

Group Medical Insurance

HSBC Life Benefits+ Medical Insurance Plan

Take care of your people, and they will take care of your business

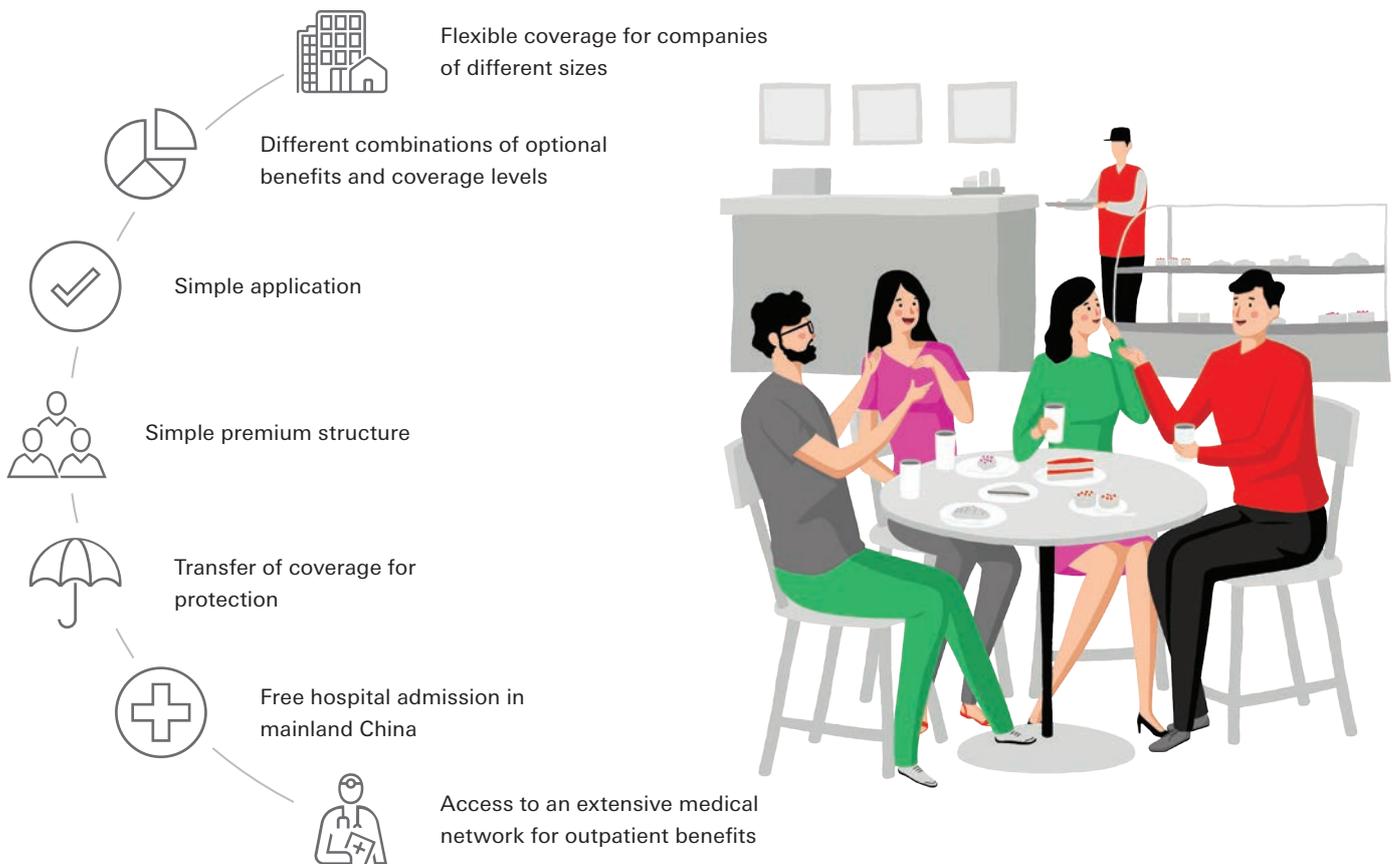


HSBC Life (International) Limited

One-stop solutions for managing group medical policies

No two employees are exactly alike. That's why you need a lot of flexibility to build your employees' loyalty. HSBC Life Benefits+ Medical Insurance Plan (the "Plan") is a one-stop group medical solution for companies of different sizes. It offers a packaged plan that provides you with an extensive range of basic and optional benefits, which you can mix and match to assemble group policies that mirror the needs profiles of your best people. After all, when talented employees are motivated by strong benefits to go above and beyond, the one who benefits the most is the employer.

Product features at a glance



HSBC Life Benefits+ Medical Insurance Plan is an annual group life insurance policy issued by HSBC Life (International) Limited. The content of this Product Brochure is for reference only. You should read this document in conjunction with the relevant insurance proposal and Policy Provisions for details.

We also offer a tailor-made plan with flexible combinations of benefits to meet the group insurance needs of companies with 30 or more employees. For more details, please contact your Relationship Manager, Insurance Sales Manager or visit HSBC Business Centre.

Key features

The packaged plan of HSBC Life Benefits+ Medical Insurance Plan combines choices and flexibility to cater to different group medical requirements.



Flexible coverage for companies of different sizes

HSBC Life Benefits+ Medical Insurance Plan is designed to cater to the needs of businesses with different staff sizes, offering companies with 2 or more employees the flexibility to mix-and-match benefits¹ to suit their needs.

It offers a total of 6 levels of basic hospitalisation benefits, giving you more options to customise coverage according to different employee grades and seniorities.



Different combinations of optional benefits and coverage levels

In addition to basic hospitalisation benefits, we offer 6 types of optional benefits with different levels of coverage. This provides you with the flexibility to put together an optimal combination of different medical protections within your budgets, ensuring your employees are well-protected under different circumstances

- Outpatient benefits
- Additional kidney and cancer benefits
- Supplementary major medical benefits
- Dental benefits
- Maternity benefits
- Personal accident benefits

Key features



Simple application

Enrolment for the plan is simple, with minimal administrative work required. Individual health declarations for new employees are waived if your policy covers 6 employees or more.



Simple premium structure

Premiums are calculated at a flat rate based on the specific plans your employees and their dependants are enrolled in, regardless of age and gender, making it much easier for you to budget for future employee benefits.



Transfer of coverage for protection

With additional underwriting, coverage of injuries and/or illnesses by an existing group medical policy from another service provider may be transferred to HSBC Life Benefits+ Medical Insurance Plan, with the intention to provide protection for your employees.



Free hospital admission in mainland China

In the event of an injury or unforeseen illness, the insured person can be admitted to a designated hospital in mainland China without paying an admission deposit in advance.



Access to an extensive medical network for outpatient benefits

Through our network of over 2,000 panel doctors in Hong Kong, the insured person is connected to a vast pool of medical experts, including general practitioners, specialists, physiotherapists and registered Chinese medicine practitioners.

The Plan includes Cashless Arrangement for eligible treatments within our extensive network of doctors and medical facilities. With this convenient feature, the insured person can receive quality medical services without the hassle of making an upfront payment at the time of the consultation, except for expenses in excess of the entitled benefits or where co-payment is required.

Benefit schedule

Below is a summary of the key benefits of the policy. Please refer to your Policy Provisions for the full list of benefits, terms, conditions and exclusions.

Hospitalisation benefits (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Room type	Private	Semi-private		Ward		
Reimbursement percentage	100%					
1. Room and board Limit per day Maximum 100 days per disability per year	2,600	1,800	1,000	800	600	450
2. Hospital charges Per disability per year	30,000	25,000	20,000	15,000	10,000	8,000
3. Surgeon's fee Per disability per year						
• Complex operation	90,000	75,000	60,000	52,000	42,000	36,000
• Major operation	60,000	50,000	40,000	26,000	21,000	18,000
• Intermediate operation	30,000	25,000	20,000	11,700	9,450	8,100
• Minor operation	12,000	10,000	8,000	5,200	4,200	3,600
4. Anaesthetist's fee Per disability per year						
• Complex operation	27,000	22,500	18,000	15,600	12,600	10,800
• Major operation	18,000	15,000	12,000	7,800	6,300	5,400
• Intermediate operation	9,000	7,500	6,000	3,510	2,835	2,430
• Minor operation	3,600	3,000	2,400	1,560	1,260	1,080
5. Operating theatre charges Per disability per year						
• Complex operation	27,000	22,500	18,000	15,600	12,600	10,800
• Major operation	18,000	15,000	12,000	7,800	6,300	5,400
• Intermediate operation	9,000	7,500	6,000	3,510	2,835	2,430
• Minor operation	3,600	3,000	2,400	1,560	1,260	1,080
6. Home nursing Limit per day Maximum 100 days per disability per year	1,250	850	500	300	250	200
7. Physician's fee Limit per day Maximum 100 days per disability per year	2,600	1,800	1,000	800	600	450

Hospitalisation benefits (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Room type	Private	Semi-private		Ward		
8. Specialist's fee Per disability per year	12,500	12,500	7,500	7,500	4,000	4,000
9. Intensive care Per disability per year	12,500	12,500	7,500	7,500	4,000	4,000
10. Post-hospitalisation benefit Per disability per year	3,000	2,500	2,000	1,500	1,250	1,000
11. Government hospital cash⁽ⁱ⁾ Limit per day Maximum 90 days per disability per year	850	850	650	650	350	350
12. Organ transplant⁽ⁱⁱ⁾ Maximum limit per year	100,000			50,000		
13. Increased hospitalisation benefits for overseas treatments for accident-related injuries⁽ⁱⁱⁱ⁾	Benefits payable under benefits 1 to 9 shall be up to 200% of the respective maximums and limits					
14. Compassionate death benefit (Applicable to insured Eligible Employee only)	10,000					

Notes

- (i) This benefit shall be paid each day when upon a doctor's recommendation the insured person is registered as an inpatient in a ward bed only in a government hospital for the treatment of a covered disability and charges are incurred therefor. This benefit shall in no event be paid in addition to any other benefits payable under the policy for any one covered disability.
- (ii) If the insured person incurs charges for room and board, intensive care, hospital charges, surgeon's fee, anaesthetist's fee, operating theatre charges, physician's fee and specialist's fee as a result of operations for heart, kidney, liver or bone marrow transplantation during hospital confinement, HSBC Life shall reimburse an amount equal to the reasonable and customary charges actually incurred for such transplantations. Charges for such transplantations so incurred and payable under this benefit shall not be payable under any other benefit provisions of the policy.
- (iii) These benefits will be paid due to accident while the insured person is travelling outside his/her country/region or place of residence. These benefits shall not be payable for any medical expenses incurred as a result of hospitalisation within mainland China, Hong Kong Special Administrative Region (SAR), Macau Special Administrative Region (SAR) and the insured person's country/region or place of residence.

Benefit schedule

The following supplementary benefits are optional:

(A) Outpatient benefits (HKD)

The following options are available for selection:

Measures	Options	Standard	Enhanced					
Reimbursement/ reimbursement percentage (as the case may be)	Non-network	Reimbursement percentage is 80%, subject to below maximum limit per visit/year	Reimbursement percentage is 100%, subject to below maximum limit per visit/year					
	Network	Full coverage subject to co-payment of specified benefits or maximum limit per year						
Scope of coverage	Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6	
Basic/ Comprehensive	1. General medical practitioner consultation (including Western medicine) 1 visit per day and up to 30 visits per year							
	Non-network maximum limit per visit (after taking into account reimbursement percentage)		350	250	220	180	150	130
	Network	Maximum limit per visit	Full cover ^(iv) (basic Western medicine, up to 3 days per visit; extra costs should be paid by insured person)					
		Co-payment	Nil			Standard 30 60 80 Enhanced 10 40 60		
Basic/ Comprehensive	2. Specialist consultation^(v) 1 visit per day and up to 10 visits per year							
	Non-network maximum limit per visit (after taking into account reimbursement percentage)		700	500	440	360	300	260
	Network	Maximum limit per visit	Full cover ^(iv) (basic Western medicine, up to 3-5 days per visit; extra costs should be paid by insured person)					
		Co-payment	Nil			Standard 100 160 200 Enhanced 80 140 180		
Basic/ Comprehensive	3. X-ray and laboratory tests^(vi) Maximum limit per year							
			5,000	4,000	3,000	2,000	1,500	1,000

The following supplementary benefits are optional:

(A) Outpatient benefits (HKD)

The following options are available for selection:

Scope of coverage	Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6		
Comprehensive	4. Prescription benefit^(vi) (prescribed medicines from licensed pharmacy, other than doctor's clinic or under pharmacy services in hospital)								
	Maximum limit per year	3,000	2,500	2,000	1,500	1,250	1,000		
Comprehensive	5. Chinese medicine practitioner benefit (including treatment by Chinese herbalist, bonesetter and acupuncturist) 1 visit per day and up to 10 visits per year								
	Non-network maximum limit per visit (after taking into account reimbursement percentage)	350	300	250	200	150	100		
	Network	Maximum limit per visit	Full cover ^(iv) (basic herbal medicine, up to 2 packs per visit; extra costs should be paid by insured person)					Standard	
		Co-payment	Nil					70	120
								Enhanced	
							50	100	
Comprehensive	6. Physiotherapist and chiropractor practitioner benefit^(vi) 1 visit per day and up to 10 visits per year								
	Non-network maximum limit per visit (after taking into account reimbursement percentage)	700	600	500	400	300	200		
	Network	Maximum limit per visit	Full cover ^(iv) (basic physiotherapy treatment, one session per visit; extra costs should be paid by insured person)					Standard	
		Co-payment	Nil					100	
							Enhanced		
							80		

Notes

- (iv) Credit facility can be obtained by presenting the HSBC Life Benefits+ medical card when visiting network service providers, subject to indemnification by the insured person. If the insured person uses the credit facility obtained through the HSBC Life Benefits+ medical card at a network service provider, co-payment may still be required. The insured person shall reimburse HSBC Life for charges incurred from the use of credit facility that exceeds the reimbursement percentage and/or maximum limit(s) of the relevant benefits.
- (v) Recommendation or referral by a doctor is required except for the following specialties: Dermatology, Ophthalmology, ENT (Otorhinolaryngology), Pediatrics, Orthopedics and Traumatology, Gynecology and medical or clinical Oncology.
- (vi) Recommendation or referral by a doctor is required.

Benefit schedule

(B) Additional kidney and cancer benefits (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Reimbursement percentage			100%			
1. Outpatient kidney dialysis (per year)			30,000			
2. Outpatient cancer treatment (per year)			75,000			

(C) Supplementary major medical benefits^(vii) (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Room type	Private	Semi-private		Ward		
Reimbursement percentage				80%		
Limit per disability per year	200,000	150,000	120,000	90,000	60,000	30,000

Adjustment factor

If the insured person is confined in a room higher than his entitled room type, HSBC Life shall reduce the benefit payable by applying the adjustment factor as set out below:

Entitled room type	Actual room type	Adjustment factor
Ward	Semi-private room	50%
Ward	Private room	25%
Semi-private room	Private room	50%
Ward, semi-private room or private room	Any room type above private room	0%

Notes

(vii) The insured person shall stay in a room not exceeding the entitled room type throughout the period of hospital confinement. If the insured person is confined in a room higher than his entitled room type, HSBC Life shall reduce the benefits payable by applying the adjustment factor. This supplementary major medical benefits shall not include charges that are incurred for the same purposes as those benefits covered under outpatient kidney dialysis, outpatient cancer treatment and organ transplant. Supplementary major medical benefits are not payable in respect of hospital charges payable under the government hospital cash and maternity charges.

(D) Dental benefits (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Reimbursement percentage	80%					
Overall maximum limit per year for the following aggregated benefits	3,200		2,200			
1. Accidental denture treatment	1,000		800			
2. Extraction & filling	1,200		800			
3. Dental x-ray	800		500			
4. Oral examination/cleansing Limit per visit Maximum 2 visits per year	400		300			

(E) Maternity benefits^(viii) (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Reimbursement percentage	100%					
1. Normal delivery - Hospital confinement (per pregnancy)	24,000	20,000	15,000	12,000	10,000	8,000
2. Normal delivery - Home confinement (per pregnancy)	18,000	15,000	10,000	7,200	6,250	5,500
3. Caesarian delivery - Hospital confinement (per pregnancy)	42,000	35,000	25,000	20,000	15,000	12,000
4. Miscarriage (per pregnancy)	24,000	20,000	15,000	12,000	10,000	8,000
5. Alternative - Government hospital cash ^(ix) Limit per day Maximum 10 days per confinement	650	600	550	500	450	400

Notes

(viii) No maternity benefits shall be payable within the first nine months from the effective date after the insured person joins the Plan. Supplementary major medical benefits are not payable for maternity charges which exceed the above limits.

(ix) This benefit shall only be paid each day when upon a doctor's recommendation the insured person is registered as an inpatient in a ward bed only of a government hospital for maternity and charges are incurred therefor. This benefit shall in no event be paid in addition to any other maternity benefits payable under the policy for any one covered pregnancy.

Benefit schedule

(F) Personal accident benefits (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Principal sum insured per employee/ spouse or domestic partner	250,000	200,000	170,000	145,000	120,000	100,000
Principal sum insured per child	25,000	20,000	17,000	14,500	12,000	10,000
1. Death			100%			
2. Permanent total disablement			100%			
3. Permanent and incurable paralysis of all limbs			100%			
4. Permanent total loss of sight in both eyes			100%			
5. Permanent total loss of sight in one eye			100%			
6. Loss of or permanent total loss of use of two limbs			100%			
7. Loss of or permanent total loss of use of one limb			100%			
8. Permanent total loss of speech and hearing in both ears			100%			
9. Permanent and incurable insanity			100%			
10. Permanent total loss of hearing in: a) both ears b) one ear			75% 15%			
11. Permanent total loss of speech			50%			
12. Permanent total loss of the lens of one eye			50%			

(F) Personal accident benefits (HKD)

Plan	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
13. Loss of or permanent total loss of use of the four fingers and thumb of:						
a) right hand			70%			
b) left hand			50%			
14. Loss of or permanent total loss of use of four fingers of:						
a) right hand			40%			
b) left hand			30%			
15. Loss of or permanent total loss of use of one thumb:						
a) both right joints			30%			
b) one right joint			15%			
c) both left joints			20%			
d) one left joint			10%			
16. Loss of or permanent total loss of use of fingers:						
a) three right joints			10%			
b) two right joints			7.5%			
c) one right joint			5%			
d) three left joints			7.5%			
e) two left joints			5%			
f) one left joint			2%			
17. Loss of or permanent total loss of use of toes:						
a) all (one foot)			15%			
b) great (both joints)			5%			
c) great (one joint)			3%			
18. Leg or patella fractures with established non-union			10%			
19. Shortening of leg by at least 5cm			7.5%			

Remark:

The above mentioned benefits are those provided by the packaged plan of HSBC Life Benefits+ Medical Insurance Plan, subject to relevant terms and conditions.

For other permanent disablements not specified under events 5 to 19, HSBC Life (International) Limited shall have absolute discretion to determine the percentage for such disablement and such determination shall be final and binding.

Worldwide Emergency Assistance Service^(x)

The Plan's emergency evacuation coverage ensures peace of mind whenever the insured person travels to anywhere in the world. The services provided include:

24/7 hotline	24-hour hotline providing access to a worldwide network of multilingual doctors, operations staff and medical escort crews, 365 days a year.
Medical advice and referral	Call the hotline any time for advice and assistance from a doctor at the emergency assistance centre.
Medical evacuation	If the insured person is seriously ill or injured overseas where medical facilities are inadequate, the emergency assistance centre will arrange to transport the insured person to the nearest hospital for treatment.
Hospital admission deposit guarantee	Up to USD5,000
Compassionate visit	A round-trip air ticket for a friend or relative to visit the insured person, if the insured person is hospitalised overseas for more than 7 consecutive days while travelling alone.
Repatriation of mortal remains	The emergency assistance centre will arrange the transfer home of the insured person's mortal remains.

Notes

- (x) These services are provided by the packaged plan of HSBC Life Benefits+ Medical Insurance Plan through a third-party service provider which is an independent contractor and is not an agent of HSBC Life or HSBC. HSBC Life and HSBC shall make no representation, warranty or undertaking as to the availability of the services and shall not be liable to the insured or the insured person in any respect of any loss, damage, expense, suit action or proceeding suffered or incurred by the insured person, whether directly or indirectly, arising from or in connection with the services provided or advice given by the third party service provider or its agents, or the availability of such services. HSBC Life reserves the right to amend the terms and conditions thereof from time to time without prior notice.

Guidelines on member eligibility and enrolment

Participation guidelines	<ul style="list-style-type: none">• Applicable to registered companies in Hong Kong with at least 2 full-time employees who are actively-at-work².• For optional dental benefits, the minimum group size is 10 employees.• For optional maternity benefits, the minimum group size is 15 female insured persons, including employees, spouses or domestic partners³.• Eligible employees and their dependants (if any) must be enrolled for the hospitalisation benefits in the same group.• You may set a maximum of 2 groups for a company with 4 to 9 full-time employees; or a maximum of 3 groups for a company with 10 full-time employees or above.• Overseas full-time employees⁴ must be no more than 30% of the total full-time employees.• Application is subject to our relevant requirements on the policyholder's and/or the insured person's nationality (country/region) and/or addresses and/or residency as determined by us from time to time⁵.
Issue age⁶	<p>Full-time employees:</p> <ul style="list-style-type: none">• age 18 to 64 <p>Dependants:</p> <ul style="list-style-type: none">• age 18 to 64 for an employee's spouse or domestic partner³• 15 days old to age 18 for employees' unmarried child(ren) or over age 18 and below age 23 if they are full-time students. <p>For existing members only, upon policy renewal:</p> <ul style="list-style-type: none">• up to age 69, subject to one-off submission of Health Declaration Form at age 65
Optional benefits	<ul style="list-style-type: none">• If optional benefits are chosen for a specific group of employees, all employees and their dependants (if applicable) within that group must be enrolled for those benefits.• Benefit level(s) of additional kidney and cancer benefits and/or supplementary major medical benefits must be at the same benefit level as the hospitalisation benefits for each group.• If maternity benefits are chosen, all female employees and female spouses or female domestic partners³ must be enrolled.
Underwriting requirements	<ul style="list-style-type: none">• For groups of less than 6 employees, each employee is required to submit a completed Health Declaration Form.
General guidelines	<ul style="list-style-type: none">• Premiums must be paid by policyholder only.• HSBC Life (International) Limited shall have the right to accept or reject any application.• The Plan is an annual group life policy issued by HSBC Life (International) Limited.

The above Guidelines are applicable to the packaged plan of HSBC Life Benefits+ Medical Insurance Plan.

Key risks and exclusions

Credit and insolvency risks	HSBC Life Benefits+ Medical Insurance Plan is a group medical insurance policy issued by us. You are subject to our credit risk because all your premiums paid become part of our assets. You do not own or have any rights to any of our assets. You can only claim against us under all circumstances.
Risk from delaying or missing premium payments	Delayed or missed payments may lead to a discontinuation of your policy . As a result, you will not be able to recover the premiums you have paid.
Inflation risk	You must take into account the risk of inflation, which will likely cause the future cost of living to rise . With inflation in place, you should expect that you or your assigned beneficiary(ies) will receive an amount that is less in real terms in the future , even if we have done our best to serve your policy.
Key exclusions	<p>Below is a summary of the key general exclusions only; it is not intended to be complete and exhaustive. For details and the full list of exclusions, please refer to the policy contract:</p> <ul style="list-style-type: none">• Pre-existing conditions⁷ until the insured person has been continuously insured under HSBC Life Benefits+ Medical Insurance Plan for at least 12 consecutive months;• Congenital conditions;• Cosmetic or plastic surgery, dental oral or oro-surgical care and treatment of any kind (save and except where provided in an operating theatre of a hospital under general anaesthetic), eye refraction, eye tests or fitting of glasses. Surgical, mechanical or chemical contraceptive methods of birth control or treatment pertaining to infertility or in-vitro fertilisation, or sterilisation of either sex;• The costs of blood and blood plasma except where specifically provided and included for coverage in the policy schedule;• Any and all complications arising from pregnancy, childbirth (including surgical delivery), miscarriage, abortion and pre-natal or post-natal care except where specifically provided and included for coverage in the policy schedule;• Procurement or use of special braces, appliances, hearing aids, wheelchairs, crutches or any other similar equipment;• Treatment directly or indirectly arising from any insanity, geriatric, psycho-geriatric or psychiatric condition including but not limited to psychoses, neuroses, depression of any kind, anxiety, anorexia nervosa, bulimia, schizophrenia and other behavioural disorders;• Expenses directly or indirectly arising from any Human Immunodeficiency Virus (HIV) related disability, including Acquired Immune Deficiency Syndrome (AIDS) and/or any mutations, derivations or variations thereof, which proceeds from a HIV infection occurring prior to the effective dates of coverage. For the purposes of this exclusion, a HIV-related disability emerging within 5 years of the effective date will be conclusively presumed to have proceeded from a HIV infection occurring prior to the effective date, in the absence of clear and convincing evidence to the contrary;

**Key exclusions
(continued)**

- Injury, illness, sickness or disease directly or indirectly resulting from or consequent upon:
 - (a) drug addiction, alcoholism, venereal diseases or wilful misuse of drugs or alcohol, attempted suicide or intentional self-inflicted injury or participating in an illegal activity.
 - (b) high risk occupations or activities including but not limited to participation in:
 - (i) naval, military or air force service or operations;
 - (ii) aviation other than as a fare-paying passenger in an aircraft provided and operated by an airline or air charter company which is duly licensed for the regular transportation of fare-paying passengers;
 - (iii) aqualung diving; bungee jumping; mountaineering; hang gliding; motor cycling; parachuting; parasailing; pot-holing; daring feats or stunts; racing other than on foot; skiing, tobogganing, sledding and ice skating, including ice hockey and any other sports requiring snow or ice to be played or work activities involving dangerous or contaminable substances;
 - (iv) sport activity in a professional capacity or where the insured person would or could earn income or remuneration from engaging in such sport; and
 - (v) activities carried out as a member of airline personnel, aircrews and ship crews.
 - (c) war or any act of war, declared or undeclared, invasion, act of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
- Hospitalisation primarily for diagnosis scanning, x-ray examinations or physical therapy;
- Routine or general check-ups, investigations not incidental to treatment or diagnosis of a covered disability, inoculation, medication or vaccination for immunisation or quarantine purposes;
- Any expenses which are a direct or indirect result of nuclear reaction or radiation.

The above Key risks and exclusions are applicable to the packaged plan of HSBC Life Benefits+ Medical Insurance Plan.

Important notes

Disclosure obligation for underwriting	You are required to declare all requisite information that would affect the underwriting decisions of the Company. The Company has the right to declare the policy void due to any misrepresentation or fraud. If the non-health related information regarding the insured person (including but not limited to age or gender) is misstated in the application, the Company may adjust the premium, for the past, current or future policy year based on the correct information, or declare the policy void.
Non-payment of premium	For policy renewals only, we will give you a 31-day grace period (“Grace Period”) for making premium payments. If the premium is not paid by the end of the Grace Period, this policy will terminate immediately with effect from the due date of the first unpaid premium.
Policy cancellation	You may cancel the policy before its expiry by notifying HSBC Life of the same by a registered letter addressed to HSBC Life’s principal office and provided that no claims in respect of the insured person have been paid or are payable under the policy, you shall be entitled to a refund of premium less the amount due to HSBC Life.
Premium adjustment	Premium rates are not guaranteed and the terms and conditions applicable to the policy upon renewal may also be changed. HSBC Life reserves the right to (a) review and adjust the premium rates; and (b) revise the benefits and the terms and conditions applicable to the policy on each policy anniversary. The premium rates may be adjusted based on factors including but not limited to medical trends and HSBC Life’s claims experience. Premiums and levies are payable annually in advance for a coverage period of 12 consecutive months.
Tax reporting and financial crime	<p>You are required to provide us with information that we may occasionally request from you regarding you and your policy so that we can comply with certain obligations to legal or regulatory bodies, government or tax authorities in Hong Kong and overseas. If you fail to provide us with such requested information, or if you place or expose us or any of the HSBC Group members at financial crime risk, we may:</p> <ul style="list-style-type: none">• take necessary actions so that we or our members can meet our/their obligations;• be unable to provide new, or continue to provide all services to you;• be required to withhold payments or benefits that would otherwise be due to you or your policy and pay them to tax authorities; and/or• terminate your policy. <p>In the event that your policy is terminated by us as a result of the above reasons, the amount you will receive may be less than what you have paid.</p>
Applicable laws	The laws governing your policy are the laws of Bermuda. However, in the event of any dispute arising in the Hong Kong SAR, the non-exclusive jurisdiction of the Hong Kong SAR courts will apply.
Reasonable and customary charges	<p>“Reasonable and customary charges” shall mean charges for hospital confinement, treatment, procedure, supplies or other medical services which are medically necessary but do not exceed the general level of charges at the location for such hospital confinement, treatment, procedure, supplies or other medical services for a similar injury, sickness, disease or illness.</p> <p>The Company will base the calculation of reasonable and customary charges on a combination of the following (if applicable):</p> <ul style="list-style-type: none">(a) the gazette issued by the government of Hong Kong SAR which sets out the fees for the private patient services in government hospitals;(b) statistical information provided by local health authoritative body and information collected from medical specialists and surgeons practicing in the country/region or area where the treatment is received;(c) industrial medical fee survey;(d) Company’s internal claim statistics and/or global experience; and(e) the extent or level of benefit insured. <p>Please refer to the relevant insurance proposal and Policy Provisions for details.</p>

Medically necessary

“Medically necessary”, in respect of any hospital confinement, treatment, procedure, supplies or other medical services, shall mean such hospital confinement, treatment, procedure, supplies or other medical services which:

- (a) are required for the diagnosis or direct treatment of the disability of insured person;
 - (b) are appropriate and consistent with the symptoms and findings or diagnosis and direct treatment of the disability of the insured person;
 - (c) are in accordance with generally accepted medical practice;
 - (d) are not associated with treatment, procedure, supplies or other medical services of an experimental or investigative nature unless it is in the surgical table; and
 - (e) cannot have been omitted without adversely affecting the medical condition of the insured person;
- and the expression “medically necessarily” shall be construed accordingly.

Please refer to the relevant insurance proposal and Policy Provisions for details.

The above Important notes are applicable to the packaged plan of HSBC Life Benefits+ Medical Insurance Plan.

Endnotes

1. The benefits provided are strictly subject to the agreement between HSBC Life (International) Limited and the designated service provider.
2. Any request for waiver of actively-at-work declaration shall be considered on a case by case basis, where additional premium will be required.
3. “Domestic partner” is defined as two adults who reside together and have chosen to share their lives in an intimate and committed relationship. Domestic partners do not include roommates, siblings, parents and children, or persons having other similar relationships.
4. “Overseas full-time employee” means a full-time employee with a residential address outside of Hong Kong.
5. If you wish to know more about HSBC’s financial crime risk policies, please refer to HSBC Group website at www.hsbc.com/our-approach/risk-and-responsibility/financial-crime-risk/financial-crime-risk-policies.
6. “Age” refers to the age of the insured person where applicable at his/her last birthday.
7. “Pre-existing Conditions” shall mean any medical condition, physical or health impairment or disability, irrespective of whether any treatment, consultation or advice was sought, in respect of which signs or symptoms have shown or existed during the 90 days preceding the effective date for the insured person. If, however, during any consecutive 3 months period after such date, the insured person does not undergo any consultation or treatment in respect of such pre-existing conditions, then benefits will subsequently be payable, subject to the terms of this Policy, in respect of such conditions.

More information

Making your employees feel valued and cared for is the best way to motivate them. Let us review your current and future needs to help you decide if HSBC Life Benefits+ Medical Insurance Plan is the right product to help you fulfil your business goals. If you are interested in the packaged plan or tailor-made plan of HSBC Life Benefits+ Medical Insurance Plan, please contact your Relationship Manager, Insurance Sales Manager or visit HSBC Business Centre.

Click www.business.hsbc.com.hk

Visit any HSBC Business Centre

HSBC Life Benefits+ Medical Insurance Plan

HSBC Life (International) Limited

HSBC Life (International) Limited (“the Company”, “HSBC Life”, “we” or “us”) is incorporated in Bermuda with limited liability, and is one of the HSBC Group’s insurance underwriting subsidiaries.

Hong Kong SAR office

18/F, Tower 1, HSBC Centre, 1 Sham Mong Road, Kowloon, Hong Kong

The Company is authorised and regulated by the Insurance Authority (IA) to carry on long-term insurance business in the Hong Kong SAR.

The Hongkong and Shanghai Banking Corporation Limited (“HSBC”) is registered in accordance with the Insurance Ordinance (Cap. 41 of the Laws of Hong Kong) as an insurance agency of the Company for the distribution of life insurance products in the Hong Kong SAR. HSBC Life Benefits+ Medical Insurance Plan is a product of the Company but not HSBC, underwritten by the Company and it is only intended for sale through HSBC in the Hong Kong SAR.

HSBC Life reserves the final right to approve any application. This brochure contains general information only and does not constitute any contract between any parties and HSBC Life. This brochure is not a policy.

In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between HSBC and the HSBC Commercial Banking Customer out of the selling process or processing of the related transaction, HSBC is required to enter into a Financial Dispute Resolution Scheme process with the HSBC Commercial Banking Customer; however, any dispute over the contractual terms of the above insurance product should be resolved between the Company and the HSBC Commercial Banking Customer directly.

The Company accepts full responsibility for the accuracy of the information contained in the Product Brochure and confirms, having made all reasonable enquiries that would make any statement misleading. The information shown therein is intended as a general summary. Please refer to your insurance policy for the detailed terms and conditions.

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HSBC Life (International) Limited is the proud winner of the following awards:



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