

Comparison between the benefit terms of vPrime Medical Plan and 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 vPrime 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	vPrime Medical Plan – VHIS Flexi Plan Certification Number:		Embrace Medical Plan^ (with Optional Medical Booster Benefit)		CANsurance Full Medical Plan^				TheOne Medical Solution^ – Standard Plan
	Deductible (HKD)	Certification Number	Superior Plan	Premier Plan	Economy Plan	Standard Plan	Superior Plan	Premier Plan	
	0	F00045-01-000-03							
	16,000	F00045-02-000-03							
	25,000	F00045-03-000-03							
	50,000	F00045-04-000-03							
	100,000	F00045-05-000-01							
	250,000	F00045-06-000-01							
Area of cover	Worldwide - For Emergency Treatment; and for non-Emergency Treatment in Asia (including Australia and New Zealand): benefits payable according to vPrime Benefit Schedule - For non-Emergency Treatment outside Asia (including Australia and New Zealand): benefits payable according to the benefit schedule of the Standard Terms and Benefits		Worldwide		Asia (excluding Australia and New Zealand)	Worldwide (excluding USA)			Asia (excluding Australia and New Zealand)
Ward class	- For Hong Kong, Macau and Mainland China: Standard Semi-private Room - For Asia (excluding Hong Kong, Macau and Mainland China) and Emergency Treatment outside Asia: Standard Private Room		Standard Semi-Private Room	Standard Private Room	Standard Ward Room		Standard Semi-Private Room		Standard Private Room
Reimbursement calculation basis	Per Policy Year		Per Disability		Per Disability				Per Policy Year

Benefit Terms	vPrime Medical Plan – VHIS Flexi Plan Certification Number:		Embrace Medical Plan^ (with Optional Medical Booster Benefit)		CANsurance Full Medical Plan^				TheOne Medical Solution^ – Standard Plan
	Deductible (HKD)	Certification Number	Superior Plan	Premier Plan	Economy Plan	Standard Plan	Superior Plan	Premier Plan	
	0	F00045-01-000-03							
	16,000	F00045-02-000-03							
	25,000	F00045-03-000-03							
	50,000	F00045-04-000-03							
	100,000	F00045-05-000-01							
	250,000	F00045-06-000-01							
Lifetime Benefit Limit	Applicable		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
Deductible option	Applicable (HKD0 / 16,000 / 25,000 / 50,000 / 100,000, / 250,000)		Not applicable		Not applicable				Applicable (HKD0 / 40,000 / 80,000)
Waiting period	No restriction (except that a 5-year waiting period is applicable to HIV and its related Disability)		- Accident: 0 day - Disease: 30 days (i) Treatment or surgery for tonsils, adenoids or any diseases peculiar to the female generative organs: 120 days; (ii) Radiotherapy and chemotherapy treatments for cancer: 90 days; and (iii) Circumcision and any related surgical operations (before attaining the age of 18): 1 year		- 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 (subject to Congenital Condition(s) which have manifested or been diagnosed at or after Insured Person’s attained age of 8 years)		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)

Benefit Terms	vPrime Medical Plan – VHIS Flexi Plan Certification Number:		Embrace Medical Plan^ (with Optional Medical Booster Benefit)		CANsurance Full Medical Plan^				TheOne Medical Solution^ – Standard Plan
	Deductible (HKD)	Certification Number	Superior Plan	Premier Plan	Economy Plan	Standard Plan	Superior Plan	Premier Plan	
	0	F00045-01-000-03							
	16,000	F00045-02-000-03							
	25,000	F00045-03-000-03							
	50,000	F00045-04-000-03							
	100,000	F00045-05-000-01							
	250,000	F00045-06-000-01							
Unknown Pre-existing Conditions	Covered, but waiting period applies - First 30 days of the first Policy Year: 0% - Starting from the 31 st 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 cover)		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
Kidney dialysis	Applicable (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)		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)				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 applicable		Applicable		Not applicable				Not applicable
Underwriting	Full underwriting		Full underwriting		Full underwriting				Full underwriting

^ Closed for new application

Remark: This comparison gives only a brief description on the product features and is for reference only. The above product information does not contain the full terms of the policy. For full terms and conditions of the relevant insurance plans, please refer to relevant product brochure and policy document.

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

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 items of vPrime Medical Plan and CANsurance Full Medical Plan^ – Economy and Standard Plan:

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
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 100	To age 100
Hospitalisation benefits			
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 cover	Full cover	Full cover
Miscellaneous charges	Full cover	Full cover	Full cover
Home nursing	- Private nurse's fee Full cover (Maximum 30 days per Policy Year, subject to services provided by 1 Registered Nurse per day) - Post-Confinement home nursing Full cover (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)	- 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 cover	Full cover	Full cover
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not applicable	\$300 per day (Maximum 60 days per Disability)	\$800 per day (Maximum 60 days per Disability)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per day of Confinement (Maximum 30 days per Policy Year) For \$100,000 / \$250,000 Deductible \$800 per day of Confinement (Maximum 30 days 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			
Pre- and post-Confinement/ Day Case Procedure outpatient care	Full cover - 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)	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 cover (including Confinement and non-Confinement)	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 Policy Year	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)		
	Reconstructive surgery benefit			Reconstructive surgery benefit			Reconstructive surgery benefit		
	\$160,000 per Accident/ mastectomy based on the below mechanism –			With no separate benefit item for reconstructive surgery, Eligible Expenses are reimbursable based on the below mechanism –			With no separate benefit item for reconstructive surgery, Eligible Expenses are reimbursable based on the below mechanism –		
	<u>Accident</u>			<u>Accident or Disease</u>			<u>Accident or Disease</u>		
	Period after Accident	For beautification or cosmetic purposes?		Period after Accident or treatment for disease	For beautification or cosmetic purposes?		Period after Accident or treatment for disease	For beautification or cosmetic purposes?	
		Yes	No		Yes	No		Yes	No
	≤90 days	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	≤90 days	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	≤90 days	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover
	>90 days and ≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per Accident	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>90 days and ≤12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>90 days and ≤12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover
	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover
	<u>Mastectomy</u>								
	Period after mastectomy	For beautification or cosmetic purposes?							
		Yes	No						
	≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per mastectomy	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover						
	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover						

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Medical appliances benefit	Covered under Miscellaneous Charges, which means: Full cover	Covered under Miscellaneous charges, which means Full cover	Covered under Miscellaneous charges, which means Full cover
Medical appliances benefit for reconstructive surgery	\$96,000 each item per Policy Year (covers surgical procedures performed for beautification or cosmetic purposes)	Not applicable	Not applicable
Donor's benefit	30% of total transplantation cost (For transplantation of heart, kidney, liver, lung or bone marrow)	Not applicable	Not applicable
Emergency outpatient accidental treatment	Full cover	Full cover	Full cover
Emergency outpatient dental treatment	Full cover	Full cover	Full cover
Cash benefit for Day Case Procedure	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per procedure (Maximum 1 Day Case Procedure per day) For \$100,000 / \$250,000 Deductible \$800 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable	Not applicable
Cash benefit for top-up subsidy	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$800 per day of Confinement (Maximum 60 days per Policy Year) For \$100,000 / \$250,000 Deductible \$500 per day of Confinement (Maximum 60 days 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)	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)
Road ambulance to and/ or from the Hospital	Covered under Miscellaneous charges, which means: Full cover	Covered under Miscellaneous charges, which means: Full cover	Covered under Miscellaneous charges, which means: Full cover
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 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, 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

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and post-Confinement/Day Case Procedure outpatient care which means: Full cover - 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)	\$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	\$100,000 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)
Stroke rehabilitation treatment	- Home facility enhancement benefit \$80,000 per Incident - Stroke ancillary benefit \$1,000 per visit (Maximum 30 visits per Policy Year, subject to 1 visit per day, up to \$100,000 per Incident) - Disability subsidy benefit \$10,000 per month (Maximum 24 months per Incident)	- Home facility enhancement benefit Not applicable - Stroke ancillary benefit 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) - Disability subsidy benefit Not applicable	- Home facility enhancement benefit Not applicable - Stroke ancillary benefit 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) - Disability subsidy benefit Not applicable
Hospice care	\$100,000 per Policy Year	Not applicable	Not applicable
Self-inflicted injuries	Not covered	\$10,000 per Disability	\$10,000 per Disability

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Total benefit limit			
Annual Benefit Limit/ Per Disability Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$10,000,000 per Policy Year	\$250,000 per Disability (\$500,000 per covered cancer)	\$350,000 per Disability (\$700,000 per covered cancer)
Lifetime Benefit Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$60,000,000	Not applicable	Not applicable
Death benefit			
Death benefit	\$40,000	\$10,000	\$20,000
Accidental death benefit	\$40,000	\$10,000	\$20,000
Other services and benefits			
Second Medical Opinion	Available*	Available	Available
International SOS 24-hour Worldwide Assistance Services	Available*	Available	Available
Ancillary service	PREMIER THE ONEcierge*	CANcierge	CANcierge
Wellness course/ medical check-up	Not applicable	\$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)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
No claims premium discount	1) 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% 2) 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%	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%
Option to reduce or remove the Deductible at specified ages	Applicable (the right to reduce or remove the Deductible without re-underwriting can only be exercised once immediately following the date that the Insured Person attains the attained age of 50, 55, 60, 65, 70, 75 or 80)	Not applicable	Not applicable
First-dollar coverage – Deductible waived for designated crises	The remaining balance of Deductible (if any and if applicable) shall be reduced to zero dollar (\$0) for the Medical Services if the Insured Person– - suffers any of the designated crises as stated in the Supplement – First-dollar coverage – Deductible waived for designated crises under the Policy provision of this Plan; and - upon the recommendation of the attending Registered Medical Practitioner in writing, receives any Medical Services as a result of the designated crises for which benefits are payable under benefit items (a) to (l) of I. Basic benefits and/or 1 to 12 under II. Enhanced benefits.	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
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 2-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

[^] Closed for new application.

* 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: F00045-01-000-03 for Deductible HKD0, F00045-02-000-03 for Deductible HKD16,000, F00045-03-000-03 for Deductible HKD25,000, F00045-04-000-03 for Deductible HKD50,000, F00045-05-000-01 for Deductible HKD100,000, F00045-06-000-01 for Deductible HKD250,000). 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.

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

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 items of vPrime Medical Plan and CANsurance Full Medical Plan^ – Superior and Premier Plan:

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
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 100	To age 100
Hospitalisation benefits			
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 cover	Full cover	Full cover
Miscellaneous charges	Full cover	Full cover	Full cover
Home nursing	- Private nurse's fee Full cover (Maximum 30 days per Policy Year, subject to services provided by 1 Registered Nurse per day) - Post-Confinement home nursing Full cover (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)	- 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 cover	Full cover	Full cover
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not applicable	\$800 per day (Maximum 60 days per Disability)	\$1,000 per day (Maximum 60 days per Disability)
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per day of Confinement (Maximum 30 days per Policy Year) For \$100,000 / \$250,000 Deductible \$800 per day of Confinement (Maximum 30 days per Policy Year)	\$800 per day (Maximum 60 days per Disability)	\$1,000 per day (Maximum 60 days per Disability)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
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			
Pre- and post-Confinement/ Day Case Procedure outpatient care	Full cover - 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)	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 cover (including Confinement and non-Confinement)	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 Policy Year	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)		
Reconstructive surgery benefit	\$160,000 per Accident/ mastectomy based on the below mechanism –			With no separate benefit item for reconstructive surgery, Eligible Expenses are reimbursable based on the below mechanism –			With no separate benefit item for reconstructive surgery, Eligible Expenses are reimbursable based on the below mechanism –		
	Period after Accident	<u>Accident</u> For beautification or cosmetic purposes?		Period after Accident or treatment for disease	<u>Accident or Disease</u> For beautification or cosmetic purposes?		Period after Accident or treatment for disease	<u>Accident or Disease</u> For beautification or cosmetic purposes?	
		Yes	No		Yes	No		Yes	No
	≤90 days	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	≤90 days	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	≤90 days	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover
	>90 days and ≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per Accident	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>90 days and ≤12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>90 days and ≤12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover
	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover
	Period after mastectomy	<u>Mastectomy</u> For beautification or cosmetic purposes?							
		Yes	No						
	≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per mastectomy	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover						
	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover						

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Medical appliances benefit	Covered under Miscellaneous Charges, which means: Full cover	Covered under Miscellaneous charges, which means Full cover	Covered under Miscellaneous charges, which means Full cover
Medical appliances benefit for reconstructive surgery	\$96,000 each item per Policy Year (covers surgical procedures performed for beautification or cosmetic purposes)	Not applicable	Not applicable
Donor's benefit	30% of total transplantation cost (For transplantation of heart, kidney, liver, lung or bone marrow)	Not applicable	Not applicable
Emergency outpatient accidental treatment	Full cover	Full cover	Full cover
Emergency outpatient dental treatment	Full cover	Full cover	Full cover
Cash benefit for Day Case Procedure	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per procedure (Maximum 1 Day Case Procedure per day) For \$100,000 / \$250,000 Deductible \$800 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable	Not applicable
Cash benefit for top-up subsidy	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$800 per day of Confinement (Maximum 60 days per Policy Year) For \$100,000 / \$250,000 Deductible \$500 per day of Confinement (Maximum 60 days 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)	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)
Road ambulance to and/ or from the Hospital	Covered under Miscellaneous charges, which means: Full cover	Covered under Miscellaneous charges, which means: Full cover	Covered under Miscellaneous charges, which means: Full cover
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 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, 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

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and post-Confinement/ Day Case Procedure outpatient care, which means: Full cover - 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)	\$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
Rehabilitation treatment	\$100,000 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)
Stroke rehabilitation treatment	- Home facility enhancement benefit \$80,000 per Incident - Stroke ancillary benefit \$1,000 per visit (Maximum 30 visits per Policy Year, subject to 1 visit per day, up to \$100,000 per Incident) - Disability subsidy benefit \$10,000 per month (Maximum 24 months per Incident)	- Home facility enhancement benefit Not applicable - Stroke ancillary benefit 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) - Disability subsidy benefit Not applicable	- Home facility enhancement benefit Not applicable - Stroke ancillary benefit 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) - Disability subsidy benefit Not applicable
Hospice care	\$100,000 per Policy Year	Not applicable	Not applicable
Self-inflicted injuries	Not covered	\$10,000 per Disability	\$10,000 per Disability

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Total benefit limit			
Annual Benefit Limit/ Per Disability Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$10,000,000 per Policy Year	\$500,000 per Disability (\$1,000,000 per covered cancer)	\$800,000 per Disability (\$1,600,000 per covered cancer)
Lifetime Benefit Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$60,000,000	Not applicable	Not applicable
Death benefit			
Death benefit	\$40,000	\$20,000	\$30,000
Accidental death benefit	\$40,000	\$20,000	\$30,000
Other services and benefits			
Second Medical Opinion	Available*	Available	Available
International SOS 24-hour Worldwide Assistance Services	Available*	Available	Available
Ancillary service	PREMIER THE ONEcierge*	CANcierge	CANcierge
Wellness course/ medical check-up	Not applicable	\$2,000 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)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
No claims premium discount	1) 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% 2) 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%	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%
Option to reduce or remove the Deductible at specified ages	Applicable (the right to reduce or remove the Deductible without re-underwriting can only be exercised once immediately following the date that the Insured Person attains the attained age of 50, 55, 60, 65, 70, 75 or 80)	Not applicable	Not applicable
First-dollar coverage – Deductible waived for designated crises	The remaining balance of Deductible (if any and if applicable) shall be reduced to zero dollar (\$0) for the Medical Services if the Insured Person– - suffers any of the designated crises as stated in the Supplement – First-dollar coverage – Deductible waived for designated crises under the Policy provision of this Plan; and - upon the recommendation of the attending Registered Medical Practitioner in writing, receives any Medical Services as a result of the designated crises for which benefits are payable under benefit items (a) to (l) of I. Basic benefits and/or 1 to 12 under II. Enhanced benefits.	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
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 2-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

[^] Closed for new application.

* 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: F00045-01-000-03 for Deductible HKD0, F00045-02-000-03 for Deductible HKD16,000, F00045-03-000-03 for Deductible HKD25,000, F00045-04-000-03 for Deductible HKD50,000, F00045-05-000-01 for Deductible HKD100,000, F00045-06-000-01 for Deductible HKD250,000). 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.

Remark: This comparison gives only a brief description on the product features and is for reference only. The above product information does not contain the full terms of the policy. For full terms and conditions of the relevant insurance plans, please refer to relevant product brochure and policy document.

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

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 items of vPrime Medical Plan and Embrace Medical Plan^ with Optional Medical Booster Benefit – Superior and Premier Plan:

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
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 Policy Year, subject to services provided by 1 Registered Nurse per day) - Post-Confinement home nursing Full cover (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)	\$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)	\$1,800 per day (up to a maximum of 30 days and restricted to Insured Person aged below 12)
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not applicable	\$500 per day (up to a maximum of 60 days per Disability)	\$900 per day (up to a maximum of 60 days per Disability)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per day of Confinement (Maximum 30 days per Policy Year) For \$100,000 / \$250,000 Deductible \$800 per day of Confinement (Maximum 30 days 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 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 - 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)	\$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 cover	\$130,000	\$200,000
Psychiatric treatments	\$40,000 per Policy Year	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)		
Reconstructive surgery benefit	\$160,000 per Accident/ mastectomy based on the below mechanism –			With no separate benefit item for reconstructive surgery, Eligible Expenses are reimbursable based on the below mechanism –			With no separate benefit item for reconstructive surgery, Eligible Expenses are reimbursable based on the below mechanism –		
	<u>Accident</u>			<u>Accident or Disease</u>			<u>Accident or Disease</u>		
	Period after Accident	For beautification or cosmetic purposes?		Period after Accident or treatment for disease	For beautification or cosmetic purposes?		Period after Accident or treatment for disease	For beautification or cosmetic purposes?	
		Yes	No		Yes	No		Yes	No
	≤90 days	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	≤90 days	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, subject to the corresponding benefit limits	≤90 days	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, subject to the corresponding benefit limits
	>90 days and ≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per Accident	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>90 days and ≤12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, subject to the corresponding benefit limits	>90 days and ≤12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, subject to the corresponding benefit limits
	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, subject to the corresponding benefit limits	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, subject to the corresponding benefit limits
	<u>Mastectomy</u>								
	Period after mastectomy	For beautification or cosmetic purposes?							
		Yes	No						
	≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per mastectomy	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover						
	>12 months	Not covered	Covered under Surgeon's fee, Anaesthetist's fee and Operating theatre charges, which means: Full cover						

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Medical appliances benefit	Covered under Miscellaneous Charges, which means: Full cover	Covered under Miscellaneous charges, which means \$16,500 per Disability	Covered under Miscellaneous charges, which means \$27,000 per Disability
Medical appliances benefit for reconstructive surgery	\$96,000 each item per Policy Year (covers surgical procedures performed for beautification or cosmetic purposes)	Not applicable	Not applicable
Donor's benefit	30% of total transplantation cost (For transplantation of heart, kidney, liver, lung or bone marrow)	Not applicable	Not applicable
Emergency outpatient accidental treatment	Full cover	\$6,500	\$14,000
Emergency outpatient dental treatment	Full cover	Not applicable	Not applicable
Cash benefit for Day Case Procedure	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per procedure (Maximum 1 Day Case Procedure per day) For \$100,000 / \$250,000 Deductible \$800 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable	Not applicable
Cash benefit for top-up subsidy	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$800 per day of Confinement (Maximum 60 days per Policy Year) For \$100,000 / \$250,000 Deductible \$500 per day of Confinement (Maximum 60 days 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)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Supplementary major medical benefit (SMM)	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 per Disability limit of 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 • Overall Lifetime Benefit Limit per Policy is \$420,000 • Overall Lifetime Benefit Limit per life is \$1,200,000	- 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 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 • 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 15 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)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and post- Confinement/ Day Case Procedure outpatient care, which means: Full cover - 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)	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)
Rehabilitation treatment	\$100,000 per Policy Year	Not applicable	Not applicable
Stroke rehabilitation treatment	- Home facility enhancement benefit \$80,000 per Incident - Stroke ancillary benefit \$1,000 per visit (Maximum 30 visits per Policy Year, subject to 1 visit per day, up to \$100,000 per Incident) - Disability subsidy benefit \$10,000 per month (Maximum 24 months per Incident)	- Home facility enhancement benefit Not applicable - Stroke ancillary benefit Applicable (covered under Post-hospitalization Consultation, which means: \$350 per visit - 1 visit per day for a maximum of 10 visits within 45 days after hospitalisation or clinical surgery) - Disability subsidy benefit Not applicable	- Home facility enhancement benefit Not applicable - Stroke ancillary benefit Applicable (covered under Post-hospitalization Consultation, which means: \$400 - 1 visit per day for a maximum of 10 visits within 45 days after hospitalisation or clinical surgery) - Disability subsidy benefit Not applicable
Hospice care	\$100,000 per Policy Year	Not applicable	Not applicable
Total benefit limit			
Annual Benefit Limit/ Per Disability Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$10,000,000 per Policy Year	Not applicable	Not applicable
Lifetime Benefit Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$60,000,000	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
Death benefit			
Death benefit	\$40,000	\$15,000	\$20,000
Accidental death benefit	\$40,000	\$15,000	\$20,000
Other services			
Second Medical Opinion	Available*	Not available	Not available
International SOS 24-hour Worldwide Assistance Services	Available*	Available	Available
Ancillary service	PREMIER THE ONEcierge*	Not available	Not available
No claims premium discount	1) 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% 2) 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%	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%
Option to reduce or remove the Deductible at specified ages	Applicable (the right to reduce or remove the Deductible without re-underwriting can only be exercised once immediately following the date that the Insured Person attains the attained age of 50, 55, 60, 65, 70, 75 or 80)	Not applicable	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement 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)
First-dollar coverage – Deductible waived for designated crises	The remaining balance of Deductible (if any and if applicable) shall be reduced to zero dollar (\$0) for the Medical Services if the Insured Person– - suffers any of the designated crises as stated in the Supplement – First-dollar coverage – Deductible waived for designated crises under the Policy provision of this Plan; and - upon the recommendation of the attending Registered Medical Practitioner in writing, receives any Medical Services as a result of the designated crises for which benefits are payable under benefit items (a) to (l) of I. Basic benefits and/or 1 to 12 under II. Enhanced benefits.	Not applicable	Not applicable
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 2-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

^ Closed for new application.

*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: F00045-01-000-03 for Deductible HKD0, F00045-02-000-03 for Deductible HKD16,000, F00045-03-000-03 for Deductible HKD25,000, F00045-04-000-03 for Deductible HKD50,000, F00045-05-000-01 for Deductible HKD100,000, F00045-06-000-01 for Deductible HKD250,000). 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.

Remark: This comparison gives only a brief description on the product features and is for reference only. The above product information does not contain the full terms of the policy. For full terms and conditions of the relevant insurance plans, please refer to relevant product brochure and policy document.

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

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 items of vPrime Medical Plan and TheOne Medical Solution^ – Standard Plan:

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
Issue age (age next birthday)	1 (15 days) to age 81	1 (15 days) to age 70
Premium payment term (age next birthday)	To age 101	To age 100
Hospitalisation benefits		
Room and board	Full cover	Full cover
Intensive care	Full cover	Full cover
Attending doctor's visit fee	Full cover	Full cover
Specialist's fee	Full cover	Full cover
Miscellaneous charges	Full cover	Full cover
Home nursing	- Private nurse's fee Full cover (Maximum 30 days per Policy Year, subject to services provided by 1 Registered Nurse per day) - Post-Confinement home nursing Full cover (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)	- During Confinement Full cover (Maximum 30 days per Policy Year and 180 days per lifetime) - Post-Confinement Full cover (Within 31 days after discharge from Hospital, maximum 31 days per Policy Year)
Companion bed	Full cover	Full cover
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not applicable	\$1,500 per day (Maximum 30 days per Policy Year)
Cash benefit for room and board Confinement below entitled ward class in a private Hospital in Hong Kong	For \$0 / \$16,000 / \$25,000 Deductible \$1,600 per day of Confinement (Maximum 30 days per Policy Year, or voluntary room and board stay below Semi-Private Room) For \$100,000 / \$250,000 Deductible \$800 per day of Confinement (Maximum 30 days per Policy Year, or voluntary room and board stay below Semi-Private Room)	\$1,500 per day (Maximum 30 days per Policy Year, for voluntary room and board stay below Standard Private Room)

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
Surgical benefits		
Surgeon's fee	Full cover regardless of the surgical category	Full cover
Anaesthetist's fee	Full cover	Full cover
Operating theatre charges	Full cover	Full cover
Other medical benefits		
Pre- and post-Confinement/ Day Case Procedure outpatient care	Full cover - 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)	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 cover (including Confinement and non-Confinement)	Full cover (including Confinement only)
Prescribed Non-surgical Cancer Treatments	Full cover	Full cover
Psychiatric treatments	\$40,000 per Policy Year	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)			TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)		
Reconstructive surgery benefit	\$160,000 per Accident/mastectomy based on the below mechanism – <u>Accident</u>			With no separate benefit item for reconstructive surgery, eligible expenses are reimbursable based on the below mechanism – <u>Accident or Disease</u>		
	Period after Accident	For beautification or cosmetic purposes?		Period after Accident or treatment for Disease	For beautification or cosmetic purposes?	
		Yes	No		Yes	No
	≤90 days	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover	≤90 days	Not covered	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover
	>90 days and ≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per Accident	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover	>90 days and ≤12 months	Not covered	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover
	>12 months	Not covered	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover	>12 months	Not covered	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover
	Period after mastectomy	For beautification or cosmetic purposes?				
		Yes	No			
	≤12 months	Covered under Reconstructive surgery benefit, which means: \$160,000 per mastectomy	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover			
	>12 months	Not covered	Covered under Surgeon’s fee, Anaesthetist’s fee and Operating theatre charges, which means: Full cover			

Reconstructive surgery benefit

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution[^] – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
Medical appliances benefit	Covered under Miscellaneous Charges, which means: Full cover	- Specific 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
Medical appliances benefit for reconstructive surgery	\$96,000 each item per Policy Year (covers surgical procedures performed for beautification or cosmetic purposes)	Not applicable
Donor's benefit	30% of total transplantation cost (For transplantation of heart, kidney, liver, lung or bone marrow)	Not applicable
Emergency outpatient accidental treatment	Full cover	Not applicable
Emergency outpatient dental treatment	Full cover	Full cover
Cash benefit for Day Case Procedure	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$1,600 per procedure (Maximum 1 Day Case Procedure per day) For \$100,000 / \$250,000 Deductible \$800 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable
Cash benefit for top-up subsidy	For \$0 / \$16,000 / \$25,000 / \$50,000 Deductible \$800 per day of Confinement (Maximum 60 days per Policy Year) For \$100,000 / \$250,000 Deductible \$500 per day of Confinement (Maximum 60 days per Policy Year)	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)	Full cover (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non-Confinement) only)
Road ambulance to and/ or from the Hospital	Covered under Miscellaneous charges, which means: Full cover	Covered under Miscellaneous charges, which means: Full cover
Pregnancy Complications	Not applicable	Full cover
Post-Confinement/ Day Case Procedure Chinese medicine treatment	\$600 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, subject to 1 follow-up outpatient visit per day	Not applicable

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and post-Confinement/ Day Case Procedure outpatient care, which means: Full cover - 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)	Applicable (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)
HIV / AIDS treatment benefit	Full cover (Waiting period: 5 years)	\$800,000 per lifetime (Waiting period: 5 years)
Rehabilitation treatment	\$100,000 per Policy Year	Not applicable
Stroke rehabilitation treatment	- Home facility enhancement benefit \$80,000 per Incident - Stroke ancillary benefit \$1,000 per visit (Maximum 30 visits per Policy Year, subject to 1 visit per day, up to \$100,000 per Incident) - Disability subsidy benefit \$10,000 per month (Maximum 24 months per Incident)	Not applicable
Hospice care	\$100,000 per Policy Year	Not applicable
Total benefit limit		
Annual Benefit Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$10,000,000 per Policy Year	\$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 Benefit Limit of hospitalisation benefits, surgical benefits and other medical benefits	\$60,000,000	\$40,000,000
Death benefit		
Death benefit	\$40,000	\$80,000
Accidental death benefit	\$40,000	\$80,000

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution[^] – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
Other services and benefits		
Second Medical Opinion	Available*	Available
International SOS 24-hour Worldwide Assistance Services	Available*	Available
Ancillary service	PREMIER THE ONEcierge*	PREMIER THE ONEcierge
Designated Hospital list in Mainland China	No restrictions	Restricted to Designated Hospitals
No claims premium discount	1) 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% 2) 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	Applicable (the right to reduce or remove the Deductible without re-underwriting can only be exercised once immediately following the date that the Insured Person attains the attained age of 50, 55, 60, 65, 70, 75 or 80)	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	The remaining balance of Deductible (if any and if applicable) shall be reduced to zero dollar (\$0) for the Medical Services if the Insured Person – - suffers any of the designated crises as stated in the Supplement – First-dollar coverage – Deductible waived for designated crises under the Policy provision of this Plan; and - upon the recommendation of the attending Registered Medical Practitioner in writing, receives any Medical Services as a result of the designated crises for which benefits are payable under benefit items (a) to (l) of I. Basic benefits and/or 1 to 12 under II. Enhanced benefits.	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.

Benefit items	vPrime Medical Plan – VHIS Flexi Plan Certification Number: F00045 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution[^] – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)
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 2-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

[^] Closed for new application.

* 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: F00045-01-000-03 for Deductible HKD0, F00045-02-000-03 for Deductible HKD16,000, F00045-03-000-03 for Deductible HKD25,000, F00045-04-000-03 for Deductible HKD50,000, F00045-05-000-01 for Deductible HKD100,000, F00045-6-000-01 for Deductible HKD250,000). 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.

Remark: This comparison gives only a brief description on the product features and is for reference only. The above product information does not contain the full terms of the policy. For full terms and conditions of the relevant insurance plans, please refer to relevant product brochure and policy document.

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

Below is the premium comparison of vPrime 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^				vPrime Medical Plan– VHIS Flexi Plan							TheOne Medical Solution^*		
							Certification Number:									
							Deductible (HKD)			Certification Number						
							0			F00045-01-000-03						
							16,000			F00045-02-000-03						
							25,000			F00045-03-000-03						
							50,000			F00045-04-000-03						
	100,000			F00045-05-000-01												
	250,000			F00045-06-000-01												
	Superior	Premier	Economy	Standard	Superior	Premier	Deductible HKD 250,00	Deductible HKD 100,000	Deductible HKD 50,000	Deductible HKD 25,000	Deductible HKD 15,000	Deductible HKD 0	Standard (Deductible HKD 80,000)	Standard (Deductible HKD 40,000)	Standard (Deductible HKD 0)	
11	4,049	7,467	3,278	3,651	6,312	7,575	1,673	2,110	2,425	3,108	3,481	7,168	3,292	4,154	9,786	
21	4,483	8,180	2,511	2,797	5,332	6,399	1,766	2,230	2,578	3,192	3,718	7,601	3,336	4,207	9,858	
31	5,870	11,031	3,559	3,964	8,055	9,666	2,256	2,874	3,342	4,384	5,087	10,759	4,420	5,548	12,687	
41	7,845	14,590	4,220	4,700	9,672	11,608	2,661	3,415	3,971	5,320	6,156	12,941	5,524	6,902	15,416	
51	11,721	22,032	6,482	7,220	14,725	17,724	4,502	5,866	6,821	8,379	9,895	18,885	8,450	10,539	23,390	
61	18,877	34,082	12,118	13,498	26,053	31,361	7,251	9,247	10,508	13,781	16,222	31,928	13,984	17,503	39,524	
71	31,851	50,322	23,561	26,243	49,730	59,851	12,736	16,595	19,297	25,536	29,792	59,214	25,708	32,254	73,596	
81	49,627	83,691	36,450	40,599	77,791	93,600	20,849	27,167	31,590	41,618	48,594	94,343	40,273	50,531	115,297	

Female (HKD – annual premium)

Age (age next birthday)	Embrace Medical Plan^ with Optional Medical Booster Benefit		CANsurance Full Medical Plan^				vPrime Medical Plan– VHIS Flexi Plan						TheOne Medical Solution^*		
							Certification Number:								
							Deductible (HKD)			Certification Number					
							0			F00045-01-000-03					
							16,000			F00045-02-000-03					
							25,000			F00045-03-000-03					
							50,000			F00045-04-000-03					
	100,000			F00045-05-000-01											
250,000			F00045-06-000-01												
	Superior	Premier	Economy	Standard	Superior	Premier	Deductible HKD 250,00	Deductible HKD 100,000	Deductible HKD 50,000	Deductible HKD 25,000	Deductible HKD 15,000	Deductible HKD 0	Standard (Deductible HKD 80,000)	Standard (Deductible HKD 40,000)	Standard (Deductible HKD 0)
11	4,768	8,801	3,026	3,370	5,827	6,993	1,673	2,110	2,425	3,108	3,481	7,168	3,292	4,154	9,786
21	6,128	10,811	3,123	3,478	5,835	7,002	1,766	2,230	2,578	3,192	3,718	7,601	3,336	4,207	9,858
31	8,294	15,180	4,781	5,325	8,313	9,977	2,256	2,874	3,342	4,384	5,087	10,759	4,420	5,548	12,687
41	10,956	19,668	5,501	6,127	10,158	12,190	2,661	3,415	3,971	5,320	6,156	12,941	5,524	6,902	15,416
51	15,594	27,354	7,701	8,578	15,342	18,467	4,502	5,866	6,821	8,379	9,895	18,885	8,450	10,539	23,390
61	21,309	38,390	12,232	13,624	24,798	29,849	7,251	9,247	10,508	13,781	16,222	31,928	13,984	17,503	39,524
71	29,599	57,132	20,337	22,652	42,021	50,572	12,736	16,595	19,297	25,536	29,792	59,214	25,708	32,254	73,596
81	46,718	88,370	30,003	33,419	61,866	74,438	20,849	27,167	31,590	41,618	48,594	94,343	40,273	50,531	115,297

^ Closed for new application.

*The above premium of TheOne Medical Solution is adjusted premium with effective from 1 September 2022. For details, please refer to the repricing pack of CANsurance Full Medical Plan/ CANsurance Full Medical Rider and TheOne Medical Solution/ TheOne Medical Rider.

The above product information and premium rates are as of 11 July 2022 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 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.