

Cross-Border Medical Vantage 跨境醫療優越方案

# GBAssure Outpatient Plan 大灣區智通行門診計劃

Borderless outpatient cover for you and your family,  
always within reach





Covered GBA cities

# GBAssure Outpatient Plan

Managing your health across borders isn't always easy. Whether you're living, working, or frequently travelling within cities in the Greater Bay Area ("GBA"), finding quality outpatient and dental care that fits your schedule can be challenging.

That's why we bring you GBAssure Outpatient Plan ("the Plan")—a solution designed to simplify your healthcare experience, giving you seamless access to outpatient and dental services within Hong Kong, Designated Mainland GBA Cities<sup>1</sup> and Macau ("the District"). With an easy application process and no health underwriting is required, getting covered is effortless—ensuring that quality care is always available to you.

Sometimes, visiting a clinic for General Practitioner Face-to-face Consultation may not be convenient. To make healthcare even more accessible, the Plan is supported by the Booking Platform that allows you to make appointments, attend General Practitioner Online Consultation<sup>2</sup>, and arrange for medicine delivery<sup>3</sup>—all in just a few taps.

Because healthcare is a family matter, the Plan offers **First-in-market<sup>+</sup>** options of Family Plans with physical and mental health protection for three generations under one Policy—ensuring your loved ones receive the care they deserve.

At FWD, we believe healthcare should be simple and accessible. That's why we've created a solution that empowers you and your family's well-being, from preventive care to physical and mental health support.



## Did you know?



People in Hong Kong made up to 81.91 million trips to Mainland China in 2024, up 53% on year<sup>a</sup>



In 2023, the total outpatient visits in GBA reached 652 million, of which 19.6 million were in Hong Kong<sup>b</sup>



Only about 30% of people in Hong Kong are entitled to medical protection covered consultation with practitioner of Western medicine<sup>c</sup>



Over 70% of people in Hong Kong supported cross-border medical cooperation<sup>d</sup>

**Source of information**

<sup>a</sup> HK01, 6 January 2025 (北上 | 2024年港人北上8191萬人次料花557億 遊日本支出金額巨大)

<sup>b</sup> PWC- “Healthy Greater Bay Area”: Integration and Reciprocity, September 2024 (PwC China: “Healthy Greater Bay Area”: Integration and Reciprocity)

<sup>c</sup> “Thematic Household Survey Report No. 74”, Hong Kong Census and Statistics Department, December 2021 Thematic Household Survey Report No. 74 主題性住戶統計調查第74號報告書

<sup>d</sup> HK01, 6 June 2022 調查揭85%大灣區港人內地求醫現困難 團體促擴闊醫療券適用內地

The above information provided is based on the data from sources that FWD believes to be reliable, but it has not been independently verified by FWD. FWD makes no representation or warranty and accepts no responsibility or liability as to the accuracy, completeness or fitness for any particular purpose of the information. FWD shall not be responsible or liable for any loss or damages arising from the use of or reliance on such information.





# Key Features of GBAssure Outpatient Plan



Leading Panel Network covers Hong Kong, Designated Mainland GBA Cities<sup>1</sup> and Macau



Covering 3 types of consultation

General Practitioner Face-to-face and Online Consultation<sup>2</sup>

Chinese Medicine Practitioner Face-to-face Consultation<sup>4</sup>

Psychiatric Consultation<sup>5</sup>



Extra benefits for preventive care

Medical Check-up<sup>6</sup>

Dental Care<sup>7</sup>

First-in-market<sup>+</sup>

Colonoscopy Benefits<sup>8</sup>



Broadening coverage from prevention, diagnosis and treatment to recovery

including Laboratory Tests and Diagnostic Imaging<sup>4,12</sup>



Access to seamless outpatient services with the Booking Platform



Boosted flexibility with Plan Level options for individual and family

First-in-market<sup>+</sup>

One premium for unlimited number of Family Member<sup>9</sup> under Family Plans



Simple application without health underwriting and medical examination

## Leading Panel Network covers Hong Kong, Designated Mainland GBA Cities<sup>1</sup> and Macau

The Plan provides you with leading Panel Network, which covers Hong Kong, Designated Mainland GBA Cities<sup>1</sup> and Macau, ensuring you can always receive the most suitable outpatient treatment at affordable premium. The Plan covers General Practitioner Face-to-face and Online Consultation<sup>2</sup>, giving you access to quality care with utmost convenience when travelling within cities in GBA.



## Covering 3 types of consultation

### 2 channels of General Practitioner Consultation

#### General Practitioner Face-to-face Consultation

You can have General Practitioner Face-to-face Consultation within the District, and receive the medication instantly after the consultation.

#### General Practitioner Online Consultation with Medicine Delivery<sup>2,3</sup>

Sometimes, reaching out to a doctor in person may not be convenient. To meet your needs and make healthcare even more accessible, the Plan is supported by the Booking Platform that allows you to make appointments, have General Practitioner Online Consultation<sup>2</sup>, and arrange for medicine delivery<sup>3</sup> to your home after the online consultation— all at your fingertips.

**First-in-market<sup>+</sup>** The Co-payment<sup>10</sup> is waived if no drug prescription is provided after the online consultation.

You will also have peace of mind knowing that Additional General Practitioner Online Consultation<sup>2</sup> (without any prescribed medicine and medicine delivery) will be available after the maximum number of visits for General Practitioner Face-to-face and Online Consultation<sup>2</sup> in aggregate has been fully utilised in the corresponding Policy Year. Furthermore, there is no limit to the number of visits for Additional General Practitioner Online Consultation<sup>2</sup> in Designated Mainland GBA Cities<sup>1</sup>.

### Chinese Medicine Practitioner Face-to-face Consultation<sup>4</sup>

Apart from General Practitioner Consultation, the Plan also covers Chinese Medicine Practitioner Face-to-face Consultation<sup>4</sup> in Designated Mainland GBA Cities<sup>1</sup>, giving you extra peace of mind protection throughout the recovery journey.

### Psychiatric Consultation<sup>5</sup>

Your mental health is worth being covered, the Plan provides coverage for Psychiatric Consultation<sup>5</sup> to give you comprehensive protection from the inside out.

For the geographical coverage of the above consultations, please refer to the “Benefit Schedule” section below.



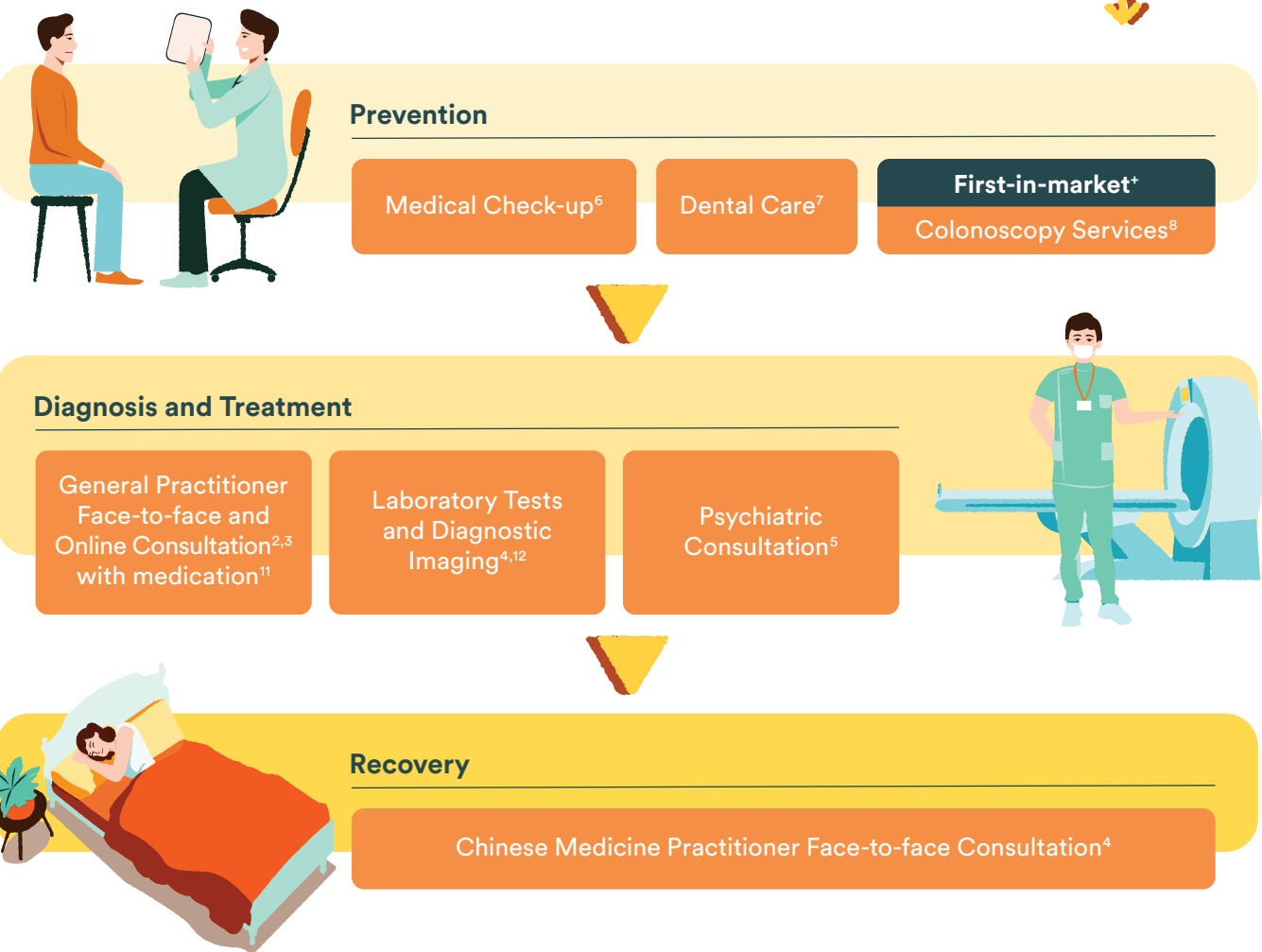


Extra benefits for preventive care

Prevention is always better than cure, the Plan offers you coupons for medical check-up<sup>6</sup>, dental care<sup>7</sup> and **First-in-market<sup>+</sup>** colonoscopy services<sup>8</sup> on a regular basis, encouraging you and your Family Member<sup>9</sup> to adopt a healthier lifestyle. For details, please refer to the “Benefit Schedule” section below.

Broadening the protection coverage

On top of General Practitioner Consultation, the Plan provides comprehensive coverage— from prevention, diagnosis and treatment to recovery, giving you the strongest possible support throughout the patient journey.



For details, please refer to the “Benefit Schedule” section below.

Access to seamless outpatient services with the Booking Platform

With access to the Booking Platform, you can enjoy a series of Health Services, medical check-up<sup>6</sup>, dental care<sup>7</sup> or colonoscopy services<sup>8</sup> from our Panel Network within the District seamlessly. Once your Policy becomes effective, you can activate your plan on the Booking Platform via FWD eServices, hassle-free health experience starts here. For details, please refer to the “GBAssure Outpatient Plan— Introduction of Booking Platform” leaflet.



Boosted flexibility with Plan Level options for individual and family

The Plan makes available 5 Plan Level options to assure your needs being well catered for. We endeavour to safeguard the outpatient needs of you and your Family Members<sup>9</sup>, **First-in-market<sup>+</sup>** with the options of Family Plans, the Plan provides physical and mental health coverage across three generations under one Policy, keeping you and your family worry-free.

Medical coverage can be shared among three generations under one Policy (for Family Plan A and Family Plan B):



For details, please refer to the “Benefit Schedule” section below.

Simple application without health underwriting and medical examination



To make the application process simple and easy, no health underwriting and medical examination are required. The Plan is available for application up to Age 76 of the Insured and provides thoughtful medical coverage to the Insured up to Age 81. Medical coverage (except for Psychiatric Consultation<sup>5</sup>) starts on the Policy Date for the Insured and on the Family Member Coverage Effective Date for the relevant Family Member<sup>9</sup>, giving you and your family peace of mind.

+ From a comparison made by FWD on 14 April 2025 among the individual outpatient plans of key insurers available in Hong Kong, the following product features are first-in-market : (1) Family Plans with physical and mental health protection, (2) unlimited number of Family Member under Family Plans, (3) Co-payment is waived if no drug prescription is provided after the online consultation and (4) colonoscopy services.

For details of the Booking Platform, please refer to the “GBAssure Outpatient Plan— Introduction of Booking Platform” leaflet.

**The Plan's coverage is limited to Reasonable and Customary charges or expenses incurred as a result of services which are Medically Necessary. For the definition of "Medically Necessary" and "Reasonable and Customary", please refer to the "Important Words" section below.**

The above product information does not contain full terms and conditions and is for reference only and is indicative of the key features of the product. For the full and exact terms and conditions and the full list of exclusions of the product, please refer to the Policy provisions of this product. In the event of any ambiguity or inconsistency between the terms of this leaflet and the Policy provisions, the Policy provisions shall prevail. In case you want to read the terms and conditions of the Policy provisions before making an application, you can obtain a copy from FWD. The Policy provisions of the product are governed by the laws of Hong Kong.

GBAssure Outpatient Plan – General Information

Plan Type	Basic plan
Issue Age (age next birthday)	For Plan 1, Plan 2 and Plan 3 The Insured: 1 (from 15 days) – 76 For Family Plan A and Family Plan B The Insured : 19 – 76 Family Member <sup>9</sup> : 1 (from 15 days) – 76
Premium Payment Term	To Age 81
Benefit Term	Yearly renewable to Age 81
Medical Underwriting	No health underwriting and medical examination are required
Renewability	Not guaranteed
Premium Structure	Premium is not guaranteed and FWD reserves the right to review and adjust the premium rates based on factors including but not limited to the Age of the Insured at the time of renewal, claims experience, medical inflation, policy persistency and expenses from all policies under this product upon renewal, provided any premium review will be applied to all other policies of the same kind
Premium Payment Mode	Annually
Currency	HKD
Plan Level	- Plan 1 - Plan 2 - Plan 3 - Family Plan A - Family Plan B
Geographical Coverage	- Hong Kong - Designated Mainland GBA Cities <sup>1</sup> - Macau

# GBAssure Outpatient Plan – Benefit Schedule

The benefits of this Plan are provided by the Panel Network (except for Psychiatric Consultation<sup>5</sup>, Death Benefit and Accidental Death Benefit), and are subject to geographical coverage, benefit limit per Policy Year, Co-payment<sup>10</sup> (if any) and Coinsurance (if any) as set out below:

## Geographical Coverage

Benefit items	District		
	Hong Kong	Designated Mainland GBA Cities <sup>1</sup>	Macau
General Practitioner Face-to-face Consultation	✓	✓	✓
General Practitioner Online Consultation with Medicine Delivery <sup>2,3</sup>	✓	✓	–
Additional General Practitioner Online Consultation <sup>2</sup>	✓	✓	–
Chinese Medicine Practitioner Face-to-face Consultation <sup>4</sup>	–	✓	–
Laboratory Tests and Diagnostic Imaging <sup>4,12</sup>	–	✓	–
Psychiatric Consultation <sup>5</sup>	✓	✓ (applicable to the Mainland China)	✓
	Panel network is not applicable		
Dental Care <sup>7</sup>	✓	✓	✓
Medical Check-up <sup>6</sup>	✓	–	–
Colonoscopy Benefit <sup>8</sup>	–	✓	–

## Benefit limits

Benefit items	Plan level				
	Plan 1	Plan 2	Plan 3	Family Plan A	Family Plan B
	Benefit limit				
1(a). General Practitioner Face-to-face Consultation (including up to 3 days of Basic Medication <sup>11</sup> per visit)	Number of visits (for items 1(a) and 1(b) in aggregate)				
	16 visits per Policy Year	32 visits per Policy Year	38 visits per Policy Year	25 visits per Policy Year	45 visits per Policy Year, subject to a maximum of 15 visits per User <sup>13</sup>
1(b). General Practitioner Online Consultation with Medicine Delivery <sup>2,3</sup> (including up to 3 days of Basic Medication <sup>11</sup> per visit)	- Co-payment <sup>10</sup> per visit: o Hong Kong: HKD20 o Macau: MOP20 o Designated Mainland GBA Cities <sup>1</sup> : RMB8  Co-payment <sup>10</sup> for item 1(b) is waived if no drug prescription is provided after the online consultation				
	- Maximum 1 visit per day per User <sup>13</sup> for items 1(a) and 1(b) in aggregate				
2. Additional General Practitioner Online Consultation <sup>2</sup> (Basic Medication is not included)	Number of visits in Hong Kong				
	2 visits per Policy Year	4 visits per Policy Year	2 visits per Policy Year	4 visits per Policy Year per User <sup>13</sup>	
	Number of visits in Designated Mainland GBA Cities <sup>1</sup>				
	Unlimited visits				
	- Available after the maximum number of visits per Policy or per User <sup>13</sup> covered under items 1(a) and 1(b) in aggregate has been fully utilised in the corresponding Policy Year - Co-payment <sup>10</sup> per visit: o Hong Kong: HKD20 o Designated Mainland GBA Cities <sup>1</sup> : RMB0 - Maximum 1 visit per day per User <sup>13</sup>				
3. Chinese Medicine Practitioner Face-to-face Consultation <sup>4</sup> (including up to 3 days of Chinese medicine per visit)	2 visits per Policy Year	6 visits per Policy Year	12 visits per Policy Year	6 visits per Policy Year	16 visits per Policy Year, subject to a maximum of 6 visits per User <sup>13</sup>
	- Co-payment <sup>10</sup> per visit: o Designated Mainland GBA Cities <sup>1</sup> : RMB8 - Maximum 1 visit per day per User <sup>13</sup>				

## Benefit limits

Benefit items	Plan level				
	Plan 1	Plan 2	Plan 3	Family Plan A	Family Plan B
	Benefit limit				
4. Laboratory Tests and Diagnostic Imaging <sup>4,12</sup>	-	HKD2,000 per Policy Year	HKD5,000 per Policy Year	-	HKD8,000 per Policy Year, subject to a maximum of HKD3,000 per User <sup>13</sup>
5. Psychiatric Consultation <sup>5</sup>	-		5 visits per Policy Year	10 visits per Policy Year per User <sup>13</sup>	
			<ul style="list-style-type: none"><li>- Reimbursing the Eligible Expenses of the consultation at Psychiatrist</li><li>- Maximum HKD1,000 per visit per User<sup>13</sup>, subject to 20% Coinsurance</li><li>- Maximum 1 visit per day per User<sup>13</sup></li></ul>		
6. Dental Care <sup>7</sup> (routine oral examination including scaling and polishing prophylaxis)	2 visits per Policy Year (once either in Hong Kong or Macau, and once in Designated Mainland GBA Cities <sup>1</sup> )			2 visits per Policy Year per User <sup>13</sup> (once either in Hong Kong or Macau, and once in Designated Mainland GBA Cities <sup>1</sup> )	
	Dental check-up <sup>7</sup> coupons will be issued annually starting from the first Policy Anniversary <ul style="list-style-type: none"><li>- Co-payment<sup>10</sup> per visit:<ul style="list-style-type: none"><li>o Hong Kong: HKD50</li><li>o Macau: HKD / MOP50</li><li>o Designated Mainland GBA Cities<sup>1</sup>: RMB0</li></ul></li></ul>				
7. Medical Check-up <sup>6</sup>	-	Once per Policy Year		-	Once per Policy Year per User <sup>13</sup>
		Medical check-up <sup>6</sup> coupon will be issued annually starting from the first Policy Anniversary			
8. Colonoscopy Benefit <sup>8</sup>	Once every 3-year per Policy				Twice every 3-year per Policy
	<ul style="list-style-type: none"><li>- Colonoscopy<sup>8</sup> coupon(s) will be issued every 3-year starting from the first Policy Anniversary</li><li>- Colonoscopy services<sup>8</sup> including all relevant polypectomy received on an Outpatient basis and all relevant histopathology examination are covered</li><li>- Co-payment<sup>10</sup> per visit:<ul style="list-style-type: none"><li>o Designated Mainland GBA Cities<sup>1</sup>: HKD380</li></ul></li></ul>				
9. Death Benefit	HKD3,000 (not applicable to the Family Member <sup>9</sup> )				
10. Accidental Death Benefit	HKD3,000 (not applicable to the Family Member <sup>9</sup> )				

## Remarks

- Designated Mainland GBA Cities currently include Guangzhou, Shenzhen, Zhuhai, Foshan, Dongguan and Zhongshan subject to FWD's revision to the list of cities from time to time without prior notice.
- Online consultation is not applicable to an Insured / the User aged 5 years or below (actual age) on the date of the general practitioner online consultation and not available in Macau. During the online consultation, the Insured / User must be physically present in the same District (i.e. Hong Kong or any one of the Designated Mainland GBA Cities, as the case may be) as the location of the clinic at which the Physician provides the online consultation.
- The prescribed medicine (if any) shall be delivered to the Insured's / the User's address at same District where the respective general practitioner online consultation is received.
- Referral from the Physician of the Panel Network's is required.
- Available for the Insured / User who receives Outpatient consultation with a Psychiatrist solely relating to Mental Illness in Mainland China, Hong Kong or Macau, where the consultation conducted in Mainland China is limited to the Outpatient department of Hospital. Waiting period of 180-day and 2-year are respectively applicable to Mental Illness and Perinatal Depression, counting from the Policy Date for the Insured and from the Family Member Coverage Effective Date for the relevant Family Member, please refer to Policy provisions for details.
- If the Insured /User is under 18 (actual age) during the validity period of the coupon, the medical check-up coupon is transferable to the Policy Owner. This benefit is subject to prevailing terms and conditions as specified in the coupon.
- This benefit is subject to prevailing terms and conditions as specified in the coupon.
- The colonoscopy coupon can be used by the Policy Owner or Insured/ User who is at 18 or above (actual age) at the time of receiving colonoscopy services and is subject to prevailing terms and conditions as specified in the coupon.
- Family Member is only applicable for Family Plan A or Family Plan B as Plan Level. The spouse, parents or child(ren) of Policy Owner, or the parents of Policy Owner's spouse nominated by the Policy Owner in accordance with Clause 4.1.4 under Policy provisions while this Policy is in effect. FWD will confirm the Policy Owner's nomination in writing.
- Co-payment shall mean an amount that the Policy Owner is required to pay to the Panel Network for the relevant Health Services, dental care and colonoscopy services received by the Insured / User.
- Long term medication for chronic diseases is not covered.
- Prescribed list is applicable for Laboratory Tests and Diagnostic Imaging. FWD and the Panel Network reserve the right to amend the prescribed list from time to time without prior notice. No designated test from the Insured / User is accepted.
- The persons including the Insured or if applicable, the Family Member.

All capitalised terms used herein and not otherwise defined shall have the same meanings ascribed to them in the Policy provisions.



## Key Product Risks

### Credit Risk

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

### Exchange Rate and Currency Risk

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

### InflationRisk

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

### Premium Adjustment

The premium is non-guaranteed and FWD reserves the right to review and adjust the premiums upon renewal. The premium may increase significantly due to factors including but not limited to the Age of the Insured at the time of renewal, claims experience, medical inflation, policy persistency and expenses provided any premium review shall be applied to all other policies of the same kind.

### Premium term and non-payment of premium

The premium payment term of the Plan is up to the Policy Anniversary immediately following the 80<sup>th</sup> birthday of the Insured.

FWD allows a grace period of 30 days after the premium due date for payment of each premium. This Policy shall continue to be in effect during the grace period but no benefits shall be payable unless the premium is paid. If a premium is still unpaid at the expiration of the grace period, the Policy will be terminated from the date the first unpaid premium was due. Please note that once the Plan is terminated on this basis, you will lose all of your benefits. You shall be responsible for the charge imposed by the Panel Network if the Insured/ User has received any Health Services, medical check-up, dental care or colonoscopy services covered under this Policy during the grace period (as set out in Clause 3.1 under the Policy provisions), unless you pay the renewal premium.

### Termination conditions

The Policy shall terminate on the earliest of the following:

1. The date of death of the Insured;
2. The Expiry Date of the Policy;
3. The date of cancellation as specified in Clause 2.10 under the Policy provisions. Such date is determined in accordance with FWD's applicable rules and regulations in relation to Policy cancellation; or
4. On the premium due date, if the Policy Owner has not paid the premium within the 30-day grace period.

## Key Product Risks

### General Exclusions

FWD will not pay any benefits (except for death benefits stated in Clauses 4.10 and 4.11 under the Policy provisions) under this Plan if the conditions, events, services or treatments relating to or arising as a direct or indirect result of any of the following:

- a) Pre-existing Conditions.
- b) Health Services provided as a result of any Disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, HIV Infections, venereal and sexually transmitted disease or its sequelae.
- c) Disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, military or usurped power, acts of terrorism, or direct participation in strike, riot or civil commotion.
- d) Accident arising from directly or indirectly from hazardous or professional sports.
- e) Any services for beautification or cosmetic purposes; or correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
- f) Except as otherwise specified in Clause 4.6 under the Policy provisions, Health Services or counselling services, relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
- g) Except as otherwise specified in Clause 4.7 under the Policy provisions, dental treatment and oral and maxillofacial procedures performed by a dentist.
- h) Except as otherwise specified in Clause 4.8 under the Policy provisions, prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, immunisation and health supplements.
- i) Except as otherwise specified in Clause 4.4 under the Policy provisions, traditional Chinese medicine treatment, including but not limited to herbal treatment, bonesetting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments.
- j) Acupuncture, pilates, shockwave including those performed by physiotherapist; dietician consultation services.
- k) Female hormonal tests or assays and female hormonal replacement therapy unless resulting from an Illness.
- l) Medication other than Basic Medication, for example certain specific treatments - anti-viral, anti-cancer, anti-TB, hormonal replacement and other expensive medications such as hormone analogues/antagonists.
- m) Experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.

## Key Product Risks

### Suicide

If the Insured dies by suicide, whether sane or insane, within 13 calendar months from the Policy Date, FWD’s liability shall be limited to the amount equal to the premiums paid without interest, less any outstanding insurance levy and any benefit which has been paid under this Policy.

### Waiting period

FWD will not pay the Psychiatric Consultation specified in Clause 4.6 under the Policy provisions, where the Insured’s First Symptoms a) relating to the relevant Mental Illness appear, the condition relating to the relevant Mental Illness occurs, or the diagnosis or surgery relating to the relevant Mental Illness occurs within the first 180 calendar days from the Policy Date; or b) relating to the relevant Perinatal Depression appear, the condition relating to the relevant Perinatal Depression occurs, or the diagnosis or surgery relating to the relevant Perinatal Depression occurs within the first 2 years from the Policy Date.

If the Plan Level is Family Plan A or Family Plan B, FWD will not pay the Psychiatric Consultation specified in Clause 4.6 under the Policy provisions, where the Family Member’s First Symptoms a) relating to the relevant Mental Illness appear, the condition relating to the relevant Mental Illness occurs, or the diagnosis or surgery relating to the relevant Mental Illness occurs within the first 180 calendar days from the Family Member Coverage Effective Date of the relevant Family Member; or b) relating to the relevant Perinatal Depression appear, the condition relating to the relevant Perinatal Depression occurs, or the diagnosis or surgery relating to the relevant Perinatal Depression occurs within the first 2 years from the Family Member Coverage Effective Date of the relevant Family Member.

## Important Notes

### Cancellation Right within Cooling-off Period

If you are not fully satisfied with this Policy, you have the right to change your mind.

We trust that this Policy will satisfy your financial needs. However, if you are not completely satisfied, you have the right to cancel and obtain a full refund of the insurance premium paid by you and levy paid by you without interest by giving us written notice. Such notice must be signed by you and received directly by the office of FWD within 21 calendar days immediately following either the day of delivery of the Policy or a Cooling-off Notice to you or your nominated representative, whichever is the earlier. The notice is the one sent to you or your nominated representative (separate from the policy) notifying you of your right to cancel within the stated 21 calendar day period. No refund can be made if a claim payment under the policy has been made prior to your request for cancellation. Should you have any further queries, you may (1) call our Service Hotline on 3123 3123; (2) visit our FWD Insurance Solutions Centres; (3) email to cs.hk@fwd.com and We will be happy to explain your cancellation rights further.

Acceptance of Health Services by any User under this Policy during the cooling-off period indicates an immediate forfeiture of the cooling-off right.

### Cancellation Right after Cooling-off Period

To cancel the Policy, the Policy Owner needs to send FWD a completed cancellation form or by any other means acceptable by FWD.

### Declaration relating to the Foreign Account Tax Compliance Act and Automatic Exchange of Financial Account Information

FWD is obliged to comply with the following legal and/or regulatory requirements in various jurisdictions as promulgated and amended from time to time, such as the United States Foreign Account Tax Compliance Act, and the automatic exchange of financial account information regime (“AEOI”) followed by the Inland Revenue Department (the “Applicable Requirements”). These obligations include providing information of clients and related parties (including personal information) to relevant local and international authorities and/or to verify the identity of the clients and related parties. In addition, our obligations under the AEOI are to:

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

The Policy Owner must comply with requests made by FWD to comply with the above Applicable Requirements.

### Incorrect Disclosure or Non-disclosure

Your policy is based on the information you and the Insured gave FWD during the application process. It is important that you and the Insured were truthful and accurate with all of the information you provided, as this information helped FWD to decide if you and they were eligible for the policy, and what you need to pay.

You should let FWD know immediately if the information you or the User (as the case may be) gave FWD was inaccurate, misleading, or exaggerated. If you or the Insured did not provide accurate and truthful information, or you or the Insured gave misleading or exaggerated information, your benefits or premium under your Policy may be affected, and in some cases FWD may cancel your Policy. If the Insured’s new occupation or country of residence is unable to be insured based on underwriting rules of FWD, FWD may at its discretion terminate this Policy or refuse to pay any Policy benefits that become payable after the change. FWD shall also have the right to demand refund of the benefits previously paid to you if such benefits would not be provided for the Insured based on the new occupation or country of residence.

## Important Notes

### Refund from Other Sources

If you or the User can obtain a refund of any expenses under Psychiatric Consultation from any other sources, FWD will only pay for any excess costs of these expenses up to the limit set out in the Policy Schedule or any Endorsement. If FWD has paid a benefit which is recoverable from another source, You must refund this amount to FWD.

### Renewal

While this Policy is in effect and the Insured is alive, this Policy can be renewed at each Policy Anniversary without the requirement of evidence of insurability. Unless you tell FWD in writing before the next renewal that you do not want to renew, this Policy will be automatically renewed at each Policy Anniversary until the Expiry Date based on the terms and conditions of this Policy, provided that premiums under this Policy are paid when due.

The renewal of this Policy is not guaranteed, FWD reserves the absolute right to terminate this Policy at any time, by giving a written notice at least 30 calendar days before the termination takes effect. The effective date of termination stated in the notice shall be considered the end of the period of this Policy. The unearned portion of the premium and corresponding portion of levy (if any and if applicable) of the relevant Policy Year when the termination takes place shall be refunded without interest, after deducting any amounts you owe to FWD under this Policy.

FWD reserves the right to revise, amend or modify this Policy at each Policy Anniversary, and FWD will notify you in writing at least 30 calendar days before the Policy Anniversary after which the revisions will take effect.

### Notice of Claim

You must inform FWD as soon as possible, and no later than 6 months of the User's consultation date at Psychiatrist or the date of death of the Insured, for which a claim will be made on this Policy. We have the right to reject any written claims submitted after this 6-month notice period.

You do not need to inform FWD about your receipt of Health Services in Clauses 4.2 to 4.5, Dental Care in Clause 4.7, Medical Check-up in Clause 4.8 or Colonoscopy Benefit in Clause 4.9 under the Policy provisions provided by Panel Network.

## Important Words

### Age

refers to the age next birthday of the Insured of this Policy, unless otherwise specified.

### Basic Medication

means medications commonly prescribed by Physician for symptomatic relief and treatment of common illnesses while there are medications which are not covered under this Policy subject to the sole discretion of the Panel Network. For the avoidance of doubt, long term medication for chronic diseases are not covered under Basic Medication.

### Booking Platform

refers to a designated online portal, telephone hotline or other designated communication channel owned and managed solely by the Panel Network, mainly for You or the User to make appointment for certain Health Services, medical check-up, dental care or colonoscopy services at Panel Network.

### Disability

means an Illness or Injury, including Disabilities arising from the same cause, and any complications arising from that Illness or Injury.

### District

refers to the jurisdiction where the User receives the Health Services, medical check-up or dental care or colonoscopy services as specified in Clause 4.1.3 under the Policy provisions, including i) Hong Kong, ii) Designated Mainland GBA Cities or iii) Macau.

### Family Member Coverage Effective Date

refers to the date on which the coverage of the Family Member under this Policy starts and shall be specified in the Endorsement confirming Your nomination of respective Family Member, or the date that FWD reinstates the coverage of this Policy in Clause 3.4 under the Policy provisions, whichever is later.

### Health Services

refers to the Medically Necessary primary health care services and supplies, unless specified otherwise, as described by and subject to the limits specified in this Policy.

### Medically Necessary

means the need to have medical service for the purpose of investigating or treating the relevant Disability in accordance with the generally accepted standards of medical practice and such medical service must –

- a) require the expertise of, or be referred by, a Physician;
- b) be consistent with the diagnosis and necessary for the investigation and treatment of the Disability;
- c) be rendered in accordance with standards of good and prudent medical practice, and not be rendered primarily for the convenience or the comfort of the User, his family, caretaker or the attending Physician;
- d) be rendered in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- e) be furnished at the most appropriate level which, in the prudent professional judgment of the attending Physician, can be safely and effectively provided to the User.

## Important Words

### Panel Network

means an individual and/or a group, including Chinese Medicine Practitioner, Physician or other health care providers rendering medical check-up, dental care or colonoscopy services, professional or facility at the designated location in the District and is appointed by FWD from time to time without prior notice.

### Policy Date

refers to the date when coverage under this Policy begins as shown in the Policy Schedule or the date that FWD reinstates the coverage of this Policy in Clause 3.4 under the Policy provisions, whichever is later.

### Reasonable and Customary

means, in relation to a charge for Health Services, such level which does not exceed the general range of charges being charged by the relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar Age, for a similar Disability, as reasonably determined by FWD in utmost good faith. The Reasonable and Customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is Reasonable and Customary, FWD shall make reference to the followings (if applicable)-

- a) treatment or service fee statistics and surveys in the insurance or medical industry;
- b) internal or industry claim statistics;
- c) gazette published by the government of Hong Kong; and/or
- d) other pertinent source of reference in the locality where the treatments, services or supplies are provided.

## Declarations

- This product is underwritten by FWD. FWD is solely responsible for all features, policy approval, coverage and benefit payment under the product. FWD recommends that you carefully consider whether the product is suitable for you in view of your financial needs and that you fully understand the risk involved in the product before submitting your application. You should not apply for or purchase the product unless you fully understand it and you agree it is suitable for you. Please read through the related risks before making any application of the product.
- This product material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Hong Kong Special Administrative Region (“Hong Kong”) only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products of FWD outside Hong Kong. All selling and application procedures of the product must be conducted and completed in Hong Kong.
- This product is an insurance product. The premium paid is not a bank savings deposit or time deposit. The product is not protected under the Deposit Protection Scheme in Hong Kong.
- This product is an outpatient medical insurance plan without any savings element. The costs of insurance and the related costs of the Policy are included in the premium paid despite the product brochure/leaflet and/or the illustration documents of this product having no schedule/section of fees and charges or no additional charge noted other than the premium.
- All underwriting and claims decisions are made by FWD. FWD relies upon the information provided by the applicant and the Insured in the insurance application to decide to accept or decline the application with a full refund of any premium paid and any insurance levy paid without interest. FWD reserves the right to accept/reject any insurance application and can decline your insurance application without giving any reason.
- All the above benefits and payment are paid after deducting policy debts (if any, e.g. any outstanding premium, any outstanding levy and any amount you owed FWD).



## For more information

Please contact your financial advisor,  
call our Service Hotline or  
simply check out our website.

fwd.com.hk



Service Hotline  
**3123 3123**



Learn more about  
GBAssure Outpatient Plan

## GBAssure Outpatient Plan - Introduction of Booking Platform

Experience thoughtful  
healthcare at your  
fingertips

Unlock convenient healthcare with our Booking Platform, designed to seamlessly connect you to a series of Health Services, medical check-up<sup>1,5</sup>, dental care<sup>1,5</sup> or colonoscopy services<sup>1</sup> from our Panel Network within Hong Kong, Designated Mainland GBA Cities<sup>2</sup> and Macau ("the District").



By accessing our exclusive Booking Platform through FWD eServices, you will embark on a hassle-free healthcare journey. After authenticating your plan and binding to your account, you gain instant access to a suite of healthcare services. The Booking Platform provides the following key functions:



Discover comprehensive information about our Panel Network, including the lists of clinics and service centres



Make, reschedule, or cancel appointments for General Practitioner Face-to-face and Online Consultation<sup>3</sup>, Chinese Medicine Practitioner Face-to-face Consultation<sup>4</sup>, Laboratory Tests and Diagnostics Imaging<sup>4</sup>, Dental Care<sup>1,5</sup>, Medical Check-up<sup>1,5</sup> and Colonoscopy Services<sup>1</sup>



Receive General Practitioner Online Consultation<sup>3</sup> in Hong Kong and Designated Mainland GBA Cities<sup>2</sup>



Check your maximum number of visits per Policy Year, co-payment<sup>6</sup> amounts (if applicable), the remaining balance of your number of visits, and remaining limits for designated healthcare services



Retrieve history of your appointment bookings and consultation records

For details, please call your FWD insurance adviser or our service hotline: (852) 3123 3123.

**Note:**

- You can access the Booking Platform by following the instructions in “Customer Service Guide”. A designated online app is required to access the Booking Platform, and the “Customer Service Guide” will be provided along with your Policy contract.
- Except the co-payment for Dental Care in Hong Kong and Macau, all payments made to Panel Network, including but not limited to co-payment (if applicable) must be settled by the specified electronic payment method on the Booking Platform. Co-payment for Dental Care in Hong Kong and Macau shall be settled at the appointed service centres.
- FWD is not the supplier of such services and makes no representation, warranty or undertaking as to the availability and quality of any service provided by Panel Network. FWD shall not accept any responsibility or liability for their services, prescriptions, medications, products and/or goods supplied (if applicable), opinions, treatment, negligence, omission or failure to act by the Panel Network. FWD shall have the right to replace or revise any of such Panel Network and the location of their services or cease and/or suspend the provision of such services without prior notice. The Panel Network and its personnels are not agents or employees of FWD, and are solely responsible for any acts or omissions in the Health Services, medical check-up, dental care or colonoscopy services they provide.

**Remark:**

1. These benefits are subject to prevailing terms and conditions as specified in the coupons.
2. Designated Mainland GBA Cities currently include Guangzhou, Shenzhen, Zhuhai, Foshan, Dongguan and Zhongshan subject to FWD's revision to the list of cities from time to time without prior notice.
3. Online consultation is not applicable to the Insured / User aged 5 years or below (actual age) on the date of the general practitioner online consultation and not available in Macau. During the online consultation, the Insured / User must be physically present in the same District (i.e. Hong Kong or any one of the Designated Mainland GBA Cities, as the case may be) as the location of the clinic at which the Physician provides the online consultation.
4. Referral from the Physician of the Panel Network's is required.
5. Appointments for Medical Check-up and Dental Care in Hong Kong and Macau can only be made, rescheduled or canceled via phone call. More details can be found on the coupon and in the “Customer Service Guide”.
6. Co-payment shall mean an amount that the Policy Owner is required to pay to the Panel Network for the relevant Health Services, dental care and colonoscopy services received by the Insured / User.

Any promotional offer(s) or material(s) should be read in conjunction with the relevant product brochure and the terms and conditions of the insurance products. Customers should not purchase the relevant insurance product(s) solely on the basis of any promotional offer(s) or material(s). The above does not contain the full terms and conditions of the relevant insurance plan. For full terms and conditions, details and risk disclosures of the relevant insurance plan, please refer to the relevant product brochure and Policy documents. Before applying for any insurance products, customers should confirm the product(s) is/are suitable for their insurance needs and objectives.



Learn more about  
GBAssure Outpatient Plan

大灣區智通行門診計劃年繳保費表（港幣）  
Annual Premium Table of GBAssure Outpatient Plan (HKD)  
(2025 年 4 月 14 日起生效 Effective from 14 April 2025)

Age at Next Birthday 下次生日年齡	Plan 1 計劃 1	Plan 2 計劃 2	Plan 3 計劃 3	Family Plan A* 家庭計劃 A*	Family Plan B* 家庭計劃 B*	
1-18	2,480	5,380	6,480	Not applicable 不適用	Not applicable 不適用	
19-70				4,800	17,500	
71-76	3,050	6,600	8,100			
77-80^						

- ^ For Renewal only.  
^ 只適用於續保。
- \* The Policy Owner and the Insured have to be the same person. Family Member is only applicable for Family Plan A or Family Plan B as Plan Level. The spouse, parents or child(ren) of Policy Owner, or the parents of Policy Owner's spouse nominated by you in accordance with Clause 4.1.4 under Policy provisions while this Policy is in effect. FWD will confirm your nomination in writing. The premium amount stays the same regardless of the number of Family Members.
- \* 保單權益人與被保人須為同一人。家庭成員僅在計劃等級為家庭計劃 A 或家庭計劃 B 時適用。於本保單生效期間，您按保單條款第 4.1.4 條提名的保單權益人之配偶、父母或子女、或保單權益人配偶的父母，並經富衛書面確認。不論家庭成員數目多少，保費金額維持不變。

Premium is based on the age next birthday of the Insured.  
保費按被保人下一次生日年齡而釐定。

This Premium Schedule does not include levy which is collected by the Insurance Authority.  
此保費表並未包括由保險業監管局徵收的保費徵費。