



CIGNA HEALTHFIRST MEDICAL PLAN SERIES

CIGNA HEALTHFIRST ELITE MEDICAL PLAN

Together, all the way.®

ABOUT CIGNA CORPORATION

Our mission

At Cigna, we are dedicated to improve the health, well-being, and peace of mind of those we serve.



**Sales capability in
over 30 countries
and jurisdiction¹**



**More than 170
million customer
relationships^{1,2}**



**More than 1 million
relationships with
healthcare providers,
clinics and facilities¹**



**US\$153.6 billion
total revenue¹**



**74,000 employees
around the world¹**



**Ranked 65th on the
2019 Fortune
500 List**



**Named a 'Caring Company' for the
17th consecutive year by the
Hong Kong Council of Social Service**

Remarks:

1. The above data is for informational purposes only and may not relate to a particular subsidiary of Cigna Corporation. Data is based on Cigna internal reporting as of December 31, 2019 and is subject to change.
2. Per policy holder.

HAVE YOU NOTICED?

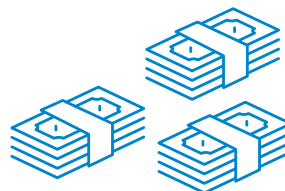
Medical Trends



+8.3% expected medical inflation in 2020¹

Medical costs keep rising

Funding for Unexpected Expenses (Hong Kong)



Only 13% of Hong Kong people feel they can meet the medical needs of their family members financially²

Financially unprepared to meet future medical needs

Cigna HealthFirst Elite Medical Plan (“Elite Medical plan”) – a full-spectrum healthcare solution offering benefits and services that cater to your needs!



Remarks:

1. 2020 Global Medical Trends Survey Report, Willis Towers Watsons.
2. Cigna ‘360° Well-being Score’ Survey, results for 2019.

HOW WOULD ELITE MEDICAL PLAN BENEFIT YOU?

Our medical cover gives you...

Superior Annual Limit for all Basic Benefits and Optional Outpatient Benefits

HK\$23.8M (Semi-Private)	HK\$38.8M (Standard Private)
------------------------------------	--

Unlimited lifetime claims

For all basic benefits and most optional benefits¹

Guaranteed renewable up to age 100

Regardless of any eventual changes to your health

Flexible options to suit your needs

3 Area of Coverage options so you can choose where you want your coverage

 Asia only	 Worldwide excluding USA	 Worldwide including USA
--	---	--

Accommodation Room Type

 Semi-Private Room For Asia-only plans	 Standard Private Room For Asia-only and worldwide plans
---	---

4 Annual Deductible Options² to suit your budget and complement any existing cover³

\$0	\$15,000	\$25,000	\$50,000
------------	-----------------	-----------------	-----------------

Remarks:

- Lifetime limit only applies to the Optional Pharmacy Benefits.
- We will start paying for the covered medical expenses once the deductible amount has been reached. The deductible will be covered either by you or your other insurance plans.
- The deductible is adjustable upon your retirement. This privilege is applicable within 31 days immediately before the policy anniversary date coincident with or immediately following the person insured's 55th, 60th, 65th, or 70th birthday. This privilege can only be exercised once per lifetime and is not applicable if the person insured has enrolled in the "Premium Waiver due to Cancer" and / or "Deductible Discount" optional benefits.

Various Optional Benefits

 Outpatient Benefits Extensive treatments including Western and Chinese Medicine and much more	 Pharmacy Benefits Prescription medication for Major Diseases up to HK\$80,000 per year¹	 Dental Benefits Scaling and polishing twice a year, with full coverage for X-rays and common dental procedures
 Deductible Discount Benefits 10% discount on your deductible for each eligible year²	 Premium Waiver due to Cancer 6-month premium waiver upon a cancer diagnosis to help focus on recovery	

All-round healthcare concierge service in Hong Kong

- 24-hour Cigna HealthFirst Elite Hotline manned by experienced nurses
- Care Manager to provide hospital admission advice and assistance, in-hospital support, and post-discharge follow-up (when eligibility criteria are met)
- Referral for personalized services, including local limousine transportation to the hospital, medication delivery, and home modification

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

Cashless hospitalization arrangement – Hong Kong and overseas

- Worldwide network of 7,000+ hospitals
- No need for deposit upon hospital admission or claim upon discharge (subject to prior approval)

SOS Worldwide Emergency Assistance Services

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

Free annual health check-ups

To give you a clear and up-to-date understanding about the state of your health, we will send you a free body check-up coupon³ at time of policy anniversary

Cigna Virtual Consultation

Cigna has partnered with **DoctorNow** to bring you a telemedicine service which allows you to obtain immediate medical advice with video medical consultations by professional doctors registered in Hong Kong. You can also enjoy medicine delivery citywide and specialty service referral. As a HealthFirst policyholder, you can enjoy exclusive preferred rates when you enjoy this convenient service. With **DoctorNow**, you can avoid visiting the clinic in person, which means no lengthy waiting times. To enjoy, download the **DoctorNow** app (search for “**DoctorNow**” via App Store / Google Play)

Remarks:

1. Lifetime limit of HK\$500,000 applies to the Optional Pharmacy Benefits.
2. Deductible Discount is applied at each policy anniversary when no Basic Benefits claims have been made in the previous policy year.
3. Coupon is transferable and may be redeemed by any adult (aged 18 or above).

THE PLAN AT A GLANCE

Basic Benefit and Optional Insurance Benefits			
Options for Geographical coverage (please refer to policy provision for details)	Asia ¹ (including Australia and New Zealand)		Worldwide (excluding US)
Accommodation Room Type	Semi-Private Room ²	Standard Private Room	Standard Private Room
Overall Annual Limit - Basic Benefits and Outpatient Benefit (if applicable)	HK\$23,800,000	HK\$38,800,000	HK\$38,800,000
Issue Age (at last birthday) ³	15 days to age 75		
Protection Period	1 year and guaranteed renewable ⁴ , up to age 100		
Premium payment term	Until the end of the protection period		
Annual deductible options ⁵	No deductible / HK\$15,000 / HK\$25,000 / HK\$50,000		
Premium payment frequency	Annual / Monthly		
Policy Currency	HKD		

Remarks:

1. Asia means 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.
2. If the accommodation room type selected is Semi-private Room, for confinement in standard private room in Hong Kong or Macau, an adjustment factor of 50% applies to benefits payable under Basic Benefits, while it is fully covered elsewhere in Asia.
3. Children under age of 6: Your child must enroll when you do. The child is required to enroll in the same area of coverage as the parent. Your child's policy will end if you terminate your policy. Children aged 6 or above: Your child is not required to enroll together with you or your spouse. Your child's policy will continue if you terminate your policy.
4. Guaranteed renewable subject to Cigna continue to issue new policy(ies) under the Basic Benefits and respective Optional Insurance Benefits (if applicable) of "Cigna HealthFirst Elite Medical Plan", and upon payment of the premium at time of renewal.
5. Deductible applies to Basic Benefits with the exception of the benefits under Compulsory Quarantine Cash, Hospital Cash and Accidental Death Benefit.

BENEFIT SCHEDULE (HKD)

Subject to prior approval, you need not pay any deposit when you are admitted to hospital, or claim when you are discharged – simply fill in a form for approval to enjoy cashless hospitalization.

The following benefit items are for reference only. Please refer to the policy provisions for details.

[illegible]

Hospitalization and Surgical Benefits (continued)		
Accommodation Room Type	Semi-Private Room	Standard Private Room
Benefit Items	Maximum Limit (HK\$)	
13. Other Medical Expenses ¹ <i>Covers the following services during hospital confinement or outpatient surgery:</i> a) <i>diagnostic imaging services;</i> b) <i>laboratory and pathological examinations;</i> c) <i>drugs and medication, intravenous fluid and curative material consumed;</i> d) <i>dressing, splints and plaster casts;</i> e) <i>blood transfusion;</i> f) <i>physiotherapy and emergency expenses;</i> g) <i>general nursing care, excluding services payable under private nursing care;</i> h) <i>related test and drugs fee of chemotherapy and radiotherapy;</i> i) <i>surgical appliance used by the physician during surgery, except all external prosthesis, special braces, equipment or appliances; and</i> j) <i>western medicine services, medical disposals and consumable.</i>	Fully covered	
14. Pregnancy Complications <i>Covers hospitalization and surgical costs associated with pregnancy complications on an inpatient or outpatient basis</i>		
15. Cancer Treatment <i>Covers treatments of cancer including radiotherapy, chemotherapy, targeted therapy, proton therapy, immunotherapy, hormonal therapy, gamma knife and cyberknife performed on an inpatient or outpatient basis</i>		
16. Kidney Dialysis <i>Covers treatment of chronic and irreversible kidney failure includes peritoneal dialysis and regular haemodialysis performed on an inpatient or outpatient basis</i>		
17. Advanced Diagnostic Imaging <i>Covers MRI, CT Scan and PET Scan on an inpatient or outpatient basis</i>		
18. HIV / AIDS Treatment <i>Covers HIV / AIDS treatment during hospital confinement</i>	\$800,000 per lifetime	
19. Organ Transplantation <i>Covers cost of the operation for heart, kidney, liver, lung, pancreas or bone marrow transplantation when the Person Insured is a recipient of an organ transplant</i> › Recipient Costs › Donor Costs (chargeable to the Person Insured)	Fully covered \$500,000 per lifetime	
20. Rehabilitation Benefit <i>Covers expenses in a Standard Private Room of a Rehabilitation Centre for rehabilitation treatments within 90 days after discharge from the hospital</i>	\$300,000 per policy year	
21. Palliative Care Benefit <i>Covers confinement in Standard Private room of a registered hospice for care and nursing service following a diagnosis of terminal illness confirmed</i>	\$300,000 once per lifetime	
22. Psychiatric Inpatient Treatment <i>Covers psychiatric treatment (mental illness or nervous disorders) in a Standard Private room of a hospital for the primary purpose of receiving psychiatric treatment)</i>	\$60,000 per policy year (up to 30 days per policy year)	
Remarks: 🔗 The benefit items 4 & 11 require written referral letter from the attending physician.		
1. The benefit items 3-9 & 11-13 will not be payable if Hospital Room and Board Benefit and /or Intensive Care Unit Expenses are not payable, except when they relate to surgeries carried out on an outpatient basis. Annual Deductible does not apply to Hospital Cash.		
2. 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). Annual Deductible does not apply to Compulsory Quarantine Cash.		

Extended Benefits		
Accommodation Room Type	Semi-Private Room	Standard Private Room
Benefit Items	Maximum Limit (HK\$)	
1. Pre-admission and Post-Hospitalization Outpatient Expenses › Pre-admission clinic visits (within 30 days before the hospital confinement or outpatient surgery in clinic) › Post-hospitalization follow-up clinic visits (within 180 days after hospital discharge or surgery - or within 365 days in case of hospitalization or surgery for cancer)	› Fully covered (up to 30 visits per policy year) › Fully covered (up to 60 visits per policy year)	› Fully covered (up to 30 visits per policy year) › Fully covered (up to 90 visits per policy year)
2. Post-hospitalization Auxiliary Treatment ¹  › Physiotherapy / Occupational Therapy / Speech Therapy › Chiropractor Consultation › Psychologist registered in Hong Kong	› Fully covered (up to 30 visits per policy year) › \$1,600 per visit (up to 30 visits per policy year) › \$800 per visit (up to 5 visits per policy year)	› Fully covered (up to 60 visits per policy year) › \$1,600 per visit (up to 30 visits per policy year) › \$800 per visit (up to 5 visits per policy year)
3. Traditional Chinese Medicine Treatment <i>Covers consultation fee charged by a Chinese Medicine Practitioner for up to two packs of basic Chinese Medicines (excluding bonesetting and acupuncture treatment) during hospital confinement or within 90 days after discharge from hospital or outpatient surgery</i>	\$600 per visit (up to 30 visits per policy year)	
4. Home Nursing Expenses  <i>Covers special nursing care provided immediately after discharge from the hospital</i>	Fully covered (up to 120 days per policy year)	
5. Accident Emergency Outpatient Treatment <i>Covers emergency treatment in the outpatient department of a hospital within 24 hours of the accident</i>	Fully covered	
6. Accident Emergency Dental Treatment <i>Covers emergency dental treatment due to dental injury to sound natural teeth / tooth caused by accident, and the treatment takes place within 2 weeks of the accident in a dental clinic or hospital</i>		
7. Accidental Death Benefit ² › Hong Kong › Overseas	\$100,000 \$200,000	
8. Local Ambulance Benefit <i>Covers local ambulance services immediately preceding the admission to and following the discharge from hospital</i>	Fully covered	
Remarks:  The benefit items 2 & 4 require written referral letter from the attending physician. 1. If more than one Physiotherapy, Occupational Therapy, Speech Therapy, Chiropractor Consultation or consultation by Psychologist registered in Hong Kong incurred on the same day, only one consultation will be entitled under this benefit. 2. Annual Deductible does not apply to Accidental Death Benefit.		

Optional Outpatient Benefits

Cover treatments or consultations on outpatient basis, up to 40 visits on benefit items 1-10, within which up to 10 visits for benefit items 6-8 per policy year. The Overall Annual Limit of the Basic Benefits as specified under the Benefit Schedule is also applicable to the Outpatient Benefits.

Benefit Items	Maximum Limit (HK\$)
1. General Practitioner Consultation ^{1,3}	Fully covered
2. Specialist Consultation ^{2,3} 	
3. Home Consultation ^{1,3}	
4. Physiotherapy ^{2,3} 	
5. Chiropractor Consultation ^{2,3} 	
6. Chinese Medicine Practitioner Consultation ^{1,3} (includes up to 2 packs of basic Chinese medicines)	\$800 per visit
7. Chinese Bone-setting ^{1,3}	
8. Acupuncture ^{1,3}	
9. Psychiatric Outpatient Treatment or Psychological Outpatient Treatment ^{3,4} 	\$800 per visit (up to 5 visits per policy year)
10. Dietetic Guidance / Speech Therapy / Occupational Therapy ³ 	\$800 per visit (up to \$1,600 and 5 visits per policy year)
11. Prescribed Western Medicine	\$10,000 per policy year
12. Diagnostic Imaging and Laboratory Tests 	
13. Vaccination	\$200 per shot (up to \$1,000 per policy year)

Remarks:

 For items 2, 4, 5, 9, 10 & 12, a written referral letter from the physician is required.

- Only one of the General Practitioner Consultation, Home Consultation, Chinese Medicine Practitioner Consultation, Chinese Bone-setting or Acupuncture will be paid for any one day.
- Only one of the Specialist Consultation, Physiotherapy, or Chiropractor Consultation will be paid for any one day.
- Benefit items 1-10 applies only to consultation / treatment fee and only one consultation / treatment will be paid for any one day.
- Psychological Outpatient Treatment must be provided by a psychologist registered in Hong Kong.

Optional Pharmacy Benefits

The Optional Pharmacy Benefits is payable on a reimbursement basis if the person insured suffers from first confirmed diagnosis of any Major Diseases listed below after the Waiting Period and has survived for 30 days. It covers expenses made by a pharmacy, dispensary, clinic or hospital for prescribed medication to treat such Major Disease.

Overall Annual Limit

HK\$80,000

Lifetime Limit

HK\$500,000

Major Diseases (Applicable to age of 16 or above)

- | | |
|--|---|
| 1. Alzheimer's Disease / Dementia ¹ | 28. Loss of Speech |
| 2. Amyotrophic Lateral Sclerosis | 29. Major Burns |
| 3. Aplastic Anaemia | 30. Major Organ Transplantation |
| 4. Bacterial Meningitis | 31. Meningeal Tuberculosis |
| 5. Benign Brain Tumor | 32. Medullary Cystic Disease |
| 6. Blindness | 33. Multiple Sclerosis |
| 7. Brain Surgery | 34. Muscular Dystrophy |
| 8. Cancer | 35. Myocardial Infarction |
| 9. Carcinoma-in-situ ² | 36. Necrotising Fasciitis / Gangrene |
| 10. Cardiomyopathy | 37. Occupationally acquired HIV |
| 11. Chronic Relapsing Pancreatitis | 38. Parkinson's Disease |
| 12. Coma | 39. Poliomyelitis |
| 13. Coronary Angioplasty ² | 40. Primary Lateral Sclerosis |
| 14. Coronary Artery Bypass Surgery | 41. Primary Pulmonary Arterial Hypertension |
| 15. Creutzfeldt-Jakob Disease | 42. Progressive Bulbar Palsy |
| 16. Crohn's Disease | 43. Progressive Muscular Atrophy |
| 17. Ebola | 44. Progressive Supranuclear Palsy |
| 18. Elephantiasis | 45. Rheumatoid Arthritis (Adult) |
| 19. Encephalitis | 46. Severe Brain Damage |
| 20. End Stage Lung Disease | 47. Severe Myasthenia Gravis |
| 21. Fulminant Viral Hepatitis | 48. Severe Ulcerative Colitis |
| 22. Heart Valve Replacement | 49. Spinal Muscular Atrophy |
| 23. HIV Infection due to Blood Transfusion | 50. Stroke |
| 24. Kidney Failure | 51. Surgery to Aorta |
| 25. Liver Failure | 52. Terminal Illness |
| 26. Loss of Hearing | 53. Total and Permanent Disability |
| 27. Loss of Limbs | 54. Vegetative State |

Major Diseases (Applicable to below age 16)

- | | |
|---|--|
| 1. Cancer | 9. Major Burns |
| 2. Coma | 10. Major Organ Transplantation |
| 3. Coronary Artery Bypass Surgery | 11. Myocardial infarction |
| 4. Hand, foot and mouth diseases with severe (life threatening) complications | 12. Poliomyelitis |
| 5. Insulin-Dependent Diabetes Mellitus | 13. Rheumatic Fever with Valvular Impairment |
| 6. Kawasaki Disease with Heart Complications | 14. Severe Asthma |
| 7. Kidney Failure | 15. Severe Epilepsy |
| 8. Liver Failure | 16. Stroke |

Remarks:

- The coverage of Alzheimer's Disease / Dementia shall cease upon the policy anniversary after the person insured reaches age 65.
- The benefit payable for Carcinoma-in-situ and Coronary Angioplasty is limited to 20% of the benefit's Annual Maximum Limit and Lifetime Limit.

Optional Dental Benefits

Cover the treatments charged by a dentist at the dentist's clinic.

Overall Annual Limit	HK\$5,000
Benefit Items	Maximum Limit
1. Scaling and Polishing	Once every 6 months
2. The following items are covered: (a) Fillings, including Amalgam fillings, composite resin filling, ceramic filling and glass ionomer cement filling (molar and pre-molar); (b) Dentures, crowns and bridges (only if necessitated by an accident); (c) Drainage of abscesses; (d) Intraoral extractions; (e) X-ray; (f) Root canal fillings; and (g) Routine oral examination.	Fully covered

Optional Premium Waiver due to Cancer

6-months' waiver of premium on Basic Benefits is payable if the person insured suffers from first confirmed diagnosis of cancer after the Waiting Period and has survived for 30 days. A lump sum benefit amount which is equivalent to half of the annualized premium of the Basic Benefits (calculated based on the prevailing premium rate as at the first confirmed diagnosis date) will be paid.

Premium payment frequency	Benefit Amount
› Annual	› 50% of annual premium
› Monthly	› 6 times of monthly premium

Remarks:

1. The Optional Premium Waiver due to Cancer is payable only once if the person insured suffers multiple cancer diagnosed in single incident and/or spread of cancer arising from same cause.
2. If this benefit is paid to the policyholder, there will be a 6-month waiver period commencing on the first confirmed diagnosis date of the paid cancer, in which during this period the Company will not pay this benefit for another cancer.
3. For the avoidance of doubt, while the Premium Waiver due to Cancer is in force, the policyholder shall not make any changes to the Basic Benefits including the Accommodation Room Type, Area of Cover, Deductible and / or payment frequency, otherwise the Company shall not pay any benefit under the Premium Waiver due to Cancer.

Optional Deductible Discount

On each anniversary date after the Waiting Period, the person insured shall be entitled to a benefit for reducing the Deductible if no claims were paid under the Basic Benefits in the previous year. This reduction is equivalent to 10% of the Deductible. The maximum accumulated Deductible Discount available under each Policy is 100% of the Deductible and the Deductible Discount will reset to 0% at the policy anniversary after any Basic Benefits claims have been paid.

Remarks:

1. The Deductible Discount is used for offsetting the Deductible under the Policy.
2. Upon payment of any claim under the Basic Benefits (other than the benefit under Compulsory Quarantine Cash) for any policy year, the total accumulated Deductible Discount shall be reset to 0% on the next anniversary date and no Deductible Discount benefit shall be available until the following anniversary date.
3. If we pay a claim incurred in the policy year immediately preceding an anniversary date when the Deductible Discount has been applied, we will waive such Deductible Discount. If this results in any overpayment of subsequent claims, the policyholder shall return the difference to us or we shall offset such difference against any further claim payments due.
4. In determining eligibility for the Deductible Discount, any benefits paid or payable in respect of an admission to hospital due to bodily injury or sickness shall be attributed to the policy year for which the relevant admission occurred, but not the policy year in which discharge from hospital occurred, if different. In the event that there is no admission to Hospital, any benefits paid or payable shall be attributed to the policy year for which the loss incurred date.
5. For the avoidance of doubt, while the Deductible Discount is in force, the policyholder shall not make any changes to the Basic Benefits including the Accommodation Room Type, Area of Cover, Deductible and / or payment frequency, otherwise the Company shall not pay any benefit under the Deductible Discount.

Waiting Period

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

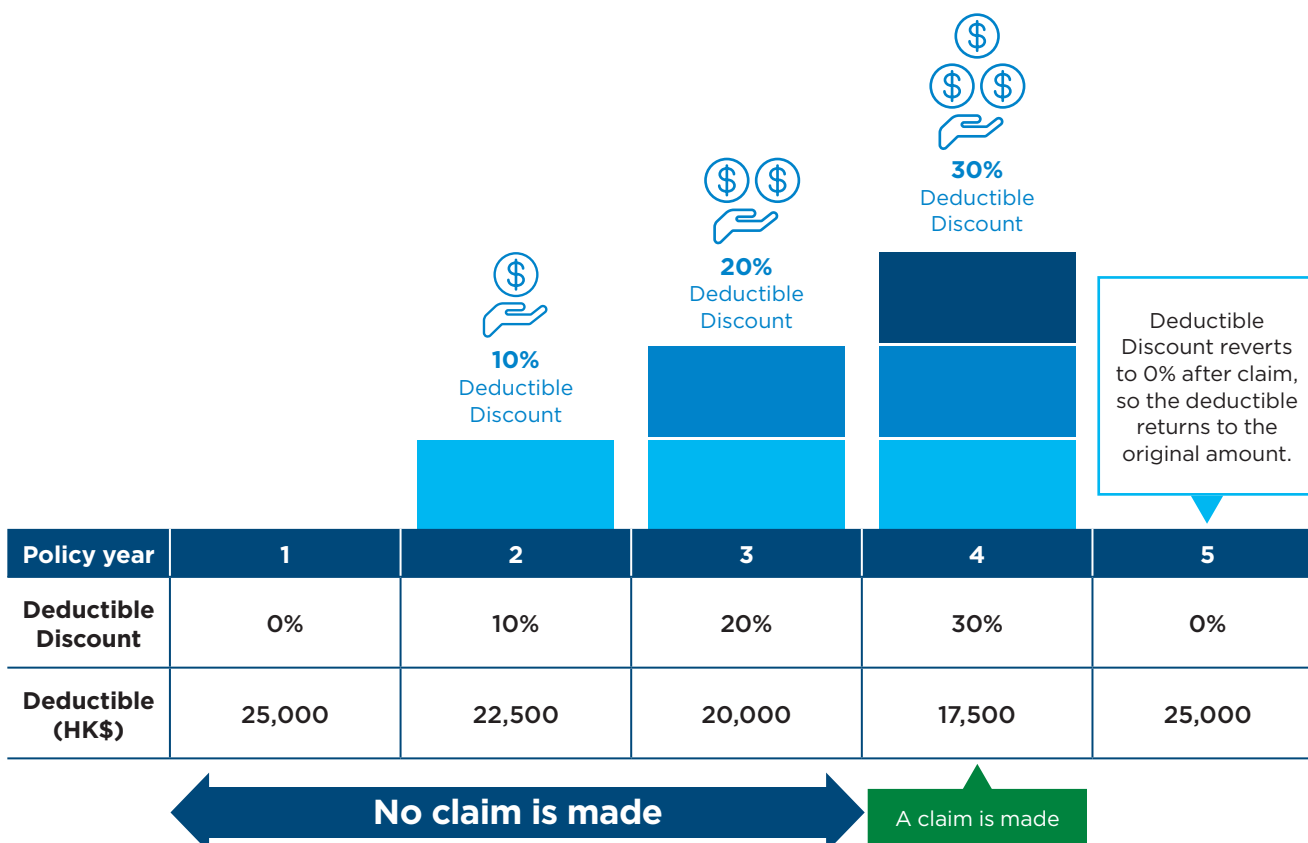
Benefit Items	Waiting Period
Pregnancy Complications	1 year
HIV/AIDS Treatment	5 years
Palliative Care Benefit	2 years
Optional Pharmacy Benefits	180 days
Optional Premium Waiver due to Cancer	90 days
Optional Deductible Discount	1 year

Remarks:

- Waiting Period refers to the period after each of the following dates:
 - The policy issue date or the commencement date (whichever is later),
 - The approval date of any reinstatement (if your policy and/or the respective benefits of your policy has been subsequently reinstated),
 - The issue date of respective optional benefits (if the optional benefit is added after the policy issue date) and
 - The issue date or the effective date of any increase in benefit (whichever is later).
- Waiting Period of Optional Deductible Discount refers to the period of 1 year from the issue date of Optional Deductible Discount.
- The corresponding term for "waiting period" in the policy provisions are "Pregnancy Complications Waiting Period", "HIV/AIDS Treatment Benefit Waiting Period", "Palliative Care Benefit Waiting Period", "Pharmacy Benefits Waiting Period", "Premium Waiver due to Cancer Waiting Period" and "Deductible Discount Waiting Period".

Deductible Discount

For a policy with an original deductible of HK\$25,000, the Deductible Discount will function according to the following illustration:



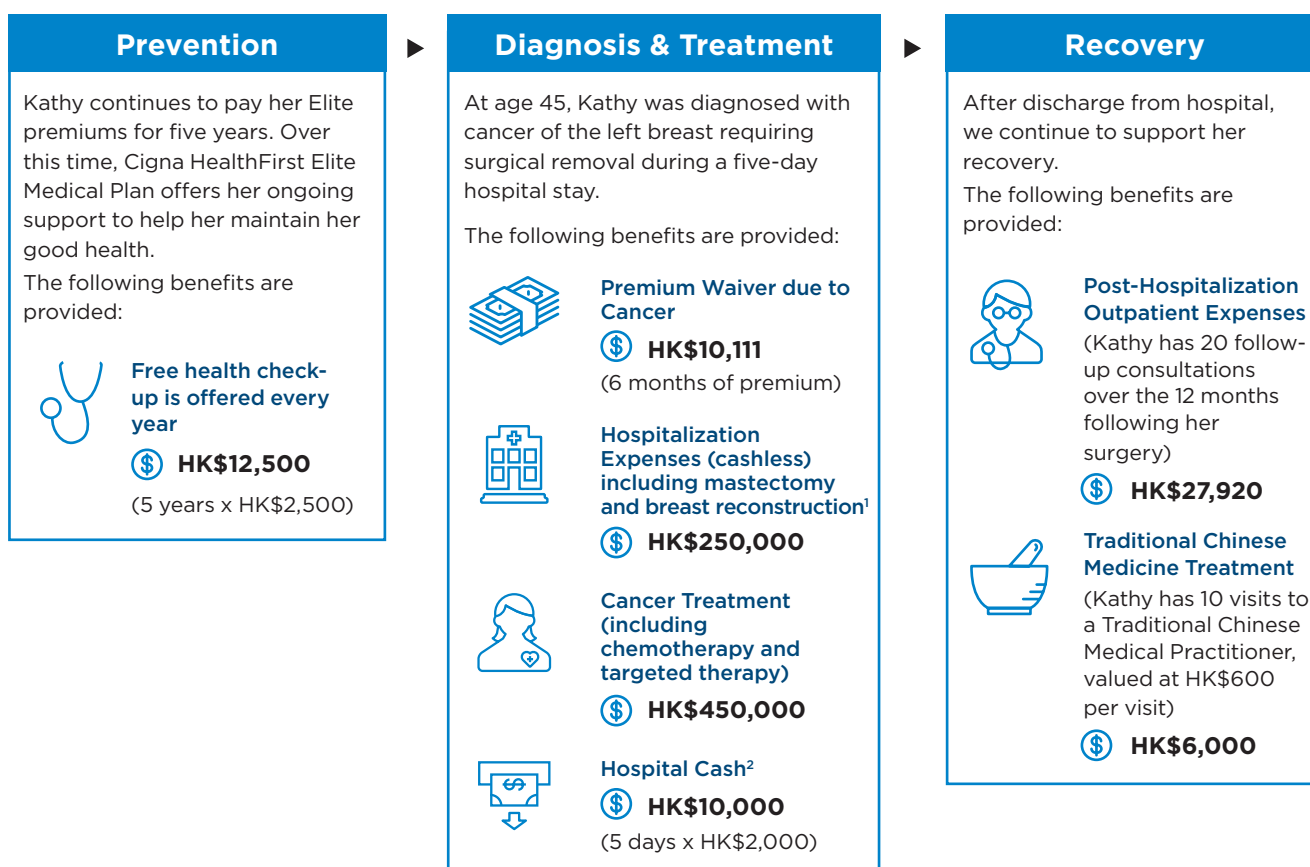
CASE ILLUSTRATION

The following examples are hypothetical and for illustrative purposes only.

Case I: End-to-end medical protection

	Policyholder	Kathy
	Age	40 (non-smoker)
	Background	Kathy worries about rising medical costs. She wants a medical plan that provides her with comprehensive coverage. She enrolls in Cigna HealthFirst Elite Medical Plan at age 40
	Plan level	Cigna HealthFirst Elite Medical Plan – Standard Private Room, Asia coverage, No Deductible
	Optional benefits	Premium Waiver due to Cancer
	Premium payment frequency	Annual

Cigna HealthFirst Elite Medical Plan offers comprehensive and superior benefits to ensure Kathy receives adequate protection throughout life's journey.



Total premiums paid from age 40-45:

HK\$110,712

Total benefit:

HK\$766,531

Net benefit from Elite:

HK\$655,819

1. Breast reconstruction to be covered by the item of surgical expenses benefit.

2. Hospital cash not counting towards annual deductibles.

Note: The premium quoted above are indicative only and may change from time to time at Cigna's discretion.

Case II: Save for a rainy day



Policyholder Carl

Age	30 (non-smoker)
Background	Carl wants affordable and comprehensive medical protection while he is young and healthy. He enrolls in Cigna HealthFirst Elite Medical Plan at age 30
Plan level	Cigna HealthFirst Elite Medical Plan – Semi-Private Room, Asia coverage, Annual Deductible: HK\$25,000
Optional benefits	Deductible Discount

Cigna HealthFirst Elite Medical Plan offers comprehensive benefits at an affordable premium. With his healthy lifestyle, the optional benefit helps Carl accumulate a higher deductible discount, thus increasing the coverage amount every year.

At age 33, Carl experiences a cruciate ligament rupture during his vacation in Australia, which is included under his coverage. He was admitted to hospital for 4 days.

The following benefits are provided:



Deductible Discount

With his no-claim record for the past 3 years, the deductible has been reduced by 30%, becoming HK\$17,500

Save HK\$7,500



Cover of Hospitalization Expenses

Room and Board, Surgeries and Other Medical Expenses are covered after the deductible of HK\$17,500

HK\$202,620



Hospital Cash¹ for 4 days of hospitalization

HK\$1,000/day

HK\$4,000



Full cover for physiotherapy after discharge

His expenses for 20 visits to a physiotherapist in Hong Kong after discharge is fully covered

HK\$15,240

Total premiums paid from age 30-33:

HK\$26,419

Total benefit:

HK\$221,860

Net benefit from Elite:

HK\$195,441

1. Hospital cash not counting towards annual deductibles.

Note: The premium quoted above are indicative only and may change from time to time at Cigna's discretion.

Case III: Protection to Family and customized for the needs of each members



Policyholder Stephen

Age

38

Background

Stephen wants to arrange a comprehensive medical protection for his family, so he enrolls with his family together at age of 38. With the group medical coverage by the employers of Stephen and Mabel, they opt for higher deductible options to coordinate with the group plan at lower premiums, but better coverage. Also, the optional outpatient benefit can fill the protection gap of Adrian during his study in Canada.

Person Insured	 Stephen	 Mabel	 Adrian
Relationship	Self	Spouse	Son
Age	38	35	13
Plan Level	Cigna HealthFirst Elite Medical Plan – Private Room, Worldwide excluding US coverage, Annual Deductible HK\$50,000		Cigna HealthFirst Elite Medical Plan – Private Room, Worldwide excluding US coverage, Annual Deductible HK\$15,000
Optional Benefit	Deductible Discount		Deductible Discount, Outpatient Benefit

Three years later, Stephen and Mabel went to visit Adrian in Vancouver during Christmas and went skiing together. Unfortunately, Adrian broke his leg. Adrian stayed in hospital for 4 days. He also needed follow up physiotherapy after discharge.

The following benefits are provided:

	Hospitalization and surgical expenses HK\$220,000		Companion Bed HK\$8,400	 Full Cover
	Local Ambulance Benefit HK\$1,440		Full cover for the 20 visits to a physiotherapy after discharge HK\$27,000	
	Hospital Cash¹ for 4 days of hospitalization, HK\$2000/day HK\$8,000			

Total Premium paid for the 3 years for Adrian : $\begin{matrix} \$38,149 \times 40\% = \text{HK\$}15,260 \\ \$38,152 \times 50\% = \text{HK\$}19,077 \\ \$38,443 \times 50\% = \text{HK\$}19,222 \end{matrix}$ = **HK\$53,559**

Total Benefit paid : $\begin{matrix} \text{Total Medical Expenses} \\ \text{with Hospital Cash} \\ \text{HK\$}264,840 \end{matrix}$ – $\begin{matrix} \text{Deductible}^{\wedge} \\ \text{HK\$}10,500 \end{matrix}$ = **HK\$254,340**

Net benefit from Elite:
HK\$200,781

1. Hospital cash not counting towards annual deductibles.

Note: The premium quoted above are indicative only and may change from time to time at Cigna's discretion.

[^] Deductible: \$15,000 x (1-10% deductible discount x 3 years) = \$10,500

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.

Premium

1. Premium Level

The premium corresponding to the accommodation room type, area of cover and annual deductible option you select is determined based on the age and smoking habit of the person insured at policy commencement 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 commencement 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 person insured, the relevant person insured 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 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 Hospital Confinement takes place in mainland China, the Hospital must be of Tier 3 Class A or above or included on 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 policyholder, except in case of the person insured'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 medical expenses incurred of insured event according to the following calculation formula:

$$\left(\begin{array}{l} \text{Amount of eligible} \\ \text{medical expenses} \\ \text{incurred} \end{array} \right) \text{ LESS } \left(\begin{array}{l} \text{The medical} \\ \text{expenses of same} \\ \text{insured event is} \\ \text{reimbursed by} \\ \text{another party or} \\ \text{by us under} \\ \text{another} \\ \text{insurance plan or} \\ \text{the deductible} \\ \text{(per policy year)} \\ \text{under this policy,} \\ \text{whichever is the} \\ \text{larger} \end{array} \right) \text{ TIMES } \left(\begin{array}{l} \text{Adjustment} \\ \text{factor in} \\ \text{room type} \\ \text{confined} \\ \text{(if applicable)} \end{array} \right)$$

If the person insured uses a higher level of hospital facilities and services than he is entitled to under the policy, the benefit amount payable will be lowered according to the adjustment factor. This benefit will not be payable for class of suite / VIP / deluxe room of a hospital.

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

3. Deductible Discount and Premium Waiver due to Cancer

For the avoidance of doubt, while the Deductible Discount and / or Premium Waiver due to Cancer are in force, the Basic Benefits including the selected accommodation room type, area of cover, deductible and / or payment frequency are not allowed to change. Otherwise, the Company will not pay any benefit under the Deductible Discount and / or Premium Waiver due to Cancer.

Area of Cover

If the person insured's country of residence is the United States (US) at the time of loss incurred, all benefits payable under the Basic Benefits and the Optional Insurance Benefits (if any) which takes place 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. Country of residence refers to the country where person insured has stayed in for 185 days or more during the period of 365 consecutive days before the loss incurred date.

For the area of cover "Asia", if the person insured's country of residence is Australia and / or New Zealand at the time of loss incurred, all benefits payable under the Basic Benefits and the Optional Insurance Benefits (if any) relating to treatment 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 person insured has stayed in for 185 days or more during the period of 365 consecutive days before the loss incurred date.

Duplicated Policy

Person insured can only be covered under one single "Cigna HealthFirst Medical Plan Series" policy. The series include "Cigna HealthFirst Elite Medical Plan", "Cigna HealthFirst Choice Medical Plan", "Cigna HealthFirst DiaMedic Plan" and any other insurance policies that fall under the "Cigna HealthFirst Medical Plan Series" and "Cigna VHIS series" as defined and issued by the Company from time to time.

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 HealthFirst Elite Medical Plan", and upon payment of the premium at time of renewal. If the Basic Benefits are renewed by the Company, but the Optional Deductible Discount is not renewed by the Company, the coverage period of the Optional Deductible Discount will be extended to 12 months following the next policy anniversary. If the policy is not renewed by the Company, the Optional Deductible Discount will be terminated at the end of the policy year. In such case, the coverage period of Optional Deductible Discount will not be extended. 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 person insured reaches the age of 100 (policy terminates at the following policy anniversary);
 - The person insured passes away; or
 - Any premium is not paid at the end of the grace period.
2. The Optional Pharmacy Benefits will be terminated if 100% of the lifetime limit has been paid.
3. 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.

4. The person insured is required to settle any shortfall of expenses incurred with the use of the Cigna HealthFirst Elite 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 payment advice from us or our designated medical service providers, the Company reserves the right to terminate this policy.
5. Children aged below 6 may only enroll in Elite Medical Plan when their parent is enrolling or has already enrolled in Elite Medical Plan. The child and the parent must share the same Area of Cover. If the policyholder terminates their own policy, the policy / policies of their child(ren) aged below 6 will also be terminated.

Inflation Risk

While your current planned benefits will not be adjusted during the policy term, future medical costs may be higher than they are today due to inflation.

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 shall not be liable to pay any claim or expenses incurred directly or indirectly resulting from or consequent upon or contributed by the following items.

The following items are applicable to all benefits:

- (a) Pre-existing medical conditions and any specified special exclusion(s);
- (b) War, invasion, act of foreign enemy, hostilities, civil commotion, rebellion, revolution, insurrection, military or usurped power or terrorism;
- (c) The person insured's suicide, attempted suicide or intentionally self-inflicted injuries, whether sane or insane;
- (d) The person insured being under the influence of alcohol or drugs unless the drugs are properly prescribed by a physician and were not taken for the treatment of drug addiction;
- (e) Pregnancy, childbirth, miscarriage, abortion or complications arising from any of them even though such loss may have been accelerated or induced by bodily injury or sickness (this exclusion is not applicable to Pregnancy Complications Benefit under the Hospitalization and Surgical Benefits);
- (f) Infection with Human Immunodeficiency Virus (HIV) or variants including Acquired Immune Deficiency Syndrome (AIDS) and AIDS-related complex (ARC) except such occurrence are covered under HIV / AIDS Treatment section and HIV Infection due to Blood Transfusion and Occupational acquired HIV of Pharmacy Benefits (optional benefit);
- (g) Sexually-transmitted diseases or treatment thereof except such occurrence are covered under HIV / AIDS Treatment section and HIV Infection due to Blood Transfusion of Pharmacy Benefits (optional benefit);
- (h) Infertility or sterilization or any type of fertility;
- (i) Birth defects, congenital conditions, hereditary conditions or any disabilities arising therefrom except such occurrence are covered under Medullary Cystic Disease of Pharmacy Benefits;
- (j) Cosmetic and elective surgery;
- (k) Routine eye / ear examinations, cost of spectacles, contact lenses, hearing aids and artificial lens except such occurrence are covered under the item of Medical Appliances of the Hospitalization and Surgical Benefits;
- (l) Routine medical examinations or health screening checks;
- (m) All dental treatment prescribed by dentist except emergency treatments by a physician during hospital confinement due to bodily injury. No claims shall be payable for any follow up treatment from such hospital confinement. (This exclusion is not applicable to Dental Benefit); or

- (n) Organ transplantation except such occurrence is covered under the item of Organ Transplantation of the Hospitalization and Surgical Benefits and Major Organ Transplantation of the Pharmacy Benefits;
- (o) Developmental Conditions including but not limited to learning difficulties such as dyslexia, behavioural problems such as autism or attention deficit disorder (ADHD), or physical developmental problems such as short height.

The following exclusions items are applicable to Dental Benefits only:

- (a) Dental implants or transplants;
- (b) Cosmetic dentistry procedures such as bleaching and veneers;
- (c) Orthodontic services;
- (d) Placement of bone grafts or extra-oral substances in the treatment of periodontal disorders;
- (e) Procedures or appliances to correct congenital malformations;
- (f) Treatment of malignancies, cysts, or neoplasms;
- (g) Services or treatment for, or associated with, temporomandibular joint (TMJ) dysfunction or disorder, or for orthognathic surgery;
- (h) Services or supplies intended to diagnose or treat any condition that is occupational injury or disease; or
- (i) Replacement or additions to existing dentures or bridgework;

The following exclusions items are applicable to Pharmacy Benefits only:

- (a) Any drugs that are experimental or investigational; or
- (b) Cost or expense incurred for replacement of claimed western medications due to loss, theft, damaged, spoiled or expired;

The following exclusions items are applicable to Accidental Death Benefit only:

- (a) 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;
- (b) Medical or surgical treatment, except where such treatment is rendered necessary by bodily injury within the scope of this accidental death benefit;
- (c) Pregnancy, childbirth, miscarriage, abortion or complications arising from any of them even though such loss may have been accelerated or induced by bodily injury;
- (d) Being under the influence of alcohol or drugs unless the drugs are properly prescribed by a physician and were not taken for the treatment of drug addiction; or
- (e) Suicide, attempted suicide, suicide pact or deliberate self-inflicted injury, while sane or insane.

Notes:

"Cigna", "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。

Cigna Worldwide General Insurance Company Limited

Tel: (852) 2560 1990

www.cigna.com.hk

Issued by Cigna

The above insurance plan is underwritten by Cigna Worldwide General Insurance Company Limited, an authorized insurer to carry on general insurance business in or from Hong Kong. This brochure is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or a solicitation to buy or provision of any products of Cigna outside Hong Kong. It is designed to provide you with a brief summary of the named insurance plan, its terms, conditions and exclusions, and is not a contract of insurance. For complete details of terms, conditions and exclusions, please refer to the policy provisions. If there is any conflict between the policy provisions and this brochure, the policy provisions shall prevail.

This policy is excluded from the application of the Contracts (Rights 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 reserves the right to change any of the details in this brochure. In case of any disputes about the content of this brochure, Cigna's decision shall be final.