Comparison between the benefit terms of vCANsurance Medical Plan and existing FWD medical products

Below product information does not contain and is subject to the terms and benefits of the Policy. For the full terms, conditions, benefits and exclusions, please refer to the Policy provisions.

Below is a comparison between the benefit terms of vCANsurance Medical Plan, Embrace Medical Plan with Optional Medical Booster Benefit – Superior and Premier Plan, CANsurance Full Medical Plan – Economy, Standard, Superior and Premier Plan and TheOne Medical Solution (Standard Plan). These products are issued by FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) ("FWD").

Benefit Terms	VHIS F Certification F00051-01-000 Benef F00051-02-000	nce Medical lan — lexi Plan on Number: 0-01 for Standard fit Level 0-01 for Superior fit Level	Embrace Medical Plan (with Optional Medical Booster Benefit)		CANsurance Full Medical Plan				TheOne Medical Solution – Standard Plan
	Standard Benefit Level	Superior Benefit Level	Superior Plan	Superior Plan Premier Plan		Standard Plan	Superior Plan	Premier Plan	3.0.1.0.1.0.1
Area of cover	Worldwide (except for psychiatric treatments)	Except for psychiatric treatments and cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong: Worldwide	Worldwide		Asia (excluding Australia Worldwide (excluding USA) and New Zealand)		Asia (excluding Australia and New Zealand)		
Ward class	Standard Ward room	Standard Semi-private room	Standard Semi-private room	Standard Private room	Standard \	Vard room	Standar private		Standard Private room
Reimbursement calculation basis	Per Disability	Per Policy Year	Per D	visability	Per Disability				Per Policy Year
Lifetime Benefit Limit	Not ap	plicable	HKD420,000 per policy Only applicable to Optional Medical Booster Benefit – after the Insured Person reaches the age of 74 (age next birthday)	HKD700,000 per policy Only applicable to Optional Medical Booster Benefit – after the Insured Person reaches the age of 74 (age next birthday)	Not applicable		Applicable		

Benefit Terms	vCANsurance Medica Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standar Benefit Level F00051-02-000-01 for Superio	Embrace Medical Plan (with Optional Medical Booster Benefit)	Optional Medical Booster CANsurance Full Medical Plan Medical	
	Standard Superior Benefit Benefit Level Level	Superior Plan Premier Plan	Economy Standard Superior Premier Plan Plan Plan Plan	Stanuaru Pian
Deductible option	Not applicable	Not applicable	Not applicable	Applicable (HKD0 / 40,000 / 80,000)
Waiting period	Congenital Conditions and Unknown Pre-existing Conditions: - First 30 days of the first Policy Year: 0% - Starting from the 31st da of the first Policy Year: 1000 HIV and its related Disability: 2 years	(i) Treatment or surgery for tonsils, adenoids or any diseases peculiar to the female generative organs: 120 days;	 Accident: 0 day Disease: 30 days (except that a 2-year waiting period is applicable to HIV and its related Disability) 	 Accident: 0 day Disease: 30 days (except that a 5-year waiting period is applicable to HIV and its related Disability)
Congenital Conditions	Covered, but waiting perio applies - First 30 days of the first Policy Year: 0% - Starting from the 31st day of the first Policy Year: 100%	Not covered	Covered	Covered (subject to Congenital Condition(s) which have manifested or been diagnosed at or after Insured Person's attained age of 16 years (age next birthday))
Unknown Pre- existing Conditions	Covered, but waiting perio applies - First 30 days of the first Policy Year: 0% - Starting from the 31st day of the first Policy Year: 100%	Not covered	Not covered	Not covered
Prescribed Diagnostic Imaging Tests (e.g. "CT" scan, "MRI" scan, etc.)	Include Confinement and non-Confinement (Full cove) Include only Confinement	Include only Confinement (Full cover)	Include only Confinement (Full cover)
Psychiatric treatments	Covered	Not covered	Not covered	Not covered
Self-inflicted injuries	Not covered	Not covered	Covered	Not covered

Benefit Terms	VHIS FI Certificatio F00051-01-000 Benef F00051-02-000	nce Medical an — exi Plan on Number: -01 for Standard it Level -01 for Superior it Level	Embrace Medical Plan (with Optional Medical Booster Benefit) Superior Plan Premier Plan		CANsurance Full Medical Plan				TheOne Medical Solution — Standard Plan
	Standard Benefit Level	Superior Benefit Level			Economy Plan	Standard Plan	Superior Plan	Premier Plan	Standard Flan
Kidney dialysis	(Include the M or treatments Confinement of case proced Hospital (non- and rental co- dialysis mack	icable ledical Services received during or at a clinic, day ure centre or Confinement), ost of a kidney nine for use at me)	Applicable (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)		Applicable (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)			clinic, day	Applicable (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non- Confinement) only)
Supplementary major medical benefit	Not ap	plicable	Арр	Applicable		Not applicable			Not applicable
Underwriting	Full und	erwriting	Full und	derwriting	Full underwriting		Full underwriting		

Comparison between the benefit items of vCansurance Medical Plan and CANsurance Full Medical Plan – Economy and Standard Plan

Below is a comparison between the benefit items of vCansurance Medical Plan (Standard Benefit Level and Superior Benefit Level) and CANsurance Full Medical Plan – Economy and Standard Plan:

and CANsurance Full M	ieuicai Piaii – Econ	offiy and Standard	Pidii.	
Benefit items	vCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		CANsurance Full Medical Plan — Economy Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan — Standard Plan Benefit limit (HKD) (reimbursement per Disability)
	Standard Benefit Level	Superior Benefit Level		
Issue age (age next birthday)	1 (15 days) to age 81	1 (15 days) to age 70	1 (15 days) to age 70
Premium payment term (age next birthday)	To age 101		To age 101 To age 100	
Hospitalisation benefit	ts			
Room and board	Full cover		Full cover	Full cover
Intensive care	Full cover		Full cover	Full cover
Attending doctor's visit fee	Full cover		Full cover	Full cover
Specialist's fee	Full o	cover	Full cover	Full cover
Miscellaneous charges	Full c	cover	Full cover	Full cover
Home nursing	 Private nurse's fee Full cover (Maximum 30 days per Disability per Policy Year, subject to services provided by 1 Registered Nurse per day) Post-Confinement home nursing Full cover (Maximum 30 days per Disability per Policy Year, subject to services provided by 1 Registered Nurse per day) 		 Private nurse's fee Full cover Post-Confinement home nursing Full cover (within 31 days after discharge from Hospital following surgery or admission to Intensive Care Unit) 	 Private nurse's fee Full cover Post-Confinement home nursing Full cover (within 31 days after discharge from Hospital following surgery or admission to Intensive Care Unit)
Companion bed	Full o	cover	Full cover	Full cover
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Full cover Not applicable		\$300 per day (Maximum 60 days per Disability)	\$800 per day (Maximum 60 days per Disability)

Benefit items	vCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level \$800 per day of		VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior		CANsurance Full Medical Plan — Economy Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan - Standard Plan Benefit limit (HKD) (reimbursement per Disability)
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	\$800 per day of Confinement (Maximum 30 days per Disability per Policy Year)		Not applicable	Not applicable		
Surgical benefits						
Surgeon's fee	Full cover regardless of the surgical category		Full cover	Full cover		
Anaesthetist's fee	Full cover		Full cover	Full cover		
Operating theatre charges	Full cover		Full cover	Full cover		
Other medical benefits	S					
Pre- and post- Confinement/ Day Case Procedure outpatient care	Full cover - 3 prior outpatient visits or Emergency consultations per Confinement/ Day Case Procedure - 20 follow-up outpatient visits per Confinement/ Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure and maximum \$600 per visit for physiotherapy or chiropractic treatment)		Full cover - 1 visit per day and maximum 3 visits within 31 days before hospitalisation or clinical surgery - 1 visit per day and maximum 20 visits within 60 days after discharge or clinical surgery	Full cover - 1 visit per day and maximum 3 visits within 31 days before hospitalisation or clinical surgery - 1 visit per day and maximum 20 visits within 60 days after discharge or clinical surgery		
Prescribed Diagnostic Imaging Tests	Full c (including Confine Confine	ement and non-	Full cover (including Confinement only)	Full cover (including Confinement only)		
Prescribed Non- surgical Cancer Treatments	Full cover		Full cover	Full cover		
Psychiatric treatments	\$40,000 per Disa Yea		Not applicable	Not applicable		
Emergency outpatient accidental treatment	Full c	over	Full cover	Full cover		

Benefit items	vCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level Benefit Level		– VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		CANsurance Full Medical Plan Economy Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan — Standard Plan Benefit limit (HKD) (reimbursement per Disability)
Emergency outpatient dental treatment	Full c	cover	Full cover	Full cover		
Cash benefit for Day Case Procedure	\$500 per _l	procedure	Not applicable	Not applicable		
Cash benefit for top- up subsidy	(Maximum 60 da	of Confinement ays per Disability cy Year)	Not applicable	Not applicable		
Kidney dialysis	(Include the Me treatments re Confinement of case procedure c (non-Confinem	r at a clinic, day entre or Hospital ent), and rental dialysis machine	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)		
Additional benefit for Prescribed Non- surgical Cencer Treatments and kidney dialysis	- Reimburse Eligible Expenses in excess of the amounts payable under Miscellaneous charges, Prescribed Nonsurgical Cancer Treatments and Outpatient kidney dialysis Maximum Maximum HKD350,000 HKD500,000 per Disability per Disability		Not applicable	Not applicable		
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 per visit - Maximum 10 follow-up outpatient visits per Confinement/Day Case Procedure within 90 days after discharge from Hospital or completion of Day Case Procedure, subject to 1 follow- up outpatient visit per day		\$300 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery	\$400 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery		

	vCansurance	Medical Plan			
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level Benefit Level		CANsurance Full Medical Plan Economy Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan — Standard Plan Benefit limit (HKD) (reimbursement per Disability)	
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and Post- Confinement/ Day Case Procedure outpatient care, which means: \$600 per visit - 3 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure - 20 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)		\$300 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery	\$400 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery	
Rehabilitation treatment	\$10,000 per Disability per Policy Year	\$30,000 per Disability per Policy Year	Applicable (covered under Physiotherapist or chiropractor consultation or Post-Confinement/ Day Case Procedure Chinese medicine treatment, which means: \$300 per visit - 1 visit per day and maximum 20 visits in total within 60 days after discharge or clinical surgery)	Applicable (covered under Physiotherapist or chiropractor consultation or Post-Confinement/ Day Case Procedure Chinese medicine treatment, which means: \$400 per visit - 1 visit per day and maximum 20 visits in total within 60 days after discharge or clinical surgery)	
Self-inflicted injuries	Not co	overed	\$10,000 per Disability	\$10,000 per Disability	
Total benefit limit					
Per Disability Limit / Per Disability Per Policy Year Limit of Hospitalisation benefits, surgical benefits and other medical benefits	\$500,000 per Disability per Policy Year (The Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis with maximum \$350,000 per Disability per Policy Year is not counted)	\$650,000 per Disability per Policy Year (The Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis with maximum \$500,000 per Disability per Policy Year is not counted)	\$250,000 per Disability (\$500,000 per covered cancer)	\$350,000 per Disability (\$700,000 per covered cancer)	
Death benefit					
Death benefit	\$20,000	\$30,000	\$10,000	\$20,000	

	vCansurance	Medical Plan		
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		CANsurance Full Medical Plan Economy Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan - Standard Plan Benefit limit (HKD) (reimbursement per Disability)
	Standard Benefit Level	Superior Benefit Level		
Accidental death benefit	\$20,000	\$30,000	\$10,000	\$20,000
Other services and be	nefits			
Second Medical Opinion	Avail	able*	Available	Available
International SOS 24- hour Worldwide Assistance Services	Available*		Available	Available
Ancillary service	CANcierge *		CANcierge	CANcierge
Wellness course/ medical check-up	\$1,000* Once for every 5 consecutive Policy Years	\$2,000* Once for every 5 consecutive Policy Years	\$800 per Policy (waiting period: 5 Policy Years)	\$1,000 per Policy (waiting period: 5 Policy Years)
No claims benefit booster	Not applicable		If no claim is paid or payable in the 10 consecutive years immediately before Renewal, per Disability limit will be increased by 20% once on the next Policy anniversary without any additional charges (applicable for all future Policy Years thereafter)	If no claim is paid or payable in the 10 consecutive years immediately before Renewal, per Disability limit will be increased by 20% once on the next Policy anniversary without any additional charges (applicable for all future Policy Years thereafter)
No claims premium discount	 If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 to 4 consecutive years: 10% 5 or more consecutive years: 15% If the Policy Holder holds other inforce vPrime Medical Plan policy(ies), and at least 2 of the policies (including this Policy) are eligible for the 1) no claims premium discount stated above on any Renewal Date, the Policy originally held would then be entitled to extra premium discount below according to the corresponding number of policies held – 2 or 3: 2.5% 4: 5% 5 or above: 10% 		If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium 2 or more consecutive years: 10%	If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium 2 or more consecutive years: 10%

Benefit items	Le F00051-02-000-01 Le Benefit lii	exi Plan n Number: for Standard Benefit vel for Superior Benefit vel mit (HKD) per Disability per	CANsurance Full Medical Plan - Economy Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan - Standard Plan Benefit limit (HKD) (reimbursement per Disability)
Special benefit for infant	While the Policy is in force, 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"), a 1-year coverage for the designated medical insurance plan shall be offered to the Covered Child without further evidence of insurability and at no additional charge.*		Not applicable	Not applicable

^{*} This benefit/service is optional and does not form part of the Terms and Benefits of the VHIS Certified Plan. 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.

Comparison between the benefit items of vCANsurance Medical Plan and CANsurance Full Medical Plan – Superior and Premier Plan

Below is a comparison between the benefit items of vCANsurance Medical Plan and CANsurance Full Medical Plan – Superior and Premier Plan:

Premier Plan:				
Benefit items	vCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level Benefit Level		CANsurance Full Medical Plan — Superior Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan — Premier Plan Benefit limit (HKD) (reimbursement per Disability)
Issue age (age next birthday)	1 (15 days)	to age 81	1 (15 days) to age 70	1 (15 days) to age 70
Premium payment term (age next birthday)	To ago	e 101	To age 100	To age 100
Hospitalisation benefit	ts			
Room and board	Full cover		Full cover	Full cover
Intensive care	Full cover		Full cover	Full cover
Attending doctor's visit fee	Full cover		Full cover	Full cover
Specialist's fee	Full c	over	Full cover	Full cover
Miscellaneous charges	Full c	over	Full cover	Full cover
Home nursing	 Private nurse's fee Full cover (Maximum 30 days per Disability per Policy Year, subject to services provided by 1 Registered Nurse per day) Post-Confinement home nursing Full cover (Maximum 30 days per Disability per Policy Year, subject to services provided by 1 Registered Nurse per day) 		 Private nurse's fee Full cover Post-Confinement home nursing Full cover (within 31 days after discharge from Hospital following surgery or admission to Intensive Care Unit) 	 Private nurse's fee Full cover Post-Confinement home nursing Full cover (within 31 days after discharge from Hospital following surgery or admission to Intensive Care Unit)
Companion bed	Full c	over	Full cover	Full cover
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not app	olicable	\$800 per day (Maximum 60 days per Disability)	\$1,000 per day (Maximum 60 days per Disability)

	vCansurance	Medical Plan			
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level Benefit Level		CANsurance Full Medical Plan - Superior Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan — Premier Plan Benefit limit (HKD) (reimbursement per Disability)	
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	\$800 per day of Confinement (Maximum 30 days per Disability per Policy Year)		\$800 per day (Maximum 60 days per Disability)	\$1,000 per day (Maximum 60 days per Disability)	
Surgical benefits					
Surgeon's fee	Full cover regardless of the surgical category		Full cover	Full cover	
Anaesthetist's fee	Full cover		Full cover	Full cover	
Operating theatre charges	Full cover		Full cover	Full cover	
Other medical benefit	S				
Pre- and post- Confinement/ Day Case Procedure outpatient care	Full c - 3 prior outpatient Emergency consu Confinement/ Day - 20 follow-up outp Confinement/ Day (within 90 days af Hospital or compl Procedure and may visit for physiothe chiropractic treate	visits or ltations per / Case Procedure atient visits per / Case Procedure ter discharge from etion of Day Case eximum \$600 per rapy or	Full cover - 1 visit per day and maximum 3 visits within 31 days before hospitalisation or clinical surgery - 1 visit per day and maximum 20 visits within 60 days after discharge or clinical surgery	Full cover - 1 visit per day and maximum 3 visits within 31 days before hospitalisation or clinical surgery - 1 visit per day and maximum 20 visits within 60 days after discharge or clinical surgery	
Prescribed Diagnostic Imaging Tests	Full c (including Confin Confin	ement and non-	Full cover (including Confinement only)	Full cover (including Confinement only)	
Prescribed Non- surgical Cancer Treatments	Full cover		Full cover	Full cover	
Psychiatric treatments	\$40,000 per Disability per Policy Year		Not applicable	Not applicable	
	Year Full cover				
Emergency outpatient accidental treatment		ar	Full cover	Full cover	

	vCansurance	Medical Plan		
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level Benefit Level		CANsurance Full Medical Plan - Superior Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan Premier Plan Benefit limit (HKD) (reimbursement per Disability)
Cash benefit for Day Case Procedure	\$500 per p	procedure	Not applicable	Not applicable
Cash benefit for top- up subsidy	\$500 per day o (Maximum 60 day: Policy	s per Disability per	Not applicable	Not applicable
Kidney dialysis	Full of (Include the Me treatments re Confinement or a procedure centre Confinement), an kidney dialysis m hor	dical Services or ceived during t a clinic, day case or Hospital (non- id rental cost of a achine for use at	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non- Confinement) only)	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non- Confinement) only)
Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis	- Reimburse Eligible Expenses incurred in excess of the amounts payable under Miscellaneous charges, Prescribed Non-surgical Cancer Treatments and Outpatient kidney dialysis Maximum Maximum HKD350,000 HKD500,000 per Disability per Disability		Not applicable	Not applicable
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 per visit - Maximum 10 follow-up outpatient visits per Confinement/Day Case Procedure within 90 days after discharge from Hospital or completion of Day Case Procedure, subject to 1 follow-up outpatient visit per day		\$600 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery	\$800 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and Post- Confinement/ Day Case Procedure outpatient care, which means: \$600 per visit - 3 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure - 20 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)		\$600 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery	\$800 per visit - 1 visit per day and maximum 10 visits within 60 days after discharge or clinical surgery

	vCansurance	Medical Plan		
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior		CANsurance Full Medical Plan - Superior Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan Premier Plan Benefit limit (HKD) (reimbursement per Disability)
	Benefit Level	Benefit Level		
Rehabilitation treatment	\$10,000 per Disability per Policy Year	\$30,000 per Disability per Policy Year	Applicable (covered under Physiotherapist or chiropractor consultation or Post- Confinement/ Day Case Procedure Chinese medicine treatment, which means: \$600 per visit - 1 visit per day and maximum 20 visits in total within 60 days after discharge or clinical surgery)	Applicable (covered under Physiotherapist or chiropractor consultation or Post- Confinement/ Day Case Procedure Chinese medicine treatment, which means: \$800 per visit - 1 visit per day and maximum 20 visits in total within 60 days after discharge or clinical surgery)
Self-inflicted injuries	Not covered		\$10,000 per Disability	\$10,000 per Disability
Total benefit limit				
Per Disability Limit / Per Disability Per Policy Year Limit of Hospitalisation benefits, surgical benefits and other medical benefits	\$500,000 per Disability per Policy Year (The Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis with maximum \$350,000 per Disability per Policy Year is not counted)	\$650,000 per Disability per Policy Year (The Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis with maximum \$500,000 per Disability per Policy Year is not counted)	\$500,000 per Disability (\$1,000,000 per covered cancer)	\$800,000 per Disability (\$1,600,000 per covered cancer)
Death benefit				
Death Benefit	\$20,000	\$30,000	\$20,000	\$30,000
Accidental death benefit	\$20,000	\$30,000	\$20,000	\$30,000
Other services and be	nefits			
Second Medical Opinion	Availa	able*	Available	Available
International SOS 24- hour Worldwide Assistance Services	Availa	able*	Available	Available
Ancillary service	CANci	erge*	CANcierge	CANcierge

Benefit items	vCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior Benefit Level Benefit Level		CANsurance Full Medical Plan - Superior Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan Premier Plan Benefit limit (HKD) (reimbursement per Disability)
Wellness course/ medical check-up	\$1,000* Once for every 5 consecutive Policy Years	\$2,000* Once for every 5 consecutive Policy Years	\$2,0000 per Policy (waiting period: 5 Policy Years)	\$4,000 per Policy (waiting period: 5 Policy Years)
No claims benefit booster	Not applicable		If no claim is paid or payable in the 10 consecutive years immediately before Renewal, per Disability limit will be increased by 20% once on the next Policy anniversary without any additional charges (applicable for all future Policy Years thereafter)	If no claim is paid or payable in the 10 consecutive years immediately before Renewal, per Disability limit will be increased by 20% once on the next Policy anniversary without any additional charges (applicable for all future Policy Years thereafter)
No claims premium discount	 If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 to 4 consecutive years: 10% 5 or more consecutive years: 15% If the Policy Holder holds other in-force vCare Supreme Medical Plan policy(ies), and at least 2 of the policies (including this Policy) are eligible for the 1) no claims premium discount stated above on any Renewal Date, the Policy originally held would then be entitled to extra premium discount below according to the corresponding number of policies held –		If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 or more consecutive years: 10%	If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium 2 or more consecutive years: 10%

Benefit items	vCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		CANsurance Full Medical Plan - Superior Plan Benefit limit (HKD) (reimbursement per Disability)	CANsurance Full Medical Plan — Premier Plan Benefit limit (HKD) (reimbursement per Disability)
	Standard Benefit Level	Superior Benefit Level		
Special benefit for infant	While the Policy is in force, 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"), a 1-year coverage for the designated medical insurance plan shall be offered to the Covered Child without further evidence of insurability and at no additional charge.*		Not applicable	Not applicable

^{*} This benefit/service is optional and does not form part of the Terms and Benefits of the VHIS Certified Plan. 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.

Comparison between the benefit items of vCANsurance Medical Plan and Embrace Medical Plan with Optional Medical Booster Benefit – Superior and Premier Plan

Below is a comparison between the benefit items of vCANsurance Medical Plan and Embrace Medical Plan with Optional Medical Booster Benefit – Superior and Premier Plan:

Booster Benefit – Superi	VCansurance Medical Plan VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior		Embrace Medical Plan — Superior Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)	Embrace Medical Plan — Premier Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
lectio ago	Benefit Level	Benefit Level		
Issue age (age next birthday)	1 (15 days)) to age 81	1 (15 days) to age 65	1 (15 days) to age 65
Premium payment term (age next birthday)	To age 101		To age 100	To age 100
Hospitalisation benefits				
Room and board	Full cover		\$1,450 per day (up to a maximum of 150 days)	\$3,000 per day (up to a maximum of 150 days)
Intensive care	Full cover		\$4,000 per day (up to a maximum of 30 days)	\$5,000 per day (up to a maximum of 30 days)
Attending doctor's visit fee	Full cover		\$1,450 per day (up to a maximum of 150 days)	\$3,000 per day (up to a maximum of 150 days)
Specialist's fee	Full	cover	\$7,500	\$12,500
Miscellaneous charges	Full	cover	\$16,500	\$27,000
Home nursing	 Private nurse's fee Full cover (Maximum 30 days per Disability per Policy Year, subject to services provided by 1 Registered Nurse per day) Post-Confinement home nursing Full cover (Maximum 30 days per Disability per Policy Year, subject to services provided by 1 Registered Nurse per day) 		\$1,100 per day (up to a maximum of 30 days within 30 days after hospitalisation)	\$2,000 per day (up to a maximum of 30 days within 30 days after hospitalisation)
Companion bed	Full cover (with no restriction on number of days of reimbursement and Insured Person's age)		\$900 per day (up to a maximum of 30 days and restricted to Insured Person aged below 12 (age next birthday))	\$1,800 per day (up to a maximum of 30 days and restricted to Insured Person aged below 12 (age next birthday))

	vCansurance	Medical Plan		
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		Embrace Medical Plan Superior Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)	Embrace Medical Plan — Premier Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
	Standard Benefit Level	Superior Benefit Level		
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not ap	plicable	\$500 per day (up to a maximum of 60 days per Disability)	\$900 per day (up to a maximum of 60 days per Disability)
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	Not applicable	\$800 per day of Confinement (Maximum 30 days per Disability per Policy Year)	Not applicable	Not applicable
Surgical benefits				
Surgeon's fee	Full cover regardless of the surgical category		- Class 5 \$96,000 - Class 4 \$54,800 - Class 3 \$30,500 - Class 2 \$16,000 - Class 1 \$6,500	- Class 5 \$130,000 - Class 4 \$72,000 - Class 3 \$40,000 - Class 2 \$20,000 - Class 1 \$8,500
Anaesthetist's fee	Full	cover	35% of Surgeon's fee payable	35% of Surgeon's fee payable
Operating theatre charges	Full o	cover	35% of Surgeon's fee payable	35% of Surgeon's fee payable
Other medical benefits				
Pre- and post- Confinement/ Day Case Procedure outpatient care	Full cover - 3 prior outpatient visits or Emergency consultations per Confinement/ Day Case Procedure - 20 follow-up outpatient visits per Confinement/ Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure and maximum \$600 per visit for physiotherapy or chiropractic treatment)		\$350 per visit (1 visit per day) - up to a maximum of 10 visits within 45 days after hospitalisation or clinical surgery	\$400 per visit (1 visit per day) - up to a maximum of 10 visits within 45 days after hospitalisation or clinical surgery
Prescribed Diagnostic Imaging Tests	Full cover (including Confinement and non- Confinement)		Covered under Miscellaneous charges, which means: \$16,500 per Disability (Including Confinement only)	Covered under Miscellaneous charges, which means: \$27,000 per Disability (Including Confinement only)
Prescribed Non- surgical Cancer Treatments	Full c	cover	\$130,000	\$200,000

	vCansurance	Medical Plan		
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Superior		Embrace Medical Plan — Superior Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)	Embrace Medical Plan — Premier Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
Psychiatric treatments	-	Benefit Level ability per Policy ear	Not applicable	Not applicable
Emergency outpatient accidental treatment	Full o	cover	\$6,500	\$14,000
Emergency outpatient dental treatment	Full o	cover	Not applicable	Not applicable
Cash benefit for Day Case Procedure	\$500 per procedure		Not applicable	Not applicable
Cash benefit for top- up subsidy	\$500 per day of Confinement (Maximum 60 days per Disability per Policy Year)		Not applicable	Not applicable
Kidney dialysis	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement), and rental cost of a kidney dialysis machine for use at home)		\$350,000 (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)	\$500,000 (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)
Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis	- Reimburse Eligible Expenses incurred in excess of the amounts payable under Miscellaneous charges, Prescribed Non-surgical Cancer Treatments and Outpatient kidney dialysis Maximum Maximum HKD350,000 per Disability per Disability		Not applicable	Not applicable
Supplementary major medical benefit (SMM)	per Policy Year per Policy Year Not applicable		 Entitled ward class: Standard Semi-private Room Benefit term: To age 100 (age next birthday) Pays up to 85% of Eligible Expenses in excess of the benefits paid by Embrace, with 	 Entitled ward class: Standard Private Room Benefit term: To age 100 (age next birthday) Pays up to 85% of Eligible Expenses in excess of the benefits paid by Embrace, with

	vCansurance Medical Plan		
	– VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit	Embrace Medical Plan –	Embrace Medical Plan —
Benefit items	Level F00051-02-000-01 for Superior Benefit Level	Superior Plan (with Optional Medical Booster Benefit)	Premier Plan (with Optional Medical Booster Benefit)
	Benefit limit (HKD) (reimbursement per Disability per Policy Year)	Benefit limit (HKD) (reimbursement per Disability)	Benefit limit (HKD) (reimbursement per Disability)
	Standard Superior Benefit Level Benefit Level		
		per Disability limit up to \$150,000 Hospitalisation benefits: Room and board and Attending doctor's visit fee are covered under Supplementary major medical benefit only if the reimbursement exceeds 150 days Surgical benefits: Get reimbursed up to 50% of the per Disability limit in Optional medical booster benefit The overall Lifetime Benefit Limits per life and per policy apply to the aggregate amounts paid on or after the policy anniversary immediately following the 74th birthday of the Insured Person (age next birthday) Overall Lifetime Benefit Limit per Policy is \$420,000 Overall Lifetime Benefit Limit per life is \$1,200,000	per Disability limit up to \$250,000 • Hospitalisation benefits: Room and board and Attending doctor's visit fee are covered under Supplementary major medical benefit only if the reimbursement exceeds 150 days • Surgical benefits: Get reimbursed up to 50% of the per Disability limit in Optional medical booster benefit - The overall Lifetime Benefit Limits per life and per policy apply to the aggregate amounts paid on or after the policy anniversary immediately following the 74th birthday of the Insured Person (age next birthday) • Overall Lifetime Benefit Limit per Policy is \$700,000 • Overall Lifetime Benefit Limit per life is \$1,200,000
Road ambulance to and/ or from the Hospital	Covered under Miscellaneous charges, which means: Full cover	\$300 per Disability (to Hospital only)	\$350 per Disability (to Hospital only)
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 per visit - Maximum 10 follow-up outpatient visits per Confinement/Day Case Procedure within 90 days after discharge from Hospital or completion of Day Case Procedure, subject to 1 follow-up outpatient visit per day	Applicable (covered under Post-hospitalization Consultation, which means: \$350 per visit (1 visit per day) - up to a maximum of 10 visits within 45 days after hospitalisation or clinical surgery)	Applicable (covered under Post-hospitalization Consultation, which means: \$400 per visit (1 visit per day) - up to a maximum of 10 visits within 45 days after hospitalisation or clinical surgery)
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and Post- Confinement/ Day Case Procedure outpatient care, which means: \$600 per visit	Applicable (covered under Post-hospitalization Consultation, which means: \$350 per visit (1 visit per day)	Applicable (covered under Post-hospitalization Consultation, which means: \$400 per visit (1 visit per day)

	vCansurance Medical Plan –			
	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit		Embrace Medical Plan —	Embrace Medical Plan –
Benefit items	F00051-02-000-01	vel for Superior Benefit vel	Superior Plan (with Optional Medical Booster Benefit)	Premier Plan (with Optional Medical Booster Benefit)
	Benefit li (reimbursement Policy	per Disability per	Benefit limit (HKD) (reimbursement per Disability)	Benefit limit (HKD) (reimbursement per Disability)
	Standard Benefit Level	Superior Benefit Level		
	 3 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure 20 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure) 		- up to a maximum of 10 visits within 45 days after hospitalisation or clinical surgery)	- up to a maximum of 10 visits within 45 days after hospitalisation or clinical surgery)
Rehabilitation treatment	\$10,000 per \$30,000 per Disability per Policy Year Policy Year		Not applicable	Not applicable
Total benefit limit	Total benefit limit			
Per Disability Limit / Per Disability Per Policy Year Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$500,000 per Disability per Policy Year (The Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis with maximum \$350,000 per Disability per Policy Year is not counted)	\$650,000 per Disability per Policy Year (The Additional benefit for Prescribed Non- surgical Cancer Treatments and kidney dialysis with maximum \$500,000 per Disability per Policy Year is not counted)	Not applicable	Not applicable
Death benefit				
Death benefit	\$20,000	\$30,000	\$15,000	\$20,000
Accidental death benefit	\$20,000 \$30,000		\$15,000	\$20,000
Other services and ben	efits			
Second Medical Opinion	Avail	able*	Not available	Not available
International SOS 24- hour Worldwide Assistance Services	Avail	able*	Available	Available

	vCansurance	Medical Plan		
Benefit items	- VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		Embrace Medical Plan Superior Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)	Embrace Medical Plan — Premier Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
	Standard Benefit Level	Superior Benefit Level		
Ancillary service	CANci	erge*	Not available	Not available
Wellness course/ medical check-up	\$1,000* Once for every 5 consecutive Policy Years	\$2,000* Once for every 5 consecutive Policy Years	Not available	Not available
No claims premium discount	 If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 to 4 consecutive years: 10% - 5 or more consecutive years: 15% If the Policy Holder holds other in-force vPrime Medical Plan policy(ies), and at least 2 of the policies (including this Policy) are eligible for the 1) no claims premium discount stated above on any Renewal Date, the Policy originally held would then be entitled to extra premium discount below according to the corresponding number of policies held – 2 or 3: 2.5% - 4: 5% 		If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 to 4 consecutive years: 10% - 5 or more consecutive years: 15%	If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 to 4 consecutive years: 10% - 5 or more consecutive years: 15%
Special benefit for infant	- 5 or above: 10% While the Policy is in force, 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"), a 1-year coverage for the designated medical insurance plan shall be offered to the Covered Child without further evidence of insurability and at no additional charge.*		Not applicable	Not applicable

^{*} This benefit/service is optional and does not form part of the Terms and Benefits of the VHIS Certified Plan. 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.

Comparison between the benefit items of vCANsurance Medical Plan and TheOne Medical Solution – Standard Plan

Below is a comparison between the benefit items of vCANsurance Medical Plan and TheOne Medical Solution – Standard Plan: vCansurance Medical Plan VHIS Flexi Plan **TheOne Medical Solution** F00051-01-000-01 for Standard Benefit Level Standard Plan Benefit items (reimbursement per Disability per Policy Year) Standard Benefit Level Superior Benefit Level Issue age 1 (15 days) to age 81 1 (15 days) to age 70 (age next birthday) Premium payment term To age 101 To age 100 (age next birthday) **Hospitalisation benefits** Room and board Full cover Full cover Intensive care Full cover Full cover Attending doctor's Full cover Full cover visit fee Specialist's fee Full cover Full cover Miscellaneous Full cover Full cover charges - Private nurse's fee Full cover (Maximum 30 days per Disability per - During Confinement Policy Year, subject to services provided by 1 Full cover (Maximum 30 days per Policy Year and Registered Nurse per day) 180 days per lifetime) Home nursing **Post-Confinement home nursing** - Post-Confinement Full cover (Maximum 30 days per Disability per Full cover (Within 31 days after discharge from Hospital, maximum 31 days per Policy Year) Policy Year, subject to services provided by 1 Registered Nurse per day) Companion bed Full cover Full cover Daily hospital cash benefit (for Confinement in \$1,500 per day Not applicable general ward of (Maximum 30 days per Policy Year) public Hospital in Hong Kong) Cash benefit for \$800 per day of room and board \$1,500 per day Confinement Confinement below (Maximum 30 days per Policy Year, for voluntary Not applicable (Maximum 30 days per entitled ward class in room and board stay below Standard Private Room) Disability per Policy a private Hospital in Year) Hong Kong

	vCansurance	Medical Plan	
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year) Standard Benefit Level Superior Benefit Level		TheOne Medical Solution — Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
Surgical benefits			
Surgeon's fee	Full cover regardless o	f the surgical category	Full cover
Anaesthetist's fee	Full c	cover	Full cover
Operating theatre charges	Full o	cover	Full cover
Other medical benefits			
Pre- and post- Confinement/ Day Case Procedure outpatient care	Full of a prior outpatient visits or land confinement/ Day Case Procedure (within 90 Hospital or completion of Day maximum \$600 per visit for chiropractic treatment)	Emergency consultations per ocedure its per Confinement/ Day days after discharge from Day Case Procedure and	Full cover - Within 31 days before hospitalisation or clinical surgery and maximum 1 visit per day - Within 60 days immediately after discharge from hospitalisation or clinical surgery and maximum 1 visit per day
Prescribed Diagnostic Imaging Tests	Full of function of the functi		Full cover (including Confinement only)
Prescribed Non- surgical Cancer Treatments	Full c	cover	Full cover
Psychiatric treatments	\$40,000 per Disabi	ility per Policy Year	Not applicable
Medical appliances benefit	Covered under Miscellaneous Charges, which means: Full cover		- Specified items (including 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; and Prosthetic intervertebral disc): Full cover - Other items: \$96,000 per item per life
Donor's Benefit	Not Ap	plicable	Full Cover (Organ and Bone Marrow Transplantation) Only cover the Eligible Expenses of the surgical procesure performed on the Insured Person as a recipient
Emergency outpatient accidental treatment	Full c	cover	Not applicable

	vCansurance	Medical Plan	
Benefit items			TheOne Medical Solution — Standard Plan
	Benefit lir (reimbursement per Di		Benefit limit (HKD) (reimbursement per Policy Year)
	Standard Benefit Level	Superior Benefit Level	
Emergency outpatient dental treatment	Full c	cover	Full cover
Cash benefit for Day Case Procedure	\$500 per p	procedure	Not applicable
Cash benefit for top- up subsidy	\$500 per day o (Maximum 60 days per D		Not applicable
Kidney dialysis	Full of (Include the Medical Streceived during Confinem procedure centre or Host and rental cost of a kidnet at ho	Services or treatments ent or at a clinic, day case pital (non-Confinement), y dialysis machine for use	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)
Additional benefit for Prescribed Non- surgical Cancer Treatments and	 Reimburse Eligible Expenses in Excess of the amounts payable under Miscellaneous charges, Prescribed Non-surgical Cancer Treatments and Outpatient kidney dialysis 		Provide additional \$1,000,000 annual limit on organ
kidney dislysis	Maximum HKD350,000 per Disability per Policy Year	Maximum HKD500,000 per Disability per Policy Year	and bone marrow transplantation, chemotherapy, radiotherapy, immunotherapy, target therapy, proton therapy, cancer hormonal therapy and
Additional Annual Benefit Limit for organ and bone marrow transplantation	Not app	plicable	kidney dialysis.
Pregnancy Complications	Not app	plicable	Full cover
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 per visit - Maximum 10 follow-up outpatient visits per Confinement/Day Case Procedure within 90 days after discharge from Hospital or completion of Day Case Procedure, subject to 1 follow-up outpatient visit per day		Not applicable
	Appli	cable	Applicable
Physiotherapist or chiropractor consultation	(covered under Pre- and Po Case Procedure outpatient \$600 per visit - 3 prior outpatient visits of consultations per Confin Procedure	or Emergency	 (covered under Post-Confinement/ Day Case Procedure outpatient care, which means: Full cover Within 60 days immediately after discharge from hospitalisation or clinical surgery and maximum 1 visit per day)

	vCansurance	Medical Plan	
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level Benefit limit (HKD) (reimbursement per Disability per Policy Year)		TheOne Medical Solution — Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
	Standard Benefit Level	Superior Benefit Level	
	- 20 follow-up outpatient Confinement/Day Case I after discharge from Hos Day Case Procedure)	Procedure (within 90 days	
HIV / AIDS treatment benefit	Full (Waiting per	cover riod: 2 years)	\$800,000 per lifetime (Waiting period: 5 years)
Rehabilitation treatment	\$10,000 per Disability per Policy Year	\$30,000 per Disability per Policy Year	Not applicable
Total benefit limit			
Per Policy Limit / Per Disability Per Policy Year Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$500,000 per Disability per Policy Year (The Additional benefit for Prescribed Non-surgical Cancer Treatments and kidney dialysis with maximum \$350,000 per Disability per Policy Year is not counted)	\$650,000 per Disability per Policy Year (The Additional benefit for Prescribed Non-surgical Cancer Treatments and kidney dialysis with maximum \$500,000 per Disability per Policy Year is not counted)	\$8,000,000 per Policy Year (additional \$1,000,000 benefit limit for organ and bone marrow transplantation, chemotherapy and radiotherapy and kidney dialysis)
Lifetime Limit of hospitalisation benefits, surgical benefits and other medical benefits	Not ap	plicable	\$40,000,000
Death benefit			
Death benefit	\$20,000	\$30,000	\$80,000
Accidental death benefit	\$20,000	\$30,000	\$80,000
Other services and ber	efits		
Second Medical Opinion	Available*		Available
International SOS 24- hour Worldwide Assistance Services	Available*		Available
Ancillary service	CANC	erge*	PREMIER THE ONEcierge
Wellness course/ medical check-up	\$1,000* Once for every 5 consecutive Policy Years	\$2,000* Once for every 5 consecutive Policy Years	Not applicable

	vCansurance Medical Plan				
Benefit items	VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level	TheOne Medical Solution — Standard Plan			
	Benefit limit (HKD) (reimbursement per Disability per Policy Year)	Benefit limit (HKD) (reimbursement per Policy Year)			
	Standard Benefit Level Superior Benefit Level				
No claims premium discount	 If no claim has been made for 2 consecutive years or more, the discount listed below will be granted on Renewal premium - 2 to 4 consecutive years: 10% 5 or more consecutive years: 15% If the Policy Holder holds other in-force vPrime Medical Plan policy(ies), and at least 2 of the policies (including this Policy) are eligible for the 1) no claims premium discount stated above on any Renewal Date, the Policy originally held would then be entitled to extra premium discount below according to the corresponding number of policies held – 2 or 3: 2.5% 4: 5% 5 or above: 10% 	Not applicable			
Option to reduce or remove the Deductible at specified ages	Not applicable	Applicable (allowed to switch to a lower annual Deductible option on or after the respective age next birthday of 50, 55, 60 or 65, subject to terms and conditions as determined by FWD from time to time)			
First-dollar coverage – Deductible waived for designated crises	Not applicable	While this Policy is in force, if the Insured Person suffers the following designated crises and is Confined in a Hospital or undergoes a Day Case Procedure as a direct result of the designated crises, in calculation of benefits payable under this Policy, the payment of the remaining balance of Deductible (if any) will be waived in respect of such Confinement, Day Case Procedure or treatment. 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.			
Special benefit for infant	While the Policy is in force, 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"), a 1-year coverage for the designated medical insurance plan shall be offered to the Covered Child without further evidence of insurability and at no additional charge.*	Not applicable			

* This benefit/service is optional and does not form part of the Terms and Benefits of the VHIS Certified Plan. 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.

Remark: The above comparison is based on data compiled on 17 September 2020. Product features may change from time to time without prior notice and all are subject to the terms and conditions of the policy at the time. The product information in the table does not contain the full terms and conditions, key product risks and full list of exclusions of the policy, please refer to the product brochure and policy provisions for details.

Premium Comparison – The premium comparison of vCANsurance Medical Plan and FWD existing medical products

Below is the premium comparison of vCANsurance Medical Plan, Embrace Medical Plan with Optional Medical Booster Benefit – Superior and Premier Plan, CANsurance Full Medical Plan – Economy, Standard, Superior and Premier Plan and TheOne Medical Solution – Standard Plan:

Male (HKD – annual premium)

Age (age next birthday)	Embrace Medical Plan with Optional Medical Booster Benefit		CANsurance Full Medical Plan			vCANsurance Medical Plan- VHIS Flexi Plan Certification Number: F00051-01-000-01 for Standard Benefit Level F00051-02-000-01 for Superior Benefit Level		TheOne Medical Solution			
	Superior	Premier	Economy	Standard	Superior	Premier	Standard Benefit Level	Superior Benefit Level	Standard Plan (Deductible HKD80,000)	Standard Plan (Deductible HKD40,000)	Standard Plan (Deductible HKD0)
11	4,049	7,467	3,278	3,651	6,312	7,575	4,342	6,781	3,196	3,956	8,509
21	4,483	8,180	2,511	2,797	5,332	6,399	3,447	6,398	3,238	4,006	8,572
31	5,870	11,031	3,559	3,964	8,055	9,666	4,515	8,415	4,291	5,283	11,032
41	7,845	14,590	4,220	4,700	9,672	11,608	5,224	9,860	5,363	6,573	13,405
51	11,721	22,032	6,482	7,220	14,725	17,724	8,083	16,204	8,203	10,037	20,339
61	18,877	34,082	12,118	13,498	26,053	31,361	14,000	28,607	13,576	16,669	34,368
71	31,851	50,322	23,561	26,243	49,730	59,851	28,225	51,222	24,959	30,718	63,996
81	49,627	83,691	36,450	40,599	77,791	93,600	46,412	78,389	39,100	48,124	100,258

The above product information and premium rates are as of 17 Septermber 2020 and for reference only, please refer to the relevant leaflet / brochure and policy provisions for product details. The above premium does not include the insurance levy collected by the Insurance Authority, any promotional offers, premium discounts or no claims premium discounts. The Standard Premium is non-guaranteed and will be determined annually based on the Age Next Birthday of the Insured Person 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 Comparison – The premium comparison of vCANsurance Medical Plan and FWD existing medical products

Below is the premium comparison of vCANsurance Medical Plan, Embrace Medical Plan with Optional Medical Booster Benefit – Superior and Premier Plan, CANsurance Full Medical Plan – Economy, Standard, Superior and Premier Plan and TheOne Medical Solution – Standard Plan:

Female (HKD – annual premium)

Age (age next birthday)	Embrace Medical Plan with Optional Medical Booster Benefit		CANsurance Full Medical Plan				vCANsurance VHIS Flood Certification F00051-01-000- Benefi F00051-02-000- Benefi	TheOne Medical Solution			
	Superior	Premier	Economy	Standard	Superior	Premier	Standard Benefit Level	Superior Benefit Level	Standard Plan (Deductible HKD80,000)	Standard Plan (Deductible HKD40,000)	Standard Plan (Deductible HKD0)
11	4,768	8,801	3,026	3,370	5,827	6,993	4,035	6,148	3,196	3,956	8,509
21	6,128	10,811	3,123	3,478	5,835	7,002	4,107	6,418	3,238	4,006	8,572
31	8,294	15,180	4,781	5,325	8,313	9,977	5,936	8,562	4,291	5,283	11,032
41	10,956	19,668	5,501	6,127	10,158	12,190	6,926	10,463	5,363	6,573	13,405
51	15,594	27,354	7,701	8,578	15,342	18,467	9,396	15,802	8,203	10,037	20,339
61	21,309	38,390	12,232	13,624	24,798	29,849	14,091	25,855	13,576	16,669	34,368
71	29,599	57,132	20,337	22,652	42,021	50,572	24,572	43,282	24,959	30,718	63,996
81	46,718	88,370	30,003	33,419	61,866	74,438	38,314	67,563	39,100	48,124	100,258

The above product information and premium rates are as of 17 September 2020 and for reference only, please refer to the relevant leaflet / brochure and policy provisions for product details. The above premium does not include the insurance levy collected by the Insurance Authority, any promotional offers, premium discounts or no claims premium discounts. The Standard Premium is non-guaranteed and will be determined annually based on the Age Next Birthday of the Insured Person 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.