

ManuPlan

Network Clinical Benefits
(Applicable for Macau only)

專業僱員保障計劃

網絡門診福利 (只適用於澳門)



ManuPlan

Network Clinical Benefits

ManuPlan Network Clinical Benefits offers convenient network clinical benefits¹ for small to medium-sized companies in Macau at an attract rate.



Suitable for employers with a minimum of 3 employees



Coverage can be extended to an employee's spouse and dependent children



No claim procedure is required when using medical cards



Network of doctors in convenient locations



Emergency Assistance Benefits², including enquiry hotline, medical evacuation, compassionate visit, repatriation arrangements, and so on

ManuPlan Network Clinical Benefits is a group insurance plan underwritten and issued by Manulife (International) Limited (Incorporated in Bermuda with limited liability). This product brochure provides only general information on this product. It does not form part of the policy and does not contain full terms of the policy. You should read the policy provisions for the exact terms and conditions that apply to this product. You can ask us for a copy of the policy provisions before making a purchase.



Benefits at a glance

Product nature	Provide network clinical benefit
Product type	Standalone group medical insurance plan
Eligibility	<p>Applicable to employers with 3 employees or more.</p> <p>The issue age for both employee and spouse is from 16 to 64.</p> <p>The issue age for a dependent child is from 15 days to 18 years old, or to 24 years old if the child is in full-time attendance at a school or university. The dependent child must be unmarried and depend on the insured employee for support and maintenance.</p> <p>The word “age” means the attained age at the policy anniversary.</p>
Basic coverage	<p>General practitioner’s visits are provided for all plans.</p> <p>Additional benefits of Chinese medicine practitioner’s visits are available under standard plan.</p> <p>Additional Specialist’s visits, Chinese medicine practitioner’s visits and Diagnostic X-ray and laboratory fee are available under advanced plan.</p>

Benefits schedule

	Basic plan (MA67)	Standard plan (MA68)	Advanced plan (MA69)
General practitioner's visits ³ (up to 3 days' standard medication included ⁴)			
Maximum number of visits per year	20	20	30
Co-payment per visit	HK\$20	HK\$20	HK\$20
(For example, insured member needs to pay HK\$20 regardless of the medical expenses of that visit.)			
Specialist's visits ³ (subject to referral by a network general practitioner ⁵) (up to 5 days' standard medication included ⁴)			
Maximum number of visits per year	NIL	NIL	5
Co-payment per visit	NIL	NIL	HK\$50
(For example, insured member needs to pay HK\$50 regardless of the medical expenses of that visit.) (applicable to advanced plan only)			
Chinese medicine practitioner's visits ³ (2 days' herbal / powder medication included ⁴)			
Maximum number of visits per year	NIL	5	5
Co-payment per visit	NIL	HK\$20	HK\$20
(For example, insured member needs to pay HK\$20 regardless of the medical expenses of that visit.) (applicable to standard plan and advanced plan only)			
Maximum number of visits per year for general practitioner, specialist and Chinese medicine practitioner	20	20	30
Diagnostic X-ray and laboratory fee (subject to referral by a network general practitioner or specialist to an appointed laboratory center only)			
Maximum limit per year	NIL	NIL	HK\$500
Co-payment percentage	NIL	NIL	20%
(For example, if the medical expenses are HK\$500, insured member needs to pay $HK\$500 \times 20\% = HK\$100.$) (applicable to advanced plan only)			
Compassionate death benefit (for employees only)	HK\$1,000	HK\$1,000	HK\$1,000
Emergency Assistance Benefits	Unlimited	Unlimited	Unlimited

The above benefits of general practitioner's visits, specialist's visits, Chinese medicine practitioner's visits and diagnostic X-ray and laboratory fee are available only in Macau. Overseas doctor's visits for clinical consultation and medication expenses are covered, subject to 70% reimbursement up to HK\$300 per visit and a maximum of 5 visits per year.

(For example:

- if the medical expenses are HK\$250, insured member will be reimbursed $HK\$250 \times 70\% = HK\$175.$
- if the medical expenses are HK\$500, eligible amount for claim would be $HK\$500 \times 70\% = HK\$350,$ subject to the applicable limit per visit. Hence, the reimbursement amount would be HK\$300.)

Rate table

Annual premium⁶ (HK\$)⁷ per insured member

Insured member	Basic plan (MA67)	Standard plan (MA68)	Advanced plan (MA69)
Employee / spouse	803	1,041	1,238
Dependent child	803	1,041	1,238



Value-added services

Online services at www.manulife.com.hk

Your company can manage your employee benefits easily and carry out various common administrative tasks, such as viewing the policy status and recent changes, updating the records of employees and their dependents, viewing the surgical schedule, and so on.

Your employees can use their own personal log-in details to view their benefits, check their history of claims, and so on.

ClaimSimple.hk

Support 3 key services – Manulife eClaims, Find My Doctor and My Medical Card, to let you enjoy true one-stop convenience! So you can look forward to a faster, simpler user experience every time. Members can simply log on to www.claimsimple.hk to access the services.



 claimsimple.hk

Find a doctor, use your medical card, submit claims — one stop, in one go!

e-Alert for members

Insured members who have registered their e-mail address with us will receive e-mail message from Manulife notifying the completion of their medical claims.

Customer service hotlines

Employer hotline — (853) 8398 0313

Member hotline — (853) 8398 0383

(Service hours: Mon–Fri 9am to 6pm, except public holidays)

Customer service centres

Avenida De Almeida Ribeiro No.61, Circle Square, 14 andar A, Macau

(Service hours: Mon-Fri 9am to 6pm, except public holidays)

The above value-added services are only available for selected group medical insurance plans. Contact our Manulife servicing agent or our customer service hotline to get professional advice and assistance.

Notes

1. The network doctors and designated network clinics are provided by the third party service provider. The third party provider may revise the list of network doctors and designated network clinics from time to time without giving you notice. Please see the latest list of network doctors and designated network clinics through www.claimsimple.hk or call our customer service hotline for details. The network doctor services are provided by a third party service provider which is an independent contractor and is not our agent. We make no representation, warranty or undertaking as to the availability of any services of the third party service provider. We shall not be liable to you or the life insured in any respect for any loss, damage, expense, suit, action or proceedings suffered or incurred by you or the life insured, whether directly or indirectly, arising from or in connection with the services provided or advice given by such third party service provider and/or its agents, or the availability of such services. All coverage and indemnity limits of network doctor services are subject to the detailed terms and conditions of the policy provision.
2. Please refer to the Emergency Assistance Benefits Provisions of Inter Partner Assistance Hong Kong Limited (IPA) for the terms and conditions of the services.
3. Each of the above services is subject to a maximum of 1 visit per day, except under the following conditions:
 - (i) The insured member may have 1 general practitioner's visit and 1 specialist's visit on the same day if a valid referral letter from a network general practitioner is obtained.
 - (ii) The insured member may have 1 general practitioner's visit and/or 1 specialist's visit (subject to item (i) above) and 1 Chinese medicine practitioner's visit on the same day.
4. The network doctors reserve the right to charge extra for nonstandard medication (e.g. if the medication is special and excessively expensive).
5. Doctor's referral is required for specialist's visit (except gynaecology, paediatrics, otorhinolaryngology (ENT), ophthalmology (Eye), orthopaedics & traumatology, dermatology and urology). The referral letter is valid up to 6 months from the date of issuance.
6. The premiums are applicable for companies with up to 50 insured employees. Please contact your Manulife service agent if your company has more than 50 insured employees.
7. Premiums can be paid in Macau patacas (MOP), subject to the exchange rate determined by Manulife (International) Limited. Please refer to your Manulife service agent for the latest exchange rate.

Important information

1. Renewal

The benefits schedule and premium rates may be subject to change on each policy anniversary with reference to factors such as but not limited to employee statistics, the claim history of each policy, medical trends and inflation. Non-payment of premium will result in termination of the policy. ManuPlan Network Clinical Benefits is a yearly renewable policy. There is no guarantee of renewal.

2. Claim procedure

If any of the insured members wishes to make a claim, he/she shall send us the completed claim form and any claim-related documents within 90 days from date of covered event happened.

For insurance products with reimbursement coverage for medical charges or expenses, employer and insured members are entitled to request a preliminary benefit enquiry including the eligibility of a claim, claimable amount estimate and reimbursement limit respective for the treatment or procedure ("treatments") before undergoing treatments via our telephone hotline, mailing or email (you may access contact information from your insurance advisor). With a valid medical quotation of the treatments with the issued date within the last 1 month, the preliminary benefit enquiry or other general claim enquiry will be ready within 10 working days (if needs, working days needed will be adjusted).

For detail claims procedure, you may visit our website at www.manulife.com.hk/ghclaims-en or contact our servicing agent or our customer service.

No claims report or claims ratio will be provided to the policyholder by Manulife in respect of the ManuPlan Network Clinical Benefits.

3. Termination procedure

The policyholder may terminate this policy or a benefit under this policy at any premium due date by giving the Company one month prior written notice.

Manulife may also terminate the policy or any benefit on any policy anniversary, and in such event shall mail to you in written notice not less than one month prior to such date.

In addition, if the number of employees falls below three(3), or such other number or percentage of employees is less than the minimum participation requirements outlined in the policy contract at any premium due date, Manulife may terminate the policy.

Manulife may terminate the policy at any time if the policyholder fails to provide or submit any documents required by Manulife or satisfy the requirements set by Manulife in respect of the policy which would render Manulife unable to comply with any applicable laws, legislation, ordinances, statutes, regulations, rules, orders, protocols, directives, requirements, standards, codes of practice, guidelines, policies, guidance notes, notices, and circulars having legal effect or issued or made by any competent governmental, statutory or regulatory body having regulatory or supervisory authority, jurisdiction or control over Manulife.

4. Information disclosure

All application forms/health declaration forms completed by the policyholder and/or insured member shall be true to the best of their knowledge and form the basis of the policy to be issued.

Failure to disclose any material facts or information which may influence or which the Company would regard as likely to influence the assessment and acceptance of the coverage, may render the policy voidable by the Company and the Company reserves the right to request the refund of claim payment. In the event of doubt as to whether a fact or information is material, it should be disclosed in all application forms/health declarations forms.

5. Reasonable and customary charges

It 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 charges are reasonable and customary charges, 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.

6. Medically necessary

It shall mean the need to have medical service for the purpose of investigating or treating the relevant sickness or injury 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 doctor;
- b) be consistent with the diagnosis and necessary for the investigation and treatment of the sickness or injury;
- 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 member, his family, caretaker or the doctor;
- 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;
- e) be furnished at the most appropriate level which, in the prudent professional judgment of the doctor, can be safely and effectively provided to the insured member; and
- f) with respect to hospital confinement, not primarily for diagnostic scanning purpose, imaging examination or physical therapy.

General exclusions

1. Cosmetic or plastic surgery or any treatment for the purpose of beautification.
2. Any condition arising out of congenital defect or disease.
3. Any dental treatment or diagnosis, eye refraction, the supply of hearing aids, prosthesis, pacemakers, blood plasma or the provision of special nursing care.
4. Any medical services associated with pregnancy including abortion or sterilization whether male or female.
5. Fertility tests and treatment or contraceptive techniques.
6. Any psychiatric disorder or rest cure.
7. Any condition caused by chronic alcoholism or drug addiction.
8. Any suicide, attempted suicide, self mutilation and the sequelae thereof.
9. Routine physical examinations, health check-ups or tests or any treatment which is not medically necessary.
10. Injuries arising directly or indirectly from war, declared or undeclared, strike, riot, revolution or any warlike operation.
11. Radiotherapy or investigation or treatment involving radioactive isotopes.
12. Immunizations with the exception of tetanus.
13. Tonics, appetite stimulants, depressants if requested by patient and not by the doctors of the Panel.
14. Any investigation and treatment of AIDS and ARC.
15. Treatment outside the Macau Special Administrative Region.
16. Medication for any specific anti-viral, anti-cancer, hormonal therapy and other expensive medication and long-term medication.
17. Any matters associated with tuberculosis and kidney dialysis.
18. Special investigation such as Positron Emission Tomography Scan, Computerized Tomographic Scan, Magnetic Resonance Imaging, Stress-electrocardiogram, Echocardiogram, Electro-encephalogram, Electro-myogram and Bone Densitometry.
19. Pap smears requested by patient except those recommended by the doctors of the Panel.
20. Venereal diseases or their sequelae.
21. Any pre-existing condition, illness or injury that commenced or presented sign(s) and/or symptoms prior to the Insured Member's coverage commencement date.

The following additional exclusions shall be applied for Chinese Medicine Practitioner's visits (applicable if the benefit is included in the Benefit Schedule):

1. Any treatment not rendered by the appointed Chinese Medicine Practitioners.
2. Any expense for Chinese medical equipment or appliances.
3. Any proprietary Chinese medicine.
4. Any tonic drugs, cosmetic drugs and drugs for replenishing the vital essence and for reinforcing the vital function.
5. Aromatic stimulants, sedative or tranquilizers, and any medical treatment relating to anxiety, depression, emotional disorders, psychological disorders or psychiatric disorders.
6. Expenses for any injection by syringe.
7. Any consultation for bonesetting/acupuncture/moxibustion, body and foot massage, Tui Na, Qi Gong, ear reflexology, cupping and scraping and so on unless such benefit is provided.
8. Expensive herbal medication.

The above is only a general description of the exclusions. Please see the policy provisions for the full list of exclusions.

Application guidelines

Participation guidelines

- All eligible employees must enrol the plan.
- If an employer chooses dependent coverage, all eligible dependents must enrol in the same plan as that of the relevant employee.

Application procedure

Please submit the following completed and signed documents to us:

- The ManuPlan Network Clinical Benefits application form
- A photocopy of the company's or group's business registration certificate and other relevant documents
- For a company with fewer than 10 employees, each employee must complete the ManuPlan employee enrolment form; For a company with 10 employees or more, please complete the ManuPlan group employee enrolment sheet
- A cheque issued by the company or group for the first year's premium, made payable to "Manulife (International) Limited"



About Manulife Hong Kong

Manulife Hong Kong, through Manulife International Holdings Limited, owns Manulife (International) Limited, Manulife Investment Management (Hong Kong) Limited and Manulife Provident Funds Trust Company Limited. As a member of the Manulife group of companies, Manulife Hong Kong offers a diverse range of protection and wealth products and services to individual and corporate customers in Hong Kong and Macau.

About Manulife

Manulife Financial Corporation is a leading international financial services provider that helps people make their decisions easier and lives better. With our global headquarters in Toronto, Canada, we provide financial advice and insurance, operating as Manulife across Canada, Asia, and Europe, and primarily as John Hancock in the United States. Through Manulife Investment Management, the global brand for our global wealth and asset management segment, we serve individuals, institutions and retirement plan members worldwide. At the end of 2020, we had more than 37,000 employees, over 118,000 agents, and thousands of distribution partners, serving over 30 million customers. As of September 30, 2021, we had CAD\$1.4 trillion (HK\$8.6 trillion) in assets under management and administration, and in the previous 12 months we made CAD\$31.6 billion in payments to our customers.

Our principal operations are in Asia and Canada, and the United States, where we have served customers for more than 155 years. We trade as 'MFC' on the Toronto, New York, and the Philippine stock exchanges and under '945' in Hong Kong. Not all offerings are available in all jurisdictions. For additional information, please visit manulife.com.

Please send correspondence on group life and medical insurance to: Avenida De Almeida Ribeiro No.61, Circle Square, 14 andar A, Macau Fax: (853) 2832 3312

In this product brochure, 'you' and 'your' refer to the policyholder. 'Manulife', 'the Company', 'we', 'us' and 'our' refer to Manulife (International) Limited (incorporated in Bermuda with limited liability).

To view our privacy policy, please go to our website: www.manulife.com.hk. You can request Manulife not to use your personal information for direct marketing purposes by writing to our Privacy Officer at Avenida De Almeida Ribeiro No.61, Circle Square, 14 andar A, Macau, or by calling our Customer Service Hotline at (853) 8398 0383.

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