



HOSPITAL / SURGICAL
General insurance



Cigna VHIS Series

Flexi Plan (SMM)

Flexi Plan (Superior)





About The Cigna Group

Our Mission

We are dedicated to improving the health and vitality of those we serve.



Sales capability in **OVER 30 COUNTRIES AND JURISDICTIONS**¹



RANKED 12TH on the 2022 Fortune 500 List



More than **190 MILLION CUSTOMER RELATIONSHIPS** around the world



Named a '**CARING COMPANY**' by the Hong Kong Council of Social Service



More Than **70,000 EMPLOYEES** around the world¹

Remarks:

1. The above data is for informational purposes only and may not relate to a particular subsidiary of The Cigna Group. Data is based on The Cigna Group's internal reporting as of 5 May 2023 and is subject to change.

Why should I consider the Cigna VHIS Series?

Tax deduction¹



- The maximum premium allowed for tax deductions is **HK\$8,000** per Insured Person per tax year.

No fear of medical expenses



- Provides full compensation of medical expenses with an Annual Benefit Limit of up to **HK\$30 million** per year and unlimited Lifetime Benefit Limit.

Covering various cancer treatments



- All cancer treatment expenses are **fully covered**^{2,3}, including various common non-surgical cancer treatments⁴.

Covering unknown Pre-existing Conditions



- Full cover from **day 1** of the Policy Effective Period⁵.

Guaranteed renewal



- Guaranteed renewal up to **Age of 100**, no matter how much you claim for illness(es) after the Policy has become effective, the premium will only be adjusted according to your Age⁶.

Outpatient surgeries in hospitals and clinics



- Surgeries performed in clinics or day case units of hospitals **can also be covered** with no minimum duration of stay required.

Taking care of your emotional health



- Provides coverage for psychiatric treatments during hospitalization.

Pre- and post-Confinement/Day Case Procedure outpatient care



- Covers all** Pre- and Post-Confinement/Day Case Procedure outpatient care^{2,3,7}.

Flexible deductible options²



- Features up to **five deductible options**, and you can also choose to lower or remove your deductibles once without re-underwriting⁸.

Remarks:

- Tax deduction is subject to the latest rules and regulation of Inland Revenue Department of Hong Kong Special Administrative Region. For details of tax deduction, please visit the websites of the Inland Revenue Department of Hong Kong Special Administrative Region (www.ird.gov.hk/eng/) and VHIS (www.vhis.gov.hk/en/) or consult with a professional tax advisor.
- Applicable to Cigna VHIS Series - Flexi (Superior) only.
- Subject to the Annual Benefit Limit.
- Covers a number of non-surgical cancer treatments including chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy etc. Proton therapy, gamma knife and cyber knife are radiation treatments that are also covered as radiotherapy.
- Refer to Important Information for details of Pre-existing Conditions.
- The premium level is subject to change from time to time due to medical inflation.
- Pre- and post-Confinement/Day Case Procedure outpatient care under Cigna VHIS Series - Flexi (Superior) covers:
 - I prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure taking place more than 30 days before admission or Day Case Procedure;
 - All prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 30 days before admission or Day Case Procedure; and
 - All follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)
- You can choose to reduce or remove your deductibles without re-underwriting within 30 days before the renewal date for one time at any one of the following Ages: 60, 65, 70, 75, 80 or 85.

Extra protection and value-added services

Cigna Healthcare provides a suite of additional protection and value-added services for all Cigna VHIS Series clients, providing comprehensive care for your body and mind.

Exclusive discount on virtual consultations and medication



Receive virtual medical consultations on mobile device to easily obtain doctors' advice and be able to get early diagnosis before your condition worsens.

Obtain medical advice from a range of general practitioners and specialists in Hong Kong without needing to leave your home.

Medication delivery to your door and referral services for a stress-free recovery.

Cashless hospitalization¹



If hospitalization or Day Case Procedure is needed, call us to obtain pre-authorization as soon as you know the details of your upcoming planned admission or procedure. Once approved, you can focus on your treatment and recovery whilst we handle the expense.

Cigna Care Manager



If you need to have surgery, you may contact us via our hotline to learn about related treatment classifications (e.g. Minor, Intermediate, Major, or Complex) and the coverage available under your VHIS plan. This way, you can get prepared in case there are any out-of-pocket expenses.

For Major or Complex surgeries, our professional registered nurses will step in to answer all your medical related enquiries and help with your needs from pre-treatment preparation to post-hospitalization care, and provide you and your family with both professional advice and emotional support.

Fast and easy online claim application



Simply login to MyCigna app to apply for claims anytime and anywhere.

Both hospitalization and outpatient claims can be submitted on the app no matter the size of the claim.

No Claim Bonus Extra coverage for Flexi Plan (Superior)²



As a reward for your efforts in maintaining good health, if you have not made any claim for three consecutive Policy Years, you will be received a free medical check-up coupon once every three years.

Remarks:

1. To use Cashless Hospitalization service, a Cigna Guarantee of Payment / Pre-Authorization ("GOP") Application Form must be submitted to us for approval prior to hospital admission. Cigna Healthcare requires 5 working days upon receipt of a completed form and supporting medical documents to process the application. We will confirm your application by issuing you a Cigna Health Insurance Scheme Guarantee of Payment (Inpatient) approval letter which sets out the conditions of the GOP arrangement. We or our designated medical service providers have the absolute discretion to decline the GOP application based on information provided by the Insured Person and/or Policyholder about the Insured Person's medical condition or if the GOP application does not include valid, sufficient and complete information for credit card authorization. All GOP approvals provided by us are subject to the deductible level and benefit limit of the Policy. The Insured Person and/or Policyholder are responsible for settling any amount not covered by their Policy.
2. Applicable to Semi-Private Room (a single or double occupancy room, with a shared bath or shower room, in a Hospital) type only.

Plan at a glance

Plan type	This product is a standalone individual policy which aims to provide hospitalization benefits. It is an indemnity insurance policy without cash value.
Policy term and Premium structure	1 year and annually renewable The plan provides a protection period of 1 year and guaranteed renewable up to Age 100 of Insured Person, with payment period until the end of protection period. Premium rate will increase with Age, and yearly adjustable.
Entry Age (at last birthday)	15 days to Age 80
Enrolment	No medical examination required before enrolment
Premium payment frequency	Annual / Monthly
Policy currency	HKD

Flexi Plan options

The following list is for reference only. For complete details, please refer to the Terms and Conditions.

	Supplementary benefits for enhanced confidence	Premium coverage with comprehensive protection to keep you secure	
Certified Plan(s)	Cigna VHIS Series – Flexi Plan (SMM)	Cigna VHIS Series – Flexi Plan (Superior)	
Area of coverage	Worldwide ¹	Asia ^{3,4}	
Choice of ward class	No restriction, except for supplementary major medical benefit ²	Standard Ward ⁴	Semi-Private Room ⁴
Annual Deductible options	x	HK\$0 HK\$15,000 HK\$25,000	HK\$0 HK\$15,000 HK\$25,000 HK\$50,000 HK\$75,000
Annual Benefit Limit (Eligible expenses and expenses payable shall be subject to the benefit limit of each benefit item, coinsurance/deductible (if applicable) and the annual benefit limit)	HK\$1,000,000 per Policy Year	HK\$5,000,000 per Policy Year	HK\$30,000,000 per Policy Year
Lifetime Benefit Limit	Nil	Nil	
Hospitalization benefits	Please refer to the Benefit Schedule for details	No dollar limit	
Surgical benefits			
Prescribed Diagnostic Imaging Tests			
Prescribed Non-surgical Cancer treatments			
Psychiatric treatments			
Outpatient kidney dialysis	HK\$30,000 per Policy Year		
Home nursing for Confinement	\$700 per day Maximum 15 days per Policy Year	\$800 per day Maximum 90 days per Policy Year	\$1,000 per day Maximum 90 days per Policy Year
Companion Bed	\$450 per day Maximum 270 days per Policy Year	No dollar limit	
Accidental Emergency outpatient treatment	\$6,600 per Policy Year (Within 24 hours after the Accident)	No dollar limit (Within 24 hours after the Accident)	
Accidental Emergency dental treatment	\$6,600 per Policy Year (Within 2 weeks after the Accident)	No dollar limit (Within 2 weeks after the Accident)	
Enhanced Benefit: Supplementary major medical benefit	✓ HK\$150,000 per Policy Year Subject to 10% Coinsurance	x No dollar limit for the core benefits	

Remarks:

- Psychiatric treatments benefit is limited to Hong Kong only.
- Supplementary major medical benefit is restricted to Eligible Expenses and expenses incurred during Confinement in a Standard Ward (a room in a Hospital with more than double occupancy) only.
- "Asia" refers to Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan, and Vietnam.
- In the situations described below, the benefit limits of the Standard Plan shall apply (the Deductible and Lifetime Benefit Limit stated above will still apply).
 - Eligible Expenses and expenses incurred outside of Asia;
 - Eligible Expenses and expenses incurred during Confinement in a ward class higher than the Accommodation Room Type selected (except in case of involuntary ward upgrade);
 - Eligible Expenses and expenses incurred in mainland China outside of hospitals of Tier 3 Class A or above; and/or
 - Eligible Expenses and expenses incurred when the Insured Person's Place of Residence is Australia or New Zealand.

Cigna VHIS Series – Flexi Plan (SMM)

Cigna's Flexi Plan (SMM) further extends the cover offered under the Standard Plan, and provides cover against costs associated with chronic kidney disease.

Level of ward class	No restriction, except for supplementary major medical benefit ¹
VHIS Certification Number	F00012-01-000-03
Area of coverage	Worldwide ²
Choice of healthcare services providers	No restriction
Annual Benefit Limit (Eligible Expenses and expenses payable shall be subject to the benefit limit of each benefit item, coinsurance (if applicable) and the annual benefit limit)	HK\$1,000,000 per Policy Year
Lifetime Benefit Limit	Nil

Outpatient kidney dialysis



Kidney disease is one of the most common “urban diseases”. It requires fast, efficient care and typically involves ongoing dialysis treatment. What torments kidney patients the most is to receive dialysis treatment two to three times a week and have to pay the related expenses incurred, resulting in a long-term heavy financial burden. Cigna's Flexi Plan (SMM) takes away that worry by providing you with **up to HK\$30,000 per year to cover the expenses of outpatient kidney dialysis treatments – sufficient for most dialysis circumstances.**

Supplementary major medical benefit



Apart from outpatient kidney dialysis coverage, the Flexi Plan (SMM) includes **an extra cover of HK\$150,000 in the form of a supplementary major medical benefit**, subject to annual limit of HK\$1,000,000 and no lifetime benefit limit. In case of serious Disability in which medical expenses exceed the individual benefit limits, the supplementary major medical benefit covers the remaining expenses in a Standard Ward (a room in a Hospital with more than double occupancy).

Remarks:

1. Supplementary major medical benefit is restricted to Eligible Expenses and expenses incurred during confinement in a Standard Ward (a room in a Hospital with more than double occupancy) only.
2. Psychiatric treatments benefit is limited to Hong Kong only.

Benefit Schedule

Benefits are reimbursed on Medically Necessary and Reasonable and Customary basis, unless otherwise specified. For more information, please refer to “Important Information” of this brochure or Policy Provision.

Benefit items ¹	Benefit limit (in HKD)
(a) Room and board	\$1,200 per day Maximum 270 days per Policy Year
(b) Miscellaneous charges Covers the Eligible Expenses charged on miscellaneous charges (including medical devices, additional surgical appliances) incurred in a setting of Hospital Confinement and Day Case Procedure	\$14,000 per Policy Year
(c) Attending doctor's visit fee	\$1,200 per day Maximum 270 days per Policy Year
(d) Specialist's fee²	\$4,300 per Policy Year
(e) Intensive care	\$3,500 per day Maximum 90 days per Policy Year
(f) Surgeon's fee⁴	Per surgery, subject to surgical category for the surgery/ procedure in the Schedule of Surgical Procedures – <ul style="list-style-type: none"> • Complex \$70,000 • Major \$35,000 • Intermediate \$17,500 • Minor \$8,750
(g) Anaesthetist's fee	35% of Surgeon's fee payable ³
(h) Operating theatre charges	35% of Surgeon's fee payable ³
(i) Prescribed Diagnostic Imaging Tests Covers computed tomography (“CT” scan), magnetic resonance imaging (“MRI” scan), positron emission tomography (“PET” scan), PET-CT combined and PET-MRI combined performed during Confinement or in a setting for providing Medical Services to a Day Patient	\$20,000 per Policy Year Subject to 30% Coinsurance
(j) Prescribed Non-surgical Cancer Treatments⁴ Covers chemotherapy, radiotherapy (including proton therapy, gamma knife and cyber knife), targeted therapy, immunotherapy and hormonal therapy performed during Confinement or in a setting for providing Medical Services to a Day Patient	\$80,000 per Policy Year
(k) Pre- and post-Confinement/Day Case Procedure outpatient care² <ul style="list-style-type: none"> • Prior outpatient visits or Emergency consultation (including but not limited to consultation, western medication prescribed or diagnostic test) • Follow-up outpatient visits (including but not limited to consultation, western medication prescribed, dressings, physiotherapy, occupational therapy, speech therapy or diagnostic test) 	\$1,000 per visit, up to \$15,000 per Policy Year <ul style="list-style-type: none"> • Maximum 2 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure • Maximum 10 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)

Benefit items ¹	Benefit limit (in HKD)
(l) Psychiatric treatments Covers the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist	\$30,000 per Policy Year
(m) Outpatient kidney dialysis	\$30,000 per Policy Year
(n) Home nursing for Confinement	\$700 per day Maximum 15 days per Policy Year
(o) Companion Bed	\$450 per day Maximum 270 days per Policy Year
(p) Accidental Emergency outpatient treatment Covers Eligible Expenses charged on the Emergency Treatment of an Injury in the outpatient department of a Hospital	\$6,600 per Policy Year (Within 24 hours after the Accident)
(q) Accidental Emergency dental treatment Covers expenses charged by a registered dentist, a registered medical practitioner or a hospital solely for Emergency Treatment which is necessitated by an Injury to sound natural teeth (including consultation, staunch bleeding, tooth extraction, root canals and x-ray) in a legally registered dental clinic or a hospital, given to the Insured Person	\$6,600 per Policy Year (Within 2 weeks after the Accident)
(r) Supplementary major medical benefit⁵ Applicable to benefit item (a) – (q)	\$150,000 per Policy Year Subject to 10% Coinsurance (except for Medical Services provided to Insured Person in a setting for providing Medical Services to a Day Patient where Coinsurance will not apply)

Remarks:

1. 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.
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. 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.
4. This benefit shall be payable according to the relevant surgical category and the categorisation of such surgical procedure under the Schedule of Surgical Procedures. If a medically necessary surgical procedure performed is not included in the Schedule of Surgical Procedures, the Company may reasonably determine its surgical category.
5. For Eligible Expenses and expenses resulting from Confinement, this benefit shall only be payable for Medical Services provided in a Standard Ward (a room in a Hospital with more than double occupancy) . For Confinement in a higher ward class (e.g. Semi-Private or Private), this benefit shall only be payable if the Hospital provides satisfactory evidence to show the ward upgrade was involuntary (i.e. where ward upgrade was required due to [i] Isolation, [ii] room shortage in case of an Emergency; or [iii] other reasons not involving personal preference of the Policyholder and/or the Insured Person). For full details of the calculation of this benefit, please refer to the Terms and Conditions and the Flexi Plan (SMM) Endorsement of the Terms and Benefits.

Cigna VHIS Series – Flexi Plan (Superior)

Cigna's Flexi Plan (Superior) provides the most comprehensive protection for treatment expenses, and goes further still for a totally hassle-free experience.

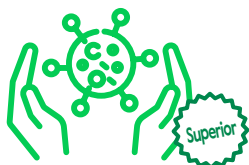
Accommodation Room Type	Standard Ward ¹ A room in a Hospital with more than double occupancy	Semi-Private Room ¹ A single or double occupancy room, with a shared bath or shower room in a Hospital
VHIS Certification Numbers	F00016-06-000-02 F00016-07-000-02 F00016-08-000-02	F00016-01-000-04 F00016-02-000-04 F00016-03-000-04 F00016-04-000-04 F00016-05-000-03
Area of coverage	Asia ^{1,2,3}	
Choice of healthcare service providers	Subject to restrictions ¹	
Annual Benefit Limit (Eligible Expenses and expenses payable shall be subject to the benefit limit of each benefit item, deductible (if applicable) and the annual benefit limit)	HK\$5,000,000 per Policy Year	HK\$30,000,000 per Policy Year
Lifetime Benefit Limit	Nil	
Deductible options	HK\$0 HK\$15,000 HK\$25,000	HK\$0 HK\$15,000 HK\$25,000 HK\$50,000 HK\$75,000

No sub-limits on core benefits



The Flexi Plan (Superior) **imposes no sub-limits on the plan's core benefits** when hospital treatment takes place in the Accommodation Room Type selected. No out-of-pocket expenses are incurred for most core benefits either. In addition, these benefits are not limited to Hong Kong, but also covered **throughout Asian regions**.

Most comprehensive cancer treatment



The Flexi Plan (Superior) also provides **full cover against Prescribed Non-surgical Cancer Treatments** such as chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy, subject to your Annual Benefit Limit. You can receive treatment at ease without worrying about your medical budget.

Remarks:

- I. In the situations described below, the benefit limits of the Standard Plan shall apply (the Deductible and Lifetime Benefit Limit stated above will still apply).
 - Eligible Expenses and expenses incurred outside of Asia;
 - Eligible Expenses and expenses incurred during Confinement in a ward class higher than the Accommodation Room Type selected (except in case of involuntary ward upgrade);
 - Eligible Expenses and expenses incurred in mainland China outside of hospitals of Tier 3 Class A or above; and/or
 - Eligible Expenses and expenses incurred when the Insured Person's Place of Residence is Australia or New Zealand.
2. Psychiatric treatments benefit is limited to Hong Kong only.
3. "Asia" refers to Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan, and Vietnam.

Benefit Schedule

Benefits are reimbursed on Medically Necessary and Reasonable and Customary basis, unless otherwise specified. For more information, please refer to "Important Information" of this brochure or Policy Provision.

Accommodation Room Type	Standard Ward A room in a Hospital with more than double occupancy	Semi-Private Room A single or double occupancy room, with a shared bath or shower room in a Hospital
Benefit items ^{1,2,3}	Benefit limit (in HKD)	
(a) Room and board	No dollar limit	
(b) Miscellaneous charges Covers the Eligible Expenses charged on miscellaneous charges (including medical devices, additional surgical appliances) incurred in a setting of Hospital Confinement and Day Case Procedure		
(c) Attending doctor's visit fee		
(d) Specialist's fee ⁴		
(e) Intensive care		
(f) Surgeon's fee ⁵		
(g) Anaesthetist's fee		
(h) Operating theatre charges		
(i) Prescribed Diagnostic Imaging Tests ⁴ Covers computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined performed during Confinement or in a setting for providing Medical Services to a Day Patient		
(j) Prescribed Non-surgical Cancer Treatments Covers chemotherapy, radiotherapy (including proton therapy, gamma knife and cyber knife), targeted therapy, immunotherapy and hormonal therapy performed during Confinement or in a setting for providing Medical Services to a Day Patient	No dollar limit	
(k) Pre- and post-Confinement/Day Case Procedure outpatient care ⁴ <ul style="list-style-type: none"> Prior outpatient visits or Emergency consultation (including but not limited to consultation, western medication prescribed or diagnostic test) Follow-up outpatient visits (including but not limited to consultation, western medication prescribed, dressings, physiotherapy, occupational therapy, speech therapy or diagnostic test) 		
(l) Psychiatric treatments Covers the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist		
(m) Outpatient kidney dialysis	No dollar limit	

Accommodation Room Type	Standard Ward A room in a Hospital with more than double occupancy	Semi-Private Room A single or double occupancy room, with a shared bath or shower room in a Hospital
(n) Home nursing for Confinement	\$800 per day Maximum 90 days per Policy Year	\$1,000 per day Maximum 90 days per Policy Year
(o) Companion Bed	No dollar limit	
(p) Accidental Emergency outpatient treatment Covers Eligible Expenses charged on the Emergency Treatment of an Injury in the outpatient department of a Hospital	No dollar limit (Within 24 hours after the Accident)	
(q) Accidental Emergency dental treatment Covers expenses charged by a registered dentist, a registered medical practitioner or a hospital solely for Emergency Treatment which is necessitated by an Injury to sound natural teeth (including consultation, staunch bleeding, tooth extraction, root canals and x-ray) in a legally registered dental clinic or a hospital, given to the Insured Person expenses	No dollar limit (Within 2 weeks after the Accident)	
(r) Body check ⁶	Nil	Once every three consecutive years of no-claim record

Remarks:

- Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
- The limits specified above for benefit items (a) – (q) apply only to Eligible Expenses and expenses incurred in Asia. Claims incurred outside Asia shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).
For the avoidance of doubt, "Asia" shall mean Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan, and Vietnam.
For Eligible Expenses and expenses incurred in mainland China, the limits specified above for benefit items (a) – (q) apply only to Medical Services provided in Hospitals of Tier 3 Class A or above (or in other Hospitals where approval has been granted by the Company before Medical Services are provided). Eligible Expenses and expenses incurred in mainland China outside of this setting shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).
If the Insured Person's Place of Residence is Australia or New Zealand when Eligible Expenses and expenses are incurred, any resulting claim(s) shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).
- For Eligible Expenses and expenses resulting from Confinement, the limits specified above for benefit items (a) to (l), (n) and (o) apply only to Medical Services provided in the Accommodation Room Type selected or a lower ward class. Claims incurred from Confinement in a higher ward class (e.g. illustrated in the table below) shall only be payable according to these limits if the Hospital provides satisfactory evidence to show the ward upgrade was involuntary (i.e. where ward upgrade was required due to [i] Isolation, [ii] room shortage in case of an Emergency, or [iii] other reasons not involving personal preference of the Policy Holder or Insured Person). Otherwise, such claims shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).

Accommodation Room Type	Actual Confined room type	Adjustment
Standard Ward (a room in a Hospital with more than double occupancy)	Semi-Private Room, Private Room or any room type above Private Room including suite, VIP or deluxe room	The benefits shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits.
Semi-Private Room (a single or double occupancy room, with a shared bath or shower room in a Hospital)	Private Room or any room type above Private Room including suite, VIP or deluxe room	

- 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.
- This benefit shall be payable according to the relevant surgical category and the categorisation of such surgical procedure under the Schedule of Surgical Procedures. If a Medically Necessary surgical procedure performed is not included in the Schedule of Surgical Procedures, the Company may reasonably determine its surgical category.
- Applicable to appointed medical service provider(s) by Cigna Healthcare from time to time. A check-up coupon will be available after every 3 consecutive years of no-claim record.

Case Illustrations

Cigna VHIS Series – Flexi Plan (SMM): Issac's story

Policy Holder	Issac
Age	30 (non-smoker)
Background	Issac got married when he was 30. For him, it was essential that such an important step in life has to be backed by solid and reliable protection against risks in the future. He's aware of the many benefits of the Cigna VHIS Series, and strongly felt that he and his wife deserve above average medical protection so that they could be hassle-free while working hard to build an ideal future together.
Plan level	Cigna VHIS Series – Flexi Plan (SMM)

At Age 30



Issac got married and signed up for the Flexi Plan (SMM) when he was 30.

Suffered a mild heart attack at Age 31



A year later, Issac suffered a mild heart attack. His attending doctor said that he had to undergo an angioplasty, a procedure which hospital, surgical and post-surgical care costs could be covered by the Flexi Plan (SMM).

After recovery



Issac could continue to work hard with peace of mind to build an ideal future together with his wife.

Benefit item (HK\$)

Room and board \$2,250	Operating theatre charges \$8,750
Pre- and post-Confinement/Day Case Procedure outpatient care \$1,500	
Surgeon's fee \$35,000	In excess of item limit \$70,000
Miscellaneous charges \$14,000	In excess of item limit \$50,000
Supplementary major medical benefit \$ (50,000+70,000) x 90% \$108,000	

Net benefit from Cigna VHIS Series – Flexi Plan (SMM):
HK\$149,587

Total claim payable	Tax benefit in the first year for both policies (based on a 15% Standard Rate)
HK\$169,500	HK\$1,397 HK\$9,310 x 15%
=	Issac paid
First year premium paid for both policies	Coinurance borne by Issac out-of-pocket
HK\$9,310* HK\$(4,655+4,655)	HK\$12,000 HK\$(50,000+\$70,000)x10%
-	

Remarks:

*The premium level is subject to change from time to time due to medical inflation.

Cigna VHIS Series – Flexi Plan (Superior): Helena's story

Policy Holder	Helena
Age	40 (non-smoker)
Background	Helena works for a major banking group and benefits from the bank's group cover insurance. She had assumed that the group cover was all anyone might need. Then, her colleague fell sick on a trip to Korea. Her short hospital stay in Seoul came with a big bill and only half of the medical expenses are reimbursed by the bank's group insurance. Since Helena is a keen traveller who loves taking short breaks around Asia, she signed up for the Flexi Plan (Superior) for both herself and her 10-year-old son.
Plan level	Cigna VHIS Series – Flexi Plan (Superior)
Accommodation Room Type	Semi-Private Room
Deductible	HK\$25,000 for her own policy HK\$0 for her son's policy

At Age 40



Helena signed up for the Flexi Plan (Superior) for both her 10-year-old son and herself when she was 40.

Got injured on a trip at Age 42



Two years later, when driving with her family in Okinawa, Japan, Helena's rental car skidded on some gravel and plunged down a bank. Helena suffered significant injuries that required a week's stay in an Okinawa hospital.

After recovery



Helena no longer had to worry about the coverage, and could continue to travel around the world with her family.

Total medical expenses (HK\$)



Hospitalization expenses incurred in Japan
\$ 208,000

–



Deductibles – covered by her group plan:
\$ 25,000



Full compensation by Flexi Plan (Superior) – no itemised amount limit
\$ 183,000



Net benefit from Cigna VHIS Series – Flexi Plan (Superior):
HK\$144,252

Total claim payable



HK \$183,000

Tax benefit for both policies (based on a 15% Standard Rate)



HK\$6,725
HK\$44,830x15%



Helena paid

Total premium paid for both policies



HK\$45,473*
HK\$(6,676+6,940+7,243)+
HK\$(8,438+8,205+7,971)

Remarks:

*The premium level is subject to change from time to time due to medical inflation.

Cigna VHIS Series – Flexi Plan (Superior): Iris story

Policy Holder	Iris
Age	50 (non-smoker)
Background	Iris decided it was time to jump out of her comfort zone and start her own business at the Age of 50. But at mid-life, she was concerned that her decision meant leaving her employer's group medical plan, which he's benefited from for many years. To replace it, she wanted a plan that offered full medical cover, because she would need to devote all her energies to her business, and she didn't want to worry about limits and exclusions.
Plan level	Cigna VHIS Series – Flexi Plan (Superior)
Accommodation Room Type	Semi-Private Room
Deductible	HK\$0

At Age 50



Iris signed up for the Flexi Plan (Superior) at the Age of 50.

Iris had breast cancer at Age 53



Iris is diagnosed with breast cancer when she was 53. Every aspect of her treatment was covered by her plan and carried out by top professionals without delay. The timely and high-quality procedures, including diagnostic imaging processes, a series of cancer treatments and breast-reconstruction following mastectomy, made Iris's recovery go well.

After recovery



Iris's new business was not compromised. After treatments and suitable rest, Iris was once again able to pick up the reins of her business and forge ahead towards achieving her business goals.

Benefit item (HK\$)

Pre-Confinement



Pre- and post-Confinement/Day Case Procedure outpatient care
\$580



Prescribed Diagnostic Imaging Tests
\$27,000

1st Confinement for mastectomy



Hospitalization and surgical expenses
\$150,000



Prescribed Diagnostic Imaging Tests
\$43,000

1st Post-Confinement



Pre- and post-Confinement/Day Case Procedure outpatient care
\$2,160

2nd Confinement for breast reconstruction



Hospitalization and surgical expenses
\$200,000

2nd Post-Confinement



Pre- and post-Confinement/Day Case Procedure outpatient care
\$1,740



Total medical expenses
\$424,480

Net benefit from Cigna VHIS Series - Flexi Plan (Superior): **HK\$338,273**

Total claim payable
HK\$424,480

Tax benefit
(based on a 15% Standard Rate)
HK\$4,800
HK\$32,000x15%

Iris paid

Total premium paid
HK\$91,007*
HK\$(21,146+22,182+23,270+24,409)

Remarks:

*The premium level is subject to change from time to time due to medical inflation.

Important Information

The product information included in the brochure does not contain the full terms of the Policy and the full terms can be found in the Policy document.

Cooling-off right and Policy Cancellation

You may cancel your policy and obtain a refund of any premium(s) and levy paid by you within the cooling-off period. The cooling-off period is the period of 30 calendar days immediately following either the day of delivery of the policy or the cooling-off notice to you or your nominated representative (whichever is the earlier). The cooling-off notice is a notice that will be sent to you or your nominated representative by Cigna Worldwide General Insurance Company Limited to notify you of the cooling-off period around the time the policy is delivered. To exercise this right, a written notice of cancellation must be signed by you and received directly by Cigna Worldwide General Insurance Company Limited at I6/F, 348 Kwun Tong Road, Kwun Tong, Kowloon, Hong Kong within the cooling-off period. No refund can be made if a claim has been made.

After the cooling-off period, the Policy Holder can request cancellation of the policy by giving thirty (30) days prior written notice to the Company, provided that there has been no benefit payment under the policy during the relevant Policy Year.

Claims Procedure

To make a claim, please login to our customer portal or register at www.mycigna.com.hk or download our MyCigna app. For details of procedures by claims type, please visit the Company website www.cigna.com.hk/en/customer-service/insurance-claim-procedure.

Reasonable and Customary

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)–

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

Medically Necessary

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 –

- (a) require the expertise of, or be referred by, a Registered Medical Practitioner;
- (b) be consistent with the diagnosis and necessary for the investigation and treatment of the Disability;
- (c) 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;
- (d) 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
- (e) 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.

Pre-existing Conditions

Pre-existing Condition means any Sickness, Disease, Injury, physical, mental or medical condition or physiological degradation, including congenital condition, that has existed prior to the Policy Issuance Date or the Policy Effective Date, whichever is the earlier. You are considered to be aware of a Pre-existing Condition where –

- (a) it has been diagnosed;
- (b) it has manifested clear and distinct signs or symptoms; or
- (c) medical advice or treatment has been sought, recommended or received.

If you are requested but fail to disclose to us upon submission of the insurance application, including any updates of and changes to the required information, that the Insured Person is suffering from a Pre-existing Condition of which the Policy Holder or the Insured

Person is aware or should have reasonably been aware of at the time of submission of Application, the Company has the right to declare the relevant insurance policy void, demand repayment of any benefits paid and/or refuse to provide coverage under its terms and benefits. In such event, the Company shall refund the premium.

Premium

1. Premium Level

The premium corresponding to the plan you select is determined based on the Age and smoking habit of the Insured Person at the Policy Effective Date.

2. Non-payment of Premium

If you fail to pay the initial premium, your Policy will not take effect from the commencement date of your Policy. Except for the initial premium payment, there will be a grace period of 30 days after any premium due date. Your Policy will remain effective during this grace period. If any premium is not paid at the end of the grace period, your Policy will lapse on the premium due date and you will lose the insurance cover.

We will not make any claim payment or any other payment payable under the Policy, until we receive payment of all outstanding premium up to the date of the claim payment or when the Policy terminates.

3. Mis-statement of Age or Smoking Habit

If Age or smoking habit is mis-stated by you or any Insured Person (and the relevant Insured Person would still be eligible for coverage), we have the right to adjust the premiums payable based on the correct information.

4. Premium adjustment

The Company reserves the right to revise the Standard Premium of the Policy on the anniversary date or upon renewal. Factors leading to premium adjustment may include but are not limited to our overall experience in claims and expenses incurred by and/or in relation to this product.

Duplicated policy

Each person can only be covered under one single "Cigna VHIS Series" policy. The series includes "Cigna VHIS Series – Standard Plan", "Cigna VHIS Series – Flexi Plan(SMM)", "Cigna VHIS Series – Flexi Plan (Superior)" and any other insurance policies that fall under the "Cigna VHIS Series" as defined and issued by the Company from time to time.

Existing holders of "Cigna HealthFirst Medical Plan Series" policies should contact the Company to discuss their options with regard to policy migration.

Conversion of policy

If you have an existing medical insurance policy and intend to switch the coverage to this plan, please be aware of the potential implications in terms of insurability, claims eligibility and financial values regarding the change to the insurance arrangement.

Some benefits under the existing policy may be changed or not be covered under this plan due to changes in policy features, Age, health conditions, occupation, lifestyle, habit or recreational activities. Also, riders or supplementary benefits under your existing insurance policy may not be available under this plan.

Benefits under the existing insurance policy will no longer be payable to you if you surrender the policy or allow it to lapse. Besides, you may need to start a new waiting period (if any) in respect of certain benefits under the terms and conditions of the new policy.

Renewal

This Policy shall be effective for an initial period of twelve (12) months and is thereafter guaranteed to be automatically renewable for successive periods of twelve (12) months up to the Age of one hundred (100) years of the Insured Person. The Company shall have the right to revise the Terms and Benefits of the Policy and/or the Premium upon each renewal.

Termination

1. The Policy will be automatically terminated when one of the following happens:
 - The Insured Person passes away;
 - Any premium is not paid at the end of the grace period;
 - The Policy is terminated or not renewed by the Policy Holder; or
 - The Company has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this Policy.
2. If there is any fraud, mis-statement or concealment in the application or declaration, or if you or your beneficiary makes a dishonest claim, we have the right to cancel the policy immediately. In such case, all the premium paid will not be returned and you shall immediately return all payment including claims paid by us under the Policy.

Inflation risk

Your current planned benefit may not be sufficient to meet your future needs since the future cost of living may become higher than they are today due to inflation. Where the actual rate of inflation is higher than expected, you may receive less in real terms even if we meet all of our contractual obligations.



Key Exclusions

The following list is for reference only and it is not a full list of exclusions. Please refer to the Terms and Conditions for the complete list and details of exclusions.

Cigna Healthcare shall not pay any benefits in relation to or arising from the following:

- I. Medical Services that are not Medically Necessary.
2. Confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy.
3. Human Immunodeficiency Virus ("HIV") and its related Disability.
4. 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.
5. Services for beautification or cosmetic purposes, or correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens.
6. Prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, immunisation or health supplements.
7. Dental treatment and oral and maxillofacial procedures performed by a dentist except for Emergency Treatment and surgery during Confinement arising from an Accident or to the extent covered by the Accidental Emergency dental treatment benefit. Follow up dental treatment or oral surgery after discharge from Hospital shall not be covered.
8. Maternity conditions and its complications.
9. Purchase of durable medical equipment or appliances.
10. Traditional Chinese Medicine treatment.
- II. 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.
12. Congenital Condition(s) which have manifested or been diagnosed before the Insured Person attained the Age of eight (8) years.
13. Eligible Expenses which have been reimbursed under any law, or other medical program or insurance policy.
14. War, civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

Remarks:

"Cigna Healthcare", "the Company", "We", "our" or "us" herein refers to Cigna Worldwide General Insurance Company Limited.

This product brochure is also available in Chinese. You may request for the Chinese version from us.
此產品小冊子同時備有中文版本。閣下可向本公司索取中文版本。



Cigna Worldwide General Insurance Company Limited

Tel: (852) 2560 1990
www.cigna.com.hk

The above insurance plan is underwritten by Cigna Worldwide General Insurance Company Limited, an authorized insurer to carry on General insurance business in or from Hong Kong. This brochure is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or a solicitation to buy or provision of any products of Cigna Healthcare outside Hong Kong. It is designed to provide you with a brief summary of the named insurance plan, its terms, conditions and exclusions, and is not a contract of insurance. You are recommended to seek professional advice from your independent advisors if you find it necessary. For complete details of terms, conditions and exclusions, please refer to the policy provisions. If there is any conflict between the policy provisions and this brochure, the policy provisions shall prevail.

This policy is excluded from the application of the Contracts (Right of Third Parties) Ordinance (the "Ordinance"). Other than the Company and the policyholder, a person who is not a party to the policy (including, but not limited to, the person insured or the beneficiary) shall have no right under the Ordinance to enforce any term of this policy.

Cigna Healthcare reserves the right to change any of the details in this brochure. In case of any disputes about the content of this brochure, Cigna Healthcare's decision shall be final.



保費表
Premium Table

Cigna VHIS Series 信諾自願醫保系列

Premium Table 保費表

Effective from 1 July 2023 | 2023年7月1日起生效

Cigna VHIS Series - Standard Plan - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 標準計劃 - 標準保費表 (2023年7月1日生效)

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series - Standard Plan 信諾自願醫保系列 - 標準計劃					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	3,004	261	50	4,900	426
1	3,004	261	51	5,115	445
2	3,004	261	52	5,339	464
3	3,004	261	53	5,575	485
4	3,004	261	54	5,820	506
5	2,003	174	55	6,189	538
6	2,003	174	56	6,475	563
7	2,003	174	57	6,771	589
8	2,003	174	58	7,083	616
9	2,003	174	59	7,409	645
10	2,003	174	60	7,820	680
11	2,003	174	61	8,195	713
12	2,003	174	62	8,589	747
13	2,003	174	63	9,000	783
14	2,003	174	64	9,433	821
15	2,003	174	65	9,886	860
16	2,003	174	66	10,380	903
17	2,003	174	67	10,899	948
18	2,124	185	68	11,444	996
19	2,124	185	69	12,016	1,045
20	2,128	185	70	12,616	1,098
21	2,152	187	71	13,272	1,155
22	2,175	189	72	13,961	1,215
23	2,235	194	73	14,688	1,278
24	2,290	199	74	15,452	1,344
25	2,345	204	75	16,256	1,414
26	2,402	209	76	17,134	1,491
27	2,461	214	77	18,059	1,571
28	2,521	219	78	19,034	1,656
29	2,582	225	79	20,062	1,745
30	2,645	230	80	21,145	1,840
31	2,709	236	81*	21,357	1,858
32	2,776	242	82*	21,570	1,877
33	2,843	247	83*	21,786	1,895
34	2,913	253	84*	22,003	1,914
35	2,948	256	85*	22,223	1,933
36	2,960	258	86*	22,446	1,953
37	2,995	261	87*	22,670	1,972
38	3,067	267	88*	22,898	1,992
39	3,127	272	89*	23,126	2,012
40	3,293	286	90*	23,357	2,032
41	3,413	297	91*	23,591	2,052
42	3,538	308	92*	23,826	2,073
43	3,667	319	93*	24,064	2,094
44	3,801	331	94*	24,303	2,114
45	4,016	349	95*	24,547	2,136
46	4,163	362	96*	24,792	2,157
47	4,317	376	97*	25,040	2,178
48	4,474	389	98*	25,291	2,200
49	4,638	404	99*	25,544	2,222

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (SMM) - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 靈活計劃 (附加保障) - 標準保費表 (2023年7月1日生效)

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series - Flexi Plan (SMM) 信諾自願醫保系列-靈活計劃 (附加保障)					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	5,108	444	50	8,586	747
1	5,108	444	51	8,964	780
2	5,108	444	52	9,358	814
3	5,108	444	53	9,770	850
4	5,108	444	54	10,200	887
5	3,405	296	55	10,894	948
6	3,405	296	56	11,396	991
7	3,405	296	57	11,920	1,037
8	3,405	296	58	12,468	1,085
9	3,405	296	59	13,041	1,135
10	3,405	296	60	13,826	1,203
11	3,405	296	61	14,489	1,261
12	3,405	296	62	15,185	1,321
13	3,405	296	63	15,914	1,385
14	3,405	296	64	16,677	1,451
15	3,405	296	65	17,478	1,521
16	3,405	296	66	18,351	1,597
17	3,405	296	67	19,270	1,676
18	3,618	315	68	20,233	1,760
19	3,618	315	69	21,244	1,848
20	3,684	321	70	22,306	1,941
21	3,731	325	71	23,466	2,042
22	3,781	329	72	24,686	2,148
23	3,880	338	73	25,969	2,259
24	3,975	346	74	27,320	2,377
25	4,072	354	75	28,740	2,500
26	4,171	363	76	30,292	2,635
27	4,273	372	77	31,928	2,778
28	4,376	381	78	33,653	2,928
29	4,483	390	79	35,469	3,086
30	4,655	405	80	37,384	3,252
31	4,769	415	81*	37,757	3,285
32	4,886	425	82*	38,136	3,318
33	5,005	435	83*	38,517	3,351
34	5,127	446	84*	38,901	3,384
35	5,223	454	85*	39,291	3,418
36	5,238	456	86*	39,684	3,453
37	5,303	461	87*	40,080	3,487
38	5,437	473	88*	40,481	3,522
39	5,554	483	89*	40,886	3,557
40	5,829	507	90*	41,294	3,593
41	6,042	526	91*	41,708	3,629
42	6,263	545	92*	42,125	3,665
43	6,493	565	93*	42,547	3,702
44	6,729	585	94*	42,972	3,739
45	7,043	613	95*	43,402	3,776
46	7,300	635	96*	43,837	3,814
47	7,566	658	97*	44,275	3,852
48	7,843	682	98*	44,717	3,890
49	8,130	707	99*	45,164	3,929

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 靈活計劃 (優越) - 標準保費表 (2023年7月1日生效)

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series - Flexi Plan (Superior) 信諾自願醫保系列-靈活計劃 (優越)													
Accommodation Room Type: Standard Ward 病房類別：普通病房													
Age 年齡	Deductible Option 自付費選項												
	HK\$0		HK\$15,000		HK\$25,000		Age 年齡	HK\$0		HK\$15,000		HK\$25,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳		Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
0	10,069	876	5,398	470	4,790	417	50	16,768	1,459	8,989	782	7,974	694
1	9,062	788	4,858	423	4,311	375	51	17,589	1,530	9,430	820	8,364	728
2	8,056	701	4,319	376	3,832	333	52	18,452	1,605	9,892	861	8,774	763
3	8,056	701	4,319	376	3,832	333	53	19,355	1,684	10,376	903	9,204	801
4	8,056	701	4,319	376	3,832	333	54	20,304	1,766	10,885	947	9,655	840
5	7,864	684	4,216	367	3,742	326	55	21,299	1,853	11,418	993	10,128	881
6	7,672	667	4,113	358	3,650	318	56	22,342	1,944	11,978	1,042	10,625	924
7	7,479	651	4,010	349	3,559	310	57	23,437	2,039	12,565	1,093	11,145	970
8	7,288	634	3,907	340	3,468	302	58	24,586	2,139	13,181	1,147	11,691	1,017
9	7,096	617	3,804	331	3,376	294	59	25,790	2,244	13,827	1,203	12,264	1,067
10	6,904	601	3,701	322	3,285	286	60	27,054	2,354	14,504	1,262	12,865	1,119
11	6,713	584	3,599	313	3,194	278	61	28,379	2,469	15,215	1,324	13,495	1,174
12	6,521	567	3,496	304	3,103	270	62	29,770	2,590	15,960	1,389	14,156	1,232
13	6,329	551	3,393	295	3,011	262	63	31,229	2,717	16,743	1,457	14,849	1,292
14	6,137	534	3,290	286	2,920	254	64	32,759	2,850	17,563	1,528	15,577	1,355
15	5,946	517	3,188	277	2,829	246	65	34,364	2,990	18,423	1,603	16,340	1,422
16	6,013	523	3,224	280	2,860	249	66	36,048	3,136	19,326	1,681	17,141	1,491
17	6,064	528	3,250	283	2,884	251	67	37,814	3,290	20,273	1,764	17,980	1,564
18	6,096	530	3,268	284	2,899	252	68	39,667	3,451	21,266	1,850	18,861	1,641
19	6,338	551	3,398	296	3,015	262	69	41,611	3,620	22,307	1,941	19,786	1,721
20	6,580	572	3,528	307	3,130	272	70	43,650	3,798	23,400	2,036	20,755	1,806
21	6,748	587	3,617	315	3,209	279	71	45,788	3,984	24,548	2,136	21,772	1,894
22	6,923	602	3,711	323	3,293	286	72	48,032	4,179	25,750	2,240	22,839	1,987
23	7,099	618	3,806	331	3,379	294	73	50,385	4,383	27,012	2,350	23,958	2,084
24	7,283	634	3,904	340	3,464	301	74	52,854	4,598	28,335	2,465	25,131	2,186
25	7,471	650	4,004	348	3,553	309	75	55,444	4,824	29,724	2,586	26,363	2,294
26	7,663	667	4,108	357	3,646	317	76	58,161	5,060	31,180	2,713	27,655	2,406
27	7,859	684	4,213	367	3,738	325	77	61,011	5,308	32,708	2,846	29,010	2,524
28	8,062	701	4,321	376	3,834	334	78	64,001	5,568	34,310	2,985	30,432	2,648
29	8,269	719	4,433	386	3,933	342	79	67,137	5,841	35,991	3,131	31,923	2,777
30	8,480	738	4,546	396	4,034	351	80	70,427	6,127	37,755	3,285	33,487	2,913
31	8,701	757	4,664	406	4,139	360	81*	73,525	6,397	39,416	3,429	34,960	3,042
32	8,924	776	4,784	416	4,244	369	82*	76,761	6,678	41,150	3,580	36,498	3,175
33	9,154	796	4,907	427	4,353	379	83*	80,139	6,972	42,961	3,738	38,104	3,315
34	9,390	817	5,034	438	4,466	389	84*	83,665	7,279	44,851	3,902	39,781	3,461
35	9,631	838	5,163	449	4,580	398	85*	87,346	7,599	46,824	4,074	41,531	3,613
36	9,878	859	5,296	461	4,697	409	86*	91,189	7,933	48,884	4,253	43,359	3,772
37	10,134	882	5,432	473	4,820	419	87*	95,201	8,282	51,036	4,440	45,267	3,938
38	10,393	904	5,572	485	4,943	430	88*	99,390	8,647	53,281	4,635	47,259	4,112
39	10,659	927	5,714	497	5,070	441	89*	103,763	9,027	55,625	4,839	49,338	4,292
40	10,977	955	5,884	512	5,221	454	90*	108,329	9,425	58,073	5,052	51,509	4,481
41	11,414	993	6,119	532	5,427	472	91*	113,096	9,839	60,628	5,275	53,776	4,679
42	11,911	1,036	6,386	556	5,664	493	92*	118,071	10,272	63,295	5,507	56,142	4,884
43	12,431	1,081	6,665	580	5,912	514	93*	123,267	10,724	66,080	5,749	58,612	5,099
44	12,975	1,129	6,956	605	6,171	537	94*	128,691	11,196	68,988	6,002	61,191	5,324
45	13,541	1,178	7,259	632	6,440	560	95*	134,354	11,689	72,023	6,266	63,883	5,558
46	14,133	1,230	7,577	659	6,720	585	96*	140,265	12,203	75,192	6,542	66,694	5,802
47	14,749	1,283	7,907	688	7,014	610	97*	146,437	12,740	78,500	6,830	69,629	6,058
48	15,395	1,339	8,253	718	7,320	637	98*	152,880	13,301	81,954	7,130	72,692	6,324
49	16,067	1,398	8,613	749	7,641	665	99*	159,607	13,886	85,561	7,444	75,891	6,603

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。

2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。

3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。

4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。

5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2023)

信諾自願醫保系列 - 靈活計劃 (優越) - 標準保費表 (2023年7月1日生效)

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列-靈活計劃 (優越)										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK\$0		HK\$15,000		HK\$25,000		HK\$50,000		HK\$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
0	12,307	1,071	6,848	596	6,018	524	5,035	438	4,266	371
1	11,076	964	6,163	536	5,416	471	4,532	394	3,839	334
2	9,846	857	5,479	477	4,814	419	4,025	350	3,412	297
3	9,846	857	5,479	477	4,814	419	4,025	350	3,412	297
4	9,846	857	5,479	477	4,814	419	4,025	350	3,412	297
5	9,611	836	5,349	465	4,700	409	3,930	342	3,332	290
6	9,376	816	5,218	454	4,585	399	3,834	334	3,250	283
7	9,142	795	5,087	443	4,471	389	3,738	325	3,168	276
8	8,908	775	4,956	431	4,357	379	3,642	317	3,087	269
9	8,674	755	4,826	420	4,241	369	3,547	309	3,007	262
10	8,438	734	4,696	409	4,128	359	3,451	300	2,925	254
11	8,205	714	4,565	397	4,012	349	3,354	292	2,844	247
12	7,971	693	4,436	386	3,898	339	3,258	283	2,763	240
13	7,735	673	4,305	375	3,783	329	3,163	275	2,681	233
14	7,501	653	4,175	363	3,668	319	3,067	267	2,600	226
15	7,268	632	4,045	352	3,554	309	2,971	258	2,519	219
16	7,349	639	4,090	356	3,593	313	3,007	262	2,548	222
17	7,412	645	4,124	359	3,623	315	3,030	264	2,569	224
18	7,451	648	4,146	361	3,642	317	3,047	265	2,583	225
19	7,746	674	4,312	375	3,788	330	3,168	276	2,685	234
20	8,042	700	4,497	391	3,952	344	3,305	288	2,801	244
21	8,248	718	4,612	401	4,051	352	3,391	295	2,872	250
22	8,461	736	4,731	412	4,157	362	3,477	302	2,947	256
23	8,677	755	4,852	422	4,265	371	3,566	310	3,023	263
24	8,902	774	4,978	433	4,373	380	3,658	318	3,101	270
25	9,173	798	5,130	446	4,509	392	3,771	328	3,196	278
26	9,408	818	5,263	458	4,625	402	3,868	337	3,278	285
27	9,649	839	5,399	470	4,743	413	3,968	345	3,363	293
28	9,897	861	5,536	482	4,865	423	4,069	354	3,449	300
29	10,153	883	5,681	494	4,991	434	4,175	363	3,538	308
30	10,412	906	5,910	514	5,194	452	4,344	378	3,682	320
31	10,683	929	6,063	527	5,328	464	4,457	388	3,778	329
32	10,956	953	6,219	541	5,464	475	4,571	398	3,874	337
33	11,239	978	6,379	555	5,604	488	4,688	408	3,974	346
34	11,530	1,003	6,545	569	5,749	500	4,808	418	4,077	355
35	11,878	1,033	6,711	584	5,897	513	4,932	429	4,182	364
36	12,183	1,060	6,885	599	6,047	526	5,058	440	4,288	373
37	12,499	1,087	7,062	614	6,206	540	5,190	452	4,399	383
38	12,818	1,115	7,244	630	6,363	554	5,323	463	4,512	393
39	13,147	1,144	7,428	646	6,528	568	5,460	475	4,628	403
40	13,539	1,178	7,598	661	6,676	581	5,585	486	4,733	412
41	14,077	1,225	7,900	687	6,940	604	5,803	505	4,922	428
42	14,690	1,278	8,245	717	7,243	630	6,057	527	5,135	447
43	15,332	1,334	8,606	749	7,560	658	6,321	550	5,361	466
44	16,003	1,392	8,982	781	7,891	687	6,597	574	5,595	487
45	16,701	1,453	9,437	821	8,292	721	6,932	603	5,878	511
46	17,431	1,516	9,851	857	8,653	753	7,238	630	6,137	534
47	18,191	1,583	10,279	894	9,031	786	7,553	657	6,404	557
48	18,987	1,652	10,729	933	9,425	820	7,882	686	6,685	582
49	19,816	1,724	11,197	974	9,838	856	8,225	716	6,975	607

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。

2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。

3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。

4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。

5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 靈活計劃 (優越) - 標準保費表 (2023年7月1日生效)

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series - Flexi Plan (Superior) 信諾自願醫保系列-靈活計劃 (優越)										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK\$0		HK\$15,000		HK\$25,000		HK\$50,000		HK\$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
50	21,146	1,840	11,798	1,026	10,366	902	8,668	754	7,350	639
51	22,182	1,930	12,376	1,077	10,873	946	9,094	791	7,711	671
52	23,270	2,024	12,983	1,130	11,407	992	9,539	830	8,089	704
53	24,409	2,124	13,620	1,185	11,965	1,041	10,006	871	8,485	738
54	25,606	2,228	14,286	1,243	12,552	1,092	10,497	913	8,901	774
55	27,096	2,357	15,315	1,332	13,458	1,171	11,255	979	9,543	830
56	28,425	2,473	16,066	1,398	14,118	1,228	11,807	1,027	10,011	871
57	29,817	2,594	16,854	1,466	14,809	1,288	12,385	1,077	10,501	914
58	31,278	2,721	17,679	1,538	15,535	1,352	12,993	1,130	11,016	958
59	32,811	2,855	18,546	1,614	16,296	1,418	13,630	1,186	11,556	1,005
60	34,569	3,008	20,088	1,748	17,657	1,536	14,768	1,285	12,522	1,089
61	36,263	3,155	21,072	1,833	18,522	1,611	15,492	1,348	13,135	1,143
62	38,040	3,309	22,105	1,923	19,429	1,690	16,250	1,414	13,779	1,199
63	39,903	3,472	23,188	2,017	20,380	1,773	17,048	1,483	14,453	1,257
64	41,859	3,642	24,324	2,116	21,379	1,860	17,882	1,556	15,161	1,319
65	43,909	3,820	26,368	2,294	23,182	2,017	19,391	1,687	16,440	1,430
66	46,061	4,007	27,660	2,406	24,319	2,116	20,340	1,770	17,246	1,500
67	48,318	4,204	29,015	2,524	25,509	2,219	21,338	1,856	18,091	1,574
68	50,686	4,410	30,436	2,648	26,759	2,328	22,383	1,947	18,978	1,651
69	53,169	4,626	31,927	2,778	28,071	2,442	23,480	2,043	19,907	1,732
70	55,775	4,852	33,492	2,914	29,446	2,562	24,631	2,143	20,883	1,817
71	58,507	5,090	35,133	3,057	30,889	2,687	25,837	2,248	21,907	1,906
72	61,374	5,340	36,855	3,206	32,403	2,819	27,103	2,358	22,980	1,999
73	64,380	5,601	38,661	3,364	33,990	2,957	28,432	2,474	24,105	2,097
74	67,536	5,876	40,555	3,528	35,655	3,102	29,824	2,595	25,286	2,200
75	70,845	6,164	42,542	3,701	37,403	3,254	31,285	2,722	26,526	2,308
76	74,316	6,465	44,626	3,882	39,235	3,413	32,819	2,855	27,826	2,421
77	77,959	6,782	46,813	4,073	41,157	3,581	34,426	2,995	29,189	2,539
78	81,779	7,115	49,107	4,272	43,175	3,756	36,113	3,142	30,619	2,664
79	85,787	7,463	51,512	4,482	45,291	3,940	37,883	3,296	32,119	2,794
80	89,403	7,778	53,717	4,673	47,226	4,109	39,501	3,437	33,493	2,914
81*	92,724	8,067	55,749	4,850	49,010	4,264	40,993	3,566	34,759	3,024
82*	96,164	8,366	57,855	5,033	50,858	4,425	42,539	3,701	36,069	3,138
83*	99,728	8,676	60,038	5,223	52,774	4,591	44,142	3,840	37,428	3,256
84*	103,419	8,997	62,301	5,420	54,761	4,764	45,803	3,985	38,837	3,379
85*	107,241	9,330	64,646	5,624	56,820	4,943	47,525	4,135	40,297	3,506
86*	111,200	9,674	67,079	5,836	58,955	5,129	49,311	4,290	41,811	3,638
87*	115,299	10,031	69,599	6,055	61,167	5,322	51,160	4,451	43,379	3,774
88*	119,544	10,400	72,212	6,282	63,460	5,521	53,078	4,618	45,006	3,916
89*	123,939	10,783	74,921	6,518	65,836	5,728	55,066	4,791	46,689	4,062
90*	128,490	11,179	77,727	6,762	68,297	5,942	57,125	4,970	48,436	4,214
91*	133,202	11,589	80,635	7,015	70,850	6,164	59,259	5,156	50,246	4,371
92*	138,077	12,013	83,649	7,277	73,493	6,394	61,470	5,348	52,121	4,535
93*	143,126	12,452	86,771	7,549	76,232	6,632	63,762	5,547	54,063	4,703
94*	148,352	12,907	90,008	7,831	79,071	6,879	66,135	5,754	56,076	4,879
95*	153,760	13,377	93,360	8,122	82,010	7,135	68,595	5,968	58,161	5,060
96*	159,357	13,864	96,833	8,424	85,056	7,400	71,143	6,189	60,321	5,248
97*	165,149	14,368	100,431	8,737	88,211	7,674	73,782	6,419	62,558	5,443
98*	171,140	14,889	104,159	9,062	91,478	7,959	76,515	6,657	64,876	5,644
99*	177,341	15,429	108,021	9,398	94,864	8,253	79,346	6,903	67,276	5,853

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Standard Plan - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 標準計劃 - 標準保費表 (2023年7月1日生效)

Premium for Smoker 吸煙人士保費

Cigna VHIS Series - Standard Plan 信諾自願醫保系列-標準計劃					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	-	-	50	5,700	496
1	-	-	51	5,951	518
2	-	-	52	6,213	541
3	-	-	53	6,487	564
4	-	-	54	6,772	589
5	-	-	55	7,199	626
6	-	-	56	7,530	655
7	-	-	57	7,876	685
8	-	-	58	8,238	717
9	-	-	59	8,616	750
10	-	-	60	9,092	791
11	-	-	61	9,529	829
12	-	-	62	9,987	869
13	-	-	63	10,466	911
14	-	-	64	10,967	954
15	-	-	65	11,494	1,000
16	-	-	66	12,070	1,050
17	-	-	67	12,673	1,103
18	2,476	215	68	13,306	1,158
19	2,476	215	69	13,971	1,215
20	2,481	216	70	14,670	1,276
21	2,508	218	71	15,432	1,343
22	2,536	221	72	16,234	1,412
23	2,606	227	73	17,079	1,486
24	2,670	232	74	17,967	1,563
25	2,735	238	75	18,902	1,644
26	2,800	244	76	19,922	1,733
27	2,870	250	77	20,998	1,827
28	2,940	256	78	22,132	1,925
29	3,010	262	79	23,328	2,030
30	3,084	268	80	24,585	2,139
31	3,158	275	81*	24,832	2,160
32	3,235	281	82*	25,080	2,182
33	3,315	288	83*	25,331	2,204
34	3,395	295	84*	25,583	2,226
35	3,436	299	85*	25,840	2,248
36	3,451	300	86*	26,098	2,271
37	3,492	304	87*	26,360	2,293
38	3,575	311	88*	26,624	2,316
39	3,645	317	89*	26,891	2,340
40	3,836	334	90*	27,160	2,363
41	3,976	346	91*	27,430	2,386
42	4,121	359	92*	27,703	2,410
43	4,272	372	93*	27,981	2,434
44	4,428	385	94*	28,259	2,459
45	4,675	407	95*	28,540	2,483
46	4,848	422	96*	28,826	2,508
47	5,025	437	97*	29,117	2,533
48	5,208	453	98*	29,408	2,558
49	5,400	470	99*	29,701	2,584

* These rates apply only to Policy Renewal. 此保費只供續保之用。

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2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (SMM) - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 靈活計劃 (附加保障) - 標準保費表 (2023年7月1日生效)

Premium for Smoker 吸煙人士保費

Cigna VHIS Series - Flexi Plan (SMM) 信諾自願醫保系列-靈活計劃 (附加保障)					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	-	-	50	9,989	869
1	-	-	51	10,428	907
2	-	-	52	10,887	947
3	-	-	53	11,364	989
4	-	-	54	11,866	1,032
5	-	-	55	12,665	1,102
6	-	-	56	13,249	1,153
7	-	-	57	13,857	1,206
8	-	-	58	14,496	1,261
9	-	-	59	15,162	1,319
10	-	-	60	16,069	1,398
11	-	-	61	16,839	1,465
12	-	-	62	17,648	1,535
13	-	-	63	18,494	1,609
14	-	-	64	19,382	1,686
15	-	-	65	20,311	1,767
16	-	-	66	21,327	1,855
17	-	-	67	22,395	1,948
18	4,216	367	68	23,514	2,046
19	4,216	367	69	24,691	2,148
20	4,292	373	70	25,923	2,255
21	4,346	378	71	27,272	2,373
22	4,406	383	72	28,690	2,496
23	4,520	393	73	30,182	2,626
24	4,631	403	74	31,752	2,762
25	4,744	413	75	33,402	2,906
26	4,860	423	76	35,206	3,063
27	4,979	433	77	37,106	3,228
28	5,099	444	78	39,110	3,403
29	5,223	454	79	41,223	3,586
30	5,422	472	80	43,447	3,780
31	5,556	483	81*	43,883	3,818
32	5,690	495	82*	44,321	3,856
33	5,830	507	83*	44,764	3,894
34	5,971	519	84*	45,211	3,933
35	6,083	529	85*	45,664	3,973
36	6,101	531	86*	46,120	4,012
37	6,177	537	87*	46,581	4,053
38	6,331	551	88*	47,047	4,093
39	6,468	563	89*	47,518	4,134
40	6,786	590	90*	47,993	4,175
41	7,035	612	91*	48,473	4,217
42	7,291	634	92*	48,958	4,259
43	7,559	658	93*	49,448	4,302
44	7,835	682	94*	49,942	4,345
45	8,197	713	95*	50,442	4,388
46	8,497	739	96*	50,946	4,432
47	8,806	766	97*	51,457	4,477
48	9,128	794	98*	51,970	4,521
49	9,462	823	99*	52,489	4,567

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 靈活計劃 (優越) - 標準保費表 (2023年7月1日生效)

Premium for Smoker 吸煙人士保費

Cigna VHIS Series - Flexi Plan (Superior) 信諾自願醫保系列-靈活計劃 (優越)														
Accommodation Room Type: Standard Ward 病房類別：普通病房														
Age 年齡	Deductible Option 自付費選項													
	HK\$0		HK\$15,000		HK\$25,000		Age 年齡	HK\$0		HK\$15,000		HK\$25,000		
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳		Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳
0	-	-	-	-	-	-	50	18,970	1,650	10,174	885	9,025	785	
1	-	-	-	-	-	-	51	19,899	1,731	10,673	929	9,467	824	
2	-	-	-	-	-	-	52	20,875	1,816	11,196	974	9,931	864	
3	-	-	-	-	-	-	53	21,897	1,905	11,745	1,022	10,418	906	
4	-	-	-	-	-	-	54	22,970	1,998	12,320	1,072	10,928	951	
5	-	-	-	-	-	-	55	24,095	2,096	12,924	1,124	11,464	997	
6	-	-	-	-	-	-	56	25,277	2,199	13,558	1,180	12,026	1,046	
7	-	-	-	-	-	-	57	26,514	2,307	14,222	1,237	12,615	1,098	
8	-	-	-	-	-	-	58	27,814	2,420	14,919	1,298	13,233	1,151	
9	-	-	-	-	-	-	59	29,178	2,538	15,651	1,362	13,881	1,208	
10	-	-	-	-	-	-	60	30,606	2,663	16,417	1,428	14,562	1,267	
11	-	-	-	-	-	-	61	32,106	2,793	17,221	1,498	15,275	1,329	
12	-	-	-	-	-	-	62	33,679	2,930	18,065	1,572	16,022	1,394	
13	-	-	-	-	-	-	63	35,329	3,074	18,950	1,649	16,807	1,462	
14	-	-	-	-	-	-	64	37,061	3,224	19,879	1,729	17,631	1,534	
15	-	-	-	-	-	-	65	38,877	3,382	20,852	1,814	18,495	1,609	
16	-	-	-	-	-	-	66	40,782	3,548	21,875	1,903	19,401	1,688	
17	-	-	-	-	-	-	67	42,780	3,722	22,946	1,996	20,352	1,771	
18	6,897	600	3,699	322	3,281	285	68	44,876	3,904	24,070	2,094	21,348	1,857	
19	7,170	624	3,846	335	3,412	297	69	47,075	4,096	25,250	2,197	22,395	1,948	
20	7,443	648	3,993	347	3,543	308	70	49,382	4,296	26,486	2,304	23,493	2,044	
21	7,634	664	4,095	356	3,633	316	71	51,801	4,507	27,785	2,417	24,644	2,144	
22	7,832	681	4,200	365	3,727	324	72	54,339	4,727	29,146	2,536	25,851	2,249	
23	8,032	699	4,308	375	3,825	333	73	57,001	4,959	30,574	2,660	27,117	2,359	
24	8,239	717	4,419	384	3,921	341	74	59,795	5,202	32,072	2,790	28,446	2,475	
25	8,451	735	4,533	394	4,022	350	75	62,725	5,457	33,644	2,927	29,840	2,596	
26	8,669	754	4,650	405	4,126	359	76	65,798	5,724	35,292	3,070	31,302	2,723	
27	8,891	774	4,769	415	4,231	368	77	69,022	6,005	37,022	3,221	32,836	2,857	
28	9,120	793	4,891	426	4,340	378	78	72,405	6,299	38,835	3,379	34,445	2,997	
29	9,355	814	5,017	436	4,452	387	79	75,953	6,608	40,738	3,544	36,133	3,144	
30	9,594	835	5,146	448	4,567	397	80	79,674	6,932	42,734	3,718	37,903	3,298	
31	9,844	856	5,279	459	4,684	408	81*	83,180	7,237	44,614	3,881	39,570	3,443	
32	10,096	878	5,415	471	4,804	418	82*	86,840	7,555	46,577	4,052	41,312	3,594	
33	10,355	901	5,555	483	4,927	429	83*	90,662	7,888	48,626	4,230	43,129	3,752	
34	10,623	924	5,698	496	5,055	440	84*	94,651	8,235	50,766	4,417	45,027	3,917	
35	10,895	948	5,843	508	5,183	451	85*	98,815	8,597	52,999	4,611	47,009	4,090	
36	11,176	972	5,994	521	5,317	463	86*	103,163	8,975	55,331	4,814	49,077	4,270	
37	11,464	997	6,148	535	5,456	475	87*	107,703	9,370	57,767	5,026	51,237	4,458	
38	11,757	1,023	6,306	549	5,595	487	88*	112,441	9,782	60,308	5,247	53,491	4,654	
39	12,059	1,049	6,468	563	5,739	499	89*	117,389	10,213	62,961	5,478	55,845	4,859	
40	12,419	1,080	6,660	579	5,910	514	90*	122,554	10,662	65,731	5,719	58,302	5,072	
41	12,912	1,123	6,925	602	6,142	534	91*	127,946	11,131	68,624	5,970	60,867	5,295	
42	13,475	1,172	7,228	629	6,411	558	92*	133,576	11,621	71,643	6,233	63,545	5,528	
43	14,064	1,224	7,544	656	6,692	582	93*	139,454	12,132	74,794	6,507	66,342	5,772	
44	14,678	1,277	7,873	685	6,985	608	94*	145,589	12,666	78,086	6,793	69,261	6,026	
45	15,320	1,333	8,216	715	7,289	634	95*	151,996	13,224	81,522	7,092	72,308	6,291	
46	15,989	1,391	8,577	746	7,606	662	96*	158,683	13,805	85,108	7,404	75,490	6,568	
47	16,685	1,452	8,949	779	7,939	691	97*	165,666	14,413	88,853	7,730	78,811	6,857	
48	17,416	1,515	9,341	813	8,285	721	98*	172,955	15,047	92,762	8,070	82,279	7,158	
49	18,176	1,581	9,749	848	8,648	752	99*	180,565	15,709	96,844	8,425	85,900	7,473	

* These rates apply only to Policy Renewal. 此保費只供續保之用。
1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2023)
信諾自願醫保系列 - 靈活計劃 (優越) - 標準保費表 (2023年7月1日生效)

Premium for Smoker 吸煙人士保費

Cigna VHIS Series - Flexi Plan (Superior) 信諾自願醫保系列-靈活計劃 (優越)										
Age 年齡	Accommodation Room Type: Semi-Private Room 病房類別：半私家病房									
	Deductible Option 自付費選項									
	HK\$0		HK\$15,000		HK\$25,000		HK\$50,000		HK\$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
0	-	-	-	-	-	-	-	-	-	-
1	-	-	-	-	-	-	-	-	-	-
2	-	-	-	-	-	-	-	-	-	-
3	-	-	-	-	-	-	-	-	-	-
4	-	-	-	-	-	-	-	-	-	-
5	-	-	-	-	-	-	-	-	-	-
6	-	-	-	-	-	-	-	-	-	-
7	-	-	-	-	-	-	-	-	-	-
8	-	-	-	-	-	-	-	-	-	-
9	-	-	-	-	-	-	-	-	-	-
10	-	-	-	-	-	-	-	-	-	-
11	-	-	-	-	-	-	-	-	-	-
12	-	-	-	-	-	-	-	-	-	-
13	-	-	-	-	-	-	-	-	-	-
14	-	-	-	-	-	-	-	-	-	-
15	-	-	-	-	-	-	-	-	-	-
16	-	-	-	-	-	-	-	-	-	-
17	-	-	-	-	-	-	-	-	-	-
18	8,659	753	4,832	420	4,246	369	3,552	309	3,010	262
19	9,003	783	5,024	437	4,414	384	3,693	321	3,130	272
20	9,345	813	5,241	456	4,606	401	3,852	335	3,265	284
21	9,585	834	5,375	468	4,723	411	3,952	344	3,348	291
22	9,833	855	5,514	480	4,845	422	4,054	353	3,435	299
23	10,084	877	5,654	492	4,972	433	4,157	362	3,524	307
24	10,345	900	5,800	505	5,098	444	4,263	371	3,614	314
25	10,658	927	5,978	520	5,253	457	4,394	382	3,724	324
26	10,932	951	6,132	533	5,390	469	4,508	392	3,821	332
27	11,212	975	6,289	547	5,527	481	4,623	402	3,919	341
28	11,502	1,001	6,450	561	5,669	493	4,742	413	4,020	350
29	11,798	1,026	6,617	576	5,816	506	4,864	423	4,124	359
30	12,099	1,053	6,882	599	6,050	526	5,059	440	4,289	373
31	12,415	1,080	7,061	614	6,206	540	5,191	452	4,401	383
32	12,732	1,108	7,243	630	6,365	554	5,325	463	4,513	393
33	13,059	1,136	7,429	646	6,529	568	5,460	475	4,629	403
34	13,398	1,166	7,621	663	6,698	583	5,601	487	4,749	413
35	13,801	1,201	7,815	680	6,868	598	5,744	500	4,871	424
36	14,155	1,231	8,018	698	7,045	613	5,893	513	4,996	435
37	14,521	1,263	8,224	715	7,229	629	6,045	526	5,124	446
38	14,893	1,296	8,435	734	7,413	645	6,201	539	5,255	457
39	15,275	1,329	8,651	753	7,603	661	6,359	553	5,391	469
40	15,730	1,369	8,849	770	7,779	677	6,506	566	5,515	480
41	16,356	1,423	9,202	801	8,085	703	6,761	588	5,735	499
42	17,068	1,485	9,604	836	8,439	734	7,057	614	5,984	521
43	17,814	1,550	10,024	872	8,808	766	7,366	641	6,245	543
44	18,592	1,618	10,462	910	9,194	800	7,687	669	6,518	567
45	19,405	1,688	10,989	956	9,658	840	8,075	703	6,848	596
46	20,252	1,762	11,471	998	10,078	877	8,431	733	7,148	622
47	21,134	1,839	11,970	1,041	10,518	915	8,797	765	7,459	649
48	22,060	1,919	12,493	1,087	10,977	955	9,181	799	7,785	677
49	23,023	2,003	13,039	1,134	11,460	997	9,580	833	8,125	707

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2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。

3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。

4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。

5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2023)

信諾自願醫保系列 - 靈活計劃 (優越) - 標準保費表 (2023年7月1日生效)

Premium for Smoker 吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列-靈活計劃 (優越)										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK\$0		HK\$15,000		HK\$25,000		HK\$50,000		HK\$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
50	24,555	2,136	13,735	1,195	12,072	1,050	10,095	878	8,560	745
51	25,758	2,241	14,409	1,254	12,662	1,102	10,590	921	8,979	781
52	27,021	2,351	15,116	1,315	13,283	1,156	11,108	966	9,420	820
53	28,344	2,466	15,855	1,379	13,934	1,212	11,652	1,014	9,880	860
54	29,734	2,587	16,633	1,447	14,616	1,272	12,224	1,063	10,365	902
55	31,457	2,737	17,819	1,550	15,663	1,363	13,097	1,139	11,107	966
56	33,000	2,871	18,693	1,626	16,430	1,429	13,740	1,195	11,651	1,014
57	34,616	3,012	19,609	1,706	17,236	1,500	14,414	1,254	12,222	1,063
58	36,312	3,159	20,570	1,790	18,080	1,573	15,121	1,316	12,820	1,115
59	38,094	3,314	21,578	1,877	18,966	1,650	15,862	1,380	13,449	1,170
60	40,128	3,491	23,353	2,032	20,532	1,786	17,173	1,494	14,560	1,267
61	42,094	3,662	24,497	2,131	21,538	1,874	18,014	1,567	15,273	1,329
62	44,157	3,842	25,698	2,236	22,592	1,966	18,896	1,644	16,022	1,394
63	46,321	4,030	26,957	2,345	23,698	2,062	19,822	1,725	16,806	1,462
64	48,591	4,227	28,278	2,460	24,860	2,163	20,794	1,809	17,631	1,534
65	50,971	4,434	30,626	2,664	26,934	2,343	22,529	1,960	19,101	1,662
66	53,469	4,652	32,129	2,795	28,252	2,458	23,632	2,056	20,037	1,743
67	56,089	4,880	33,701	2,932	29,638	2,579	24,790	2,157	21,019	1,829
68	58,837	5,119	35,352	3,076	31,088	2,705	26,005	2,262	22,049	1,918
69	61,720	5,370	37,085	3,226	32,612	2,837	27,278	2,373	23,128	2,012
70	64,745	5,633	38,902	3,384	34,211	2,976	28,615	2,490	24,262	2,111
71	67,917	5,909	40,809	3,550	35,887	3,122	30,019	2,612	25,451	2,214
72	71,245	6,198	42,808	3,724	37,646	3,275	31,489	2,740	26,697	2,323
73	74,735	6,502	44,906	3,907	39,490	3,436	33,031	2,874	28,005	2,436
74	78,397	6,821	47,106	4,098	41,424	3,604	34,651	3,015	29,378	2,556
75	82,239	7,155	49,413	4,299	43,455	3,781	36,347	3,162	30,818	2,681
76	86,269	7,505	51,834	4,510	45,584	3,966	38,128	3,317	32,328	2,813
77	90,495	7,873	54,375	4,731	47,817	4,160	39,997	3,480	33,911	2,950
78	94,931	8,259	57,039	4,962	50,160	4,364	41,956	3,650	35,573	3,095
79	99,583	8,664	59,835	5,206	52,618	4,578	44,011	3,829	37,317	3,247
80	103,798	9,030	62,406	5,429	54,877	4,774	45,900	3,993	38,917	3,386
81*	107,672	9,367	64,775	5,635	56,957	4,955	47,641	4,145	40,393	3,514
82*	111,686	9,717	67,231	5,849	59,115	5,143	49,445	4,302	41,924	3,647
83*	115,845	10,079	69,779	6,071	61,351	5,338	51,316	4,464	43,510	3,785
84*	120,154	10,453	72,421	6,301	63,671	5,539	53,256	4,633	45,156	3,929
85*	124,617	10,842	75,159	6,539	66,077	5,749	55,267	4,808	46,861	4,077
86*	129,240	11,244	78,000	6,786	68,569	5,966	57,353	4,990	48,629	4,231
87*	134,030	11,661	80,945	7,042	71,155	6,190	59,515	5,178	50,463	4,390
88*	138,990	12,092	83,997	7,308	73,835	6,424	61,756	5,373	52,362	4,555
89*	144,127	12,539	87,161	7,583	76,612	6,665	64,080	5,575	54,333	4,727
90*	149,448	13,002	90,442	7,868	79,491	6,916	66,487	5,784	56,375	4,905
91*	154,958	13,481	93,843	8,164	82,475	7,175	68,983	6,002	58,490	5,089
92*	160,662	13,978	97,366	8,471	85,568	7,444	71,570	6,227	60,684	5,280
93*	166,570	14,492	101,019	8,789	88,773	7,723	74,251	6,460	62,957	5,477
94*	172,685	15,024	104,806	9,118	92,096	8,012	77,029	6,702	65,313	5,682
95*	179,018	15,575	108,729	9,459	95,537	8,312	79,909	6,952	67,755	5,895
96*	185,572	16,145	112,795	9,813	99,104	8,622	82,893	7,212	70,284	6,115
97*	192,356	16,735	117,009	10,180	102,799	8,944	85,984	7,481	72,905	6,343
98*	199,378	17,346	121,374	10,560	106,629	9,277	89,186	7,759	75,621	6,579
99*	206,647	17,978	125,897	10,953	110,596	9,622	92,503	8,048	78,432	6,824

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。

2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。

3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。

4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。

5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。



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