

HOSPITAL / SURGICAL
General insurance

Cigna Cathay Premier Health Plan

Distributed by





About The Cigna Group

Our Mission

We are dedicated to improving the health and vitality of those we serve.



Sales capability in **OVER 30 COUNTRIES AND JURISDICTIONS**¹



RANKED 12TH on the 2022 Fortune 500 List



More than **190 MILLION CUSTOMER RELATIONSHIPS** around the world¹



Named a **'CARING COMPANY'** by the Hong Kong Council of Social Service



More Than **70,000 EMPLOYEES** around the world¹

Remarks:

1. The above data is for informational purposes only and may not relate to a particular subsidiary of The Cigna Group. Data is based on The Cigna Group's internal reporting as of 5 May 2023 and is subject to change.



Cigna Healthcare and Cathay's partnership



Cigna Healthcare and Cathay have come together to provide the best medical and health insurance protection for your unique needs. **Cigna Cathay Premier Health Plan** is offered and underwritten by Cigna Healthcare, a health and wellness brand for 90 years in Hong Kong, providing health and wellness solutions to individuals, families and corporates. Cathay is a premium travel lifestyle brand that brings together all we love about travel with our everyday lifestyle. The range of complementary products and services includes flights, hotels, shopping, dining, credit cards and wellness.

Cathay are passionate about supporting your wellness goals. From health protection, to tips and tools to improve your physical and mental wellbeing, they are there to keep you motivated – and to reward you with Asia Miles for your dedication. At Cathay we are ultimately trusted to help people move forward in life. We aim to empower our members to make the most of what lies ahead, moving beyond what they previously thought impossible – towards a greater sense of balance, fulfilment, and peace within their lives.

Cigna Healthcare is always looking for new ways to provide medical protection to the public, and new propositions to extend the range of people it serves in Hong Kong and beyond. With the Cigna Cathay Premier Health Plan, you can receive the comprehensive standard of medical care you desire – wherever you are in the world, and enjoy even more fulfilling rewards when you meet your wellness goal.

For travelers, no two trips are ever the same. So why should your medical insurance be one-size-fits-all?

Cigna Healthcare has teamed up with Cathay to launch Cigna Cathay Premier Health Plan (“the Plan”) – a medical insurance plan tailored specially to the needs of people who are looking for a comprehensive plan with flexible coverage options.



Comprehensive global medical protection

Naturally, the Plan provides comprehensive high-end medical insurance protection for those who prioritize their health and well-being. It offers you global medical cover, with a wide range of Deductible Levels, Accommodation Room Types and Areas of Cover to suit your own specific preferences. And for families, the Plan offers first-year premium discounts for multiple policy enrolments, making all-round protection an affordable option. For details about the multiple policy discount, read more from [this flyer](#).



Multiple ways to earn attractive rewards

At every step of your journey, the Plan offers you an opportunity to earn Asia Miles and discount on premiums. You'll earn Asia Miles every day when you complete wellness goals on Cathay's elevated wellness journey. What's more, staying healthy translates into a discount on your annual premium upon renewal. And for those who don't make claims, a further Asia Miles reward is available every three years!



Get on Cathay's elevated wellness journey now

MILES REWARDS AT EVERY STEP



Earn Asia Miles with every wellness goal you complete on Cathay's elevated wellness journey



Renewal rebate of up to 10% for staying active on Cathay's elevated wellness journey



Be rewarded with Asia Miles when you don't make a claim in a three-year period!

Remarks:

- I. The Policy Holder can earn and accrue a reward (“No Claim Reward”) every three (3) Policy Years (“Reward Period”) from the Policy Issuance Date or Policy Effective Date (whichever is later) if no benefits have been paid under the Policy over the Reward Period. The calculation of No Claim Reward in the corresponding Reward Period is set out in the Benefit Schedule. In the event a claim is paid under the Policy during the Reward Period, the Policy Holder will not qualify for the No Claim Reward for the relevant Reward Period, and the No Claim Reward will be accrued anew starting from the Policy Year immediately following the previous Reward Period. For the avoidance of doubt, a new Reward Period can only commence once the prior Reward Period has ended.



Tailored to fit your preferences and to enable change

The Plan can be tailored precisely to your personal preferred Area of Cover, Accommodation Room Type or Deductible level. Flexibility is a fundamental feature of this high-end inpatient plan – for example, a high annual limit and unlimited lifetime limit can easily cater to your medical needs over time.

Another option is to purchase the Area of Cover Upgrade Guarantee. This optional benefit enables you to upgrade the Area of Cover of your policy in specific circumstances, such as studying abroad, migration or retirement, without any further underwriting – even if your health has changed along your life journey.



Plan at a glance

BASIC BENEFIT				
Plan Type	This product is a standalone individual policy which aims to provide hospitalization & surgical benefits. The policy provides both indemnity and non-indemnity benefits. It does not contain any cash value. The plan provides a protection period of 1 year and is guaranteed renewable up to age 100 of the Insured Person (subject to availability of the product by Cigna Healthcare), with payment period until the end of protection period. Premium rate will increase with age, and yearly adjustable.			
Policy Term and Premium Structure of Basic Plan	1 year and Annually Renewable The plan provides a protection period of one year and is guaranteed renewable ¹ up to age 100 of the Insured Person, with payment period until the end of protection period. Premium rate will increase with Age, and is yearly adjustable.			
Options for Area of Cover	Asia ² / Worldwide excluding the US / Worldwide			
	PLAN 1	PLAN 2	PLAN 3	
Annual Benefit Limit (Applies across benefit items)	HK\$10,000,000	HK\$20,000,000	HK\$30,000,000	
Lifetime Benefit Limit	Unlimited			
Accommodation Room Type	Hong Kong & Macau	Standard Ward ³	Semi-Private Room ³	Standard Private Room
	Outside Hong Kong & Macau	Standard Private Room		
Issue Age (at last birthday) ⁴	Basic Benefit: 15 days to age 80 ⁵			
Deductible options ⁶	HK\$0/HK\$15,000/ HK\$30,000	HK\$0/HK\$15,000/HK\$30,000/HK\$60,000		
Premium payment frequency	Annual/Monthly			
Policy currency	HKD			

Remarks:

- Guaranteed renewable subject to Cigna Healthcare continuing to issue new policy(ies) under the Basic Benefits and respective Optional Insurance Benefits (if applicable) of "Cigna Cathay Premier Health Plan", and relevant premium being paid at time of renewal.
- Asia refers to: Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, 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. Coverage is subject to Compliance with Sanctions Rules under policy provisions.
- For confinement in Hong Kong and Macau, the following adjustment factor will apply if the actual room level of confinement is not the same as the Insured Person's entitled Accommodation Room Type unless the room upgrade was involuntary.

Accommodation Room Type	Room type Confined	Adjustment factor
Standard Ward	Semi-Private Room	50%
	Standard Private Room	25%
Semi-Private Room	Standard Private Room	50%

- Child under the age of 18 must enrol in the policy with a parent. The child is required to be enrolled in the same Area of Cover as the parent. Child's policy will be terminated if the corresponding parent's policy is terminated. The child's policy will also be terminated if the child and parent's Area of Cover is not the same unless this is a result of upgrading the child's Area of Cover using the Area of Cover Upgrade Guarantee.
- For Area of Cover Upgrade Guarantee (if applicable), the issue age is 15 days to age 65.
- Deductible applies to Basic Benefits with the exception of the benefits under Pregnancy, Prenatal and Postpartum Support, Compulsory Quarantine Cash, Hospital Cash and Accidental Death Benefit.



Cigna all-round healthcare services - around-the-clock support and advice

The Plan gives you comprehensive medical coverage while also offering an excellent array of extra healthcare services to suit different health needs.



Cigna's Telehealth Service

Cigna Healthcare partnered with Teladoc Health to bring you a convenient telehealth service at your fingertips. To use the service, simply register for the MyCigna mobile app to obtain medical advice through video or phone consultations with worldwide-registered physicians.



Stay on top of your health with designated medical service providers¹

1. Annual Flu Vaccine
2. Vaccination with discount²
3. Body Check
4. Spinal Assessment
5. Dietitian Consultation



Convenient online policy management and claims

The MyCigna one-stop policy management service allows you to access policy information, submit a claim application or look up network doctor details anytime, anywhere.

Customers can log in at www.mycigna.com.hk/ or download the app to use the service.



Round-the-clock customer service and care

Chat with our virtual assistant Chloe via WhatsApp at (+852) 6601-3136 and she will immediately provide you with health information. If you are in Hong Kong, Chloe can help you locate and make an appointment with a nearby general practitioner or specialist³. And if you need more tailored or specialized advice, our 24-hour hotline at (+852) 8100 3209 is always available.



SOS Worldwide Emergency Assistance Services

Up to US\$1,000,000 is available for arrangement of medical evacuation to an appropriate location for emergency medical treatment, or repatriation to Hong Kong.

Remarks:

1. The listed services are offered by Cigna Healthcare's designated third party service providers and are applicable in Hong Kong only. Cigna Healthcare reserves the right to change the designated third party service providers from time to time without prior notice.
2. Just show your Cigna Healthcare e-medical card on your smartphone via the MyCigna mobile app to enjoy discounts of up to 20% off for selected vaccinations you may need before you travel. Selected vaccinations include those for Hepatitis A, Hepatitis B, Japanese Encephalitis, Meningococcal disease and Typhoid. Discounts offered by different Cigna Healthcare medical network providers may vary. In case of any dispute, Cigna Healthcare's decision shall be final.
3. Only applicable to relevant network doctors.

Unique one to one dedicated Care Manager Service in Hong Kong

Cigna Healthcare understands that you want the best treatment possible when you are sick. If you find yourself in need of medical treatment, Cigna Healthcare can assist you to predict the circumstances you may face. Plan members addressing health challenges or needing treatment can be assigned a dedicated Care Manager through our healthcare concierge service, who will follow up regarding hospital surgery or treatment arrangements. In addition to getting maximum coverage for your medical expenses, Cigna's healthcare concierge gives you convenient access to other care services.

Cashless hospitalization arrangement (Hong Kong and overseas) – No need to worry about unexpected medical expenses



Worldwide network of
7,000+ hospitals



No need to make a deposit upon
hospital admission or a claim upon
discharge (subject to prior approval)

Unique one to one dedicated Care Manager Service in Hong Kong – allows you to recover with peace of mind and relieves the pressure on you and your caregiver

Your assigned Care Manager is a registered nurse who:



Understands
and analyzes the
health condition
of plan members
and offers
network doctor
options



Coordinates and
follows up on hospital
surgery or treatment
arrangements and
post-surgery visits



Provides information
on improving health,
in-hospital support,
and post-discharge
follow-up (for
example, arranging
post-discharge
physiotherapy, nutrition
guidance, meal delivery
service, and more)



Refers you to
personalized
services (for example,
local limousine
transportation to
the hospital, nursing
arrangements,
virtual consultation,
medication delivery,
home modifications,
and more)



Provides emotional
support for plan
members and their
family



Helps arrange
“Cigna Health
Services At Home”
– for example,
arranging for
cancer patients
to receive
chemotherapy at
home to ease the
burden of traveling
and reduce the risk
of infection

For more information, please refer to our “Healthcare Concierge Service” Leaflet.

Cigna Healthcare also received the following awards:



Hong Kong Insurance Awards 2022
Top 3 Finalist of the Outstanding
Claims Management Award and
Outstanding Customer Services Award



EDigest Brand Award 2023
Best Health Insurance Award

Cigna Cathay Premier Health Plan Benefit Schedule

Benefits are reimbursed on Medically Necessary, and Reasonable and Customary basis. For more information, please refer to the policy provisions.

BASIC BENEFITS (INCLUDES HOSPITALIZATION AND SURGICAL BENEFITS & EXTENDED BENEFITS)				
		PLAN 1	PLAN 2	PLAN 3
Annual Limit <i>Applies to Basic Benefits</i>		HK\$10,000,000	HK\$20,000,000	HK\$30,000,000
Lifetime limit <i>Applies to Basic Benefits</i>		Unlimited		
Room Type	Hong Kong / Macau	Standard Ward	Semi-Private Room	Standard Private Room
	Outside Hong Kong / Macau	Standard Private Room		
Area of Cover		Asia/Worldwide excluding the US/Worldwide		
Deductible		HK\$0/HK\$15,000/ HK\$30,000	HK\$0/HK\$15,000/HK\$30,000/HK\$60,000	

HOSPITALIZATION AND SURGICAL BENEFITS	
Benefit Items	Maximum Limit (HK\$)
1.Room and Board	Fully covered <i>(Maximum 180 days per Policy Year)</i>
2.Miscellaneous Charges	Fully covered
3.Attending Doctor's Visit Fee	Fully covered <i>(Maximum 180 days per Policy Year)</i>
4.Specialist's Fee¹	Fully covered
5.Intensive Care	Fully covered <i>(Maximum 180 days per Policy Year)</i>

HOSPITALIZATION AND SURGICAL BENEFITS (CONTINUED)

	PLAN 1	PLAN 2	PLAN 3			
Annual Limit <i>Applies to Basic Benefits</i>	HK\$10,000,000	HK\$20,000,000	HK\$30,000,000			
Benefit Items	Maximum Limit (HK\$)					
6. Surgeon's Fee <i>Covers surgical procedure on inpatient or outpatient basis</i>						
7. Anaesthetist's Fee <i>Covers charges by an anaesthetist for surgical procedures on inpatient or outpatient basis</i>						
8. Operating Theatre Charges <i>Covers charges for the use of operating theatre for surgical procedures on inpatient or outpatient basis</i>						
9. Prescribed Diagnostic Imaging Tests¹ <i>Covers computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined</i>						
10. Prescribed Non-surgical Cancer Treatments <i>Covers the following cancer treatments only: radiotherapy, chemotherapy, targeted therapy, immunotherapy, hormonal therapy, proton therapy, gamma knife and cyberknife</i>						
11. Psychiatric Treatments <i>Covers charges for psychiatric treatment during Confinement in Hong Kong</i>						
12. Rehabilitation Benefit¹ <i>Covers expenses for rehabilitation treatments in a Rehabilitation Centre within 90 days after discharge from Hospital</i>						
13. Pregnancy Complications¹ <i>Covers hospitalization and surgical costs associated with pregnancy complications</i>						
				Fully covered		
				\$45,000 per Policy Year		
	\$100,000 per Policy Year					
	Fully covered					

Remarks

- I. The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.

EXTENDED BENEFITS			
	PLAN 1	PLAN 2	PLAN 3
Annual Limit <i>Applies to Basic Benefits</i>	HK\$10,000,000	HK\$20,000,000	HK\$30,000,000
Benefit Items	Maximum Limit (HK\$)		
1. Pre- and Post-Confinement / Day Case Procedure Outpatient Care	Fully covered Maximum of 30 outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 30 days before admission or Day Case Procedure; and		
	Fully covered Maximum of 60 follow-up outpatient visits per Confinement/Day Case Procedure (within 180 days after discharge from Hospital or completion of Day Case Procedure) ¹	Fully covered Maximum of 90 follow-up outpatient visits per Confinement/Day Case Procedure (within 180 days after discharge from Hospital or completion of Day Case Procedure) ¹	
2. Home Nursing for Confinement¹ <i>Covers special nursing care immediately after discharge from Confinement</i>	\$1,000 per day (Maximum 120 days per Policy Year)		
3. Outpatient Kidney Dialysis <i>Covers treatment of chronic and irreversible kidney failure includes peritoneal dialysis and regular hemodialysis performed on outpatient basis</i>	Fully Covered		
4. Pregnancy, Prenatal and Postpartum Support² <i>Covers psychological treatment related to pregnancy provided by a psychologist registered in Hong Kong or a Specialist providing psychiatric or psychological treatment</i>	\$800 per visit (Maximum 5 visits per Policy Year)		
5. Hospital Cash^{2,3} <i>A cash benefit during your hospital confinement in public or private hospitals</i>	\$500 per day (Maximum 45 days per Policy Year)	\$800 per day (Maximum 45 days per Policy Year)	\$1,500 per day (Maximum 45 days per Policy Year)
6. Compulsory Quarantine Cash Benefit^{2,4} <i>A cash benefit during your compulsory quarantine due to confirmed or suspected cases of Notifiable Infectious Diseases</i>	\$1,500 per day (Maximum 14 days per quarantine event)		

EXTENDED BENEFITS (CONTINUED)			
	PLAN 1	PLAN 2	PLAN 3
Annual Limit Applies to Basic Benefits	HK\$10,000,000	HK\$20,000,000	HK\$30,000,000
Benefit Items	Maximum Limit (HK\$)		
7. Accident Emergency Outpatient Treatment <i>Covers emergency treatment in the outpatient department of a Hospital within 24 hours of the Accident</i>	Fully Covered		
8. Accidental Death Benefit²			
• Hong Kong	\$100,000		
• Overseas	\$200,000		
9. Wellness Benefit⁵	One body check per Policy Year		
	–	One spinal assessment per Policy Year	
	–	One dietitian consultation per Policy Year	
10. No Claim Reward⁶ <i>No claim reward if no claim is paid every 3 Policy Years</i>	Reward equal to 1 Asia Mile for every HK\$4 of net premium paid in the last Policy Year of each 3 year period		

Remarks

- The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
- Deductible does not apply to Pregnancy, Prenatal and Postpartum Support, Hospital Cash, Compulsory Quarantine Cash and Accidental Death Benefit.
- Hospital Cash is not payable if Room and Board expenses are not payable.
- Notifiable Infectious Diseases refers to any kind of notifiable infectious diseases identified and defined and published by Hong Kong Government in accordance with the Prevention and Control of Disease Ordinance (Cap. 599).
- Wellness Benefit is provided by the Company's designated service provider(s). The services are subject to each designated service provider's terms and conditions and the Company will not assume any liability arising from the services. The Company reserves the right to change the service provider(s) from time to time.
- The Policy Holder must provide a valid Asia Miles membership number to the Company prior to when the first No Claim Reward becomes payable in order to receive the No Claim Reward. If for any reason the Company cannot use Asia Miles to fulfil this reward, the Company reserves the right to offer a reward deemed to be of equivalent value.

Optional Benefit - Optional Area of Cover Upgrade Guarantee

At Cigna Healthcare, we understand that our lives change course from time to time. In today's globalized world, we may arrange an overseas study plan for our children. Perhaps our job may be transferred to another location. Or we may prefer to retire somewhere other than Hong Kong.

But as time passes and our plans change, so does our health. Any major illness suffered in the interim could seriously compromise your ability to purchase or access medical care in the country you move to. Your personal medical history could mean that critical health needs are excluded from your new cover, or even that you cannot be covered at all.

This optional benefit helps you manage changing circumstances with confidence. For specific events – such as studying abroad, migrating, or retiring – this benefit allows you to upgrade the original Area of Cover without going through underwriting again. That translates into valuable peace of mind, with the knowledge that you will have adequate medical protection in the future, wherever you end up.

By enrolling for this optional benefit when you apply for the Plan, you can upgrade the Area of Cover of your policy without the need to undergo underwriting when experiencing any one of the following events in a country or territory outside the Basic Plan's original Area of Cover:



Migration



Studying abroad

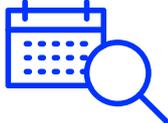


Retirement

(applicable only if the Insured Person is at the Age of sixty (60) or above)



OPTIONAL AREA OF COVER UPGRADE GUARANTEE

Area of Cover of Basic Benefits	<p>Asia</p> 	<p>Worldwide excluding the US</p> 	<p>Worldwide</p> 
 <p>Future Area of Cover Option</p>	<p>Worldwide</p>  <p>or</p> <p>Worldwide excluding the US</p> 	<p>Worldwide</p> 	<p>Not applicable</p>

Remarks:

1. If the Policy Holder has more than one policy of Cigna Cathay Premier Health Plan with the Area of Cover Upgrade Guarantee, the Policy Holder must select the same Future Area of Cover for all such policies at policy application.
2. The upgrade of the Area of Cover of the Basic Policy to the Future Area of Cover will take effect on the Anniversary Date and the Policy Holder must submit written application to the Company at least 30 days prior to the Anniversary Date, and must prove that any one of the event(s) listed above (includes migration, studying abroad and retirement (applicable only if the Insured Person is at the Age of sixty (60) or above)) has occurred within 12 months prior to or will occur within 3 months following the relevant Anniversary Date.
3. If the Policy Holder has more than one Cigna Cathay Premier Health Plan policy and uses the Area of Cover Upgrade Guarantee to upgrade the Area of Cover to the relevant Future Area of Cover for another basic policy of Cigna Cathay Premier Health Plan, the Policy Holder is entitled to upgrade the Area of Cover of all their policies with the Area of Cover Upgrade Guarantee to the relevant Future Area of Cover. However, all policies with the same Policy Holder must share the same Area of Cover on their respective Anniversary Dates after this right has been exercised. For any policies held by the Policy Holder without this Area of Cover Upgrade Guarantee and any policies with the Area of Cover Upgrade Guarantee where the Area of Cover after upgrade will be wider than the Future Area of Cover stated on the policy schedule of the relevant policy, the upgrade of the Area of Cover is subject to re-underwriting by the Company.
4. Once the Area of Cover is upgraded, the Policy Holder is required to pay the relevant Standard Premium and Premium Loading (if any) under the Basic Policy according to the Future Area of Cover effective from the relevant Anniversary Date.
5. After the Area of Cover has been upgraded, this Area of Cover Upgrade Guarantee shall be terminated. This Area of Cover Upgrade Guarantee shall also be terminated if any other change to the Basic Policy results in the Area of Cover being the same as the Future Area of Cover.
6. This right can only be exercised once per lifetime of the Insured Person.
7. This Area of Cover Upgrade Guarantee does not provide any additional rights to change the Basic Policy except for upgrading the Area of Cover subject to the conditions specified above.
8. Downgrade or removal of this Area of Cover Upgrade Guarantee is only allowed on the Anniversary Date.

WAITING PERIOD

Cover for specific benefits will take effect after the specified waiting period.

Benefit Items	Waiting Period
Pregnancy Complications	1 year
Pregnancy, Prenatal and Postpartum Support	1 year

Remarks:

1. Waiting Period refers to the period after each of the following dates:
 - a. The Policy Issuance Date or the Policy Effective Date (whichever is later),
 - b. The effective date of any reinstatement (if your policy and/or the respective benefits of your policy has been subsequently reinstated) and
 - c. The issue date or the effective date of any increase in benefit (whichever is later).
2. The corresponding term for "waiting period" in the policy provisions are "Pregnancy Complications Waiting Period" and "Pregnancy, Prenatal and Postpartum Support Waiting Period".

Case illustration

The following example is hypothetical and for illustrative purpose only.



Case #1 – Comprehensive medical protection to Winnie

Policy Holder Winnie (Non-smoker)

Age 28

Marital status Single

Background Winnie is health conscious, enjoying regular exercise and maintaining a healthy lifestyle. She is aware of medical expenses constantly rising, and the trend of critical illnesses occurring at younger ages. At age 28, she enrolled in Cigna Cathay Premier Health Plan for peace of mind around medical expenses. She also valued the regular health checks and other preventive health benefits connected with the plan.

Plan level Worldwide excluding the US, Semi-Private, HK\$15,000 deductible plan

1st year premium HK\$11,268

Prevention



Stay active and healthy to earn up to 35 Asia Miles daily with Cathay's elevated wellness journey



Renewal Premium Discount up to 10% with Asia Miles earned through Cathay's elevated wellness journey



Asia Miles No Claim Reward of HK\$4 = 1 Asia Mile of net premium paid in year 3 for having no claims record in 1st to 3rd Policy Year



Free health check¹ every year
💰 worth HK\$1,500



DIAGNOSIS AND TREATMENT



- At age 32 Winnie and her husband conceived their first baby. Unfortunately, Winnie experienced **depression during her pregnancy**.



- Supported by the Plan's **Pregnancy, Prenatal and Postpartum Support benefit**, a Care Manager provided Winnie with **maternity support** and also lined up **consultations with a psychologist** to help her through her pregnancy journey.



- 5 years later, though, Winnie had the **free annual body check-up** under the Plan and identified **a lump in her left breast**. Her doctor ordered a mammogram which after biopsy was diagnosed as **breast cancer**. She would require **hospitalization, surgery, and post-surgery treatment**.

DIAGNOSIS



Stage II Breast Cancer – Left breast ductal carcinoma (~2cm) with left sided axillary lymph node involvement



Left breast mastectomy with axillary lymphadenectomy



Semi-Private Room

PREGNANCY, PRENATAL AND POSTPARTUM SUPPORT BENEFIT (HK\$)

Psychological treatment related to pregnancy	\$800/visit	5 visits	\$4,000
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HOSPITALIZATION

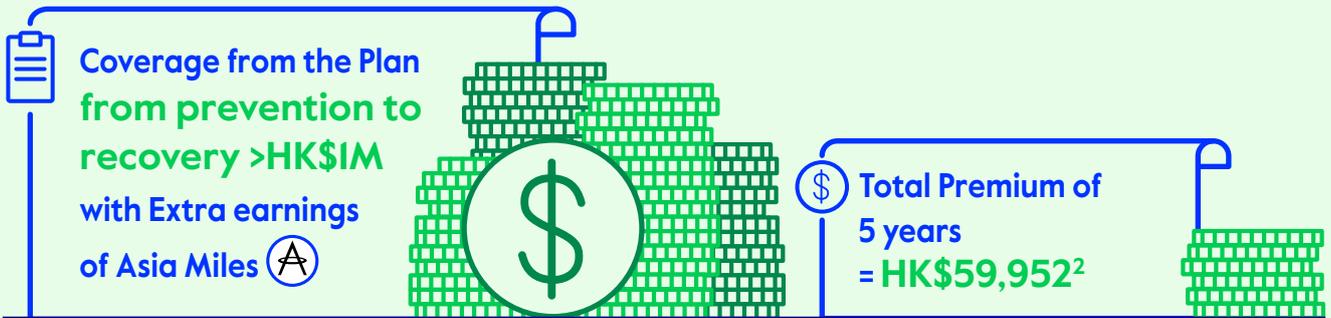
Hospital Cash	\$800/day	7 days	\$5,600
Room and Board	\$2,500/day	7 days	\$17,500
Surgeon's Fee			\$101,000
Anaesthetist's Fee			\$33,000
Attending Doctor's Visit Fee	\$2,500/day	7 days	\$17,500
Total Sum			\$174,600

POST TREATMENT

Post-Confinement Outpatient Care	\$1,100/visit	2 visits	\$2,200
Chemotherapy	\$17,000/month	14 month	\$238,000
Targeted therapy	\$70,000/month	10 month	\$700,000
Breast reconstruction			\$150,000
Total Sum			\$1,090,200



- After providing Winnie with prompt diagnosis and excellent medical care, a Care Manager also covered the arrangement of **home chemotherapy** for Winnie after medical assessment. It **avoided traveling time, reduced the risk of infection**, and meant Winnie could be treated at home with family support. Eventually, Winnie made a **complete recovery**. She took time out to celebrate her return to health – and also the great medical insurance that helped her quickly diagnose her illness, **paid for the bulk of her treatment** including breast reconstruction, and provided **recovery follow-up** so she could focus on her career and supporting her family.



Remarks:

1. Health Check includes body check and spinal assessment.
2. Total Premium of the 1st to 5th Policy Year: HK\$59,952 = 11,268 + 11,558 + 12,061 + 12,373 + 12,692
3. The premium and medical expenses quoted above are indicative only and the premium may change from time to time at Cigna Healthcare's discretion.
4. Only the charges and/or expenses of the Insured Person on Medically Necessary and Reasonable and Customary basis were covered.





Case #2 – The Chan family with a plan to stay abroad

Policy Holder James

INSURED PERSON: THE CHAN FAMILY (NON-SMOKERS)	JAMES	KITTY	ANGELA
Age	35	30	12
Plan level	Asia, Semi-Private, HK\$30,000 deductible plan	Asia, Semi-Private, HK\$30,000 deductible plan	Asia, Semi-Private, HK\$30,000 deductible plan
Optional Area of Cover Upgrade Guarantee:	Future Area of Cover = Worldwide excluding the US		
1 st year premium (HK\$)	$\$7,759 + \$300 = \$8,059$	$\$6,916 + \$300 = \$7,216$	$\$4,367 + \$300 = \$4,667$
Total Premium of the family: HK\$19,942			



- When James was thinking about enrolling for Cigna Cathay Premier Health Plan, he decided it was something that could **benefit the whole family**. But with one eye on Angela's future, he also decided to purchase the **Area of Cover Upgrade Guarantee**, which would enable them to change the Area of Cover in the future **without the need for further underwriting**.



- When James was offered a job in London, the family decided to make **a permanent move to the United Kingdom (UK)** where Angela would also continue her studies. **Cigna Cathay Premier Health Plan made the move easy for them all**. With so many other logistics issues to organize when moving country, healthcare was not a top priority, so they were grateful that this was one less thing to worry about.
- The family simply **upgraded the Area of Cover** of all their Plans to Worldwide excluding the US using **the Optional Area of Cover Upgrade Guarantee**, giving them the assurance that they would continue to have **medical insurance cover when they moved to the UK**.



Upgraded the Area of Cover

Remarks

1. The premium quoted above is indicative only and may change from time to time at Cigna Healthcare's discretion.
2. The upgrade takes effect on the Anniversary Date following the request to exercise the right under the Area of Cover Upgrade Guarantee.
3. The upgrade is subject to submitting proof that a specified event has occurred (namely migration, studying abroad or retirement in a country or territory outside the Plan's original Area of Cover).
4. The specified event must have occurred 12 months prior to or must be going to occur within 3 months of relevant Anniversary Date.
5. The Deductible of the Plan must remain the same after the upgrade.
6. The reimbursement amount of Eligible Expenses may vary due to the Insured Person's Country of Residence, for details please refer to session of "Area of Cover" in the Important Note of this brochure.



Embark on an elevated wellness journey with Cathay

When you purchase Cigna Cathay Premier Health Plan, you will be able to unlock the full wellness benefits on the wellness journey of the Asia Miles by Cathay app.

It starts with a wellbeing quiz, where we look at your current habits to give you a snapshot of your overall health. We'll then provide tailored tips on how to maintain your physical and mental wellbeing – and give you daily goals to keep you on track.

Whether it's hitting 10,000 steps or getting a full night's rest, each time you complete a goal you'll be rewarded with Asia Miles. And, as an elevated wellness journey participant, you can earn more Asia Miles than other users*.

Remarks

* The reward of Asia Miles is subject to the terms and condition of Cathay Pacific.

Important information

The product information in this brochure does not represent the full terms of the policy and the full terms can be found in the policy document.

Cooling Off Right and Policy Cancellation

You may cancel your policy and obtain a refund of any premium(s) and levy paid by you within the cooling-off period. The cooling-off period is the period of 30 calendar days immediately following either the day of delivery of the policy or the cooling-off notice to you or your nominated representative (whichever is the earlier). The cooling-off notice is a notice that will be sent to you or your nominated representative by Cigna Worldwide General Insurance Company Limited to notify you of the cooling-off period around the time the policy is delivered. To exercise this right, a written notice of cancellation must be signed by you and received directly by Cigna Worldwide General Insurance Company Limited at I6/F, 348 Kwun Tong Road, Kwun Tong, Kowloon, Hong Kong within the cooling-off period. No refund can be made if a claim has been made.

After the cooling-off period, the Policy Holder can request cancellation of the policy by giving thirty (30) days prior written notice to the Company, provided that there has been no benefit payment under the policy during the relevant Policy Year.

Claims Procedure

To make a claim, please login to our customer portal or register at www.mycigna.com.hk or download our MyCigna mobile app. For details of procedures by claims type, please visit the Company website www.cigna.com.hk/en/customer-service/insurance-claim-procedure.

Premium

1. Premium Level

The premium corresponding to the Accommodation Room Type, Area of Cover and Deductible option you select is determined based on the Age and smoking habit of the Insured Person at the Policy Effective Date and at the time of Renewal upon each Anniversary Date of the Policy.

2. Non-payment of Premium

If you fail to pay the initial premium, your Policy will not take effect from the Policy Effective Date of your Policy. Except for the initial premium payment, there will be a Grace Period of 1 month after any Premium Due Date. Your Policy will remain effective during this Grace Period. If any premium is not paid at the end of the Grace Period, your Policy will lapse on the Premium Due Date and you will lose the insurance cover.

We will not make any claim payment or any other payment payable under the Policy, until we receive payment of all outstanding premium up to the date of the claim payment or when the Policy terminates.

3. Mis-statement of Age or Smoking Habit

If Age or smoking habit has been mis-stated by you or any Insured Person, and the relevant Insured Person would still be eligible for coverage, we have the right to adjust the premiums payable based on the correct information.

4. Premium Adjustment

The Company reserves the right to revise the Standard Premium of the policy on the Anniversary Date or upon Renewal. Factors leading to premium adjustment may include but are not limited to our overall experience in claims and expenses incurred by and/or in relation to this product.

Benefits

1. Benefit in General

If the diagnosis or Confinement takes place in mainland China, the Hospital must be of Tier 3 Class A or above or included in our list of designated Hospitals as advised from time to time, otherwise no benefit shall be payable by the Company.

We shall pay any benefits directly to the Policy Holder, except in case of the Insured Person's death, when we shall pay the benefit amount to the beneficiary.

2. Hospitalization and Surgical Benefits

Under Hospitalization and Surgical Benefits and Extended Benefits, the Company will reimburse the actual Eligible Expenses incurred according to the following calculation formula:

$$\left(\begin{array}{l} \text{Amount} \\ \text{of Eligible} \\ \text{Expenses} \\ \text{incurred} \end{array} \right) \text{ LESS } (-) \left(\begin{array}{l} \text{the Eligible} \\ \text{Expenses of the} \\ \text{same Disability} \\ \text{reimbursed} \\ \text{by another} \\ \text{party or by us} \\ \text{under another} \\ \text{insurance plan,} \\ \text{or the Deductible} \\ \text{under this Policy,} \\ \text{whichever is the} \\ \text{larger} \end{array} \right) \text{ TIMES } (x) \left(\begin{array}{l} \text{adjustment} \\ \text{factors as} \\ \text{per the table} \\ \text{below and} \\ \text{as set under} \\ \text{the Area of} \\ \text{Cover section} \\ \text{overleaf} \end{array} \right)$$

Please note that:

- a) the benefits under the Basic Policy shall not be payable for Confinement in class of suite/VIP/deluxe room of a Hospital; and
- b) if the Insured Person is Confined to a higher level of Hospital facilities and services than that he is entitled to under this Policy, the respective adjustment factors applicable in addition to the reimbursement percentage are as follows:

Accommodation Room Type	Room type confined	Adjustment factor
Standard Ward	Semi- Private Room	50%
	Standard Private Room	25%
Semi-Private Room	Standard Private Room	50%

Area of Cover

If the Insured Person's Country of Residence is the United States (US) at the time Eligible Expenses are incurred, all benefits payable under the Basic Benefits and the Optional Insurance Benefits (if any) relating to the Eligible Expenses incurred in the US will be reduced to 60% of relevant reimbursable charges, while the maximum benefit limit, lifetime limit and deductible shall remain unchanged under your Policy.

For the Area of Cover "Asia", if the Insured Person's Country of Residence is Australia and/or New Zealand at the time Eligible Expenses are incurred, all benefits payable under the Basic Benefits and the Optional Insurance Benefits (if any) relating to the Eligible Expenses incurred in Australia and/or New Zealand will be reduced to 60% of relevant reimbursable charges, while the maximum benefit limit, lifetime limit and deductible shall remain unchanged under your Policy.

Country of Residence refers to the country where the Insured Person has stayed in for 185 days or more during the period of 365 consecutive days before the Eligible Expenses incurred date.

Duplicated Policy

Any Insured Person shall be entitled to coverage under a maximum of one policy of the Cigna Designated Plans issued by the Company. If the Insured Person is insured under more than one policy of the Cigna Designated Plans due to any reason, the Insured Person shall be deemed to be covered under only the one (1) policy which:

- a) provides the highest benefit amount in respect of the Basic Policy; or
- b) was issued first if the benefit amount of the Basic Policy under each policy is the same.

Other than the one (1) single policy under Cigna Designated Plans which is considered to validly cover the Insured Person as above stated, any other Cigna Designated Plans policy or policies for that Insured Person by the Company ("Void Policies") shall be null and void from the Policy Effective Date of those Void Policies. You are required to immediately return to us in full any money paid by us and Indebtedness (if any) under the Void Policies. Upon our receipt of your full refund of such payments, we will refund the premium paid for the Void Policies or we shall have the right to set-off the sum paid by and due to us against the premium paid under the Void Policies.

Cigna Designated Plans shall mean the plans including Cigna HealthFirst Elite Medical Plan, Cigna HealthFirst Choice Medical Plan, Cigna HealthFirst DiaMedic Plan, Cigna VHIS Series – Standard Plan, Cigna VHIS Series – Flexi Plan (SMM), Cigna VHIS Series – Flexi Plan (Superior), Cigna Cathay Premier Health Plan and any other policies that are designated and issued by the Company from time to time.

Conversion of policy

If you have an existing medical insurance policy and intend to switch the coverage to this plan, please be aware of the potential implications in terms of insurability, claims eligibility and financial values regarding the change to the insurance arrangement.

Some benefits under the existing policy may be changed or not be covered under this plan due to changes in policy features, age, health conditions, occupation, lifestyle, habit or recreational activities. Also, riders or supplementary benefits under your existing insurance policy may not be available under this plan.

Benefits under the existing insurance policy will no longer be payable to you if you surrender the policy or allow it to lapse. Besides, you may need to start a new waiting period (if any) in respect of certain benefits under the terms and conditions of the new policy.

Renewal

The Basic Benefits and Optional Insurance Benefits will be effective for an initial period of 12 months and thereafter guaranteed and automatically renewable for successive periods of 12 months each provided that we continue to issue new policy(ies) under the Basic Benefits and respective Optional Insurance Benefits (if applicable) of Cigna Cathay Premier Health Plan, and upon payment of the premium at time of Renewal. The Company reserves the right to revise the terms of the policy and/or the premium and/or the Benefit Schedule upon each Renewal.

Termination

1. The Policy will be automatically terminated when one of the following happens:
 - The Insured Person reaches the age of 100 (Policy terminates at the Anniversary Date on or immediately following the Insured Person's hundredth (100th) birthday); or
 - The Insured Person passes away; or
 - The Policy is terminated or not renewed by the Policy Holder; or
 - The Company no longer issue new policy(ies) under the Cigna Cathay Premier Health Plan; or
 - Any premium is not paid at the end of the Grace Period.
2. If there is any fraud, mis-statement or concealment in the application or declaration, or if you or your beneficiary makes a dishonest claim, we have the right to cancel the Policy immediately. In such case, all the premium paid will not be returned and you shall immediately return all payment including claims paid by us under the Policy.

3. The Insured Person is required to settle any shortfall of expenses incurred with the use of the Cigna Cathay Premier Medical Card which is not covered by the Policy or exceeding the maximum limit. If such shortfall amount is not settled within 14 days after receipt of a shortfall advice from us or our designated medical service providers, the Company reserves the right to terminate this Policy.
4. Children aged below 18 may only enroll in Cigna Cathay Premier Health Plan when their parent is enrolling or has already enrolled in Cigna Cathay Premier Health Plan. The child and the parent must share the same Area of Cover. If the Policy Holder terminates their own policy, the policy/policies of their child(ren) will also be terminated. The child's policy will also be terminated if the child and parent's Area of Cover is not the same unless this is a result of upgrading the child's Area of Cover using the Area of Cover Upgrade Guarantee.

Inflation Risk

Your current planned benefit may not be sufficient to meet your future needs since the future cost of living may become higher than they are today due to inflation. Where the actual rate of inflation is higher than expected, you may receive less in real terms even if we meet all of our contractual obligations.

Medically Necessary

We only cover the charges and/or expenses of the Insured Person on medically necessary and reasonable and customary basis.

"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 can be safely and effectively provided to the Insured Person.

Reasonable and Customary

“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. 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.

The Company reserves the right to determine whether any particular Hospital/medical charge is a Reasonable and Customary charge with reference but not limited to any relevant publication or information made available, such as schedule of fees, by the government, relevant authorities and recognized medical association in the locality. The Company reserves the right to adjust any and all benefits payable in relation to any Hospital/medical charges which are not Reasonable and Customary.





Key exclusions

The following list is for reference only and does not represent a full list of exclusions. Please refer to the policy provisions for the complete list and details of exclusions.

Cigna Healthcare shall not pay any benefits in relation to or arising from the following expenses:

- 1.** Medical Services that are not Medically Necessary.
- 2.** Confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy.
- 3.** Human Immunodeficiency Virus (“HIV”) and its related Disability.
- 4.** 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.
- 5.** Services for beautification or cosmetic purposes, or correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens.
- 6.** Prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, immunization or health supplements.
- 7.** Dental treatment and oral and maxillofacial procedures performed by a dentist.
- 8.** Maternity conditions and its complications (except if such expenses are covered under Pregnancy Complications or Pregnancy, Prenatal and Postpartum Support).
- 9.** Purchase of durable medical equipment or appliances.
- 10.** Traditional Chinese Medicine treatment.
- 11.** Experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognized authority, in the locality where the treatment, procedure, test or service is received.
- 12.** Expenses incurred for Medical Services provided as a result of birth defect(s), Congenital Condition(s), Hereditary Condition(s), or any related Disability.

13. Eligible Expenses which have been reimbursed under any law, or other medical program or insurance policy.
14. War, civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.
15. Pre-existing Conditions and any special exclusion(s) set out under this Policy.

Cigna Healthcare shall not pay any Accidental Death Benefit in relation to or arising from the following.

1. Illness, Disease, bacterial or viral infection, even if contracted by an Accident. This does not exclude bacterial infection that is the direct result of an Accidental cut or wound or Accidental food poisoning.
2. Medical or surgical treatment, except where such treatment is rendered necessary by Injury within the scope of this Accidental Death Benefit.
3. Pregnancy, childbirth, miscarriage, abortion or complications arising from any of them even though such loss may have been accelerated or induced by Injury.
4. Any illegal act of the Insured Person in the country or territory where Injury occurs.
5. Being in a state of insanity or psychiatric or psychological disturbance.
6. Being under the influence of alcohol or drugs unless the drugs are properly prescribed by a Registered Medical Practitioner and were not taken for the treatment of drug addiction.
7. Driving any kind of vehicle while the alcohol level in Insured Person's breath, blood or urine is higher than the legal limit in the country or territory where Injury occurs.
8. Service in any armed force while: i) in the time of War; ii) under orders for warlike operations; or iii) restoration of public order. For the avoidance of doubt, armed force shall include any police force

of a country or territory.

9. War or any act of War, invasion, act of foreign enemy, hostilities (whether war be declared or not), strike, riot and/or Civil Commotion, civil war, rebellion, revolution, insurrection, military or usurped power or Terrorism.
10. 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.
11. Suicide, attempted suicide, suicide pact or deliberate self-inflicted injury, while sane or insane.
12. Workers involved in the manufacture, storage, filling, breakdown, handling and transport of any explosive (including but not limited to firework or firecracker).
13. The Insured Person participating in or conducting training for any of the following activities:
 - i. underwater swimming or diving and use any type of equipment to aid breathing;
 - ii. any kind of climbing, or mountaineering using rope or guides;
 - iii. pot-holing;
 - iv. parachuting, any kind of gliding, ballooning, bungee-jumping or micro-lighting;
 - v. Cave, wreck or free diving, professional diving, diving without holding the correct diving certification such as a Professional Association of Diving Instructors (PADI) and diving at depths below 40 meters;
 - vi. professional, semiprofessional or competitive winter sports, cross country skiing or snowboarding, ski or snowboard jumping, heli-skiing, off-piste skiing or snowboarding, Speed Skiing;
 - vii. hunting;
 - viii. driving or riding in any kind of race; or
 - ix. professional sports.

Notes:

"Cigna Healthcare", "the Company", "We", "our" or "us" herein refers to Cigna Worldwide General Insurance Company Limited. This product brochure is also available in Chinese. You may request for the Chinese version from us. 此產品小冊子同時備有中文版本。閣下可向本公司索取中文版本。



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This policy is excluded from the application of the Contracts (Right of Third Parties) Ordinance (the "Ordinance"). Other than the Company and the Policy Holder, a person who is not a party to the policy (including, but not limited to, the Person Insured or the beneficiary) shall have no right under the Ordinance to enforce any term of this policy.

Cigna Healthcare reserves the right to change any of the details in this brochure. In case of any disputes about the content of this brochure, Cigna Healthcare's decision shall be final.