

Benefit Schedule

Manulife Supreme VHIS Flexi Plan

Plan Level	Smart Plan	Advance Plan
Territorial scope of cover		
<ul style="list-style-type: none">Non-emergency treatment	Asia, including Australia and New Zealand (see note 3)* Cash benefit for confinement in general ward of a private hospital (applicable to Advance Plan only) and psychiatric treatments are limited to Hong Kong and Macau only	
<ul style="list-style-type: none">Emergency treatment	Worldwide	
Designated ward class		
<ul style="list-style-type: none">For Hong Kong, Australia and New Zealand	General ward ⁽¹⁾	Semi-private room ⁽¹⁾
<ul style="list-style-type: none">For mainland China (designated hospitals)*, Macau and the rest of Asia (except Hong Kong, Australia and New Zealand)	Semi-private room ⁽¹⁾	Standard private room ⁽¹⁾
<ul style="list-style-type: none">For outside Asia (Emergency treatment only)*	Semi-private room ⁽¹⁾	Standard private room ⁽¹⁾
Annual benefit limit for benefit items		
I. Basic benefits (a) – (l), II. Other benefits (i) – (ii) and III. Enhanced benefits (i) – (xiv)	HK\$5,000,000 per policy year	HK\$12,000,000 per policy year
Lifetime benefit limit for benefit items		
I. Basic benefits (a) – (l), II. Other benefits (i) – (ii) and III. Enhanced benefits (i) – (xiv)	HK\$20,000,000	HK\$60,000,000
Annual deductible options for benefit items		
I. Basic benefits (a) – (l) and III. Enhanced benefits (i) – (xiv)	HK\$0 / HK\$22,800 / HK\$45,000 / HK\$100,000	HK\$0 / HK\$8,000 / HK\$22,800 / HK\$45,000 / HK\$100,000

Benefit items ^{(2) (3)}	Benefit limit
I. Basic benefits	
(a) Room and board	Full cover ⁽¹¹⁾
(b) Miscellaneous charges	Full cover ^{(11) (12)}
(c) Attending doctor’s visit fee	Full cover ⁽¹¹⁾
(d) Specialist’s fee ⁽⁴⁾	Full cover ⁽¹¹⁾
(e) Intensive care	Full cover ⁽¹¹⁾
(f) Surgeon’s fee	Full cover ⁽¹¹⁾ regardless of the surgical category
(g) Anaesthetist’s fee	Full cover ⁽¹¹⁾
(h) Operating theatre charges	Full cover ⁽¹¹⁾
(i) Prescribed diagnostic imaging tests ^{(4) (6)}	Full cover ⁽¹¹⁾ Coinsurance: 0%
(j) Prescribed non-surgical cancer treatments ⁽⁷⁾	Full cover ⁽¹¹⁾

Plan Level	Smart Plan	Advance Plan
Benefit items ^{(2) (3)}	Benefit limit	
(k) Pre- and post-confinement/day case procedure outpatient care ⁽⁴⁾	Full cover ⁽¹¹⁾ for the following specified visits, except chiropractic treatment, physiotherapy, occupational therapy or speech therapy: <ul style="list-style-type: none">All prior outpatient visits or emergency consultations (within 30 days before each confinement or day case procedure)1 prior outpatient visit or emergency consultation (more than 30 days before each confinement or day case procedure)All follow-up outpatient visits per confinement or day case procedure (within 90 days after discharge from hospital or completion of day case procedure) Full cover ⁽¹¹⁾ for chiropractic treatment, physiotherapy, occupational therapy or speech therapy: <ul style="list-style-type: none">Maximum 3 follow-up outpatient visits in total per confinement/day case procedure (within 90 days after discharge from hospital or completion of day case procedure)	
(l) Psychiatric treatments	Full cover ⁽¹¹⁾	

II. Other benefits

(i) Cash benefit for designated day case procedures ⁽⁵⁾	HK\$1,000 per day	
(ii) Cash benefit for confinement in general ward of a private hospital ^{(8) (9)} (applicable to Advance Plan only)	N/A	HK\$1,000 per continuous 24 hours period
(iii) Compassionate death benefit	HK\$80,000	
(iv) Accidental death benefit	HK\$80,000	

III. Enhanced benefits

(i) Medical implants ⁽⁵⁾	Specified items ⁽¹³⁾ : HK\$800,000 per policy year Other items ⁽¹³⁾ : HK\$200,000 per policy year	
(ii) Private nurse's fee ⁽⁴⁾	Full cover ⁽¹¹⁾ (Maximum 30 days per policy year, 2 visits per day)	
(iii) Hospital companion bed ⁽¹⁰⁾	Full cover ⁽¹¹⁾	
(iv) Outpatient kidney dialysis ⁽⁴⁾	Full cover ⁽¹¹⁾	
(v) Post-confinement home nursing ⁽⁴⁾	Full cover ⁽¹¹⁾ (Maximum 30 days per policy year, 2 visits per day (within 120 days after discharge from hospital following a surgical procedure or admission to intensive care unit))	
(vi) Additional post-confinement/day case procedure outpatient ancillary benefit ⁽⁴⁾	HK\$1,000 per visit (Maximum 30 outpatient visits per policy year, 1 visit per day (within 90 days after discharge from hospital or completion of day case procedure))	
(vii) Post-surgical procedure/day case procedure Chinese medicine practitioner outpatient care	HK\$600 per visit (Maximum 20 outpatient visits per policy year, 1 visit per day (within 90 days after discharge from hospital following a surgical procedure or completion of day case procedure))	
(viii) Reconstructive surgery for specific cancer ⁽⁴⁾	HK\$200,000 per specific cancer surgery	
(ix) Rehabilitation ⁽⁴⁾	HK\$50,000 per policy year	
(x) Expenses for living donor surgery	HK\$640,000 per living donor surgery	
(xi) Hospice care ⁽⁴⁾	HK\$80,000 per policy year	
(xii) Pregnancy complications ^{(4) (14)}	Full cover ⁽¹¹⁾	
(xiii) Emergency outpatient care	Full cover ⁽¹¹⁾	
(xiv) Emergency dental care	Full cover ⁽¹¹⁾	

* For non-emergency treatment received outside Asia and/or for non-designated hospitals in mainland China, the benefits shall be payable in accordance with the VHIS Standard Plan Terms and Benefits. Please refer to the 'Limitations of benefits' section below for details.

Benefit Schedule (Cont'd)

Remarks (In respect of the Benefit Schedule)

- (1) General ward shall mean a hospital room with more than two patient beds (not including any companion bed).
- Semi-private room shall mean a hospital room with not more than two patient beds (not including any companion bed) and a bath/shower room for sharing.
- Standard private room shall mean a hospital room for the insured person's private use with its own private facilities including a bedroom and bath/shower room(s) only, but excluding a room of any higher ward class with its own kitchen, dining or sitting room(s) or otherwise.
- Hospitals offer various accommodation options with different facilities, and the categorisation used by the hospitals may be different from the definitions above. If you are unsure of whether a particular accommodation option meets the general ward, semi-private room and standard private room definitions under these policy provisions, please contact us before confinement.**
- (2) Unless otherwise specified, eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
- (3) Eligible expenses and/or expenses incurred shall also be subject to the limitations as specified in the 'Supplement for Limitations of Benefits' and the 'Supplement for Benefit Calculations' of the policy provisions.
- (4) 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.
- (5) Provided that surgeon's fee under item (f) of basic benefits is payable.
- (6) 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.
- (7) Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- (8) Only applicable for the confinement in a general ward of a Hong Kong and Macau private hospital.
- (9) Provided that room and board under item (a) of basic benefits is payable.
- (10) Provided that room and board or intensive care under items (a) or (e) of basic benefits respectively is payable.
- (11) Full cover shall mean no itemised benefit sublimit, and the benefit payable shall be subject to the deductible (if applicable), annual benefit limit and lifetime benefit limit.
- (12) Save and except for the benefit items listed under the 'Medical implants' section in the 'Supplement for Enhanced Benefits' of the policy provisions.
- (13) For details, please refer to the 'Medical implants' section in the 'Supplement for Enhanced Benefits' of the policy provisions.
- (14) This benefit is payable for designated eligible expenses provided that the date of first diagnosis of the covered pregnancy complications must be at least 12 months after the policy effective date. Please refer to the policy provisions for details of covered pregnancy complications and the covered eligible expenses.

