

PRUmed lifelong care plan

Comprehensive coverage for medical treatment costs



Health Insurance

PRUDENTIAL
英國保誠

PRUmed lifelong care plan

You work hard for your future. Financial security is important to you – and so is your health. **PRU**med lifelong care plan, a comprehensive medical plan that offers the most attractive range of in-patient and out-patient surgery benefits, together with guaranteed whole life renewability¹. **PRU**med lifelong care plan provides essential financial protection against the costs of medical treatment, so you need not bother about high medical costs or limited health services provided by public hospitals. Instead, you have the peace of mind to focus on your speedy recovery.

Plan highlights



A total solution for lifelong medical protection



Comprehensive coverage to reimburse you for medically necessary expenses



Extra coverage for total peace of mind

The benefits

- **A total solution for lifelong medical protection**

PRUmed lifelong care plan is a lifelong supplementary plan for reimbursement of covered medical expenses. The plan guarantees yearly renewability, and the renewal premiums are based on the premium rate applicable¹ and the age of the person covered by the policy (the "life assured") at the time of renewal. There are three benefit levels to choose from – Private, Semi-Private and Ward – offering you different coverage levels in terms of treatment and accommodation. To encourage you to maintain good health, the plan is designed to provide a No Claim Bonus², giving you extra savings on premium. **PRU**med lifelong care plan is available to any person aged from 1³ to 75 (age next birthday [ANB]), and offers you worldwide coverage⁴ with both US Dollar- and HK Dollar-denominated options.

- **Comprehensive coverage to reimburse you for medically necessary expenses**



Confinement Benefits

You will be reimbursed for basic hospital expenses including hospital daily room and board, doctor's visit, specialist's visit, intensive care, a daily extra bed for family member and miscellaneous hospital expenses, such as fees for laboratory, imaging examinations, medications and injections.



Surgical Benefits

If a surgical procedure or operation is performed in a hospital, you will be reimbursed for its surgical, operating theatre and anaesthetist's fees.



Emergency Out-Patient Treatment Benefit

In the event of injury caused by an accident, you will be reimbursed for medical expenses necessarily incurred for emergency out-patient treatment carried out in a hospital within 24 hours of the accident's occurrence.



Pre- & Post-hospitalisation benefits

If an injury or illness arises from the same cause that requires hospital confinement, both the pre-admission and follow-up out-patient consultation fees will be reimbursed. In addition, should you need treatment from a chiropractor/physiotherapist or post-surgery home nursing after hospitalisation, you will receive reimbursement for the expenses incurred.



Out-Patient surgery benefits

If a surgical procedure or operation is performed in a day surgery centre or a clinic of a registered doctor, you will be reimbursed for the expenses related to the surgery including (if applicable) the surgical fees, anaesthetist's fees, operating theatre fees, hospital daily room & board and miscellaneous expenses which are necessarily incurred. The plan will also provide reimbursement for the expenses of pre- & post-surgery consultation, chiropractor/physiotherapist consultation and daily post-surgery home nursing.



No claim bonus

To encourage you to maintain good health, a No Claim Bonus is provided. You will be entitled to the bonus on each policy anniversary of the basic plan to which **PRU**med lifelong care plan is attached, provided that the plan has been in force and effective during the relevant anniversary's previous 36 consecutive months ("relevant period"); and no benefit has been paid or is payable under the plan during the same relevant period. In addition, any benefits paid for performing selected surgical procedures² such as colonoscopy and/or gastroscopy in a day surgery centre or a clinic of a registered doctor will not affect your eligibility for the No Claim Bonus.

The No Claim Bonus is equal to 15% of the total premiums paid under the **PRU**med lifelong care plan during the year immediately preceding the relevant policy anniversary and will be deposited into your premium deposit account for future premium payment².

- **Extra coverage for total peace of mind**



24-Hour worldwide emergency assistance services

In case an accident happens or if you suffer from an illness while travelling outside Hong Kong, emergency evacuation and repatriation cover will be provided⁵.



Death benefits

In the event of death, we will provide a Compassionate Death Benefit of up to USD 5,000 / HKD 40,000. In case of accidental death, an additional Accidental Death Benefit of up to USD 5,000 / HKD 40,000 will be provided. If the death is caused by medical negligence, an additional benefit of up to USD 43,000 / HKD 344,000 will be paid.



Opt for PRUmed major to cover extra expenses

By paying additional premiums, you can add the **PRUmed** major to your **PRUmed** lifelong care plan to enjoy supplementary reimbursement benefits. In cases where your overall medically necessary expenses exceed the maximum limit covered by the **PRUmed** lifelong care plan, 80% of the part in excess can be covered by **PRUmed** major, subject to its daily and overall maximum limits^{6,7 & 8}.

- **Handling medical expenses for a worry-free recovery is easy!**

Simply enroll in **PRUmed** lifelong care plan and you can enjoy lifelong medical protection with guaranteed renewability¹. For further details, please contact your consultant or call our Customer Service Hotline at 2281 1333.

Benefit Schedule

Coverage ⁹	Maximum Benefit Limit ¹⁰					
	Ward		Semi-Private		Private	
	USD	HKD	USD	HKD	USD	HKD
I. Confinement Benefits¹¹						
1. Hospital Daily Room & Board ¹² (per day) Max. no. of days per confinement: 90	100	800	225	1,800	450	3,600
2. Doctor's Visit (per day) Max. no. of days per confinement: 90	100	800	225	1,800	450	3,600
3. Miscellaneous Hospital Expenses (per confinement)	1,250	10,000	2,500	20,000	3,300	26,400
4. Intensive Care (per day) Max. no. of days per confinement: 90	400	3,200	700	5,600	1,100	8,800
5. Specialist's Visit (per confinement)	350	2,800	700	5,600	1,300	10,400
6. Daily Extra Bed for Family Member (per day) Max. no. of days per confinement: 90	75	600	100	800	125	1,000
II. Surgical Benefits¹³						
1. Surgical Fees ¹⁴ (per confinement)	5,000	40,000	7,500	60,000	11,000	88,000
2. Anaesthetist's Fees (per confinement)	35% of surgical fees payable					
3. Operating Theatre Fees (per confinement)	35% of surgical fees payable					
III. Emergency Out-Patient Treatment Benefit						
1. Emergency Out-Patient Treatment Benefit (per injury)	700	5,600	1,200	9,600	1,700	13,600
IV. Pre- & Post-Hospitalisation Benefits						
1. Pre-Admission and Follow-Up Out-Patient Consultation (per confinement) <ul style="list-style-type: none"> • No. of consultations per day: 1 • No. of Pre-Admission Out-Patient Consultation: 1 • Max. no. of Follow-Up Out-Patient Consultations: 3 • Validity for Follow-Up Out-Patient Consultations: within 60 days after confinement, or a surgical procedure or operation performed in a day surgery centre or in a clinic of a registered doctor 	175	1,400	275	2,200	375	3,000
2. Daily Post-Surgery Home Nursing (per day) <ul style="list-style-type: none"> • No. of visits per day by a licensed nurse: 1 • Max. no. of visits: 15 • Validity: within 31 days after confinement, or a surgical procedure or operation performed in a day surgery centre or in a clinic of a registered doctor 	75	600	75	600	170	1,360

Coverage ⁹	Maximum Benefit Limit ¹⁰					
	Ward		Semi-Private		Private	
	USD	HKD	USD	HKD	USD	HKD
3. Chiropractor/Physiotherapist Consultation (per day)	50	400	70	560	90	720
<ul style="list-style-type: none"> No. of visits per day to a licensed chiropractor or physiotherapist: 1 Max. no. of visits: 10 Validity: within 90 days after confinement, or a surgical procedure or operation performed in a day surgery centre or in a clinic of a registered doctor 						
V. Death Benefits						
1. Compassionate Death Benefit	1,000	8,000	2,500	20,000	5,000	40,000
2. Accidental Death Benefit ¹⁵	1,000	8,000	2,500	20,000	5,000	40,000
3. Medical Accident and Incident Extension Benefit ¹⁵	11,000	88,000	22,000	176,000	43,000	344,000
VI. PRUmed major (applicable to items I – IV listed in the Benefit Schedule)						
1. Total amount payable under PRUmed major ^{6, 7 & 8} (per injury/confinement)	12,500	100,000	22,500	180,000	42,000	336,000
Total amount payable under PRUmed major (per lifetime)	A PRUmed major Lifetime Limit of USD 150,000 / HKD 1,200,000 will apply starting from the policy anniversary immediately after the life assured has reached age 75 (ANB). The Lifetime Limit is the absolute cap on all amounts payable in aggregate from the PRUmed major issued in relation to your PRUmed lifelong care plan for the lifetime counting from the policy anniversary immediately after the life assured has reached age 75 (ANB). Once this limit is in effect, the PRUmed major shall be immediately terminated when the absolute cap has been reached.					

Key exclusions

We will not provide coverage under the plan under any of the following circumstances:

- (I) if the injury, illness, or the signs or symptoms of the illness existed before the effective date of the plan or the effective date of reinstatement, whichever is later; or
- (II) if the illness is diagnosed or the signs and symptoms of the illness appeared within 30 days from the effective date of the plan or the effective date of reinstatement; or
- (III) if the confinement, treatment and/or charges incurred are related to or arise as a direct or indirect result of:
 - a. pregnancy, childbirth, termination of pregnancy, birth control, infertility or human assisted reproduction; or
 - b. war, hostilities (whether war is declared or not), rebellion, insurrection, riot, civil commotion or the life assured's participation in any criminal offence; or
 - c. suicide, self-inflicted injuries while sane or insane, drug abuse, consumption of alcohol, scuba diving or engaging in or taking part in any kind of race other than on foot; or
 - d. cosmetic treatment, corrective aids performed on the life assured unless necessitated by an injury caused by an accident and the life assured sustains the injury within 90 days of the accident; or
 - e. procurement or use of appliances for the benefit of the life assured; or experimental and/or unconventional medical technology/procedure performed on the life assured; or
 - f. vaccination, convalescence, dental treatment or surgery (except for emergency treatment arising from an accident and cannot be done on an outpatient basis), health check-ups, treatment or tests that relate to AIDS, HIV or AIDS related complex; or
 - g. mental disorder, psychological or psychiatric conditions; or
 - h. congenital or inherited disorder or developmental conditions (only applicable before the life assured reaches age 17 [ANB]); or
 - i. any services primarily for physiotherapy or for the investigation of signs and/or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures; or
 - j. any treatment, investigation, services or supplies which are not medically necessary; or non-medical services; or charges of which exceed the reasonable and customary charges.

For more details on exclusions, please refer to the relevant policy provisions.

More about PRUmed lifelong care plan

- **Which product category and plan type does PRUmed lifelong care plan belong to?**
PRUmed lifelong care plan is a health insurance, and is a supplementary benefit.
- **What are the premium term, benefit term, issue ages and currency options for PRUmed lifelong care plan?**

Premium term/ Benefit term	Issue age (ANB)	Currency option
Whole life	1-75	HKD/USD

- **Does the plan guarantee lifelong renewability? Will there be any changes to the premium?**
The plan guarantees annual renewability. An anniversary statement will be sent to you one month in advance of the policy anniversary. The statement will inform you of the renewal premiums, which will be based on the premium rate applicable and the age of the life assured at the time of renewal. We reserve the right to review the premium rates at each renewal, and adjust the premium rates accordingly across a particular risk class.
- **What will be excluded from the coverage of PRUmed lifelong care plan?**
For a summary, please refer to the section on "major exclusions". For details in full, please refer to the section headed "What is not covered?" in the policy provision. A specimen of the policy provision will be provided upon request.
- **How does the plan define "pre-existing conditions" and why are pre-existing conditions excluded from the plan?**
"Pre-existing conditions" are defined as the injury, illness, or the signs or symptoms of the illness which had existed before the effective date of the plan or the date of any reinstatement, whichever is later. It is common for health insurance plans to exclude pre-existing conditions, as our intention is to protect you from an uncertain future and not to cover any existing condition.
- **Is there any "waiting period" for the plan and how does the plan define it?**
There are 30 days waiting period from the effective date of the plan or the date of reinstatement. Any illnesses which the signs and symptoms appear or are diagnosed by a registered doctor within 30 days from the effective date of the plan or the date of reinstatement will be not covered under the plan.
- **How does the plan define "medically necessary"?**
Being a prudent insurance company, we have responsibility to control medical claims so as to maintain affordable health insurance premiums. By "medically necessary", we are referring to a medical service that is consistent with the diagnosis and customary medical treatment for the condition. The medical service should also conform to standards of generally accepted medical practice and not just for the convenience of the life assured, his/her relatives or the registered doctor. In case of hospital confinement, the medical service should be performed on the basis that the medical symptoms or conditions of the life assured cannot be safely provided without hospital confinement.
- **How does the plan define "reasonable and customary charges"?**
"Reasonable and customary charges" are charges for treatment, medical services and/or supplies that are in line with the usual level of charges for similar treatment, medical services and/or supplies in the locality where the expenses are incurred.

- **How does the plan define "confinement"?**

We define "confinement" as the life assured's admission by a hospital as an in-patient for medically necessary services/treatments under the recommendation of a registered doctor for a minimum of 6 consecutive hours which incurs a charge for hospital daily room and board or intensive care by the hospital. The life assured shall be deemed to be under one single confinement when: (a) two or more confinements are caused by the same or a directly related injury or illness and these confinements are not separated from each other by more than 90 days between the earlier and the later confinement; or (b) the life assured undergoes a surgical procedure or operation either in a day surgery centre or a clinic of a registered doctor and has also been (whether before or after within an interval of 90 days) admitted into a hospital due to the same or a directly related injury or illness.

- **How does the plan classify surgery?**

With reference to the degree of complexity of operation, surgeries are classified into different categories, which represent different percentages of benefits payable. For details, please refer to the policy provision.

- **When will we terminate this plan?**

We will terminate this plan when the first of these happens: death of the life assured; or you fail to pay your premium within one calendar month from its due date; or the basic plan to which this plan is attached terminates.

- **When will we terminate the benefits of PRUmed major?**

We will terminate PRUmed major when the first of these happens: termination of PRUmed lifelong care plan; or the total amounts payable under PRUmed major covering the Life Assured reaches its Lifetime Limit.

Remarks

- 1 We reserve the right to review the premium rates at each renewal and to adjust the premium rates accordingly across a particular risk class.
- 2 Selected surgical procedures in day surgery centre or clinic of a registered doctor include colonoscopy, esophagoscopy, gastroscopy, duodenoscopy, microlaryngoscopy, sigmoidoscopy, excision of tumour/cyst under skin and subcutaneous tissue, wart excision and cataract extraction. For details, please refer to the policy provision. Except for these selected surgical procedures, if any claim relating to any of the relevant period under the **PRU**med lifelong care plan becomes subsequently payable after a No Claim Bonus has been paid, we shall set-off such bonus paid from the amount of claim payable, failing which we shall recover the bonus from you in full as a debt.
- 3 The age of 1 (ANB) means that the life proposed must be at least 30 days old when the proposal form is signed.
- 4 Eligible medical expenses necessarily incurred overseas will also be covered in the same way as if they are incurred in Hong Kong without any additional reimbursement discount.
- 5 24-Hour Worldwide Emergency Assistance Services is provided by our designated service provider, and we reserve the right to review and revise the details, the terms and conditions, and the provider of the service at any time and from time to time.
- 6 Under **PRU**med major, we will, subject to maximum benefit limits, reimburse you 80% of the costs and charges which are medically necessary and which are in excess of the amount payable under the **PRU**med lifelong care plan according to your selected benefit level. **PRU**med major covers items I – IV listed in the Benefit Schedule. The items I.1, I.2, I.4 and I.6 will be payable starting from the 91st day of confinement, while items IV.2 and IV.3 will be respectively payable from the 16th visit and 11th visit up to a respective maximum of 16 and 21 visits. Coverage under **PRU**med major will be subject to the daily and maximum benefit limits, and the Lifetime Limit as stated in the Benefit Schedule.
- 7 For Pre-Admission and Follow-Up Out-Patient Consultation's fees, **PRU**med major covers: (a) 80% of such fees being in excess of the amount payable under the **PRU**med lifelong care plan and (b) 80% of such fees (subject to maximum limits shown in the Benefit Schedule) being incurred for 1 additional Pre-Admission Out-Patient Consultation and 3 additional Follow-Up Out-Patient Consultation. For the Follow-Up Out-Patient Consultation, only 1 consultation per day is allowed within 60 days after confinement, or a surgical procedure or operation performed in a day surgery centre or a clinic of a registered doctor.
- 8 Benefits payable under **PRU**med major will be reduced if your confinement is of a higher level than what you are entitled to under the **PRU**med lifelong care plan. The expenses in excess of the amount payable under the **PRU**med lifelong care plan will be multiplied by the following factor before the application of 80%:
 - for an upgrade from semi-private level to private level or above: 50%
 - for an upgrade from ward level to semi-private level: 50%
 - for an upgrade from ward level to private level or above: 25%
- 9 All treatments, medical services, surgical procedures and/or operations for which coverage is provided under the **PRU**med lifelong care plan must be medically necessary and the charges should not exceed reasonable and customary charges. For details of how we define medically necessary and reasonable and customary charges, please refer to the policy.
- 10 We reserve the right to revise the benefits on each renewal by giving 30 days' written notice in advance.

- 11 Confinement is defined as the life assured's admission by a hospital as an in-patient for medically necessary services/treatments under the recommendation of a registered doctor for a minimum of 6 consecutive hours which incurs a charge for hospital daily room and board or intensive care by the hospital. The life assured shall be deemed to be under one single confinement when: (a) two or more confinements are caused by the same or a directly related injury or illness and these confinements are not separated from each other by more than 90 days between the earlier and the later confinement; or (b) the life assured undergoes a surgical procedure or operation either in a day surgery centre or a clinic of a registered doctor and has also been (whether before or after within an interval of 90 days) admitted into a hospital due to the same or a directly related injury or illness.
- 12 Coverage for daily meal expenses is limited to 30% of the daily maximum benefit limit under Hospital Daily Room and Board. The maximum amount of reimbursement per day for Hospital Daily Room and Board (including any meal expenses) shall not exceed its daily maximum benefit limit as specified in the Benefit Schedule of the plan.
- 13 If a surgical procedure or operation is performed in a day surgery centre or a clinic of a registered doctor, we will reimburse you for the expenses related to the surgery including (if applicable) the surgical fee, anaesthetist's fees and operating theatre fees under the Surgical Benefits. In addition, we will reimburse you for the expenses incurred and covered by categories (a) Hospital Daily Room and Board (if applicable) and (b) Miscellaneous Hospital Expenses under the Confinement Benefits; and all categories under the Pre- & Post-Hospitalisation Benefits.
- 14 The surgical fees payable per surgical procedure or operation are equal to the maximum benefit limit per confinement multiplied by the specified percentage of the surgical procedure or operation as listed in the Surgical Procedure Schedule of the policy. The percentage depends on the degree of complexity of the operation.
- 15 Benefit is payable in addition to Compassionate Death Benefit.

Key risks

How our credit risk may affect your policy?

The guaranteed cash value (if applicable) and insurance benefit of your plan are subject to our credit risk. If we become insolvent, you may lose the value of your policy and its coverage.

How currency exchange rate risk affects your return?

Foreign currency exchange rates may fluctuate. As a result, you may incur a substantial loss when you choose to convert your benefits to other currencies. Additionally, the conversion of your benefits to other currencies is subject to applicable exchange restrictions applicable at the time when the benefits are paid. You have the sole responsibility to decide if you want to convert your benefits to other currencies.

How inflation affects the value of your plan?

We expect the cost of living to rise in the future because of inflation. That means the insurance you take out today will not have the same buying power in the future, even if the plan offers increasing benefit intended to offset inflation.

What happens if you do not pay your premiums?

You should only apply for this product if you intend to pay all of its premiums. If you miss any of your premium payments, we may terminate your policy and you would lose the policy's coverage.

Why may your premiums be adjusted?

We have the right to review and adjust the plan's premium rates for particular risk classes on each policy anniversary, but not for any individual customer.

We may adjust premium rates because of several factors, such as our claims and persistency experience, medical price inflation, projected future medical costs and any applicable changes in benefit.

Why may your benefits be changed?

We have the right to revise the Benefit Schedule and the terms and conditions under this plan on each renewal by giving you 30 days' notice in writing. This is to account for any known or foreseeable changes in medical practices and claims experiences. We will apply the revisions to all policies under the plan. The premium will be adjusted accordingly based on the rate as determined by us.

Important information

Cancellation right

A customer who has bought the life insurance plans has a right to cancel the policy within the cooling-off period and obtain a refund of any premium(s) paid less any withdrawals. Provided that no claim has been made, the customer may cancel the policy by giving written notice to us within 21 days after: (1) the delivery of the policy or (2) the issuance of a notice (informing the availability of the policy and expiry date of the cooling-off period) to the customer/his/her representative, whichever is earlier. The premium will be refunded in the currency of premium payment at the time of application for this policy. If the currency of premium payment is not the same as the plan currency, the refundable premium amount in plan currency under this policy will be converted to the currency of premium payment at the prevailing currency exchange rate as determined by us in our absolute discretion from time to time upon payment. After the cooling-off period expires, if a customer cancels the policy before the end of benefit term, the actual cash value (if applicable) may be substantially less than the total amount of premiums paid.

Need more details? Get in touch

Please contact your consultant or call our Customer Service Hotline at 2281 1333 for more details.

Notes

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Prudential has the right to accept or decline any application based on the information provided by the policyholder and/or life assured in the application.

Please cross your cheque and make it payable to "Prudential Hong Kong Limited".

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