MyHealthCare Plus Medical Plan
Medical Protection

大新保險
DAH SING INSURANCE

A comprehensive medical indemnity product
Total care of your health & wellbeing

Dah Sing Insurance Company Limited

Together We Progress and Prosper

About Dah Sing Financial Group

Dah Sing Financial Group ("the Group") is a leading financial services group in Hong Kong, active in providing banking, insurance and other financial-related services in Hong Kong, Macau and Mainland China for more than 75 years.

About Dah Sing Insurance

Dah Sing Insurance Company Limited ("Dah Sing Insurance"/"Company"/"We"/"Our"/"Us"), is a wholly owned subsidiary of Dah Sing Financial Holdings Limited, has been providing general insurance solutions to our customers and business partners in Hong Kong since 1976.

Dah Sing Insurance is an authorized insurance company and regulated by the Insurance Authority of the Hong Kong Special Administrative Region. Our Financial Strength Rating is A- (Excellent) and Long-Term Issuer Credit Rating is A- were assigned by AM Best Rating from 2018 to 2023.

We strive to offer high-quality services and diversified insurance solutions to our customers, support different stages of your life, stand by you for every step to ensure you enjoy the life, live healthier and safer.

Diversified insurance protection:

You	**Medical Insurance**	Critical Illness	Personal Accident
Your property	Car Insurance	Home Insurance	Pet Medical
Your business	Property Insurance	Employee Compensation Insurance	Liabilities
Your life stages & lifestyle	Helper Insurance	Education Insurance	Travel Care

Dah Sing Insurance understands people are becoming more health conscious and we understand every single move counts. Your health and well beings is our Number 1 priority. As a trusted health companion to pair up with you throughout your health journey, we offer a wrap-round services and coverages to meet your medical needs, inclusive range of healthcare services from preventive, diagnosis, treatment and recovery, stand by you to ensure you live healthier and safer.

MyHealthCare Plus Medical Plan is a holistic hospital indemnity insurance solution, provides **full cover** for eligible hospitalization and surgical operation expenses as well as **day case surgery** in your selected area of cover, **up to HK$30[1] million per year**. The **annual benefit limit will be refreshed every year** with **no lifetime benefit limit** and **lifetime renewal[2]**, rest assured you to receive high-quality medical treatment throughout your life.

You can enjoy the convenience of **cashless credit facility at designated private hospitals** without worrying the financial burden of the huge medical cost at your difficult time.

We care about your wellbeing and understand early intervention gets you the best help, therefore we catch up with the dynamic growth and **Unlock DSi-con mobile app with complimentary virtual consultation services[3], "Digital Health Services" & "Health Passport"** enable you to access virtual medical consultation services at your fingertips to bounce back your health.

We value for your effort to protect against virus for availing vaccination and back you up for your proactive choice of immunization and provides you **first-in-market[4] - "Vaccination Benefit"**, cover your medical bills arising from Adverse Reaction Following Immunization and give you a lump sum benefit in the event of long-term disabilities following immunization.

There are **different deductible options** to suit your needs and budget. To better prepare for your health in different stages of your life, you can remove or lower your deductible at specific age or at specific life event[5] without underwriting. What's more, to embrace your health, **no claims premium discount** will be offered for specific claims free period. We are here to empower you along the way to live healthier and better.

[1] Refers to Plan 02.

[2] Subject to the terms and conditions of the policy.

[3] Virtual doctor consultation services shall refer to the "Digital Health Service" & "Health Passport" are value-added service provided by an independent third-party service provider and it does not form a part of the contractual benefit under your policy and is not a guarantee service.

[4] As of 30 June 2024, comparing with comprehensive medical products provided by Hong Kong major insurance companies.

[5] The date that the Insured Person attains the Age of fifty (50), fifty-five (55), sixty (60), sixty-five (65), seventy (70), seventy-five (75), eighty (80); or the first day of the Insured Person's life events – Study Abroad, University Graduation, Marriage or Childbirth.

KEY PRODUCT HIGHLIGHTS:

PEACE OF MIND PROTECTION & SERVICES:

1. Full Cover[6] for hospitalization and surgical expenses

with no itemized benefit sub-limit.

2. Annual Benefit Limit up to HK$30,000,000[7]

automatically refresh every Policy Year with No lifetime limit.

3. Day Case Surgery at designated day case centres

with cashless arrangement and surgical cash.

REMARKABLE IN THE MARKET[4]:

4. Complimentary unlimited[8] access to virtual consultation services[3]

Through "DSi-con" mobile app to access to Digital Health Service, virtual consultation service at our network General Practitioners, Specialists & Traditional Chinese Medicine Practitioners with a free of charge on the doctor consultation fee.

NEW IN THE MARKET[4]:

5. Vaccination Benefit

Your doctor consultation cost & hospitalization bills arising from adverse reaction following immunization of 28 covered vaccination[9] will be covered. A lump sum will be paid in the event of long-term disabilities following covered vaccinations.

REMARKABLE IN THE MARKET[4]:

6. Connected local & overseas virtual consultation service[3]

Through "DSi-con" mobile app to access to Health Passport[3], virtual consultation service to enjoy network virtual consultation services in Hong Kong or 5 selected overseas countries. It allows you to access to your virtual consultation service in Hong Kong and get door to door prescriptions at 5 Overseas Countries including Japan, Philippines, Thailand, Singapore and Vietnam which bridge the gap through our network doctors' connection.

[6] Full Cover is applicable for the following benefit items, Room and board, Miscellaneous charges, Attending doctor's visit fee, Specialist's fee, Intensive Care, Surgeon's fee, Anaesthetist's fee, Operating theatre charges, Prescribed Diagnostic Imaging Test & Prescribed Non-surgical Cancer Treatments.

[7] Refers to Plan 02.

[8] Unlimited shall mean there is no limitation on the choice of available options in one single day.

[9] Covered Vaccination refers to BCG, Cholera, Covid-19, Diphtheria, Hepatitis A, Hepatitis B, (Hib) Haemophilus Influenzae type b, Human Papillomavirus (HPV), Seasonal Influenza, Japanese Encephalitis, Malaria, Meningitis, Measles, Meningococcal group (B, C, W), Mumps, Pertussis (whooping cough), Pneumococcal Infection, Poliomyelitis, Rabies, Rotavirus, Rubella (German measles), Shingles Vaccine (Herpes Zoster), Smallpox, Swine Flu (H1N1 2009), Tetanus, Typhoid, Varicella/Chickenpox and Yellow Fever.

How DSI helps?

Outpatient visits & caring services and benefit to speed up your recovery

- **Post-outpatient care visits** after confinement or Day Case Surgery
- **DSi-con's Digital Health Services**[3,8] for **Second Medical Opinion**
- **Home Nursing** after discharge from Hospital
- **Major Diseases** (e.g. Home Facilities Enhancement Benefit)
- **Rehabilitation Centre**

Outpatient visits, vaccination benefit and health check-up discount coupon for early detection of your health issue

- **DSi-con's Digital Health Services**[3] (mild or severe symptoms, with or without hospitalization needs)
- **Health Checkup Discount Coupon** at policy inception and each policy anniversary date

Comprehensive coverages and outpatient visits to manage your health issues

- **Unique features: Digital Health Services** (Virtual consultation service with Western General Practitioner, Specialist, Traditional Chinese Medicine Practitioner in Hong Kong)
- **Unique features: Health Passport**[3] (Virtual consultation service with Western General Practitioner in 5 designated Overseas Countries)
- **New in market** Vaccination Benefit

- Up to HK$30M[7] Annual Benefit Limit with no Lifetime Limit
- Full Cover with no itemized sub-limit on the hospitalization and surgical expenses
- Full Cover for Prescribed Diagnostic Imaging Test (with no itemized sub-limit)
- Full Cover for Prescribed Non-surgical Cancer Treatment
- 26 coverage items (a-z in the Benefit Schedule)
- Major Disease Benefit (post-confinement ancillary benefit, waive Annual Deductible, Home Facilities Enhancement benefit)

Comprehensive coverages and outpatient visits to identify your health issues

- **Full Cover** for Prescribed Diagnostic Imaging Test (with no itemized sub-limit)
- **Pre-Confinement outpatient care** (for pre-confinement or pre-day case surgery)
- **DSi-con's Digital Health Services**[3] (for pre-confinement or pre-day case surgery assessment)

Totally Care of Your Customer Experience - YOUR SAFETY NET for Hospitalization & Day Case Surgery

1. In-Hospitalization - Your Hospitalization Expense

up to **HK$30,000,000[7] Annual Benefit Limit**

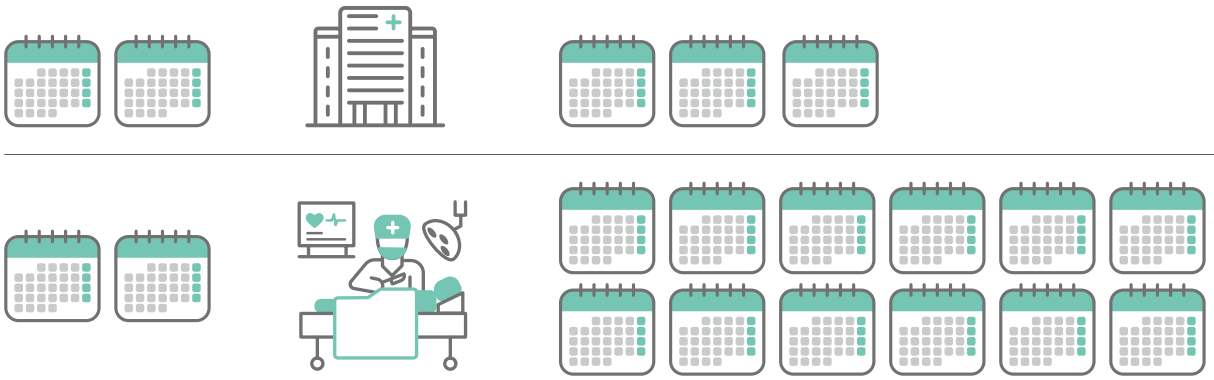
Cover the eligible expenses for medical service incurred during your hospitalization.

Full Cover[6] with no itemized benefit sub-limit

Cover Room and board, Miscellaneous charges, Attending doctor's visit fee, Specialist's fee, Intensive Care, Surgeon's fee, Anaesthetist's fee, Operating theatre charges, Prescribed Diagnostic Imaging Test & Prescribed Non-surgical Cancer Treatments.

2. Recovery Journey - Pre-confinement/Day Case Procedure Outpatient Care & Post-confinement/Day Case Procedure Outpatient Care

Outpatient visits are available to support your diagnosis and recovery journey



3. Day Case Surgery

One Stop Solution is available on DSi-con mobile app for our designated Day Case Surgery

One-stop service under DSi-con

Day Case Surgery Booking + Cashless Service

Network day-case centre

Day case Endoscopy

Way to recovery with cashless service

A prior consultation and referral from a Specialist through DSi-con is required (for day case Endoscopy).
The content in this product brochure is for reference only. For full terms, conditions, benefits and exclusions, please refer to the Policy Provision.
The Plan is a standalone medical insurance product. You can purchase this product without bundling with other insurance products.

Truly Care of Your Financial Burden - YOUR SAFETY NET for Major Diseases

Cancer

Stroke

Heart Attack

End Stage Kidney Failure

End Stage Lung Disease

Organ Transplantation
(Extra coverage for Insured Person be a Donor)

Unexpected diagnosis of serious illnesses, such as **Cancer, Stroke, Heart Attack, End Stage Kidney Failure, End Stage Lung Disease, Organ Transplantation**, may make you stress and bring financial burden on you. To ease your financial concerns, we **waive your Deductible**[10] and assist you to arrange **cashless arrangement service** for your hospitalization at our designated private hospitals in Hong Kong. Your physical and mental concern are addressed, **Home Facilities Enhancement Benefit** embedded to cater for the need of the change of mobility and **private or home nursing services** are included. Hand-in hand gives you peace of mind to focus exclusively on your recovery to reclaim health.

[10] Only applicable if Deductible was selected

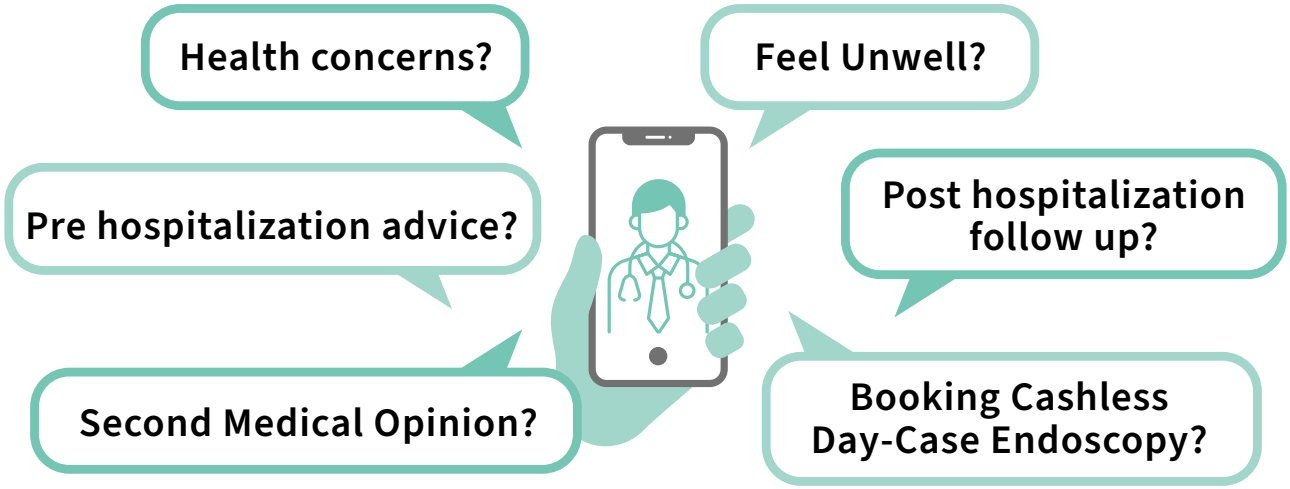
Your Digital Companion

Plan Highlights - “Digital Health Service"

Most high-end medical plans only focus on in-hospitalization coverages, rarely taking care of outpatient consultation for medical conditions without the necessity of hospitalization. This plan also offers "Digital Health Service"- free of charge outpatient consultation coverages as a value-added service is rare-in-market.

DSi-con

We breakthrough this framework and embed Dah Sing “DSi-con” mobile app, which grant you an unlimited[8] access to our network virtual General Practitioners, Specialists & Traditional Chinese Medicine Practitioners with a free ($0) doctor consultation fee, allowing you to take care of your well-being, minor disease or major illness, anywhere at any time through your mobile phone with hassle free.



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The Plan is a standalone medical insurance product. You can purchase this product without bundling with other insurance products.

"Digital Health Service" is a value-added service provided by an independent third-party service provider and it does not form a part of the contractual benefit under your policy and is not a guarantee service.

Dah Sing Insurance reserves the right to amend or cancel the service at any time without prior notice at its absolute discretion. Dah Sing Insurance is not the service provider for this service. The relevant service provider is not our agent, and vice versa. We make no representation, warranty or undertaking as to the quality and availability of the service, and do not accept any responsibility or liability for the service provided by the service provider. Under no circumstances will Dah Sing Insurance be responsible or liable for acts or omissions of the service provider in the provision of the service.

Your Greatest Shield

Plan Highlights – first in market : Vaccination Benefit

NEW IN THE MARKET

Get Tested – Get Vaccinated – Get Protected

Most medical plans focus on curing and less focus on preventative. Vaccination was recognized as a great tool on preventative for certain types of illness.

We encourage your proactive approach to your health and provides you first-in-market “Get Tested”, “Get Vaccinated” & “Vaccination Benefit”. In the event of any Adverse Reaction Following Immunization leads to doctor consultation and hospitalization, your medical bill will be covered.

“Vaccination Benefit”

Your health is always our first priority. Virus can knock anytime that’s why proactively shield yourself to fight against the unexpected is vital. **Dah Sing Insurance's** unwavering commitment to safeguard your health from each stage of your life. Medical expenses arising from any Adverse Reaction Following Immunization of any scheduled vaccination programmes[11] as recommended by HK Government, and any of our covered vaccines such as COVID-19, Swine Flu 2009, or even the influenza will be covered.

“Get Tested”, “Get Vaccinated”

What’s more? Hepatitis B, is asymptomatic which is a typical hidden killer that may threaten your health. Population Health Survey (2020-22) revealed 5.6% Hong Kong Population have Hepatitis B, 2.4% of pregnant women had been infected with Hepatitis B virus (HBV) in 2023 in Hong Kong[12].

Infant – 5years	Young Kids	Teenagers	Adult - Young Age	Adult - Middle Age	Adult - Golden Years
Child Health					
		HPV			
Covid-19 | Seasonal Influenza (SIV) | Swine Flu 2009					
					Pneumococcal Vaccination (PV)
			Hepatitis B (US CDC 19-59 yrs)		
			HPV (19-45 years)		

[11] Immunization Programme in Hong Kong for Child as listed in the Family Health Service (https://www.fhs.gov.hk/english/main_ser/child_health/child_health_recommend.html), Government Vaccination Programme (GVP) as listed in the Centre for Health Protection (https://www.chp.gov.hk/en/features/18630.html)

[12] https://www.hepatitis.gov.hk/english/what_is_hepatitis/hepatitis_b.html

Your Health Translator

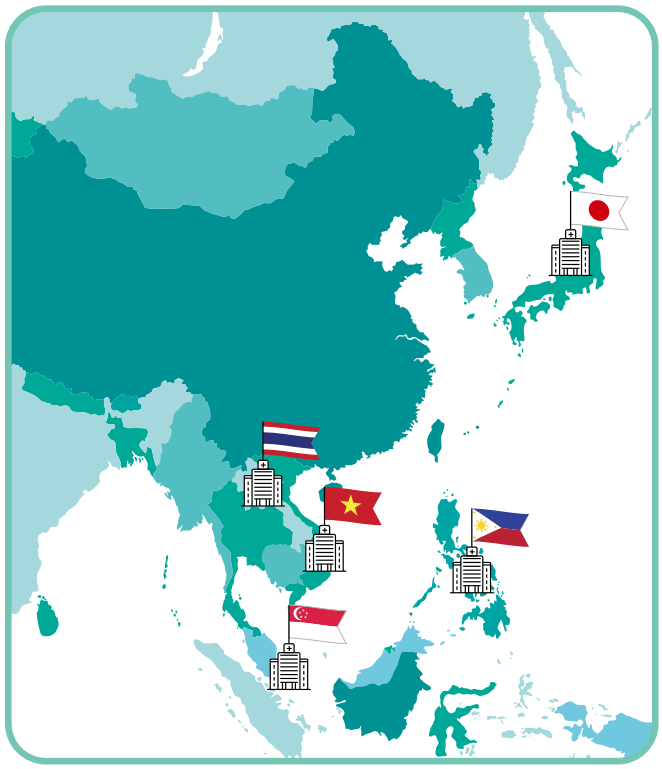
Plan Highlights – “Health Passport”

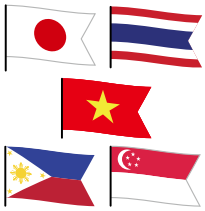
GO BEYOND

Most medical plans focus more on local support, but overlooked the language barrier at Overseas.

We realize you may travel to other Asian countries such as Japan for leisure and business, and we **go beyond the conventional framework** and meets the market’s changing needs.

We offer **first-in-market value-added service "Health Passport" as your digital General Practitioner through DSi-con mobile app** while you are in Japan, Singapore, Thailand, Vietnam and Philippines. You can either consult a local General Practitioner or designated General Practitioner in Hong Kong to avoid any language barriers. Upon your request, a prescription from a General Practitioner will be delivered to your door in a few hours (prescription fees and transportation fees are at your own cost).





Mild to Severe Symptoms

Not Hospitalized

Hospitalized

“Health Passport” is a value-added service provided by an independent third-party service provider and it does not form a part of the contractual benefit under your policy and is not a guarantee service.

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Complimentary Check Up Discount Coupon
- at the inception of the policy
- beginning of each renewed Policy Year

+

No Claims Medical Check Up Service
- beginning of each renewed Policy Year

+

No Claims Premium Discount
- beginning of each renewed Policy Year

Welcome Check Up Discount Coupon
- Welcome check up discount coupon is dispatched together with the Policy Documents at the inception of the policy
- Check up discount coupon will be given within 90 days from the beginning of each Policy Year

No Claims Medical Check Up Service
- Will be given once every 3 year
- First No Claims medical check up service at the designated centres will be given within 90 days from the beginning of Fourth (4^{th}) Policy Year

No Claims Premium Discount
- If no claims was made in 1 or 2 consecutive Policy Year, 5% No Claims Premium Discount will be offered
- If no claims was made in 3 or 4 consecutive Policy Year, 10% No Claims Premium Discount will be offered

No Claims Premium Discount

No claims period under Core Benefit Section (No claim was made under the Core Benefit Section immediately preceding the Renewal Date)	**No claims premium discount rate** (No claims premium discount rate to be applied on the Renewable premium upon the Renewal Date)
One (1) consecutive Policy Year immediately preceding the Renewal Date	5%
Two (2) consecutive Policy Year immediately preceding the Renewal Date	5%
Three (3) consecutive Policy Year immediately preceding the Renewal Date	10%
Four (4) consecutive Policy Year immediately preceding the Renewal Date	10%

Value-Added Service

DSi-con

An array of services was embedded in the “DSi-con” mobile app, allows you to **book and use virtual consultation services in the Digital Health Services[3] & Health Passport**, and one-stop Day Case Surgery Solution. Apart from these, you can **unlock to Health & Wellness Privileges** to better manage your health. You may **manage your policy** including view and download important policy documents.

Cashless

We assist you to arrange the **cashless service for admission of hospital at designated private hospitals in Hong Kong**. Subject to the Company’s approval, no upfront payment required and we will settle the bill for you directly.

Second Medical Opinion

You may access to the DSi-con mobile app to make a virtual consultation booking of the Specialist for a second medical opinion service.

Cover at a glance

The Plan is a standalone medical insurance product. You can purchase this product without bundling with other insurance products.

Name of Insurer	Dah Sing Insurance Company Limited	
Product Name	MyHealthCare Plus Medical Plan	
Compensation Type	Indemnity, but incorporated with cash benefit	
Purchase Objectives and Needs	• Prepare for future health care needs • For the expenses of hospitalization • For the expenses of other medical needs • Relieve the financial burden arising from disease or injury • Relieve the financial burden arising from major diseases (such as Cancer)	
Period of Cover	Initial Policy Period is 12 months	
Policy Renewal	Annual Renewable[13] until the Insured Person reaches the age of 100 (Plan 01)/ Renewable for life (Plan 02)	
Choice of Health Care Providers	Any duly constituted and registered Hospital except in the Mainland China[14]	
Plan Level	**Plan 01**	**Plan 02**
Area of Cover	Asia[15]	
Accommodation Room Type	Semi-Private Room[16,17]	
Annual Benefit Limit [18]	$25,000,000	$30,000,000
Lifetime Benefit Limit	$50,000,000	No Lifetime Limit
Issue Age	15 days – 70 years (attained age of the Insured Person)	
Annual Deductible[19] **Options**	$0/$12,000/$40,000/$80,000	
Premium Frequency	Annually/Monthly	
Policy Currency	Hong Kong Dollar (HKD)	
Premium Rating Factors	Age, Smoking Status	
Premium[20]	Premium are not guaranteed and will be adjusted based on the Insured Person's attained age, smoking status and other factors such as Occupation and Place of Residence.	

[13] Annual renewal shall mean renewal is up to the age as specified in the Policy Schedule. The Company will not re-underwrite an individual policy based on any change in health conditions of the Insured Person. However, the Company reserves the right to re-underwrite based on (i) the change of the Place of Residence and/or the Occupation of each Insured Person upon his or her renewal; (ii) upgrade or increase the benefit; (iii) reduce or removal the deductible; (iv) request to remove or reduce the case-based exclusion or premium loading. The Company also reserves the right to revise the coverages, terms and conditions and adjust the premium for the Portfolio upon renewal.

[14] For Confinements in China, restricts to Tier 3, Class A Only Hospital. Please refer to "Choice of healthcare services in mainland China" in Important Notes

[15] Asia refers to Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, Mainland 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.

[16] Semi-Private Room shall mean a room categorized as a semi-private or second-class room by a Hospital. If a Hospital does not have any room categorization, a Semi-Private Room shall mean a single or double occupancy room, with a shared bath or shower room, in a Hospital.

[17] For Confinement in Standard Private Room in Hong Kong or Macau, the Eligible Expenses payable and other payable expenses under the Basic Policy shall be subject to an adjustment factor of 50%. Please refer to "Choice of ward class" in Important Notes.

[18] Refresh and recount at the inception of every Policy Year.

[19] Deductible shall mean a fixed amount of Eligible Expenses that, in a Policy Year, the Insured must pay before the Company shall reimburse the remaining Eligible Expenses.

[20] Premium will be adjusted and please refer to "Premium adjustment" in Important Notes.

Core Benefit Section

Benefit Schedule

Benefit items	Plan 01	Plan 02
a. Room and board	Full Cover[21]	Full Cover[21]
b. Miscellaneous charges		
c. Attending doctor's visit fee		
d. Specialist's fee		
e. Intensive Care		
f. Surgeon's fee		
g. Anaesthetist's fee		
h. Operating theatre charges		
i. Prescribed Diagnostic Imaging Test[22]		
j. Prescribed Non-surgical Cancer Treatments[23]		
k. Pre-Confinement/ Day Case Procedure outpatient care	**Full Cover**[21] All prior outpatient visits or **Emergency** consultation within 60 days prior to each **Confinement/ Day Case Procedure** Subject to max. 1 visit per day	**Full Cover**[21] All prior outpatient visits or **Emergency** consultation within 90 days prior to each **Confinement/ Day Case Procedure** Subject to max. 1 visit per day
l. Post-Confinement/ Day Case Procedure outpatient care		
• **Registered General Practitioners/ Registered Specialists**	**Full Cover**[21] 60 outpatient visits within 90 days after discharge from each **Confinement/completion of Day Case Procedure** Subject to max. 1 visit per day	**Full Cover**[21] All outpatient visits within 365 days after discharge from each **Confinement/completion of Day Case Procedure** Subject to max. 1 visit per day
• **Registered Chiropractor/ Physiotherapy/ occupational therapy/ speech therapy/diagnostic test recommended by Registered Medical Practitioner**	**Full Cover**[21] 20 outpatient visits per **Policy Year** within 90 days after discharge from each **Confinement/ completion of Day Case Procedure** Subject to max. 1 visit per day	**Full Cover**[21] 30 outpatient visits per **Policy Year** within 90 days after discharge from each **Confinement/ completion of Day Case Procedure** Subject to max. 1 visit per day
• **Registered Chinese Medicine Practitioners**	**Full Cover**[21] 20 outpatient visits per **Policy Year** within 90 days after discharge from each **Confinement/ completion of Day Case Procedure** Subject to max. 1 visit per day	**Full Cover**[21] 30 outpatient visits per **Policy Year** within 90 days after discharge from each **Confinement/ completion of Day Case Procedure** Subject to max. 1 visit per day
m. Psychiatric treatments	$30,000 Per **Policy Year** Recommended by a **Specialist, Hong Kong** only	$30,000 Per **Policy Year** Recommended by a **Specialist, Hong Kong** only

[21] Full Cover shall mean no itemized benefit sub-limit.

[22] Prescribed Diagnostic Imaging Test shall mean computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.

[23] Prescribed Non-surgical Cancer Treatments shall mean chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy for cancer treatment.

Core Benefit Section

Benefit items	Plan 01	Plan 02
n. Medical Appliances[24]		
(i) Specified items	Full Cover[21]	Full Cover[21]
(ii) Other non-specified items and not in (i) above	$100,000 per Policy Year	$100,000 per Policy Year
o. Nursing Services (i) Private Nursing Fee during Confinement (ii) Home Nursing Fee after discharge from Hospital	**Full Cover**[21] Up to 45 days per **Policy Year** Provided by **Registered Nurse/ Registered Health Worker**, Recommended by **Registered Medical Practitioner**, after **Confined** in **Intensive Care Unit** or **Confinement** following a surgery Subject to max. **1 Registered Nurse/ Registered Health Worker** per day **Hong Kong** only	**Full Cover**[21] Up to 90 days per **Policy Year** Provided by **Registered Nurse/ Registered Health Worker**, Recommended by **Registered Medical Practitioner**, after **Confined** in **Intensive Care Unit** or **Confinement** following a surgery Subject to max. **1 Registered Nurse/ Registered Health Worker** per day **Hong Kong** only
p. Rehabilitation Benefit	**$100,000 Per Policy Year** within 90 days after discharge from **Confinement** Recommended by **Registered Medical Practitioner Hong Kong** only	**$100,000 Per Policy Year** within 90 days after discharge from **Confinement** Recommended by **Registered Medical Practitioner Hong Kong** only
q. Accidental Emergency outpatient treatment	Full Cover[21]	Full Cover[21]
r. Accidental Emergency outpatient dental treatment	Full Cover[21]	Full Cover[21]
s. Accidental Death	$100,000 (Worldwide)	**$300,000** (occurs outside **Hong Kong**) **$100,000** (occurs in **Hong Kong**)
t. Outpatient Kidney Dialysis	**Full Cover**[21] Recommended by **Registered Medical Practitioner**	**Full Cover**[21] Recommended by **Registered Medical Practitioner**
u. Breast reconstructive surgery benefit	Full Cover[21]	Full Cover[21]
v. Companion bed	**Full Cover**[21] (for **Insured Person** whose age is under 16 years old)	**Full Cover**[21] (for **Insured Person** whose age is under 16 years old)
w. Pregnancy Complications	$100,000 per Policy Year	Full Cover[21]

[24] Specified items for Medical Appliances shall mean pace maker; stents for percutaneous transluminal coronary angioplasty; basic/monofocal intraocular lens; artificial cardiac valve; metallic or artificial joints for joint replacement; prosthetic ligaments for replacement or implantation between bones; and prosthetic intervertebral disc.

Core Benefit Section

Benefit items	Plan 01	Plan 02
x. Hospice and Palliative Care	$150,000 per lifetime	$300,000 per lifetime
y. HIV/AIDS treatment	$500,000 per lifetime	$800,000 per lifetime
z. Organ Transplantation[25,26]	$500,000 per lifetime	$500,000 per lifetime
aa. Major Diseases[27] **Benefit** **(i) Post-confinement ancillary benefit** • **Registered Dietitian** • **Registered Chinese Medicine Practitioners**	Full Cover[21] 30 outpatient visits per lifetime Recommended by **Registered Medical Practitioner** Subject to max. 1 visit per day	Full Cover[21] 30 outpatient visits per lifetime Recommended by **Registered Medical Practitioner** Subject to max. 1 visit per day
(ii) First Dollar Coverage - Annual Deductible Waived for Major Diseases	1 per lifetime	1 per lifetime
(iii) Home facilities enhancement benefit	$50,000 per lifetime	$50,000 per lifetime
bb. Vaccination[28] **Benefit** **(i) Lump Sum Benefit – Long Term Disabilities following Immunization**	$100,000 per lifetime	$100,000 per lifetime
(ii) Medical Expenses arising from Adverse Reaction Following Immunization	$100,000 per Policy Year	$100,000 per Policy Year

[25] Major Transplantation refers to receive any transplantation of heart, kidney, liver, lung, pancreas or bone marrow.

[26] Included 30% of total transplantation cost for donor and limited to Hong Kong only.

[27] Major Diseases refer to Cancer, Stroke, Myocardial Infraction, Kidney Failure, End Stage Lung Disease and Major Organ Transplantation.

[28] Covered Vaccination refers to the following immunization: BCG, Cholera, Covid-19, Diphtheria, Hepatitis A, Hepatitis B, (Hib) Haemophilus Influenzae type b, Human Papillomavirus (HPV), Seasonal Influenza, Japanese Encephalitis, Malaria, Meningitis, Measles, Meningococcal group (B, C, W), Mumps, Pertussis (whooping cough), Pneumococcal Infection, Poliomyelitis, Rabies, Rotavirus, Rubella (German measles), Shingles Vaccine (Herpes Zoster), Smallpox, Swine Flu (H1N1 2009), Tetanus, Typhoid, Varicella/Chickenpox and Yellow Fever.

Cash Benefit Section (Hong Kong only)

Benefit items	Plan 01	Plan 02
cc. Hospital Cash Benefit – Confinement in public ward of a government Hospital in Hong Kong	$1,000 per day, maximum 45 days per Policy Year	
dd. Hospital Cash Benefit – Confinement in lower ward type of a Private Hospital in Hong Kong	$1,000 per day, maximum 45 days per Policy Year	
ee. Surgical Cash Benefit – Undergo designated Day Case Surgery at network doctors	$2,000 per **Day Case Surgery**	

Additional Benefit Section

Benefit items	Plan 01	Plan 02
ff. Worldwide Emergency Assistance Services		
(i) Emergency Medical Evacuation and/or Repatriation **(ii) Repatriation of Mortal Remains** **(iii) 24 hour worldwide medical service providers referral** **(iv) Medical monitoring** **(v) Essential medication/equipment**	Actual Cost	
(vi) Dispatch of Doctors (Insured Person's own cost) **(vii) Hospital admission guarantee** **(viii) China Medical Card – admission deposit guarantee to the designated hospital in mainland China**	Covered	

The content in this product brochure is for reference only. For full terms, conditions, benefits and exclusions, please refer to the Policy Provision.
The Plan is a standalone medical insurance product. You can purchase this product without bundling with other insurance products.

Case Study

Example 1 – Day Surgery through "DSi-con" mobile app

The following example is for illustration purpose only. It assumes no previous claims has been made.

Insured Person	: James (40 years, non-smoker)
Occupation	: Banker
Selected Annual Deductible	: HK$0

Client suffered from indigestion and bloating frequently. Make a booking at our network doctor - Gastroenterologist through our “DSi-con” mobile app.

Client attended the appointment and consulted by Gastroenterologist, is observed the possibility of peptic ulcer. The Attending Doctor recommended to perform “Oesophago-gastro-duodenoscopy, OGD” to identify the Level of peptic ulcer at the network Day Case Procedure Centre and Client agreed to proceed.

Client was using the cashless arrangement via "DSi-con" mobile app. The attending doctor submitted pre-approval to Dah Sing Insurance for approval.

Dah Sing Insurance's claims team assessed the case and approved the request.

Client underwent OGD at Day Surgery Centre as planned and went home for recovery after the completion.

Remarks: For medical plan with Deductible, client should pay the Deductible (or balance of the Deductible) upon confirmation and approval of the OGD.

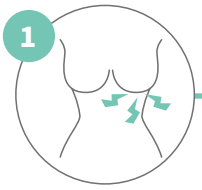
Case Study

Example 2 – Hospitalization

The following example is for illustration purpose only. It assumes no previous claims has been made.

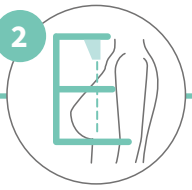
Insured Person : Janny (40 years, non-smoker)
Occupation : Graphic Designer
Selected Annual Deductible : HK$0

1



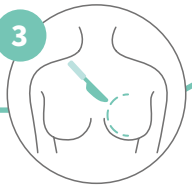
Client discovered left breast with little piece lump and some thickened area of skin that felt different from the surrounding tissue.

2



Registered doctor recommended to undergo Mammography and Pathological tests and biopsy to identify the lump situation. Total medical expenses was $10,000.

3



Follow up consultation, attending doctor informed client the Mammography and biopsy test result showed it is breast cancer and recommended to undergo “Mastectomy” for left breast due to too many cancer tissue found. And the medical expenses quotation was $88,000 with Ward accommodation room type for 5 days hospital confinement.

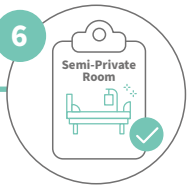
4

Client completed the operation and discharge from hospital, follow up consultation 15 visits after discharge from hospital within 60 days, total medical expenses were $12,000.

5

Client submitted the completed claim form with supporting documents (Such as billing invoice and payment proof).

6



As client is entitled to Semi-Private room but admitted to Ward Level room type, Hospital Cash will be given for 5 days admission with additional benefit Hospital cash $1,000 X 5=$5,000.

Total claim paid amount summary as below:

Covered Benefit	Benefit Amount	Medical Expenses Amount	Paid Amount
Pre-confinement/Day Case Procedure outpatient care	**Full Covered**	**$10,000**	**$10,000**
Hospitalization	**Full Covered**	**$88,000**	**$88,000**
Post-confinement/Day Case Procedure outpatient care	**Full Covered**	**$12,000**	**$12,000**
Hospital Cash Benefit **Confinement in lower ward type of a Private Hospital in Hong Kong**	**$1,000/day, 45 days**	**Not Applicable**	**$5,000**
Total benefit entitlement amount : $115,000			

Major Exclusion

Under **the Policy**, except stated otherwise in the Benefit Provision under the Policy Provision, the **Company** shall not pay any benefits or expenses in relation to or directly or indirectly arising from or the consequence upon by any one of the following:

Section

1) **Pre-existing Condition(s).**
2) Taking part in any air sport, air travel or any other kind of aviation activities, other than travelling as a fare-paying passenger on regular scheduled commercial aircraft which is provided and operated by an airline or air charter company which is properly licensed to do so.
3) Expenses incurred for treatments, procedures, medications, tests or services which are not **Medically Necessary**.
4) **Expenses** incurred for the whole or part of the **Confinement** solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a **Registered Medical Practitioner** for **Medically Necessary** investigation or treatment of a **Disability** which cannot be effectively performed in a setting for providing **Medical Services** to **a Day Patient**.
5) **Confinement** or Day **Case Procedure** or expenses arising from HIV and its related **Disability**, which is contracted or occurs before the **Policy Effective Date**. Irrespective of whether it is known or unknown to the **Insured** or **Insured Person** at the time of submission of **Application**, including any updates of and changes to such requisite information such **Disability** shall be generally excluded from any coverage of this **Policy** if it exists before the **Policy Effective Date**. If evidence of proof as to the time at which such **Disability** is first contracted or occurs is not available, manifestation of such **Disability** within the first five (5) years after the **Policy Effective Date** shall be presumed to be contracted or occur before the **Policy Effective Date**, while manifestation after such five (5) years shall be presumed to be contracted or occur after the **Policy Effective Date**.

   However, the exclusion under this entire Section 5 shall not apply where HIV and its related **Disability** is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of this **Policy** shall apply.
6) **Confinement** or **Day Case Procedure** arising from or expenses incurred for **Medical Services**, are as a result of **Disability** arising from or consequential upon the 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 (except for HIV and its related **Disability**, where Section 5 of this Major Exclusion applies).
7) Any charges in respect of services for –
   (a) beautification or cosmetic purposes, unless necessitated by **Injury** caused by an **Accident** and the Insured Person receives the **Medical Services** within ninety (90) days of the **Accident**; or
   (b) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
8) **Confinement** or **Day Case Procedure** arising from or expenses incurred for, prophylactic treatment or preventive care, including but not limited to general check- ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the **Insured Person** and/or his family members, Hair Mineral Analysis (HMA), immunisation or health supplements. For the avoidance of doubt, this Section 8 does not apply to –
   (a) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other **Medical Services** provided;
   (b) removal of pre-malignant conditions; and
   (c) treatment for prevention of recurrence or complication of a previous **Disability**.
9. **Confinement** or **Day Case Procedure** arising from or expenses incurred for, dental treatment and oral and maxillofacial procedures performed by a dentist except for **Emergency Treatment** and surgery during **Confinement** arising from an **Accident**. Follow-up dental treatment or oral surgery after discharge from **Hospital** shall not be covered.

Major Exclusion

10. **Confinement** or **Day Case Procedure** or expenses incurred for **Medical Services** and counselling services, are relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
11. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during **Confinement** or on the day of the **Day Case Procedure**.
12. Expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydropathy, homeotherapy and other similar treatments.
13. **Confinement** or **Day Case Procedure** arising from or expenses incurred for, 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.
14. **Confinement** or **Day Case Procedure** arising from or expenses incurred for **Medical Services** provided, are as a result of **Congenital Condition**(s) which have manifested or been diagnosed before the Insured Person attained the Age of eight (8) years.
15. **Eligible Expenses** which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party. Any VAT and GST which is refunded to the **Insured** or **Insured Person** (as the case may be) shall be excluded pursuant to this Section and shall not be recoverable under this **Policy**.
16. **Confinement** or **Day Case Procedure** in related to or expenses incurred for, treatment for Disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.
17. **Any exposure on sanction and subject to the following clause:**
    We shall not be deemed to provide cover and **We** shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose **Us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

Important Notes

Disclosure Obligation for Underwriting	You are required to declare all requisite information that would affect the underwriting decisions of the Company. During the insurance application process, it's important that you act with utmost good faith and disclose all material facts to the Company. If you are uncertain as to whether a fact is material, then it should be disclosed. If you fail to disclose or misrepresent a material fact which may impact Dah Sing Insurance's risk assessment, this will raise questions about your entitlement to insurance benefits. Consequences may include cancellation of your Policy or reduction of entitlement to claims payments. The Company has the right to declare the Policy void due to any misrepresentation or fraud. The Policy shall become null and void with effect from the Policy effective date and We shall not have any liability or obligations for coverage of that Insured Person under the Policy.
Cooling-off Period	If you're not fully satisfied with this Policy, you have the right to change your mind to cancel it within the cooling-off period. The Policy will then be cancelled and the premium(s) paid and levy will be refunded if no claims was made or no value-added service was used. The written notice signed by you together with your Policy (if received) should be received by the office of Dah Sing Insurance Company Limited located at 2703, 27/F, Island Place Tower, 510 King's Road, North Point, Hong Kong within 21 days immediately following the day of delivery of the Policy. After the expiration of the cooling-off period, if you cancel the Policy, premium refund will follow the Policy Provision and may be less than the total premium you have paid.
Policy Cancellation	After the cooling off period, you can cancel your Policy at any time by giving 30 days' written notice to Dah Sing Insurance. And we also can cancel the policy at any time by giving 2 weeks' notice to you. However, premium refund is only available if no benefits have been paid during the relevant Policy year.
Renewal	Policy shall be effective for an initial period of twelve (12) Calendar Months and is renewable thereafter, for successive periods of every consecutive twelve (12) Calendar Months provided that the following conditions are fulfilled at the time of each renewal: • We continue to issue new Policy(ies) under the "MyHealthCare Plus Medical Plan" • We reserve the right to amend the terms and conditions of this Policy at any time during the Policy term, as may be required by any applicable legislation or regulatory requirement. • We reserve the right to revise the terms of the Policy and/or the Premium upon each renewal. Your cover can be renewed every year for life as long as you meet the requirements as stated in the renewal provisions of your Policy terms and conditions, regardless of any changes in your health condition. We understand that your healthcare needs may change throughout your life, so you have the flexibility to change your benefits every year upon renewal. If you wish to upgrade your plan, add any benefit(s) or reduce your deductible in future (if applicable), you will need to complete a health declaration form for medical underwriting purposes. Approval will be subject to underwriting. Please note that you can't apply to reduce your deductible within 24 months of the Policy effective date. Dah Sing Insurance may revise the Policy terms and benefits every year at renewal, and subject to prior written notice to the Policy holder upon renewal.
Premium adjustment	Each insured person's initial premium is primarily determined based on factors such as age, smoking status, health conditions, Place of Residence, occupation and choice of coverage. Any claims you made won't affect your premium at renewal. However, renewal premiums may still increase as you get older. Dah Sing Insurance may adjust the standard premium rate on an overall same portfolio basis with reference to factors such as medical inflation, general operating expenses and revision of benefits to cover increasing medical expenses. In this case, the same portfolio means all MyHealthCare Plus Medical Plan policies insured under the same deductible option and under the same plan (e.g., one portfolio for Plan 01 with HK$0 Deductible and so on).
Termination Conditions	This Policy will be ended immediately, upon the occurrence of the earliest of the following events: (a) non-payment of premiums after the grace period; or (b) the day immediately following the death of the Insured Person; or (c) the Company has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this Policy. Please refer to the Policy Provisions for more details of the termination conditions.
Applicable Laws	The laws governing the Policy are based on Hong Kong SAR.
Eligibility	Premium payment charged is according to the selected plan and generally to qualified applicants below: • between the age of fifteen (15) days and seventy (70) years (attained age) at the time of the application; and • with a valid Hong Kong Identity Card (if Insured Person age under 11, please provides the Hong Kong Birth Certificate).
Missing Payment of Premium	We will allow grace period of thirty (30) calendar days after the premium due date for payment of each premium. This Policy shall continue to be in effect during the grace period but no benefits shall be payable unless the outstanding premium is paid in full. If the premium is still unpaid in full at the expiration of the grace period, this Policy shall be terminated immediately on the date on which the unpaid premium is first due.
Make a Claim	All claims incurred in respect of these Terms and Benefits shall be submitted to the Company within ninety (90) calendar days after the date on which the Insured Person is discharged from the Hospital, or (where there is no Confinement) the date on which the relevant Medical Service is performed and completed. For this purpose, a claim shall be deemed not valid or complete and benefit shall not be payable unless : a) all receipts and/or itemised bills together with the diagnosis, type of treatment, procedure, test or service provided shall have been submitted to the Company; and b) all relevant information, certificates, reports including but not limited to medical report issued by the attending Registered Medical Practitioner, evidence, referral letter, completed claim form and other data or materials as reasonably required by the Company shall have been furnished to the Company for processing of such claim.

Important Notes

Territorial scope of Coverage

(i) Except for Section (ii) & (iii) as stated below, the benefits shall be payable only if the **Medical Services** are provided in the **Territorial scope of Cover/ Area of Cover** as stated in **the Policy Schedule**;

(ii) The psychiatric treatment as stated in item (m) in the Benefit Schedule , Nursing Services as stated in item (o) in the Benefit Schedule, Rehabilitation Benefit as stated in item (p) in the Benefit Schedule, Donor's benefit under Organ Transplantation Benefit as stated in item (z) of in the Benefit Schedule and the Post-confinement ancillary benefits as stated in item (aa) in the Benefit Schedule shall be payable only if such **Medical Services** are provided in **Hong Kong**.
For the avoidance of doubt, Cash Benefit Section – item (cc), (dd) & (ee) of in the Benefit Schedule is limited in **Hong Kong** only.

(iii) For **Emergency Treatment and its related Medical Services received outside the Territorial scope of Cover/Area of Cover**, benefit items under (a) to (l) in the Benefit Schedule in the Policy Provision is Worldwide, but subject to the maximum **Annual Benefit Limit** of HK$500,000.

Choice of ward class

If the **Insured Person** is voluntarily **Confined** in Hong Kong or Macau in a room type of a level higher than the designated **"Accommodation Room Type"** as stated in the **Policy Schedule** for Medical Services, the **Eligible Expenses** payable and other payable expenses under the Core Benefit Section of Part 6 in the Policy Provision shall be subject to the **Adjustment Factor for change of ward class** applicable as follows:

Designated Accommodation Room Type (as stated in the **Policy Schedule**)	**Actual Accommodation Room Type Confined** (**Confined** ward class in **Hospital** in **Hong Kong** or **Macau**)	Adjustment Factor for change of ward class
Semi-Private Room	**Standard Private Room**	50%

The adjustment factor for the change of ward class shall not be applied if the **Insured Person** is **Confined** in a **Standard Private Room** due to (i) room shortage at the **Hospital** for **Emergency Treatment**; or (ii) **Confinement** in isolation that requires a special ward arrangement.

For the avoidance of doubt, no benefit under this **Policy** shall be payable for **Confinement** in any room type above **Private Room** including suite, VIP or deluxe room of a **Hospital** in all circumstances.

Calculation of benefit payable

Benefit payable shall be calculated in accordance with the formula as follows:

Benefit Payable	is equal to (=)	Amount of the Eligible Expenses And Any other payable expenses	less (-)	Eligible Expenses either reimbursed by another insurance plan for the Same Disability or the Deductible, whichever is higher	times (x)	Adjustment factors for change of Ward Class (as listed in Section 1(b) of Part 6 in the Policy Provision (if applicable)

Provided that the amount payable for any one **Policy Year** does not exceed the **Annual Benefit Limit.**

Choice of healthcare services in mainland China

For **Eligible Expenses** and expenses incurred in mainland China, the benefits described shall be payable for **Eligible Expenses** and any other payable expenses charged by **Hospitals** of Tier 3 Class A or above, or other **Hospitals** where approval has been granted by the **Company** before **Medical Services** are provided.

Currency

All numbers mentioned in this document is in Hong Kong currency.

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Important Words

Annual Benefit Limit
shall mean the maximum amount of benefits paid by the Company to the Insured in a Policy Year irrespective of whether any limits of any benefit items stated in the Benefit Schedule have been reached.The Annual Benefit Limit is counted afresh in a new Policy Year. It is named as the " Annual Benefit Limit " and specified in the Policy Schedule.

“Confinement” or “Confined”
shall mean an admission of the Insured Person to a Hospital that is recommended by a Registered Medical Practitioner for Medical Service and as an Inpatient as a result of a Medically Necessary condition. Confinement shall be evidenced by a daily room charge invoiced by the Hospital and the Insured Person must stay in the Hospital continuously for the entire period of Confinement. Confinement shall be evidenced by a daily room charge invoiced by the Hospital and the Insured Person must stay in the Hospital continuously for the entire period of Confinement.

Day Case Procedure
shall mean a Medically Necessary surgical procedure for investigation or treatment to the Insured Person performed in a medical clinic, or day case procedure centre or Hospital with facilities for recovery as a Day Patient.

Day Patient
shall mean an Insured Person receiving Medical Services or treatments given in a medical clinic, day case procedure centre or Hospital where the Insured Person is not in Confinement.

Deductible
shall mean a fixed amount of Eligible Expenses that, in a Policy Year, the Insured must pay before the Company shall reimburse the remaining Eligible Expenses. It is named as the " Annual Deductible" and specified in the Policy Schedule.

Designated Mainland China Hospitals
shall mean the list of the mainland China Hospitals which may be updated, varied and amended from time to time at the Company’s discretion, and any change shall be deemed as effective on the date of publication. The list is available from DSi-con mobile app in the download document section.

Disability
shall mean a Sickness or Disease or Injury, including any and all complications arising therefrom.

Eligible Expenses
shall mean expenses incurred for Medical Services rendered with respect to a Disability.

Emergency
shall mean an event or situation that Medical Service is needed immediately in order to prevent death, permanent impairment or other serious consequences of the Insured Person's health.

Emergency Treatment
shall mean Medical Service required in an Emergency. The Emergency event or situation, and the required Medical Service cannot be and are not separated by an unreasonable period of time.

Hospital
shall mean an establishment duly constituted and registered as a hospital under the laws of the relevant territory in which it is established, which is for providing **Medical Service** for sick and injured persons as Inpatients, and which-

(a) has facilities for diagnosis and major operations, or is a public hospital as defined in the Hospital Authority Ordinance (Cap. 113 of the Laws of Hong Kong) or a hospital for which a license is issued under the Private Healthcare Facilities Ordinance (Cap. 633 of the Laws of Hong Kong);
(b) provides twenty-four (24) hours nursing services by licensed or registered nurses;
(c) has one(1) or more **Registered Medical Practitioners**; and
(d) is not primarily a clinic, a place for alcoholics or drug addicts, a nature care clinic, a health hydro, a nursing, rest or convalescent home, a hospice or palliative care centre, a rehabilitation centre, an elderly home or similar establishment.

Important Words

Lifetime Benefit Limit
shall mean the maximum amount of benefits paid by the Company to the Insured cumulatively since the inception of this Policy, irrespective whether any limits of any benefit items stated in the Benefit Schedule have been reached or whether the Annual Benefit Limit in a Policy Year has been reached.
It is named as the "Lifetime Benefit Limit " and specified in the Policy Schedule

Intensive Care Unit
shall mean that part or unit of a Hospital established for and devoted to providing intensive medical and nursing care for Inpatients.

Medical Service
shall mean Medically Necessary services, including, as the context requires, Confinement, treatments, procedures, tests, examinations or other related services for the investigation or treatment of a Disability.

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.

For the purpose of the Policy, without prejudice to the generality of the foregoing, circumstances where a Confinement is considered Medically Necessary include, but not limited to -

(i) the Insured Person is having an Emergency that requires urgent treatment in Hospital;
(ii) surgical procedures are performed under general anaesthesia;
(iii) equipment for surgical procedure is available in Hospital and procedure cannot be done on a Day Patient basis;
(iv) there is significantly severe co-morbidity of the Insured Person;
(v) taking into account the individual circumstances of the Insured Person, the attending Registered Medical Practitioner has exercised his prudent professional judgment and is of the view that for the safety of the Insured Person, the medical service should be conducted in Hospital;
(vi) in the prudent professional judgment of the attending Registered Medical Practitioner, the length of Confinement of the Insured Person is appropriate for the medical service concerned; and/or
(vii) in the case of diagnostic procedures or allied health services prescribed by a Registered Medical Practitioner, such Registered Medical Practitioner has exercised his prudent professional judgment and is of the view that for the safety of the Insured Person, such procedures or services should be conducted in Hospital.

For the purpose of exercising his prudent professional judgment in (v) to (vii) above, the attending Registered Medical Practitioner shall have regard to whether the Confinement –

(aa) is in accordance with standards of good and prudent medical practice in the locality for the medical service rendered, and, in the prudent professional judgment of the attending Registered Medical Practitioner, not rendered primarily for the convenience or the comfort of the Insured Person, his family, caretaker or the attending Registered Medical Practitioner; and
(bb) is in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice in the locality for the medical service rendered.

Important Words

Pre-existing Condition(s)
shall mean, in respect of the Insured Person, 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. An ordinary prudent person shall be reasonably 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.

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.

Waiting Period
shall mean no benefit will be payable if the claims incurred during the waiting period.

HIV/AIDS Treatment Waiting Period shall mean a period of five (5) years from the latest of:
(a) the Policy Commencement Date or effective date of the increased benefit or removal of deductible or date of reinstatement (whichever is the later); and
(b) the effective date of reinstatement (if the Policy has been reinstated).

Palliative Care Benefit Waiting Period shall mean a period of two (2) years from the latest of:
(a) the Policy Commencement Date or effective date of the increased benefit or removal of deductible or date of reinstatement (whichever is the later); and
(b) the effective date of reinstatement (if the Policy has been reinstated).

Pregnancy Complications Waiting Period shall mean a period of one (1) year from the latest of:
(a) the Policy Commencement Date or effective date of the increased benefit or removal of deductible or date of reinstatement (whichever is the later); and
(b) the effective date of reinstatement (if the Policy has been reinstated).

Major Diseases Benefit Waiting Period shall mean a period of ninety (90) days from the latest of:
(a) the Policy Commencement Date or effective date of the increased benefit or removal of deductible or date of reinstatement (whichever is the later); and
(b) the effective date of reinstatement (if the Policy has been reinstated).

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The Plan is a standalone medical insurance product. You can purchase this product without bundling with other insurance products.

This is only a product summary and does not constitute any part of the contract. For full terms, conditions and exclusions, please refer to the Policy Wording (= Policy Provision).

Dah Sing Insurance is the insurance underwriter of "MyHealthCare Plus Medical Plan", is solely responsible for all coverage and compensation, and reserves the right of final approval of the enrolment of "MyHealthCare Plus Medical Plan".

The service(s)/product(s) mentioned herein is/are not targeted at customers in the EU.

In the event of any discrepancy between the Chinese and English versions, the English version shall prevail.

Dah Sing Insurance is proud to be recognised by

AM Best Rating 2023
- Financial Strength Rating A- (Excellent)
- Long-Term Issuer Credit Rating a-
- Outlook assigned Stable

iMoney Insurance Excellence Awards 2021
- The Best Motor Insurance
- The Best Home Insurance

Metro Finance GBA Insurance Award (HK Region) 2022
Outstanding Commercial Insurance

Bloomberg Business Week Financial Institution Award 2022
Product & Service Innovation

HKGCSMB
Best SME's Partner Award 2022

ESD Life Family Top Brand 2023
Overseas Study Insurance

Top Gear
Top Electric Vehicle Insurance Award

HoldCover
Most Comprehensive Private Vehicle Insurance Award

2023 - Best Home Insurance Product

The Hong Kong Federation of Insurers
Top 3 finalists in HKFI's Hong Kong Insurance Awards 2023
Best Partnership Project (General Insurance)

Ming Pao Awards for Excellence in Finance 2024
Best Overseas Study Protection

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