



恒生銀行  
HANG SENG BANK



滙豐保險  
HSBC Life

Life insurance - Medical protection

# HSBC Voluntary Health Insurance Standard Plan



Underwritten by HSBC Life (International) Limited (Incorporated in Bermuda with limited liability)

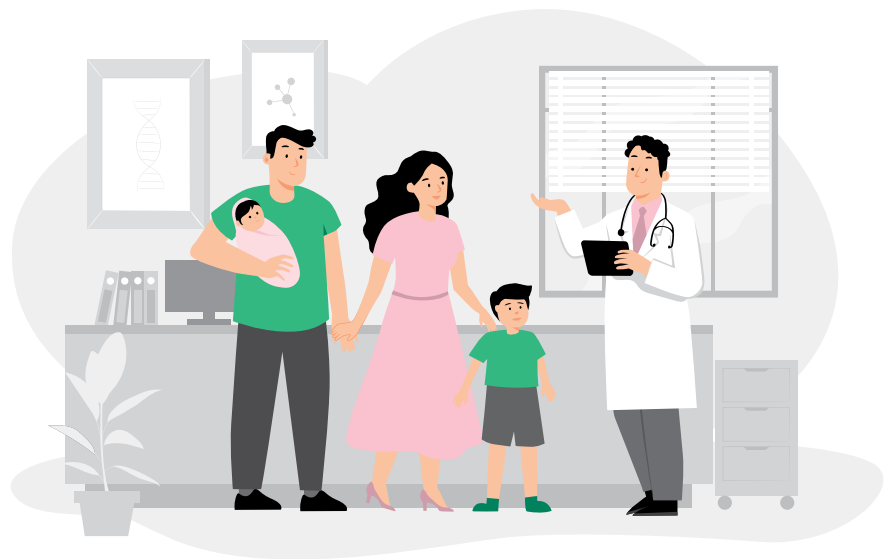
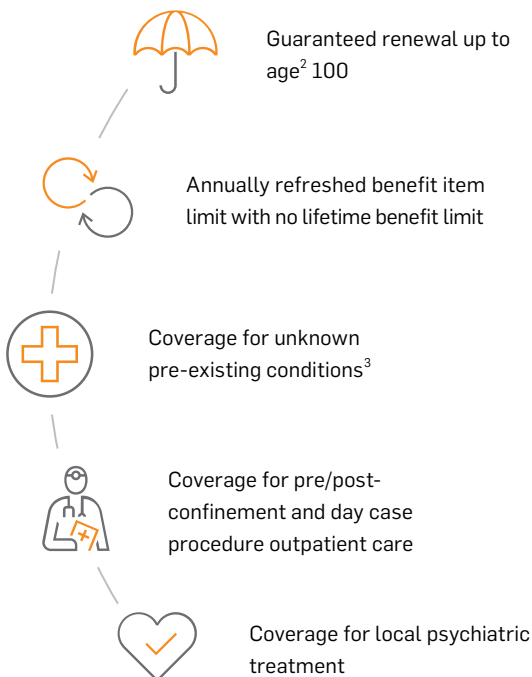


# Protect your loved ones while fulfilling your promises

With medical costs constantly on the rise and an aging population putting increasing pressure on an already overstretched public medical system, your existing medical coverage may not be sufficient just when you need it most. It is thus important to safeguard your future and that of your loved ones against the consequences of unexpected illnesses.

HSBC Voluntary Health Insurance Standard Plan ("VHIS Standard Plan", "the Plan" or "your policy") is designed to give you and your loved ones essential medical coverage, including access to quality medical attention in the private sector. **Taxpayer who or whose spouse is the policyholder may claim up to HKD8,000 in tax deduction<sup>1</sup> on qualifying premiums paid per insured person per year.**

## Product features at a glance



**This is a standalone individual indemnity hospital insurance plan certified under Voluntary Health Insurance Scheme (VHIS).**

<b>Registered VHIS provider</b>	HSBC Life (International) Limited ("the Company", "we", "us", or "our")
<b>Type of certified plan</b>	Standard Plan
<b>Name of certified plan</b>	HSBC Voluntary Health Insurance Standard Plan
<b>Eligible tax deduction<sup>1</sup> amount</b>	A taxpayer who or whose spouse is the policyholder is entitled to a maximum annual deduction of HKD8,000 in respect of qualifying premiums for each insured person paid in each year of assessment

This product brochure contains general information only. It does not form part of a contract of insurance. For detailed terms, conditions and exclusions, please refer to the relevant Policy Provisions.

## Key features



### Guaranteed renewal up to age<sup>2</sup> 100

The VHIS Standard Plan is available to an insured person who is 15 days to 80 years old, whereas the policyholder must be at least 18 years of age. Renewal is guaranteed up to the age of 100 regardless of the insured person's health condition.



### Annually refreshed benefit item limit with no lifetime benefit limit

There is no lifetime benefit limit under the VHIS Standard Plan, which allows you to claim up to the annual benefit limit of HKD420,000 per policy year to get the treatments you need. These limits are refreshed at the start of each policy year.



### Coverage for unknown pre-existing conditions<sup>3</sup>

At present, unknown pre-existing conditions are commonly excluded from insurance coverage. We offer coverage against unknown pre-existing conditions and will reimburse your eligible medical expenses on a sliding scale.

Policy year	Reimbursement for unknown pre-existing conditions
1 <sup>st</sup>	No coverage
2 <sup>nd</sup>	25%
3 <sup>rd</sup>	50%
4 <sup>th</sup> +	100%



### Coverage for pre/post-confinement and day case procedure outpatient care

We will reimburse your eligible expenses for outpatient visits or emergency consultations resulting in confinement or day case procedures up to a per-visit limit and an annual limit. Eligible expenses for follow-up outpatient procedures conducted by the attending doctor or supported by written referral may also be covered after the confinement and day case procedure.

If an endoscopic examination, such as an oesophagogastroduodenoscopy (OGD) or colonoscopy, is considered medically necessary, you can opt for one performed in a day case procedure centre, avoiding hospital confinement so that you can recover in the comfort of your own home whenever possible.



### Coverage for local psychiatric treatment

Your mental health deserves the same attention as your physical health. If you are afflicted with a mental condition, you will be covered for the eligible expenses incurred from the psychiatric treatments recommended by a specialist during confinement in Hong Kong.



### Medical Concierge Service<sup>4</sup>

If you (as an insured person) ever require medically necessary treatment, you may receive support from our Medical Concierge Consultant via the Medical Concierge Service hotline. Whether you prefer a network or non-network doctor, we may assist you with making medical appointments, as well as handling insurance-related documentation including pre-authorisation for hospital admission and claim submission for reimbursement.

## Let's look at Mark's story



**Mark is a 40-year-old architect, living a stressful life.**

He has a 35-year-old wife and a 6-year-old son. While he is working hard for his career, he also wants to ensure essential medical protection for himself and his family against the unexpected. He has therefore purchased the HSBC Voluntary Health Insurance Standard Plan for himself, his wife and his son to enjoy the protection and tax benefits.

### Mark chooses the HSBC Voluntary Health Insurance Standard Plan to meet his needs

<b>Policyholder and insured person</b>	Mark	<b>Annual benefit limit</b>	HKD420,000
<b>Issue age<sup>2</sup></b>	40	<b>Annual premium</b>	HKD2,995

**Scenario:** 4 years later, Mark is unfortunately found to have a blocked heart blood vessel after experiencing shortness of breath and arm paralysis. His doctor recommends Percutaneous Coronary Intervention surgery with stents and a 3-day hospital stay. With the VHIS Standard Plan, **the total claimable amount is HKD66,830**, protecting Mark against the serious financial burden and giving him peace of mind during his recovery journey.

Hospital and surgical items	Actual medical expenses	Actual reimbursement of HSBC VHIS Standard Plan
Room and board (3 days)	HKD3,180	HKD2,250
Specified medical implants and miscellaneous charges	HKD52,100	HKD14,000 (Reached the annual limit)
Attending doctor's visit fee	HKD3,180	HKD2,250
Surgeon's fee	HKD55,000	HKD25,000 (Category: Major)
Operating theatre charges	HKD25,000	HKD8,750 (35% of Surgeon's fee payable)
CT scan	HKD20,000	HKD14,000 (30% coinsurance)
Pre- and post-confinement/ Day case procedure outpatient care	HKD1,000	HKD580
<b>Total fees/Claimable amount</b>	<b>HKD159,460</b>	<b>HKD66,830 (Claim ratio 41.9%)</b>
<b>Total non-claimable amount</b>		<b>HKD92,630</b>

### Tax efficiency

Mark can enjoy a tax deduction<sup>1</sup> on qualifying premiums for himself, his wife and his son paid in each year of assessment:

Insured person	Annual premium paid (Depending on age/product)	Tax-deductible amount (Capped at HKD8,000 per insured person)	Amount of tax saved (Assuming 15% tax rate <sup>5</sup> )
Mark (Policyholder)	HKD2,995	HKD2,995	HKD449.25
Wife	HKD2,490	HKD2,490	HKD373.50
Son	HKD1,671	HKD1,671	HKD250.65
<b>Total</b>	<b>HKD7,156</b>	<b>HKD7,156</b>	<b>HKD1,073.40</b>

The above example is for illustrative purposes only without discounts. The actual tax saving is subject to review and agreement by the Inland Revenue Department of the Hong Kong SAR on a case by case basis. The Company and Hang Seng Bank do not provide tax advice, and customers should always consult a professional advisor for independent tax advice if they have any doubts. The above is also subject to item sub-limit, which will be determined by the Company at the discretion on a case by case basis. Please refer to the "Benefit schedule" section for details.

# Benefit schedule

Below is a summary of the key benefits of the policy. Please refer to your Policy Provisions for the full list of benefits, terms, conditions and exclusions.

## HSBC Voluntary Health Insurance Standard Plan

### Product summary

<b>Certification number</b>	S00042-01-000-02
<b>Policy term</b>	Guaranteed renewable annually up to age 100 of the insured person
<b>Issue age<sup>2</sup></b>	15 days to age 80

### Benefit level

<b>Annual benefit limit for benefit items (a) - (l)</b>	HKD420,000 per policy year
<b>Lifetime benefit limit for benefit items (a) - (l)</b>	Nil
<b>Geographic limitation</b>	Worldwide <sup>(1)</sup>

### Benefit items<sup>(2)</sup>

(a) Room and board	HKD750 per day Max 180 days per policy year
(b) Miscellaneous charges	HKD14,000 per policy year
(c) Attending doctor's visit fee	HKD750 per day Max 180 days per policy year
(d) Specialist's fee <sup>(3)</sup>	HKD4,300 per policy year
(e) Intensive care	HKD3,500 per day Max 25 days per policy year
(f) Surgeon's fee	Per surgery, subject to surgical category for the surgery/procedure in the schedule of surgical procedures: • Complex: HKD50,000 • Major: HKD25,000 • Intermediate: HKD12,500 • Minor: HKD5,000
(g) Anaesthetist's fee	
(h) Operating theatre charges	35% of surgeon's fee payable <sup>(6)</sup>
(i) Prescribed diagnostic imaging tests <sup>(3) (4)</sup>	HKD20,000 per policy year Subject to 30% coinsurance
(j) Prescribed non-surgical cancer treatments <sup>(5)</sup>	HKD80,000 per policy year
(k) Pre- and post-confinement/Day case procedure outpatient care <sup>(3)</sup>	HKD580 per visit, up to HKD3,000 per policy year: • 1 prior outpatient visit or emergency consultation per confinement/day case procedure • 3 follow-up outpatient visits per confinement/day case procedure (within 90 days after discharge from hospital or completion of day case procedure)
(l) Psychiatric treatments	HKD30,000 per policy year

### Other benefits

Compassionate death benefit	HKD10,000
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#### Notes:

- (1) Worldwide shall mean no geographical limitation. Except for psychiatric treatment is applicable to Hong Kong only.
- (2) Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
- (3) The Company shall have the right to ask for proof of recommendation eg written referral or testifying statement on the claim form by the attending doctor or registered medical practitioner.
- (4) Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
- (5) Treatments covered here only include radiotherapy (including proton therapy), chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- (6) The percentage here applies to the surgeon's fee actually payable or the benefit limit for the surgeon's fee according to the surgical categorisation, whichever is lower.

This benefit schedule is subject to and shall be read together with the terms and benefits of the Policy Provisions.

# Standard premium schedule (HKD)

## Standard premium schedule

Attained age <sup>#</sup>	Male	Female	Attained age <sup>#</sup>	Male	Female
0	2,974	2,673	50	4,493	4,978
1	2,974	2,673	51	4,766	5,217
2	2,974	2,673	52	5,035	5,457
3	2,974	2,673	53	5,286	5,696
4	2,974	2,673	54	5,551	5,936
5	1,671	1,722	55	5,836	6,175
6	1,671	1,722	56	6,141	6,413
7	1,671	1,722	57	6,476	6,653
8	1,671	1,722	58	6,943	6,892
9	1,671	1,722	59	7,422	7,132
10	1,448	1,722	60	7,887	7,371
11	1,470	1,722	61	8,334	7,610
12	1,491	1,722	62	8,765	7,850
13	1,513	1,722	63	9,121	8,195
14	1,535	1,722	64	9,477	8,652
15	1,556	1,722	65	9,850	9,164
16	1,578	1,974	66	10,239	9,734
17	1,600	1,823	67	10,644	10,266
18	1,621	1,850	68	11,081	10,816
19	1,643	1,878	69	11,759	11,353
20	1,664	1,906	70	12,468	11,916
21	1,686	1,934	71	13,224	12,521
22	1,708	1,961	72	14,016	13,212
23	1,729	1,990	73	14,879	13,745
24	1,751	2,017	74	15,023	14,165
25	1,773	2,045	75	15,307	14,499
26	1,845	2,073	76	15,516	14,732
27	1,907	2,101	77	15,657	14,871
28	1,982	2,128	78	15,761	14,970
29	2,041	2,157	79	15,880	15,069
30	2,096	2,184	80	15,902	15,165
31	2,146	2,238	81*	15,923	15,262
32	2,202	2,302	82*	15,945	15,357
33	2,247	2,423	83*	16,010	15,449
34	2,309	2,454	84*	16,072	15,548
35	2,384	2,490	85*	16,135	15,660
36	2,470	2,532	86*	16,202	15,782
37	2,560	2,575	87*	16,265	15,916
38	2,705	2,725	88*	16,331	16,066
39	2,823	2,883	89*	16,413	16,231
40	2,995	3,046	90*	16,494	16,312
41	3,133	3,214	91*	16,578	16,394
42	3,269	3,387	92*	16,659	16,475
43	3,435	3,529	93*	16,741	16,555
44	3,598	3,691	94*	16,826	16,639
45	3,765	3,865	95*	16,909	16,722
46	3,865	4,054	96*	16,991	16,803
47	3,978	4,239	97*	17,077	16,888
48	4,128	4,499	98*	17,162	16,972
49	4,234	4,739	99*	17,248	17,056

<sup>#</sup> Age refers to the age of the Insured Person on his or her last birthday.

\*The premiums shown are for renewal only.

This standard premium schedule does not include levy which is collected by the Insurance Authority.

In accordance with Section 2 of Part 4 of the Terms and Benefits of the VHIS Standard Plan, the Company shall have the right to adjust the standard premium at renewal according to the prevailing standard premium schedule adopted by the Company on an overall portfolio basis. First year premium is based on the premiums stated above according to the attained age, but the actual premiums payable in the future policy years may be subject to adjustment.

# Important notes

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**Disclosure obligation for underwriting**

You are required to declare all requisite information that would affect the underwriting decisions of the Company. The Company has the right to declare the policy void due to any misrepresentation or fraud. If the non-health related information of the insured person (including but not limited to age or sex) is misstated in the application, the Company may adjust the premium, for the past, current or future policy year, or declare the policy void on the basis of the correct information.

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**Cooling-off period**

HSBC Voluntary Health Insurance Standard Plan is a government certified health insurance plan, which is not equivalent or similar to any kind of bank deposit. Part of the premium pays for the insurance and related costs including, but not limited to, policy acquisition, maintenance and claims costs.

If you are not satisfied with your policy, or our plan's coverage overlaps with your other existing protection plans coverage or exceed your needs, you have a right to cancel it within the cooling-off period and obtain a refund of any premiums and levies paid by giving a written notice to HSBC Life (International) Limited. Your request to cancel must be signed by you and received directly by the office of HSBC Life (International) Limited at 18/F, Tower 1, HSBC Centre, 1 Sham Mong Road, Kowloon, Hong Kong within the cooling-off period (that is, a period of 21 calendar days immediately following the day of the delivery to you or your nominated representative of these terms and benefits and the policy schedule or the cooling-off notice; whichever is the earlier).

No refund can be made if a benefit payment has been made, is to be made or impending. The above cancellation right shall not apply at renewal. In such event, these terms and benefits shall be deemed to have been void from the policy effective date and the Company shall not be liable to pay any benefit.

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**Policy cancellation**

You can request to cancel the policy after the cooling-off period by giving 30 days prior written notice to the Company, provided that there has been no benefit payment during the relevant policy year.

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**Premium adjustment**

The initial premium is based on the age of the insured person at the time of policy issuance and other factors including but not limited to gender and risk class of the insured person and the benefit level of your policy. Premiums are not guaranteed and may be changed by the Company at any of the policy anniversaries. In accordance with Section 2 of Part 4 of the Terms and Benefits of HSBC Voluntary Health Insurance Standard Plan, the Company shall have the right to adjust the standard premium at renewal according to the prevailing standard premium schedule adopted by the Company on an overall portfolio basis. We consider factors including but not limited to (i) the Company's claims and policy persistency experience and (ii) expected claim outgo in future (reflecting the impact of medical trend, medical cost inflation and product feature revisions).

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**Suicide**

If the insured person commits suicide within 1 year from the policy effective date of the policy, whether sane or insane, no compassionate death benefit will be payable under this policy.



# Important notes

## **Termination conditions**

We have the right to terminate your policy under any of the following circumstances:

- Non-payment of premiums after a grace period of 31 days after the premium due date;
- The day immediately following the death of the insured person;
- The Company has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write the policy; or
- If this policy is or becomes illegal under the law applicable to the policyholder or the insured person

Please refer to the Policy Provisions for detailed terms and conditions on termination.

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## **Medically necessary**

It refers to 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
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## **Reasonable and customary**

In determining whether a charge is Reasonable and Customary, the Company shall make reference to the followings (if applicable):

- Treatment or service fee statistics and surveys in the insurance or medical industry;
  - Internal or industry claim statistics;
  - Gazette published by the Government; and/or
  - Other pertinent source of reference in the locality where the treatments, services or supplies are provided
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## **Applicable laws**

This policy is issued in Hong Kong and shall be governed by and construed in accordance with the laws of the Hong Kong Special Administrative Region. The Company and policyholder agree to be subject to the exclusive jurisdiction of the Hong Kong courts.

# Key risks and exclusions

## Credit and insolvency risks

HSBC Voluntary Health Insurance Standard Plan is an insurance policy issued by us. **You are subject to our credit risk** because all your premiums paid become part of our assets. You do not have any rights or ownership over any of our assets. You can only claim against us under all circumstances.

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## Risk from the delay or missing the payment of premiums due

Your policy will be automatically terminated due to non-payment of premiums after a grace-period of 31 days after the premium due date. If your policy is terminated, **you may not get back the premium you have paid**. A terminated policy cannot be reinstated. You will need to purchase a new policy if you wish to enjoy any of the benefits under the VHIS Standard Plan and will be subject to a fresh underwriting process with the Company, which **may result in higher premiums and imposition of case-based exclusions**.

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## Inflation risk

You must take into account the **risk of inflation, which will likely cause the future cost of living to rise**. With inflation in place, you should expect that **you or your assigned beneficiary(ies) will receive an amount that is less in real terms in the future**, even if we have done our best to serve your policy.

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## Key exclusions

**Under these terms and benefits, the Company shall not pay any benefits in relation to or arising from the following expenses:**

- Treatments, procedures, medications, tests or services which are not medically necessary.
- 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.
- HIV and its related disability, which is contracted or occurs before the policy effective date, except for sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth.
- 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.
- Services for beautification or cosmetic purposes, unless necessitated by injury caused by an accident, or correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to LASIK.
- Prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions.
- Dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident.
- Medical services and counselling services 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.
- Purchase of durable medical equipment or appliances including but not limited to wheelchairs, hearing aids and over-the-counter drugs etc.
- Traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, and other forms of alternative treatment including but not limited to qigong, massage therapy and aromatherapy.
- Experimental or unproven medical technology or procedure.
- Congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of 8 years.
- Eligible expenses which have been reimbursed under any law, or medical programme or insurance policy provided by any government, company or other third party.
- War (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

The above list is for reference only. Please refer to your Policy Provisions for the full list of exclusions.

## Endnotes

1. Tax deduction eligibility is only applicable to policyholders or his/her spouse who are Hong Kong taxpayers. Tax deduction for the qualifying premiums paid under VHIS policy (not including levy) will be based on the premiums paid after deducting the premium discount (if any). The actual tax saving may be lower than the illustrated amount and is subject to review and agreement by the Inland Revenue Department of the Hong Kong SAR on a case by case basis. For more information, please refer to [www.ird.gov.hk](http://www.ird.gov.hk) or seek independent tax advice.
2. Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured person on his or her last birthday.
3. 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. The Company may impose case-based exclusion(s) to the pre-existing condition(s) notified to the Company in the application for the VHIS Standard Plan and any subsequent information or document submitted to the Company for the purpose of the application. Unknown pre-existing condition(s) refers to any pre-existing condition(s) that the policyholder and/or insured person was not aware and would not reasonably have been aware of at the time of application. Please refer to the policy provisions for the full terms and conditions.
4. Medical Concierge Service ("Medical Concierge Service") is not a part of the policy in respect of HSBC Voluntary Health Insurance Scheme ("HSBC VHIS"). For more details of the Medical Concierge Service, please refer to the detailed terms and conditions on [www.hangseng.com/vhis](http://www.hangseng.com/vhis).  
  
A brief summary of some of the terms and conditions of Medical Concierge Service as follows:
  - a) The Medical Concierge Service is applicable to Eligible Customers in respect of HSBC VHIS, subject to all the terms and conditions herein.
  - b) Regarding Medical Concierge Service, "Eligible Customers" shall mean eligible insured person(s) in respect of the Relevant Policy issued in respect of HSBC VHIS.
  - c) Medical Concierge Service shall only be applicable for matters concerning the Relevant Policy for Eligible Customers, subject to all the terms herein.
  - d) Any policyholder or person who is not an insured person of HSBC VHIS shall not constitute an Eligible Customer for the Medical Concierge Service.
  - e) The Medical Concierge Service, at all times, be subject to the terms and conditions as determined by the Company.
  - f) The Medical Concierge Service shall be subject to availability, under any and all circumstances. There is no guaranteed in respect of any of the following:  
Availability of a doctor or accessibility to a doctor, regardless of whether an appointment has been arranged or not.
  - g) The Company shall have the right to change and revise these terms and conditions of Medical Concierge Service (at its discretion, without any prior notice) at any time and from time to time. Any offer for Medical Concierge Service may be withdrawn and/or terminated by the Company at its discretion. The Company shall not be liable for any loss, damages, costs or expenses which may arise (directly or indirectly) from any change of these terms and conditions, or any exercise of the Company's discretion in respect of Medical Concierge Service.
  - h) The Company shall not be liable for any loss, damage, costs, or injury (which may arise directly or indirectly) from any fault, failure, cancellation, delay, or exercise of the Company's discretion in or relating to the performance of any matters or services under or related to the Medical Concierge Service, including but not limited to circumstances where such failure or delay is relating to:
    - i) Any matters which are beyond the reasonable control of the Company or any of the Company's service provider(s), or
    - ii) Any matters which could not reasonably have been foreseen by the Company, or
    - iii) Any matter, delay, service, service standard, fault, omission, accident or incident relating to any service providers or independent contractors, including but not limited to any medical provider(s), or
    - iv) Any unavailability, or delay of any Medical Concierge Service, or
    - v) Quality of any service relating to the any Medical Concierge Service.
  - i) The Company's role under the Medical Concierge Service is a facilitator, with the objective to provide specified support to Eligible Customers within the Company's designated scope of services, subject to all the terms and conditions herein. Notwithstanding anything stated herein, the Company does not and shall not provide any kind of the following services: a) Medical services or any kind of services which require licensing in the medical field; b) Transportation services which require licensing relating to vehicles. Eligible Customers who need emergency service or are in critical or serious condition should directly arrange for an ambulance, and should not use our Medical Concierge Service.
5. For the year of assessment 2023/24, the standard tax rate is 15%.

Please refer to HSBC Life's product website [life.hsbc.com.hk/hs](http://life.hsbc.com.hk/hs) for product details of HSBC VHIS Standard Plan.

# HSBC Voluntary Health Insurance Standard Plan

## HSBC Life (International) Limited

HSBC Life (International) Limited ("the Company", "we" or "us") is incorporated in Bermuda with limited liability, and is one of the HSBC Group's insurance underwriting subsidiaries.

## Hong Kong Special Administrative Region office

18/F, Tower 1, HSBC Centre, 1 Sham Mong Road, Kowloon, Hong Kong

The Company is authorised and regulated by the Insurance Authority to carry on long-term insurance business in the Hong Kong Special Administrative Region. Hang Seng Bank Limited ("Hang Seng Bank") is registered in accordance with the Insurance Ordinance (Cap. 41 of the Laws of the Hong Kong Special Administrative Region) as an insurance agency (license no. FA3168) of the Company for the distribution of life insurance products in the Hong Kong Special Administrative Region.

HSBC Voluntary Health Insurance Standard Plan ("the Plan") is a product of the Company and not Hang Seng Bank, underwritten by the Company and it is only intended for sale through Hang Seng Bank in the Hong Kong Special Administrative Region. The Company will be responsible for providing your insurance coverage and handle the network management under your policy. The Plan is not a bank deposit or bank savings plan.

You have an option to purchase the Plan as a standalone certified plan under the VHIS without bundling with other type(s) of insurance product. Subscriptions will be payable to the Company upon enrolment of the Plan. The Company would provide Hang Seng Bank with the relevant commission and performance bonus in accordance to the selling of the Plan. The existing sales staff remuneration policy employed by Hang Seng Bank will take into account various aspects of the staff performance but not solely on the sales amount.

In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between Hang Seng Bank and you out of the selling process or processing of the related transaction, Hang Seng Bank is required to enter into a Financial Dispute Resolution Scheme process with you; however, any dispute over the contractual terms of the Plan should be resolved between the Company and you directly.

The Company accepts full responsibility for the accuracy of the information contained in the product brochure and confirms, having made all reasonable enquiries, that to the best of its knowledge and belief there are no other facts the omission of which would make any statement misleading. The information shown therein is intended as a general summary. **Please refer to your insurance policy and policy provision for the detailed terms and conditions.**

November 2024

Visit a Hang Seng Bank branch nearby and arrange for an appointment to review your insurance needs.

[www.hangseng.com/vhis](http://www.hangseng.com/vhis)

