

Chubb VHIS - Flexi Plan

Personalise your own cover with this comprehensive government-certified medical reimbursement plan that protects beyond essentials

CHUBB®
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Why do you need an individual medical plan?

No matter how wealthy you are, wealth is nothing without health. However, disability (such as in the event of sickness, disease and injury) can strike anytime without warning, and unexpected medical expenses can pose a great threat to your finances.

Medical insurance is important because if disability does occur, your cover can help you focus on recovery, with medical bills being the least of your worries.

Increasingly more employers are providing group medical insurance for their employees, but many such plans offer only limited protection. Worse still, their benefits are often not portable - employees will lose the cover when they change job or retire.

An individual medical plan, however, can be your safety net which provides you financial assistance during recovery.

What is a VHIS-certified plan?

The Voluntary Health Insurance Scheme (“VHIS”) is a policy initiative by the Hong Kong Government to regulate indemnity hospital insurance plans offered to individuals while insurance companies and consumers can choose to participate. A VHIS-certified plan provides an additional option to consumers of using private healthcare services through individual indemnity hospital insurance plan. Policy holders of VHIS-certified plans can also enjoy tax deduction.

Chubb VHIS - Flexi Plan

Having the right personalised cover makes all the difference if disability strikes. Chubb VHIS - Flexi Plan is a comprehensive government-certified medical plan that provides not just the protection normally associated with standard VHIS-certified plans. It has expanded the list of benefit items to include outpatient kidney dialysis, emergency outpatient treatment (accident only), medical negligence, and more.

We can enhance your protection and adapt the plan to your budgetary and other needs by inviting you to choose one of the four benefit levels - each level has well-defined benefit terms covering expenses incurred for medically necessary care and services arising from disability. You can even add on the optional top-up benefit that reimburses the expenses from confinement, surgery and more once the corresponding benefit limit under the basic plan has been reached. It is a plan that assures flexibility and peace of mind financially in times of need.

Details of the protection provided by Chubb VHIS - Flexi Plan, including the full list of benefit terms and benefit schedule, are listed out in the corresponding sections below in this product brochure. Please also refer to the terms and conditions with supplement(s) of this product for other details such as the definition of the various benefit items.

How Chubb VHIS - Flexi Plan can help



4 benefit levels plus optional top-up benefit to meet your budget and needs



Cover from prevention through to treatment and recovery



Cover for prescribed diagnostic imaging tests and prescribed non-surgical cancer treatments



Cover for unknown pre-existing conditions and congenital conditions



Cover for psychiatric treatments



No lifetime benefit limit



Guaranteed renewal up to age 100



Worldwide emergency assistance services
(optional, with no additional premium required)

“Chubb Life”, the “Company”, “we”, “our” or “us” herein refers to Chubb Life Insurance Company Ltd. (Incorporated in Bermuda with Limited Liability).



4 benefit levels plus optional top-up benefit to meet your budget and needs

Chubb VHIS - Flexi Plan is flexible as you can personalise your own cover. The plan offers 4 benefit levels, namely classic, ward, semi-private and private, and you can choose the one that best suits your budget and needs.

To further enhance the protection, you can add on the optional top-up benefit. The top-up benefit, covers selected benefit items to help the insured person afford the best care when it is needed most. If the medical expenses claimable under the selected benefit item exceeds the respective benefit limit, the top-up benefit kicks in to reimburse up to 80% of the expenses exceeding what is covered by the basic plan, subject to the respective benefit item limit and annual limit.



Cover from prevention through to treatment and recovery

Chubb VHIS - Flexi Plan supports the insured person's health journey every step of the way.

■ Cover for prevention

The plan offers a check-up benefit, encouraging the insured person to keep track of his or her health.

■ Cover for pre-hospitalisation

Expenses from outpatient visit or emergency consultation resulting in hospital confinement or day case procedure are covered.

■ Cover for hospital confinement and day case procedures

The plan covers the care and services received arising from disability, including not just those commonly provided during hospital confinement (e.g. attending doctor's visit, specialist, intensive care, isolation room, surgeon, anaesthetist, and operating theatre) but also procedures performed on a day case basis.

■ Cover for post-hospitalisation

This meets expenses incurred by a follow-up outpatient visit (including physiotherapy, occupational therapy, speech therapy or diagnostic test), plus post-confinement home nursing, as well as hospice and palliative care.

■ Cover for outpatient kidney dialysis and emergency outpatient treatment following an accident

Kidney disease is a chronic ailment; sometimes leading to recurring expenses if long-term treatment is required. The plan covers the expenses incurred by a day patient requiring kidney dialysis, no matter whether it is in a clinic or a hospital. Outpatient treatments for injury resulting from accident (including accident causing injury to sound natural teeth) are also covered.

Benefit item	Hospital confinement	Day case procedures
Room and board	✓	✓
Miscellaneous charges	✓	✓
Attending doctor's visit fee	✓	
Specialist's fee	✓	
Intensive care	✓	
Surgeon's fee	✓	✓
Anaesthetist's fee	✓	✓
Operating theatre charges	✓	✓
Prescribed diagnostic imaging tests (e.g. Computed tomography ("CT" scan))	✓	✓
Prescribed non-surgical cancer treatments	✓	✓
Psychiatric treatments	✓	
Treatments for outpatient kidney dialysis		✓
Isolation room	✓	



Cover for prescribed diagnostic imaging tests and prescribed non-surgical cancer treatments

In addition to providing essential medical coverage, Chubb VHIS - Flexi Plan covers the following prescribed diagnostic imaging tests and prescribed non-surgical cancer treatments to help reduce your financial burden in times of need:

Prescribed diagnostic imaging tests (Policy holder is liable for 30% of the medical expenses incurred)	
<ul style="list-style-type: none"> Computed tomography ("CT" scan) Magnetic resonance imaging ("MRI" scan) Positron emission tomography ("PET" scan) 	<ul style="list-style-type: none"> PET-CT combined PET-MRI combined

Prescribed non-surgical cancer treatments	
<ul style="list-style-type: none"> Chemotherapy Radiotherapy Targeted therapy 	<ul style="list-style-type: none"> Immunotherapy Hormonal therapy



Cover for unknown pre-existing conditions and congenital conditions

Unknown pre-existing conditions and congenital conditions are usually excluded from medical insurance coverage. But Chubb VHIS - Flexi Plan provides protection for:

- Unknown pre-existing conditions that neither the policy holder nor the insured person were aware of at policy application; and
- Congenital conditions, that neither the policy holder nor the insured person were aware of at policy application, manifested or diagnosed after the insured person attained age 8

with a partial incremental cover during a 3-year waiting period and full cover according to the benefit schedule from the 4th policy year onwards:

Policy year	Reimbursement arrangement
1st	No coverage
2nd	25%
3rd	50%
4th onwards	100%



Cover for psychiatric treatments

Mental health is just as important as a person's physical condition when it comes to general well-being, so Chubb VHIS - Flexi Plan will reimburse expenses from psychiatric treatments during a hospital stay in Hong Kong.



No lifetime benefit limit

Chubb VHIS - Flexi Plan imposes no lifetime benefit limit. In other words, the insured person has access to the care and services covered by Chubb VHIS - Flexi Plan without needing to worry about the total cover over the entire policy term (i.e. up to age 100 of the insured person).



Guaranteed renewal up to age 100

Chubb VHIS - Flexi Plan offers guaranteed renewal up to age 100 of the insured person without re-underwriting, regardless of the insured person's health status and claims history.



Worldwide emergency assistance services (optional, with no additional premium required)

Chubb VHIS - Flexi Plan's World Emergency Assistance Services provides specific support for the insured person when travelling outside Hong Kong or the place of residence.

Other good reasons for buying Chubb VHIS - Flexi Plan



▪ Pre-hospitalisation Claim Assessment

The Chubb VHIS - Flexi Plan facilitates an easier approach to financial planning, thanks to the clearly-defined benefit items, no sharing of costs for most benefit items under the basic plan, and a specific maximum percentage of reimbursement (i.e. 80% of the medical expenses) for all benefit items under the top-up benefit. In the case of non-emergency surgical procedures, a policy holder simply needs to contact our customer service for a pre-confinement claim assessment. The process has been designed to estimate the sum claimable and explore whether any out-of-pocket expenses are likely to be incurred prior to surgery.



▪ Tax Deduction

A policy holder can claim tax deduction amounting to as much as HK\$8,000 per insured person against premiums paid. And purchasing the plan for family members* produces even bigger savings, with no limit placed on the number of policies that can be taken out.

*Include spouse, children, siblings, parents and grandparents

(Please note qualification for tax deduction in respect of premiums paid into a VHIS-certified plan is subject to the requirements stipulated by the Hong Kong Inland Revenue Department. For details on tax deduction, please visit the official website of VHIS and seek professional advice on tax and accounting matters.)

Benefit Schedule

For item(s) that are subject to coinsurance, it refers to a percentage of incurred expenses payable by you. Upon claims for such item(s), we will apply the coinsurance percentage to the incurred expenses to calculate the amount to be borne by you, and then reimburse the balance to you subject to the benefit limit set out in the benefit schedule.

Benefit items ⁽¹⁾	Benefit limit			
	Classic	Ward	Semi-Private	Private
1. Standard benefits ⁽⁶⁾				
(a) Room and board	HK\$ 850 / US\$ 109 per day	HK\$ 1,200 / US\$ 154 per day	HK\$ 2,500 / US\$ 321 per day	HK\$ 4,000 / US\$ 513 per day
	Maximum 180 days per policy year			
(b) Miscellaneous charges	HK\$ 14,000 / US\$ 1,795 per policy year	HK\$ 18,000 / US\$ 2,308 per policy year	HK\$ 26,000 / US\$ 3,333 per policy year	HK\$ 35,000 / US\$ 4,487 per policy year
(c) Attending doctor's visit fee	HK\$ 850 / US\$ 109 per day	HK\$ 1,200 / US\$ 154 per day	HK\$ 2,500 / US\$ 321 per day	HK\$ 4,000 / US\$ 513 per day
	Maximum 180 days per policy year			
(d) Specialist's fee ⁽²⁾	HK\$ 4,300 / US\$ 551 per policy year	HK\$ 5,500 / US\$ 705 per policy year	HK\$ 12,000 / US\$ 1,538 per policy year	HK\$ 25,000 / US\$ 3,205 per policy year
(e) Intensive care	HK\$ 3,500 / US\$ 449 per day	HK\$ 5,000 / US\$ 641 per day	HK\$ 7,500 / US\$ 962 per day	HK\$ 10,000 / US\$ 1,282 per day
	Maximum 90 days per policy year			
(f) Surgeon's fee ▪ Complex ▪ Major ▪ Intermediate ▪ Minor	Per surgery, subject to surgical category for the surgery / procedure in the schedule of surgical procedures :			
	HK\$ 50,000 / US\$ 6,410	HK\$ 60,000 / US\$ 7,692	HK\$ 75,000 / US\$ 9,615	HK\$ 100,000 / US\$ 12,821
	HK\$ 25,000 / US\$ 3,205	HK\$ 30,000 / US\$ 3,846	HK\$ 40,000 / US\$ 5,128	HK\$ 60,000 / US\$ 7,692
	HK\$ 12,500 / US\$ 1,603	HK\$ 15,000 / US\$ 1,923	HK\$ 20,000 / US\$ 2,564	HK\$ 30,000 / US\$ 3,846
	HK\$ 5,000 / US\$ 641	HK\$ 6,000 / US\$ 769	HK\$ 8,000 / US\$ 1,026	HK\$ 12,000 / US\$ 1,538
(g) Anaesthetist's fee	35% of surgeon's fee payable ⁽⁵⁾			
(h) Operating theatre charges	35% of surgeon's fee payable ⁽⁵⁾			
(i) Prescribed diagnostic imaging tests ^{(2) (3)}	HK\$ 20,000 / US\$ 2,564 per policy year	HK\$ 30,000 / US\$ 3,846 per policy year	HK\$ 45,000 / US\$ 5,769 per policy year	HK\$ 60,000 / US\$ 7,692 per policy year
	Subject to 30% coinsurance	Subject to 20% coinsurance		
(j) Prescribed non-surgical cancer treatments ⁽⁴⁾	HK\$ 80,000 / US\$ 10,256 per policy year		HK\$ 110,000 / US\$ 14,103 per policy year	HK\$ 160,000 / US\$ 20,513 per policy year

Benefit items ⁽¹⁾	Benefit limit			
	Classic	Ward	Semi-Private	Private
(k) Pre- and post-confinement / day case procedure outpatient care ⁽²⁾	HK\$ 700 / US\$ 90 per visit, up to HK\$ 3,500 / US\$ 449 per policy year	HK\$ 900 / US\$ 115 per visit, up to HK\$ 4,500 / US\$ 577 per policy year	HK\$ 1,200 / US\$ 154 per visit, up to HK\$ 6,500 / US\$ 833 per policy year	HK\$ 2,000 / US\$ 256 per visit, up to HK\$ 10,000 / US\$ 1,282 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)			
(l) Psychiatric treatments	HK\$ 30,000 / US\$ 3,846 per policy year	HK\$ 40,000 / US\$ 5,128 per policy year	HK\$ 60,000 / US\$ 7,692 per policy year	HK\$ 90,000 / US\$ 11,538 per policy year
2. Additional benefits ⁽⁶⁾				
(a) Treatments for outpatient kidney dialysis	HK\$ 10,000 / US\$ 1,282 per policy year	HK\$ 30,000 / US\$ 3,846 per policy year	HK\$ 60,000 / US\$ 7,692 per policy year	HK\$ 100,000 / US\$ 12,821 per policy year
(b) Emergency outpatient treatment benefit (accident only)	HK\$ 5,000 / US\$ 641 per policy year	HK\$ 15,000 / US\$ 1,923 per policy year	HK\$ 22,000 / US\$ 2,821 per policy year	HK\$ 30,000 / US\$ 3,846 per policy year
(c) Companion bed	HK\$ 400 / US\$ 51 per day	HK\$ 400 / US\$ 51 per day	HK\$ 600 / US\$ 77 per day	HK\$ 1,000 / US\$ 128 per day
	Maximum 180 days per policy year			
(d) Hospice and palliative care	HK\$ 15,000 / US\$ 1,923 per policy year	HK\$ 30,000 / US\$ 3,846 per policy year	HK\$ 50,000 / US\$ 6,410 per policy year	HK\$ 80,000 / US\$ 10,256 per policy year
(e) Isolation room	HK\$ 450 / US\$ 58 per day	HK\$ 600 / US\$ 77 per day	HK\$ 1,200 / US\$ 154 per day	HK\$ 2,000 / US\$ 256 per day
	Maximum 180 days per policy year Ward class entitlement will be the same as the benefit level ⁽⁷⁾			
(f) Post-confinement home nursing	HK\$ 500 / US\$ 64 per visit	HK\$ 800 / US\$ 103 per visit	HK\$ 1,200 / US\$ 154 per visit	HK\$ 2,000 / US\$ 256 per visit
	▪ 1 visit per day, within 90 days from discharge of hospital ▪ 30 visits per policy year			
3. Other limits				
Annual benefit limit for 1. Standard benefit items (a) - (l) and 2. Additional benefit items (a) - (f)	HK\$ 500,000 / US\$ 64,103 per policy year	HK\$ 600,000 / US\$ 76,923 per policy year	HK\$ 800,000 / US\$ 102,564 per policy year	HK\$ 1,000,000 / US\$ 128,205 per policy year
Lifetime benefit limit for 1. Standard benefit items (a) - (l) and 2. Additional benefit items (a) - (f)	Not applicable			

Benefit items ⁽¹⁾	Benefit limit			
	Classic	Ward	Semi-Private	Private
4. Other benefits				
(a) Check-up benefit ⁽⁶⁾	HK\$ 250 / US\$ 32 per policy year		HK\$ 400 / US\$ 51 per policy year	HK\$ 750 / US\$ 96 per policy year
(b) Medical negligence coverage	HK\$ 10,000 / US\$ 1,282		HK\$ 30,000 / US\$ 3,846	HK\$ 50,000 / US\$ 6,410
(c) Accidental death benefit	HK\$ 10,000 / US\$ 1,282			
(d) Death benefit	HK\$ 10,000 / US\$ 1,282			
5. Top-up benefit (optional) ⁽⁶⁾ -subject to 80 % reimbursement (which implies 20 % coinsurance)				
(a) Room and board	Ward class entitlement will be the same as the benefit level ^{(7) (8)}			
	HK\$ 850 / US\$ 109 per day	HK\$ 1,200 / US\$ 154 per day	HK\$ 2,500 / US\$ 321 per day	HK\$ 4,000 / US\$ 513 per day
	80 % of expenses starting from the 181st day of confinement per policy year			
(b) Miscellaneous charges	80% of miscellaneous charges in excess of expenses payable under benefit item 1 (b) per policy year			
(c) Attending doctor's visit fee	HK\$ 850 / US\$ 109 per day	HK\$ 1,200 / US\$ 154 per day	HK\$ 2,500 / US\$ 321 per day	HK\$ 4,000 / US\$ 513 per day
	80 % of expenses starting from the 181st day of confinement per policy year			
(d) Specialist's fee ⁽²⁾	80 % of specialist's fee in excess of expenses payable under benefit item 1 (d) per policy year			
(e) Intensive care	HK\$ 3,500 / US\$ 449 per day	HK\$ 5,000 / US\$ 641 per day	HK\$ 7,500 / US\$ 962 per day	HK\$ 10,000 / US\$ 1,282 per day
	80 % of expenses starting from the 91st day of confinement per policy year			
(f) Surgeon's fee	80 % of surgeon's fee in excess of expenses payable under benefit item 1 (f) per policy year			
(g) Anaesthetist's fee	80 % of anaesthetist's fee in excess of expenses payable under benefit item 1 (g) per policy year			
(h) Operating theatre charges	80 % of operating theatre charges in excess of expenses payable under benefit item 1 (h) per policy year			
(i) Pre-and post-confinement / day case procedure outpatient care ⁽²⁾	HK\$ 700 / US\$ 90 per visit, up to HK\$ 3,500 / US\$ 449 per policy year	HK\$ 900 / US\$ 115 per visit, up to HK\$ 4,500 / US\$ 577 per policy year	HK\$ 1,200 / US\$ 154 per visit, up to HK\$ 6,500 / US\$ 833 per policy year	HK\$ 2,000 / US\$ 256 per visit, up to HK\$ 10,000 / US\$ 1,282 per policy year
	80% of expenses in excess of benefits payable under benefit item 1 (k) for: ▪ 1 additional prior outpatient visit or emergency consultation per confinement / day case procedure ▪ 3 additional follow-up outpatient visits per confinement / day case procedure (within 90 days after discharge from hospital or completion of day case procedure)			

Benefit items ^(a)	Benefit limit			
	Classic	Ward	Semi-Private	Private
(j) Companion bed	HK\$ 400 / US\$ 51 per day	HK\$ 400 / US\$ 51 per day	HK\$ 600 / US\$ 77 per day	HK\$ 1,000 / US\$ 128 per day
	80% of expenses starting from the 181st day of confinement per policy year			
(k) Isolation room	HK\$ 450 / US\$ 58 per day	HK\$ 600 / US\$ 77 per day	HK\$ 1,200 / US\$ 154 per day	HK\$ 2,000 / US\$ 256 per day
	80% of expenses starting from the 181st day of confinement per policy year			
(l) Post-confinement home nursing	HK\$ 500 / US\$ 64 per visit	HK\$ 800 / US\$ 103 per visit	HK\$ 1,200 / US\$ 154 per visit	HK\$ 2,000 / US\$ 256 per visit
	Up to 15 visits per policy year 80% of expenses in excess of benefits payable under benefit item 2 (f) starting from the 31st visit within 90 days after discharge from hospital			
Annual benefit limit for benefit items (a) - (l) under 5. Top-up benefit (optional)	HK\$ 100,000 / US\$ 12,821 per policy year	HK\$ 180,000 / US\$ 23,077 per policy year	HK\$ 250,000 / US\$ 32,051 per policy year	HK\$ 500,000 / US\$ 64,103 per policy year
Lifetime benefit limit for benefit items (a) - (l) under 5. Top-up benefit (optional)	Not applicable			

Notes:

- (1) Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above unless otherwise specified.
- (2) The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or registered medical practitioner.
- (3) Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
- (4) Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- (5) The percentage here applies to the surgeon's fee actually payable or the benefit limit for the surgeon's fee according to the surgical categorisation, whichever is the lower.
- (6) Subject to the choice of health care service providers restriction for Mainland China.
- (7) For ward class entitlement,
 - "Classic" or "ward" means hospital accommodation of a room with more than 2 patient beds.
 - "Semi-private" means hospital accommodation of single or double occupancy room with shared bathroom.
 - "Private" means hospital accommodation of single occupancy room with private bathroom.
- (8) Room adjustment factor, as shown below, will be applied to the top-up benefit payable if the insured person chooses to stay in a ward of which the ward class is higher than the one the insured person is entitled to:

Ward class entitlement	Ward class during confinement	Room adjustment factor
Classic / Ward	Semi-private	50%
	Private or above	25%
Semi-private	Private	50%
	Above private	25%
Private	Above private	50%



Case: Enhanced protection for extra peace of mind

Freda, is a 35-year-old sales manager who has group medical cover from her employer. She realises an individual medical plan is crucially important, so she signs up to the Chubb VHIS - Flexi Plan (ward with top-up benefit) which fits her own budget and needs while offering ample flexibility.

What happens to Freda

Freda suffers a few months of acute chest pain, along with shortness of breath and profuse sweating, even at rest.

She pays an outpatient visit and an electrocardiogram suspects she has unstable angina. At doctor's advice, she is hospitalised and has cardiac catheterisation and angiogram. The results confirm each of her 3 coronary arteries has over 70% blockage. A percutaneous coronary intervention follows, which involves drug-eluting stents placed in the arteries to improve blood flow.

Freda stays in the hospital for 3 days, and makes 4 follow-up outpatient visits within the first 90 days after being discharged.

Freda's medical bill (HK\$)

Please refer to the chart below for the calculation of total medical expenses incurred and the claimable amount by each benefit item under the policy:

	Care and services received	Total expenses incurred [1]	Expenses covered by Freda's group plan [2]	Expenses covered by Chubb Life			Expenses paid by Freda [1] - [2] - [3]
				Under standard benefit (a)	Under top-up benefit (b)	Total (a) + (b) [3]	
Pre-confinement	Outpatient consultation	\$ 1,000	\$ 350	\$ 650		\$ 650	
	Electrocardiogram	\$ 500	\$ 500				
Confinement and surgery	Room and board	\$ 1,000 x 3 = \$ 3,000	\$ 1,000 x 3 = \$ 3,000				
	Miscellaneous expenses	\$ 62,000	\$ 26,000	\$ 18,000	\$ 14,400	\$ 32,400	\$ 3,600
	Attending doctor's visit fee	\$ 8,100	\$ 1,500 x 3 = \$ 4,500	\$ 1,200 x 3 = \$ 3,600		\$ 3,600	
	Surgeon's fee - Cardiac catheterisation (intermediate)	\$ 6,700	\$ 6,700				
	Surgeon's fee - Percutaneous transluminal coronary angioplasty and related procedures (major)	\$ 55,000	\$ 25,000	\$ 30,000		\$ 30,000	
	Operating theatre charges	\$ 21,000	\$ 12,000	\$ 9,000		\$ 9,000	
Post-confinement	Follow-up outpatient visits	\$ 1,500 x 4 = \$ 6,000	\$ 350 x 4 = \$ 1,400	\$ 900 x 3 = \$ 2,700	\$ 900 x 1 = \$ 900	\$ 3,600	\$ 1,000
		\$ 163,300	\$ 79,450	\$ 79,250 (approx. 48.5% of total expenses)			\$ 4,600 (approx. 2.8% of total expenses)

Tax deduction

For each tax assessment year, Freda can claim tax deduction for up to HK\$ 8,000 premium paid to her Chubb VHIS - Flexi Plan policy.

More about Chubb VHIS - Flexi Plan

Basic Information																
Product Type	Basic plan															
Currency	HK Dollar (HK\$) / US Dollar (US\$)															
Renewability	<p>Chubb VHIS - Flexi Plan offers guaranteed renewal up to age 100 of the insured person without re-underwriting, regardless of the insured person’s health status and claims history, provided that:</p> <p>i. the Company continues to have the requisite authorisation under the Insurance Ordinance (Cap. 41 of the Laws of Hong Kong) to write or continue to write Chubb VHIS - Flexi Plan;</p> <p>ii. the Company continues to maintain its registration with the Hong Kong Government as a VHIS provider; and</p> <p>iii. you continue to pay the premium.</p> <p>We reserve the right to revise the premium rates, benefit schedule and terms and conditions at the time of such renewal by giving you a notice not less than 30 days prior to the renewal date. The benefit schedule and terms and conditions shall be renewed no less favourable than the minimum requirements which are from time to time published and subject to regular review by the Hong Kong Government (https://www.vhis.gov.hk/doc/en/information_centre/e_standard_plan_template.pdf).</p>															
VHIS Certification No.	HK\$ Policy															
	<table><tr><th>Benefit Level</th><th>Basic Plan</th><th>With Top-up Benefit</th></tr><tr><td>Classic</td><td>F00027-01-000-02</td><td>F00027-01-001-02</td></tr><tr><td>Ward</td><td>F00027-02-000-02</td><td>F00027-02-001-02</td></tr><tr><td>Semi-private</td><td>F00027-03-000-02</td><td>F00027-03-001-02</td></tr><tr><td>Private</td><td>F00027-04-000-02</td><td>F00027-04-001-02</td></tr></table>	Benefit Level	Basic Plan	With Top-up Benefit	Classic	F00027-01-000-02	F00027-01-001-02	Ward	F00027-02-000-02	F00027-02-001-02	Semi-private	F00027-03-000-02	F00027-03-001-02	Private	F00027-04-000-02	F00027-04-001-02
	Benefit Level	Basic Plan	With Top-up Benefit													
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	Benefit Level	Basic Plan	With Top-up Benefit													
Classic	F00027-05-000-02	F00027-05-001-02														
Ward	F00027-06-000-02	F00027-06-001-02														
Semi-private	F00027-07-000-02	F00027-07-001-02														
Private	F00027-08-000-02	F00027-08-001-02														
Policy Term and Premium Payment Term	Up to age 100 of the insured person															
Issue Age of the Insured Person	Age 0 (15 days) - 80															
Premium Payment Mode	Monthly / quarterly / semi-annual / annual															

Basic Information	
Premium Structure	<p>Premium will be adjusted every year based on the premium rate (which generally will increase as the age of the insured person increases) applicable to the insured person at that time.</p> <p>Note: Premium rates are not guaranteed. You should refer to the benefit illustration for the premium calculated based on the current scale of premium rates. Please also refer to the “Key Product Risks - Premium Adjustment” under the “Important Information” section in this product brochure for premium rate adjustment factors. The Company reserves the right to review and adjust the premium rates from time to time upon prior written notice to the policy holders.</p>
Geographical Coverage	<p>Worldwide (except for psychiatric treatment which is applicable to hospitals in Hong Kong only)</p>

Remarks:

1. We will deduct any unpaid premiums before making any benefit payment under Chubb VHIS - Flexi Plan.
2. In this product brochure, “age” refers to the attained age of the insured person, except for premium of Chubb VHIS - Flexi Plan where “age” refers to age at the nearest birthday.
3. Worldwide emergency assistance services are optional and arranged through a third-party provider. Both the provider and Chubb Life reserve the right to terminate or vary the services in their sole discretion without further notice. We shall not be responsible for any act or failure to act on the part of the third-party provider.
4. For the case in this product brochure,
 - (a) It is fictional and is for illustrative purposes and reference only. Any relation to or reference to any actual person, party or event is purely coincidental. The nature of the case herein (if any) should not be interpreted as any comment on, or confirmation or extension of, insurance coverage for any past, present or future case. Furthermore, this case should not be relied upon to predict the outcome of any actual case as all cases are evaluated on their own individual merits and subject to the actual terms and conditions of the relevant policy. It is important to note that each actual case is unique.
 - (b) Figures listed take reference to market information on medical expenses as of 10 May 2019.
 - (c) The case involves some assumptions, including the following:
 - The requirements of a claim to be successful are fulfilled, including the definition of the respective covered benefit items;
 - Expenses incurred are first reimbursed by Freda’s group medical plan, followed by her Chubb VHIS - Flexi Plan policy; and
 - The annual benefit limit of Freda’s Chubb VHIS - Flexi Plan policy has not been reached even after the benefits to her claim have become payable.

Important Information

This product brochure is for general reference only and is not part of the policy. It provides an overview of the key features of this product and should be read along with other materials which cover additional information about this product. Such materials include but not limited to (i) terms and conditions with supplement(s), benefit schedule and premium schedule (which are all available on our company website); and (ii) benefit illustrations (if any), policy documents and other relevant marketing materials (which are all available upon request). You might also consider seeking independent professional advice if needed.

Chubb VHIS - Flexi Plan is designed for individuals looking for long-term financial planning to meet their needs for financial protection against adversities and preparation for health care needs.

Key Product Risks

The following information helps you better understand the key product risks associated with this product that you may need to pay attention before application.

- **Premium Payment Term**
You should only apply for this product if you intend to pay the premium for the whole of the premium payment term. Should you cease paying premiums early, your policy may be terminated. You will lose your insurance coverage and even the premiums paid as a result.

- **Premium Adjustment**
The Company reserves the right to review and adjust the premium rates of this product based on our expectation and experience of a series of factors including but not limited to investment returns, claims, policy surrenders and expenses. The Company will give prior written notice of any adjustment in premium rates.
- **Credit Risk**
This product is issued and underwritten by the Company. Your policy is therefore subject to the credit risk of the Company. If the Company is unable to satisfy the financial obligation of the policy, you may lose your insurance coverage and the premiums paid.
- **Inflation Risk**
Please note that the medical costs in the future are likely to be higher than they are today due to inflation. Hence, the benefit amounts and the premium rates of this product may be adjusted in the future to reflect the inflation.

Termination

Chubb VHIS - Flexi Plan and its coverage will be terminated automatically on the occurrence of the earliest of the following:

- Non-payment of premiums after the grace period;
- The date immediately following the death of the insured person;

- The Company has ceased to have the requisite authorisation under the Insurance Ordinance (Cap. 41 of the Laws of Hong Kong) to write or continue to write Chubb VHIS - Flexi Plan; or
- With your 30 days' prior written notice to cancel your policy.

You may cancel the policy by submitting the form prescribed by us. You may contact your licensed insurance intermediary or contact our Customer Service Center at +852 2894 9833 to get a copy of the form.

Key Exclusions

- Expenses incurred for treatments, procedures, medications, tests or services which are not medically necessary.
- Expenses incurred for the whole or part of the confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a registered medical practitioner for medically necessary investigation or treatment of a disability which cannot be effectively performed in a setting for providing medical services to a day patient.
- Expenses arising from human immunodeficiency virus ("HIV") and its related disability, which is contracted or occurs before the policy

effective date. Irrespective of whether it is known or unknown to the policy holder or the insured person at the time of submission of policy application, including any updates of and changes to such requisite information such disability shall be generally excluded from any coverage of the terms and benefits of the policy if it exists before the policy effective date. If evidence of proof as to the time at which such disability is first contracted or occurs is not available, manifestation of such disability within the first 5 years after the policy effective date shall be presumed to be contracted or occur before the policy effective date, while manifestation after such 5 years shall be presumed to be contracted or occur after the policy effective date.

However, the exclusion shall not apply where HIV and its related disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the terms and benefits of the policy shall apply.

- Expenses incurred for medical services as a result of disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae (except for HIV and its related disability).
- Any charges in respect of services for -

(a) beautification or cosmetic purposes, unless necessitated by injury caused by an accident and the insured person receives the medical services within 90 days of the accident; or

(b) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.

- Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups (unless payable under the benefit item called "check-up benefit"), routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the insured person and / or his family members, hair mineral analysis, immunisation or health supplements. For the avoidance of doubt, this exclusion does not apply to -

(a) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other medical services provided;

(b) removal of pre-malignant conditions; and

(c) treatment for prevention of recurrence or complication of a previous disability.

- Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident (or unless payable under the benefit “emergency outpatient treatment benefit (accident only)”). Follow-up dental treatment or oral surgery after discharge from hospital shall not be covered.
 - Expenses incurred for medical services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
 - Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during confinement or on the day of the day case procedure.
 - Expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments.
 - Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
 - Expenses incurred for medical services provided as a result of congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of 8.
 - Expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
 - Expenses incurred for treatment for disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.
- Medically Necessary and Reasonable and Customary**
- The Company will only reimburse expenses which are medically necessary and reasonable and customary.
- “Medically necessary” shall mean the need to have medical service for the purpose of investigating or treating the relevant disability in accordance with the generally accepted standards of medical practice and such medical service must –
- require the expertise of, or be referred by, a registered medical practitioner;
 - be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
 - be rendered in accordance with standards of good and prudent medical practice, and not be rendered primarily for the convenience or the comfort of the insured person, his family, caretaker or the attending registered medical practitioner;
 - be rendered in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
 - be furnished at the most appropriate level which, in the prudent professional judgment of the attending registered medical practitioner, can be safely and effectively provided to the insured person.
- “Reasonable and customary” shall mean, in relation to a charge for medical service, such level which does not exceed the general range of charges being charged by the relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar age, for a similar disability, as reasonably determined by the Company in utmost good faith. The reasonable and customary charges shall not in any event exceed the actual charges incurred. In determining

whether a charge is reasonable and customary, the Company shall make reference to the followings (if applicable) -

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

Claims

All claims incurred shall be submitted to the Company within 90 days after the date on which the insured person is discharged from the hospital, or the date on which the relevant medical service is performed and completed if there is no confinement. For this purpose, the following should be submitted to the Company:

- a) all original receipts and/or original itemised bills together with the diagnosis, type of treatment, procedure, test or service; and
- b) all relevant information, certificates, reports, evidence, referral letter and other data or materials as reasonably required by the us for processing of such claim.

The policy holder shall notify us if claims cannot be submitted within the above timeframe, otherwise we shall have the right to reject claims submitted after the above timeframe. The policy holder shall at his/her own expenses provide all certificates, information and

evidence that are reasonably required by the Company and which can be reasonably provided by the policy holder. The Company shall bear all expenses incurred in obtaining further certificates, information and evidence for the purposes of verification of the claim after the policy holder has submitted all required information pursuant to (a) and (b) above.

You may contact your licensed insurance intermediary or contact our Customer Service Center at +852 2894 9833 to get a copy of the claim form, or you can download it from our Company website at life.chubb.com/hk.

Disclosure

If the policy holder or the insured person fails to make the relevant disclosures in relation to the application of Chubb VHIS - Flexi Plan and such failure has materially affected the underwriting decision of the Company, the Company shall have the right to adjust the premiums of the policy or void the policy and demand a refund of the benefits previously paid. In the event that the Company void the policy as a result of fraud, the Company shall have the right not to refund the premium received.

Cooling-off Period

If you are not satisfied with your policy, you have the right to cancel it by submitting a signed notice and return the policy document (if any) to Chubb Life Insurance Company Ltd. at 33/F Chubb Tower, Windsor House, 311 Gloucester Road, Causeway Bay, Hong Kong within a period of 21 calendar days immediately following either the day of delivery of the policy or a notice

informing you or your nominated representative about the availability of the policy and the expiry date of the cooling-off period, whichever is earlier. If the last day of the 21-calendar day period is not a working day, the cooling-off period shall include the next working day.

Collection of Premium Levy by Insurance Authority

The Insurance Authority started collecting levy on insurance premiums from policyowners for policies issued in Hong Kong since January 1, 2018. For details of the levy and its collection arrangement, please visit our Company website at life.chubb.com/hk or contact our Customer Service Center at +852 2894 9833. In the event that we refund your premiums, whether in full or in part, e.g. upon cancellation of your policy during the cooling-off period, the proportionate levy paid by you will also be refunded accordingly.

安達自願醫保（靈活）計劃 — 標準保費表

Chubb VHIS - Flexi Plan Standard Premium Schedule



男性 Male

年齡 Age*	基本 Classic		普通 Ward		半私家 Semi-Private		私家 Private		年齡 Age*	基本 Classic		普通 Ward		半私家 Semi-Private		私家 Private	
	US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$		US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$
0	631	4,923	745	5,812	890	6,942	1,557	12,142	54	1,292	10,080	1,542	12,030	1,989	15,517	3,574	27,880
1 - 5	583	4,549	672	5,242	824	6,427	1,435	11,193	55	1,351	10,536	1,613	12,582	2,062	16,084	3,737	29,149
6 - 9	421	3,285	471	3,673	616	4,806	1,128	8,799	56	1,408	10,980	1,682	13,117	2,135	16,652	3,909	30,492
10	416	3,244	465	3,627	608	4,745	1,114	8,689	57	1,468	11,450	1,754	13,684	2,213	17,262	4,088	31,884
11	411	3,203	459	3,581	601	4,685	1,100	8,579	58	1,533	11,958	1,833	14,296	2,292	17,881	4,274	33,339
12	405	3,162	453	3,535	593	4,625	1,086	8,469	59	1,583	12,351	1,894	14,772	2,399	18,716	4,421	34,484
13	400	3,121	447	3,489	585	4,565	1,072	8,359	60	1,637	12,770	1,959	15,277	2,511	19,584	4,571	35,650
14	395	3,080	441	3,443	578	4,505	1,058	8,249	61	1,694	13,215	2,027	15,812	2,627	20,492	4,728	36,878
15	395	3,080	441	3,443	578	4,505	1,058	8,249	62	1,748	13,634	2,092	16,317	2,751	21,460	4,889	38,138
16	395	3,082	445	3,471	585	4,565	1,064	8,300	63	1,808	14,103	2,165	16,885	2,879	22,453	5,056	39,438
17	398	3,104	458	3,575	594	4,636	1,069	8,340	64	1,878	14,650	2,249	17,544	3,011	23,484	5,314	41,450
18	406	3,166	474	3,697	602	4,696	1,075	8,388	65	1,948	15,196	2,333	18,201	3,150	24,567	5,583	43,545
19	416	3,244	486	3,789	616	4,807	1,114	8,689	66	2,021	15,766	2,422	18,890	3,295	25,704	5,867	45,764
20	428	3,336	500	3,898	633	4,940	1,153	8,996	67	2,096	16,351	2,512	19,594	3,445	26,869	6,163	48,074
21	432	3,373	506	3,944	641	5,001	1,180	9,202	68	2,176	16,974	2,608	20,346	3,605	28,117	6,477	50,521
22	439	3,424	514	4,006	651	5,074	1,206	9,409	69	2,276	17,749	2,728	21,279	3,832	29,893	6,779	52,874
23	444	3,463	519	4,051	657	5,126	1,234	9,626	70	2,381	18,574	2,856	22,274	4,073	31,770	7,097	55,360
24	452	3,525	529	4,128	670	5,229	1,260	9,831	71	2,487	19,399	2,983	23,270	4,331	33,782	7,428	57,940
25	460	3,590	539	4,204	681	5,311	1,288	10,047	72	2,603	20,300	3,123	24,357	4,603	35,907	7,776	60,654
26	472	3,679	553	4,312	692	5,395	1,313	10,244	73	2,722	21,228	3,266	25,477	4,895	38,179	8,142	63,504
27	478	3,730	561	4,372	705	5,498	1,342	10,471	74	2,822	22,015	3,388	26,425	5,128	39,996	8,472	66,082
28	485	3,781	569	4,435	718	5,600	1,372	10,698	75	2,928	22,840	3,516	27,421	5,375	41,924	8,815	68,755
29	498	3,883	584	4,556	737	5,745	1,399	10,915	76	3,041	23,716	3,651	28,478	5,632	43,927	9,173	71,552
30	507	3,958	596	4,648	755	5,889	1,430	11,152	77	3,151	24,579	3,784	29,518	5,902	46,032	9,544	74,442
31	519	4,047	610	4,755	776	6,055	1,460	11,390	78	3,268	25,494	3,926	30,621	6,185	48,241	9,932	77,466
32	529	4,123	622	4,848	796	6,210	1,493	11,648	79	3,379	26,356	4,059	31,663	6,441	50,241	10,289	80,251
33	540	4,213	635	4,954	820	6,394	1,525	11,895	80	3,487	27,195	4,189	32,673	6,701	52,266	10,646	83,037
34	556	4,339	655	5,108	853	6,654	1,574	12,277	81^	3,597	28,059	4,322	33,714	6,959	54,277	11,004	85,834
35	569	4,441	671	5,230	887	6,921	1,627	12,690	82^	3,706	28,910	4,454	34,741	7,215	56,280	11,363	88,630
36	582	4,543	686	5,353	922	7,190	1,678	13,092	83^	3,814	29,748	4,583	35,751	7,475	58,302	11,719	91,406
37	600	4,681	708	5,522	960	7,489	1,734	13,525	84^	3,918	30,560	4,709	36,732	7,717	60,190	12,057	94,048
38	616	4,808	727	5,674	997	7,778	1,791	13,970	85^	4,026	31,399	4,839	37,742	7,965	62,130	12,405	96,762
39	642	5,011	759	5,919	1,029	8,025	1,873	14,608	86^	4,134	32,248	4,970	38,768	8,222	64,131	12,761	99,537
40	672	5,241	794	6,195	1,061	8,274	1,960	15,290	87^	4,247	33,126	5,106	39,825	8,489	66,217	13,130	102,417
41	701	5,469	829	6,470	1,095	8,542	2,054	16,022	88^	4,364	34,039	5,247	40,928	8,763	68,353	13,509	105,368
42	732	5,710	867	6,762	1,129	8,810	2,151	16,776	89^	4,465	34,827	5,369	41,876	9,007	70,251	13,849	108,020
43	768	5,989	910	7,099	1,164	9,078	2,250	17,550	90^	4,574	35,677	5,500	42,903	9,257	72,202	14,198	110,744
44	805	6,282	955	7,450	1,225	9,553	2,343	18,273	91^	4,680	36,502	5,628	43,899	9,516	74,224	14,554	113,520
45	844	6,586	1,002	7,819	1,288	10,047	2,441	19,036	92^	4,796	37,405	5,767	44,986	9,781	76,288	14,922	116,389
46	887	6,916	1,053	8,217	1,356	10,574	2,542	19,830	93^	4,909	38,293	5,905	46,057	10,053	78,414	15,299	119,330
47	927	7,234	1,103	8,600	1,426	11,121	2,648	20,656	94^	5,013	39,105	6,030	47,037	10,299	80,332	15,640	121,993
48	975	7,602	1,159	9,043	1,500	11,700	2,761	21,534	95^	5,121	39,945	6,160	48,048	10,549	82,284	15,989	124,718
49	1,020	7,958	1,214	9,472	1,575	12,288	2,880	22,462	96^	5,230	40,795	6,292	49,075	10,807	84,296	16,348	127,514
50	1,072	8,364	1,277	9,963	1,653	12,896	3,007	23,452	97^	5,342	41,671	6,427	50,131	11,072	86,360	16,713	130,363
51	1,125	8,772	1,340	10,452	1,739	13,567	3,136	24,464	98^	5,456	42,560	6,564	51,202	11,342	88,465	17,038	132,900
52	1,181	9,214	1,409	10,989	1,828	14,258	3,274	25,538	99^	5,569	43,436	6,700	52,260	11,613	90,580	17,370	135,488
53	1,240	9,672	1,479	11,539	1,921	14,980	3,418	26,662	100^	5,681	44,312	6,835	53,316	11,884	92,696	17,702	138,078

* 最接近生日之年齡 Age nearest birthday

^ 只供續保 For renewal only

生效日期：2022 年 10 月 1 日

Effective Date: 1 October 2022

備註：1. 保費率並非保證及會每年隨著受保人年齡增長而調整。本公司保留權利不時檢討標準保費率並在事先以書面通知保單持有人的情況下作出調整。
2. 此標準保費表並未包括保險業監管局徵收的保費徵費。3. 以上所列保費為年繳保費。不同保費繳費方式的每期保費之保費繳交因素為：年繳 = 1.0000；半年繳 = 0.5125；季繳 = 0.2594；月繳 = 0.0872。保費繳費方式的計算方法為年繳保費乘以保費繳交因素，並調整至小數點後兩位。

Note: 1. Premium rates are not guaranteed and will adjust with the Insured Person's age. The Company reserves the right to review and adjust the Standard Premium rates from time to time upon prior written notice to Policy Holders. 2. This Standard Premium Schedule does not include levy which is collected by the Insurance Authority. 3. The above premium is shown in annual modal premium. The modal factor for each payment of different modal premium payment is: Annual = 1.0000; Semi-annual = 0.5125; Quarterly = 0.2594; Monthly = 0.0872. Modal premium is calculated by multiplying annual modal premium by modal factor and round to nearest 2 decimal places.

安達自願醫保（靈活）計劃（附加額外保障） — 標準保費表
Chubb VHIS - Flexi Plan (Top-up Benefit) Standard Premium Schedule



男性 Male

年齡 Age*	基本及 附加額外保障 Classic with Top-up Benefit		普通及 附加額外保障 Ward with Top-up Benefit		半私家及 附加額外保障 Semi-Private with Top-up Benefit		私家及 附加額外保障 Private with Top-up Benefit	
	US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$
0	731	5,702	855	6,668	1,335	10,410	2,348	18,314
1 - 5	671	5,234	778	6,066	1,009	7,870	1,768	13,794
6 - 9	490	3,825	569	4,437	894	6,973	1,603	12,505
10	484	3,777	562	4,382	883	6,886	1,583	12,348
11	478	3,729	555	4,326	872	6,798	1,563	12,192
12	472	3,682	548	4,271	860	6,711	1,543	12,036
13	466	3,634	540	4,215	849	6,624	1,523	11,879
14	460	3,586	533	4,160	838	6,537	1,503	11,723
15	460	3,586	533	4,160	838	6,537	1,503	11,723
16	466	3,634	540	4,215	849	6,624	1,518	11,840
17	471	3,671	546	4,258	860	6,711	1,534	11,965
18	476	3,710	552	4,302	872	6,798	1,546	12,060
19	487	3,799	565	4,408	897	6,998	1,574	12,276
20	497	3,880	577	4,501	919	7,168	1,599	12,474
21	503	3,922	584	4,552	931	7,262	1,606	12,525
22	509	3,967	590	4,604	944	7,365	1,612	12,577
23	516	4,021	599	4,669	959	7,478	1,618	12,618
24	525	4,096	610	4,759	975	7,602	1,647	12,844
25	538	4,195	625	4,875	991	7,726	1,676	13,071
26	547	4,270	637	4,966	1,009	7,870	1,704	13,288
27	559	4,357	650	5,070	1,026	8,005	1,736	13,537
28	568	4,432	661	5,158	1,043	8,139	1,766	13,773
29	581	4,530	676	5,275	1,066	8,313	1,804	14,072
30	595	4,639	693	5,404	1,091	8,510	1,845	14,392
31	607	4,737	708	5,521	1,116	8,707	1,886	14,712
32	621	4,845	724	5,649	1,141	8,902	1,930	15,052
33	632	4,932	737	5,752	1,167	9,099	1,975	15,404
34	663	5,170	774	6,036	1,214	9,470	2,044	15,940
35	696	5,430	813	6,345	1,262	9,842	2,115	16,497
36	728	5,679	852	6,643	1,311	10,224	2,189	17,076
37	760	5,929	890	6,939	1,362	10,626	2,267	17,684
38	798	6,222	934	7,288	1,417	11,049	2,348	18,314
39	824	6,428	966	7,532	1,488	11,606	2,444	19,066
40	849	6,622	996	7,765	1,563	12,194	2,548	19,872
41	877	6,840	1,029	8,023	1,646	12,835	2,662	20,760
42	903	7,046	1,060	8,269	1,729	13,485	2,773	21,627
43	931	7,263	1,093	8,526	1,816	14,166	2,890	22,544
44	987	7,696	1,159	9,042	1,915	14,938	3,015	23,515
45	1,042	8,130	1,225	9,558	2,020	15,754	3,147	24,547
46	1,106	8,629	1,301	10,150	2,131	16,621	3,283	25,610
47	1,172	9,138	1,379	10,756	2,250	17,550	3,426	26,724
48	1,242	9,691	1,464	11,416	2,373	18,510	3,577	27,901
49	1,299	10,136	1,531	11,944	2,486	19,387	3,786	29,530
50	1,362	10,623	1,606	12,525	2,601	20,286	4,012	31,296
51	1,426	11,122	1,682	13,118	2,721	21,224	4,249	33,144
52	1,495	11,664	1,765	13,764	2,848	22,214	4,502	35,114
53	1,566	12,217	1,849	14,421	2,982	23,257	4,770	37,208
54	1,636	12,759	1,932	15,066	3,129	24,403	5,053	39,417
55	1,707	13,312	2,016	15,724	3,283	25,610	5,354	41,760
56	1,782	13,898	2,105	16,420	3,445	26,869	5,673	44,246
57	1,861	14,516	2,199	17,155	3,616	28,201	6,013	46,899
58	1,943	15,156	2,297	17,917	3,797	29,614	6,370	49,684
59	1,994	15,556	2,358	18,393	3,970	30,964	6,579	51,315
60	2,047	15,968	2,421	18,884	4,151	32,379	6,796	53,007
61	2,102	16,392	2,486	19,387	4,343	33,876	7,019	54,751
62	2,157	16,825	2,552	19,903	4,542	35,424	7,249	56,546
63	2,215	17,280	2,621	20,445	4,753	37,075	7,486	58,394
64	2,300	17,942	2,722	21,231	4,855	37,869	7,777	60,664
65	2,392	18,657	2,831	22,083	4,958	38,673	8,081	63,028
66	2,485	19,383	2,942	22,947	5,067	39,520	8,393	65,463
67	2,582	20,143	3,058	23,850	5,175	40,366	8,719	68,012
68	2,684	20,934	3,178	24,792	5,286	41,234	9,058	70,653
69	2,795	21,801	3,311	25,824	5,562	43,380	9,357	72,986
70	2,912	22,712	3,450	26,907	5,850	45,628	9,667	75,402
71	3,033	23,654	3,593	28,029	6,154	48,002	9,988	77,908
72	3,161	24,652	3,746	29,216	6,473	50,490	10,319	80,488
73	3,296	25,705	3,906	30,468	6,810	53,121	10,662	83,161
74	3,426	26,724	4,062	31,681	7,145	55,731	11,004	85,834
75	3,583	27,948	4,359	33,998	7,347	57,307	11,561	90,176
76	3,721	29,025	4,527	35,313	7,549	58,881	12,118	94,518
77	3,857	30,086	4,694	36,610	7,751	60,456	12,675	98,862
78	4,002	31,212	4,870	37,983	7,953	62,030	13,231	103,203
79	4,137	32,272	5,036	39,280	8,155	63,606	13,788	107,545
80	4,270	33,303	5,197	40,538	8,356	65,179	14,345	111,889
81^	4,406	34,365	5,364	41,836	8,679	67,695	14,829	115,663
82^	4,540	35,412	5,527	43,113	9,000	70,197	15,313	119,438
83^	4,672	36,442	5,689	44,372	9,324	72,724	15,793	123,187
84^	4,800	37,441	5,845	45,592	9,626	75,086	16,250	126,752
85^	4,932	38,472	6,007	46,851	9,937	77,510	16,720	130,417
86^	5,067	39,519	6,170	48,128	10,258	80,014	17,201	134,164
87^	5,205	40,597	6,339	49,446	10,592	82,620	17,699	138,051
88^	5,349	41,720	6,515	50,817	10,935	85,290	18,210	142,035
89^	5,473	42,688	6,667	52,000	11,239	87,662	18,669	145,616
90^	5,607	43,735	6,831	53,278	11,551	90,100	19,140	149,294
91^	5,737	44,749	6,989	54,517	11,876	92,629	19,621	153,042
92^	5,879	45,858	7,163	55,872	12,206	95,209	20,117	156,913
93^	6,019	46,952	7,334	57,207	12,547	97,866	20,626	160,885
94^	6,147	47,950	7,491	58,426	12,854	100,264	21,087	164,478
95^	6,280	48,981	7,652	59,685	13,167	102,703	21,558	168,156
96^	6,414	50,028	7,816	60,963	13,490	105,219	22,042	171,931
97^	6,552	51,105	7,984	62,278	13,820	107,798	22,536	175,777
98^	6,692	52,198	8,156	63,614	14,158	110,431	22,975	179,204
99^	6,830	53,276	8,324	64,929	14,497	113,074	23,423	182,697
100^	6,968	54,352	8,493	66,246	14,836	115,719	23,871	186,192

* 最接近生日之年齡 Age nearest birthday

^ 只供續保 For renewal only

生效日期：2022 年 10 月 1 日

Effective Date: 1 October 2022

備註：1. 保費率並非保證及會每年隨著受保人年齡增長而調整。本公司保留權利不時檢討標準保費率並在事先以書面通知保單持有人的情況下作出調整。
2. 此標準保費表並未包括保險業監管局徵收的保費徵費。3. 以上所列保費為年繳保費。不同保費繳費方式的每期保費之保費繳交因素為：年繳 = 1.0000；半年繳 = 0.5125；季繳 = 0.2594；月繳 = 0.0872。保費繳費方式的計算方法為年繳保費乘以保費繳交因素，並調整至小數點後兩位。

Note: 1. Premium rates are not guaranteed and will adjust with the Insured Person's age. The Company reserves the right to review and adjust the Standard Premium rates from time to time upon prior written notice to Policy Holders. 2. This Standard Premium Schedule does not include levy which is collected by the Insurance Authority. 3. The above premium is shown in annual modal premium. The modal factor for each payment of different modal premium payment is: Annual = 1.0000; Semi-annual = 0.5125; Quarterly = 0.2594; Monthly = 0.0872. Modal premium is calculated by multiplying annual modal premium by modal factor and round to nearest 2 decimal places.

安達自願醫保（靈活）計劃 — 標準保費表
Chubb VHIS - Flexi Plan Standard Premium Schedule



女性 Female

年齡 Age*	基本 Classic		普通 Ward		半私家 Semi-Private		私家 Private	
	US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$
0	533	4,154	632	4,926	715	5,580	1,364	10,636
1 - 5	499	3,895	567	4,420	705	5,498	1,095	8,542
6 - 9	377	2,940	432	3,366	561	4,372	1,006	7,850
10	372	2,903	426	3,323	554	4,318	994	7,752
11	367	2,866	421	3,281	547	4,263	981	7,654
12	363	2,829	415	3,239	539	4,208	969	7,556
13	358	2,793	410	3,197	533	4,154	956	7,457
14	353	2,756	404	3,155	526	4,099	943	7,359
15	353	2,756	404	3,155	526	4,099	943	7,359
16	361	2,819	424	3,307	548	4,271	1,011	7,888
17	381	2,970	447	3,489	571	4,457	1,088	8,490
18	402	3,136	473	3,690	594	4,635	1,171	9,133
19	421	3,281	496	3,865	627	4,888	1,224	9,545
20	444	3,465	524	4,088	657	5,126	1,279	9,975
21	460	3,585	542	4,231	685	5,343	1,323	10,316
22	479	3,739	567	4,420	712	5,550	1,364	10,636
23	498	3,882	589	4,593	741	5,776	1,409	10,988
24	517	4,035	613	4,780	767	5,982	1,448	11,296
25	536	4,177	635	4,954	792	6,178	1,492	11,637
26	557	4,344	661	5,156	820	6,394	1,532	11,947
27	575	4,486	683	5,330	848	6,612	1,574	12,277
28	596	4,652	709	5,532	879	6,860	1,618	12,618
29	618	4,819	735	5,734	912	7,117	1,668	13,010
30	639	4,984	761	5,936	947	7,386	1,718	13,401
31	657	5,127	783	6,110	983	7,664	1,771	13,815
32	680	5,305	811	6,327	1,021	7,964	1,828	14,258
33	703	5,484	839	6,543	1,059	8,262	1,884	14,692
34	724	5,649	865	6,746	1,094	8,530	1,947	15,187
35	742	5,791	887	6,919	1,129	8,810	2,016	15,724
36	765	5,970	915	7,136	1,165	9,088	2,086	16,270
37	785	6,124	939	7,323	1,205	9,397	2,157	16,827
38	811	6,326	970	7,569	1,245	9,708	2,233	17,416
39	835	6,516	1,000	7,801	1,279	9,975	2,319	18,086
40	861	6,717	1,032	8,046	1,317	10,275	2,405	18,758
41	890	6,943	1,067	8,320	1,358	10,594	2,500	19,500
42	918	7,158	1,100	8,581	1,398	10,904	2,595	20,244
43	948	7,394	1,137	8,870	1,440	11,234	2,693	21,007
44	974	7,596	1,169	9,115	1,483	11,564	2,783	21,709
45	1,006	7,845	1,207	9,418	1,529	11,926	2,874	22,420
46	1,036	8,082	1,245	9,708	1,577	12,298	2,971	23,174
47	1,068	8,331	1,283	10,011	1,627	12,690	3,066	23,918
48	1,100	8,581	1,322	10,315	1,676	13,071	3,167	24,702
49	1,129	8,806	1,358	10,590	1,731	13,504	3,258	25,413
50	1,156	9,019	1,391	10,849	1,784	13,918	3,351	26,137
51	1,188	9,268	1,430	11,152	1,843	14,372	3,445	26,869
52	1,219	9,506	1,467	11,442	1,901	14,826	3,544	27,642
53	1,251	9,756	1,506	11,745	1,960	15,290	3,645	28,428

* 最接近生日之年齡 Age nearest birthday

生效日期：2022 年 10 月 1 日

備註：1. 保費率並非保證及會每年隨著受保人年齡增長而調整。本公司保留權利不時檢討標準保費率並在事先以書面通知保單持有人的情況下作出調整。
2. 此標準保費表並未包括保險業監管局徵收的保費徵費。3. 以上所列保費為年繳保費。不同保費繳費方式的每期保費之保費繳交因素為：年繳 = 1.0000；半年繳 = 0.5125；季繳 = 0.2594；月繳 = 0.0872。保費繳費方式的計算方法為年繳保費乘以保費繳交因素，並調整至小數點後兩位。

年齡 Age*	基本 Classic		普通 Ward		半私家 Semi-Private		私家 Private	
	US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$
54	1,290	10,064	1,554	12,121	2,029	15,828	3,737	29,149
55	1,334	10,408	1,607	12,538	2,101	16,384	3,834	29,902
56	1,378	10,752	1,661	12,958	2,176	16,972	3,932	30,666
57	1,424	11,108	1,717	13,392	2,253	17,571	4,031	31,440
58	1,471	11,476	1,774	13,839	2,332	18,189	4,134	32,245
59	1,516	11,821	1,828	14,258	2,410	18,799	4,293	33,483
60	1,561	12,177	1,884	14,692	2,492	19,438	4,457	34,762
61	1,607	12,532	1,939	15,126	2,574	20,078	4,626	36,084
62	1,655	12,912	1,998	15,588	2,662	20,760	4,803	37,466
63	1,707	13,316	2,062	16,080	2,753	21,472	4,987	38,901
64	1,759	13,719	2,124	16,569	2,881	22,472	5,213	40,665
65	1,807	14,098	2,183	17,031	3,021	23,566	5,452	42,523
66	1,864	14,538	2,252	17,568	3,195	24,918	5,700	44,463
67	1,922	14,989	2,322	18,115	3,316	25,868	5,962	46,507
68	1,981	15,452	2,395	18,679	3,475	27,105	6,235	48,632
69	2,089	16,294	2,526	19,706	3,745	29,211	6,519	50,851
70	2,203	17,184	2,665	20,790	4,017	31,336	6,816	53,162
71	2,366	18,454	2,863	22,334	4,289	33,452	7,129	55,608
72	2,456	19,155	2,973	23,187	4,466	34,836	7,453	58,137
73	2,587	20,175	3,132	24,429	4,642	36,207	7,796	60,810
74	2,699	21,054	3,269	25,497	4,855	37,869	8,084	63,058
75	2,818	21,979	3,413	26,625	5,079	39,614	8,386	65,412
76	2,939	22,928	3,562	27,781	5,338	41,636	8,697	67,836
77	3,064	23,901	3,713	28,965	5,555	43,328	9,024	70,386
78	3,197	24,933	3,875	30,223	5,810	45,320	9,357	72,986
79	3,322	25,908	4,027	31,407	6,046	47,157	9,669	75,421
80	3,443	26,856	4,175	32,563	6,279	48,973	9,982	77,857
81^	3,563	27,793	4,321	33,704	6,511	50,788	10,295	80,302
82^	3,687	28,755	4,471	34,874	6,744	52,605	10,607	82,738
83^	3,808	29,704	4,619	36,030	6,977	54,421	10,921	85,184
84^	3,924	30,606	4,760	37,129	7,198	56,145	11,215	87,475
85^	4,041	31,520	4,903	38,240	7,426	57,920	11,518	89,838
86^	4,164	32,482	5,053	39,410	7,658	59,736	11,831	92,283
87^	4,287	33,442	5,203	40,581	7,899	61,615	12,153	94,791
88^	4,417	34,452	5,360	41,810	8,148	63,554	12,481	97,351
89^	4,532	35,353	5,501	42,907	8,369	65,277	12,778	99,672
90^	4,651	36,279	5,645	44,034	8,595	67,042	13,084	102,055
91^	4,774	37,239	5,795	45,204	8,829	68,868	13,396	104,491
92^	4,897	38,200	5,946	46,375	9,067	70,726	13,716	106,988
93^	5,028	39,222	6,105	47,617	9,315	72,656	14,043	109,537
94^	5,144	40,124	6,246	48,715	9,538	74,400	14,341	111,859
95^	5,263	41,050	6,390	49,842	9,765	76,165	14,647	114,243
96^	5,383	41,988	6,536	50,983	10,000	78,001	14,960	116,689
97^	5,509	42,973	6,690	52,182	10,238	79,860	15,279	119,176
98^	5,636	43,957	6,844	53,382	10,484	81,778	15,604	121,713
99^	5,765	44,966	7,001	54,609	10,728	83,677	15,931	124,263
100^	5,894	45,974	7,159	55,837	10,971	85,575	16,258	126,812

^ 只供續保 For renewal only

Effective Date: 1 October 2022

Note: 1. Premium rates are not guaranteed and will adjust with the Insured Person's age. The Company reserves the right to review and adjust the Standard Premium rates from time to time upon prior written notice to Policy Holders. 2. This Standard Premium Schedule does not include levy which is collected by the Insurance Authority. 3. The above premium is shown in annual modal premium. The modal factor for each payment of different modal premium payment is: Annual = 1.0000; Semi-annual = 0.5125; Quarterly = 0.2594; Monthly = 0.0872. Modal premium is calculated by multiplying annual modal premium by modal factor and round to nearest 2 decimal places.

安達自願醫保（靈活）計劃（附加額外保障） — 標準保費表

Chubb VHIS - Flexi Plan (Top-up Benefit) Standard Premium Schedule



女性 Female

年齡 Age*	基本及 附加額外保障 Classic with Top-up Benefit		普通及 附加額外保障 Ward with Top-up Benefit		半私家及 附加額外保障 Semi-Private with Top-up Benefit		私家及 附加額外保障 Private with Top-up Benefit	
	US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$
0	731	5,702	855	6,668	1,115	8,696	2,265	17,665
1 - 5	642	5,007	749	5,842	848	6,612	1,768	13,794
6 - 9	522	4,075	607	4,732	793	6,188	1,585	12,360
10	516	4,024	599	4,673	783	6,111	1,565	12,205
11	509	3,973	592	4,614	773	6,033	1,545	12,051
12	503	3,922	584	4,555	764	5,956	1,525	11,896
13	496	3,871	576	4,496	754	5,878	1,505	11,742
14	490	3,820	569	4,437	744	5,801	1,486	11,587
15	490	3,820	569	4,437	744	5,801	1,486	11,587
16	510	3,975	592	4,620	771	6,016	1,513	11,800
17	530	4,131	616	4,804	795	6,204	1,538	11,995
18	550	4,290	640	4,993	825	6,437	1,563	12,192
19	569	4,441	663	5,171	858	6,691	1,625	12,674
20	592	4,617	689	5,378	889	6,932	1,685	13,143
21	603	4,704	703	5,481	912	7,117	1,726	13,464
22	620	4,833	723	5,636	935	7,293	1,771	13,815
23	632	4,932	737	5,752	959	7,478	1,816	14,166
24	650	5,073	759	5,919	989	7,716	1,862	14,527
25	671	5,235	784	6,114	1,020	7,953	1,910	14,899
26	692	5,398	809	6,307	1,053	8,211	1,956	15,259
27	713	5,560	833	6,501	1,086	8,469	2,007	15,652
28	735	5,733	860	6,708	1,119	8,727	2,057	16,044
29	755	5,886	883	6,888	1,160	9,048	2,130	16,611
30	777	6,060	909	7,094	1,203	9,387	2,201	17,168
31	802	6,254	939	7,326	1,249	9,739	2,279	17,778
32	823	6,416	964	7,520	1,295	10,099	2,356	18,376
33	848	6,612	994	7,752	1,342	10,471	2,439	19,027
34	874	6,818	1,025	7,998	1,386	10,812	2,524	19,687
35	899	7,014	1,055	8,229	1,432	11,173	2,611	20,367
36	928	7,240	1,090	8,500	1,480	11,545	2,705	21,100
37	956	7,456	1,123	8,758	1,530	11,936	2,798	21,823
38	985	7,686	1,158	9,030	1,581	12,328	2,894	22,575
39	1,012	7,892	1,189	9,274	1,631	12,721	2,996	23,371
40	1,038	8,097	1,220	9,519	1,682	13,123	3,102	24,196
41	1,069	8,335	1,257	9,804	1,738	13,557	3,216	25,083
42	1,099	8,575	1,293	10,087	1,792	13,980	3,327	25,950
43	1,130	8,812	1,329	10,370	1,848	14,414	3,443	26,858
44	1,173	9,150	1,381	10,771	1,915	14,938	3,547	27,663
45	1,219	9,507	1,435	11,196	1,985	15,486	3,655	28,509
46	1,266	9,874	1,492	11,635	2,057	16,044	3,763	29,355
47	1,317	10,276	1,553	12,111	2,134	16,642	3,877	30,243
48	1,369	10,677	1,614	12,589	2,213	17,262	3,995	31,161
49	1,409	10,993	1,662	12,963	2,304	17,973	4,117	32,112
50	1,448	11,295	1,708	13,324	2,401	18,727	4,243	33,092
51	1,493	11,643	1,761	13,737	2,502	19,512	4,371	34,092
52	1,536	11,979	1,813	14,138	2,607	20,337	4,506	35,144
53	1,579	12,314	1,864	14,536	2,717	21,194	4,643	36,218

* 最接近生日之年齡 Age nearest birthday

生效日期：2022 年 10 月 1 日

備註：1. 保費率並非保證及會每年隨著受保人年齡增長而調整。本公司保留權利不時檢討標準保費率並在事先以書面通知保單持有人的情況下作出調整。
2. 此標準保費表並未包括保險業監管局徵收的保費徵費。3. 以上所列保費為年繳保費。不同保費繳費方式的每期保費之保費繳交因素為：年繳 = 1.0000；半年繳 = 0.5125；季繳 = 0.2594；月繳 = 0.0872。保費繳費方式的計算方法為年繳保費乘以保費繳交因素，並調整至小數點後兩位。

年齡 Age*	基本及 附加額外保障 Classic with Top-up Benefit		普通及 附加額外保障 Ward with Top-up Benefit		半私家及 附加額外保障 Semi-Private with Top-up Benefit		私家及 附加額外保障 Private with Top-up Benefit	
	US\$	HK\$	US\$	HK\$	US\$	HK\$	US\$	HK\$
54	1,627	12,693	1,922	14,988	2,848	22,214	4,868	37,971
55	1,683	13,129	1,988	15,505	2,987	23,298	5,097	39,757
56	1,737	13,550	2,052	16,008	3,132	24,433	5,342	41,667
57	1,794	13,995	2,120	16,537	3,289	25,651	5,597	43,658
58	1,851	14,440	2,188	17,066	3,446	26,878	5,865	45,744
59	1,905	14,862	2,252	17,569	3,529	27,529	6,069	47,342
60	1,962	15,307	2,320	18,098	3,611	28,168	6,284	49,015
61	2,021	15,762	2,390	18,639	3,696	28,830	6,502	50,716
62	2,082	16,239	2,462	19,207	3,783	29,511	6,731	52,502
63	2,143	16,717	2,535	19,773	3,872	30,201	6,969	54,360
64	2,233	17,421	2,643	20,613	4,016	31,327	7,191	56,092
65	2,328	18,158	2,755	21,489	4,163	32,472	7,424	57,910
66	2,428	18,939	2,874	22,418	4,317	33,669	7,664	59,778
67	2,528	19,719	2,993	23,347	4,474	34,897	7,908	61,686
68	2,635	20,554	3,120	24,339	4,639	36,188	8,165	63,688
69	2,749	21,442	3,256	25,398	4,863	37,932	8,485	66,186
70	2,870	22,387	3,400	26,521	5,100	39,778	8,821	68,806
71	2,994	23,352	3,547	27,669	5,347	41,708	9,167	71,500
72	3,123	24,360	3,701	28,868	5,605	43,719	9,528	74,318
73	3,259	25,422	3,863	30,132	5,879	45,856	9,904	77,248
74	3,393	26,463	4,022	31,370	6,150	47,972	10,278	80,168
75	3,571	27,856	4,247	33,129	6,329	49,364	10,806	84,289
76	3,727	29,067	4,433	34,575	6,653	51,894	11,335	88,411
77	3,886	30,307	4,622	36,055	6,924	54,009	11,863	92,530
78	4,054	31,623	4,824	37,627	7,243	56,499	12,391	96,652
79	4,213	32,865	5,014	39,106	7,538	58,795	12,920	100,774
80	4,369	34,075	5,199	40,552	7,829	61,065	13,448	104,894
81^	4,522	35,270	5,382	41,978	8,120	63,334	13,871	108,196
82^	4,679	36,496	5,569	43,441	8,411	65,605	14,293	111,484
83^	4,834	37,707	5,755	44,887	8,702	67,875	14,716	114,787
84^	4,982	38,856	5,931	46,258	8,978	70,030	15,113	117,878
85^	5,131	40,022	6,109	47,649	9,263	72,249	15,522	121,069
86^	5,288	41,247	6,296	49,112	9,554	74,518	15,945	124,370
87^	5,445	42,472	6,484	50,576	9,855	76,867	16,379	127,755
88^	5,610	43,759	6,681	52,110	10,166	79,291	16,822	131,210
89^	5,758	44,910	6,857	53,482	10,442	81,446	17,224	134,346
90^	5,909	46,088	7,037	54,891	10,725	83,652	17,636	137,563
91^	6,066	47,314	7,225	56,354	11,017	85,935	18,058	140,851
92^	6,223	48,541	7,412	57,817	11,315	88,256	18,490	144,223
93^	6,390	49,840	7,611	59,368	11,624	90,669	18,931	147,663
94^	6,537	50,991	7,787	60,742	11,904	92,848	19,333	150,799
95^	6,689	52,172	7,968	62,151	12,186	95,054	19,746	154,016
96^	6,842	53,366	8,151	63,577	12,481	97,351	20,169	157,317
97^	7,003	54,622	8,343	65,077	12,778	99,672	20,599	160,676
98^	7,164	55,879	8,535	66,574	13,086	102,072	21,039	164,103
99^	7,329	57,165	8,732	68,109	13,390	104,444	21,480	167,544
100^	7,494	58,450	8,929	69,645	13,695	106,818	21,921	170,984

^ 只供續保 For renewal only

Effective Date: 1 October 2022

Note: 1. Premium rates are not guaranteed and will adjust with the Insured Person's age. The Company reserves the right to review and adjust the Standard Premium rates from time to time upon prior written notice to Policy Holders. 2. This Standard Premium Schedule does not include levy which is collected by the Insurance Authority. 3. The above premium is shown in annual modal premium. The modal factor for each payment of different modal premium payment is: Annual = 1.0000; Semi-annual = 0.5125; Quarterly = 0.2594; Monthly = 0.0872. Modal premium is calculated by multiplying annual modal premium by modal factor and round to nearest 2 decimal places.

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