

ManuPlan

專業僱員保障計劃



ManuPlan

ManuPlan offers a wide range of tailor-made group life and medical benefits at competitive rates.

Employers may choose to have a single policy with life and medical benefits or a separate policies for life and medical benefits respectively.

ManuPlan 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.

Features highlights



**Customer-oriented,
tailor-made benefits**



**Suitable for employers with a
minimum of 3 employees**



**Coverage for insured employees
up to the age of 69¹**



**Medical benefits coverage for
dependent children up to the
age of 24**



**A simple application procedure:
health declaration is not required
for group medical insurance plans
with 10 insured employees or more
(based on the policy inception date
or last renewal date)**



24-hour world-wide coverage



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



**(Optional) Access to our network
doctor services³, which include
up to 1,900 doctors for the silver
medical card and 2,100 doctors for
the gold medical card for Hong Kong
customers**



**(Optional) Conversion Privilege^{4,5}:
allows employees to retain basic
insurance coverage on an individual
basis when employment ends
without health declaration**



Benefits at a glance

	Group Life Insurance	Group Medical Insurance
Product nature	Provide a tailor-made group life / medical insurance benefits	
Product type	Single policy with life and medical benefits, or separate policies for life and medical benefits respectively	
Eligibility	Applicable to employers with 3 employees or more	
	For Term Life, Accidental Death and Disablement Benefits (AD&D), the issue age for employee is from 16 to 64. For Long Term Disability (LTD), Total and Permanent Disability Benefits (TPD) and Total Disability Instalment Benefits (TDI), the issue age for employee is from 16 to 59. The word “age” means the attained age at the policy anniversary.	The issue age for both employee and spouse is from 16 to 64. The issue age for a dependent child is from 15 days to 18 years old, or up to 24 years old if the child is a full-time attendance at a school or university. The dependent child must be unmarried and depend on the insured employee for support and maintenance. The word “age” means the attained age at the policy anniversary.
	Term Life Insurance Long Term Disability Benefits (LTD)	Hospital & Surgical Benefits
Optional coverage	Accidental Death and Disablement Benefits (AD&D)	Supplementary Major Medical Benefits (SMM)
		Clinical Benefits
		Network Doctor Services ³
	Total and Permanent Disability Benefits (TPD) / Total Disability Instalments Benefits (TDI)	Dental Benefits
		Maternity Benefits
Conversion benefits	Life Insurance Conversion Privilege	Medical Insurance Conversion Privilege*
Free benefits	NIL	Day Confinement Benefit
		Hospital & Surgical Benefits for accidents in overseas countries
		Hospital Cash
		Second Claim Incentive
		Day Surgery Cash Allowance

*Only applicable to Hong Kong customers

ManuPlan is a tailor-made group life / medical product. Please contact our Manulife servicing agent for the applicable benefit limits and premium information of a tailor-made plan.

Group Life Insurance

Basic coverage

Term Life Insurance

Term Life Insurance provides a lump sum cash benefit to the insured employee's beneficiary in the event of death of the insured employee.

Long Term Disability Benefits (LTD)

This monthly benefit continues until a defined period of time in the event of a disability which is caused by injury or sickness during the insurance period and ends on the date when the insured employee is no longer disabled or any other conditions specified in the policy provisions, whichever is earlier. The benefit may be up to 70% of the insured employee's pre-disability monthly earnings.

Optional coverage

Accidental Death and Disablement Benefits (AD&D)

This benefit is payable to an insured employee who suffers serious bodily injury or death as a result of an accident. In the case of accidental death, the benefit is added to the Term Life Insurance. In the case of accidental disablement, a specified percentage of the AD&D benefits will be paid.

Total and Permanent Disability Benefits⁶ (TPD)

If the insured employee is totally and permanently disabled as defined in the policy provisions, and lasts for 6 consecutive months, an initial payment equivalent to 10% of the Term Life Insurance will be paid. If the insured employee remains disabled for another 12 consecutive months after the initial payment has been paid and is reasonably considered to remain disabled thereafter, the remaining 90% of the Term Life Insurance will be paid in a lump sum. After any payment is made under TPD, the sum insured of the Term Life Insurance will be reduced by such amount.

Total Disability Instalments Benefits⁶ (TDI)

If the insured employee is totally and permanently disabled as defined in the policy provisions, and lasts for 6 consecutive months and is reasonably considered to remain disabled thereafter, an amount equal to the employee's coverage under the Term Life Insurance will be paid in 60 monthly instalments. After any payment is made under TDI, the sum insured of the Term Life Insurance will be reduced by such amount.

Conversion benefits

Life Insurance Conversion Privilege⁴

An employer may opt for the Life Conversion Privilege when policy is setup or renewed. The eligible insured employees will be entitled to an option to converting the basic life insurance coverage from group level to individual level⁷ without health declaration upon the employees' cessation of employment – offering them a life protection hassle free.

Group Medical Insurance

Basic coverage

Hospital & Surgical Benefits

Items covered

- Hospital daily room and board
- Hospital services
- Hospital physician's services
- Surgical benefits

Optional benefits

- Hospital specialist's services⁸
- Home nursing⁸
- Intensive care
- Pre- and post-hospitalization benefits⁹

Free benefits

- Day confinement benefit¹⁰: A benefit of up to HK\$4,000 per disability would be payable to an insured member who confined in a hospital as bed patient for less than 6 hours due to sickness or injury.
- Hospital & surgical benefits for accidents in overseas countries¹¹: A 50% increase in benefit limit for insured member's overseas hospitalization due to injury while travelling outside their country of residence¹².
- Hospital cash¹³: Payable to an insured member who confined in a general public ward of a government hospital in Hong Kong.
- Second claim incentive¹⁴: Payable to an insured member if the hospital expense was firstly paid by other insurer, and Manulife as subsequent payer.
- Day surgery cash allowance¹⁴: Payable to an insured member for the following surgeries performed in an outpatient facility – gastroscopy, colonoscopy, cystoscopy, arthroscopy, colposcopy or bronchoscopy.

Optional coverage

Supplementary Major Medical Benefits (SMM)

This covers expense items as defined in the policy provisions in excess of the hospital coverage specified in the benefits schedule.

Clinical Benefits

- General practitioner's visits
- Specialist's visits¹⁵
- Chinese medicine practitioner's visits, including treatment by a Chinese herbalist, bonesetter, acupuncturist or tui na therapist
- Physiotherapist¹⁶ and chiropractor treatment
- Diagnostic X-ray and laboratory fee¹⁷
- Prescriptions¹⁸

Network doctor services³

A medical card for general practitioner's visits, specialist's visits, physiotherapy or Chinese medical practitioner's visits is available on request. For these visits, if a deductible is applicable under a tailor-made policy, this is the amount of medical expenses that the insured member needs to pay for each visit.

Dental Benefits

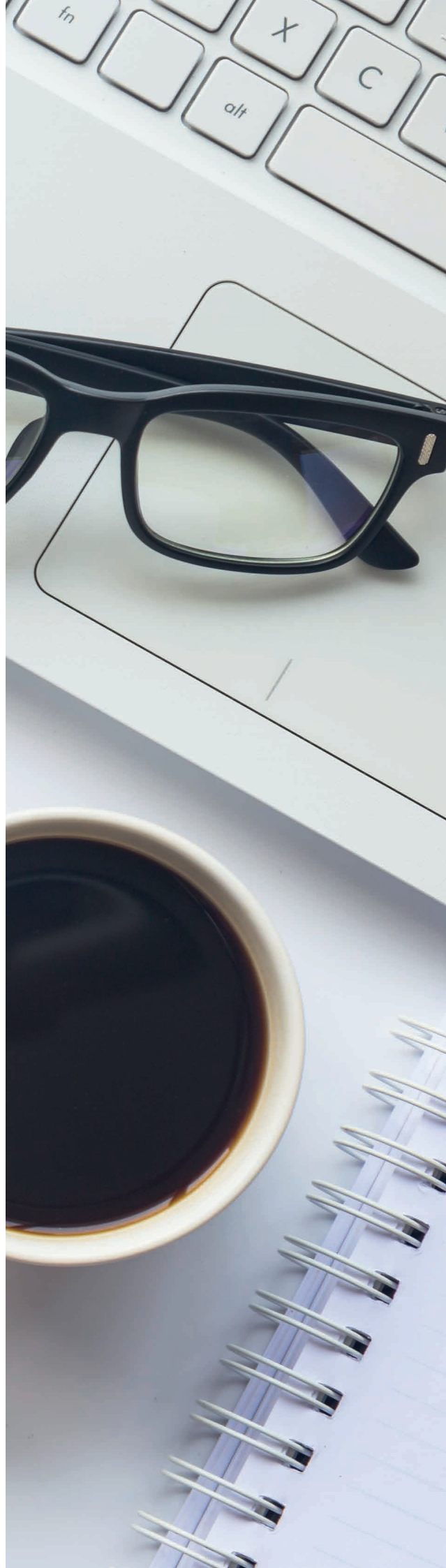
This offers free choice of both dentists and network dental services¹⁹.

Maternity Benefits²⁰

Conversion benefits

Medical Insurance Conversion Privilege⁵

If an employer's group medical insurance plan has 20 insured employees or more, the employer may opt for the medical insurance conversion privilege when the policy is set up or renewed. The eligible insured employees, together with their eligible insured dependent(s) (if any), will be entitled to an option to apply for a designated individual hospital benefits plan with no health declaration upon the employees' cessation of employment – helping them obtain medical protection without difficulty.



How to calculate the reimbursement amount of Supplementary Major Medical Benefits (SMM)?

Mr Chow, age 48, his employer has purchased ManuPlan tailor-made group medical insurance with Hospital and Surgical Benefits and SMM with ward coverage for all employees including Mr Chow. During coverage period, Mr Chow was diagnosed with appendicitis. He underwent an appendectomy and stayed in a ward of a private hospital in Hong Kong for 4 days. Below are the actual hospital charges and the payable amounts:

Category of medical fees	Benefit limit of tailor-made group medical benefits	Billed amount	Shortfall	Claim Paid amount
Hospital daily room and board		HK\$3,800 (HK\$950 x 4 days)	HK\$800 ((HK\$950-HK\$750) x 4 days)	HK\$3,000
Days per disability	HK\$750			
No. of days	4			
Surgeon's fee	HK\$30,000	HK\$70,000	HK\$40,000	HK\$30,000
Anesthetist's fee	HK\$9,000	HK\$15,000	HK\$6,000	HK\$9,000
Operation theatre fee	HK\$9,000	HK\$15,000	HK\$6,000	HK\$9,000
Hospital Services	HK\$12,000	HK\$11,000	HK\$0	HK\$11,000
Total		HK\$114,800	HK\$52,800	HK\$62,000

Supplementary Major Medical Benefits (SMM)

Limit per disability	HK\$40,000
Deductible per disability	HK\$1,000
Reimbursement percentage for ward level	80%
Room and Board limit to	Ward

SMM must be taken in conjunction with the Term Life and Hospital and Surgical Benefits.

If the hospital confinement is at a higher level of accommodation than stated above, the reimbursement percentage applicable for all the excess amount payable should be reduced as follows:

Ward to semi-private: **50%**

Ward to private: **25%**

Actual expenses	–	Claim paid amount	–	Non-medical necessary expenses* (if any)	–	Deductible per disability	x	Reimbursement percentage for SMM ward level	=	Eligible amount for SMM
HK\$114,800		HK\$62,000		HK\$0		HK\$1,000		80%		HK\$41,440

The maximum limit of SMM is HK\$40,000, Manulife shall pay HK\$40,000 for SMM.

The total claim paid of this hospitalization is HK\$62,000 + HK\$40,000 = HK\$102,000

If Mr Chow stayed in semi-private room, Manulife shall apply 50% reimbursement percentage for SMM. Assuming the actual hospital charges spent for the respective categories of medical fees are the same as shown in the table above, below is the illustration of claim paid amount:

Actual expenses	–	Claim paid amount	–	Non-medical necessary expenses* (if any)	–	Deductible per disability	x	Reimbursement percentage for SMM semi-private level	=	Eligible amount for SMM
HK\$114,800		HK\$62,000		HK\$0		HK\$1,000		50%		HK\$25,900

The total claim paid of this hospitalization is HK\$62,000 + HK\$25,900 = HK\$87,900

If Mr Chow stayed in private room, Manulife shall apply 25% reimbursement percentage for SMM. Assuming the actual hospital charges spent for the respective categories of medical fees are the same as shown in the table above, below is the illustration of claim paid amount:

Actual expenses	–	Claim paid amount	–	Non-medical necessary expenses* (if any)	–	Deductible per disability	x	Reimbursement percentage for SMM private level	=	Eligible amount for SMM
HK\$114,800		HK\$62,000		HK\$0		HK\$1,000		25%		HK\$12,950

The total claim paid of this hospitalization is HK\$62,000 + HK\$12,950 = HK\$74,950

*Non-medical necessary expenses such as extra beds, fax and medical reports etc

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.



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 — (852) 2108 1234

Member hotline — (852) 2108 1388

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

Customer service centres

21/F, Tower A, Manulife Financial Centre, 223–231 Wai Yip Street, Kwun Tong, Kowloon, Hong Kong

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

Notes

1. Applicable to Term Life Insurance, Hospital & Surgical and Clinical Benefits. For other benefits, the insured employee's coverage is up to age 64.
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. 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.
4. The death benefit under the individual life Insurance policy that an applicant can apply for must not be lower than the minimum amount specified from time to time by the Company, nor exceed the lesser of the following: (i) HKD1,200,000 or USD150,000; (ii) the amount of death benefit payable in respect of the life of the applicant under the group life policy.

An applicant must fulfill the following eligibility requirements before he can make the application. The eligibility requirements shall include the following:-

- (1) The applicant must have an attained age of 64 or below at the time of termination;
- (2) Dependants are not eligible for this privilege; and
- (3) Applicants who have been receiving benefit payment(s) under Total Disability Instalments Benefits or Total and Permanent Disability Benefits are not eligible for this privilege.

Please refer to the policy provision of the "Life Insurance Conversion Privilege" for other details. The designated individual life benefits plan(s) available will be determined by the Company from time to time.

5. Any premium loading and/or exclusion(s) applied to the applicant and/or his eligible dependent(s) under the group medical policy shall continue to apply to the designated individual medical insurance policy after conversion. The Company reserves the right to terminate the designated individual medical insurance policy, if any of the following occurs subsequent to the issue of the individual medical insurance policy: -
 - (1) The applicant and/or his eligible dependent(s) is/are hospitalized on the applicant's last date of employment; or
 - (2) The applicant is not actively at work on his last date of employment; or
 - (3) The applicant's last date of employment as declared by the applicant is not correct; or
 - (4) The applicant and/or his eligible dependent(s) is/are insured under the group medical policy at any time after the issue of the designated individual medical insurance policy.

Please refer to the policy provision of the "Medical Insurance Conversion Privilege Provision" for other details. The designated individual medical insurance benefits plan(s) available will be determined by the Company from time to time.

6. Employers can choose either TPD or TDI as one of the optional coverages for Term Life Insurance.
7. Please refer to the policy provisions of the designated individual life insurance plan for details.
8. Subject to the written referral from a registered attending doctor.
9. Subject to the hospital confinement being covered under the hospital daily room and board, pre-hospitalization benefits, including 1 out-patient doctor visit prior to hospital confinement, and post-hospitalization benefits, including out-patient doctor visits within 90 days after discharge from hospitalization, provided that the out-patient visits are for treatment of the same disability that resulted in hospital confinement. The aggregate amount of reimbursement for 'pre- and post-hospitalization benefits' is subject to the maximum limit per disability.
10. The reimbursement amount will not exceed the doctor/hospital expenses incurred during the insured member's confinement multiplied by the reimbursement percentage (up to a maximum of 90%) for the Hospital & Surgical Benefits in the applicable plan in which the insured member is enrolled or the maximum benefits limit set forth per disability in the day confinement benefits, whichever is lower.

For example, assuming the benefit is HK\$4,000 with reimbursement percentage of 90%:

- if the doctor/hospital expenses are HK\$1,000, insured member will be reimbursed $\text{HK\$1,000} \times 90\% = \text{HK\$900}$.
- if the doctor/hospital expenses are HK\$5,000, eligible amount for claim would be $\text{HK\$5,000} \times 90\% = \text{HK\$4,500}$, subject to the applicable limit per disability. Hence, the reimbursement amount would be HK\$4,000.

Any excess amount incurred will not be reimbursed under Supplementary Major Medical (SMM), if applicable. Doctor/hospital expenses mean charges of hospital daily room and board, hospital services, hospital physician's services, surgeon's fee, anaesthetist's fee and operation theatre fee; all the other Hospital & Surgical Benefits in the plan will not be payable.

Please refer to the policy documents for the reimbursement limit and reimbursement percentage of the day confinement benefit applicable to the policy issued.

11. This upgrade is provided under the Hospital & Surgical Benefit Provisions for insured employees. It does not apply to (i) any separate limit(s) specified for overseas item(s) in the benefits schedule; (ii) Supplementary Major Medical (SMM); or (iii) hospitalization in the People's Republic of China, including the Hong Kong Special Administrative Region and Macau Special Administrative Region. Any limit for any benefits item without specifying any overseas coverage in the benefits Schedule with a similar or equivalent benefits item specified in the benefits schedule for certain overseas coverage will not be affected. It merely applies to the limit of benefits for the following benefit items, including hospital daily room and board, hospital services, hospital physician services, surgeon's fee, anaesthetist's fee, operation theatre fee, hospital specialist services, intensive care, and home nursing, if applicable. It does not apply to any aggregate or total limit for multiple benefits items.
12. For definition of 'country of residence', please refer to the policy provisions.
13. Subject to a minimum benefit amount for hospital daily room and board. The benefit equivalent to the hospital daily room and board amount will be offered for a group medical insurance plan with hospital daily room and board benefit of HK\$500 or more; all the other Hospital & Surgical Benefits in the plan will not be payable.
14. Subject to a minimum benefit amount for hospital daily room and board. The benefit equivalent to the hospital daily room and board amount will be offered for a group medical insurance plan with hospital daily room and board benefit of HK\$500 or more.
15. Subject to the written referral from a registered doctor (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.
16. Subject to the written referral from a registered doctor, the referral letter is valid up to 6 months from the date of issuance.
17. Subject to the written referral from a registered doctor or registered Chinese medicine practitioner. The referral letter is valid once up to 6 months from the date of issuance.
18. Subject to the written referral from a registered doctor on prescription of medically necessary Western medication. The referral letter is valid up to 6 months from the date of issuance.
19. The network dentist and designated network dental centers are provided by the third party service provider. The third party provider may revise the list of network dentist and designated network dental centers from time to time without giving you notice. The list of network dentists and designated network dental centers will be available upon request. The network dental 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 dental services are subject to the detailed terms and conditions of the policy provision.
20. Unless otherwise stated, the maternity benefits cover female employees and insured members' wives. The maternity benefits are subject to the terms and conditions under the relevant insurance policy and no benefit is payable during a continuous period of 9 months (the 'waiting period') from the coverage effective date of the maternity benefits of an insured member or insured member's wife. The waiting period may be waived for the female employees and insured members' wife who are covered under maternity benefits of their employer's former group medical insurance policy immediately before joining the Plan on the policy effective date.

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 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 the covered event happened.

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

3. Termination procedure

The policyholder may terminate the policy or a benefit under the policy at any premium due date by giving the Company one month prior written notice. Unexpired premium due to policy termination will not be refunded.

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

Group Life Insurance

Term Life Insurance

No exclusion.

Accidental Death and Disablement Benefits (AD&D)

1. Suicide; self-destruction or self-inflicted injuries, whether sane or insane.
2. War; any act of war; participation in a riot, insurrection or civil commotion.
3. Sickness, disease, pregnancy, or infection any kind.
4. Committing, attempting, or provoking an assault or criminal offence.
5. Travel or flight in or descent from any aircraft, if the insured member is member of the crew or a pilot of the aircraft, or if the flight is made for instructional or training purpose.
6. Travel or flight in or descent from any aircraft of a military, naval or air force.
7. Any drug, poison, gas or fumes, voluntarily or otherwise taken, administered, absorbed or inhaled, other than as a result of an accident arising from a hazard incident to the insured member's occupation.
8. Skydiving, parasailing, scuba diving, hang gliding, auto-racing, boat-racing or motorcycle racing.

Total and Permanent Disability Benefits (TPD) / Total Disability Instalments Benefits (TPI)

1. Suicide; self-destruction or self-inflicted injuries, whether sane or insane.
2. War or any act to war, or service in the armed forces of any country at war or in a civilian force auxiliary thereto.
3. Riot, civil commotion, or insurrection.
4. Travel or flight in or descent from any aircraft, if the insured member is member of the crew or a pilot of the aircraft, or if the flight is made for instructional or training purpose.
5. Travel or flight in or descent from any aircraft of a military, naval or air force.
6. Committing, attempting, or provoking an assault or criminal offence.
7. Pregnancy, childbirth or pregnancy related conditions and complications.
8. Skydiving, parasailing, scuba diving, hang-gliding, auto-racing, boat-racing, motorcycle racing or engaging in driving or riding in any kind of race.
9. Pre-existing conditions for which the insured member received medical treatment, diagnosis, consultation or prescribed drugs during the ninety (90) days preceding the Effective Date of coverage unless the insured member affected by these conditions has been insured under this additional insurance for twelve (12) months.
10. Treatment of Human Immunodeficiency Virus (AIDS) or ARC (AIDS-related complex).

Long Term Disability Benefits (LTD)

1. War or any act of war.
2. Intentionally self-inflicted injuries.
3. Participation in a riot.
4. Committing of or the attempting to commit acts not permitted by law.
5. Acquired Immuno Deficiency Syndromes (AIDS) or its related illnesses.
6. Pregnancy, including complications of pregnancy, childbirth or miscarriage.
7. All pre-existing conditions.

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

Group Medical Insurance

Hospital & Surgical Benefits, Supplementary Major Medical Benefits (SMM) and Clinical Benefits:

1. Routine physical examinations, health check-ups or tests not for treatment, diagnosis of an insured sickness or injury or any treatment which is not medically necessary unless otherwise are specified in the valid Benefits Schedule.
2. Congenital anomalies, infertility, sterilization.
3. Dental care and treatment, except as necessitated by accidental injuries to sound nature teeth wholly occurring during the period of insurance.
4. Cosmetic surgery, eye glasses and refractions or hearing aids, and prescriptions therefor except as necessitated by injuries wholly occurring during the period of insurance.
5. Pregnancy, childbirth, miscarriage, abortion, or any complications arising from pregnancy, and pre-natal or postnatal care.
6. Injury or sickness arising directly or indirectly from war or any act of war, riots, insurrection, or civil commotion.
7. Rest cures, treatment in sanatoria, or functional disorders of the mind (including investigation and treatment of psychological, emotional, mental or behavioural conditions), unless mental illness or nervous disorder confinement or treatment benefits are specified in the valid Benefit Schedule.
8. Vaccination and immunization injections.
9. Drug addiction or alcoholism treatment.
10. Suicide, attempted suicide or intentionally self-inflicted injury, whether sane or insane.
11. Room, board, home nursing care or special hospital services not in accordance with the diagnosis and treatment of the disability.
12. Pre-existing conditions unless:
 - a) such benefit is in respect of medical treatment or recommended after a period of three consecutive months ending after the Effective Date and during which no medical treatment of such injuries or sickness shall have been received or recommended, or
 - b) such benefit is in respect of medical treatment received or recommended one year after the Effective Date the insured member becomes insured under this policy.
13. Treatment of Human Immunodeficiency Virus (AIDS) or ARC (AIDS-related Complex).
14. Commission of or attempt to commit a criminal offence or assault.

Additional exclusions for Chinese medicine practitioner's visits including Chinese herbalist, bonesetter, acupuncturist and tui na therapist:

1. Any treatment not rendered by Chinese medicine practitioners as defined in the policy.
2. Any expense for Chinese medical equipment or appliances.
3. Any proprietary Chinese medicine defined under the Chinese Medicine Ordinance.
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 or psychological disorders or psychiatric disorders.
6. Expenses for any injection by syringe.
7. Any consultation for moxibustion, body and foot massage, qi gong, ear reflexology, cupping and scraping and any other forms of alternative treatments to be determined by Manulife unless such benefit is provided.

Dental Benefits

1. All other dental expenses not listed under Benefits Schedule shall be excluded.
2. No benefits shall be payable for services or materials for cosmetic purposes, or repair of congenital malformation solely for cosmetic purposes, except charges for cosmetic dental procedures performed while insured hereunder and incurred as a result of and within twelve months after an accident.
3. For dental procedures performed by other than a licensed dentist, except dental prophylaxis performed by a licensed dental hygienist under the supervision and direction of a licensed dentist.

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

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: P.O. Box 70302, Kowloon Central Post Office Fax: (852) 2234 5371

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).

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