan from the 31st day of the Policy Effective Date. So even if you do not know about a Pre-existing Condition, your claim will still be reimbursable in full.



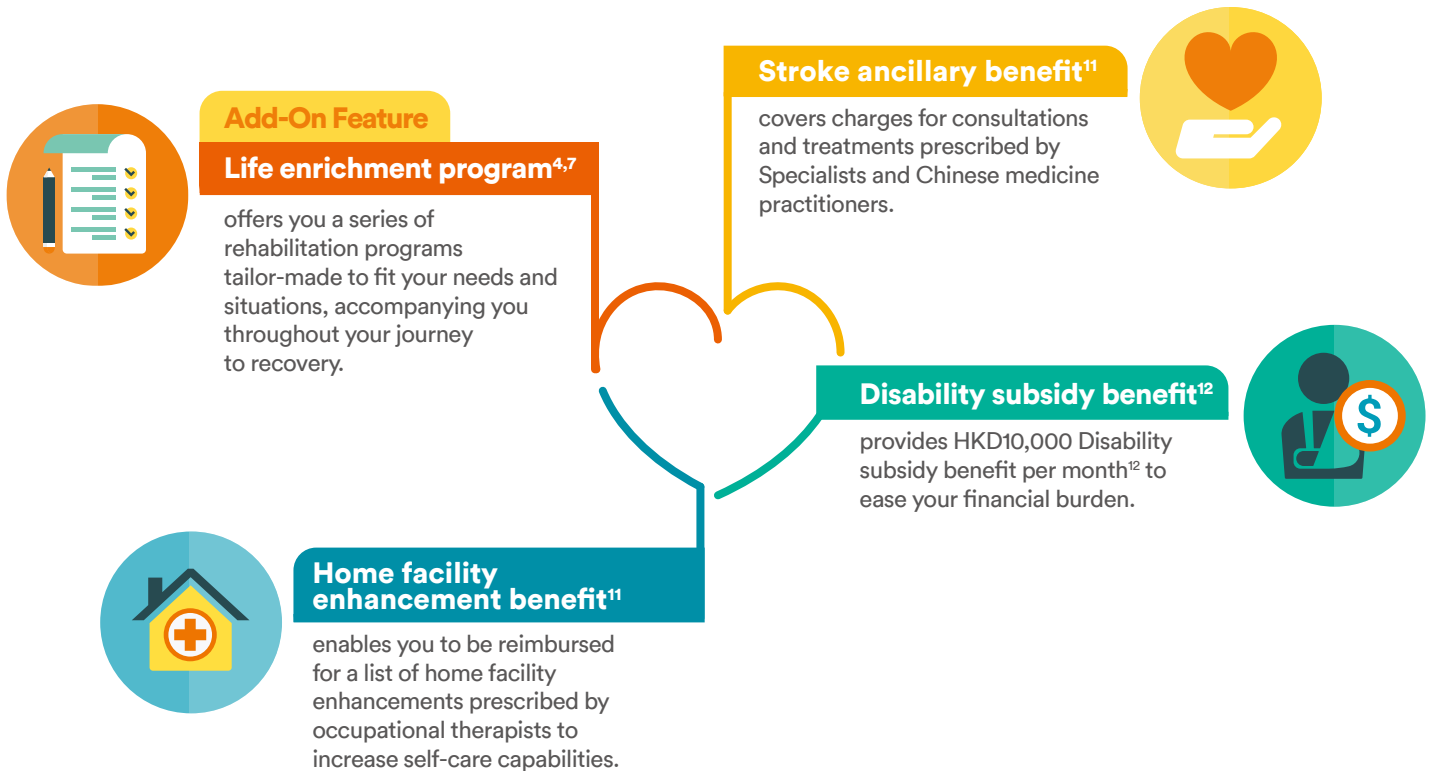
Broadening the Safety Net

Unlike other plans that may limit the benefit amounts for some medical services that are prolonged and costly, the Plan provides full cover¹ for Prescribed Non-surgical Cancer Treatments¹⁰ as well as kidney dialysis¹¹, including the rental cost of a kidney dialysis machine for use at home. The Plan's enhanced safety net also means you are protected against the costs of private nursing care, reconstructive surgery, medical appliances necessitated by reconstructive surgery, organ transplantation, etc.



Extra Support for Stroke Rehabilitation

To help speed up recovery from Stroke and minimize potentially harmful consequences, the Plan offers a series of rehabilitation programs and thoughtful benefits to meet your needs.



Boosted Flexibility with a Variety of Deductible³ Options

The Plan makes available 4 Deductible³ options, allowing you to specify the Coinsurance for medical treatment with flexibility. In addition, when your Policy has been in force for at least 2 consecutive years, you will be entitled to the right to reduce or remove your Deductible³ once per policy when you reach the Age of 50, 55, 60, 65, 70, 75 or 80 (attained age) without providing further proof of your health condition. You can rest assured that your varying needs at different life stages will be well catered for.



Wellness Incentives for You and Your Loved Ones to Stay in Shape

Individual No Claims Premium Discount

If you haven't made any claim for 2 or more consecutive Policy Years prior to Renewal, this Plan will offer you a discount of up to 15% on your next Renewal premium regardless of your Age to encourage you to stay healthy. No claims premium discounts apply as follows:

No claims period immediately prior to Policy's Renewal	No claims premium discount (Discount rate on Renewal premium)
2 consecutive Policy Years	10%
3 consecutive Policy Years	10%
4 consecutive Policy Years	10%
5 or more consecutive Policy Years	15%

Extra No Claims Premium Discount

For the policies you hold as Policy Holder with your loved ones as Insured Persons, this Plan offers an extra no claims premium discount on Renewal premiums if you and your loved ones haven't made any claim for 2 or more consecutive Policy Years prior to Renewal. The more Insured Persons who stay healthy, the greater the discount you can enjoy.

Number of in-force vPrime Medical Plan policies issued to the Policy Holder which are also eligible for the above individual no claims premium discount on the Renewal Date	Extra no claims premium discount under your Policy (Discount rate on Renewal premium)
2 or 3	2.5%
4	5%
5 or above	10%



Tax Savings²

The Plan has been formulated to meet all Government regulatory standards to protect your benefits. If you are a Hong Kong taxpayer, the premiums you pay for yourself and your specified relatives are tax-deductible up to HKD8,000 per Insured Person per assessment year.

Specified relatives include:

- The spouse and children of the taxpayer
- Grandparents of the taxpayer or the spouse
- Parents of the taxpayer or the spouse
- Siblings of the taxpayer or the spouse

Example: Premiums paid by a Policy Holder (Taxpayer) for multiple policies of a Certified Plan for himself and his specified relatives

Insured Person	Annual premium payment (based on the Insured Person's attained age and the selected plan level) (HKD)	Annual tax deduction (annual deduction ceiling: HKD8,000 per Insured Person) (HKD)	Tax Savings ² (Assuming a tax rate of 15%) (HKD)
Policy Holder (Taxpayer)	8,000	8,000	4,950
Spouse	7,000	7,000	
Son	2,000	2,000	
Father	9,000	8,000	
Grandmother	13,000	8,000	
Total	39,000	33,000	



Add-On Feature

First-dollar Coverage - Deductible³ Waived for Designated Crises^{4,5}

If you are ever diagnosed with a designated crisis, the Deductible³ will be waived under first-dollar coverage – Deductible³ waived for designated crises^{4,5} to lighten your financial burden and let you focus on your treatment and recovery.



Add-On Feature

Protecting your precious Newborns^{4,6}

The Plan's coverage is so comprehensive, it even extends to the newest member of your family. Your baby will be born into the protection of a designated medical plan, effective for two years at no extra cost, if your Policy has been in force for 2 consecutive Policy Years. This benefit applies to each newborn once only, but there is no limit to the number of eligible newborns.



Add-On Feature

Professional Medical Assistance Services^{4,7} for all-round care

The Plan puts your wellbeing at the centre of an international network of expertise and capabilities. Whenever you require information or assistance, we are always ready to help with our professional medical assistance services:

- PREMIER THE ONEcierge for exclusive healthcare solutions with cashless facility tailor-made to suit your needs
- Second Medical Opinions from top-ranked US medical institutions
- International SOS 24-hour Worldwide Assistance Service

The product information in this brochure does not contain the full terms of the Policy and the full terms can be found in the Policy document.

Feature Comparison of Our VHIS Plans

	vCore Medical Plan – Standard Plan	vCare Medical Plan – Flexi Plan	vCare Supreme Medical Plan – Flexi Plan	vPrime Medical Plan – Flexi Plan
Key Features				
Guaranteed Renewable up to Age 100	✓	✓	✓	✓
Covers Unknown Pre-existing Conditions	✓	✓	✓	✓
Tax Savings ²	✓	✓	✓	✓
Simplified Application	✓	✓		
Emergency Outpatient Dental Treatment ⁸		✓	✓	✓
Cash Benefits for Day Case Procedure and Top-up Subsidy ¹³		✓	✓	✓
Cash Benefit for Room and Board Confinement below Entitled Ward Class in a Private Hospital in Hong Kong ¹⁴				✓
Adjustable Deductible ³				✓
Wellness Incentive for You and Your Loved Ones	✓	✓	✓	✓
Enhanced Benefits				
Emergency Outpatient Accidental Treatment			✓	✓
Outpatient Kidney Dialysis ¹¹			✓	✓
Rehabilitation Treatment ¹¹			✓	✓
Hospice Care			✓	✓

Feature Comparison of Our VHIS Plans

	vCore Medical Plan – Standard Plan	vCare Medical Plan – Flexi Plan	vCare Supreme Medical Plan – Flexi Plan	vPrime Medical Plan – Flexi Plan
Enhanced Benefits				
Post-Confinement Home Nursing ¹¹			✓	✓
Companion Bed			✓	✓
Post-Confinement/Day Case Procedure Chinese Medicine Treatment			✓	✓
Reconstructive Surgery Benefit ¹¹ and Medical Appliances Benefit for Reconstructive Surgery				✓
Donor's Benefit ¹⁵				✓
Stroke Rehabilitation Treatment				✓
Private Nurse's Fee ¹¹				✓
Additional Benefit for Prescribed Non-surgical Cancer Treatment ¹⁰ and Kidney Dialysis ^{11,16}			✓	
Supplementary Major Medical Benefit ¹⁷			✓	
Add-On Features⁴				
Professional Medical Assistance Services ^{4,7}	✓	✓	✓	✓
Option to Upgrade ^{4,18}	✓	✓		
Protection for Newborns ^{4,6}		✓	✓	✓

vCore Medical Plan (VHIS Plan Certification Number: S00036-01-000-01), vCare Medical Plan (VHIS Plan Certification Number: F00015-01-000-01), vCare Supreme Medical Plan (VHIS Plan Certification Number: F00032-01-000-02) and vPrime Medical Plan (VHIS Plan Certification Number: F00045) are certified by the Government under the Voluntary Health Insurance Scheme.

For more details about vCore Medical Plan, vCare Medical Plan and vCare Supreme Medical Plan, please contact your insurance intermediary or visit our corporate website fwd.com.hk for the relevant product brochures.

vPrime Medical Plan – General Information

Plan type	Standalone Plan
Issue age	Age 0 (from 15 days) – 80 (attained age)
Benefit term	Guaranteed yearly Renewable to Age 100 (attained age)
Premium structure	<ul style="list-style-type: none"> Based on Insured Person's attained age at issue Renewal premium are non-guaranteed and will be increased yearly according to the Insured Person's attained age at the time of Renewal
Premium payment term	To Age 100 (attained age)
Premium payment mode	Monthly / Semi-annually / Annually
Currency	HKD
Deductible ³ options and certification numbers	HKD0 Deductible: F00045-01-000-01 HKD16,000 Deductible: F00045-02-000-01 HKD25,000 Deductible: F00045-03-000-01 HKD50,000 Deductible: F00045-04-000-01

vPrime Medical Plan – Benefit Schedule^{19,20,21}

Geographical limitation ²²	Except for psychiatric treatments and cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong – For non-Emergency Treatment: Asia ²³ For Emergency Treatment: Worldwide
Annual Benefit Limit for benefit items (a) - (l) of I. Basic benefits, 1 - 12 of II. Enhanced benefits and 3 - 6 of III. Other benefits	HKD8,000,000 per Policy Year
Lifetime Benefit Limit for benefit items (a) - (l) of I. Basic benefits, 1 - 12 of II. Enhanced benefits and 3 - 6 of III. Other benefits	HKD45,000,000
Deductible ³ for benefit items (a) - (l) of I. Basic benefit, 1 - 6, 7(a), 7(b) and 8 - 12 of II. Enhanced benefits and 3 of III. Other benefits	HKD0/16,000/25,000/50,000 per Policy Year
Entitled ward class	Confinement in Hong Kong, Macau or Mainland China: Standard Semi-private Room ²⁴ Confinement in Asia ²³ (excluding Hong Kong, Macau and Mainland China) or Confinement outside Asia ²³ for Emergency Treatment: Standard Private Room ²⁴
Benefit items	Benefit limit
I. Basic benefits	
(a) Room and board	Full cover ¹
(b) Miscellaneous charges	Full cover ¹
(c) Attending doctor's visit fee	Full cover ¹
(d) Specialist's fee ¹¹	Full cover ¹
(e) Intensive care	Full cover ¹
(f) Surgeon's fee	Full cover ¹ regardless of the surgical category
(g) Anaesthetist's fee	Full cover ¹
(h) Operating theatre charges	Full cover ¹

vPrime Medical Plan – Benefit Schedule^{19,20,21}

Benefit items	Benefit limit	
I. Basic benefits		
(i) Prescribed Diagnostic Imaging Tests ^{11,25}	Full cover ¹	
(j) Prescribed Non-surgical Cancer Treatments ¹⁰	Full cover ¹	
(k) Pre- and post-Confinement/ Day Case Procedure outpatient care ¹¹	Full cover ¹ <ul style="list-style-type: none"> • 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure • 6 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure) 	
(l) Psychiatric treatments ²⁶	HKD40,000 per Policy Year	
II. Enhanced benefits		
1. Reconstructive surgery benefit ¹¹	HKD160,000 per Accident/mastectomy	
2. Medical appliances benefit for reconstructive surgery	HKD96,000 each item per Policy Year	
3. Donor's benefit ¹⁵	30% of total transplantation cost (For transplantation of heart, kidney, liver, lung or bone marrow)	
4. Emergency outpatient accidental treatment	Full cover ¹	
5. Outpatient kidney dialysis ¹¹	Full cover ¹	
6. Rehabilitation treatment ¹¹	HKD100,000 per Policy Year	
7. Stroke rehabilitation treatment	a) Home facility enhancement benefit ¹¹	HKD80,000 per Incident
	b) Stroke ancillary benefit ¹¹	HKD1,000 per visit Maximum 30 visits per Policy Year, subject to 1 visit per day and HKD100,000 per Incident
	c) Disability subsidy benefit ¹²	HKD10,000 per month Maximum 24 months per Incident
8. Hospice care	HKD100,000 per Policy Year	
9. Private nurse's fee ¹¹	Full cover ¹ Maximum 30 days per Policy Year, subject to services provided by 1 Registered Nurse per day	
10. Post-Confinement home nursing ¹¹	Full cover ¹ Maximum 196 days per Policy Year, within 196 days after discharge from Hospital following surgery or admission to Intensive Care Unit, subject to services provided by 1 Registered Nurse per day	
11. Companion bed	Full cover ¹	
12. Post-Confinement/Day Case Procedure Chinese medicine treatment	HKD600 per visit Maximum 15 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure), but is subject to 1 follow-up outpatient visit per day	
III. Other benefits		
1. Death benefit ²⁷	HKD40,000	
2. Accidental death benefit ²⁷	HKD40,000	
3. Emergency outpatient dental treatment ⁸	Full cover ¹	
4. Cash benefit for Day Case Procedure	HKD1,600 per procedure Maximum 1 Day Case Procedure per day	
5. Cash benefit for top-up subsidy ¹⁵	HKD800 per day of Confinement Maximum 60 days per Policy Year	
6. Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong ¹⁴	HKD1,600 per day of Confinement Maximum 30 days per Policy Year	

Remarks:

1. Full cover shall mean no itemised benefit sublimit, the actual amount of Eligible Expenses and other expenses charged after deducting the remaining Deductible (if any) and is subject to the Annual Benefit Limit and the Lifetime Benefit Limit. Full cover applies to selected benefit items only, while other benefit items are not fully covered and are subject to respective benefit item's limits. Please refer to Benefit Schedule and Policy provisions for details.
2. If you are a Hong Kong taxpayer, you are eligible for tax deduction up to HKD8,000 per Insured Person from the premium paid for yourself and your specified relatives. The proof of premium payment is issued to you on or before end of April every year for the premium paid during the preceding 12 months ending March of the same year. There is no cap on the number of specified relatives who are eligible for tax deduction. Tax deduction is applicable for Hong Kong only and shall be subject to the Inland Revenue Ordinance (Cap.112) and the Government's policy as applicable from time to time. FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) ("FWD") and its intermediaries do not provide tax advice and you should consult your own tax advisors for any tax advice. For details, please refer to the websites of Inland Revenue Department of Hong Kong (www.ird.gov.hk/eng/) and Voluntary Health Insurance Scheme (www.vhis.gov.hk/en/).

Specified Relative	Conditions
Parent or Grandparent (Including parent and grandparent of the spouse)	1) Aged 55 (attained age) or more; or 2) under the Age of 55 (attained age) but eligible to claim an allowance under the Government's Disability Allowance Scheme
Child or Sibling (Including sibling of the spouse)	1) under the Age of 18 (attained age); or 2) Aged 18 or more but under the Age of 25 (attained age) and receiving full time education at a university, college, school or other similar educational establishment; or 3) Aged 18 or more but incapacitated for work by reason of physical or mental disability

3. Deductible shall mean a fixed amount of Eligible Expenses or expenses that, in a Policy Year, the Policy Holder must pay before FWD shall reimburse the remaining Eligible Expenses or remaining expenses.
4. This benefit/service is optional and does not form part of the Terms and Benefits of the VHIS Certified Plan - vPrime Medical Plan (Certification Number: F00045-01-000-01 for Deductible HKD0, F00045-02-000-01 for Deductible HKD16,000, F00045-03-000-01 for Deductible for HKD25,000, F00045-04-000-01 for Deductible HKD50,000). You have the right to opt-out this benefit/service. Please inform FWD in writing if you do not want to receive this free additional benefit/service.
5. Only applicable to the policy with Deductible and subject to the Annual Benefit Limit and Lifetime Benefit Limit. The designated crises include Cancer, Cardiomyopathy, Chronic Liver Disease, Coronary Artery Disease Surgery, End Stage Lung Disease, Fulminant Hepatitis, Heart Attack, Heart Valve Surgery, Kidney Failure, Major Organ Transplantation, Parkinson's Disease, Primary Pulmonary Arterial Hypertension, Severe Rheumatoid Arthritis, Stroke, Surgery to Aorta and Terminal Illness. FWD shall not waive the payment of any balance of Deductible if the medical service is related to a designated crisis whose symptoms appear or relevant diagnosis or surgery occurs within the first 90 days from the Policy Effective Date. Please refer to the Policy provisions for the details and definition of designated crises.
6. This additional benefit is available if the Insured Person or Insured Person's spouse gives birth to a child after the Policy has been in force for 2 consecutive Policy Years from the Policy Effective Date ("Covered Child"). Two years coverage by a designated medical insurance plan for the Covered Child shall be offered without further evidence of insurability and at no additional charge.

Once the coverage for the Covered Child is in effect and if the Covered Child suffers from Disability during the coverage period, FWD shall pay the Policy Holder the benefits based on the terms and benefits of the designated medical insurance plan. The benefit amount shall not be deducted from this Policy and shall not affect the coverage available to the Insured Person under this Policy.

For more details, please refer to the Policy provisions.
7. PREMIER THE ONEcierge, Second Medical Opinion Services, International SOS 24-hour Worldwide Assistance Services and Life Enrichment Program are provided by third party service provider(s) which are not guaranteed renewable. FWD reserves the right to amend, suspend or terminate the service without further notice. For details of the services, please refer to the leaflet of FWD Professional Medical Assistance Services.
8. This benefit is payable for the Reasonable and Customary charges of Emergency Treatment of the Insured Person's sound natural teeth solely as a direct result of an Injury, if such treatment is provided within 3 months of the Accident causing such Injury by a registered dentist in a legally registered dental clinic. For more details of this benefit, please refer to the Policy provisions.
9. Congenital Condition is only covered for condition which has manifested or been diagnosed after the Age of 8 (attained age) of the Insured Person.
10. Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
11. FWD shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
12. Disability subsidy benefit shall be payable up to maximum 24 months per Incident.
13. For the Insured Person covered by any other hospital reimbursement plans offered by a licensed insurance company other than FWD, regardless of whether it is an individual or group policy, if the Eligible Expenses incurred for any Confinement of the Insured Person are payable under this Policy after any reimbursement has been paid by such other licensed insurance companies, this benefit shall be payable for each day of Confined period in Hospital, subject to the limits as specified in the Benefit Schedule.
14. This benefit shall be payable in the amount as specified in the Benefit Schedule for each day when the Insured Person is Confined in a room of a private Hospital in Hong Kong where the ward class is below the entitled ward class as specified in the Benefit Schedule during the whole Confinement period.
15. Donor's benefit shall be payable up to 30% of the total transplantation cost (the sum of the surgical expenses charged for removing the organ or bone marrow from the donor and the Eligible Expenses of the surgical procedure performed on the Insured Person as a recipient) for the transplantation of heart, kidney, liver, lung or bone marrow.
16. For details, please refer to Section (H) of Part 1 of the Supplement – Enhanced benefits under vCare Supreme Medical Plan policy provisions.
17. For details, please refer to Section (I) of Part 1 of the Supplement – Enhanced benefits under vCare Supreme Medical Plan policy provisions.
18. This option is only applicable if vCore Medical Plan or vCare Medical Plan policy has been in force for 2 Policy Years or above and the application shall be subject to the designated medical insurance plan with higher protection coverage available at that time and such terms and conditions as determined by FWD from time to time.
19. Unless otherwise specified, the Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
20. The benefit coverage, benefit amount and benefit limits, territorial scope of cover, choice of healthcare services provider, choice of ward class, Deductible and Coinsurance of this Plan will remain unchanged even if the Policy Year lasts for less than 12 months.
21. Except for the cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong as stated in Section 6 of the Supplement – Other benefits under the Policy provisions, all benefits described in these Terms and Benefits are not subject to any restriction in the choice of health care services providers, including but not limited to Registered Medical Practitioner and Hospital.

The benefit described in the cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong as stated in Section 6 of the Supplement – Other benefits under the Policy provisions is subject to the restriction in the choice of healthcare services providers as stated in Section 6 of the Supplement – Other benefits and the Benefit Schedule under the Policy provisions. Such restriction shall not apply to the terms and benefits within the scope of the Standard Plan Terms and Benefits. For the avoidance of doubt, the applicable Standard Plan Terms and Benefits shall be the version as is referred to under Sections 1(a), (b) or (c) of Part 4 of the Terms and Benefits under the Policy provisions.
22. Eligible Expenses incurred for any non-Emergency Treatments performed outside Asia shall be payable up to the benefit limits as stated in the benefit schedule attached to the Standard Plan Terms and Benefits. Psychiatric treatments and cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong shall only be payable for Confinement in Hong Kong. Please refer to Section 1 of Part 1 of the Supplement – Limitation of benefits under the Policy provisions for details.
23. Asia shall include Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, Mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
24. Standard Semi-private Room shall mean a single or double occupancy room in a Hospital, with a shared bath or shower room. Standard Private Room shall mean a standard single occupancy room with an adjoining bathroom for the Insured Person's use during his or her Confinement, but does not include any Hospital room that has its own kitchen, dining or sitting room.
25. Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
26. This benefit shall be payable for the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist. The benefit shall be payable in lieu of other benefit items under (a) to (k) of I. Basic benefits in the Benefit Schedule.
27. The Policy Holder may change the beneficiary of this Policy or the Policy Holder while it is in force by submitting a written request to FWD. FWD shall register the change in its records when FWD determines that all relevant information has been received, from which time the change shall be effective (irrespective of whether the Insured Person is alive on that date).

Important Notes and Declarations

- a) FWD reserves the right to revise, modify or adjust the Terms and Benefits under the Policy subject to the prior approval and re-certification by the Food and Health Bureau. FWD also reserves the right to adjust the Standard Premium at each Policy Renewal on an overall portfolio basis. In addition, FWD can revise, modify or adjust the terms and conditions for the add-on services subject to its prevailing rules and regulations from time to time at its sole discretion.
- b) This Plan is underwritten by FWD. FWD is solely responsible for all features, Policy approval, coverage and benefit payment under this Plan. FWD recommends you carefully consider whether this Plan is suitable for you in view of your financial needs and that you fully understand the risk involved in this Plan before submitting your Application. You should not apply for or purchase this Plan unless you fully understand it and you agree it is suitable for you. Please read through the following related risks before making any Application of this Plan.
- c) This Plan is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Hong Kong Special Administrative Region (“Hong Kong”) only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products of FWD outside Hong Kong. All selling and Application procedures of this Plan must be conducted and completed in Hong Kong.
- d) This Plan is an insurance product. The premium paid is not a bank savings deposit or time deposit. This Plan is not protected under the Deposit Protection Scheme in Hong Kong.
- e) This Plan is a medical protection product without any savings element. The costs of insurance and the related costs of the Policy are included in the premium paid under this Plan despite the product brochure/leaflet and/or the illustration documents of this product having no schedule/section of fees and charges or no additional charge noted other than the premium.
- f) All underwriting and claims decisions are made by FWD. FWD relies upon the information provided by you and the Insured Person in the insurance Application to decide to accept or decline the Application with a full refund of any premium paid without interest. FWD reserves the right to accept/reject any insurance Application and can decline your insurance Application by giving notification and explanation of Application result.
- g) If you are not satisfied with the Policy, you have the right to cancel it and obtain a refund of any premium paid (less any market value adjustment, if any) and any levy by giving written notice during the cooling-off period. The cancellation right is subject to the request to cancel must be signed by you and received by FWD which is at 1/F., FWD Financial Centre, 308 Des Voeux Road Central, Hong Kong within 21 days after (a) the delivery of the Terms and Benefits and the Policy Schedule of the Policy; or (b) the issue of a notice to you or your representative stating that the Terms and Benefits and the Policy Schedule of the Policy are available and when the cooling-off period would expire, whichever is earlier, provided that no refund of paid premium and levy can be made if a benefit payment has been made, is to be made or impeding.
- h) While the Policy is in force, you may surrender or terminate the Policy by sending a written request to FWD.
- i) The Policy provisions of this Plan are governed by the laws of Hong Kong.
- j) This product material is for reference only and is indicative of the key features of this Plan. This product material should be read along with the illustration documents, Terms and Benefits and other relevant marketing materials. For the definition of capitalised terms, the exact Terms and Conditions and the full list of exclusions of this Plan, please refer to the Policy provisions. In the event of any ambiguity or inconsistency between the terms of this leaflet and the Policy provisions, the Policy provisions shall prevail. If you want to read the Terms and Benefits of the Policy provisions before making an Application, you can obtain a copy from FWD.
- k) Effective from 1 January 2018, all Policy Holders are required to pay a levy on each premium payment made for both new and in-force Hong Kong policies to the Insurance Authority. For further information on levy, please visit our website at www.fwd.com.hk/en/insurance-levy or contact FWD Service Hotline 3123 3123.

FWD must comply with the following requirements of the Inland Revenue Ordinance to facilitate the Inland Revenue Department automatically exchanging certain financial account information:

- i. to identify accounts as non-excluded “financial accounts” (“NEFAs”);
- ii. to identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
- iii. to determine the status of NEFA-holding entities as “passive NFEs” and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;
- iv. to collect information on NEFAs (“Required Information”); and
- v. to furnish Required Information to the Inland Revenue Department.

You must comply with requests made by FWD to comply with the above listed requirements.

Key Product Risks

Credit Risk

This Plan is an insurance Policy issued by FWD. The Application of this insurance product and all benefits payable under your Policy are subject to the credit risk of FWD. You will bear the default risk in the event that FWD is unable to satisfy its financial obligations under this insurance contract.

Exchange Rate and Currency Risk

The Application of this insurance product with the Policy currency denominated in a foreign currency is subject to that foreign currency's exchange rate and currency risk. The foreign currency may be subject to the relevant regulatory bodies' control (for example, exchange restrictions). If your home currency is different from the Policy currency, please note that any exchange rate fluctuation between your home currency and the Policy currency of this insurance product will have a direct impact on the amount of premium required and the value of benefit(s) to be received. For instance, if the Policy currency of the insurance product depreciates substantially against your home currency, there is a negative impact on the benefits you receive from this Plan. If the Policy currency of the insurance product appreciates substantially against your home currency, your burden of the premium payment is increased.

Inflation Risk

The cost of living in the future may be higher than now due to the effects of inflation. Therefore, the benefits under this Plan may not be sufficient for the increasing protection needs in the future even if FWD fulfills all of its contractual obligations.

Premium Adjustment

The Standard Premium is non-guaranteed and will be determined annually based on the age of the Insured Person on his or her next birthday at the time of Renewal. The Standard Premium may increase significantly due to factors including but not limited to age, and claims experience and policy persistency in the same portfolio.

Premium Term and Non-Payment of Premium

The premium payment term of the Policy of this Plan is up to the Age of 100 years (attained age) of the Insured Person.

FWD allows a grace period of 30 days after the premium due date for payment of each premium. If a premium is still unpaid at the expiration of the grace period, the Policy will be terminated from the date the first unpaid premium was due. Please note that once the Plan is terminated on this basis, you will lose all of your benefits.

Termination Conditions

The Policy shall be automatically terminated on the earliest of the followings:

- (a) where the Policy is terminated due to non-payment of premiums after the grace period as specified in Section 13 of Part 2 or Section 3 of Part 3 of the Terms and Benefits of the Policy provisions;
- (b) the day immediately following the death of the Insured Person; or
- (c) FWD has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write the Policy.

For more details, please refer to the Terms and Conditions of the Policy provisions.

General Exclusions

Under the Terms and Benefits of the Policy provisions, FWD shall not pay any benefits in relation to or arising from the following expenses.

1. Expenses incurred for treatments, procedures, medications, tests or services which are not Medically Necessary.
2. Expenses incurred for the whole or part of the Confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a Registered Medical Practitioner for Medically Necessary investigation or treatment of a Disability which cannot be effectively performed in a setting for providing Medical Services to a Day Patient.
3. Expenses arising from Human Immunodeficiency Virus ("HIV") and its related Disability, which is contracted or occurs before the Policy Effective Date. Irrespective of whether it is known or unknown to the Policy Holder or the Insured Person at the time of submission of Application, including any updates of and changes to such requisite information (if so requested by FWD under Section 8 of Part 1 of the Terms and Benefits of the Policy provisions) such Disability shall be generally excluded from any coverage of the Terms and Benefits of the Policy provisions if it exists before the Policy Effective Date. If evidence of proof as to the time at which such Disability is first contracted or occurs is not available, manifestation of such Disability within the first 5 years after the Policy Effective Date shall be presumed to be contracted or occur before the Policy Effective Date, while manifestation after such 5 years shall be presumed to be contracted or occur after the Policy Effective Date.

However, the exclusion under this Section 3 shall not apply where HIV and its related Disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of these Terms and Benefits shall apply.

4. Expenses incurred for Medical Services as a result of Disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae (except for HIV and its related Disability, where this Section 3 applies).
5. Any charges in respect of services for:
 - (a) except as otherwise specified in Sections 1 and 2 of Part 1 of the Supplement - Enhanced benefits under the Policy provisions, beautification or cosmetic purposes, unless necessitated by Injury caused by an Accident and the Insured Person receives the Medical Services within 90 days of the Accident; or
 - (b) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
6. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the Insured Person and/or his family members, Hair Mineral Analysis (HMA), immunisation or health supplements. For the avoidance of doubt, this Section 6 does not apply to:
 - (a) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other Medical Services provided;
 - (b) removal of pre-malignant conditions; and
 - (c) treatment for prevention of recurrence or complication of a previous Disability.
7. Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for Emergency Treatment and surgery during Confinement arising from an Accident. Follow-up dental treatment or oral surgery after discharge from Hospital shall not be covered.
8. Expenses incurred for Medical Services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
9. Except as otherwise provided in Section 7(a) of Part 1 of the Supplement - Enhanced benefits under the Policy provisions, expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during Confinement or on the day of the Day Case Procedure.
10. Except as otherwise provided in Sections 7(b) and 12 of Part 1 of the Supplement - Enhanced benefits under the Policy provisions, expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments.
11. Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
12. Expenses incurred for Medical Services provided as a result of Congenital Condition(s) which have manifested or been diagnosed before the Insured Person attained the Age of 8 years (attained age).
13. Eligible Expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
14. Expenses incurred for treatment for Disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.



PMH125AE2008

尊衛您醫療計劃 (獨立保單)
vPrime Medical Plan (Standalone Plan)
 (2020年5月1日起生效 Effective from 1 May, 2020)



標準保費表 (港元)
Standard Premium Schedule (HKD)

自付費 (港元) Deductible (HKD)		0			16,000			25,000			50,000		
實際年齡 Attained Age	下次生日 年齡 Age at next birthday	年供 Annual	半年供 Semi-annual	月供 Monthly	年供 Annual	半年供 Semi-annual	月供 Monthly	年供 Annual	半年供 Semi-annual	月供 Monthly	年供 Annual	半年供 Semi-annual	月供 Monthly
0	1	7,805	4,058.60	702.45	4,065	2,113.80	365.85	3,612	1,878.24	325.08	2,850	1,482.00	256.50
1	2	7,805	4,058.60	702.45	4,065	2,113.80	365.85	3,612	1,878.24	325.08	2,850	1,482.00	256.50
2	3	7,805	4,058.60	702.45	4,065	2,113.80	365.85	3,612	1,878.24	325.08	2,850	1,482.00	256.50
3	4	7,805	4,058.60	702.45	4,065	2,113.80	365.85	3,612	1,878.24	325.08	2,850	1,482.00	256.50
4	5	7,805	4,058.60	702.45	4,065	2,113.80	365.85	3,612	1,878.24	325.08	2,850	1,482.00	256.50
5	6	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
6	7	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
7	8	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
8	9	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
9	10	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
10	11	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
11	12	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
12	13	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
13	14	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
14	15	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
15	16	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
16	17	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
17	18	7,168	3,727.36	645.12	3,481	1,810.12	313.29	3,108	1,616.16	279.72	2,425	1,261.00	218.25
18	19	7,367	3,830.84	663.03	3,507	1,823.64	315.63	3,108	1,616.16	279.72	2,450	1,274.00	220.50
19	20	7,427	3,862.04	668.43	3,650	1,898.00	328.50	3,192	1,659.84	287.28	2,503	1,301.56	225.27
20	21	7,601	3,952.52	684.09	3,718	1,933.36	334.62	3,192	1,659.84	287.28	2,578	1,340.56	232.02
21	22	7,835	4,074.20	705.15	3,780	1,965.60	340.20	3,192	1,659.84	287.28	2,646	1,375.92	238.14
22	23	8,061	4,191.72	725.49	4,022	2,091.44	361.98	3,444	1,790.88	309.96	2,732	1,420.64	245.88
23	24	8,226	4,277.52	740.34	4,034	2,097.68	363.06	3,528	1,834.56	317.52	2,808	1,460.16	252.72
24	25	8,349	4,341.48	751.41	4,363	2,268.76	392.67	3,778	1,964.56	340.02	2,884	1,499.68	259.56
25	26	8,803	4,577.56	792.27	4,392	2,283.84	395.28	3,778	1,964.56	340.02	2,960	1,539.20	266.40
26	27	9,330	4,851.60	839.70	4,408	2,292.16	396.72	3,967	2,062.84	357.03	3,037	1,579.24	273.33
27	28	9,856	5,125.12	887.04	4,741	2,465.32	426.69	4,068	2,115.36	366.12	3,113	1,618.76	280.17
28	29	10,264	5,337.28	923.76	4,856	2,525.12	437.04	4,180	2,173.60	376.20	3,126	1,625.52	281.34
29	30	10,547	5,484.44	949.23	4,972	2,585.44	447.48	4,283	2,227.16	385.47	3,162	1,644.24	284.58
30	31	10,759	5,594.68	968.31	5,087	2,645.24	457.83	4,384	2,279.68	394.56	3,342	1,737.84	300.78
31	32	11,060	5,751.20	995.40	5,202	2,705.04	468.18	4,408	2,292.16	396.72	3,348	1,740.96	301.32
32	33	11,211	5,829.72	1,008.99	5,317	2,764.84	478.53	4,560	2,371.20	410.40	3,384	1,759.68	304.56
33	34	11,512	5,986.24	1,036.08	5,396	2,805.92	485.64	4,687	2,437.24	421.83	3,424	1,780.48	308.16
34	35	11,792	6,131.84	1,061.28	5,548	2,884.96	499.32	4,788	2,489.76	430.92	3,424	1,780.48	308.16
35	36	12,189	6,338.28	1,097.01	5,624	2,924.48	506.16	4,940	2,568.80	444.60	3,532	1,836.64	317.88

尊衛您醫療計劃 (獨立保單)
vPrime Medical Plan (Standalone Plan)
 (2020年5月1日起生效 Effective from 1 May, 2020)



標準保費表 (港元)
Standard Premium Schedule (HKD)

自付費 (港元) Deductible (HKD)		0			16,000			25,000			50,000		
實際年齡 Attained Age	下次生日 年齡 Age at next birthday	年供 Annual	半年供 Semi-annual	月供 Monthly	年供 Annual	半年供 Semi-annual	月供 Monthly	年供 Annual	半年供 Semi-annual	月供 Monthly	年供 Annual	半年供 Semi-annual	月供 Monthly
36	37	12,189	6,338.28	1,097.01	5,928	3,082.56	533.52	5,092	2,647.84	458.28	3,641	1,893.32	327.69
37	38	12,415	6,455.80	1,117.35	5,928	3,082.56	533.52	5,092	2,647.84	458.28	3,641	1,893.32	327.69
38	39	12,716	6,612.32	1,144.44	6,080	3,161.60	547.20	5,168	2,687.36	465.12	3,696	1,921.92	332.64
39	40	12,791	6,651.32	1,151.19	6,080	3,161.60	547.20	5,168	2,687.36	465.12	3,717	1,932.84	334.53
40	41	12,941	6,729.32	1,164.69	6,156	3,201.12	554.04	5,320	2,766.40	478.80	3,971	2,064.92	357.39
41	42	13,167	6,846.84	1,185.03	6,536	3,398.72	588.24	5,548	2,884.96	499.32	4,254	2,212.08	382.86
42	43	13,468	7,003.36	1,212.12	6,688	3,477.76	601.92	5,738	2,983.76	516.42	4,409	2,292.68	396.81
43	44	14,070	7,316.40	1,266.30	6,992	3,635.84	629.28	6,065	3,153.80	545.85	4,661	2,423.72	419.49
44	45	14,898	7,746.96	1,340.82	7,220	3,754.40	649.80	6,080	3,161.60	547.20	4,743	2,466.36	426.87
45	46	15,650	8,138.00	1,408.50	7,600	3,952.00	684.00	6,751	3,510.52	607.59	5,188	2,697.76	466.92
46	47	16,553	8,607.56	1,489.77	7,980	4,149.60	718.20	7,084	3,683.68	637.56	5,444	2,830.88	489.96
47	48	17,079	8,881.08	1,537.11	8,436	4,386.72	759.24	7,591	3,947.32	683.19	5,833	3,033.16	524.97
48	49	17,757	9,233.64	1,598.13	8,882	4,618.64	799.38	7,914	4,115.28	712.26	6,082	3,162.64	547.38
49	50	18,509	9,624.68	1,665.81	9,336	4,854.72	840.24	8,223	4,275.96	740.07	6,376	3,315.52	573.84
50	51	18,885	9,820.20	1,699.65	9,895	5,145.40	890.55	8,379	4,357.08	754.11	6,821	3,546.92	613.89
51	52	19,603	10,193.56	1,764.27	10,214	5,311.28	919.26	8,698	4,522.96	782.82	7,170	3,728.40	645.30
52	53	21,240	11,044.80	1,911.60	10,454	5,436.08	940.86	8,870	4,612.40	798.30	7,518	3,909.36	676.62
53	54	22,193	11,540.36	1,997.37	10,930	5,683.60	983.70	9,504	4,942.08	855.36	7,867	4,090.84	708.03
54	55	23,135	12,030.20	2,082.15	11,405	5,930.60	1,026.45	9,900	5,148.00	891.00	8,215	4,271.80	739.35
55	56	24,117	12,540.84	2,170.53	11,801	6,136.52	1,062.09	10,138	5,271.76	912.42	8,564	4,453.28	770.76
56	57	25,635	13,330.20	2,307.15	12,593	6,548.36	1,133.37	10,692	5,559.84	962.28	8,912	4,634.24	802.08
57	58	27,101	14,092.52	2,439.09	13,385	6,960.20	1,204.65	11,405	5,930.60	1,026.45	9,261	4,815.72	833.49
58	59	28,490	14,814.80	2,564.10	14,177	7,372.04	1,275.93	12,197	6,342.44	1,097.73	9,609	4,996.68	864.81
59	60	30,413	15,814.76	2,737.17	15,206	7,907.12	1,368.54	12,989	6,754.28	1,169.01	9,958	5,178.16	896.22
60	61	31,928	16,602.56	2,873.52	16,222	8,435.44	1,459.98	13,781	7,166.12	1,240.29	10,508	5,464.16	945.72
61	62	33,498	17,418.96	3,014.82	17,117	8,900.84	1,540.53	14,737	7,663.24	1,326.33	11,100	5,772.00	999.00
62	63	36,341	18,897.32	3,270.69	18,316	9,524.32	1,648.44	15,753	8,191.56	1,417.77	11,743	6,106.36	1,056.87
63	64	40,103	20,853.56	3,609.27	20,140	10,472.80	1,812.60	17,328	9,010.56	1,559.52	12,542	6,521.84	1,128.78
64	65	44,843	23,318.36	4,035.87	22,420	11,658.40	2,017.80	19,304	10,038.08	1,737.36	13,261	6,895.72	1,193.49
65	66	48,676	25,311.52	4,380.84	24,624	12,804.48	2,216.16	20,976	10,907.52	1,887.84	13,880	7,217.60	1,249.20
66	67	52,585	27,344.20	4,732.65	26,828	13,950.56	2,414.52	22,952	11,935.04	2,065.68	14,878	7,736.56	1,339.02
67	68	54,624	28,404.48	4,916.16	27,284	14,187.68	2,455.56	23,332	12,132.64	2,099.88	15,819	8,225.88	1,423.71
68	69	55,828	29,030.56	5,024.52	27,968	14,543.36	2,517.12	23,940	12,448.80	2,154.60	16,952	8,815.04	1,525.68
69	70	57,634	29,969.68	5,187.06	28,880	15,017.60	2,599.20	24,776	12,883.52	2,229.84	18,097	9,410.44	1,628.73
70	71	59,214	30,791.28	5,329.26	29,792	15,491.84	2,681.28	25,536	13,278.72	2,298.24	19,297	10,034.44	1,736.73

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Standard Premium Schedule (HKD)

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71	72	65,466	34,042.32	5,891.94	32,946	17,131.92	2,965.14	28,219	14,673.88	2,539.71	20,452	10,635.04	1,840.68
72	73	69,093	35,928.36	6,218.37	34,854	18,124.08	3,136.86	29,800	15,496.00	2,682.00	21,728	11,298.56	1,955.52
73	74	72,659	37,782.68	6,539.31	36,412	18,934.24	3,277.08	31,335	16,294.20	2,820.15	22,923	11,919.96	2,063.07
74	75	75,654	39,340.08	6,808.86	38,251	19,890.52	3,442.59	32,748	17,028.96	2,947.32	24,133	12,549.16	2,171.97
75	76	77,031	40,056.12	6,932.79	39,155	20,360.60	3,523.95	33,569	17,455.88	3,021.21	25,429	13,223.08	2,288.61
76	77	81,906	42,591.12	7,371.54	41,207	21,427.64	3,708.63	35,294	18,352.88	3,176.46	26,340	13,696.80	2,370.60
77	78	87,576	45,539.52	7,881.84	43,996	22,877.92	3,959.64	37,757	19,633.64	3,398.13	27,661	14,383.72	2,489.49
78	79	90,032	46,816.64	8,102.88	44,901	23,348.52	4,041.09	38,494	20,016.88	3,464.46	28,202	14,665.04	2,538.18
79	80	92,876	48,295.52	8,358.84	47,523	24,711.96	4,277.07	40,713	21,170.76	3,664.17	29,826	15,509.52	2,684.34
80	81	94,343	49,058.36	8,490.87	48,594	25,268.88	4,373.46	41,618	21,641.36	3,745.62	31,590	16,426.80	2,843.10
81^	82^	99,806	51,899.12	8,982.54	49,704	25,846.08	4,473.36	42,666	22,186.32	3,839.94	32,431	16,864.12	2,918.79
82^	83^	102,710	53,409.20	9,243.90	51,330	26,691.60	4,619.70	43,974	22,866.48	3,957.66	33,639	17,492.28	3,027.51
83^	84^	104,531	54,356.12	9,407.79	52,166	27,126.32	4,694.94	44,642	23,213.84	4,017.78	34,940	18,168.80	3,144.60
84^	85^	106,186	55,216.72	9,556.74	53,253	27,691.56	4,792.77	45,880	23,857.60	4,129.20	36,121	18,782.92	3,250.89
85^	86^	108,090	56,206.80	9,728.10	53,922	28,039.44	4,852.98	47,543	24,722.36	4,278.87	37,430	19,463.60	3,368.70
86^	87^	110,076	57,239.52	9,906.84	55,192	28,699.84	4,967.28	48,592	25,267.84	4,373.28	38,256	19,893.12	3,443.04
87^	88^	111,814	58,143.28	10,063.26	56,535	29,398.20	5,088.15	49,813	25,902.76	4,483.17	39,218	20,393.36	3,529.62
88^	89^	113,552	59,047.04	10,219.68	57,335	29,814.20	5,160.15	50,567	26,294.84	4,551.03	39,812	20,702.24	3,583.08
89^	90^	115,373	59,993.96	10,383.57	58,738	30,543.76	5,286.42	51,940	27,008.80	4,674.60	40,892	21,263.84	3,680.28
90^	91^	117,194	60,940.88	10,547.46	59,809	31,100.68	5,382.81	52,712	27,410.24	4,744.08	41,539	21,600.28	3,738.51
91^	92^	119,097	61,930.44	10,718.73	61,054	31,748.08	5,494.86	53,680	27,913.60	4,831.20	45,151	23,478.52	4,063.59
92^	93^	120,835	62,834.20	10,875.15	62,339	32,416.28	5,610.51	54,384	28,279.68	4,894.56	45,993	23,916.36	4,139.37
93^	94^	122,656	63,781.12	11,039.04	63,475	33,007.00	5,712.75	55,264	28,737.28	4,973.76	47,001	24,440.52	4,230.09
94^	95^	124,643	64,814.36	11,217.87	65,008	33,804.16	5,850.72	55,904	29,070.08	5,031.36	48,122	25,023.44	4,330.98
95^	96^	126,463	65,760.76	11,381.67	66,037	34,339.24	5,943.33	56,472	29,365.44	5,082.48	49,029	25,495.08	4,412.61
96^	97^	128,367	66,750.84	11,553.03	67,211	34,949.72	6,048.99	57,596	29,949.92	5,183.64	50,434	26,225.68	4,539.06
97^	98^	130,671	67,948.92	11,760.39	67,897	35,306.44	6,110.73	58,318	30,325.36	5,248.62	51,932	27,004.64	4,673.88
98^	99^	132,971	69,144.92	11,967.39	69,146	35,955.92	6,223.14	58,959	30,658.68	5,306.31	52,941	27,529.32	4,764.69
99^	100^	138,462	72,000.24	12,461.58	69,558	36,170.16	6,260.22	59,753	31,071.56	5,377.77	54,099	28,131.48	4,868.91

^ 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。
 This Standard Premium Schedule does not include levy which is collected by the Insurance Authority.

