



**Blue Cross 藍十字**

Member of BEA Group 東亞銀行集團成員

## 大班醫療保險計劃 Taipan Medical Insurance Plan



2022年1月生效  
With effect from Jan 2022

保證終身續保<sup>1</sup>  
*Guaranteed  
Lifetime Renewal<sup>1</sup>*

# 藍十字（亞太）保險有限公司

## Blue Cross (Asia-Pacific) Insurance Limited

藍十字（亞太）保險有限公司（「藍十字」）乃東亞銀行集團成員，於香港經營保險業務逾50年，致力為個人及企業客戶提供多元化的保險產品及服務，包括醫療、旅遊及一般保險。藍十字屢獲殊榮，其保險產品及服務均獲廣泛認同。

藍十字在2021年獲得保險行業國際信用評級機構和信息提供商 AM Best 授予財務實力評級及長期發行人信用評級分別為 A（優秀）及「a」（優秀）級別。有關最新評級，請瀏覽[www.ambest.com](http://www.ambest.com)。

Blue Cross (Asia-Pacific) Insurance Limited (“Blue Cross”) is a member of The Bank of East Asia Group. With over 50 years of operational experience in the insurance industry, Blue Cross provides a comprehensive range of products and services including medical, travel and general insurance, which cater to the needs of both individual and corporate customers. Blue Cross’ success in insurance products and services is reaffirmed by numerous awards and accolades.

In 2021, Blue Cross was assigned the Financial Strength Rating of A (Excellent) and the Long-Term Issuer Credit Rating of “a” (Excellent) by AM Best, a global rating agency and information provider with a unique focus on the insurance industry. For the latest rating, please access [www.ambest.com](http://www.ambest.com).

### 藍十字給您的服務承諾

#### Blue Cross Service Commitment to You

讓客戶滿意是藍十字的服務宗旨，我們竭誠迅速處理您的醫療索償。收妥所需文件後，我們承諾會在3個工作天內完成經 Super Care 會員平台遞交的門診索償批核。而住院索償批核會在8個工作天內完成。

Customer satisfaction is of Blue Cross’ highest priority, which is why your medical claims are promptly processed. Upon receipt of full documentation, we promise to complete assessment of outpatient claims via Super Care member’s platform in 3 working days. For inpatient claims, we will complete assessment within 8 working days.

此小冊子並不包含保單的完整條款且只供參考之用，中英文版本如有差異，以英文版本為準。有關詳盡條款及細則及所有不保之事項，概以保單為準。如有查詢或欲索取保單條款及細則，請瀏覽網址[www.bluecross.com.hk](http://www.bluecross.com.hk)、Blue Cross HK App 或致電藍十字客戶服務熱線 3608 2988。

This brochure does not contain the full terms of the policy and is for reference only. Should there be any discrepancy between the English and the Chinese versions of this brochure, the English version shall apply and prevail. Please refer to the policy for the exact terms and conditions and the full list of policy exclusions. For more information or a copy of the policy terms and conditions, please visit [www.bluecross.com.hk](http://www.bluecross.com.hk), Blue Cross HK App or call Blue Cross Customer Service Hotline on 3608 2988.

## 大班醫療保險計劃 Taipan Medical Insurance Plan

### 我們以您健康為首

生命無常，意外或疾病往往難以預料。長期或嚴重疾病或會帶給您難以預料的財政負擔。「大班醫療保險計劃」為您提供周全的醫療保障，讓您安心治療，重拾健康而無後顧之憂。

### Your Health Always Comes First

Life is full of uncertainties, no one knows for sure when accidents or illnesses will strike. Long-term or serious illnesses may cause you unexpected financial burden. Taipan Medical Insurance Plan provides you with a secured safety net and comprehensive medical protection, allowing you to concentrate on your treatment for a speedy, worry-free recovery.

### 計劃特點

不設等候期\*，保單生效即獲保障

投保手續簡單，無需驗身

「入院前索償評估」—按您的保單估算可賠償入院支出，讓您在財務上更有預算

「出院免找數」服務—入院免繳費，出院免索償<sup>2</sup>

全球醫療保障，保障額不會因身處外地時間長久而有所改變

\*不適用於產科保障及附加牙科保障。

### Plan Highlights

No waiting period\* – Medical protection starts once the policy takes effect

Easy enrolment with no medical examination is required

Pre-hospitalisation Claim Assessment – estimate the eligible claim amount based on your policy coverage, allowing you to plan your budget in advance

"No Hospital Bills to Pay" Service – no pre-payment for admission, no claims upon discharge<sup>2</sup>

Worldwide coverage with benefit amounts remain unchanged regardless of the duration of overseas stay

\*Not applicable to Maternity Benefits and Optional Dental Benefits.

### 保障概覽

<b>基本保障</b>	基本住院及手術保障 產科保障
<b>額外免費保障</b>	個人責任保障 個人財物保障 24小時全球緊急援助 護理諮詢專線 預防計劃
<b>附加保障</b>	附加門診保障 附加牙科保障 附加一百萬元保障 附加人身意外保障

註：基本住院及手術保障、產科保障及附加門診保障之綜合最高賠償額為每宗傷病US\$300,000，並以每項保障所列之賠償額為限。76歲或以上受保人士的綜合最高賠償額為US\$150,000。

### Coverage at a Glance

<b>Basic Benefits</b>	Basic Hospital and Surgical Benefits Maternity Benefits
<b>Extra Free Benefits</b>	Personal Liability Benefits Personal Effects Benefits 24-hour Worldwide Emergency Aid Nursing Care Hotline Preventive Care
<b>Optional Benefits</b>	Optional Outpatient Benefits Optional Dental Benefits Optional One Million Coverage Benefits Optional Personal Accident Benefits

Remarks: The overall maximum benefit limit for Basic Hospital and Surgical Benefits, Maternity Benefits and Optional Outpatient Benefits is US\$300,000 per disability, subject to the limit of each benefit item. For insured aged 76 or above, such overall maximum benefit limit is US\$150,000.

## 周全保障安枕無憂

### Worry-free Comprehensive Protection

#### 全面的全球醫療保障

無論您身處何地及接受哪種醫療服務，所有合理的醫療開支均會獲得賠償，以計劃最高賠償額為限。

#### 保證終身續保<sup>1</sup>

此保單有效期為一年。成功投保後，不論您的健康狀況或索償記錄，我們都承諾為您提供終身續保。您的保單更可自動續保至下一個受保期。

#### 續保時不因索償記錄而加收保費

當您續保時，我們將不會根據您過往的索償記錄或健康狀況而徵收額外保費。

#### 長期病患和先進技術治療保障

長期治療往往為病患者帶來沉重的財政負擔。本計劃為長期病患者舒緩接受長期治療的經濟壓力，保障項目包括腎透析治療、癌症治療、器官移植、腫瘤治療，及植入心臟起搏器等。

此外，保障更伸延至包括多種先進醫療技術或程序，如數碼導航刀、伽瑪刀及導航螺旋刀放射治療的醫療費用。

#### 非住院或日症手術保障

我們一直致力為您提供所需保障，保障包括無需入院而在診所或醫院日症病房進行的治療或手術，如放射治療、化學治療、內窺鏡程序、白內障手術，及體外電震波碎石術等。

#### 手術前後治療保障

保障手術前及手術後有關同一傷患或疾病的治療費用，包括1次手術前的診所診症及手術後6星期內所有診所診症。

#### 免費新生嬰兒保障\*

如父母2人均受保於「大班醫療保險計劃」，初生嬰兒可由出生後第12天起至下一個保單續保日，獲基本住院及手術保障。

<sup>\*</sup>受保父母需於新生嬰兒出生日期後90天內以書面形式通知藍十字，新生嬰兒方可享基本住院及手術保障（如父母於「大班醫療保險計劃」之基本住院及手術保障下所享的利益水平不同時，新生嬰兒將受兩者利益水平中較低者之保障）。

#### Comprehensive Worldwide Medical Plan

No matter where you are and what medical services you received, all your reasonable medical expenses are covered up to the maximum benefit limit of the plan.

#### Guaranteed Lifetime Renewal<sup>1</sup>

The period of cover of this policy is 1 year. Upon successful enrolment, we guarantee your policy will be renewable for lifetime, regardless of your health status or claim history. Moreover, your policy will be automatically renewed for another period of insurance.

#### No Additional Premium on Claim History upon Renewal

Regardless of your claim history and health status, no additional premium will be imposed upon policy renewal.

#### Coverage for Prolonged and Advanced Treatments

Chronic treatments always impose heavy financial burdens to patients. We offer coverage for chronic treatments to relieve patients' financial burden due to prolonged recovery such as kidney dialysis, cancer therapy, organ transplantation, tumour related treatment and pacemaker implantation, etc.

What's more, we also extend to cover the medical expenses incurred by advanced medical technologies or procedures like cyberknife, gamma knife and tomotherapy.

#### Coverage for Non-hospital Admission or Day Case Surgery

We always strive to give you the protection in your moments of need. Our coverage also includes treatments or surgeries such as radiotherapy, chemotherapy, endoscopic procedures, cataract operations, extracorporeal shockwave lithotripsy, etc. which do not require inpatient admission and are undertaken in the clinics or day case units of hospitals.

#### Coverage for Pre- and Post-Surgical Treatments

Covering both pre- and post-surgical treatments related to the same injury or illness. The coverage includes one pre-surgical consultation and all follow-up clinic consultations within 6 weeks after surgical operation.

#### Free Coverage for Newborn Infant\*

If both parents are covered under Taipan Medical Insurance Plan, their newborn infant will be covered under the Basic Hospital and Surgical Benefits from the age of 12 days until the next policy renewal date.

<sup>\*</sup>The newborn infant will be covered under the Basic Hospital and Surgical Benefits if the insured parents notify Blue Cross in writing within 90 days from the date of birth of the newborn infant (If the insured parents are covered by different levels of benefits under Basic Hospital and Surgical Benefits of Taipan Medical Insurance Plan, the newborn infant will be covered by the lower of the two levels).

## 額外免費保障

### Extra Protection for Free

#### 個人責任保障

為您提供因意外導致第三者身體受傷或財物損毀而須承擔的法律責任賠償。

#### 個人財物保障

保障您於外遊時香港住所在空置的情況下被爆竊所導致的個人財物損失、重置或修理費用。

#### 入院前索償評估

只需在入院或接受治療前的最少3個工作天前致電熱線3608 2988提交相關資料，或於網上填寫「入院前索償評估」表格，我們即按您的保單估算可賠償金額<sup>3</sup>，讓您在財務上更有預算，安心接受治療。

#### 24小時全球緊急援助

我們為您提供24/7服務，若您身處外地需緊急支援，可隨時致電熱線，由專人為您安排代繳入院按金、提供當地醫療或法律轉介等，以確保您於緊急情況下得到所需協助。

#### 中國緊急醫療支援

如於中國境內遭遇突發緊急事故，需要入院接受治療，只需憑本計劃提供的「任中橫」醫療卡，便可於全國超過200間網絡醫院或醫療單位接受治療，無需繳付入院保證金。

#### Personal Liability Benefits

Covers legal liability that you may have to pay for compensation due to bodily injury or damage to property of third parties arising from accident.

#### Personal Effects Benefits

Covers loss of, replacement or repair cost of your personal effects as a result of burglary to your unoccupied home in Hong Kong whilst you are travelling abroad.

#### Pre-hospitalisation Claim Assessment

Simply make a call to our hotline on 3608 2988 and provide related information, or complete the Pre-hospitalisation Claim Assessment Form online at least 3 working days prior to hospitalisation or treatment. We will help you to estimate the eligible claim amount<sup>3</sup> based on your policy coverage, allowing you to plan your budget in advance and undergo treatment with peace of mind.

#### 24-hour Worldwide Emergency Aid

We are here for you 24/7. Simply call our hotline when you need assistance in an emergency situation while traveling overseas, and our dedicated officers will provide you with all-round assistance such as hospital admission deposit guarantee service, local medical or legal referral service, etc.

#### Emergency Medical Assistance in China

In case of emergency requiring hospitalisation in China, simply present the Medpass Card and you will be able to access a network of over 200 hospitals or medical units without paying any deposits.

## 免費預防計劃

我們關注您的健康，因此特別為您安排免費身體檢查服務，讓您及早發現初期病徵，助您掌握自己的健康狀況。

### 周年身體健康檢查

- 包括多種健康檢查項目，並由我們的醫療顧問就化驗報告提供專業意見，讓您更瞭解自己的健康狀況，從而採取合適的保健方案。

### 周年牙齒保健

- 包括口腔檢查、洗牙及牙齒打磨服務以確保牙齒的健康狀況，並及早發現牙齒病徵。

## 藍十字護理諮詢專線

我們明白您在日常生活護理上需要專業的意見，因此，特意為您提供專屬的護理諮詢專線3608 2908解答您的疑問。如有需要，我們亦樂意轉介您至合適的家居護理服務，包括手術後護理、日常長者護理、孕婦護理、幼兒及兒童護理，以及其他護理服務轉介。

## Blue Cross HK 手機應用程式

貴為Super Care會員，您可享一站式數碼醫療保險服務包括定位功能搜尋網絡醫生、網上醫生預約、視像診症、QR code或電子醫療卡快速門診登記、以及3步即時遞交HK\$3,000或以下之門診索償<sup>4</sup>，更可隨時隨地查閱索償記錄及保障詳情。



Blue Cross HK App

## Preventive Care for Free

Your health is our utmost concern. We have specially arranged free checkup programmes to help you detect early diseases and monitor your health conditions.

### Annual Health Checkup

- Includes health screening profiles and professional advice on laboratory reports from our medical consultants, enabling you to understand your health conditions better to ensure preventive treatment in place.

### Annual Dental Checkup

- Includes oral examination, scaling and polishing to keep your teeth in good shape and detect early dental diseases.

## Blue Cross Nursing Care Hotline

We understand you need professional advice on daily care, we are here to provide you with an exclusive nursing care hotline on 3608 2908 to answer your enquiries. We can also refer you to home care services if you need extra care at the comfort of your own home, including post-surgery care, daily care for elderly, maternity care, infant and child care and referral of other care services.

## “Blue Cross HK” Mobile App

As a Super Care member, you can enjoy one-stop digital medical insurance services including location-based network doctors search, online doctor appointment, video consultation, outpatient registration with QR code/e-medical card, and 3-step instant outpatient claim submission of HK\$3,000 or below<sup>4</sup>, keeping track of claim status and benefit details round-the-clock.

## 更多保障由您選擇

### More Benefit Options at Your Choice

#### 附加保障滿足您的特定需要

為配合您的個人需要，本計劃有多項基本保障<sup>^</sup>以外的附加保障可供選擇：

- 附加門診保障
- 附加牙科保障
- 附加一百萬元保障
- 附加人身意外保障

<sup>^</sup> 門診保障、牙科保障、一百萬元保障和人身意外保障是本計劃的自選附加額外醫療保障。詳情請參閱相關的保障項目表和保費表。

#### Optional Benefits to Cater Your Specific Needs

The plan offers a wide selection of optional benefits<sup>^</sup> in addition to the basic coverage to meet your needs:

- Optional Outpatient Benefits
- Optional Dental Benefits
- Optional One Million Coverage Benefits
- Optional Personal Accident Benefits

<sup>^</sup> Outpatient Benefits, Dental Benefits, One Million Coverage Benefits and Personal Accident Benefits are the Optional Supplementary Medical Benefit available for this Plan. For details, please refer to respective schedule of benefits and premium tables.

## 免費兒童人身意外保障

若選擇附加人身意外保障，您的子女可同時免費享有此項保障。子女年齡須為6歲或以下，並受保於基本住院及手術保障。

## 自付額◆選擇

本計劃設有不同的住院保障自付額以供選擇，讓您可以較低保費享有全面的基本住院及手術保障。

每受保人每宗傷病的自付額 Deductible Per Insured Per Disability (US\$)	節省之基本保障保費 Savings on Basic Benefits Premium
1,000	15%
2,000	25%
3,000	35%

自付額並不適用於產科保障。

◆ 藍十字將會賠償在扣除由客戶承擔之每宗傷病的自付額後的合資格費用。假如相關保障項目的合資格費用為US\$4,000以及每宗傷病的自付額為US\$1,000，藍十字將會賠償US\$3,000，而客戶將要承擔餘下之US\$1,000。

## Free Personal Accident Coverage for Children

If you select Optional Personal Accident Benefits, your children aged 6 or below will be entitled to the same benefit for free provided that they are covered under the Basic Hospital and Surgical Benefits.

## Choices of Deductible◆

Choices of deductible for inpatient benefits are available to offer you a comprehensive Basic Hospital and Surgical Benefits with lower premium.

Deductibles are not applicable to Maternity Benefits.

◆ Blue Cross will reimburse the eligible expenses incurred in excess of a deductible per disability which is borne by a customer who has chosen the deductible option. If the eligible expenses incurred for a relevant benefit item is US\$4,000 and the deductible of US\$1,000 per disability applies, Blue Cross will reimburse US\$3,000 and the customer will have to bear the remaining US\$1,000.

## 無索償折扣<sup>5</sup>

於續保時，若受保人並沒有在下表所述的無索償期內提出任何基本保障的索償，基本保障的保費可獲相應之無索償折扣。

緊接保單續保前 之無索償期 No Claim Period Immediately Preceding Policy Renewal	1年 year	連續2年 2 consecutive years	連續3年 3 consecutive years	連續4年 4 consecutive years	連續5年或以上 5 consecutive years or above
折扣率 Premium Discount	5%	5%	10%	10%	10%

任何就緊急門診治療或門診手術現金津貼（如適用）作出的索償將不會影響受保人獲得無索償折扣的資格。

## No Claim Discount<sup>5</sup>

Upon renewal, the insured will receive No Claim Discount on the premium payable for the Basic Benefits, if no claim under Basic Benefits has been made during the respective no claim periods as specified in the table below.

Any claim made under Emergency Outpatient Treatment or Outpatient Surgery Cash Allowance (if applicable) will not affect the insured's eligibility for the No Claim Discount.

## 計劃摘要 Plan Summary

<b>產品名稱</b> Product Name	大班醫療保險計劃 Taipan Medical Insurance Plan
<b>購買目的及需要</b> Purchase Objectives and Needs	為將來的醫療需要作準備： Prepare for future health care needs: <ul style="list-style-type: none"> <li>▪ 支付醫療費用；及 To settle medical expenses; and</li> <li>▪ 彌補住院期間之收入損失 To compensate for the loss of income during hospital confinement</li> </ul>
<b>產品類型</b> Product Type	償款，但包含非償款現金保障 Indemnity, but incorporated with non-indemnity cash benefits
<b>保單期</b> Period of Cover	1年 Year
<b>投保年齡</b> Enrolment Age	12日至70歲 Age 12 days to age 70
<b>保單續保</b> Policy Renewal	每年續保至終身 <sup>#</sup> （保證） <sup>1</sup> Annual renewal for life <sup>#</sup> (guaranteed) <sup>1</sup>
<b>保單貨幣</b> Policy Currency	美元 USD
<b>自付額<sup>◆</sup></b> Deductible <sup>◆</sup>	US\$1,000 / US\$2,000 / US\$3,000
<b>保障地域</b> Cover Area	全球 Worldwide
<b>冷靜期<sup>6</sup></b> Cooling-off Period <sup>6</sup>	40日 Days
<b>繳費模式</b> Payment Mode	年繳 / 半年繳 / 月繳 Annual/Semi-annual/Monthly

<sup>#</sup> 附加一百萬元保障可續保至99歲，而附加人身意外保障可續保至75歲。

<sup>◆</sup> 藍十字將會賠償在扣除由客戶承擔之每宗傷病的自付額後的合資格費用。假如相關保障項目的合資格費用為US\$4,000以及每宗傷病的自付額為US\$1,000，藍十字將會賠償US\$3,000，而客戶將要承擔餘下之US\$1,000。

<sup>#</sup> Renewal of Optional One Million Coverage Benefits is up to age 99, while renewal of Optional Personal Accident Benefits is up to age 75.

<sup>◆</sup> Blue Cross will reimburse the eligible expenses incurred in excess of a deductible per disability which is borne by a customer who has chosen the deductible option. If the eligible expenses incurred for a relevant benefit item is US\$4,000 and the deductible of US\$1,000 per disability applies, Blue Cross will reimburse US\$3,000 and the customer will have to bear the remaining US\$1,000.



## 基本保障 Basic Benefits

### 基本住院及手術保障

此保障支付100%可償醫療費用，每宗傷病在扣除自付額（如選擇）後，最高賠償額如下：

### Basic Hospital and Surgical Benefits

The benefits cover 100% of eligible expenses in excess of a deductible (if chosen) of the applicable benefit for each disability, subject to the following maximum benefit limit per disability:

保障項目 Benefit Items	每宗傷病最高賠償額 Maximum Benefit Limit Per Disability (US\$)
<b>病房費用 Room and Board</b> 住院日數不限 Unlimited days of confinement	全數賠償 Full Cover
<b>醫院雜項費用 Miscellaneous Hospital Charges</b>	全數賠償 Full Cover
<b>外科醫生費用 Surgeon's Fees</b>	全數賠償 Full Cover
<b>麻醉科醫生費用 Anaesthetist's Fees<sup>#</sup></b>	全數賠償 Full Cover
<b>手術室費用 Operating Theatre Charges<sup>#</sup></b>	全數賠償 Full Cover
<b>受保子女住院陪床費用 Companion Bed for Insured Child</b> 適用於19歲以下受保人 Applicable to insured below age 19 (住院日數不限 Unlimited days of confinement)	全數賠償 Full Cover
<b>醫生巡房費用、專科醫生費用、病理學家和放射學家費用 Physician's Visit Fees, Specialist's Fees, Pathologist's Fees and Radiologist's Fees</b>	全數賠償 Full Cover
<b>註冊私家看護費用及物理治療服務 Registered Private Nurse's Fees and Physiotherapy Services</b>	全數賠償 Full Cover
<b>特別費用 Special Charges</b> 1. 血液及血漿 Blood and blood plasma 2. 人造義體/義肢 Prosthetic devices	全數賠償 Full Cover
<b>精神病或心理治療 Mental or Psychological Treatment</b> 每天限額 Limit per day 每年限額 Limit per year	150 4,000
<b>緊急門診治療 Emergency Outpatient Treatment</b>	全數賠償 Full Cover
<b>門診手術現金津貼* Outpatient Surgery Cash Allowance*</b> 每宗日症手術療程 <sup>^</sup> Per surgical Day Case Procedure <sup>^</sup>	300
<b>適用於選擇無自付額之受保人 Applicable to an Insured with No Deductible</b>	
<b>住院入息共付賠償<sup>▲</sup> Hospital Income for Double Benefit<sup>▲</sup></b> (最長45天 Max. 45 days)	每天 per day 150

<sup>#</sup> 藍十字在須支付「外科醫生費用」的情況下，方可賠償此保障所引致的費用。

<sup>#</sup> Charges for such benefits will be payable on condition that Surgeon's Fees are payable by Blue Cross.

\* 只適用於以日症手術形式接受以下手術：食道胃十二指腸內窺鏡檢查、結腸鏡檢查、膀胱鏡檢查、關節鏡檢查、陰道鏡檢查、支氣管鏡檢查、視網膜脫落的修補手術及宮腔鏡檢查。

\* Only applicable to the following day case procedures: oesophagogastroduodenoscopy, colonoscopy, cystoscopy, arthroscopy, colposcopy, bronchoscopy, repair of retinal detachment and hysteroscopy.

<sup>^</sup> 「日症手術」指於門診設施由醫生進行屬醫療必要之醫療或外科程序。門診設施包括醫生診所，或醫院設立及營運之日症中心、日間護理中心、門診部或相等之門診設施。

<sup>^</sup> "Day Case Procedure" means a medically necessary medical or surgical procedure which is performed by a physician in an outpatient facility. An outpatient facility may refer to a physician's clinic, or a day case centre, a day care centre or an outpatient department or equivalent facility established and operated by a hospital.

<sup>▲</sup> 若受保人獲得藍十字以外之其他註冊保險公司所提供的任何其他醫院賠償計劃之保障（不論是屬個人或團體保單），而在該註冊保險公司支付任何賠償後，藍十字方作出賠償，本保障將賠償按保障項目表中所列限額，就每日於醫院住院期間支付額外現金津貼。

<sup>▲</sup> For the insured covered by any other hospital reimbursement plans offered by a licensed insurance company other than the Company, regardless of whether it is an individual or group policy, if Blue Cross reimburses after any reimbursement has been paid from such licensed insurance company, this benefit shall be payable as extra cash benefit for each day of confined period in hospital subject to the limits as specified in the schedule of benefits.

註：

■ 基本住院及手術保障、產科保障及附加門診保障之綜合最高賠償額為每宗US\$300,000，並以每項保障所列之賠償額為限。76歲或以上受保人的綜合最高賠償額為US\$150,000。

Remarks:

■ The overall maximum benefit limit for Basic Hospital and Surgical Benefits, Maternity Benefits and Optional Outpatient Benefits is US\$300,000 per disability, subject to the limit of each benefit item. For insured aged 76 or above, such overall maximum benefit limit is US\$150,000.

■ 所有費用必須為「合理慣例」<sup>7</sup>及「醫療必要」<sup>8</sup>的開支。

■ All expenses incurred must be Reasonable and Customary<sup>7</sup> and Medically Necessary<sup>8</sup>.

## 基本保障 Basic Benefits

### 產科保障

此保障支付100%住院費、外科醫生費用及特別費用（包括產前、產後診所護理及不多於7天的育嬰護理），最高賠償額如下：

### Maternity Benefits

The benefits cover 100% of hospital inpatient charges, surgeon's fees and special charges (including pre- and post-natal care clinical consultations and up to 7 days of nursing care), subject to the following maximum benefit limit:

保障項目 Benefit Items	最高賠償額 Maximum Benefit Limit (US\$)
剖腹生產 Caesarean Section（等候期：1年）(Waiting period: 1 year)	5,000
自然分娩 Normal Delivery（等候期：1年）(Waiting period: 1 year)	4,200
流產或治療性墮胎 Miscarriage or Therapeutic Abortion （等候期：90日）(Waiting period: 90 days)	3,600

自付額並不適用於產科保障。

Deductibles are not applicable to Maternity Benefits.

## 額外免費保障 Extra Free Benefits

除基本保障外，我們更為您提供額外的免費保障，讓您享有更全面的醫療保障：

In addition to the Basic Benefits, we offer you extra free benefits that provide you with holistic medical protection:

保障項目 Benefit Items	最高賠償額 Maximum Benefit Limit (US\$)
<b>個人責任保障 Personal Liability Benefits</b> 保障受保人因意外而導致第三者受傷或造成財物損毀，並須承擔的法律責任 Protects the insured against legal liabilities towards third parties for bodily injury or damage to property arising from accidents 任何一次意外及/或每一受保期的賠償額 Limit for any one accident and/or in any one period of insurance	625,000
<b>個人財物保障 Personal Effects Benefits</b> 保障受保人外遊時香港的主要住所在空置的情況下被爆竊所導致的個人財物損失（手提電話及手提電腦等除外） Protects valuables and personal effects of the insured against loss or damage as a result of burglary occurred at his/her principal home in Hong Kong whilst it is unoccupied during the period of a journey (except mobile phones and laptops, etc.) 每項物品限額 Limit per article 每年限額 Limit per year * 受保人需自行負責每項物品 US\$38 的自付額 Claims are subject to an excess of US\$38 per article	380 1,900

### 24小時全球緊急援助

萬一遇上緊急事故，24小時全球緊急援助為您提供多項服務，包括：

- 24小時熱線提供諮詢服務
- 電話醫療諮詢及評估服務，以及醫生和專科醫生轉介服務
- 醫療撤離
- 一經批准入院，代為墊付所需保證金
- 安排恩恤探訪
- 安排缺乏照顧的受供養子女送返原居地
- 安排運返遺體/骨灰
- 提供法律援助及保釋援助
- 其他援助包括安排運送當地未能提供的必需藥物及醫療儀器及提供一般旅遊資訊等

### 24-hour Worldwide Emergency Aid

In the event of emergency, 24-hour Worldwide Emergency Aid offers you a wide range of services including:

- 24-hour hotline for enquiry service
- Medical advice and evaluation via telephone, referral to physicians and specialists
- Medical evacuation
- Deposit guarantee for any approved hospital admission
- Arrangement of compassionate visit
- Arrangement for the return of unattended dependant children to place of residence
- Arrangement for the repatriation of mortal remains/ashes
- Legal assistance and bail bonds assistance
- Other assistance such as arranging dispatch of any essential medicine and medical equipment which is not locally available and providing general travel information, etc.

註：基本住院及手術保障、產科保障及附加門診保障之綜合最高賠償額為每宗傷病US\$300,000，並以每項保障所列之賠償額為限。76歲或以上受保人的綜合最高賠償額為US\$150,000。

- 所有費用必須為「合理慣例」<sup>7</sup>及「醫療必要」<sup>8</sup>的開支。

Remarks: The overall maximum benefit limit for Basic Hospital and Surgical Benefits, Maternity Benefits and Optional Outpatient Benefits is US\$300,000 per disability, subject to the limit of each benefit item. For insured aged 76 or above, such overall maximum benefit limit is US\$150,000.

- All expenses incurred must be Reasonable and Customary<sup>7</sup> and Medically Necessary<sup>8</sup>.

## 預防計劃

特別為「大班醫療保險計劃」而設的免費身體健康檢查，詳情如下：

## Preventive Care

Free annual checkup programmes are designed exclusively for Taipan Medical Insurance Plan with details below:

### 周年身體健康檢查 Annual Health Checkup

#### 檢查項目 Checkup Items

- |   |   |
|---|---|
| 1. 醫療顧問分析化驗報告及普通體格評估                                | 1. Medical advice on laboratory reports and general physical measurements                                       |
| 2. 貧血及血病檢查<br>(i) 全血計算<br>(ii) 紅血球沉降率<br>(iii) 血小板量 | 2. Anaemia and blood diseases screening<br>(i) Complete blood count<br>(ii) ESR<br>(iii) Platelet               |
| 3. 血型及血因子類別<br>(i) 血型及血因子                           | 3. Blood grouping<br>(i) ABO blood group and Rh factor  |
| 4. 糖尿病檢查<br>(i) 血糖                                  | 4. Diabetic screening<br>(i) Glucose  |
| 5. 痛風症檢查<br>(i) 尿酸                                  | 5. Gout screening<br>(i) Uric acid  |
| 6. 心肺病檢查<br>(i) 胸部X光檢查及報告<br>(ii) 心電圖及報告            | 6. Heart and lung diseases screening<br>(i) Chest X-ray with report<br>(ii) Electrocardiogram (ECG) with report |
| 7. 心臟病及中風檢查<br>(i) 高低密度膽固醇                          | 7. Heart disease and stroke risk factors screening<br>(i) HDL, LDL  |
| 8. 腸病檢查<br>(i) 大便常規檢查                               | 8. Intestinal diseases screening<br>(i) Stool (routine examination)   |
| 9. 血脂肪檢查<br>(i) 總膽固醇<br>(ii) 三酸甘油脂                  | 9. Lipids pattern screening<br>(i) Cholesterol total<br>(ii) Triglycerides                                      |
| 10. 肝功能試驗<br>(i) 谷草轉氨酶<br>(ii) 谷丙轉氨酶                | 10. Liver function tests<br>(i) SGOT (AST)<br>(ii) SGPT (ALT)   |
| 11. 腎功能試驗<br>(i) 肌肝酸<br>(ii) 尿素<br>(iii) 小便常規檢查     | 11. Renal function tests<br>(i) Creatinine<br>(ii) Urea<br>(iii) Urine (routine examination)                    |
| 12. 甲狀腺功能試驗<br>(i) 甲狀腺素 (T4)                        | 12. Thyroid function test<br>(i) Thyroxine (T4)   |

### 周年牙齒保健 Annual Dental Checkup

#### 檢查項目 Checkup Items

- |                             |   |
|-----------------------------|---|
| 1. 洗牙石及牙漬 (1次)              | 1. Scaling and prophylaxis massage polishing (1 time) |
| 2. 全景 X 光照片或<br>4 張口腔內 X 光片 | 2. Panoramic radiography or 4 intra-oral X-rays       |
| 3. 全面性口腔檢查 (1次)             | 3. Complete oral examination (1 time)                 |

註：

- 身體檢查服務由藍十字指定的醫療服務機構提供，並須符合有關條款及細則，而受保人可於保單生效後及每年續保後享有此免費檢查服務。
- 在符合有關之條款及細則，和不涉及不保事項的情況下，受保人可獲得以上額外免費保障。

Remarks:

- The checkup service is provided by the designated service provider(s) of Blue Cross and subject to relevant terms and conditions. The insured(s) will be entitled to the free checkup service after policy issuance and each subsequent renewal.
- The above Extra Free Benefits will be offered to the insured subject to the respective terms and conditions and policy exclusions.

## 附加健康檢查計劃 Optional Checkup Programme

您可以優惠價選擇以下檢查計劃：

You can choose the following checkup programmes at preferential rates:

### 檢查項目 Checkup Item

#### 婦女健康檢查計劃 A (35歲或以下) Female Plan A (for age 35 or below)

- **婦產科檢查**  
盆腔及乳房檢查
- **子宮頸癌檢查**  
子宮頸抹片檢查及報告
- **Gynaecological examination**  
Physical pelvic and breast examination
- **Cervix cancer screening**  
Pap smear with report

#### 婦女健康檢查計劃 B (35 - 49歲) Female Plan B (for age 35 - 49)

- **婦產科檢查**  
盆腔及乳房檢查
- **子宮頸癌檢查**  
子宮頸抹片檢查及報告
- **乳癌檢查**  
乳房造影及超聲波檢查及報告
- **Gynaecological examination**  
Physical pelvic and breast examination
- **Cervix cancer screening**  
Pap smear with report
- **Breast cancer screening**  
Mammography and ultrasound of breasts with report

#### 婦女健康檢查計劃 C (50歲或以上) Female Plan C (for age 50 or above)

- **婦產科檢查**  
盆腔及乳房檢查
- **子宮頸癌檢查**  
子宮頸抹片檢查及報告
- **乳癌檢查**  
乳房造影及超聲波檢查及報告
- **骨質疏鬆症檢查**  
超聲波骨質密度檢查
- **Gynaecological examination**  
Physical pelvic and breast examination
- **Cervix cancer screening**  
Pap smear with report
- **Breast cancer screening**  
Mammography and ultrasound of breasts with report
- **Osteoporosis screening**  
Bone density by ultrasound

#### 男士健康檢查計劃 Male Plan

- **前列腺癌檢查**  
前列腺特异性抗原
- **Prostate cancer screening**  
Prostate specific antigen

#### 癌病檢查 Cancer Screening

- **肝癌及肝硬化檢查**  
甲胎蛋白
- **直腸癌檢查**  
癌胚抗原
- **鼻咽癌檢查**  
鼻咽癌過濾性病毒
- **Screening for liver cancer and cirrhosis**  
AFP
- **Colorectal cancer screening**  
CEA
- **Nasopharyngeal carcinoma screening**  
EBV

## 附加保障 Optional Benefits

### 附加門診保障

根據您所選的賠償額級別而定，此保障賠償以下各項可償門診費用的100%或80%。當80%賠償百分比適用時，藍十字將會賠償80%的合資格費用，而您將要承擔剩餘20%的金額；而在100%賠償百分比下，藍十字將全數支付合資格費用。

<ul style="list-style-type: none"> <li>■ 普通科及專科醫生診症</li> </ul>	<ul style="list-style-type: none"> <li>■ General Practitioner's Consultation and Specialist's Consultation</li> </ul>
<ul style="list-style-type: none"> <li>■ 物理治療、脊椎治療、針灸及催眠診治<sup>#</sup></li> </ul>	<ul style="list-style-type: none"> <li>■ Physiotherapy, Chiropractic, Acupuncture and Hypnotherapy<sup>#</sup></li> </ul>
<ul style="list-style-type: none"> <li>■ 處方藥物<sup>#</sup>、包紮、X光診斷及化驗<sup>#</sup>及手術工具</li> </ul>	<ul style="list-style-type: none"> <li>■ Prescribed Medicines and Drugs<sup>#</sup>, Dressings, Diagnostic X-rays and Laboratory Tests<sup>#</sup> and Surgical Appliances</li> </ul>
<ul style="list-style-type: none"> <li>■ 中醫治療 (全科及跌打) 每天1次，每次最高限額US\$50</li> </ul>	<ul style="list-style-type: none"> <li>■ Chinese Medicine Practitioner Treatment (General practice and bone-setting) 1 visit per day, max. US\$50 per visit</li> </ul>

<sup>#</sup> 催眠診治、X光診斷及化驗需具書面轉介；處方藥物則需處方信件。

註：
 

- 基本住院及手術保障、產科保障及附加門診保障之綜合最高賠償額為每宗傷病US\$300,000，並以每項保障所列之賠償額為限。76歲或以上受保人的綜合最高賠償額為US\$150,000。
- 所有費用必須為「合理慣例」<sup>7</sup>及「醫療必要」<sup>8</sup>的開支。

如選擇年繳保費，您將獲發E.O.S.醫療卡，於任何藍十字網絡診所接受普通科醫生診症、中醫治療或專科醫生診症。

### 附加牙科保障

此保障支付以下各項可償牙科服務費用的100%，最高賠償額如下：

保障項目 Benefit Items	最高賠償額 Maximum Benefit Limit (US\$)
口腔檢查及洗牙 Oral Examination and Scale & Polish	全數賠償 Full Cover (每個受保期內兩次 Twice per period of insurance)
<b>常規治療 Routine Treatments</b> (等候期：90天) (Waiting period: 90 days) 補牙、脫牙、X光、鑲嵌、覆蓋、膿瘡排放、齒根管治療、牙周病手術及相關的藥物使用 Tooth fillings, tooth extractions, X-ray, inlays, onlays, drainage of abscesses, root canal work, periodontal surgery and the related medications	2,000
<b>修復治療 Restoration Treatments</b> (等候期：90天) (Waiting period: 90 days) 脫除智慧齒或阻生齒、新置或修復假牙/齒冠/齒橋、牙齒植入或矯正治療、麻醉、修復齒尖的牙冠釘、齒根尖切除術、軟組織/牙骨阻生、金牙鑲嵌及覆蓋及相關的藥物使用 Removal of wisdom tooth/impacted tooth, new or repair of dentures/crowns/bridges, implants or orthodontic treatment, anaesthesia, pins for cusp restoration, apicoectomy, soft-tissue/bony impaction, gold inlays and onlays and the related medications	3,000

註：所有費用必須為「合理慣例」<sup>7</sup>及「醫療必要」<sup>8</sup>的開支。

### Optional Outpatient Benefits

According to the level of reimbursement you have selected, the benefits cover 100% or 80% of eligible outpatient expenses of the following. When the 80% reimbursement percentage option applies, Blue Cross will reimburse 80% of the eligible expenses incurred, and you will have to bear the remaining 20%; while the full amount of the eligible expenses incurred will be paid by Blue Cross under the 100% reimbursement option.

<sup>#</sup> For Hypnotherapy, Diagnostic X-rays and Laboratory Tests, referral letter is required; while prescription letter is required for Prescribed Medicines and Drugs.

Remarks:
 

- The overall maximum benefit limit for Basic Hospital and Surgical Benefits, Maternity Benefits and Optional Outpatient Benefits is US\$300,000 per disability, subject to the limit of each benefit item. For insured aged 76 or above, such overall maximum benefit limit is US\$150,000.
- All expenses incurred must be Reasonable and Customary<sup>7</sup> and Medically Necessary<sup>8</sup>.

If premium is paid annually, you will be issued with an Executive Outpatient Service (E.O.S.) Card which entitles you to use it at Blue Cross network clinics for general practitioner's consultations, Chinese medicine practitioner treatments or specialist's consultations.

### Optional Dental Benefits

The benefits cover 100% of eligible expenses of the following dental services up to the maximum benefit limit listed below:

Remark: All expenses incurred must be Reasonable and Customary<sup>7</sup> and Medically Necessary<sup>8</sup>.

## 附加一百萬元保障

如您想享有更充裕的保障，可將基本住院及手術保障、產科保障及附加門診保障的綜合最高賠償額提升至每宗傷病US\$1,000,000\*。

\*以每項保障項目的賠償額為限。

註：■ 附加一百萬元保障不適用於99歲以上受保人。在符合有關之條款及細則，和不涉及不保事項的情況下，受保人可獲提供有關保障。  
■ 所有費用必須為「合理慣例」<sup>7</sup>及「醫療必要」<sup>8</sup>的開支。

## 附加人身意外保障

此保障可保障因意外而導致身故或傷殘，賠償將根據下表的賠償額百分比：

保障項目 Benefit Items	最高賠償額百分比 Percentage of Maximum Benefit Limit
意外身故 Accidental death	100%
永久完全傷殘 Permanent total disablement	100%
喪失一肢或多肢肢體 Loss of one or more limbs	100%
永久完全喪失一肢或多肢功能 Permanent total loss of use of one or more limbs	100%
永久完全喪失單目或雙目視力 Permanent total loss of sight of one or both eyes	100%
永久完全喪失語言及聽覺能力 Permanent total loss of speech and hearing	100%
永久完全喪失兩隻耳朵聽覺能力 Permanent total loss of hearing in both ears	75%
永久完全喪失一隻耳朵聽覺能力 Permanent total loss of hearing in one ear	15%
永久完全喪失語言能力 Permanent total loss of speech	50%
永久完全喪失單目的晶狀體 Permanent total loss of lens of one eye	50%
喪失一手姆指及四指功能 Loss of use of thumb and four fingers of one hand	50%
喪失一手四指功能 Loss of use of four fingers of one hand	40%
喪失整隻姆指功能 Loss of use of whole thumb	25%
喪失整隻食指功能 Loss of use of whole index finger	10%
喪失整隻中指功能 Loss of use of whole middle finger	6%
喪失整隻無名指功能 Loss of use of whole fourth finger	5%
喪失整隻尾指功能 Loss of use of whole little finger	4%
喪失一腳全部腳趾功能 Loss of use of all toes on one foot	15%

每宗意外或每保單週年內的賠償總額將不高於保障額。

註：附加人身意外保障不適用於75歲以上受保人。在符合有關之條款及細則，和不涉及不保事項的情況下，受保人可獲提供有關保障。

## Optional One Million Coverage Benefits

For those who look for a more ample-amount coverage, the overall maximum benefit limit of Basic Hospital and Surgical Benefits, Maternity Benefits, and Optional Outpatient Benefits can be increased to US\$1,000,000 per disability\*.

\* Subject to the limit of each benefit item.

Remarks: ■ Optional One Million Coverage Benefits are not applicable to insured aged over 99, and such benefits will be offered subject to the respective terms and conditions and policy exclusions.  
■ All expenses incurred must be Reasonable and Customary<sup>7</sup> and Medically Necessary<sup>8</sup>.

## Optional Personal Accident Benefits

The benefits cover accidental death or disablement due to accidents according to the following percentage of benefit limit:

## 重要事項

1. 「保證終身續保」不適用於附加一百萬元保障及附加人身意外保障。本計劃保證續保（視乎續保時本公司仍否提供本計劃），藍十字將不會根據個別受保人於續保時的健康狀況或索償記錄，向其額外收取保費或附加不保事項至個別保單。然而，藍十字將保留在續保時調整保費及更改條款及細則的權利，例如：因應受保人年齡的調整、特定風險級別或風險級別的轉變作出保費調整。

因風險變動有機會影響本保單的保障，保單持有人在受保期內，必須就受保人之地址、居留地、職業變更或其他風險變動即時通知藍十字。

此外，藍十字亦保留停止發售或中止本計劃及對保單作出更改的權利。若藍十字決定停止發售或中止本計劃，藍十字將致力為受保人轉換至另一個可供選擇的醫療保險計劃。

2. 「出院免找數」只適用於入住本港私家醫院。需於入院前至少4個工作天填妥及交回「入院前登記表格」以進行申請及審批手續。藍十字可隨時發出書面通知以終止或暫停任何免付賬醫療服務，並保留所有與免付賬醫療服務相關事項及爭議的最終決定權。藍十字承保的責任只限於符合「大班醫療保險計劃」規定的合資格醫療費用，並會向受保人收取一切已繳付但不屬保單承保範圍的醫療費用（如有）。
3. 可賠償金額之評估只供客戶參考之用，實際賠償金額以最終理賠決定為準。所有保障項目只會在符合所有保單條款及細則及所有不保之事項的情況下支付。
4. 任何索償申請須於出院或完成有關的醫療服務當日起計90天內遞交。若客戶欲提交HK\$3,000以上之門診收費或任何住院費用的索償申請，可以郵寄方式或親身遞交已填妥的賠償申請表及所需之完整文件予藍十字。客戶亦可經網上遞交門診費用索償，惟須向藍十字提供收據正本。賠償申請表可向藍十字客戶服務中心索取或於藍十字網頁下載。
5. 如在保單持有人就該受保人之保障以無索償折扣續保後，藍十字才支付或須支付該受保人於上一個受保期就基本保障條款項下產生的索償，保單持有人必須在藍十字發出繳費通知後21天內向藍十字償還折扣差額。除非藍十字收到該折扣差額，否則藍十字不會向受保人支付任何保單下的保障利益。

## Important Notes

1. Guaranteed Lifetime Renewal is not applicable to Optional One Million Coverage Benefits and Optional Personal Accident Benefits. Renewal is guaranteed (subject to the availability of the Plan at the time of renewal) and Blue Cross will neither charge extra premium nor impose additional exclusions on an individual policy based on the insured's health status or claim history at the time of renewal. However, Blue Cross reserves the right to revise the terms and conditions of the policy and adjust the premium upon policy renewal due to, for example, age-related adjustment, a particular risk class or change of risk class.

During the period of insurance, the policyholder shall give immediate notice to Blue Cross in respect of any change of address, residency, occupation of an insured or any other change of risk which may affect the cover of this policy.

In addition, Blue Cross also reserves the right to cease offering or suspend this Plan and to make changes to the policy. If Blue Cross decides to cease offering or suspend this Plan, Blue Cross will endeavour to transfer the insured to another available medical insurance plan.

2. "No Hospital Bills to Pay" is only applicable to admission to private hospitals in Hong Kong. A Hospitalisation Pre-registration Form is required to be completed and returned to Blue Cross for application and approval process at least 4 working days prior to admission. Blue Cross may withdraw or suspend any credit facilities service anytime by giving a written notice. All matters and disputes in relation to credit facilities services will be subject to the final decision of Blue Cross. The liability of Blue Cross under the policy is limited to indemnify the insured for the eligible medical expenses payable in accordance with the Taipan Medical Insurance Plan. Blue Cross shall recover from the insured the medical expenses settled on behalf of the insured which fall outside coverage of the policy (if any).
3. Assessment of the estimated eligible claim amounts is for customers' reference only, the actual eligible claim amounts will be subject to the final claim decision. All benefits will be payable subject to the terms and conditions and the full list of policy exclusions.
4. Any claims must be submitted within 90 days after discharge from hospital or the date on which relevant medical services are performed and completed. If customer wishes to submit claim for an outpatient expense over HK\$3,000 or any hospitalisation reimbursement, a completed claim form and full documentation must be submitted to Blue Cross by post or in person. Customer can also submit claims of outpatient expenses via e-submission together with the original receipts to Blue Cross. Claim form can be obtained from Blue Cross Customer Service Centre or downloaded from Blue Cross website.
5. In the event that after the insurance coverage for that insured is renewed at a No Claim Discount, a claim by that insured for any benefit under the Basic Benefits section, which has accrued in the previous period of insurance, is paid or becomes payable by Blue Cross, the policyholder shall reimburse the discounted amount to Blue Cross within 21 days from the date of the invoice. No benefits shall be payable to the insured under this policy unless the discounted amount is received by Blue Cross.

## 重要事項

6. 客戶可在冷靜期內行使權利取消保單及獲發還全數已付保費及保費徵費，但行使此項權利時，必須符合以下條件：

- (a) 取消要求必須由保單持有人簽署，藍十字必須於冷靜期內直接收到該要求。冷靜期為緊接保單或冷靜期通知書交付予保單持有人或其指定代表之日起計的40日期間內，以較早者為準。為免生疑問，交付保單或冷靜期通知書當天並不包括在計算40日期間內。然而，若第40日當天並非工作天，則冷靜期將包括隨後的工作天的一天在內；及
- (b) 如曾經因索償而獲得賠償，則不會獲發還保費。

冷靜期過後，客戶可向藍十字發出不少於7天的書面通知以取消保單。如於首個受保期內符合以下條件：a) 無任何索償；b) 無尚未繳付之每年保費；及c) 所有醫療卡（如有）及優惠券（如有）從未被使用及已被退還予藍十字，客戶可獲無息退還部分已繳保費。詳情請參閱保單條款及細則。

此外，保單會在以下情況自動終止，以最先者為準：a) 當保單持有人取消保單，或當保單因沒有繳付保費或根據保單條款及細則所列的情形被取消；或b) 本保單最後一名在生之受保人身故當日。

7. 「合理慣例」指治療、服務或物料收費不超過在當地由具相若水平的相關服務或物料供應者，為同一性別和年齡的人士針對類似疾病或傷患提供的相類似的治療、服務或物料所收取的收費水平。「合理慣例」的收費在任何情況下均不應高於所招致的實際收費。藍十字會參照以下資料（如適用）以釐定「合理慣例」的醫療費用：a) 載列於由香港政府發佈之憲報中香港公立醫院向自費病人收取私家住院醫療服務的費用；b) 由業界進行的治療或服務費用調查；c) 內部索償數據；d) 受保程度或水平；及/或e) 於提供治療、服務或物料當地之其他適當相關參考資料。

8. 「醫療必要」指需要就傷病接受治療或服務，而所進行的治療或服務按照一般公認的醫療標準乃屬必要的。被視為「醫療必要」的治療或服務必須符合以下各項：a) 需要合資格醫療人士的專業知識；b) 與診斷一致，並對醫治該狀況而言屬必需；c) 根據專業而審慎的醫療標準提供，而並非主要為使受保人、其家庭成員、護理人員或主診的合資格醫療人士帶來方便或感到舒適而提供；及d) 在該情況下以最具成本效益的方式和設定提供。

## Important Notes

6. Customer may exercise the right to cancel the policy with full refund of paid premiums and levy during the cooling-off period. The cancellation right is subject to the following conditions:

- (a) The request to cancel must be signed by the policyholder and received directly by Blue Cross within the cooling-off period. The cooling-off period is the period of 40 days immediately following the day of the delivery to the policyholder or the nominated representative of the policyholder, of the policy or the cooling-off notice, whichever is the earlier. For the avoidance of doubt, the day of delivery of the policy or the cooling-off notice is not included for the calculation of the 40-day period. However, if the last day of the 40-day period is not a working day, the period shall include the next working day; and
- (b) No refund can be made if a claim payment has been made.

Customer can request to cancel the policy after the cooling-off period by giving not less than 7 days' prior written notice to Blue Cross. Customer may be entitled to a refund of part of the premium paid without interest during the first period of insurance if the following conditions are fulfilled: a) no claims have been made; b) there is no outstanding annual premium under the policy; and c) all healthcare cards (if any) and coupons (if any) are not being used and are returned to Blue Cross. Please refer to the terms and conditions of policy for details.

In addition, the policy shall be automatically terminated on the earliest of the following: a) when the policyholder cancels the policy, or the policy is cancelled due to non-payment of premiums or any circumstance as set out in the terms and conditions of policy; or b) the date of death of the last remaining life insured under the policy.

7. "Reasonable and Customary" refers to a charge for medical treatments, services or supplies which does not exceed the general level of charges being charged by the relevant service providers or suppliers of similar standing in the locality where the charge is incurred for similar treatments, services or supplies to individuals of the same sex and age, for a similar disease or injury. The "Reasonable and Customary" charges shall not in any event exceed the actual charges incurred. In determining whether an expense is "Reasonable and Customary", Blue Cross may make reference to the following (if applicable): a) the gazette issued by the Hong Kong Government which sets out the fees for the private patient services in public hospitals in Hong Kong; b) industrial treatment or service fee survey; c) internal claim statistics; d) extent or level of benefit insured; and/or e) other pertinent source of reference in the locality where the treatments, services or supplies are provided.

8. "Medically Necessary" refers to the need to have treatment or service for the purpose of treating a disability in accordance with the generally accepted standards of medical practice and such treatment or service must: a) require the expertise of a qualified medical practitioner; b) be consistent with the diagnosis and necessary for the treatment of the condition; c) be rendered in accordance with professional and prudent standards of medical practice, and not be rendered primarily for the convenience or the comfort of the Insured, his/her family members, caretaker or attending qualified medical practitioner; and d) be rendered in the most cost-efficient manner and setting appropriate in the circumstances.



## 主要不保事項\*

1. 並非屬醫療必要的治療或測試，或並非經醫生處方購買的藥物。
2. 純粹因接受一般身體檢查、X光診斷、先進造影、化驗或物理治療、復康、休養、療養或專職醫療服務，包括但不限於職業治療及言語治療而住院。
3. 任何先天性疾患（疝氣、斜視或包皮開口狹窄除外）或成長障礙狀況或相類似疾病的相關治療。
4. 已存在的狀況。
5. 直接或間接因後天免疫力缺乏症病毒（「HIV病毒」）及其有關的傷病而引致的費用，包括愛滋病及／或因愛滋病而引發的任何突變、衍生或變異，純因為受保人於受保人生效日期前感染HIV病毒而所引致。
6. 直接或間接因以下事項所引致的治療或傷病：濫用藥物或酒精、自我毀傷或企圖自殺、進行不法活動、飲用超過規定水平的酒精或服用超過規定水平的藥物後駕駛或操控機器，或經由性接觸傳染的疾病或其後遺症。
7. 以美容或整形為目的之任何服務費用；與以下相關的費用，但不限於聽力測試、例行血液測試、一般身體檢查、預防性治療、接種疫苗或防疫注射、非處方藥物等。
8. 除保單條款及細則內有關「附加牙科保障」項目所訂明外，因牙科狀況接受之牙科治療及口腔外科手術（受保人因意外而需在住院期間接受的緊急牙科治療及手術除外），及因牙科狀況或於口腔外科手術後不論是以住院病人或門診病人身分接受的覆診治療。
9. 除保單條款及細則內有關「自然分娩／剖腹生產」或「流產或治療性墮胎」項目所訂明外，與產科及其併發症有關的檢查、治療、外科程序及諮詢服務，包括驗孕或其後的分娩、墮胎或流產；節育或恢復生育；兩性結紮或變性；不育治療等。
10. 除保單條款及細則內有關「精神病或心理治療」項目所訂明外，直接或間接由任何精神或心理狀況，以及其生理及心理表現而引致的治療。
11. 直接或間接因戰爭（不論宣戰與否）、內戰、侵略、外敵行動、敵對行動、叛亂、革命、暴動、起義或軍事政變或奪權；或因參與陸軍、空軍、海軍及其他紀律性服務而引致的治療或傷病。

\* 適用於基本保障、附加門診保障及附加牙科保障。

## Major Exclusions\*

1. Treatment or test which is not Medically Necessary; or purchase of drugs which are not prescribed by a physician.
2. Confinement solely for the purpose of general checkup, diagnostic X-ray, advanced imaging, laboratory test or physiotherapy, rehabilitation, rest cures, sanitarium care or allied health service, including but not limited to, occupational therapy and speech therapy.
3. Treatment related to Congenital Conditions (except Hernias, Strabismus and Phimosis) or Developmental Conditions or disease of similar kind.
4. Pre-existing Conditions.
5. Expenses directly or indirectly arising from Human Immunodeficiency Virus ("HIV") and its related Disability, including Acquired Immune Deficiency Syndrome (AIDS) and/or any mutations, derivation or variations thereof, consequential upon an HIV infection occurring before the Insured Effective Date.
6. Treatment or Disability directly or indirectly arising from or consequent upon: the abuse of drugs or alcohol, self-inflicted injuries or attempted suicide, illegal activity, or driving or maneuvering machines whilst exceeding the prescribed alcohol and drug limit, or venereal and sexually transmitted disease or its sequelae.
7. Any charges in respect of services for beautification or cosmetic purposes; expenses in relation to but not limited to hearing tests, routine blood tests, general check-ups, prophylaxis treatment, vaccinations or inoculations, over-the-counter drugs, etc.
8. Except as otherwise provided in the Terms and Conditions for "Optional Dental Benefits" in the policy, treatment of a dental condition and oral surgery (except treatment of an emergency and surgery arising from an accident received by an insured during confinement) as well as follow up treatment of the dental condition or oral surgery whether as an inpatient or outpatient.
9. Except as otherwise provided in the Terms and Conditions for "Normal Delivery/Caesarean Section" and "Miscarriage or Therapeutic Abortion" in the policy, all investigation, treatment, surgical procedure and counselling service relating to maternity conditions and its complications, including 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, etc.
10. Except as otherwise provided in the Terms and Conditions for "Mental or Psychological Treatment" in the policy, treatment directly or indirectly arising from any psychotic, psychological, or psychiatric conditions and any physiological or psychosomatic manifestations thereof.
11. Treatment or Disability directly or indirectly arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, riot, insurrection or military or usurped power; resulting from taking part in military, air force, naval and other disciplinary services.

\* Applicable to the Basic Benefits, Optional Outpatient Benefits and Optional Dental Benefits.

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- 此小冊子僅在香港派發。派發此小冊子並不構成亦不應被詮釋為在香港境外出售、游說顧客購買或提供任何保險產品。
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Notes:

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**Blue Cross 藍十字**

Member of BEA Group 東亞銀行集團成員



**客戶服務熱線**  
Customer Service Hotline  
**3608 2988**

**Blue Cross (Asia-Pacific) Insurance Limited**

藍十字(亞太)保險有限公司

29/F, BEA Tower, Millennium City 5, 418 Kwun Tong Road,  
Kwun Tong, Kowloon, Hong Kong  
香港九龍觀塘道418號創紀之城5期東亞銀行中心29樓  
Fax傳真：3608 2989 Email電郵：cs@bluecross.com.hk  
Website網址：www.bluecross.com.hk



## 大班醫療保險計劃 Taipan Medical Insurance Plan

### 保費表 Premium Table (US\$)

#### 1. 基本保障 Basic Benefits

年齡 Age	年繳 Annual	
	男性 Male	女性 Female
0 - 4	3,001	3,001
5 - 17	3,001	3,001
18 - 25	3,751	4,832
26 - 30	3,851	5,288
31 - 40	5,199	6,542
41 - 42	5,304	6,672
43 - 44	5,918	7,448
45 - 46	6,615	8,439
47 - 48	7,476	8,287
49 - 50	8,656	9,596
51 - 53	9,171	10,168
54 - 55	10,095	11,187
56 - 58	10,714	11,503
59 - 60	11,035	11,847
61 - 63	12,353	13,138
64 - 65	14,376	15,338
66 - 68	16,955	16,955
69 - 70	18,840	18,840
以下保費只適用於續保 The premiums below are for renewal only		
71 - 75	22,426	22,426
76 歲或以上 or above	22,634	22,634

## 2. 基本保障（選擇自付額） Basic Benefits (with Deductible)

年齡 Age	自付額 <sup>#</sup> Deductible <sup>#</sup> (US\$)					
	1,000		2,000		3,000	
	年繳 Annual		年繳 Annual		年繳 Annual	
	男性 Male	女性 Female	男性 Male	女性 Female	男性 Male	女性 Female
0 - 4	2,550	2,550	2,250	2,250	1,949	1,949
5 - 17	2,550	2,550	2,250	2,250	1,949	1,949
18 - 25	3,191	4,108	2,816	3,624	2,441	3,144
26 - 30	3,273	4,494	2,888	3,966	2,501	3,437
31 - 40	4,419	5,560	3,900	4,906	3,379	4,253
41 - 42	4,507	5,671	3,977	5,007	3,450	4,336
43 - 44	5,028	6,329	4,439	5,586	3,850	4,838
45 - 46	5,621	7,176	4,960	6,329	4,299	5,485
47 - 48	6,356	7,044	5,608	6,213	4,860	5,387
49 - 50	7,360	8,157	6,493	7,196	5,629	6,238
51 - 53	7,799	8,644	6,882	7,626	5,964	6,610
54 - 55	8,581	9,512	7,571	8,391	6,563	7,275
56 - 58	9,107	9,778	8,036	8,628	6,965	7,476
59 - 60	9,380	10,071	8,276	8,885	7,174	7,700
61 - 63	10,501	11,168	9,267	9,856	8,029	8,540
64 - 65	12,219	13,038	10,779	11,504	9,343	9,971
66 - 68	14,416	14,416	12,719	12,719	11,024	11,024
69 - 70	16,014	16,014	14,131	14,131	12,245	12,245
以下保費只適用於續保 The premiums below are for renewal only						
71 - 75	19,064	19,064	16,820	16,820	14,576	14,576
76 歲或以上 or above	19,237	19,237	16,978	16,978	14,713	14,713

<sup>#</sup> 以每宗傷病計算。Per disability.

### 3. 附加保障 Optional Benefits

#### a) 附加門診保障 Optional Outpatient Benefits

年齡 Age	100% 賠償額 100% Reimbursement		80% 賠償額 80% Reimbursement	
	年繳 Annual		年繳 Annual	
	男性 Male	女性 Female	男性 Male	女性 Female
0 - 4	2,737	2,737	2,144	2,144
5 - 17	2,542	2,542	2,004	2,004
18 - 25	2,770	3,455	2,170	2,708
26 - 30	2,829	3,537	2,217	2,762
31 - 40	2,930	3,676	2,294	2,864
41 - 44	3,392	4,007	2,654	3,113
45 - 46	3,491	4,127	2,736	3,207
47 - 48	3,588	4,241	2,810	3,294
49 - 50	3,769	4,398	2,953	3,414
51 - 53	3,885	4,526	3,045	3,518
54 - 55	4,000	4,665	3,134	3,622
56 - 58	4,157	4,846	3,258	3,765
59 - 60	4,281	4,991	3,357	3,876
61 - 63	4,584	5,127	3,593	3,970
64 - 65	4,860	5,259	3,810	4,066
66 - 70	6,562	6,858	5,142	5,459
以下保費只適用於續保 The premiums below are for renewal only				
71 - 75	10,129	10,129	7,941	7,941
76 歲或以上 or above	10,129	10,129	7,941	7,941

#### b) 附加牙科保障 Optional Dental Benefits

年齡 Age	年繳 Annual
0 - 70	923
以下保費只適用於續保 The premium below is for renewal only	
71 歲或以上 or above	923

### 3. 附加保障 Optional Benefits

#### c) 附加一百萬元保障 Optional One Million Coverage Benefits (保障至 99 歲 coverage up to age 99)

年齡 Age	年繳 Annual	
	男性 Male	女性 Female
0 - 4	720	777
5 - 17	720	777
18 - 25	720	777
26 - 30	720	777
31 - 45	1,059	1,285
46 - 50	1,059	1,285
51 - 55	1,845	2,087
56 - 60	1,845	2,087
61 - 65	1,845	2,087
66 - 70	2,264	2,348
以下保費只適用於續保 The premiums below are for renewal only		
71 - 75	2,264	2,348
76 - 80	4,352	4,444
81 - 85	6,476	6,575
86 - 90	7,842	7,947
91 - 95	8,565	8,672
96 - 99	9,098	9,207

#### d) 附加人身意外保障 Optional Personal Accident Benefits (保障至 75 歲 coverage up to age 75)

年齡 Age	年繳保費 (每 US\$1,000 投保額) Annual Premium (Per US\$1,000 Sum Insured) (US\$)	最高賠償額 Maximum Benefit Limit (US\$)
18 歲以下 Below age 18	1.28	10,000
18 - 75 歲* Age 18 - 75*	1.28	100,000

\* 最高投保年齡為 70 歲，可續保至 75 歲。Maximum enrolment age is 70, renewal up to age 75.

#### 注釋：

- 年齡以最近的生日日期計算。如您下一個生日是在投保日期起計 6 個月之內，保費將以下一個生日年齡計算，否則以目前年齡計算。如保單生效日期與投保日期不同，即以保單生效日期決定已屆年齡。
- 「0」歲指出生滿 12 日。
- 以月繳或半年繳的保費會被徵收分別 5% 及 2.5% 的附加費。月繳保費金額及附加費 = 年繳保費金額 x 0.0875。半年繳保費金額及附加費 = 年繳保費金額 x 0.5125。應付總金額以收款票據所示為準。
- 藍十字 (亞太) 保險有限公司 (「藍十字」) 保留在續保時調整保費，例如因應受保人年齡的調整、增加額外保障等，及更改條款及細則的權利。
- 保險業監管局將按照法例透過保險公司向投保人收取保費徵費。如欲得悉更多有關保險業監管局收取徵費的資料，請瀏覽藍十字網頁 [http://bluecross.com.hk/document/general/levy\\_collection](http://bluecross.com.hk/document/general/levy_collection)。
- 上述注釋適用於本文件的所有保費表。

#### Remarks :

- Age refers to the nearest birthday. If your next birthday falls within the coming 6 months from the enrolment date, the premium rate will be charged according to your next age attained. Otherwise, it will be charged based on your current age. Policy effective date will be used to determine the age attained if it is different from the enrolment date.
- Age "0" means age 12 days.
- Premiums to be paid by monthly or semi-annual payment modes are subject to a surcharge of 5% and 2.5% respectively. Premium amount with surcharge for monthly payment mode = annual premium amount x 0.0875. Premium amount with surcharge for semi-annual payment mode = annual premium amount x 0.5125. Please refer to the debit note for the total amount payable.
- Blue Cross (Asia-Pacific) Insurance Limited ("Blue Cross") reserves the right to adjust the premium upon policy renewal due to, for example, age-related adjustment of insured or subscription to additional benefits, etc.) and revise the terms and conditions of the policy.
- The Insurance Authority will collect a levy on insurance premiums from policyholders through insurance companies in accordance with the law. For further information about the levy imposed by the Insurance Authority, please visit Blue Cross website at [http://bluecross.com.hk/document/general/levy\\_collection](http://bluecross.com.hk/document/general/levy_collection).
- The above remarks are applicable to all premium tables listed herein.