

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

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

Below is a comparison between the benefit terms of vBooster Medical Plan, Embrace Medical Plan^ with Optional Medical Booster Benefit – Standard, Superior and Premier Plan and CANsurance Full Medical Plan^ – Economy, Standard, Superior and Premier Plan. These products are issued by FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) (“FWD”) (VHIS provider registration number: 00036).

Benefit Terms	vBooster Medical Plan – VHIS Flexi Plan Certification Number:		Embrace Medical Plan^ (with Optional Medical Booster Benefit)			CANsurance Full Medical Plan^			
	Deductible (HKD)	Certification Number	Standard Plan	Superior Plan	Premier Plan	Economy Plan	Standard Plan	Superior Plan	Premier Plan
	0	F00069-01-000-01							
	16,000	F00069-02-000-01							
	25,000	F00069-03-000-01							
	50,000	F00069-04-000-01							
	100,000	F00069-05-000-01							
	180,000	F00069-06-000-01							
Area of cover	Worldwide - For Emergency Treatment; and for non-Emergency Treatment in Asia (including Australia and New Zealand): benefits payable according to vBooster Benefit Schedule - For non-Emergency Treatment outside Asia (including Australia and New Zealand): benefits payable according to the benefit schedule of the Standard Plan Terms and Benefits		Worldwide			Asia (excluding Australia and New Zealand)	Worldwide (excluding USA)		
	Except for psychiatric treatment and cash benefit for Confinement in Intensive Care Unit in Hong Kong which shall only be payable for Confinement in Hong Kong		Except for daily hospital cash benefit for confinement in general ward of public hospital in Hong Kong which shall only be payable for confinement in Hong Kong			Except for daily hospital cash for hospitalisation in a general ward of Hong Kong public hospitals which shall only be payable for confinement in Hong Kong		Except for daily hospital cash for hospitalisation in a general ward of Hong Kong public hospitals and daily hospital cash for hospitalisation in a standard ward room of Hong Kong private hospitals which shall only be payable for confinement in Hong Kong	
Ward class	Standard Ward Room		Standard Ward Room	Standard Semi-private room	Standard Private room	Standard Ward room		Standard Semi-private room	
Reimbursement calculation basis	Per Policy Year		Per Disability			Per Disability			

Benefit Terms	vBooster Medical Plan – VHIS Flexi Plan Certification Number:		Embrace Medical Plan^ (with Optional Medical Booster Benefit)			CANsurance Full Medical Plan^			
	Deductible (HKD)	Certification Number	Standard Plan	Superior Plan	Premier Plan	Economy Plan	Standard Plan	Superior Plan	Premie Plan
	0	F00069-01-000-01							
	16,000	F00069-02-000-01							
	25,000	F00069-03-000-01							
	50,000	F00069-04-000-01							
	100,000	F00069-05-000-01							
	180,000	F00069-06-000-01							
Lifetime Benefit Limit	Nil		HKD280,000 per policy Only applicable to Optional Medical Booster Benefit – after the Insured reaches the age of 74 (age next birthday)	HKD420,000 per policy Only applicable to Optional Medical Booster Benefit – after the Insured reaches the age of 74 (age next birthday)	HKD700,000 per policy Only applicable to Optional Medical Booster Benefit – after the Insured reaches the age of 74 (age next birthday)	Nil			
Deductible option	Applicable (HKD0 / 16,000 / 25,000 / 50,000 / 100,000 / 180,000)		Not applicable			Not applicable			
Waiting period	No restriction on Accident or Disease except: - 5-year waiting period for HIV and its related Disability - 90-day waiting period for first-dollar coverage- Deductible waived for designated crises - 1-year waiting period for pregnancy complications		- 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)			
Congenital Conditions	Covered		Not covered			Covered			
Unknown Pre-existing Conditions	Covered, but waiting period 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			
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)			
Psychiatric treatments	Covered, subject to Hong Kong only		Not covered			Not covered			
Self-inflicted injuries	Not covered		Not covered			Covered			

Benefit Terms	vBooster Medical Plan – VHIS Flexi Plan Certification Number:		Embrace Medical Plan^ (with Optional Medical Booster Benefit)			CANsurance Full Medical Plan^			
	Deductible (HKD)	Certification Number	Standard Plan	Superior Plan	Premier Plan	Economy Plan	Standard Plan	Superior Plan	Premier Plan
	0	F00069-01-000-01							
	16,000	F00069-02-000-01							
	25,000	F00069-03-000-01							
	50,000	F00069-04-000-01							
	100,000	F00069-05-000-01							
	180,000	F00069-06-000-01							
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)			
Supplementary major medical benefit	Not applicable		Applicable			Not applicable			
Underwriting	Full underwriting		Full underwriting			Full underwriting			

^ Closed for new application

Remark:

1. This comparison gives only a brief description on the product features and is for reference only. The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.
2. Benefit of the inforce MediPro01 & MediPro100 policies were automatically upgraded with same benefits offered under Embrace Medical Plan /Rider at the policy anniversary in 2011.

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

Below is a comparison between the benefit terms of vBooster Medical Plan and TheOne Medical Solution^ – Standard, Superior and Premier Plan. These products are issued by FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) (“FWD”) (VHIS provider registration number: 00036).

Benefit Terms	vBooster Medical Plan – VHIS Flexi Plan Certification Number:		TheOne Medical Solution^		
	Deductible (HKD)	Certification Number	Standard Plan	Superior Plan	Premier Plan
	0	F00069-01-000-01			
	16,000	F00069-02-000-01			
	25,000	F00069-03-000-01			
	50,000	F00069-04-000-01			
	100,000	F00069-05-000-01			
	180,000	F00069-06-000-01			
Area of cover	Worldwide - For Emergency Treatment; and for non-Emergency Treatment in Asia (including Australia and New Zealand): benefits payable according to vBooster Benefit Schedule - For non-Emergency Treatment outside Asia (including Australia and New Zealand): benefits payable according to the benefit schedule of the Standard Plan Terms and Benefits		Non-emergency and emergency treatments: Asia (excluding Australia and New Zealand)	Non-emergency and emergency treatments: Worldwide (Exclude US)	Non-emergency and emergency treatments: Worldwide
	Except for psychiatric treatment and cash benefit for Confinement in Intensive Care Unit in Hong Kong which shall only be payable for Confinement in Hong Kong		(Daily hospital cash for voluntary room and board stay below private room in private hospital in Hong Kong and daily hospital cash for confinement in general ward of public hospital in Hong Kong are only available in Hong Kong)		
Ward class	Standard Ward Room		Standard Private room		
Reimbursement calculation basis	Per Policy Year		Per Policy Year		
Lifetime Benefit Limit	Nil		HKD40,000,000	HKD60,000,000	HKD100,000,000
Deductible option	Applicable (HKD0 / 16,000 / 25,000 / 50,000 / 100,000 / 180,000)		Applicable (HKD0 / 40,000 / 80,000)		
Waiting period	No restriction on Accident or Disease except: (i) 5-year waiting period for HIV and its related Disability (ii) 90-day waiting period for first-dollar coverage - Deductible waived for designated crises (iii) 1-year waiting period for pregnancy complications		- Accident: 0 day - Disease: 30 days (complications associated with HIV infection are excluded – 5 years / covered pregnancy complication – 1 year)		
Congenital Conditions	Covered (No age restriction)		Covered (only for congenital condition which has manifested or been diagnosed after the Age of 16)		
Unknown Pre-existing Conditions	Covered, but waiting period applies - First 30 days of the first Policy Year: 0% - Starting from the 31st day of the first Policy Year: 100%		Not covered		
Prescribed Diagnostic Imaging Tests (e.g. “CT” scan, “MRI” scan, etc.)	Include Confinement and non-Confinement (Full cover)		Only for Confinement (Full cover)		
Psychiatric treatments	Covered, subject to Hong Kong only		Not covered	Covered	

Benefit Terms	vBooster Medical Plan — VHIS Flexi Plan Certification Number:		TheOne Medical Solution^		
	Deductible (HKD)	Certification Number	Standard Plan	Superior Plan	Premier Plan
	0	F00069-01-000-01			
	16,000	F00069-02-000-01			
	25,000	F00069-03-000-01			
	50,000	F00069-04-000-01			
	100,000	F00069-05-000-01			
	180,000	F00069-06-000-01			
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)		
Underwriting	Full underwriting		Full underwriting		

^ Closed for new application

Remark:

1. This comparison gives only a brief description on the product features and is for reference only. The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

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

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

Below is a comparison between the benefit items of vBooster Medical Plan and CANsurance Full Medical Plan^ – Economy and Standard Plan:

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 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
Nursing	<ul style="list-style-type: none"> - 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) 	<ul style="list-style-type: none"> - Private nurse's fee Full cover (Only applicable after the Insured's surgery or discharge from ICU) - Post-Confinement home nursing Full cover (maximum 31 days per disability within 31 days after discharge following surgery or ICU admission) 	<ul style="list-style-type: none"> - Private nurse's fee Full cover (Only applicable after the Insured's surgery or discharge from ICU) - Post-Confinement home nursing Full cover (maximum 31 days per disability within 31 days after discharge following surgery or ICU admission)
Companion bed	Full cover	Full cover	Full cover
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

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
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)	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, subject to Hong Kong only	Not applicable	Not applicable

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 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	\$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	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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
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)
Cash benefit for Day Case Procedure	\$500 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable	Not applicable
Cash benefit for top-up subsidy	\$500 per day of Confinement (Maximum 60 days per Policy Year)	Not applicable	Not applicable
Cash benefit for major and complex surgeries	Per surgery, subject to the categorisation of such surgery under the Schedule of Surgical Procedures — For \$0/\$16,000/\$25,000 Deductible: \$4,000 per major surgery \$8,000 per complex surgery For \$50,000/\$100,000/\$180,000 Deductible: \$800 per major surgery \$1,600 per complex surgery Maximum 1 major or complex surgery per day	Not applicable	Not applicable
Cash benefit for Confinement in Intensive Care Unit in Hong Kong	For \$0/\$16,000/\$25,000 Deductible: \$8,000 per Confinement For \$50,000/\$100,000/\$180,000 Deductible: \$1,600 per Confinement Confined in Intensive Care Unit in a Hospital in Hong Kong for at least 3 consecutive days per Confinement and the Eligible Expenses incurred during such Confinement period are payable in accordance with the Terms and Benefits, payable once only during the whole Confinement period	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
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
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and post-Confinement/Day Case Procedure outpatient care which means: 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))	\$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
Pregnancy complications	Full cover (12 months waiting period)	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
Additional benefit for Prescribed Non-surgical Cancer Treatments, kidney dialysis and organ or bone marrow transplantation	Eligible Expenses incurred in excess of the amounts payable under – (a) benefit item (j) of Basic benefits in Benefit Schedule for Prescribed Non-surgical Cancer Treatments; (b) benefit item (b) of Basic benefits in Benefit Schedule for kidney dialysis incurred during Confinement; (c) benefit item 5 of Enhanced benefits in Benefit Schedule for outpatient kidney dialysis; or (d) benefit items (a) - (i) of Basic benefits in Benefit Schedule for organ or bone marrow transplantation - Maximum benefit limit per Policy Year :\$2,000,000 per Policy Year	Not applicable	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
Total benefit limit			
Annual Benefit Limit (for vBooster Medical Plan) / Per Disability Limit for Hospitalisation benefits, surgical benefits and other medical benefits (for CANsurance Full Medical Plan)	\$8,000,000 per Policy Year	\$250,000 per Disability (\$500,000 per covered cancer)	\$350,000 per Disability (\$700,000 per covered cancer)
Lifetime Benefit Limit for hospitalisation benefits, surgical benefits and other medical benefits	Nil	Nil	Nil
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
Life enrichment program for Stroke	Available*	Not available	Not available
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	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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 vBooster 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 provisions 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 13 under II. Enhanced benefits.	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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 – vBooster Medical Plan (Certification Number: F00069-01-000-01 for Deductible HKD0, F00069-02-000-01 for Deductible HKD16,000, F00069-03-000-01 for Deductible HKD25,000, F00069-04-000-01 for Deductible HKD50,000, F00069-05-000-01 for Deductible HKD100,000, F00069-06-000-01 for Deductible HKD180,000). 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 vBooster Medical Plan and CANsurance Full Medical Plan^ – Superior and Premier Plan

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

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

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 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
Nursing	<ul style="list-style-type: none"> - 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) 	<ul style="list-style-type: none"> - Private nurse's fee Full cover (Only applicable after the Insured's surgery or discharge from ICU) - Post-Confinement home nursing Full cover (maximum 31 days per disability within 31 days after discharge following surgery or ICU admission) 	<ul style="list-style-type: none"> - Private nurse's fee Full cover (Only applicable after the Insured's surgery or discharge from ICU) - Post-Confinement home nursing Full cover (maximum 31 days per disability within 31 days after discharge following surgery or ICU admission)
Companion bed	Full cover	Full cover	Full cover
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

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
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)	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, subject to Hong Kong only	Not applicable	Not applicable

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 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)		
	\$160,000 per Accident/mastectomy based on the below mechanism – <u>Accident</u> Period after Accident For beautification or cosmetic purposes? 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 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 >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			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 or treatment for disease For beautification or cosmetic purposes? Yes No ≤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 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			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 or treatment for disease For beautification or cosmetic purposes? Yes No ≤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 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		
Reconstructive surgery benefit									

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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
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	Not applicable	\$800 per day (Maximum 60 days per Disability)	\$1,000 per day (Maximum 60 days per Disability)
Cash benefit for Day Case Procedure	\$500 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable	Not applicable
Cash benefit for top-up subsidy	\$500 per day of Confinement (Maximum 60 days per Policy Year)	Not applicable	Not applicable
Cash benefit for major and complex surgeries	Per surgery, subject to the categorisation of such surgery under the Schedule of Surgical Procedures — For \$0/\$16,000/\$25,000 Deductible: \$4,000 per major surgery \$8,000 per complex surgery For \$50,000/\$100,000/\$180,000 Deductible: \$800 per major surgery \$1,600 per complex surgery Maximum 1 major or complex surgery per day	Not applicable	Not applicable
Cash benefit for Confinement in Intensive Care Unit in Hong Kong	For \$0/\$16,000/\$25,000 Deductible: \$8,000 per Confinement For \$50,000/\$100,000/\$180,000 Deductible: \$1,600 per Confinement Confined in Intensive Care Unit in a Hospital in Hong Kong for at least 3 consecutive days per Confinement and the Eligible Expenses incurred during such Confinement period are payable in accordance with the Terms and Benefits, payable once only during the whole Confinement period	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
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
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and Post Confinement/Day Case Procedure outpatient care which means: 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))	\$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
Pregnancy complications	Full cover (12 months waiting period)	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
Additional benefit for Prescribed Non-surgical Cancer Treatments, kidney dialysis and organ or bone marrow transplantation	Eligible Expenses incurred in excess of the amounts payable under – (a) benefit item (j) of Basic benefits in Benefit Schedule for Prescribed Non-surgical Cancer Treatments; (b) benefit item (b) of Basic benefits in Benefit Schedule for kidney dialysis incurred during Confinement; (c) benefit item 5 of Enhanced benefits in Benefit Schedule for outpatient kidney dialysis; or (d) benefit items (a) - (i) of Basic benefits in Benefit Schedule for organ or bone marrow transplantation - Maximum benefit limit per Policy Year : \$2,000,000 per Policy Year	Not applicable	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
Total benefit limit			
Annual Benefit Limit (for vBooster Medical Plan) / Per Disability Limit for Hospitalisation benefits, surgical benefits and other medical benefits (for CANsurance Full Medical Plan)	\$8,000,000 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	Nil	Nil	Nil
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
Life enrichment program for Stroke	Available*	Not available	Not available
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	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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 vBooster 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 provisions 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 13 under II. Enhanced benefits.	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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 – vBooster Medical Plan (Certification Number: F00069-01-000-01 for Deductible HKD0, F00069-02-000-01 for Deductible HKD16,000, F00069-03-000-01 for Deductible HKD25,000, F00069-04-000-01 for Deductible HKD50,000, F00069-05-000-01 for Deductible HKD100,000, F00069-06-000-01 for Deductible HKD180,000). 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 information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

Comparison between the benefit items of vBooster Medical Plan and Embrace Medical Plan with Optional Medical Booster Benefit^ – Standard Plan

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

Below is a comparison between the benefit items of vBooster Medical Plan and Embrace Medical Plan^ with Optional Medical Booster Benefit – Standard Plan:

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	Embrace Medical Plan^ – Standard 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
Premium payment term (age next birthday)	To age 101	To age 100
Hospitalisation benefits		
Room and board	Full cover	\$825 per day (up to a maximum of 150 days)
Intensive care	Full cover	\$2,600 per day (up to a maximum of 30 days)
Attending doctor's visit fee	Full cover	\$825 per day (up to a maximum of 150 days)
Specialist's fee	Full cover	\$6,500
Miscellaneous charges	Full cover	\$10,000
Nursing	<ul style="list-style-type: none"> - 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) 	\$700 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)	\$500 per day (up to a maximum of 30 days and restricted to Insured aged below 12)
Surgical benefits		
Surgeon's fee	Full cover regardless of the surgical category	<ul style="list-style-type: none"> - Class 5 \$68,000 - Class 4 \$38,000 - Class 3 \$22,000 - Class 2 \$10,500 - Class 1 \$4,400
Anaesthetist's fee	Full cover	35% of Surgeon's fee payable
Operating theatre charges	Full cover	35% of Surgeon's fee payable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	Embrace Medical Plan^ — Standard Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
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)	\$300 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: \$10,000 per Disability (Including Confinement only)
Prescribed Non-surgical Cancer Treatments	Full cover	\$80,000 per policy
Psychiatric treatments	\$40,000 per Policy Year, subject to Hong Kong only	Not applicable

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)			Embrace Medical Plan^ – Standard 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 –		
	<u>Accident</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?	
		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 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
	>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
	<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	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	Embrace Medical Plan^ – Standard 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: \$10,000 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
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	\$5,000
Emergency outpatient dental treatment	Full cover	Not applicable
Daily hospital cash benefit (for Confinement in general ward of public Hospital in Hong Kong)	Not applicable	\$300 per day (up to a maximum of 60 days)
Cash benefit for Day Case Procedure	\$500 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable
Cash benefit for top-up subsidy	\$500 per day of Confinement (Maximum 60 days per Policy Year)	Not applicable
Cash benefit for major and complex surgeries	Per surgery, subject to the categorisation of such surgery under the Schedule of Surgical Procedures – For \$0/\$16,000/\$25,000 Deductible: \$4,000 per major surgery \$8,000 per complex surgery For \$50,000/\$100,000/\$180,000 Deductible: \$800 per major surgery \$1,600 per complex surgery Maximum 1 major or complex surgery per day	Not applicable
Cash benefit for Confinement in Intensive Care Unit in Hong Kong	For \$0/\$16,000/\$25,000 Deductible: \$8,000 per Confinement For \$50,000/\$100,000/\$180,000 Deductible: \$1,600 per Confinement Confined in Intensive Care Unit in a Hospital in Hong Kong for at least 3 consecutive days per Confinement and the Eligible Expenses incurred during such Confinement period are payable in accordance with the Terms and Benefits, payable once only during the whole Confinement period	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	Embrace Medical Plan^ — Standard Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
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)	\$200,000 per policy (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 (SMM)	Not applicable	<ul style="list-style-type: none"> - Entitled ward class: Standard Ward 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 \$100,000 <ul style="list-style-type: none"> ● 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 <ul style="list-style-type: none"> ● Overall Lifetime Benefit Limit per Policy is \$280,000 ● 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	\$250 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: \$300 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: 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))	Applicable (covered under Post-hospitalization Consultation, which means: \$300 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
Stroke rehabilitation treatment	<ul style="list-style-type: none"> - 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) 	<ul style="list-style-type: none"> - Home facility enhancement benefit Not applicable - Stroke ancillary benefit Applicable (covered under Post-hospitalisation Consultation, which means: \$300 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
Pregnancy complications	Full cover (12 months waiting period)	Not applicable

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	Embrace Medical Plan^ – Standard Plan (with Optional Medical Booster Benefit) Benefit limit (HKD) (reimbursement per Disability)
Additional benefit for Prescribed Non-surgical Cancer Treatments, kidney dialysis and organ or bone marrow transplantation	Eligible Expenses incurred in excess of the amounts payable under – (a) benefit item (j) of Basic benefits in Benefit Schedule for Prescribed Non-surgical Cancer Treatments; (b) benefit item (b) of Basic benefits in Benefit Schedule for kidney dialysis incurred during Confinement; (c) benefit item 5 of Enhanced benefits in Benefit Schedule for outpatient kidney dialysis; or (d) benefit items (a) - (i) of Basic benefits in Benefit Schedule for organ or bone marrow transplantation - Maximum benefit limit per Policy Year : \$2,000,000 per Policy Year	Not applicable
Hospice care	\$100,000 per Policy Year	Not applicable
Total benefit limit		
Annual Benefit Limit (for vBooster Medical Plan) / Per Disability Limit for hospitalisation benefits, surgical benefits and other medical benefits (for Embrace Medical Plan)	\$8,000,000 per Policy Year	Nil
Lifetime Benefit Limit for hospitalisation benefits, surgical benefits and other medical benefits	Nil	Nil
Death benefit		
Death benefit	\$40,000	H\$10,000
Accidental death benefit	\$40,000	\$10,000
Other services		
Second Medical Opinion	Available*	Not available
International SOS 24-hour Worldwide Assistance Services	Available*	Available
Ancillary service	PREMIER THE ONEcierge*	Not available
Life enrichment program for Stroke	Available*	Not available

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	Embrace Medical Plan^ – Standard Plan (with Optional Medical Booster Benefit) 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 vBooster 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%
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
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 provisions 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 13 under II. Enhanced benefits.	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

^ Closed for new application.

*This benefit/service is optional and does not form part of the Terms and Benefits of the VHIS Certified Plan – vBooster Medical Plan (Certification Number: F00069-01-000-01 for Deductible HKD0, F00069-02-000-01 for Deductible HKD16,000, F00069-03-000-01 for Deductible HKD25,000, F00069-04-000-01 for Deductible HKD50,000, F00069-05-000-01 for Deductible HKD100,000, F00069-06-000-01 for Deductible HKD180,000). 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:

1. This comparison gives only a brief description on the product features and is for reference only. The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.
2. Benefit of the inforce MediPro01 & MediPro100 policies were automatically upgraded with same benefits offered under Embrace Medical Plan /Rider at the policy anniversary in 2011.

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

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

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

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 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
Nursing	<ul style="list-style-type: none"> - 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 aged below 12)	\$1,800 per day (up to a maximum of 30 days and restricted to Insured aged below 12)

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
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 - 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)	\$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 per policy	\$200,000 per policy
Psychiatric treatments	\$40,000 per Policy Year, subject to Hong Kong only	Not applicable	Not applicable

	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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 –		
	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, 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
	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	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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: \$6,500 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
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)	\$900 per day (up to a maximum of 60 days)
Cash benefit for Day Case Procedure	\$500 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable	Not applicable
Cash benefit for top-up subsidy	\$500 per day of Confinement (Maximum 60 days per Policy Year)	Not applicable	Not applicable
Cash benefit for major and complex surgeries	Per surgery, subject to the categorisation of such surgery under the Schedule of Surgical Procedures — For \$0/\$16,000/\$25,000 Deductible: \$4,000 per major surgery \$8,000 per complex surgery For \$50,000/\$100,000/\$180,000 Deductible: \$800 per major surgery \$1,600 per complex surgery Maximum 1 major or complex surgery per day	Not applicable	Not applicable
Cash benefit for Confinement in Intensive Care Unit in Hong Kong	For \$0/\$16,000/\$25,000 Deductible: \$8,000 per Confinement For \$50,000/\$100,000/\$180,000 Deductible: \$1,600 per Confinement Confined in Intensive Care Unit in a Hospital in Hong Kong for at least 3 consecutive days per Confinement and the Eligible Expenses incurred during such Confinement period are payable in accordance with the Terms and Benefits, payable once only during the whole Confinement period	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
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 per policy (Include the Medical Services or treatments received during Confinement or at a clinic, day case procedure centre or Hospital (non- Confinement) only)	\$500,000 per policy (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 (SMM)	Not applicable	<ul style="list-style-type: none"> - 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 ● Overall Lifetime Benefit Limit per Policy is \$420,000 ● Overall Lifetime Benefit Limit per life is \$1,200,000 	<ul style="list-style-type: none"> - 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 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 ● 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	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 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)
	Applicable (covered under Pre- and post- Confinement/ Day Case Procedure outpatient care, which means: 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))	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			
Rehabilitation treatment	\$100,000 per Policy Year	Not applicable	Not applicable
Stroke rehabilitation treatment	<ul style="list-style-type: none"> - 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) 	<ul style="list-style-type: none"> - 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 	<ul style="list-style-type: none"> - 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
Pregnancy complications	Full cover (12 months waiting period)	Not applicable	Not applicable
Additional benefit for Prescribed Non-surgical Cancer Treatments, kidney dialysis and organ or bone marrow transplantation	<p>Eligible Expenses incurred in excess of the amounts payable under –</p> <ul style="list-style-type: none"> (a) benefit item (j) of Basic benefits in Benefit Schedule for Prescribed Non-surgical Cancer Treatments; (b) benefit item (b) of Basic benefits in Benefit Schedule for kidney dialysis incurred during Confinement; (c) benefit item 5 of Enhanced benefits in Benefit Schedule for outpatient kidney dialysis; or (d) benefit items (a) - (i) of Basic benefits in Benefit Schedule for organ or bone marrow transplantation <ul style="list-style-type: none"> - Maximum benefit limit per Policy Year : \$2,000,000 per Policy Year 	Not applicable	Not applicable
Hospice care	\$100,000 per Policy Year	Not applicable	Not applicable

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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)
Total benefit limit			
Annual Benefit Limit (for vBooster Medical Plan)/ Per Disability Limit for hospitalisation benefits, surgical benefits and other medical benefits (for Embrace Medical Plan)	\$8,000,000 per Policy Year	Nil	Nil
Lifetime Benefit Limit for hospitalisation benefits, surgical benefits and other medical benefits	Nil	Nil	Nil
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
Life enrichment program for Stroke	Available*	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 vBooster 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	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 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	<p>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–</p> <ul style="list-style-type: none"> - suffers any of the designated crises as stated in the Supplement – First-dollar coverage – Deductible waived for designated crises under the Policy provisions 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 13 under II. Enhanced benefits. 	Not applicable	Not applicable
Special benefit for infant	<p>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.*</p>	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 – vBooster Medical Plan (Certification Number: F00069-01-000-01 for Deductible HKD0, F00069-02-000-01 for Deductible HKD16,000, F00069-03-000-01 for Deductible HKD25,000, F00069-04-000-01 for Deductible HKD50,000, F00069-05-000-01 for Deductible HKD100,000, F00069-06-000-01 for Deductible HKD180,000). 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:

1. This comparison gives only a brief description on the product features and is for reference only. The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.
2. Benefit of the inforce MediPro01 & MediPro100 policies were automatically upgraded with same benefits offered under Embrace Medical Plan /Rider at the policy anniversary in 2011.

Comparison between the benefit items of vBooster Medical Plan and TheOne Medical Solution^

The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

Below is a comparison between the benefit items of vBooster Medical Plan and TheOne Medical Solution^:

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Premier 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			
Intensive care	Full cover			
Attending doctor's visit fee	Full cover			
Specialist's fee	Full cover			
Miscellaneous charges	Full cover			
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 (subject to services provided by 1 Registered Nurse per day)		
		Maximum 30 days per policy year	Maximum 60 days per policy year	Maximum 90 days per policy year
		(maximum 180 days per lifetime)		
		- Post-Confinement home nursing Full cover (up to a maximum of 31 days per policy year within 31 days after discharge from hospitalization following surgery or admission to ICU, subject to services provided by 1 Registered Nurse per day)		
Companion bed	Full cover			
Surgical benefits				
Surgeon's fee	Full cover regardless of the surgical category	Full cover		
Anaesthetist's fee	Full cover			
Operating theatre charges	Full cover			

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)
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)	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 only confinement)		
Prescribed Non-surgical Cancer Treatments	Full cover			
Psychiatric treatments	\$40,000 per Policy Year, subject to Hong Kong only	Not applicable	Full cover (up to maximum 30 days per policy year, maximum 180 days per life)	

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)			TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)		TheOne Medical Solution^ – Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)		TheOne Medical Solution^ – Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)	
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 –					
	<u>Accident</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?				
		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			
	<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	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)
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		
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 (within 3 months after occurrence of Accident)	Full cover (within 2 weeks after occurrence of accident)		
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)		
Daily Hospital Cash for Voluntary Room and Board Stay Below Private Room (Stay in private hospital in Hong Kong)	Not applicable	\$1,500 per day (Maximum 30 days per policy year)		
Cash benefit for Day Case Procedure	\$500 per procedure (Maximum 1 Day Case Procedure per day)	Not applicable		
Cash benefit for top-up subsidy	\$500 per day of Confinement (Maximum 60 days per Policy Year)	Not applicable		
Cash benefit for major and complex surgeries	Per surgery, subject to the categorisation of such surgery under the Schedule of Surgical Procedures – For \$0/\$16,000/\$25,000 Deductible: \$4,000 per major surgery \$8,000 per complex surgery For \$50,000/\$100,000/\$180,000 Deductible: \$800 per major surgery \$1,600 per complex surgery Maximum 1 major or complex surgery per day	Not applicable		
Cash benefit for Confinement in Intensive Care Unit in Hong Kong	For \$0/\$16,000/\$25,000 Deductible: \$8,000 per Confinement For \$50,000/\$100,000/\$180,000 Deductible: \$1,600 per Confinement Confined in Intensive Care Unit in a Hospital in Hong Kong for at least 3 consecutive days per Confinement and the Eligible Expenses incurred during such Confinement period are payable in accordance with the Terms and Benefits, payable once only during the whole Confinement period	Not applicable		

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)
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		
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	\$350 per visit - Within 60 days after discharge from hospitalization - Maximum 1 visit per day - Up to 10 visits per policy year	
Physiotherapist or chiropractor consultation	Applicable (covered under Pre- and post-Confinement/ Day Case Procedure outpatient care, which means: 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))	Not applicable		
HIV / AIDS Treatment	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		
Pregnancy complications	Full cover (12-month waiting period)			
Additional benefit for Prescribed Non-surgical Cancer Treatments, kidney dialysis and organ or bone marrow transplantation (applicable to vBooster Medical Plan)/ Additional Annual Limit for Organ and Bone Marrow Transplantation, Chemotherapy and Radiotherapy and Kidney Dialysis (applicable to TheOne Medical Solution)	Eligible Expenses incurred in excess of the amounts payable under – (a) benefit item (j) of Basic benefits in Benefit Schedule for Prescribed Non-surgical Cancer Treatments; (b) benefit item (b) of Basic benefits in Benefit Schedule for kidney dialysis incurred during Confinement; (c) benefit item 5 of Enhanced benefits in Benefit Schedule for outpatient kidney dialysis; or (d) benefit items (a) - (i) of Basic benefits in Benefit Schedule for organ or bone marrow transplantation - Maximum benefit limit per Policy Year : \$2,000,000 per Policy Year	Eligible Expenses incurred in excess of the amounts payable under Organ and Bone Marrow Transplantation, Chemotherapy and Radiotherapy and Kidney Dialysis		
		\$1,000,000 per policy year	\$1,500,000 per policy year	\$2,000,000 per policy year
Hospice care	\$100,000 per Policy Year	Not applicable		

Benefit items	vBooster Medical Plan — VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ — Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)
Total benefit limit				
Annual Benefit Limit for hospitalisation benefits, surgical benefits and other medical benefits	\$8,000,000 per Policy Year	\$8,000,000 per Policy Year	\$12,000,000 per Policy Year	\$16,000,000 per Policy Year
Lifetime Benefit Limit for hospitalisation benefits, surgical benefits and other medical benefits	Nil	\$40,000,000	\$60,000,000	\$100,000,000
Death benefit				
Death benefit	\$40,000	\$80,000		
Accidental death benefit	\$40,000	\$80,000		
Other services				
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		
Life enrichment program for Stroke	Available*	Not available		
Health check-up Benefit	Not applicable		Include health check-up:	
			For \$0 deductible:	
			\$4,000 payable once every 2 consecutive policy years	\$6,000 payable once every 2 consecutive policy years
			For other deductibles:	
			\$2,000 payable once every 2 consecutive policy years	\$3,000 payable once every 2 consecutive policy years

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)
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 vBooster 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)		

Benefit items	vBooster Medical Plan – VHIS Flexi Plan Certification Number: F00069 Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Standard Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Superior Plan Benefit limit (HKD) (reimbursement per Policy Year)	TheOne Medical Solution^ – Premier Plan Benefit limit (HKD) (reimbursement per Policy Year)
First-dollar coverage – Deductible waived for designated crises	<p>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–</p> <ul style="list-style-type: none"> - suffers any of the designated crises as stated in the Supplement – First-dollar coverage – Deductible waived for designated crises under the Policy provisions 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 13 under II. Enhanced benefits. 	<p>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.</p>		
Special benefit for infant	<p>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.*</p>	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 – vBooster Medical Plan (Certification Number: F00069-01-000-01 for Deductible HKD0, F00069-02-000-01 for Deductible HKD16,000, F00069-03-000-01 for Deductible HKD25,000, F00069-04-000-01 for Deductible HKD50,000, F00069-05-000-01 for Deductible HKD100,000, F00069-06-000-01 for Deductible HKD180,000). 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:

1. This comparison gives only a brief description on the product features and is for reference only. The information does not contain the full terms and conditions, exclusions and key product risks of the policy. For details, please refer to relevant product brochure and terms and conditions.

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

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

Male (HKD – annual premium)

Age (age next birthday)	Embrace Medical Plan^ with Optional Medical Booster Benefit^			CANsurance Full Medical Plan^*				vBooster Medical Plan– VHIS Flexi Plan					
								Certification Number:					
								Deductible (HKD)			Certification Number		
								0			F00069-01-000-01		
								16,000			F00069-02-000-01		
								25,000			F00069-03-000-01		
								50,000			F00069-04-000-01		
								100,000			F00069-05-000-01		
	180,000			F00069-06-000-01									
Standard	Superior	Premier	Economy	Standard	Superior	Premier	Deductible HKD 180,000	Deductible HKD 100,000	Deductible HKD 50,000	Deductible HKD 25,000	Deductible HKD 16,000	Deductible HKD 0	
11	2,265	4,354	8,028	3,672	4,090	7,070	8,484	1,501	1,688	1,893	2,847	3,307	5,376
21	2,539	4,821	8,794	2,813	3,133	5,972	7,167	1,586	1,784	2,062	2,967	3,458	5,701
31	3,249	6,311	11,859	3,987	4,440	9,022	10,826	1,909	2,156	2,507	3,908	4,731	7,531
41	4,268	8,434	15,685	4,727	5,264	10,833	13,001	2,260	2,561	2,978	4,948	5,725	9,059
51	6,607	12,601	23,686	7,260	8,087	16,492	19,851	3,854	4,400	5,116	7,960	9,202	13,220
61	10,882	20,293	36,639	13,573	15,118	29,180	35,125	6,137	6,935	7,881	13,092	15,086	22,350
71	18,677	34,241	54,097	26,389	29,393	55,698	67,034	13,810	15,765	18,332	25,025	29,196	41,450
81	27,231	53,350	89,969	40,824	45,471	87,126	104,832	22,608	25,809	30,011	40,786	47,622	75,474

Age (age next birthday)	TheOne Medical Solution^^									vBooster Medical Plan– VHIS Flexi Plan					
										Certification Number:					
										Deductible (HKD)		Certification Number			
										0		F00069-01-000-01			
										16,000		F00069-02-000-01			
										25,000		F00069-03-000-01			
										50,000		F00069-04-000-01			
										100,000		F00069-05-000-01			
										180,000		F00069-06-000-01			
	Standard Plan			Superior Plan			Premier Plan			Deductible HKD 180,000	Deductible HKD 100,000	Deductible HKD 50,000	Deductible HKD 25,000	Deductible HKD 16,000	Deductible HKD 0
	Deductible HKD 80,000	Deductible HKD 40,000	Deductible HKD 0	Deductible HKD 80,000	Deductible HKD 40,000	Deductible HKD 0	Deductible HKD 80,000	Deductible HKD 40,000	Deductible HKD 0						
11	3,292	4,154	9,786	4,007	4,989	11,965	7,538	9,605	21,039	1,501	1,688	1,893	2,847	3,307	5,376
21	3,336	4,207	9,858	4,611	5,687	13,390	8,486	10,781	23,458	1,586	1,784	2,062	2,967	3,458	5,701
31	4,420	5,548	12,687	5,996	7,496	17,092	9,534	12,033	26,134	1,909	2,156	2,507	3,908	4,731	7,531
41	5,524	6,902	15,416	7,120	8,925	19,989	11,732	14,800	32,367	2,260	2,561	2,978	4,948	5,725	9,059
51	8,450	10,539	23,390	10,433	13,086	29,396	17,783	22,565	48,938	3,854	4,400	5,116	7,960	9,202	13,220
61	13,984	17,503	39,524	18,881	23,682	53,847	30,304	38,596	84,206	6,137	6,935	7,881	13,092	15,086	22,350
71	25,708	32,254	73,596	36,050	45,231	103,205	52,696	67,149	147,087	13,810	15,765	18,332	25,025	29,196	41,450
81	40,273	50,531	115,297	53,108	66,631	152,036	79,764	101,640	222,639	22,608	25,809	30,011	40,786	47,622	75,474

Female (HKD – annual premium)

Age (age next birthday)	Embrace Medical Plan^ with Optional Medical Booster Benefit^			CANSurance Full Medical Plan^*				vBooster Medical Plan – VHIS Flexi Plan					
								Certification Number:					
								Deductible (HKD)			Certification Number		
								0			F00069-01-000-01		
								16,000			F00069-02-000-01		
								25,000			F00069-03-000-01		
								50,000			F00069-04-000-01		
								100,000			F00069-05-000-01		
								180,000			F00069-06-000-01		
	Standard	Superior	Premier	Economy	Standard	Superior	Premier	Deductible HKD 180,000	Deductible HKD 100,000	Deductible HKD 50,000	Deductible HKD 25,000	Deductible HKD 16,000	Deductible HKD 0
11	2,719	5,126	9,462	3,390	3,775	6,527	7,833	1,501	1,688	1,893	2,847	3,307	5,376
21	3,441	6,588	11,623	3,498	3,896	6,536	7,843	1,586	1,784	2,062	2,967	3,458	5,701
31	4,365	8,917	16,320	5,355	5,964	9,311	11,175	1,909	2,156	2,507	3,908	4,731	7,531
41	5,701	11,779	21,144	6,162	6,863	11,377	13,653	2,260	2,561	2,978	4,948	5,725	9,059
51	7,965	16,764	29,406	8,626	9,608	17,184	20,684	3,854	4,400	5,116	7,960	9,202	13,220
61	11,423	22,909	41,271	13,700	15,259	27,774	33,431	6,137	6,935	7,881	13,092	15,086	22,350
71	17,551	31,820	61,418	22,778	25,371	47,064	56,641	13,810	15,765	18,332	25,025	29,196	41,450
81	25,702	50,223	94,998	33,604	37,430	69,290	83,371	22,608	25,809	30,011	40,786	47,622	75,474

Age (age next birthday)	TheOne Medical Solution^*									vBooster Medical Plan – VHIS Flexi Plan					
										Certification Number:					
										Deductible (HKD)			Certification Number		
										0			F00069-01-000-01		
										16,000			F00069-02-000-01		
										25,000			F00069-03-000-01		
										50,000			F00069-04-000-01		
										100,000			F00069-05-000-01		
										180,000			F00069-06-000-01		
	Standard Plan			Superior Plan			Premier Plan			Deductible HKD 180,000	Deductible HKD 100,000	Deductible HKD 50,000	Deductible HKD 25,000	Deductible HKD 16,000	Deductible HKD 0
	Deductible HKD 80,000	Deductible HKD 40,000	Deductible HKD 0	Deductible HKD 80,000	Deductible HKD 40,000	Deductible HKD 0	Deductible HKD 80,000	Deductible HKD 40,000	Deductible HKD 0						
11	3,292	4,154	9,786	4,007	4,989	11,965	7,538	9,605	21,039	1,501	1,688	1,893	2,847	3,307	5,376
21	3,336	4,207	9,858	4,611	5,687	13,390	8,486	10,781	23,458	1,586	1,784	2,062	2,967	3,458	5,701
31	4,420	5,548	12,687	5,996	7,496	17,092	9,534	12,033	26,134	1,909	2,156	2,507	3,908	4,731	7,531
41	5,524	6,902	15,416	7,120	8,925	19,989	11,732	14,800	32,367	2,260	2,561	2,978	4,948	5,725	9,059
51	8,450	10,539	23,390	10,433	13,086	29,396	17,783	22,565	48,938	3,854	4,400	5,116	7,960	9,202	13,220
61	13,984	17,503	39,524	18,881	23,682	53,847	30,304	38,596	84,206	6,137	6,935	7,881	13,092	15,086	22,350
71	25,708	32,254	73,596	36,050	45,231	103,205	52,696	67,149	147,087	13,810	15,765	18,332	25,025	29,196	41,450
81	40,273	50,531	115,297	53,108	66,631	152,036	79,764	101,640	222,639	22,608	25,809	30,011	40,786	47,622	75,474

^ Closed for new application.

+ The above premium of Embrace Medical Plan with Optional Medical Booster Benefit is adjusted premium with effect from 1 November 2021. For details, please refer to the repricing pack of Embrace Medical Plan/ Rider, MediPro100/ Rider and MediPro01/ Rider.

* The above premiums of CANSurance Full Medical Plan and TheOne Medical Solution are adjusted premiums with effect 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 Solution Rider.

Remarks:

- The above product information and premium rates are as of 9 January 2023 and are 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.
- Benefit of the inforce MediPro01 & MediPro100 policies were automatically upgraded with same benefits offered under Embrace Medical Plan / Rider at the policy anniversary in 2011.