保柏自願醫保計劃（標準計劃）、保柏非凡自願醫保計劃（靈活計劃）及環球優越自願醫保計劃（靈活計劃）產品比較

Comparison of Bupa MyBasic VHIS Plan (Standard Plan), Bupa Hero VHIS Plan (Flexi Plan) and Global Prestige VHIS Plan (Flexi Plan)

恒生銀行 HANG SENG BANK

Bupa 保柏

下表所列金額為個別自願醫保計劃之賠償限額（港元）。 The amounts shown below are the benefit limits of the VHIS plans in HKD.

計劃 Plan	保柏自願醫保計劃 Bupa MyBasic VHIS Plan 自願醫保認可產品 (編號: S00020) VHIS Certified Plan (No. S00020)	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan 自願醫保認可產品 (編號: F00040) VHIS Certified Plan (No. F00040)				環球優越自願醫保計劃 Global Prestige VHIS Plan 自願醫保認可產品 (編號: F00035) VHIS Certified Plan (No. F00035)
		智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
保障地域範圍 Area of cover	全球 Worldwide	亞洲、澳洲及新西蘭 Asia, Australia and New Zealand*	全球但不包括美國 Worldwide excluding the United States*	亞洲、澳洲及新西蘭 Asia, Australia and New Zealand*	全球但不包括美國 Worldwide excluding the United States*	全球 Worldwide
病房級別 Ward class	您可自選病房級別 (標準私家房、半私家房、大房等) Ward class of your choice (Standard Private, Semi-private, Ward Room, etc.)	半私家房 (香港、澳門、台灣及中國大陸) Semi-private Room (For Hong Kong, Macau, Taiwan and mainland China) 標準私家房 (其他亞洲、澳洲及新西蘭地區) Standard Private Room (For other areas in Asia, Australia and New Zealand)	半私家房 (香港、澳門、台灣及中國大陸) Semi-private Room (For Hong Kong, Macau, Taiwan and mainland China) 標準私家房 (全球其他地方但不包括美國) Standard Private Room (For other areas worldwide excluding the United States)	標準私家房 (亞洲、澳洲及新西蘭) Standard Private Room (For Asia, Australia and New Zealand)	標準私家房 (全球但不包括美國) Standard Private Room (Worldwide excluding the United States)	標準私家房 Standard Private Room
自付費選擇 Deductible options	不適用 Not available	$0 / $12,000 / $40,000 / $80,000				$0 / $12,000 / $40,000 / $80,000

計劃 Plan		保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
			智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
1) 基本保障 Basic Benefits							
a	**病房及膳食** **Room and board**	每日 $750 per day (每保單年度最多 180 日 maximum 180 days per Policy Year)	全數賠償 Full cover				全數賠償 Full cover
b	**雜項開支** **Miscellaneous charges**	每保單年度 $14,000 per Policy Year	全數賠償 Full cover (受人工裝置的賠償限額所規限) (Subject to benefit limit of Prosthetic Device)				全數賠償 Full cover (受人工裝置的賠償限額所規限) (Subject to benefit limit of Prosthetic Device)
c	**主診醫生巡房費** **Attending doctor's visit fee**	每日 $750 per day (每保單年度最多 180 日 maximum 180 days per Policy Year)	全數賠償 Full cover				全數賠償 Full cover
d	**專科醫生費** **Specialist's fee**	每保單年度 $4,300 per Policy Year					
e	**深切治療** **Intensive care**	每日 $3,500 per day (每保單年度最多 25 日 maximum 25 days per Policy Year)					
f	**外科醫生費** **Surgeon's fee**	每項手術，按手術表劃分的手術 Per surgery, subject to surgical category for the surgery/ procedure in the Schedule of Procedures: • 複雜 Complex $50,000 • 大型 Major $25,000 • 中型 Intermediate $12,500 • 小型 Minor $5,000					
g	**麻醉科醫生費** **Anaesthetist's fee**	賠償外科醫生費的 35%，您須自負 35% of Surgeon's fee paid by Bupa, 65% paid by you					

計劃 Plan		保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
			智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
h	手術室費 Operating theatre charges	外科醫生費的 35%，您須自負 65% 35% of Surgeon's fee paid by Bupa, 65% paid by you	全數賠償 Full cover				全數賠償 Full cover
i	訂明診斷成像檢測 Prescribed Diagnostic Imaging Tests	每保單年度 $20,000 per Policy Year					
j	訂明非手術癌症治療 Prescribed Non-surgical Cancer Treatments	每保單年度 $80,000 per Policy Year					

計劃 Plan		保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
			智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
k	入院前或出院後／日間手術前後之門診護理 Pre-and post-Confinement / Day Case Procedure outpatient care	每次 $580，每保單年度最多 $3,000 • 住院／日間手術前最多 1 次門診或急症診症 • 出院／日間手術後 90 日內最多 3 次跟進門診 $580 per visit, up to $3,000 per Policy Year • 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure • 3 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)	全數賠償以下列明的診症： • 住院/日間手術前超過 90 日所進行的一次門診或急症診症； • 住院/日間手術前 90 日內所進行的所有門診或急症診症；及 • 出院/日間手術後 365 日內的所有跟進門診 Full cover for the following specified visits: • 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure taking place more than 90 days before admission or Day Case Procedure; • All prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 90 days before admission or Day Case Procedure; and • All follow-up outpatient visits per Confinement/Day Case Procedure (within 365 days after discharge from Hospital or completion of Day Case Procedure)				全數賠償以下列明的診症： • 住院/日間手術前超過 90 日所進行的一次門診或急症診症； • 住院/日間手術前 90 日內所進行的所有門診或急症診症；及 • 出院/日間手術後 365 日內的所有跟進門診 Full cover for the following specified visits: • 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure taking place more than 90 days before admission or Day Case Procedure; • All prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 90 days before admission or Day Case Procedure; and • All follow-up outpatient visits per Confinement/Day Case Procedure (within 365 days after discharge from Hospital or completion of Day Case Procedure)
l	精神科治療 Psychiatric treatments	每保單年度 $30,000 per Policy Year	全數賠償 Full cover				全數賠償 Full cover

計劃 Plan	保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
		智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
		2) 額外保障 Enhanced Benefits				
		a	**私家看護費 Private nursing**			
		全數賠償 Full cover				全數賠償 Full cover
		(每保單年度最多 90 日 maximum 90 days per Policy Year)				
		b	**陪床費 Companion bed**			
		全數賠償 Full cover				全數賠償 Full cover
		c	**急症意外門診保障 Emergency outpatient treatment for Accidents**			
		全數賠償 Full cover				全數賠償 Full cover
		d	**日症病人洗腎 Day Patient kidney dialysis**			
		全數賠償 Full cover				全數賠償 Full cover
		e	**懷孕併發症 Complications of pregnancy**			
		每保單年度 $150,000 per Policy Year	每保單年度 $165,000 per Policy Year	每保單年度 $180,000 per Policy Year	每保單年度 $230,000 per Policy Year	每保單年度 $250,000 per Policy Year
		f	**康復治療 Rehabilitation**			
		每日 $2,000 per day	每日 $2,300 per day	每日 $3,150 per day	每日 $3,300 per day	每日 $3,500 per day
		(每保單年度每病症最多 90 日 maximum 90 days per Disability per Policy Year) (必須取得本公司之預先批准 Subject to pre-approval by the Company)				
		g	**善終服務及緩和治療 Hospice and palliative care**			
		每保單年度 $100,000 per Policy Year	每保單年度 $110,000 per Policy Year	每保單年度 $120,000 per Policy Year	每保單年度 $150,000 per Policy Year	每保單年度 $160,000 per Policy Year

計劃 Plan	保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
		智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
		h	住院或指定治療後由註冊中醫師提供之診症或針灸 Consultation or acupuncture by a Registered Chinese Medicine Practitioner after Confinement or specific treatments			
		每次 $650 per visit	每次 $700 per visit	每次 $750 per visit	每次 $850 per visit	每次 $880 per visit
		(每保單年度最多 20 次 Maximum 20 visits per Policy Year)				
		i	人工裝置 Prosthetic Device			
		每保單年度每項裝置 $100,000 per item per Policy Year	每保單年度每項裝置 $110,000 per item per Policy Year	每保單年度每項裝置 $120,000 per item per Policy Year	每保單年度每項裝置 $150,000 per item per Policy Year	每保單年度每項裝置 $160,000 per item per Policy Year
		j	因中風而提升家居設備 Home facility enhancement due to Stroke			
		每保單年度 $50,000 per Policy Year	每保單年度 $60,000 per Policy Year	每保單年度 $80,000 per Policy Year	每保單年度 $100,000 per Policy Year	每保單年度 $120,000 per Policy Year
		(須於中風出院後緊接其後的 180 日內完成) (Completed within 180 days after discharge from Hospital due to Stroke)				
		k	非住院睡眠窒息症測試 Non-Confinement sleep apnea test			
		全數賠償非住院睡眠窒息症測試及以下列明的診症： • 非住院睡眠窒息症測試前超過 90 日所進行的一次門診； • 非住院睡眠窒息症測試前 90 日內所進行的所有門診；及 • 非住院睡眠窒息症測試後 365 日內的所有跟進門診。 Full cover for non-Confinement sleep apnea test and the following specified visits: • 1 prior outpatient visit per non-Confinement sleep apnea test taking place more than 90 days before such sleep apnea test; • all prior outpatient visits per non-Confinement sleep apnea test taking place within 90 days before such sleep apnea test; and • all follow-up outpatient visits per non-Confinement sleep apnea test (within 365 days after completion of such sleep apnea test).				全數賠償非住院睡眠窒息症測試及以下列明的診症： • 非住院睡眠窒息症測試前超過 90 日所進行的一次門診； • 非住院睡眠窒息症測試前 90 日內所進行的所有門診；及 • 非住院睡眠窒息症測試後 365 日內的所有跟進門診。 Full cover for non-Confinement sleep apnea test and the following specified visits:

			• 1 prior outpatient visit per non-Confinement sleep apnea test taking place more than 90 days before such sleep apnea test; • all prior outpatient visits per non-Confinement sleep apnea test taking place within 90 days before such sleep apnea test; and • all follow-up outpatient visits per non-Confinement sleep apnea test (within 365 days after completion of such sleep apnea test).
3) 身體檢查保障 Medical Check-up Benefit			
無 Nil	由第二個保單年度起每年提供。 • 可於指定之健康檢查供應商接受免費身體檢查服務一次；或 Offered once per year from the 2nd Policy Year onwards. • Redeem one free medical check-up service per year at designated healthcare providers; or		由第二個保單年度起每年提供。 • 可於香港其中一間指定之體檢中心接受免費身體檢查服務一次；或 • 申請索償一次或多次自選的身體檢查服務，以每保單年度最高賠償合共港元$4,800 限額為限。 Offered once per year from the 2nd Policy Year onwards. • Redeem one free medical check-up service per year at one of the designated health screening centres in Hong Kong; or • Reimburse the fees charged for one or more of your selected medical check-up service(s) up to an aggregate maximum benefit limit of $4,800 per Policy Year.
	• 申請索償一次或多次於亞洲、澳洲及新西蘭自選的身體檢查服務，以每保單年度最高賠償合共港元$4,000 限額為限。 • Reimburse the fees charged for one or more of your selected medical check-up service(s) received in Asia,	• 申請索償一次或多次於全球（美國除外）自選的身體檢查服務，以每保單年度最高賠償合共港元$4,800 限額為限。 • Reimburse the fees charged for one or more of your selected medical check-up service(s) received	

		Australia and New Zealand up to an aggregate maximum benefit limit of $4,000 per Policy Year.	worldwide excluding the United States up to an aggregate maximum benefit limit of $4,800 per Policy Year.	

計劃 Plan	保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
		智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
2) 其他限額 Other Limits		**4) 其他限額 Other Limits**				
1) 基本保障保障項目(a) – (l)的每年保障限額 Annual Benefit Limit for benefit items (a) – (l) under 1) Basic Benefits		1) 基本保障及 2) 額外保障下所有保障項目的每年保障限額 Annual benefit limit for all items under 1) Basic Benefits and 2) Enhanced Benefits				
每保單年度 $420,000 per Policy Year		每保單年度 $25,000,000 per Policy Year	每保單年度 $30,000,000 per Policy Year	每保單年度 $35,000,000 per Policy Year	每保單年度 $40,000,000 per Policy Year	每保單年度 $40,000,000 per Policy Year
1) 基本保障保障項目(a) – (l)的終身保障限額 Lifetime Benefit Limit for benefit items (a) – (l) under 1) Basic Benefits		1) 基本保障及 2) 額外保障下所有保障項目的終身保障限額 Lifetime benefit limit for all items under 1) Basic Benefits and 2) Enhanced Benefits				
無 Nil		無 Nil				無 Nil
		於所選保障地域範圍（香港除外）進行的器官移植手術並取得本公司的預先批准，其 1) 基本保障下保障項目(a) – (i)及(k)，以及 2) 額外保障下保障項目(a)、(b)、(f)、(g)、(h)及(i)的總保障限額 Aggregate benefit limit for benefit items (a) – (i) and (k) under 1) Basic Benefits and (a), (b), (f), (g), (h) and (i) under 2) Enhanced Benefits for organ transplant surgery performed in the chosen area of cover (except Hong Kong)				於香港以外進行的器官移植手術，其 1) 基本保障下保障項目(a) – (i)及(k)，以及 2) 額外保障下保障項目(a)、(b)、(f)、(g)、(h)及(i)的總保障限額 Aggregate benefit limit for benefit items (a) – (i) and (k) of 1) Basic benefits and (a), (b), (f), (g), (h) and (i) of 2) Enhanced benefits for organ transplant surgery performed outside Hong Kong
		每保單年度 $1,000,000 per Policy Year	每保單年度 $1,200,000 per Policy Year	每保單年度 $1,500,000 per Policy Year	每保單年度 $1,800,000 per Policy Year	每保單年度 $2,400,000 per Policy Year
		免費保障及服務 Free Benefits and Services				
		「保柏非凡卡」及免繳費服務 Bupa Hero Card and cashless treatment				「保柏尊貴寶卡」及住院免繳費 Bupa Gold Card and cashless hospitalisation
		健康支援服務 Health Coaching Services				專屬健康大使服務 HealthPro Concierge Service
		保柏國際援助計劃 Bupa Worldwide Assistance Programme				保柏國際援助計劃 Bupa Worldwide Assistance Programme

計劃 Plan	保柏自願醫保計劃 Bupa MyBasic VHIS Plan	保柏非凡自願醫保計劃 Bupa Hero VHIS Plan				環球優越自願醫保計劃 Global Prestige VHIS Plan
		智選 Advance	倍智選 Advance Pro	尊尚 Deluxe	倍尊尚 Deluxe Pro	
		24 小時情緒解碼熱線 24-hour Mental Health Service Hotline				24 小時情緒解碼熱線 24-hour Mental Health Service Hotline
		其他自選保障 Other Optional Benefits				
		門診保障 (高達每年$100,000 保障額) Clinical Benefit (up to an annual limit of $100,000)	門診保障 (高達每年$150,000 保障額) Clinical Benefit (up to an annual limit of $150,000)	門診保障 (高達每年$200,000 保障額) Clinical Benefit (up to an annual limit of $200,000)	門診保障 (高達每年$250,000 保障額) Clinical Benefit (up to an annual limit of $250,000)	門診保障 (高達每年$300,000 保障額) Clinical Benefit (up to an annual limit of $300,000)
		牙科保障 (高達每年$5,000 保障額) Dental Benefit (up to an annual limit of $5,000)	牙科保障 (高達每年$6,500 保障額) Dental Benefit (up to an annual limit of $6,500)	牙科及視力保障 (高達每年$19,000 保障額) Dental and Optical Benefit (up to an annual limit of $19,000)	牙科及視力保障 (高達每年$22,000 保障額) Dental and Optical Benefit (up to an annual limit of $22,000)	牙科及視力保障 (高達每年$27,000 保障額) Dental and Optical Benefit (up to an annual limit of $27,000)
		產科保障 (高達每年$42,000 保障額) Maternity Benefit (up to an annual limit of $42,000)	產科保障 (高達每年$46,000 保障額) Maternity Benefit (up to an annual limit of $46,000)	產科保障 (高達每年$75,000 保障額) Maternity Benefit (up to an annual limit of $75,000)	產科保障 (高達每年$80,000 保障額) Maternity Benefit (up to an annual limit of $80,000)	—
		折扣優惠 Discount				
		家庭折扣高達 85 折 Family discount up to 15% off				家庭折扣高達 85 折 Family discount up to 15% off

以上資料只供參考，詳情請參閱有關計劃的保單及保障資料。
The above information is for reference only. Please refer to the Policy and Benefit Information of the respective plans for details.

*於所選保障地域範圍以外所產生的合資格費用，受自願醫保標準計劃條款及細則保障。 Eligible expenses incurred outside the chosen area of cover shall be covered according to the VHIS Standard Plan Terms and Benefits.

資料披露

以上計劃屬香港醫務衞生局認可的自願醫保計劃，並由保柏（亞洲）有限公司（「保柏」）承保，保柏已獲保險業監管局授權在香港特別行政區經營，並受其監管。恒生銀行有限公司（「恒生銀行」）為保柏所授權分銷以上計劃的保險代理商。以上計劃為保柏而非恒生銀行之產品。投保以上計劃須向保柏支付保費。保柏會向恒生銀行就銷售以上計劃提供佣金及業績獎金，而恒生銀行目前所採取之銷售員工花紅制度，已包含員工多方面之表現，並非只著重銷售金額。「專屬健康大使服務」及「健康支援服務」由保柏提供。對於恒生銀行與客戶之間因銷售過程或處理有關交易而產生的合資格爭議（定義見金融糾紛調解計劃的金融糾紛調解中心的職權範圍），恒生銀行須與客戶進行金融糾紛調解計劃程序；然而，對於有關產品的保單條款或質素（核保、索償及服務）的任何爭議應由保柏與客戶直接解決。恒生銀行為滙豐集團成員。

本文件乃資料摘要，僅供參考之用。有關計劃之詳盡保障範圍、一般不保事項、條款及細則，請參閱保單。

Disclosure of information

The above VHIS Plans are certified by the Health Bureau of Hong Kong and are underwritten by Bupa (Asia) Limited ("Bupa") which is authorised and regulated by the Insurance Authority in Hong Kong SAR. Hang Seng Bank Limited ("Hang Seng Bank") is an insurance agent authorised by Bupa for distribution of these plans. These plans are product of Bupa and not Hang Seng Bank. Premium will be payable to Bupa upon enrolment in these plans. Bupa will provide Hang Seng Bank the relevant commission and performance bonus as remuneration for distribution of these plans. The existing sales staff remuneration policy offered by Hang Seng Bank will take into account various aspects of staff performance but not solely the sales amount. HealthPro Concierge Service and Health Coaching Services are provided by Bupa. In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between Hang Seng Bank and the customer out of the selling process or processing of the related transaction, Hang Seng Bank is required to enter into a Financial Dispute Resolution Scheme process with the customer; however, any dispute over the policy terms or performance (underwriting, claims and service) of the product should be resolved directly between Bupa and the customer. Hang Seng Bank is a member of HSBC Group.

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