

ManuGuard  
Medical  
Plan/Benefit

守護一生醫療  
保障計劃/附加保障



# ManuGuard Medical Plan/Benefit

The future is unpredictable.

## With **ManuGuard Medical Plan/** **ManuGuard Medical Benefit**

(‘ManuGuard’ or the plan), you and your loved ones will always be able to get necessary medical treatment should the need arise.

ManuGuard is designed to meet the health and wellbeing needs of an individual at different stages of life. There are four levels of benefits to choose from – Private, Semi-private, Ward and Essential, so you can choose the right plan to suit your needs and lifestyle (see the Benefit Schedule).

**ManuGuard is an indemnity hospital insurance product provided and underwritten by Manulife, and is available as a basic plan (ManuGuard Medical Plan) or as a supplementary benefit (ManuGuard Medical Benefit). This product leaflet provides only general information on this product. It does not form part of the policy and does not contain full terms of the policy. Before making a purchase, you should read the policy provisions of ManuGuard Medical Plan (‘Policy Provisions’) or benefit provisions of ManuGuard Medical Benefit (‘Benefit Provisions’) for the exact terms and conditions that apply to this product. You can ask us for a copy.**



## We’re here when needed

- Cover the life insured’s hospital and surgical bills up to the limit of your chosen plan level, with a maximum of 120 days per disability (see the Benefit Schedule).
- Benefit is payable even for surgeries performed on an outpatient basis.
- A wide range of medical services before and after the life insured’s hospital stay, including outpatient consultations, home nursing, and ancillary services provided by physiotherapists and chiropractors.
- Cover outpatient kidney dialysis and cancer treatments including chemotherapy, radiotherapy, proton therapy and target therapy.
- With the Benefit Step-Up Option (see note 1), you can upgrade from the Essential plan to the Ward plan at age 55, 60 or 65 without the need to provide further evidence of good health, provided your ManuGuard coverage has already been in force for 5 years.
- 24-hour international medical assistance when travelling.



## Going the extra mile

We understand that you want extra peace of mind while facing the growing threat from infectious diseases. In the unfortunate event that the life insured needs to stay in the isolation room due to any of the listed infectious diseases (see note 2), we will increase the maximum limit of hospital room and board benefit by providing Isolation Room benefit.



## Health Bonus

If the life insured makes no claim for at least 2 consecutive policy years, we will give you a health bonus (see note 3) as a reward for staying healthy.

No claim period	Health Bonus Percentage of Premium
2 to 4 consecutive policy years	8%
5 or more consecutive policy years	16%

(including extra premiums and excluding the premiums for any supplementary benefits) for Policy Year after No Claim Period



## Extra benefits at critical moments (see note 4)

ManuGuard gives the life insured extra medical protections against cancer, heart attack, stroke and kidney failure by:

- Extending the maximum length of hospital stay for hospital room and board, doctors' visits and intensive care, from 120 days to 180 days;
- Doubling the limit of specialist's fee and the maximum number of outpatient visits before and after hospitalization;
- Doubling the maximum number of post-hospitalization home nursing visits from 15 to 30 (not applicable to the Essential plan).



## Relax—it's lifetime renewal (see note 5)

The plan will be renewed automatically every year throughout the lifetime of the life insured upon payment of premium, regardless of the life insured's health conditions at the time of renewal.



## For when the life insured needs more









Needs for medical care vary from one life stage to another. You can add optional benefits on top of your ManuGuard to supplement the core coverage:

- Additional **Major Medical** and **Major Medical Plus** benefits are available as optional top-up benefits exclusive for ManuGuard customers, with no lifetime limit applied until the life insured has reached the age of 75 or above (see note 6). If the actual medical expenses exceed the maximum benefit limit, these benefits will reimburse up to 80% of the differences (applicable to benefit items such as confinement benefits, surgical benefits, pre- & post-hospitalization benefits, emergency treatment benefit and major illness care benefit - see notes 7 and 8), giving you extra safety net against the financial burden.
- Other optional supplementary benefits such as Outpatient Benefit and Hospital Income Benefit give the life insured a more comprehensive medical care. Please see their product leaflets for details of benefit.



## Plan at a glance

### ManuGuard Medical Plan/Benefit

	<b>Product objective &amp; nature</b>	An indemnity hospital insurance product for customers with medical insurance needs
	<b>Product type</b>	Basic plan / Supplementary benefit
	<b>Policy/ Benefit term</b>	The coverage period is 1 year and is renewable automatically every year throughout the lifetime of the life insured upon payment of premium (see note 5)
	<b>Premium payment period</b>	Premiums are payable for each policy year during the life insured's lifetime. Premiums are not guaranteed (see note 5)
	<b>Issue age</b>	Basic plan: 15 days – age 70 Supplementary benefit: 15 days – age 75
	<b>Policy currency</b>	Hong Kong Dollar (HK\$) / United States Dollar (US\$)
	<b>Premium payment mode</b>	Annually / Semi-annually / Quarterly / Monthly
	<b>Premium schedule</b>	Please contact our insurance advisor for a copy of prevailing premium schedule.

# Benefits Schedule

## Maximum Benefit Limit per Disability (HK\$/US\$)

Plan Level	Private	Semi-Private	Ward	Essential
<b>Hospital Benefits</b>				
<b>I. Confinement Benefits</b>				
(a) Hospital Room & Board (limit per day, up to 120 days)	HK\$4,000/ US\$500	HK\$2,300/ US\$288	HK\$1,100/ US\$138	HK\$600/ US\$75
(b) Doctor's Visit (limit per day, up to 120 days)	HK\$3,900/ US\$488	HK\$1,900/ US\$238	HK\$900/ US\$113	HK\$550/ US\$69
(c) Specialist's Fee	HK\$12,000/ US\$1,500	HK\$6,000/ US\$750	HK\$4,000/ US\$500	HK\$2,000/ US\$250
(d) Hospital Services	HK\$35,000/ US\$4,375	HK\$21,000/ US\$2,625	HK\$12,000/ US\$1,500	HK\$7,000/ US\$875
(e) Intensive Care (limit per day, up to 120 days)	HK\$10,000/ US\$1,250	HK\$5,600/ US\$700	HK\$4,200/ US\$525	HK\$2,000/ US\$250
(f) Hospital Companion Bed (limit per day, up to 120 days)	Full Cover	Full Cover	Full Cover	HK\$200/ US\$25
(g) Hospital Cash (per day, up to 120 days) – see note 9	HK\$1,200/ US\$150	HK\$600/ US\$80	HK\$300/ US\$40	HK\$150/ US\$19
(h) Special Bonus (per day, up to 120 days) – see note 10	HK\$1,200/ US\$150	HK\$600/ US\$80	HK\$300/ US\$40	HK\$150/ US\$19
(i) Psychiatric Treatment	HK\$26,500/ US\$3,313	HK\$22,000/ US\$2,750	HK\$18,000/ US\$2,250	No Benefit
(j) Isolation Room – see note 2	HK\$3,900/ US\$488	HK\$2,200/ US\$275	HK\$1,000/ US\$125	HK\$550/ US\$69
<b>II. Surgical Benefits</b>				
(a) Surgeon's Fee – see note 11	HK\$105,000/ US\$13,125	HK\$73,500/ US\$9,188	HK\$52,500/ US\$6,563	HK\$26,000/ US\$3,250
(b) Anaesthetist's Fee		35% of Surgeon's Fee payable		
(c) Operation Theatre Fee		35% of Surgeon's Fee payable		
<b>III. Pre- &amp; Post-Hospitalization Benefits</b>				
(a) Pre-Hospitalization/Outpatient Surgery Outpatient (limit per visit, 1 visit per day for a maximum of 1 visit within 31 days before hospitalization/Outpatient surgeries)	HK\$2,000/ US\$250	HK\$1,400/ US\$175	HK\$1,100/ US\$138	HK\$600/ US\$75

**Maximum Benefit Limit per Disability (HK\$/US\$)**

<b>Plan Level</b>	<b>Private</b>	<b>Semi-Private</b>	<b>Ward</b>	<b>Essential</b>
<b>III. Pre- &amp; Post-Hospitalization Benefits</b>				
(b) Post-Hospitalization/Outpatient Surgery Outpatient (limit per visit, 1 visit per day for a maximum of 3 visits within 60 days after Discharge from Hospital/ Outpatient surgeries)	HK\$2,000/ US\$250	HK\$1,400/ US\$175	HK\$1,100/ US\$138	HK\$600/ US\$75
(c) Post-Hospitalization Home Nursing (limit per day, 1 visit per day for a maximum of 15 visits within 90 days after Discharge from Hospital)	HK\$1,760/ US\$220	HK\$960/ US\$120	HK\$660/ US\$83	No Benefit
(d) Post-Hospitalization Ancillary Service (limit per visit, 1 visit per day for a maximum of 10 visits for Registered Chiropractor/ Physiotherapist within 90 days after Discharge from Hospital)	HK\$800/ US\$100	HK\$650/ US\$81	HK\$500/ US\$63	HK\$300/ US\$38
<b>IV. Emergency Treatment Benefit</b>				
(a) Emergency Outpatient (Accidental Injury only)	HK\$15,000/ US\$1,875	HK\$11,000/ US\$1,375	HK\$6,600/ US\$825	HK\$2,500/ US\$313
<b>V. Other Benefits</b>				
(a) Outpatient Cancer Treatment & Kidney Dialysis (maximum per illness for Chemotherapy/Radiotherapy/Target Therapy/Kidney Dialysis) – see note 12	HK\$180,000/ US\$22,500	HK\$120,000/ US\$15,000	HK\$60,000/ US\$7,500	HK\$30,000/ US\$3,750
(b) Major Illness Care – see note 4	For Cancer / Heart Attack / Stroke / Kidney Failure, the below benefits will be enhanced: <ul style="list-style-type: none"> <li>• item I (a), (b), (e): the maximum number of days is extended from 120 days to 180 days</li> <li>• item I (c): the benefit amount limit as specified in the Benefit Schedule for the applicable plan is multiplied by two</li> <li>• item III (a): the maximum number of outpatient consultation is extended from 1 visit to 2 visits</li> <li>• item III (b): the maximum number of outpatient consultation is extended from 3 visits to 6 visits</li> <li>• item III (c): the maximum number of Home Nursing service is extended from 15 visits to 30 visits, is not applicable to Essential Plan</li> </ul>			
<b>VI. Death Benefits</b>				
(a) Compassionate Death Benefit	HK\$10,000/US\$1,250			
(b) Accidental Death Benefit	HK\$10,000/US\$1,250			
(c) Medical Negligence Benefit (per policy) – see note 13	HK\$100,000/US\$12,500			
<b>VII. Other Service</b>				
(a) International Medical Assistance – see note 14	Included			

# Major Medical Benefit / Major Medical Plus Benefit (optional)

(see notes 6, 7 and 8)

## Maximum Benefit Limit per Disability (HK\$/US\$)

Plan Level	Private	Semi-Private	Ward	Essential
Total amount of the benefit payable under Major Medical Benefit	HK\$250,000/ US\$31,250	HK\$160,000/ US\$20,000	HK\$100,000/ US\$12,500	HK\$70,000/ US\$8,750
Total amount of the benefit payable under Major Medical Plus Benefit	HK\$525,000/ US\$65,625	HK\$305,000/ US\$38,125	HK\$175,000/ US\$21,875	HK\$100,000/ US\$12,500
Lifetime Limit under Major Medical Benefit / Major Medical Plus Benefit (applicable to the life insured upon attaining Age of 75)		HK\$1,300,000/ US\$162,500		

## Hospital Benefits

### I. Confinement Benefits

(a) Hospital Room & Board (limit per day) • 80% of expenses starting from 121st day of Confinement	HK\$4,000/ US\$500	HK\$2,300/ US\$288	HK\$1,100/ US\$138	HK\$600/ US\$75
(b) Doctor's Visit (limit per day) • 80% of expenses starting from 121st day of Confinement	HK\$3,900/ US\$488	HK\$1,900/ US\$238	HK\$900/ US\$113	HK\$550/ US\$69
(c) Specialist's Fee	80% of Specialist's Fee in excess of the amount of benefit payable under ManuGuard before Major Medical Benefit / Major Medical Plus Benefit			
(d) Hospital Services	80% of Hospital Services in excess of the amount of benefit payable under ManuGuard before Major Medical Benefit / Major Medical Plus Benefit			
(e) Intensive Care (limit per day) • 80% of expenses starting from 121st day of Confinement	HK\$10,000/ US\$1,250	HK\$5,600/ US\$700	HK\$4,200/ US\$525	HK\$2,000/ US\$250
(f) Hospital Companion Bed (limit per day) • 80% of expenses starting from 121st day of Confinement	Full Cover	Full Cover	Full Cover	HK\$200/ US\$25

### II. Surgical Benefits

(a) Surgeon's Fee – see note 11	80% of Surgeon's Fee in excess of the amount of benefit payable under ManuGuard before Major Medical Benefit / Major Medical Plus Benefit			
(b) Anaesthetist's Fee	80% of Anaesthetist's Fee in excess of the amount of benefit payable under ManuGuard before Major Medical Benefit / Major Medical Plus Benefit			
(c) Operation Theatre Fee	80% of Operation Theatre Fee in excess of the amount of benefit payable under ManuGuard before Major Medical Benefit / Major Medical Plus Benefit			



**Maximum Benefit Limit per Disability (HK\$/US\$)**

<b>Plan Level</b>	<b>Private</b>	<b>Semi-Private</b>	<b>Ward</b>	<b>Essential</b>
<b>III. Pre- &amp; Post-Hospitalization Benefits</b>				
(a) Pre-Hospitalization/Outpatient Surgery Outpatient (limit per visit, 1 visit per day) • 80% of expenses of 1 additional visit within 31 days before hospitalization/ Outpatient surgeries	HK\$2,000/ US\$250	HK\$1,400/ US\$175	HK\$1,100/ US\$138	HK\$600/ US\$75
(b) Post-Hospitalization/Outpatient Surgery Outpatient (limit per visit, 1 visit per day) • 80% of expenses of 3 additional visits within 60 days after Discharge from Hospital/Outpatient surgeries	HK\$2,000/ US\$250	HK\$1,400/ US\$175	HK\$1,100/ US\$138	HK\$600/ US\$75
(c) Post-Hospitalization Home Nursing (limit per day, 1 visit per day) • 80% of expenses of 15 additional visits within 90 days after Discharge from Hospital	HK\$1,760/ US\$220	HK\$960/ US\$120	HK\$660/ US\$83	No Benefit
(d) Post-Hospitalization Ancillary Service (limit per visit, 1 visit per day) • 80% of expenses of 10 additional visits for Registered Chiropractor/ Physiotherapist within 90 days after Discharge from Hospital	HK\$800/ US\$100	HK\$650/ US\$81	HK\$500/ US\$63	HK\$300/ US\$38
<b>IV. Emergency Treatment Benefit</b>				
(a) Emergency Outpatient (Accidental Injury only)	80% of treatment fees in excess of the amount of benefit payable under ManuGuard before Major Medical Benefit / Major Medical Plus Benefit			

**Illustrative example**

## How does Major Medical Benefit work on ManuGuard?

Mrs Wong, age 40, purchased **ManuGuard Medical Plan (Ward Plan) with Major Medical Benefit** to safeguard her health.

Five years later, she felt a lump in her right breast. She was later diagnosed with right breast ductal carcinoma. She was advised to undergo surgeries to remove the lymph nodes and stay in a ward of a private hospital in Hong Kong for 6 days.

Medical services received	Actual medical expenses	Benefit limit as stated in the Benefit Schedule	Medical expenses reimbursable before Major Medical Benefit	Excess expenses eligible for Major Medical Benefit
Hospital Room & board	HK\$6,600 (HK\$1,100 x 6 days)	HK\$1,100 per day (Up to 120 days)	HK\$6,600	–
Doctor's visit	HK\$6,300 (HK\$900 x 7 days)	HK\$900 per day (Up to 120 days)	HK\$6,300	–
Hospital services	HK\$84,750	HK\$12,000 per disability	HK\$12,000	HK\$72,750
Surgeon's fee	HK\$45,000	HK\$52,500 per surgery x specified % shown in the surgical schedule	HK\$39,375	HK\$5,625
Anaesthetist's fee	HK\$15,000	35% surgeon's fee payable	HK\$13,781.25	HK\$1,218.75
Operating theatre fee	HK\$21,870	35% surgeon's fee payable	HK\$13,781.25	HK\$8,088.75
<b>Total</b>	<b>HK\$179,520</b>		<b>HK\$91,837.5</b>	<b>HK\$87,682.5</b>

### With Major Medical Benefit, the total medical expenses that can be reimbursed are:

$$\begin{array}{r}
 \text{Medical expenses} \\
 \text{reimbursable before} \\
 \text{Major Medical Benefit}
 \end{array}
 + \left( \begin{array}{r}
 \text{Excess expenses} \\
 \text{eligible for Major} \\
 \text{Medical Benefit}
 \end{array} \times \begin{array}{r}
 \text{Reimbursement \%} \\
 \text{under Major} \\
 \text{Medical benefit}
 \end{array} \right)
 = \text{HK\$161,983.5}$$

**HK\$91,837.5**                      **HK\$87,682.5**                      **80%**                      =                      **HK\$161,983.5**

**The sum of HK\$161,983.5 can be reimbursed under the plan, and Mrs Wong's out-of-pocket expenses are HK\$17,536.5.**

(The above example is hypothetical and for illustrative purpose only. It is made under the assumption that no claim had been made previously under this plan before Mrs Wong's diagnosis of the above disability.)

# Notes

1. The Benefit Step-Up Option can only be exercised once during the lifetime of the life insured and once exercised and becoming effective, is irrevocable. Upon exercise of Benefit Step-Up Option, a new premium based on the latest premium for the 'Ward Plan' will apply and no addition of Major Medical Benefit or Major Medical Plus Benefit is allowed. If the plan includes Major Medical Benefit or Major Medical Plus Benefit, the existing plan level will automatically be upgraded to the coverage level of 'Ward Plan' after the Benefit Step-up has been exercised. For detailed terms and conditions of the Benefit Step-up Option, please see the Policy Provisions or Benefit Provisions.
2. Any room charge arising from deluxe, executive rooms and suites is not covered. For the list of infectious illnesses, please see the Policy Provisions or Benefit Provisions.
3. If any claim incurred in respect of the no claim period becomes payable after a health bonus has been given in respect of such no claim period, we shall deduct such health bonus from such claim payment and/or future claim payment(s). The aforesaid description and the health bonus table are for general information only. You should read the Policy Provisions or Benefit Provisions for exactly how the health bonus is calculated and given.
4. This extra benefit will end on the policy anniversary nearest to the life insured's 75th birthday. Please see the Policy Provisions or Benefit Provisions for the details of this extra benefit, the definitions of the major illnesses, and the conditions that apply.
5. The period of coverage of the plan is one year and is renewable annually at each policy anniversary. You can choose to renew this plan subject to the terms and conditions set out in the Policy Provisions or Benefit Provisions. The premiums are not guaranteed and we may adjust them from time to time. Please also see 'Premium adjustment' and 'Renewal' under the 'Important Information' section and the relevant annual premium table of this plan.
6. Any pre-existing conditions of the life insured will be applied to the coverage under Major Medical Benefit or Major Medical Plus Benefit. On or after the policy anniversary nearest to the life insured's 75th birthday, a lifetime limit of HK\$1,300,000/ US\$162,500 would apply to Major Medical Benefit and Major Medical Plus Benefit. Lifetime limit shall mean the maximum aggregate amount of Major Medical Benefit / Major Medical Plus Benefit that will be reimbursed by us per life upon reaching the policy anniversary nearest to the life insured's 75th birthday, under all insurance policies (including this plan) covering the life insured and issued by us from time to time, whether or not still in force, which are specifically subject to a lifetime limit in accordance with their respective terms and conditions. Major Medical Benefit / Major Medical Plus Benefit will immediately be terminated when such lifetime limit has been reached. For the terms and conditions of Major Medical Benefit and Major Medical Plus Benefit, please see the Policy Provisions or Benefit Provisions.
7. If the life insured stays in a hospital room class higher than that you are entitled to under your plan, we will reduce your benefits paid under Major Medical Benefit and Major Medical Plus Benefit by multiplying Room Level Adjustment Factors before the application of 80%:

If the life insured's hospital stay is not in one of the Designated Hospitals in Macau:

	<b>Room Level Adjustment Factors</b>
(i) if your plan is 'Essential Plan' or 'Ward Plan', but the life insured stays in private room or above	25%
(ii) if your plan is 'Essential Plan' or 'Ward Plan', but life insured stays in semi-private room	50%
(iii) if your plan is 'Semi-private Plan', but the life insured stays in private room or above	50%
(iv) if your plan is 'Private Plan', but the life insured stays in above private room	50%

If the life insured stays in one of the Designated Hospitals in Macau:

	<b>Room Level Adjustment Factors</b>
(i) if your plan is 'Essential Plan' or 'Ward Plan', but the life insured stays in private room (as determined by us)	50%
(ii) if your plan is 'Essential Plan' or 'Ward Plan', but life insured stays in above private room (as determined by us)	25%
(iii) if your plan is 'Semi-private Plan' or 'Private Plan', but the life insured stays in above private room (as determined by us)	50%

8. If the life insured has stayed in Hong Kong or Macau or the People's Republic of China for less than 183 days out of the 365 days and incurs medical expenses outside Asia, we will reduce your benefits paid under Major Medical Benefit and Major Medical Plus Benefit by multiplying Hospital Location Adjustment Factors before the application of 80% and the applicable Room Level Adjustment Factors:

	<b>Hospital Location Adjustment Factors</b>
(i) if the life insured stays in a hospital outside Asia (excluding the United States of America)	75%
(ii) if the life insured stays in a hospital in the United States of America	50%

For example: For a life insured resided in Hong Kong for less than 183 days and filed a claim incurred in the United States of America (assume Room Level Adjustment Factors is not applicable in this example), the reimbursement amount under Major Medical Benefit / Major Medical Plus Benefit is excess eligible expense x 50% x 80%.

9. Hospital cash applies if the life insured has a) a Hong Kong identity card and they are staying in a general ward of a government hospital in Hong Kong or b) a Macau resident identity card and they are staying in a general ward of a government hospital in Macau for treatment of a disability.
10. If the life insured is covered by any other hospital reimbursement plan offered by other insurance companies (other than the individual and group medical policies we, or our associated companies, provide), and any of these other insurance companies pays you a reimbursement before you make a claim with us, we will pay you the special bonus according to the number of days the life insured stays in hospital.
11. The surgeon's fee paid by us for each surgical operation or procedure will not be higher than the maximum limit shown in the benefit schedule multiplied by the percentage figure of the surgical operation or procedure shown in the surgical schedule. Please see the Policy Provisions or Benefit Provisions for details.
12. The outpatient cancer treatment & kidney dialysis benefit will cover the charges for a) the treatment of chemotherapy, radiotherapy or target therapy the life insured receives on an outpatient basis, or b) the treatment of haemodialysis or peritoneal dialysis the life insured receives in the outpatient unit of a hospital. Two same or related cancer incidences separated by a 5-year Cancer-free period, as defined in the Policy Provisions or Benefit Provisions, are treated as two illnesses.
13. The medical negligence benefit is payable in addition to compassionate death benefit. For details of the conditions of medical negligence benefit, please see the Policy Provisions or Benefit Provisions.
14. International Medical Assistance is provided by a third party service provider which is an independent contractor and is not our agent. We shall make no representation, warranty or undertaking as to the availability of any medical opinions given by the medical service provider or any services given by the service providers. The services may change from time to time. Please visit our website ([www.manulife.com.hk](http://www.manulife.com.hk)) for the latest Emergency Assistance Benefits Provisions for the terms and conditions of the services.

# Important Information

## 1. Nature of the product

The product is an indemnity hospital insurance product without a savings element. There is no cash value for the product. The product is aimed at customers who want a medical insurance product and can pay the premium as long as they want medical protection. As a result, you are advised to save enough money to cover the premiums in the future. The premium pays for the insurance and related costs.

## 2. Cooling-off period (applies if this plan is a basic plan)

If you are not happy with your policy, you have a right to cancel it within the cooling-off period and get a refund of any premiums and any levy paid (if applicable).

- **If your policy is issued in Hong Kong:** To do this, you must give us, within the cooling-off period, your written notice signed by you at Individual Financial Products, Manulife (International) Limited, 22/F, Tower A, Manulife Financial Centre, 223-231 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong. In other words, your written notice to cancel your policy must reach us directly at the relevant address within a period of 21 calendar days immediately following the day we deliver to you or your nominated representative the policy or a notice telling you about the availability of the policy and the expiry date of the cooling-off period, whichever is the earlier.
- **If your policy is issued in Macau:** To do this, you must give us, within the cooling-off period, your written notice signed by you at Avenida De Almeida Ribeiro number 61, Circle Square, 14 andar A, Macau. In other words, your written notice to cancel your policy must reach us at the relevant address within 21 calendar days immediately following the day of delivery of the policy to you or your nominated representative.

## 3. Premium adjustment

The premiums will vary depending on the age of the life insured and are not guaranteed. We will regularly review our products, including the premium rates, to make sure we can continue to provide cover. When reviewing the premium rates, we will consider our claims experience, medical cost inflation, and other factors. We can change the premium rates at the time of renewal on each policy anniversary and a written notice on the relevant change would be given in advance. You can continue to enjoy the coverage by paying the premium due within 31 days from premium due date.

You may browse the following website to understand the historical premium increase rates of this product. This is only for reference purposes. Historical premium increase rates are not an indicator of future premium increase.

[www.manulife.com.hk/link/historical-premium-increase-rates-en](http://www.manulife.com.hk/link/historical-premium-increase-rates-en)

## 4. Premium term and the result of not paying the premium

You should continue to pay the premium (or premiums) on time throughout the benefit term. If you do not pay a premium on time, you have 31 days from the due date to pay it, during which the policy will continue in force. If we do not receive the premium after the 31-day period ends, the policy will end and the life insured will not be covered.

## 5. Credit risk

Any premiums you paid would become part of our assets and so you will be exposed to our credit risk. Our financial strength may affect our ability to meet the ongoing obligations under the insurance policy.

## 6. Currency risk

This plan is available in foreign currency. You should consider the potential currency risks when deciding which policy currency you should take. The foreign-currency exchange rate may fall as well as rise. Any change in the exchange rate will have a direct effect on the amount of premium you need to pay and the value of your benefits in your local currency. The risk of changes in the exchange rate may cause a financial loss to you. This potential loss from the currency conversion may wipe out the value of your benefits under the policy or even be more than the value of benefits under your policy.

## 7. Inflation risk

The cost of living and healthcare in the future are likely to be higher than it is today due to inflation. As a result, your current planned benefits may not be enough to meet your future needs.

## 8. Condition for ending the policy

The plan will end if:

- i. the life insured dies;
  - ii. you fail to pay the premium within 31 days after the due date;
  - iii. we approve your written request to end this plan;
  - iv. the policy to which this plan is attached ends or matures (if this plan is a supplementary benefit); or
  - v. you cash in the policy or we apply the non-forfeiture benefit (if any) to your policy (if this plan is a supplementary benefit);
- whichever happens first.

In the case of ManuGuard Medical Benefit, the plan shall be terminated upon receipt by us of such request within 31 days before the due date for payment of any premium, at the policyowner's written request and accompanied by the plan for appropriate endorsement. Under such circumstances, the plan will terminate as of such premium payment due date.

The written request mentioned above should be signed by you and sent to our address in Hong Kong or Macau as stated at the end of this product leaflet, attention to 'Individual Financial Products' (for policies issued in Hong Kong) or 'Administration Office of Manulife' (for policies issued in Macau).

Once terminated, this plan shall cease to have effect. Where this plan is terminated during the policy year, no part of the premium will be refunded, irrespective whether a claim has or has not been made in that policy year.

## 9. Renewal

The plan is renewed automatically every year throughout the lifetime of the life insured upon payment of premium, regardless of the health condition of the life insured. We reserve the right to revise the benefits, terms and conditions and premiums under the plan upon renewal.

## 10. Suicide

No death benefit will be payable if the life insured commits suicide, whether sane or insane, within 1 year of:

- i. The policy issue date or the policy year date;
  - ii. the effective date of reinstatement; or
  - iii. the date of endorsement or the effective date of change (only applicable to ManuGuard Medical Benefit added after the policy has been issued);
- whichever is later.

## 11. Claims

For claims procedure, please refer to the 'Claims Procedures' section in the Policy Provisions or Benefit Provisions and visit: [www.manulife.com.hk/claims-procedure-en](http://www.manulife.com.hk/claims-procedure-en) for details.

When the life insured is entitled to benefits payable under another insurance policy, whether issued by us or another insurance company, or reimbursed through any other means, the hospital benefits other than Hospital Cash and Special Bonus under the plan shall be limited to the lesser of

- i. the balance of expenses not covered by benefits payable under another insurance policy or any other means; and
- ii. the maximum benefit specified in the benefit schedule.

For claims of major illness care benefit, the claim sequence is as follows:

- i. Hospital benefits as shown in the benefit schedule
- ii. Major illness care as shown in the benefit schedule
- iii. Major Medical Benefit or Major Medical Plus Benefit

Before we approve and/or become liable to pay any amount of major illness care benefit, we must receive acceptable proof of occurrence of the specified major illness that first diagnosed on the life insured. For details, please refer to the Policy Provisions or Benefit Provisions.

## 12. Reasonable and customary and medically necessary

We will not cover the confinement, treatment and/or charges incurred relates to or arises as a direct or indirect result of any treatment, investigation, services or supplies which are not medically necessary; or any charges which exceed the 'reasonable and customary' charges.

'Reasonable and customary' in respect of a charge shall mean a charge for medical care which does not exceed the general level of charges being made by medical service providers of similar standing in the locality where the charge is incurred for similar treatment, 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 a charge is reasonable and customary, we may make reference to the followings (if applicable):

- i. the gazette issued by the Hong Kong government which sets out the fees for the private patient services in public hospitals in Hong Kong;
- ii. industrial medical fee survey;
- iii. internal claim statistics;
- iv. extent or level of the benefit insured; and/or
- v. other pertinent sources of reference.

Medically necessary' shall mean a medical service which is:

- i. consistent with the diagnosis and customary medical treatment for the condition in Hong Kong,
- ii. in accordance with standards of good medical practice in Hong Kong, and
- iii. not for the convenience of the life insured or the doctor.

## 13. Waiting period

Except for accidental injury, eligible for and coverage under the hospital benefits will commence at the later of:

- i. the issue date or 30 days after the date when the application for this plan is signed, whichever is later;
- ii. 30 days after the effective date of reinstatement; or
- iii. 30 days after the date of endorsement or the effective date of change of this plan, whichever is later (only applicable to ManuGuard Medical Benefit added after the policy has been issued).

Please also refer to 'Effective Date of Benefits' in the Policy Provisions or Benefit Provisions for detailed terms and conditions.

Except for death benefit and accidental injury, any additional coverage of hospital benefits due to Benefit Step-Up will begin 30 days after the date of endorsement or the effective date of change of the Benefit Step-Up, whichever is later.

## 14. Exclusions and limitations

We will not cover condition results directly or indirectly from any of the following:

- i. The life insured's injury or illness is a pre-existing condition; or
- ii. The life insured's diagnosed injury or illness is diagnosed by a doctor or any signs or symptoms which appeared before the commencement of the hospital benefits of this plan; or
- iii. The confinement, treatment and/or charges incurred relates to or arises as a direct or indirect result of:
  - a) the life insured's pregnancy, surrogacy, childbirth or termination of pregnancy, birth control, infertility or human assisted reproduction, or sterilisation of either sexes;
  - b) war, hostilities (whether war is declared or not), rebellion, insurrection, riot, civil commotion, terrorist act, nuclear contamination, biological contamination or chemical contamination;
  - c) the life insured's participation in any criminal offence; or attempted suicide or self-inflicted injuries while sane or insane;
  - d) a cosmetic treatment performed on the life insured unless necessitated by injury caused by an accident and the life insured receives the cosmetic treatment within 90 days of the accident;
  - e) corrective aids and treatment of refractive errors performed on the life insured unless necessitated by injury caused by an accident and the life insured receives the corrective aids treatment within 90 days of the accident;
  - f) procurement or use of medical appliances and medical devices for the benefit of the life insured including but not limited to spectacles, contact lenses, hearing aids or wheelchairs;
  - g) convalescence or physical examinations, or health checks (whether with or without any positive finding(s)) on the life insured; or vaccination and immunisation received by the life insured; or genetic testing or counseling on the life insured;
  - h) treatment or tests carried out in relation to the life insured's injury or illness are not consistent with customary medical treatment or diagnosis;

- i) narcotics used by the life insured unless taken as prescribed by a doctor, or the life insured's abuse of drugs and/or alcohol;
- j) dental treatment or surgery performed on the life insured except for emergency treatment due to accident and such treatment is performed during confinement and cannot be done on an outpatient basis;
- k) the life insured engaging in, taking part in or otherwise involving himself or herself in (i) scuba diving; or (ii) any kind of race on motorized vehicles or on horse; or (iii) mountaineering involving the use of ropes or guides, in the course of performing his or her duties under a contract of employment or a contract for service or a partnership or as a sole proprietor;
- l) treatment or test performed on the life insured that relate to Acquired Immunization Deficiency Syndrome (AIDS) any Human Immunodeficiency Virus or any related or associated condition or AIDS Related Complex (ARC);
- m) mental disorder, psychological or psychiatric conditions, behavioral problems or personality disorder of the life insured unless such disorders, conditions or problems are covered by psychiatric treatment of confinement benefits of the plan;
- n) any congenital or inherited disorder or developmental conditions (only applicable if the disorder gives rise to signs or symptoms or was diagnosed before the life insured reaches age 16) of the life insured;
- o) any confinement primarily for physiotherapy or for the investigation of signs and/or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures;
- p) any treatment, investigation, services or supplies which are not medically necessary; or any charges which exceed the 'reasonable and customary charges';
- q) non-medical services, including but not limited to guest meals, radio, telephone, photocopy, personal items, medical report charges and the like;
- r) experimental and/or unconventional medical technology/procedure/therapy performed on the life insured; or novel drugs/medicines/stem cell therapy not yet approved by the government, relevant authorities and recognised medical association in the locality;
- s) sleep disorders (except for the treatment of sleep apnoea which is life-threatening as confirmed by a specialist and approved by us in advance);
- t) treatment of obesity (including morbid obesity), weight control programmes or bariatric surgery (except when bariatric surgery is necessary as confirmed by a specialist after failure of conventional treatments and approved by us in advance);
- u) treatment of sexually transmitted diseases; or sexual problems, such as impotence, whatever the cause, gender issues or sex changes or gender re-assignments;
- v) any services/treatment in beauty centre, whether or not being medically necessary or performed by a doctor;
- w) any activity or disease which falls under the exclusion(s) as shown on the special provisions (if any) of this plan.

The above is only a general description of the exclusions. Please see the Policy Provisions or Benefit Provisions for the full list of exclusion.

What we have said above is an outline of the circumstances under which we will not pay the benefits. You should see the Policy Provisions or Benefit Provisions for the exact terms and conditions and pay particular attention to those terms including but not limited to the clauses on 'effective date of benefits', 'pre-existing conditions', 'limitation of claim' and the definitions of 'disability', 'major illness', 'medically necessary' and 'reasonable and customary charges'.

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