

HealthMultiple Outpatient Medical Plan

Outpatient medical expenses could be costly and may become a burden to the family. Our HealthMultiple Outpatient Medical Plan is designed to offer you an essential outpatient medical protection against disbursement on clinical care and medication.



For enquiry, please contact Zurich insurance intermediaries or call our Customer Hotline at 2903 9391.

Plan highlights

- ✓ Unlimited outpatient services during the period of insurance, including general practitioner visits and specialist consultations at just one annual premium
- ✓ Extensive medical network of more than 500 top medical experts in various districts throughout Hong Kong
- ✓ Coverage also includes X-ray and laboratory examination, physiotherapy, Chinese medical general practitioner consultation and bone-setting
- ✓ Free annual medical check-up¹

¹ Only applicable to Enhanced Plan and Platinum Plan.

Table of Benefits

Coverage (per policy year)			
Coverage	Maximum benefits per insured person (HKD)		
	Standard Plan	Enhanced Plan	Platinum Plan
Age limit	15 days to 64 years	15 days to 64 years	15 days to 64 years
General practitioner consultation and basic medication			
• Maximum no. of visits	Unlimited	Unlimited	Unlimited
• Co-payment per visit	50	35	0
Specialist consultation and basic medication			
• Maximum no. of visits	Unlimited	Unlimited	Unlimited
• Co-payment per visit	100	70	0
X-ray & laboratory examination			
	500	1,000	1,000
Physiotherapy			
• Maximum no. of visits	10 visits	15 visits	15 visits
• Co-payment per visit	100	70	0
Chinese medicine practitioner consultation			
• Maximum no. of visits	10 visits	15 visits	Unlimited
• Co-payment per visit	50	35	0
Chinese medicine bone-setting			
• Maximum no. of visits	10 visits	15 visits	Unlimited
• Co-payment per visit	50	35	0
Free medical check up			
Choose one from the following :			
For insured person aged 13 – 75 years			
• Physical check up			
• Gynaecology check up			
• Flu vaccine	N/A	Once per policy year	Once per policy year
For insured person aged 15 days – 12 years			
• Flu vaccine			

Premium Table

Current age	Premium per insured person (HKD)					
	Standard Plan		Enhanced Plan		Platinum Plan	
	Monthly	Annual	Monthly	Annual	Monthly	Annual
15 days – 5 years	223	2,676	380	4,560	668	8,016
6 – 64 years	196	2,352	356	4,272	601	7,212
65 – 75 years*	235	2,820	390	4,680	690	8,280

* For renewal only

Notes

- The HealthMultiple Outpatient Medical Plan (the "Plan") is a standalone cover and can be enrolled individually.
- The HealthMultiple Outpatient Medical service is provided by an independent medical service provider which is nominated by Zurich Insurance Company Ltd ("Zurich").
- Cover for insured person aged from 15 days to 64 years and renewable up to aged 75 years.
- Coverage shall be effective on the 1st or the 15th day of the month following the date of receipt of the application by Zurich (whichever is earlier).
- All consultations are limited to one visit per day only.
- Up to three-day medication supplied by the general practitioner, up to two-day basic herbs supplied by the herbalist and one external medicated dressing by Chinese bone-setter.
- A referral letter from a network general practitioner is required for specialist consultation. It is valid for six months from issue date.
- Laboratory examination received as an outpatient if medically indicated and recommended by network doctors.
- All general X-ray investigations performed by network doctors are included.
- Free medical check up shall be provided upon completion of the full policy year.
- Zurich is an authorized insurer in Hong Kong and the above information is not intended to solicit business outside Hong Kong.
- The policy shall remain in force for a period of 1 year from the policy effective date and this policy will be automatically renewed at Zurich's discretion. Zurich reserves the right to alter the terms and conditions, including but not limited to the premiums, benefits, benefits amount or exclusions of this policy at the time of renewal of any period of insurance by giving 30 days' written notice to you.
- You have the right to cancel the policy by returning the policy to Zurich and attaching a notice signed by you requesting cancellation within the cooling-off period i.e., 21 days immediately following the day of delivery of this policy. In the event that no claim payment has been or is to be made, Zurich will refund to you all the premiums you have paid without interest. In the event that a benefit payment has been made or is to be made, no refund of premium shall be made. After the cooling-off period, you have the right to cancel this policy by giving 30 days' advance notice in writing to Zurich. In such event, Zurich will refund the unearned premium actually paid by you provided that no claim has been made during the period starting from the policy effective date to the date on which the cancellation takes effect ("Policy Period").
- Zurich reserves the right to declare the policy void from the policy effective date and may refuse to refund any applicable premium paid and/or Zurich may request you to return all monies paid by Zurich for previous claims if (i) you have incorrectly stated the health information of the insured person, (ii) omitted material information during enrollment or (iii) provided fraudulent documentation or fraudulently represented information during enrollment or when making a claim.
- Zurich reserves the right to revise or adjust the premium under the following circumstances:
 - According to Zurich's applicable premium rate at the time of renewal (which will be based on several factors, including but not limited to medical price inflation, projected future medical costs, claims experience and expenses incurred by you and/or in relation to this product, and any changes in benefit) by giving 30 days' advance written notice to you.
 - The premium rate should be adjusted automatically according to the attained age of the insured person at the time of renewal.

Major exclusions

The following treatments, items, conditions, activities and their related or consequential expenses are excluded:

1. Routine physical examination and investigations;
2. Childbirth, sterilization, abortion or pregnancy including but not limited to pregnancy test and complications of pregnancy, primary infertility, contraceptive or contraceptive devices;
3. Female hormonal tests or assays and female hormonal replacement therapy unless resulting from a disease; pre-menopause, menopause and post-menopause treatments are all excluded;
4. Long term repeat medication for chronic illness and for medical conditions that pre-existing conditions, except consultation charges;
5. Any form of treatment not presently or universally available but which may become available subsequent to the contract and which may be highly expensive; medication costs for specific anti-viral agents, e.g. Interferon, Lamivudine, anti-cancer, etc;
6. Any treatment for sexually transmitted disease;
7. Treatment arising from sexual dysfunction including but not limited to impotence, erectile dysfunction, premature ejaculation, regardless of cause;
8. Any treatment for congenital abnormalities;
9. Any treatment arising from any geriatric, psychogeriatric or psychiatric condition, including but not limited to psychoses, neuroses, depression, anxiety, anorexia nervosa, schizophrenia, behavioral disorders, etc.;
10. Charges in respect of cosmetic surgery or treatment for cosmetic purpose such as consultation for Acne Vulgaris, overweight, hair loss, etc., routine eye or hearing tests, routine blood tests, vaccination or inoculations;
11. Medication on request e.g. prophylactic drug supply for visiting a malarial area and/or standby medication;
12. Specialized x-rays e.g. Intravenous Pyelogram (IVP), cholangiogram; specialized investigations e.g. ultrasound examination, echocardiogram and endoscopy; minor surgical procedures, simple medical procedures performed by the network doctor;
13. Alcoholism and/or drug addiction or rest cures;
14. Dental or eye refraction treatment and/or correction;
15. All expensive tonic and nutrient herbs, e.g. birds' nest, ginseng and lingzhi;
16. Pre-package commercial health supplement;
17. Any treatment within the waiting period;
18. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, or direct participation in strike, riot or civil commotion;
19. Participating in criminal acts;
20. Suicide, attempted suicide, intentional self-injury, insanity, or whilst under the influence of alcohol or drugs;
21. Prolonged or complicated by any pre-existing physical weakness, defect, disease or injury which an insured person has already sustained prior to the effective date of this policy;
22. Engaging in any kind of sport or race in a professional capacity or where the insured person would or could earn any remuneration from engaging in such sport or race;
23. Air travel except as a fare-paying passenger in a properly licensed aircraft operated by a licensed commercial air carrier;
24. HIV (Human Immunodeficiency Virus) and/or HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivative or variations thereof however caused or however named;
25. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel, or from any nuclear weapons material.
26. Any cyber act that results in any accident, disability, sickness and/or injury.

How to use the service?

1. Make appointment with the network doctor in advance;
2. A medical card will be issued and attached with the policy. For the purpose of verification and registration, please bring and present the medical card as well as the Hong Kong ID card. For any insured child under the age of 11, please bring and present the medical card and Hong Kong ID card or the birth certificate. If the insured child is not a Hong Kong resident, please bring along the copy of passport;
3. Settle the charges of any uncovered services directly to the network doctor.

Special conditions apply to out-patient medical benefit. For details, please refer to policy terms and conditions.

For any enquiries of Zurich's network doctor service, please call Zurich's nominated service provider customer service hotline from Monday to Sunday at 9:00 am to 8:00 pm by +852 2904 8368. For other general enquiries, please call Zurich's customer service hotline from Monday to Friday at 9:00a.m. to 5:30 p.m. by +852 2968 2288.

Product Limitation

We only cover the charges and/or expenses of the insured person on medically necessary basis.

"Medically necessary" means the necessity to have a treatment or medical service of the injury or sickness involved which are widely accepted by medical practitioners as effective, appropriate and essential based upon recognized standards of the health care speciality involved and which are:

1. consistent with the diagnosis and is the customary medical treatment for the condition; and
2. in accordance with standards of good and prudent medical practice; and
3. not furnished primarily for the convenience of medical practitioner or any other medical service providers; and
4. furnished at the most appropriate level of sufficient to safely and adequately treat the insured person's disability and are performed in the least costly setting required for the treatment of a covered disability; and
5. not rendered primarily for diagnostic tests, diagnostic scanning purpose, imaging examination, laboratory test or physiotherapy in the event of a confinement.

The information contained herein is for reference only and does not constitute any part of the insurance contract. For full terms and conditions and exclusions, please refer to the policy document which shall prevail in case of inconsistency. In the event of any discrepancy between the English and Chinese versions, the English version shall prevail. Zurich Insurance Company Ltd reserves the right of final approval and decision on all matters.

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