

Credit Agricole Group

Benefit Summary for Plan 1 - Associate and below

Policy Year: 1st February 2021 - 31st January 2022

Plan 001 計劃 001	In-Network 網絡	Out-of-Network 非網絡
HOSPITALIZATION BENEFITS 住院福利	100% per disability per year up to 全數支付，每病症每保單年度最高	
Accommodation Level 住房級別	Semi-Private 半私家病房	
Inpatient Facilities Services 住院設施服務 <ul style="list-style-type: none"> Room and Board 膳宿費 Intensive Care Unit 深切治療病房費⁶ Operating Room 手術室費 <ul style="list-style-type: none"> Complex 複雜手術 \$31,800 Major 大型手術 \$12,600 Intermediate 中型手術 \$6,300 Minor 小型手術 \$3,150 Other Hospital Services 醫院雜費 \$33,600 	\$1,440 per day (Max. 180 days) 每日\$1,440 (最高 180 日) \$2,880 per day (Max. 7 days) 每日\$2,880 (最高 7 日)	
Inpatient Physician Services 住院醫生服務 <ul style="list-style-type: none"> Surgeon's Fee 醫生手術費 <ul style="list-style-type: none"> Complex 複雜手術 \$84,000 Major 大型手術 \$42,000 Intermediate 中型手術 \$21,000 Minor 小型手術 \$10,500 Anesthetist's fee 麻醉師費 <ul style="list-style-type: none"> Complex 複雜手術 \$31,800 Major 大型手術 \$12,600 Intermediate 中型手術 \$6,300 Minor 小型手術 \$3,150 Physician Consultation 醫生診症費 Specialist Consultation 專科醫生診症費⁵ \$3,600 	\$1,440 per day (Max. 180 days) 每日\$1,440 (最高 180 日) \$3,600	
Emergency Accident 緊急意外	N/A 不適用	\$1,260 per disability per year limit 每病症每保單年度最高\$1,260
Post-Hospitalization Out-Patient 住院後的門診	N/A 不適用	\$2,100 per disability per year limit 每病症每保單年度最高\$2,100
Second claim incentive 第二索償獎賞 ¹¹	N/A 不適用	\$720 per day (Max. 180 days) 每日\$720 (最高 180 日)
Designated clinical surgery incentive 指定門診手術之福利獎賞 ¹²	N/A 不適用	\$720 per disability per year limit 每病症每保單年度最高\$720
Home Nursing 家居護理 ⁵ per disability per year limit 每病症每保單年度	N/A 不適用	\$720 per day (Max. 180 days) 每日\$720 (最高 180 日)
Home Health Care 家居康護	N/A 不適用	\$36,000 per disability per year limit 每病症每保單年度最高\$36,000
HA Hospitals Reimbursement (General Ward) 醫管局住院保障（普通病房） <ul style="list-style-type: none"> Daily Cash 每日現金保障⁶ Surgical supplies 手術醫療用品賠償⁷ per disability per year limit 每病症每保單年度 	N/A 不適用 N/A 不適用	\$720 per day (Max. 180 days) 每日\$720 (最高 180 日) \$33,600
Overall Maximum Amount Per Disability Per Year 每病症每保單年度總限額	\$840,960	
Supplementary Major Medical 附加住院醫療福利 ⁸	80% per disability per year up to \$100,000 after \$500 deductible 扣除自付費\$500 後，餘額八成賠償，每病症每保單年度最高限額\$100,000	
Increased Overseas Hospitalization Benefit (Overseas exclude China, Hong Kong S.A.R., Macau S.A.R. and country of residence, due to accidental cause hospitalization only) 額外海外住院保障（海外不包括中國、香港、澳門及其居住地，只限於意外住院索償）	N/A 不適用	Up to 200% of Basic Hospitalization Benefits 最高賠償相等於基本住院福利之 200%

OUT-PATIENT BENEFITS 門診福利 ¹⁰	In-Network 網絡	Out-of-Network 非網絡 100% 全數支付
General Physician Services – Clinic (GP) 普通科醫生服務 - 診所 ² Max. 1 visit per day 每日一次 (Max. 40 visits per Policy Year 每保單年度限於 40 次)	\$0 co-pay 自付\$0	\$400 per visit 每次診症最高\$400
Physiotherapy (PHY) 物理治療 ^{2, 5} Chiropractor (CHIRO) 脊醫 ^{2, 5} Max. 1 visit per day 每日一次 (Max. 10 visits per Policy Year 每保單年度限於 10 次)	\$0 co-pay 自付\$0 N/A 不適用	\$360 per visit 每次診症最高\$360 \$360 per visit 每次診症最高\$360
Chinese Herbalist & Bonesetter & Acupuncturists (CH & BONE & ACUP) 中醫及跌打及針灸 ² Max. 1 visit per day 每日一次 (Max. 15 visits per Policy Year 每保單年度限於 15 次)	\$0 co-pay 自付\$0 Chinese herbalist only (只限於中醫)	\$240 per visit 每次診症最高\$240
Overall maximum number of visits per Policy Year for GP, PHY & CHIRO, CH & BONE & ACUP 每保單年度 - 普通科醫生服務(診所), 物理治療及脊醫, 中醫及跌打及針灸 - 最多賠償次數	40 visits 40 次	
Specialist Physician Services 專科醫生服務 ¹ Max. 1 visit per day 每日一次 (Max. 15 visits per Policy Year 每保單年度限於 15 次)	\$0 co-pay 自付\$0	\$550 per visit 每次診症最高\$550
Overall maximum number of visits per Policy Year for GP, PHY & CHIRO, CH & BONE & ACUP, SP 每保單年度 - 普通科醫生服務(診所), 物理治療及脊醫, 中醫及跌打及針灸, 專科醫生服務 - 最多賠償次數	55 visits 55 次	
Prescribed Medicine 處方藥物 ⁵ (outside pharmacy 診所以外)	N/A 不適用	\$2,000 per policy year 每保單年度最高\$2,000
Basic Diagnostic Testing 基本診斷測試 ^{3, 5}	100% 全數支付	\$2,000 per disability 每病症最高\$2,000
Vaccine 疫苗注射	N/A 不適用	\$500 per policy year 每保單年度最高\$500

Note: All above figures are expressed in the following currency: HKD. 以上限額以港元計算。

OTHER BENEFITS 其他福利	In-Network 網絡	Out-of-Network 非網絡
Emergency Cash Benefit (For employee only) 緊急現金保障 (只適用於僱員)	N/A 不適用	\$10,000
China Assist Card 中國支援咭 ⁹ • Hospital Guarantee Admission Deposit Services 入院按金保證服務		Refer to remarks 9, 參考備註 9
Emergency Evacuation & Repatriation Benefit 緊急醫療運送 ⁴ [Prior authorization by AIA or AIAS Provider shall be required.] [服務需預先通知友邦保險 或 友邦國際支援服務 授權/或參與.] • Emergency Medical Evacuation 緊急醫療運送 • Repatriation of Remains 遺體運返 • Worldwide Hospitalization Deposit Guarantee 全球住院按金保證 • Compassionate Visit 家屬恩恤探訪 - Return Common Carrier ticket (economy class) 探訪家屬來回機票乙張 (經濟客位) - Visitor's accommodation expenses 探訪家屬之住宿費用 • Return of Children (under 18 years of age) 子女護送 (只限十八歲以下子女) - One-way Common Carrier ticket (economy class) 單程 (送返之) 機票乙張 (經濟客位) - Qualified escort when necessary 如有需要將由專人陪同送返 • Overseas medical monitoring & repatriation after discharge from overseas Hospitalization 海外住院期間醫療跟進及出院後醫療運返 • Hotel Room Accommodation for Convalescence (Maximum 5 days per Trip) 療癒期間酒店住宿費用 (每行程最多 5 日)		100% 全數支付 100% 全數支付 Maximum \$60,000 per trip 每行程最高限額 \$60,000 Included 已包括 Maximum \$12,000 per trip 每行程最高限額 \$12,000 Included 已包括 Included 已包括 Included 已包括 Maximum \$2,000 per day 每日最高限額 \$2,000
Maternity 分娩福利 For Full Time Permanent Employee or their spouse 適用於全職員工或其配偶 • Normal Delivery 自然分娩 • Miscarriage 流產 • Caesarian Section 剖腹分娩	N/A 不適用	100% 全數支付 \$28,000 \$12,000 \$39,000
Dental 牙科福利 ¹⁰ Overall Limit per Contract Year 每合約年度最高總賠償額 - including the following items 包括以下項目: 1. Scaling and Polishing 洗牙及去除牙石、牙漬 (maximum 2 visits per Contract Year) (每合約年度最多 2 次) 2. Routine oral examination 定期口腔檢查 3. Intraoral X-ray (periapical or bitewings) 口腔 X 光 (齒根尖周圍或牙齒咬合位置) 4. Medications 藥物 5. Fillings (amalgam or composite) 補牙 (銀粉或合成) 6. Extractions (simple extraction or surgical removal of erupted tooth or impacted tooth) 脫牙 (普通脫牙或手術治療) 7. Drainage of abscesses (with or without surgery) 膿瘡排放 (手術治療或非手術治療) 8. Pins for cusp restoration 齒尖或齒邊修復 9. Root canal treatment 齒根管治療 10. Crowns and bridges 牙冠及牙橋 11. Apicoectomy 齒根尖切除術 12. Periodontal surgery 牙周病手術 13. Gold inlay 金牙鑲嵌 14. Accident emergency treatment (including X-ray, temporary pain relief, temporary fillings, medication, incision and drainage of abscess 緊急治療 (包括 X 光、短期止痛、短期填補、藥物使用、膿瘡切割及排放) 15. Partial and complete soft-tissue impaction 部份及整體軟組織阻生 16. Bony impaction 牙骨阻生 17. Orthodontic treatment (necessitated by threat to the health of the Member and recommended as necessary by a Registered Dentist) 牙齒矯正治療 (因成員健康理由並經註冊牙醫建議為必需之治療) 18. Panoramic film 全視牙照 19. Night-guard or Mouth-guard (for prevention of continuous wearing of teeth) 夜間護齒套或護齒套 (為防止持續性牙齒磨損) 20. Dentures 假牙 (只適用於因意外引致)	N/A 不適用	100% 全數支付 \$2,000

Remarks for accessing Benefits 接受醫療服務條件之備註:

1.

Referral letter from a Registered Medical Practitioner of a western medication is waived for Out-Patient Specialist. 專科醫生可豁免必須獲得註冊西醫之推薦書。

2.

Subject to the overall maximum limit of 40 visits per member per Policy Year for the specified services / treatments. 受限於每位受保人每保單年度指定服務 / 治療合共 40 次的總限額。

3.

Basic Diagnostic Testing includes basic diagnostic imaging (X-Ray, mammograms, ultrasound). Advanced diagnostic imaging (MRI, CT scans, nuclear medicine) under Network requires prior authorization by AIA and benefit shall be payable under Other Hospital Services. 基本診斷測試包括基本診斷造影 (X 光、乳房組織 X 光檢查、超聲波測試)。先進診斷造影(磁力共振、電腦掃描、核子醫學)於網絡服務需預先核准及賠償包括於醫院雜費內。

4.

Only applicable when the Insured Person is traveling outside place of residence, for trip less than 90 days only. Prior authorization by AIA or AIAS Provider shall be required. 只適用於受保人在其居住地以外旅遊時之緊急醫療運送, 不超過 90 日之行程。需預先通知友邦保險或友邦國際支援服務。

5.

Referral letter is required. 需轉診推薦書。

6.

The specified maximum number of days set forth in the benefit are included Room & Board Benefit. 本福利之最多賠償日數已包括在「每日膳宿費」的最多賠償日數內。

7.

Surgical supplies shall be payable under Other Hospital Services. 手術醫療用品賠償包括於醫院雜費內。

8.

This Benefit will not be payable for Hospital Accommodation at VIP / Deluxe Room. If the Insured Person is confined in a room at any level above the Designated Room Level, the reimbursement will be subject to the Coinsurance Percentage schedule (as below) after deduction of a Deductible Amount shown in the Benefit Summary. 此保障並不會就入住貴賓房 / 豪華房的住院費用作出賠償, 若入住較指定住房級別為高之病房, 餘額則會先減去「扣除額」, 再按照下列入住房級別的「賠償比率」計算。

Room Level Entitlement 指定房級別	Room Level Used 入住房級別	Coinurance Percentage 賠償比率
Semi-Private 半私家病房	Private 私家病房	50%

9.

China Assist Card, accepted by over 200 high quality hospitals in Mainland China, provides deposit guarantee services up to HK\$10,000 for each hospital admission (due to medical necessity) to Insured Members traveling in China less than 90 days. 此項福利為受保人於中國大陸少於 90 天的行程提供超過 200 間特約中國大陸醫院的按金保證服務。每次入院最高按金保證額為 HK\$10,000。

10.

PRO-RATA Clinical & Dental Benefit 門診及牙科福利按比例計算 - If the employee is covered for less than a full policy year, the maximum number of visits for a full policy year and the maximum benefit for a full policy year entitled shall be pro-rated to the portion of the policy year for which the employee is covered. 若僱員之保障有效期少於一計劃年度,僱員於此保障期間之計劃年度次數限額及計劃年度最高賠償額會按此期間與計劃年度的比例計算。

11.

Second claim incentive 第二索償獎賞 - If the claim for medical expenses of an Insured Person under the Hospitalization Benefits of this Policy is for the balance of expenses not payable by another insurance, simultaneously providing hospital and surgical benefits to such Insured Person, AIA shall pay an incentive to the Insured Person according to the benefit as set forth in the Benefit Summary. 如果受保人根據本保險單的住院福利要求的醫療費用索賠是針對另一保險單不予支付的費用餘額, 則同時為受保人提供住院和手術保險, 友邦保險將支付相等於福利概要所定之獎賞予該受保人。

12.

Designated clinical surgery incentive 指定門診手術之福利獎賞 - If an Insured Person undergoes any of the following services on an outpatient basis rather than a treatment in hospital with room charges, AIA shall pay an incentive to the Insured Person in the amount as set forth in the Benefit Summary for this Benefit. 如果受保人於門診接受下列任何一項手術, 而不是住院進行及有住房費, 友邦保險將支付相等於福利概要所定之獎賞予該受保人。

a/ Gastroscopy 胃鏡	b/ Colonoscopy 結腸鏡	c/ Bronchoscopy 支氣管鏡檢查	d/ Cataract 白內障手術
e/ Cystoscopy 膀胱鏡	f/ Arthroscopy 關節鏡	g/ Colposcopy 陰道鏡	

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The final interpretation of the benefit coverage or its applicability is subject to the provisions of the master policy issued by AIA International Limited (Incorporated in Bermuda with limited liability) 此團體保險計劃之福利賠償的最後詮釋及執行, 均以友邦保險(國際)有限公司(於百慕達註冊成立之有限公司)之英文保單為準

0000013140_001_Benefit Effective From 02/01/2021 To 01/31/2022