Cigna VHIS Series
信諾自願醫保系列

Premium Table 保費表
Effective from 1 July 2026 | 2026年7月1日起生效

cigna healthcare
信諾環球

Hospital / Surgical
General Insurance

Cigna VHIS Series

Flexi Plan (SMM)
Flexi Plan (Superior)

cigna healthcare

About Cigna Healthcare

Cigna Healthcare is the health benefits provider of The Cigna Group committed to improving the health and vitality of those we serve.

A global footprint with sales capacity and operations in **MORE THAN 30 MARKETS AND JURISDICTIONS**[1]

RANKED 16TH on the 2025 Fortune 500 List

More than **185 MILLION CUSTOMER RELATIONSHIPS** around the world[1]

Cigna Healthcare Hong Kong, founded in 1933, has been named a '**CARING COMPANY**' by the Hong Kong Council of Social Service.

More than **67,000 EMPLOYEES** around the world[1]

Remarks:

1. The information provided is for informational purposes only and reflects data as of 31 December 2025. It is subject to change.

Why should I consider the Cigna VHIS Series^?

Tax deduction[1]

- The maximum premium allowed for tax deduction is HK$8,000 per Insured Person per tax year.

No fear of medical expenses

- Provides comprehensive reimbursement of eligible medical expenses with an Annual Benefit Limit of up to HK$30 million per Policy Year and no Lifetime Benefit Limit.

Covering various cancer treatments

- Cancer treatment expenses are fully covered[2,3] for eligible treatments, including various common non-surgical cancer treatments[4].

Covering unknown Pre-existing Conditions

- Full cover from day 1 of the Policy Effective Period[5].

Guaranteed renewal

- Guaranteed renewal up to Age of 100, no matter how much you claim for illness(es) after the Policy has become effective the premium rate will generally increase with Age[6] and is adjustable annually.

Outpatient surgeries in hospitals and clinics

- Surgeries performed in clinics or day case units of hospitals can also be covered with no minimum duration of stay required.

Taking care of your emotional health

- Provides coverage for psychiatric treatments[7] during hospitalization.

Pre- and post-Confinement/ Day Case Procedure outpatient care

- Covers all eligible expenses Pre- and Post-Confinement/Day Case Procedure outpatient care[2,3,8].

Flexible deductible options[2]

- Features up to five deductible options, and you can also choose to lower or remove your deductibles once in a lifetime without re-underwriting[9].

Remarks:

^ This part is a high-level summary of key product features only. Please refer to the Policy Provision and Benefit Schedule for full details

1. Tax deduction is subject to the latest rules and regulation of Inland Revenue Department of Hong Kong Special Administrative Region. Tax deduction is one of the allowable deductions from assessable income and does not equate to a direct deduction from the total tax payable. For details of tax deduction, please visit the websites of the Inland Revenue Department of Hong Kong Special Administrative Region (www.ird.gov.hk/eng/) and VHIS (www.vhis.gov.hk/en/) or consult with a professional tax advisor.
2. Applicable to Cigna VHIS Series - Flexi Plan (Superior) only.
3. Subject to the Annual Benefit Limit.
4. Covers a number of non-surgical cancer treatments including chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy etc. Proton therapy, gamma knife and cyber knife are radiation treatments that are also covered as radiotherapy.
5. Refer to Important Information for details of Pre-existing Conditions.
6. The premium level is subject to change from time to time due to medical inflation.
7. Psychiatric treatments benefit is limited to Hong Kong only.
8. Refer to Policy Provision and Benefit Schedule for details of Pre- and post-Confinement/Day Case Procedure outpatient care.
9. You can choose to reduce or remove your deductibles without re-underwriting within 30 days before the renewal date for once in a lifetime at any one of the following Ages: 60, 65, 70, 75, 80 or 85.

Extra protection and value-added services ^

Cigna Healthcare provides a suite of additional protection and value-added services for all Cigna VHIS Series clients, providing comprehensive care for your body and mind.

Exclusive discount on virtual consultations and medication[1]

Receive virtual medical consultations on the app to easily obtain doctors' advice and be able to get early diagnosis before your condition worsens.

Obtain medical advice from a range of general practitioners and specialists in Hong Kong without needing to leave your home.

Medication delivery to your door and referral services for a stress-free recovery.

Cashless Medical Service[2]

Apply prior to your hospital admission and upon approval, we will pay the pre-approved amount to the medical service provider directly on your behalf. This allows you to focus on treatment and recovery without worrying about unexpected medical expenses.

Unique one to one dedicated Care Manager Service[3] 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 help you estimate the medical expenses needed and predict the circumstances you may face. You will be assigned a dedicated Care Manager through our healthcare concierge service, who will follow up on your hospital stay, surgery, or other treatment arrangements. In addition to helping you make the most of your medical coverage, you can also enjoy other care services through Cigna's healthcare concierge.

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

Find out more about how our Care Managers provide healthcare concierge service for customers in actual situations

Fast and easy online claim application

Simply login to MyCigna HK app to apply for claims anytime and anywhere.

Both hospitalization and outpatient claims can be submitted on the app no matter the size of the claim.

No Claim Bonus
Extra coverage for Flexi Plan (Superior)[4]

As a reward for your efforts in maintaining good health, if you have not made any claim for three consecutive Policy Years, you will receive a free medical check-up coupon once every three years.

Worldwide Emergency Assistance Services[5]

If you are a frequent traveller, we can provide you with free of charge worldwide emergency travel and medical services while you are on the road. In case of medical emergency, we will provide you with up to US$1,000,000 to arrange for your medical evacuation to an appropriate location for emergency medical treatment, or emergency medical repatriation to your home country/usual country of residence.

Remarks:

^ The above services are value-added services only. They are provided subject to separate terms, conditions and availability, and do not form part of the VHIS certified benefits under the policy.

1. The virtual consultation and medication delivery services are value-added services only and are subject to the terms, conditions and availability of the relevant service providers.
2. The Cashless Medical Service is a value-added service and subject to terms and conditions. To use the Cashless Medical Service, a Pre-approval Form for Cashless Medical Service ("Pre-approval Form") must be submitted to us for approval prior to the hospital admission. Cigna Healthcare requires 5 working days upon receipt of a completed form and supporting medical documents to process the application. We will confirm your application by issuing you a Letter of Guarantee relating to application for Cashless Medical Service (CMS) which sets out the conditions of the Cashless Medical Service arrangement. We have the absolute discretion to decline the Cashless Medical Service application based on information provided by the Insured Person and/or Policy Holder, if the Cashless Medical Service application does not include valid, sufficient and complete information about the Insured Person's medical condition or for credit card authorization. All Cashless Medical Service approvals provided by us are subject to the deductible level and benefit limit of the Policy. The Insured Person and/or Policy Holder are responsible for settling any amount not covered by their Policy.
3. Cigna Care Manager Service is a value-added service and subject to terms and conditions. Medical support service and value-added services arranged by Care Manager are subject to individual cases.
4. Applicable to Semi-Private Room (a single or double occupancy room, with a shared bath or shower room, in a Hospital) type only.
5. This service is a value-added service provided by an independent third-party service provider and does not form part of the contractual benefit under your policy. Cigna Healthcare reserves the right to amend or cancel the service at any time without prior notice at its absolute discretion. Cigna Healthcare is not the service provider for this service. The relevant service provider is not our agent, and vice versa. We make no representation, warranty or undertaking as to the quality and availability of the service, and do not accept any responsibility or liability for the service provided by the service provider. Under no circumstances will Cigna Healthcare be responsible or liable for acts or omissions of the service provider in the provision of the service.

Plan at a glance^

Plan type	This product is a standalone individual policy which aims to provide hospitalization benefits. It is an indemnity insurance policy without cash value.
Policy term and Premium structure	1 year and annually renewable The plan provides a protection period of 1 year and guaranteed renewable up to Age 100 of Insured Person, with payment period until the end of protection period. Premium rate will generally increase with Age and is adjustable annually, taking into account medical inflation.
Entry Age (at last birthday)	15 days to Age 80
Enrolment	No medical examination required before enrolment
Premium payment frequency	Annual / Monthly
Policy currency	HKD

Flexi Plan options

The following list is for reference only. For complete details, please refer to the Policy Provision and Benefit Schedule.

	Supplementary benefits for enhanced confidence	Premium coverage with comprehensive protection to keep you secure	
Certified Plan(s)	Cigna VHIS Series – Flexi Plan (SMM)	Cigna VHIS Series – Flexi Plan (Superior)	
Area of coverage	Worldwide[1]	For non-Emergency Treatment: Asia[1,3,4] For Emergency Treatment: Worldwide[1]	
Choice of ward class	No restriction, except for supplementary major medical benefit[2]	Standard Ward[4]	Semi-Private Room[4,5]
Annual Deductible options	✘	HK\$0 HK\$15,000 HK\$25,000	HK\$0 HK\$15,000 HK\$25,000 HK\$50,000 HK\$75,000
Annual Benefit Limit (Eligible expenses and expenses payable shall be subject to the benefit limit of each benefit item, coinsurance/deductible (if applicable) and the annual benefit limit)	HK\$1,000,000 per Policy Year	HK\$5,000,000 per Policy Year	HK\$30,000,000 per Policy Year
Lifetime Benefit Limit	Nil	Nil	
Hospitalization benefits	✓ Please refer to the Benefit Schedule for details	No dollar limit	
Surgical benefits			
Prescribed Diagnostic Imaging Tests	HK\$20,000 per Policy Year Subject to 30% coinsurance		
Prescribed Non-surgical Cancer treatments	HK\$80,000 per Policy Year		
Psychiatric treatments	HK\$30,000 per Policy Year		
Outpatient kidney dialysis	HK\$30,000 per Policy Year		
Home nursing for Confinement	\$700 per day Maximum 15 days per Policy Year	\$800 per day Maximum 90 days per Policy Year	\$1,000 per day Maximum 90 days per Policy Year
Companion Bed	\$450 per day Maximum 270 days per Policy Year	No dollar limit	
Accidental Emergency outpatient treatment	\$6,600 per Policy Year (Within 24 hours after the Accident)	No dollar limit (Within 24 hours after the Accident)	
Accidental Emergency dental treatment	\$6,600 per Policy Year (Within 2 weeks after the Accident)	No dollar limit (Within 2 weeks after the Accident)	
Enhanced Benefit: **Supplementary major medical benefit**	✓ HK\$150,000 per Policy Year Subject to 10% Coinsurance	✘ No dollar limit for the core benefits	

Remarks:

^ The above is a summary of key plan features for reference only. Please refer to the Policy Provisions and Benefit Schedule for complete and prevailing terms and conditions.

1. Psychiatric treatments benefit is limited to Hong Kong only.
2. Supplementary major medical benefit is restricted to Eligible Expenses and expenses incurred during Confinement in a Standard Ward (a room in a Hospital with more than double occupancy) only.
3. "Asia" refers to Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland 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.
4. In the situations described below, the benefit limits of the Standard Plan shall apply (the Deductible and Lifetime Benefit Limit stated above will still apply).
   - Eligible Expenses and expenses for non-Emergency Treatments incurred outside Asia;
   - Eligible Expenses and expenses incurred during Confinement in a ward class higher than the Accommodation Room Type selected (except in case of involuntary ward upgrade); and/or
   - Eligible Expenses and expenses incurred in mainland China outside of hospitals of Tier 3.
5. Within the specified area of coverage, the applicable room type shall be as follows:
   - Hong Kong, Macau and US: Semi-Private Room;
   - All other regions (excluding Hong Kong, Macau and US): Private Room.

Cigna VHIS Series - Flexi Plan (SMM)

Cigna's Flexi Plan (SMM) further extends the cover offered under the Standard Plan, and provides cover against costs associated with chronic kidney disease.

Level of ward class	No restriction, except for supplementary major medical benefit[1]
VHIS Certification Number	F00012-01-000-03
Area of coverage	Worldwide[2]
Choice of healthcare services providers	No restriction
Annual Benefit Limit (Eligible Expenses and expenses payable shall be subject to the benefit limit of each benefit item, coinsurance (if applicable) and the annual benefit limit)	HK$1,000,000 per Policy Year
Lifetime Benefit Limit	Nil

Outpatient kidney dialysis

Kidney disease is one of the most common "urban diseases". It requires fast, efficient care and typically involves ongoing dialysis treatment. What torments kidney patients the most is to receive dialysis treatment two to three times a week and have to pay the related expenses incurred, resulting in a long-term heavy financial burden. Cigna's Flexi Plan (SMM) takes away that worry by providing you with **up to HK$30,000 per year to cover the expenses of outpatient kidney dialysis treatments.**

Supplementary major medical benefit

Apart from outpatient kidney dialysis coverage, the Flexi Plan (SMM) includes **an extra cover of HK$150,000 in the form of a supplementary major medical benefit**, subject to annual limit of HK$1,000,000 and no lifetime benefit limit. In case of serious Disability in which medical expenses exceed the individual benefit limits, the supplementary major medical benefit covers the remaining expenses in a Standard Ward (a room in a Hospital with more than double occupancy).

Remarks:
1. Supplementary major medical benefit is restricted to Eligible Expenses and expenses incurred during confinement in a Standard Ward (a room in a Hospital with more than double occupancy) only.
2. Psychiatric treatments benefit is limited to Hong Kong only.

Benefit Schedule

Benefits are reimbursed on Medically Necessary and Reasonable and Customary basis, unless otherwise specified. For more information, please refer to "Important Information" of this brochure or Policy Provision.

Benefit items[1]	Benefit limit (in HKD)
(a) **Room and board**	$1,200 per day Maximum 270 days per Policy Year
(b) **Miscellaneous charges** Covers the Eligible Expenses charged on miscellaneous charges (including medical devices, additional surgical appliances) incurred in a setting of Hospital Confinement and Day Case Procedure	$14,000 per Policy Year
(c) **Attending doctor's visit fee**	$1,200 per day Maximum 270 days per Policy Year
(d) **Specialist's fee**[2]	$4,300 per Policy Year
(e) **Intensive care**	$3,500 per day Maximum 90 days per Policy Year
(f) **Surgeon's fee**[4]	Per surgery, subject to surgical category for the surgery/ procedure in the Schedule of Surgical Procedures – · Complex $70,000 · Major $35,000 · Intermediate $17,500 · Minor $8,750
(g) **Anaesthetist's fee**	35% of Surgeon's fee payable[3]
(h) **Operating theatre charges**	35% of Surgeon's fee payable[3]
(i) **Prescribed Diagnostic Imaging Tests** Covers computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined performed during Confinement or in a setting for providing Medical Services to a Day Patient	$20,000 per Policy Year Subject to 30% Coinsurance
(j) **Prescribed Non-surgical Cancer Treatments**[4] Covers chemotherapy, radiotherapy (including proton therapy, gamma knife and cyber knife), targeted therapy, immunotherapy and hormonal therapy performed during Confinement or in a setting for providing Medical Services to a Day Patient	$80,000 per Policy Year
(k) **Pre- and post-Confinement/Day Case Procedure outpatient care**[2] · Prior outpatient visits or Emergency consultation (including but not limited to consultation, western medication prescribed or diagnostic test) · Follow-up outpatient visits (including but not limited to consultation, western medication prescribed, dressings, physiotherapy, occupational therapy, speech therapy or diagnostic test)	$1,000 per visit, up to $15,000 per Policy Year · Maximum 2 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure · Maximum 10 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)

Benefit items[1]	Benefit limit (in HKD)
(l) Psychiatric treatments Covers the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist	$30,000 per Policy Year
(m) Outpatient kidney dialysis	$30,000 per Policy Year
(n) Home nursing for Confinement	$700 per day Maximum 15 days per Policy Year
(o) Companion Bed	$450 per day Maximum 270 days per Policy Year
(p) Accidental Emergency outpatient treatment Covers Eligible Expenses charged on the Emergency Treatment of an Injury in the outpatient department of a Hospital	$6,600 per Policy Year (Within 24 hours after the Accident)
(q) Accidental Emergency dental treatment Covers expenses charged by a registered dentist, a registered medical practitioner or a hospital solely for Emergency Treatment which is necessitated by an Injury to sound natural teeth (including consultation, staunch bleeding, tooth extraction, root canals and x-ray) in a legally registered dental clinic or a hospital, given to the Insured Person	$6,600 per Policy Year (Within 2 weeks after the Accident)
(r) Supplementary major medical benefit[5] Applicable to benefit item (a) – (q)	$150,000 per Policy Year Subject to 10% Coinsurance (except for Medical Services provided to Insured Person in a setting for providing Medical Services to a Day Patient where Coinsurance will not apply)

Remarks:
1. Unless otherwise specified, Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
2. 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.
3. The percentage here applies to the Surgeon's fee actually payable or the benefit limit for the Surgeon's fee according to the surgical categorisation, whichever is the lower.
4. This benefit shall be payable according to the relevant surgical category and the categorisation of such surgical procedure under the Schedule of Surgical Procedures. If a medically necessary surgical procedure performed is not included in the Schedule of Surgical Procedures, the Company may reasonably determine its surgical category.
5. For Eligible Expenses and expenses resulting from Confinement, this benefit shall only be payable for Medical Services provided in a Standard Ward (a room in a Hospital with more than double occupancy). For Confinement in a higher ward class (e.g. Semi-Private or Private), this benefit shall only be payable if the Hospital provides satisfactory evidence to show the ward upgrade was involuntary (i.e. where ward upgrade was required due to [i] Isolation, [ii] room shortage in case of an Emergency; or [iii] other reasons not involving personal preference of the Policy Holder and/or the Insured Person). For full details of the calculation of this benefit, please refer to the Policy Provision and Benefit Schedule and the Flexi Plan (SMM) Endorsement of the Terms and Benefits.

Cigna VHIS Series – Flexi Plan (Superior)

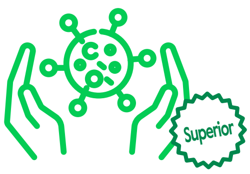
Cigna's Flexi Plan (Superior) provides the most comprehensive protection for treatment expenses, and goes further still for a totally hassle-free experience.

Accommodation Room Type	**Standard Ward**[1] A room in a Hospital with more than double occupancy	**Semi-Private Room**[1,4] A single or double occupancy room, with a shared bath or shower room in a Hospital
VHIS Certification Numbers	F00016-06-000-04 F00016-07-000-04 F00016-08-000-04	F00016-01-000-06 F00016-02-000-06 F00016-03-000-06 F00016-04-000-06 F00016-05-000-05
Area of coverage	For non-Emergency Treatment: Asia[1,2,3] For Emergency Treatment: Worldwide[2]	
Choice of healthcare service providers	Subject to restrictions[1]	
Annual Benefit Limit (Eligible Expenses and expenses payable shall be subject to the benefit limit of each benefit item, deductible (if applicable) and the annual benefit limit)	HK$5,000,000 per Policy Year	HK$30,000,000 per Policy Year
Lifetime Benefit Limit	Nil	
Deductible options	HK$0 | HK$15,000 | HK$25,000	HK$0 | HK$15,000 | HK$25,000 | HK$50,000 | HK$75,000

No sub-limits on core benefits

When receiving inpatient treatment in the selected Accommodation Room Type, the core benefits of this plan **do not have sub-limit caps on individual items** (subject to the Annual Benefit limit and policy terms), offering greater flexibility. In addition, these benefits are not limited to Hong Kong, but also covered **throughout Asian regions[3].**

Most comprehensive cancer treatment



Provides **full cover for eligible Prescribed Non-surgical Cancer Treatments** such as chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy, subject to your Annual Benefit Limit. You can receive treatment at ease without worrying about your medical budget.

Remarks:
1. In the situations described below, the benefit limits of the Standard Plan shall apply (the Deductible and Lifetime Benefit Limit stated above will still apply).
   - Eligible Expenses and expenses for non-Emergency Treatments incurred outside Asia;
   - Eligible Expenses and expenses incurred during Confinement in a ward class higher than the Accommodation Room Type selected (except in case of involuntary ward upgrade); and/or
   - Eligible Expenses and expenses incurred in mainland China outside of hospitals of Tier 3.
2. Psychiatric treatments benefit is limited to Hong Kong only.
3. "Asia" refers to Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland 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.
4. Within the specified area of coverage, the applicable room type shall be as follows:
   - Hong Kong, Macau and US: Semi-Private Room;
   - All other regions (excluding Hong Kong, Macau and US): Private Room.

Benefit Schedule

Benefits are reimbursed on Medically Necessary and Reasonable and Customary basis, unless otherwise specified. For more information, please refer to “Important Information” of this brochure or Policy Provision.

<table>
<tr><th>Accommodation Room Type</th><th>Standard Ward
A room in a Hospital with more than double occupancy</th><th>Semi-Private Room
A single or double occupancy room, with a shared bath or shower room in a Hospital</th></tr>
<tr><th>Benefit items[1,2,3]</th><th colspan="2">Benefit limit (in HKD)</th></tr>
<tr><td>(a) Room and board</td><td colspan="2" rowspan="10">No dollar limit</td></tr>
<tr><td>(b) Miscellaneous charges
Covers the Eligible Expenses charged on miscellaneous charges (including medical devices, additional surgical appliances) incurred in a setting of Hospital Confinement and Day Case Procedure</td></tr>
<tr><td>(c) Attending doctor’s visit fee</td></tr>
<tr><td>(d) Specialist’s fee[4]</td></tr>
<tr><td>(e) Intensive care</td></tr>
<tr><td>(f) Surgeon’s fee[5]</td></tr>
<tr><td>(g) Anaesthetist’s fee</td></tr>
<tr><td>(h) Operating theatre charges</td></tr>
<tr><td>(i) Prescribed Diagnostic Imaging Tests[4]
Covers computed tomography (“CT” scan), magnetic resonance imaging (“MRI” scan), positron emission tomography (“PET” scan), PET-CT combined and PET-MRI combined performed during Confinement or in a setting for providing Medical Services to a Day Patient</td></tr>
<tr><td>(j) Prescribed Non-surgical Cancer Treatments
Covers chemotherapy, radiotherapy (including proton therapy, gamma knife and cyber knife), targeted therapy, immunotherapy and hormonal therapy performed during Confinement or in a setting for providing Medical Services to a Day Patient</td></tr>
<tr><td>(k) Pre- and post-Confinement/Day Case Procedure outpatient care[4]
• Prior outpatient visits or Emergency consultation (including but not limited to consultation, western medication prescribed or diagnostic test)
• Follow-up outpatient visits (including but not limited to consultation, western medication prescribed, dressings, physiotherapy, occupational therapy, speech therapy or diagnostic test)</td><td>No dollar limit
• Maximum 1 prior outpatient visit or Emergency consultation per Confinement/ Day Case Procedure taking place more than 30 days before admission or Day Case Procedure;
• All prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 30 days before admission or Day Case Procedure; and
• All follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)</td><td>No dollar limit
• Maximum 1 prior outpatient visit or Emergency consultation per Confinement/ Day Case Procedure taking place more than 30 days before admission or Day Case Procedure;
• All prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 30 days before admission or Day Case Procedure; and
• All follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)
• All follow-up outpatient visits per Confinement during which surgical procedure categorized as major or complex in accordance with the Schedule of Surgical Procedures is performed (within 365 days after discharge from Hospital)</td></tr>
<tr><td>(l) Psychiatric treatments
Covers the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist</td><td colspan="2" rowspan="2">No dollar limit</td></tr>
<tr><td>(m) Outpatient kidney dialysis</td></tr>
</table>

Accommodation Room Type	**Standard Ward** A room in a Hospital with more than double occupancy	**Semi-Private Room** A single or double occupancy room, with a shared bath or shower room in a Hospital
(n) **Home nursing for Confinement**	$800 per day Maximum 90 days per Policy Year	$1,000 per day Maximum 90 days per Policy Year
(o) **Companion Bed**	**No dollar limit**	
(p) **Accidental Emergency outpatient treatment** Covers Eligible Expenses charged on the Emergency Treatment of an Injury in the outpatient department of a Hospital	**No dollar limit** (Within 24 hours after the Accident)	
(q) **Accidental Emergency dental treatment** Covers expenses charged by a registered dentist, a registered medical practitioner or a hospital solely for Emergency Treatment which is necessitated by an Injury to sound natural teeth (including consultation, staunch bleeding, tooth extraction, root canals and x-ray) in a legally registered dental clinic or a hospital, given to the Insured Person expenses	**No dollar limit** (Within 2 weeks after the Accident)	
(r) **Rehabilitation care**	Not applicable	$80,000 per Policy Year Maximum 60 days per Policy Year
(s) **Body check**[6]	Not applicable	Once every three consecutive years of no-claim record
Other benefits	**Benefit limit (in HKD)**	
(a) **Second claims cash allowance**[7]	$800 per day Maximum 30 days per Policy Year	$1,500 per day Maximum 30 days per Policy Year
(b) **Cash benefit for Confinement in a lower ward class of a private Hospital in Hong Kong**	Not applicable	$1,000 per day Maximum 30 days per Policy Year

Remarks:

1. Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
2. The limits specified above for benefit items (a) – (r) apply only to Eligible Expenses and expenses for non-Emergency Treatments incurred in Asia. Claims incurred outside Asia shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).
   For the avoidance of doubt, "Asia" shall mean Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland 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.
   For Eligible Expenses and expenses incurred in mainland China, the limits specified above for benefit items (a) – (r) apply only to Medical Services provided in Hospitals of Tier 3 (or in other Hospitals where approval has been granted by the Company before Medical Services are provided). Eligible Expenses and expenses incurred in mainland China outside of this setting shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).
3. For Eligible Expenses and expenses resulting from Confinement, the limits specified above for benefit items (a) to (l), (n) and (o) apply only to Medical Services provided in the Accommodation Room Type selected or a lower ward class. Claims incurred from Confinement in a higher ward class (e.g. illustrated in the table below) shall only be payable according to these limits if the Hospital provides satisfactory evidence to show the ward upgrade was involuntary (i.e. where ward upgrade was required due to [i] Isolation, [ii] room shortage in case of an Emergency, or [iii] other reasons not involving personal preference of the Policy Holder or Insured Person). Otherwise, such claims shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits, and if there is any remaining Deductible (if applicable), the benefit payable shall further be reduced by the remaining Deductible (if applicable).

Accommodation Room Type	Actual Confined room type	Adjustment
Standard Ward (a room in a Hospital with more than double occupancy)	Semi-Private Room, Private Room or any room type above Private Room including suite, VIP or deluxe room	The benefits shall be payable up to the benefit limits as stated in the benefit schedule of the Standard Plan Terms and Benefits.
Semi-Private Room (a single or double occupancy room, with a shared bath or shower room in a Hospital)	Private Room or any room type above Private Room including suite, VIP or deluxe room	
Private Room (a single occupancy room, with a private bath or shower room, in a Hospital)	Any room type above Private Room including suite, VIP or deluxe room	

4. 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.
5. This benefit shall be payable according to the relevant surgical category and the categorisation of such surgical procedure under the Schedule of Surgical Procedures. If a Medically Necessary surgical procedure performed is not included in the Schedule of Surgical Procedures, the Company may reasonably determine its surgical category.
6. Applicable to appointed medical service provider(s) by Cigna Healthcare from time to time. A check-up coupon will be available after every 3 consecutive years of no-claim record.
7. Where the Insured Person is Confined in a Hospital, and if room and board or intensive care is payable for such Confinement, provided that the Eligible Expenses charged by the Hospital on the cost of accommodation and meals or intensive care services are fully or partly paid by other insurance coverage that is not underwritten and issued by the Company, the Company shall pay this benefit for each day of such Confinement up to the applicable benefit limits and Annual Benefit Limit.

Case Illustrations

The following examples are hypothetical and for illustration purposes only. Actual coverage, claim amount and premium payable will depend on individual circumstances and the Policy Provision and Benefit Schedule.

Cigna VHIS Series – Flexi Plan (SMM): Issac's story

Policy Holder	**Issac**
Age	30 (non-smoker)
Background	Issac got married when he was 30. For him, it was essential that such an important step in life has to be backed by solid and reliable protection against risks in the future. He's aware of the many benefits of the Cigna VHIS Series, and strongly felt that he and his wife deserve above average medical protection so that they could be hassle-free while working hard to build an ideal future together.
Plan level	Cigna VHIS Series – Flexi Plan (SMM)

At Age 30

Issac got married and signed up for the Flexi Plan (SMM) when he was 30.

Suffered a mild heart attack at Age 31

A year later, Issac suffered a mild heart attack. His attending doctor said that he had to undergo an angioplasty, a procedure which hospital, surgical and post-surgical care costs could be covered by the Flexi Plan (SMM).

After recovery

Issac could continue to work hard with peace of mind to build an ideal future together with his wife.

Benefit item (HK$)

Room and board
$ 2,250

Operating theatre charges
$ 8,750

Pre- and post-Confinement/ Day Case Procedure outpatient care
$ 1,500

Surgeon's fee
$ 35,000
In excess of item limit $ 70,000

Miscellaneous charges
$ 14,000
In excess of item limit $ 50,000

Supplementary major medical benefit
($50,000 + $70,000) x 90%
$ 108,000

Net benefit from Cigna VHIS Series - Flexi Plan (SMM):

HK$147,206

= **Total claim payable** $169,500 + **Tax benefit (based on a 17% Rate^)** $2,108 ($12,402x17%[1])

Issac paid

– **Total premium paid** $12,402* ($6,126+6,276) **Coinsurance borne by Issac out-of-pocket** $12,000 ($50,000 +$70,000)x10%

Remarks:
^ The above tax-related information and any tax saving illustrations are for general reference only and do not constitute tax advice. Actual tax deductibility and tax savings depend on individual circumstances and are subject to the latest provisions of the Inland Revenue Ordinance and the Inland Revenue Department's interpretation. Customers should consult their own professional tax advisers on their personal tax positions.
* The premium levels and tax saving amounts illustrated in each case are based on the current assumptions for that example only and are subject to change from time to time (for example, due to medical inflation or changes in tax law).
1. Based on the highest progressive Salaries Tax rate of 17% under the current Hong Kong tax regime, for illustration purposes only. Actual tax rates and tax savings will depend on the taxpayer's own situation.

Cigna VHIS Series – Flexi Plan (Superior): Helena's story

Policy Holder	**Helena**
Age	40 (non-smoker)
Background	Helena works for a major banking group and benefits from the bank's group cover insurance. She had assumed that the group cover was all anyone might need. Then, her colleague fell sick on a trip to Korea. Her short hospital stay in Seoul came with a big bill and only half of the medical expenses are reimbursed by the bank's group insurance. Since Helena is a keen traveller who loves taking short breaks around Asia, she signed up for the Flexi Plan (Superior) for both herself and her 10-year-old son.
Plan level	Cigna VHIS Series – Flexi Plan (Superior)
Accommodation Room Type	Semi-Private Room
Deductible	HK$25,000 for her own policy | HK$0 for her son's policy

At Age 40

Helena signed up for the Flexi Plan (Superior) for both her 10-year-old son and herself when she was 40.

Got injured on a trip at Age 42

Two years later, when driving with her family in Okinawa, Japan, Helena's rental car skidded on some gravel and plunged down a bank. Helena suffered significant injuries that required a hospitalization in Okinawa with one-week stay in a Private Room[1].

After recovery

Helena no longer had to worry about the coverage, and could continue to travel around the world with her family.

Total medical expenses (HK$)

Hospitalization expenses incurred in Japan
$ 208,000

\-

Deductibles – covered by her group plan:
$ 25,000

Full compensation by Flexi Plan (Superior) – no itemised amount limit
$ 183,000

Net benefit from Cigna VHIS Series - Flexi Plan (Superior): HK$135,039

Total claim payable = **$183,000**

\+ **Tax benefit for both policies** (based on a 17% Rate^) **$8,107** ($47,686x17%[2])

Helena paid

Total premium paid for both policies

\- **$56,068*** ($7,686 + 8,027 + 8,416) + ($10,705 + 10,640 + 10,594)

Remarks:

^ The above tax-related information and any tax saving illustrations are for general reference only and do not constitute tax advice. Actual tax deductibility and tax savings depend on individual circumstances and are subject to the latest provisions of the Inland Revenue Ordinance and the Inland Revenue Department's interpretation. Customers should consult their own professional tax advisers on their personal tax positions.

* The premium levels and tax saving amounts illustrated in each case are based on the current assumptions for that example only and are subject to change from time to time (for example, due to medical inflation or changes in tax law).

1. Within the specified area of coverage, the applicable room type shall be as follows:
   - Hong Kong, Macau and US: Semi-Private Room;
   - All other regions (excluding Hong Kong, Macau and US): Private Room.
2. Based on the highest progressive Salaries Tax rate of 17% under the current Hong Kong tax regime, for illustration purposes only. Actual tax rates and tax savings will depend on the taxpayer's own situation.

Cigna VHIS Series – Flexi Plan (Superior): Iris's story

Policy Holder	**Iris**
Age	50 (non-smoker)
Background	Iris decided it was time to jump out of her comfort zone and start her own business at the Age of 50. But at mid-life, she was concerned that her decision meant leaving her employer's group medical plan, which she's benefited from for many years. To replace it, she wanted a plan that offered full medical cover, because she would need to devote all her energies to her business, and she didn't want to worry about limits and exclusions.
Plan level	Cigna VHIS Series – Flexi Plan (Superior)
Accommodation Room Type	Semi-Private Room
Deductible	HK$0

At Age 50

Iris signed up for the Flexi Plan (Superior) at the Age of 50.

Iris had breast cancer at Age 53

Iris was diagnosed with breast cancer at the age of 53. Under her plan, the eligible costs of her diagnostic imaging, cancer treatments and breast-reconstruction following mastectomy were covered in line with the policy terms, allowing her to receive timely and high-quality care, made Iris's recovery go well.

After recovery

Iris's new business was not compromised. After treatments and suitable rest, Iris was once again able to pick up the reins of her business and forge ahead towards achieving her business goals.

Benefit item (HK$)

Pre-Confinement

Pre- and post-Confinement/Day Case Procedure outpatient care **$ 580**

Prescribed Diagnostic Imaging Tests **$ 27,000**

1st Confinement for mastectomy

Hospitalization and surgical expenses **$ 150,000**

Prescribed Diagnostic Imaging Tests **$ 43,000**

1st Post-Confinement

Pre- and post-Confinement/ Day Case Procedure outpatient care **$ 2,160**

2nd Confinement for breast reconstruction

Hospitalization and surgical expenses **$ 200,000**

2nd Post-Confinement

Pre- and post-Confinement/ Day Case Procedure outpatient care **$ 1,740**

Total medical expenses
$ 424,480

Net benefit from Cigna VHIS Series - Flexi Plan (Superior):

HK$287,759

= **Total claim payable** **$424,480** + **Tax benefit (based on a 17% Rate^)** **$5,440** ($32,000x17%[1])

Iris paid

- **Total premium paid** **$142,161*** ($32,898+34,611+36,400+38,252)

Remarks:

^ The above tax-related information and any tax saving illustrations are for general reference only and do not constitute tax advice. Actual tax deductibility and tax savings depend on individual circumstances and are subject to the latest provisions of the Inland Revenue Ordinance and the Inland Revenue Department's interpretation. Customers should consult their own professional tax advisers on their personal tax positions.

* The premium levels and tax saving amounts illustrated in each case are based on the current assumptions for that example only and are subject to change from time to time (for example, due to medical inflation or changes in tax law).

1. Based on the highest progressive Salaries Tax rate of 17% under the current Hong Kong tax regime, for illustration purposes only. Actual tax rates and tax savings will depend on the taxpayer's own situation.

Important Information

The product information included in the brochure does not contain 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 16/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

Please download our MyCigna HK App and login for claim submission. For details of procedures by claims type, please visit the Company website www.cigna.com.hk/en/customer-service/insurance-claim-procedure.

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 in utmost good faith. 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.

Medically Necessary

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, in the prudent professional judgment of the attending Registered Medical Practitioner, can be safely and effectively provided to the Insured Person.

Pre-existing Conditions

Pre-existing Condition means any Sickness, Disease, Injury, physical, mental or medical condition or physiological degradation, including congenital condition, that has existed prior to the Policy Issuance Date or the Policy Effective Date, whichever is the earlier. You are considered to be aware of a Pre-existing Condition where –

(a) it has been diagnosed;
(b) it has manifested clear and distinct signs or symptoms; or
(c) medical advice or treatment has been sought, recommended or received.

If you are requested but fail to disclose to us upon submission of the insurance application, including any updates of and changes to the required information, that the Insured Person is suffering from a Pre-existing Condition of which the Policy Holder or the Insured

Person is aware or should have reasonably been aware of at the time of submission of Application, the Company has the right to declare the relevant insurance policy void, demand repayment of any benefits paid and/or refuse to provide coverage under its terms and benefits. In such event, the Company shall refund the premium.

Premium

1. Premium Level

The premium corresponding to the plan you select is determined based on the Age and smoking habit of the Insured Person at the Policy Effective Date.

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 30 days 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 is 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.

Duplicated policy

Each person can only be covered under one single "Cigna VHIS Series" policy. The series includes "Cigna VHIS Series – Standard Plan", "Cigna VHIS Series – Flexi Plan(SMM)", "Cigna VHIS Series – Flexi Plan (Superior)" and any other insurance policies that fall under the "Cigna VHIS Series" as defined and issued by the Company from time to time.

Existing holders of "Cigna HealthFirst Medical Plan Series" policies should contact the Company to discuss their options with regard to policy migration.

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

This Policy shall be effective for an initial period of twelve (12) months and shall thereafter be automatically renewed for successive periods of twelve (12) months, subject to payment of the Premium at each renewal, until the Insured Person reaches the Age of one hundred (100). The Company shall have the right to revise the Terms and Benefits of the Policy and/or the Premium upon each renewal.

Termination

1. The Policy will be automatically terminated when one of the following happens:
   - The Insured Person passes away;
   - Any premium is not paid at the end of the grace period;
   - The Policy is terminated or not renewed by the Policy Holder; or
   - The Company has ceased to have the requisite authorization under the Insurance Ordinance to write or continue to write this Policy.

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.

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.

Key Exclusions

The following list is for reference only and it is not a full list of exclusions. Please refer to the Policy Provision and Benefits Schedule for the complete list and details of exclusions.

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

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, immunisation or health supplements.
7. Dental treatment and oral and maxillofacial procedures performed by a dentist except for Emergency Treatment and surgery during Confinement arising from an Accident or to the extent covered by the Accidental Emergency dental treatment benefit. Follow up dental treatment or oral surgery after discharge from Hospital shall not be covered.
8. Maternity conditions and its complications.
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 recognised authority, in the locality where the treatment, procedure, test or service is received.
12. Congenital Condition(s) which have manifested or been diagnosed before the Insured Person attained the Age of eight (8) years.
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.

Remarks:
"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。

Cigna Worldwide General Insurance Company Limited

Tel: (852) 2560 1990
www.cigna.com.hk

The above insurance plan is underwritten by Cigna Worldwide General Insurance Company Limited ("Cigna Healthcare"), 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 Healthcare 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 Provision and Benefit Schedule. If there is any conflict between the Policy Provision and Benefit Schedule and this brochure, the Policy Provision and Benefit Schedule 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 Healthcare reserves the right to change any of the details in this brochure. In case of any disputes regarding the content of this brochure, Cigna Healthcare's decision shall be final.

CA/Brochure/0033/0726_E_GI

Directory 目錄

Cigna VHIS Series - Standard Plan - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 標準計劃 – 標準保費表（2026年7月1日生效）

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series – Standard Plan 信諾自願醫保系列 – 標準計劃					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	3,508	305	**50**	5,722	498
1	3,508	305	**51**	5,974	520
2	3,508	305	**52**	6,235	542
3	3,508	305	**53**	6,510	566
4	3,508	305	**54**	6,797	591
5	2,339	203	**55**	7,228	629
6	2,339	203	**56**	7,562	658
7	2,339	203	**57**	7,907	688
8	2,339	203	**58**	8,271	720
9	2,339	203	**59**	8,652	753
10	2,339	203	**60**	9,131	794
11	2,339	203	**61**	9,570	833
12	2,339	203	**62**	10,030	873
13	2,339	203	**63**	10,510	914
14	2,339	203	**64**	11,016	958
15	2,339	203	**65**	11,544	1,004
16	2,339	203	**66**	12,122	1,055
17	2,339	203	**67**	12,728	1,107
18	2,480	216	**68**	13,364	1,163
19	2,480	216	**69**	14,033	1,221
20	2,485	216	**70**	14,733	1,282
21	2,513	219	**71**	15,499	1,348
22	2,540	221	**72**	16,304	1,418
23	2,609	227	**73**	17,153	1,492
24	2,674	233	**74**	18,044	1,570
25	2,738	238	**75**	18,983	1,652
26	2,805	244	**76**	20,009	1,741
27	2,875	250	**77**	21,089	1,835
28	2,944	256	**78**	22,227	1,934
29	3,016	262	**79**	23,428	2,038
30	3,089	269	**80**	24,693	2,148
31	3,164	275	**81***	24,940	2,170
32	3,242	282	**82***	25,190	2,192
33	3,320	289	**83***	25,440	2,213
34	3,402	296	**84***	25,694	2,235
35	3,443	300	**85***	25,951	2,258
36	3,456	301	**86***	26,212	2,280
37	3,498	304	**87***	26,473	2,303
38	3,582	312	**88***	26,739	2,326
39	3,651	318	**89***	27,007	2,350
40	3,846	335	**90***	27,276	2,373
41	3,986	347	**91***	27,549	2,397
42	4,132	359	**92***	27,823	2,421
43	4,282	373	**93***	28,102	2,445
44	4,439	386	**94***	28,381	2,469
45	4,689	408	**95***	28,666	2,494
46	4,862	423	**96***	28,952	2,519
47	5,041	439	**97***	29,241	2,544
48	5,225	455	**98***	29,534	2,569
49	5,416	471	**99***	29,829	2,595

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (SMM) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（附加保障）– 標準保費表（2026年7月1日生效）

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series – Flexi Plan (SMM) 信諾自願醫保系列 – 靈活計劃（附加保障）					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	6,721	585	50	11,298	983
1	6,721	585	51	11,796	1,026
2	6,721	585	52	12,314	1,071
3	6,721	585	53	12,856	1,118
4	6,721	585	54	13,422	1,168
5	4,480	390	55	14,335	1,247
6	4,480	390	56	14,996	1,305
7	4,480	390	57	15,685	1,365
8	4,480	390	58	16,406	1,427
9	4,480	390	59	17,160	1,493
10	4,480	390	60	18,193	1,583
11	4,480	390	61	19,065	1,659
12	4,480	390	62	19,981	1,738
13	4,480	390	63	20,940	1,822
14	4,480	390	64	21,945	1,909
15	4,480	390	65	22,999	2,001
16	4,480	390	66	24,148	2,101
17	4,480	390	67	25,357	2,206
18	4,760	414	68	26,624	2,316
19	4,760	414	69	27,954	2,432
20	4,847	422	70	29,351	2,554
21	4,909	427	71	30,878	2,686
22	4,976	433	72	32,483	2,826
23	5,105	444	73	34,172	2,973
24	5,230	455	74	35,949	3,128
25	5,359	466	75	37,818	3,290
26	5,488	477	76	39,860	3,468
27	5,623	489	77	42,014	3,655
28	5,759	501	78	44,282	3,853
29	5,899	513	79	46,672	4,060
30	6,126	533	80	49,192	4,280
31	6,276	546	81*	49,682	4,322
32	6,430	559	82*	50,182	4,366
33	6,586	573	83*	50,683	4,409
34	6,746	587	84*	51,188	4,453
35	6,873	598	85*	51,701	4,498
36	6,893	600	86*	52,218	4,543
37	6,977	607	87*	52,739	4,588
38	7,154	622	88*	53,267	4,634
39	7,308	636	89*	53,800	4,681
40	7,671	667	90*	54,337	4,727
41	7,950	692	91*	54,881	4,775
42	8,241	717	92*	55,430	4,822
43	8,543	743	93*	55,986	4,871
44	8,854	770	94*	56,545	4,919
45	9,267	806	95*	57,111	4,969
46	9,605	836	96*	57,684	5,019
47	9,956	866	97*	58,259	5,069
48	10,320	898	98*	58,840	5,119
49	10,698	931	99*	59,429	5,170

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（優越）– 標準保費表（2026年7月1日生效）

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior)
信諾自願醫保系列 – 靈活計劃（優越）

Accommodation Room Type: Standard Ward
病房類別：普通病房

Age 年齡	Deductible Option 自付費選項 HK$0 Annual 年繳	HK$0 Monthly 月繳	HK$15,000 Annual 年繳	HK$15,000 Monthly 月繳	HK$25,000 Annual 年繳	HK$25,000 Monthly 月繳	Age 年齡	HK$0 Annual 年繳	HK$0 Monthly 月繳	HK$15,000 Annual 年繳	HK$15,000 Monthly 月繳	HK$25,000 Annual 年繳	HK$25,000 Monthly 月繳
0	12,365	1,076	6,457	562	5,506	479	50	21,830	1,899	10,475	911	9,119	793
1	11,151	970	5,816	506	4,958	431	51	22,724	1,977	11,743	1,022	9,797	852
2	9,936	864	5,177	450	4,410	384	52	23,669	2,059	12,190	1,061	10,170	885
3	9,857	858	5,135	447	4,379	381	53	24,793	2,157	12,654	1,101	10,557	918
4	9,780	851	5,092	443	4,348	378	54	25,985	2,261	13,148	1,144	10,970	954
5	9,519	828	4,936	429	4,220	367	55	27,229	2,369	13,801	1,201	11,517	1,002
6	9,260	806	4,779	416	4,091	356	56	28,798	2,505	14,631	1,273	12,214	1,063
7	8,999	783	4,623	402	3,962	345	57	30,562	2,659	15,491	1,348	12,935	1,125
8	8,763	762	4,493	391	3,853	335	58	32,616	2,838	16,474	1,433	13,760	1,197
9	8,529	742	4,365	380	3,743	326	59	34,839	3,031	17,678	1,538	14,771	1,285
10	8,292	721	4,237	369	3,634	316	60	37,103	3,228	18,926	1,647	15,819	1,376
11	8,162	710	4,109	357	3,532	307	61	39,550	3,441	20,253	1,762	17,581	1,530
12	8,152	709	3,981	346	3,428	298	62	42,055	3,659	21,609	1,880	18,765	1,633
13	8,151	709	3,871	337	3,328	290	63	44,747	3,893	23,278	2,025	20,220	1,759
14	8,049	700	3,762	327	3,228	281	64	47,563	4,138	24,863	2,163	21,598	1,879
15	7,941	691	3,652	318	3,130	272	65	50,480	4,392	26,463	2,302	22,993	2,000
16	7,831	681	3,696	322	3,167	276	66	53,468	4,652	28,100	2,445	24,420	2,125
17	7,764	675	3,729	324	3,196	278	67	56,460	4,912	29,738	2,587	25,847	2,249
18	7,770	676	3,760	327	3,220	280	68	59,534	5,179	31,204	2,715	27,120	2,359
19	7,821	680	3,916	341	3,354	292	69	62,346	5,424	32,736	2,848	28,453	2,475
20	7,933	690	3,951	344	3,384	294	70	65,118	5,665	34,201	2,975	29,729	2,586
21	8,105	705	3,989	347	3,414	297	71	67,856	5,903	35,761	3,111	31,084	2,704
22	8,310	723	4,099	357	3,508	305	72	70,594	6,142	37,401	3,254	32,510	2,828
23	8,526	742	4,223	367	3,614	314	73	73,814	6,422	39,310	3,420	34,155	2,971
24	8,771	763	4,350	378	3,718	323	74	77,388	6,733	41,526	3,613	36,071	3,138
25	9,084	790	4,479	390	3,832	333	75	81,042	7,051	43,905	3,820	38,128	3,317
26	9,432	821	4,612	401	3,965	345	76	84,790	7,377	46,247	4,023	40,156	3,494
27	9,804	853	4,746	413	4,076	355	77	88,657	7,713	48,599	4,228	42,191	3,671
28	10,154	883	4,881	425	4,230	368	78	92,201	8,021	50,926	4,431	44,218	3,847
29	10,503	914	5,020	437	4,330	377	79	95,835	8,338	53,359	4,642	46,344	4,032
30	10,859	945	5,160	449	4,403	383	80	99,584	8,664	55,908	4,864	48,566	4,225
31	11,218	976	5,306	462	4,547	396	81*	103,457	9,001	58,099	5,055	50,475	4,391
32	11,508	1,001	5,453	474	4,753	414	82*	107,402	9,344	59,595	5,185	51,772	4,504
33	11,839	1,030	5,604	488	4,961	432	83*	111,457	9,697	60,788	5,289	52,804	4,594
34	12,203	1,062	5,759	501	5,091	443	84*	115,543	10,052	61,795	5,376	53,670	4,669
35	12,494	1,087	5,916	515	5,168	450	85*	118,942	10,348	62,804	5,464	54,540	4,745
36	12,797	1,113	6,078	529	5,363	467	86*	122,195	10,631	63,872	5,557	55,469	4,826
37	13,214	1,150	6,242	543	5,561	484	87*	125,577	10,925	64,920	5,648	56,383	4,905
38	13,656	1,188	6,414	558	5,755	501	88*	129,092	11,231	66,014	5,743	57,333	4,988
39	14,105	1,227	6,590	573	5,943	517	89*	132,836	11,557	67,138	5,841	58,314	5,073
40	14,672	1,276	6,794	591	6,096	530	90*	137,512	11,964	69,322	6,031	60,224	5,239
41	15,299	1,331	7,067	615	6,335	551	91*	141,816	12,338	72,183	6,280	62,730	5,458
42	15,848	1,379	7,373	641	6,561	571	92*	147,371	12,821	75,167	6,540	65,345	5,685
43	16,444	1,431	7,705	670	6,822	594	93*	153,294	13,337	78,281	6,810	68,074	5,922
44	17,061	1,484	8,049	700	7,080	616	94*	159,467	13,874	81,529	7,093	70,921	6,170
45	17,696	1,540	8,407	731	7,316	636	95*	165,898	14,433	84,919	7,388	73,891	6,429
46	18,451	1,605	8,779	764	7,813	680	96*	172,598	15,016	88,457	7,696	76,992	6,698
47	19,143	1,665	9,164	797	8,190	713	97*	179,583	15,624	92,147	8,017	80,228	6,980
48	20,078	1,747	9,586	834	8,599	748	98*	186,914	16,262	95,998	8,352	83,605	7,274
49	20,980	1,825	10,022	872	8,944	778	99*	195,058	16,970	100,056	8,705	87,154	7,582

* These rates apply only to Policy Renewal. 此保費只供續保之用。
1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（優越）– 標準保費表（2026年7月1日生效）

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列 – 靈活計劃（優越）										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK$0		HK$15,000		HK$25,000		HK$50,000		HK$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
0	16,313	1,419	8,515	741	7,392	643	6,005	522	5,071	441
1	14,723	1,281	7,688	669	6,656	579	5,406	470	4,825	420
2	13,133	1,143	6,879	598	5,921	515	4,802	418	4,338	377
3	12,980	1,129	6,775	589	5,879	511	4,772	415	4,317	376
4	12,826	1,116	6,725	585	5,836	508	4,743	413	4,296	374
5	12,399	1,079	6,522	567	5,662	493	4,605	401	4,176	363
6	11,973	1,042	6,320	550	5,487	477	4,467	389	3,781	329
7	11,546	1,005	6,136	534	5,314	462	4,329	377	3,672	319
8	11,214	976	5,978	520	5,166	449	4,208	366	3,576	311
9	10,885	947	5,819	506	5,017	436	4,089	356	3,483	303
10	10,705	931	5,662	493	4,871	424	4,070	354	3,387	295
11	10,640	926	5,502	479	4,723	411	4,064	354	3,292	286
12	10,594	922	5,347	465	4,576	398	4,015	349	3,198	278
13	10,296	896	5,189	451	4,449	387	3,899	339	3,105	270
14	10,018	872	5,033	438	4,324	376	3,780	329	3,010	262
15	10,178	885	4,938	430	4,199	365	3,667	319	3,130	272
16	10,442	908	4,938	430	4,251	370	3,716	323	3,165	275
17	10,705	931	4,971	432	4,292	373	3,749	326	3,191	278
18	11,033	960	4,998	435	4,327	376	3,779	329	3,209	279
19	11,328	986	5,201	452	4,509	392	3,934	342	3,336	290
20	11,628	1,012	5,266	458	4,563	397	4,109	357	3,481	303
21	11,935	1,038	5,330	464	4,618	402	4,223	367	3,569	311
22	12,366	1,076	5,562	484	4,739	412	4,336	377	3,666	319
23	12,859	1,119	5,710	497	4,885	425	4,464	388	3,769	328
24	13,366	1,163	6,304	548	5,238	456	4,597	400	3,833	333
25	13,761	1,197	6,563	571	5,358	466	4,754	414	3,889	338
26	14,408	1,253	6,722	585	5,590	486	4,891	426	3,932	342
27	15,241	1,326	6,880	599	5,705	496	5,031	438	3,972	346
28	15,705	1,366	7,029	612	5,825	507	5,167	450	4,014	349
29	15,926	1,386	7,184	625	6,004	522	5,309	462	4,053	353
30	16,150	1,405	7,390	643	6,039	525	5,528	481	4,109	357
31	16,574	1,442	7,517	654	6,150	535	5,680	494	4,356	379
32	17,005	1,479	7,665	667	6,300	548	5,835	508	4,637	403
33	17,444	1,518	7,817	680	6,523	568	5,989	521	4,937	430
34	17,894	1,557	8,040	699	6,641	578	6,148	535	5,136	447
35	18,349	1,596	8,194	713	6,844	595	6,310	549	5,274	459
36	19,080	1,660	8,423	733	7,082	616	6,475	563	5,413	471
37	19,653	1,710	8,656	753	7,105	618	6,648	578	5,558	484
38	20,166	1,754	8,901	774	7,299	635	6,824	594	5,710	497
39	20,358	1,771	9,217	802	7,502	653	7,006	610	5,866	510
40	20,648	1,796	9,522	828	7,686	669	7,270	632	6,009	523
41	21,779	1,895	10,129	881	8,027	698	7,589	660	6,267	545
42	22,657	1,971	10,418	906	8,416	732	7,904	688	6,556	570
43	23,634	2,056	10,950	953	8,825	768	8,239	717	6,867	597
44	24,638	2,144	11,374	990	9,254	805	8,615	750	7,191	626
45	25,720	2,238	12,000	1,044	9,769	850	9,037	786	7,577	659
46	27,161	2,363	12,620	1,098	10,198	887	9,487	825	7,920	689
47	28,292	2,461	13,330	1,160	10,669	928	9,888	860	8,271	720
48	29,767	2,590	13,956	1,214	11,175	972	10,310	897	8,654	753
49	31,301	2,723	14,608	1,271	11,698	1,018	10,732	934	9,046	787

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2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（優越）– 標準保費表（2026年7月1日生效）

Premium for Non Smoker 非吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列 – 靈活計劃（優越）										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK$0		HK$15,000		HK$25,000		HK$50,000		HK$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
50	32,898	2,862	15,128	1,316	12,413	1,080	11,162	971	9,542	830
51	34,611	3,011	16,199	1,409	13,033	1,134	12,100	1,053	10,022	872
52	36,400	3,167	16,709	1,454	13,675	1,190	12,599	1,096	10,521	915
53	38,252	3,328	17,576	1,529	14,347	1,248	13,242	1,152	11,041	961
54	40,005	3,480	18,353	1,597	15,044	1,309	14,003	1,218	11,586	1,008
55	41,635	3,622	19,403	1,688	16,009	1,393	14,803	1,288	12,406	1,079
56	43,945	3,823	20,310	1,767	16,768	1,459	15,657	1,362	13,013	1,132
57	46,466	4,043	21,319	1,855	17,566	1,528	16,560	1,441	13,648	1,187
58	48,779	4,244	22,569	1,964	18,441	1,604	17,544	1,526	14,592	1,270
59	51,340	4,467	24,159	2,102	19,353	1,684	18,559	1,615	15,608	1,358
60	53,933	4,692	25,522	2,220	20,911	1,819	19,863	1,728	16,625	1,446
61	56,537	4,919	27,452	2,388	24,810	2,158	21,496	1,870	17,641	1,535
62	59,248	5,155	29,836	2,596	26,758	2,328	23,001	2,001	18,657	1,623
63	64,848	5,642	32,970	2,868	28,640	2,492	24,765	2,155	20,098	1,749
64	70,886	6,167	35,953	3,128	30,088	2,618	26,016	2,263	21,540	1,874
65	74,431	6,475	38,901	3,384	32,576	2,834	28,167	2,451	22,981	1,999
66	78,120	6,796	40,840	3,553	34,202	2,976	29,570	2,573	24,422	2,125
67	81,957	7,130	42,864	3,729	35,897	3,123	31,040	2,700	25,864	2,250
68	86,058	7,487	44,980	3,913	37,671	3,277	32,583	2,835	27,304	2,375
69	90,329	7,859	47,171	4,104	39,523	3,439	34,196	2,975	28,658	2,493
70	94,772	8,245	48,732	4,240	41,459	3,607	35,882	3,122	30,076	2,617
71	98,165	8,540	51,912	4,516	43,481	3,783	37,640	3,275	31,557	2,745
72	101,653	8,844	54,434	4,736	45,596	3,967	39,479	3,435	33,106	2,880
73	106,085	9,229	57,356	4,990	48,022	4,178	41,597	3,619	34,854	3,032
74	110,611	9,623	60,396	5,254	50,421	4,387	43,801	3,811	36,680	3,191
75	115,239	10,026	63,563	5,530	53,049	4,615	46,095	4,010	38,584	3,357
76	118,525	10,312	66,858	5,817	55,785	4,853	48,487	4,218	40,569	3,530
77	121,844	10,600	70,292	6,115	58,636	5,101	50,977	4,435	42,638	3,710
78	124,455	10,828	73,634	6,406	61,439	5,345	53,407	4,646	44,686	3,888
79	127,102	11,058	76,040	6,615	64,367	5,600	55,948	4,867	46,826	4,074
80	129,779	11,291	77,551	6,747	67,061	5,834	58,284	5,071	48,522	4,221
81*	133,205	11,589	79,564	6,922	69,560	6,052	60,454	5,259	49,774	4,330
82*	137,265	11,942	82,003	7,134	72,142	6,276	62,696	5,455	51,300	4,463
83*	141,187	12,283	83,378	7,254	74,493	6,481	64,334	5,597	52,139	4,536
84*	146,159	12,716	85,180	7,411	76,102	6,621	65,734	5,719	53,254	4,633
85*	151,279	13,161	86,409	7,518	77,386	6,733	67,016	5,830	53,995	4,698
86*	156,182	13,588	87,760	7,635	78,673	6,845	68,203	5,934	54,864	4,773
87*	161,243	14,028	89,102	7,752	79,962	6,957	69,402	6,038	55,727	4,848
88*	166,467	14,483	91,246	7,938	81,609	7,100	70,606	6,143	56,678	4,931
89*	171,861	14,952	94,389	8,212	83,727	7,284	71,819	6,248	57,718	5,021
90*	177,431	15,436	97,640	8,495	85,999	7,482	73,040	6,354	59,340	5,163
91*	183,181	15,937	101,008	8,788	88,270	7,679	74,267	6,461	61,442	5,345
92*	189,116	16,453	104,495	9,091	90,759	7,896	75,884	6,602	63,617	5,535
93*	195,245	16,986	108,105	9,405	93,919	8,171	78,526	6,832	65,869	5,731
94*	201,575	17,537	111,842	9,730	97,194	8,456	81,261	7,070	68,201	5,933
95*	208,109	18,105	115,710	10,067	100,581	8,751	84,094	7,316	70,614	6,143
96*	214,855	18,692	119,716	10,415	104,090	9,056	87,024	7,571	73,113	6,361
97*	221,821	19,298	123,861	10,776	107,722	9,372	90,056	7,835	75,699	6,586
98*	229,011	19,924	128,153	11,149	111,481	9,699	93,195	8,108	78,377	6,819
99*	236,857	20,607	132,672	11,542	115,425	10,042	96,507	8,396	81,193	7,064

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Standard Plan - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 標準計劃 – 標準保費表（2026年7月1日生效）

Premium for Smoker 吸煙人士保費

Cigna VHIS Series – Standard Plan 信諾自願醫保系列 – 標準計劃					
Age 年齡	**Annual 年繳**	**Monthly 月繳**	**Age 年齡**	**Annual 年繳**	**Monthly 月繳**
0	–	–	**50**	6,657	579
1	–	–	**51**	6,949	605
2	–	–	**52**	7,255	631
3	–	–	**53**	7,574	659
4	–	–	**54**	7,908	688
5	–	–	**55**	8,407	731
6	–	–	**56**	8,793	765
7	–	–	**57**	9,198	800
8	–	–	**58**	9,620	837
9	–	–	**59**	10,062	875
10	–	–	**60**	10,617	924
11	–	–	**61**	11,128	968
12	–	–	**62**	11,663	1,015
13	–	–	**63**	12,222	1,063
14	–	–	**64**	12,808	1,114
15	–	–	**65**	13,422	1,168
16	–	–	**66**	14,095	1,226
17	–	–	**67**	14,799	1,288
18	2,891	252	**68**	15,538	1,352
19	2,891	252	**69**	16,314	1,419
20	2,897	252	**70**	17,132	1,490
21	2,929	255	**71**	18,021	1,568
22	2,961	258	**72**	18,958	1,649
23	3,043	265	**73**	19,945	1,735
24	3,118	271	**74**	20,982	1,825
25	3,194	278	**75**	22,074	1,920
26	3,270	284	**76**	23,264	2,024
27	3,352	292	**77**	24,520	2,133
28	3,433	299	**78**	25,845	2,249
29	3,515	306	**79**	27,243	2,370
30	3,602	313	**80**	28,710	2,498
31	3,688	321	**81***	28,998	2,523
32	3,778	329	**82***	29,287	2,548
33	3,872	337	**83***	29,581	2,574
34	3,964	345	**84***	29,875	2,599
35	4,012	349	**85***	30,176	2,625
36	4,029	351	**86***	30,476	2,651
37	4,079	355	**87***	30,782	2,678
38	4,176	363	**88***	31,091	2,705
39	4,257	370	**89***	31,403	2,732
40	4,480	390	**90***	31,717	2,759
41	4,643	404	**91***	32,032	2,787
42	4,813	419	**92***	32,351	2,815
43	4,989	434	**93***	32,675	2,843
44	5,171	450	**94***	33,000	2,871
45	5,459	475	**95***	33,329	2,900
46	5,662	493	**96***	33,663	2,929
47	5,868	511	**97***	34,003	2,958
48	6,082	529	**98***	34,342	2,988
49	6,307	549	**99***	34,684	3,018

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (SMM) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（附加保障）– 標準保費表（2026年7月1日生效）

Premium for Smoker 吸煙人士保費

Cigna VHIS Series – Flexi Plan (SMM) 信諾自願醫保系列 – 靈活計劃（附加保障）					
Age 年齡	Annual 年繳	Monthly 月繳	Age 年齡	Annual 年繳	Monthly 月繳
0	–	–	50	13,145	1,144
1	–	–	51	13,722	1,194
2	–	–	52	14,326	1,246
3	–	–	53	14,953	1,301
4	–	–	54	15,613	1,358
5	–	–	55	16,665	1,450
6	–	–	56	17,434	1,517
7	–	–	57	18,234	1,586
8	–	–	58	19,075	1,660
9	–	–	59	19,951	1,736
10	–	–	60	21,144	1,840
11	–	–	61	22,158	1,928
12	–	–	62	23,222	2,020
13	–	–	63	24,336	2,117
14	–	–	64	25,503	2,219
15	–	–	65	26,726	2,325
16	–	–	66	28,063	2,441
17	–	–	67	29,469	2,564
18	5,547	483	68	30,941	2,692
19	5,547	483	69	32,491	2,827
20	5,647	491	70	34,111	2,968
21	5,719	498	71	35,887	3,122
22	5,798	504	72	37,752	3,284
23	5,948	517	73	39,715	3,455
24	6,094	530	74	41,781	3,635
25	6,242	543	75	43,952	3,824
26	6,394	556	76	46,327	4,030
27	6,552	570	77	48,825	4,248
28	6,709	584	78	51,463	4,477
29	6,873	598	79	54,243	4,719
30	7,134	621	80	57,170	4,974
31	7,310	636	81*	57,744	5,024
32	7,487	651	82*	58,319	5,074
33	7,672	667	83*	58,904	5,125
34	7,857	684	84*	59,491	5,176
35	8,005	696	85*	60,088	5,228
36	8,028	698	86*	60,687	5,280
37	8,128	707	87*	61,294	5,333
38	8,331	725	88*	61,908	5,386
39	8,511	740	89*	62,528	5,440
40	8,930	777	90*	63,151	5,494
41	9,258	805	91*	63,784	5,549
42	9,594	835	92*	64,421	5,605
43	9,947	865	93*	65,066	5,661
44	10,311	897	94*	65,716	5,717
45	10,786	938	95*	66,374	5,775
46	11,180	973	96*	67,037	5,832
47	11,588	1,008	97*	67,711	5,891
48	12,012	1,045	98*	68,385	5,949
49	12,451	1,083	99*	69,069	6,009

* These rates apply only to Policy Renewal. 此保費只供續保之用。

1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（優越）– 標準保費表（2026年7月1日生效）

Premium for Smoker 吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列 – 靈活計劃（優越）													
Accommodation Room Type: Standard Ward 病房類別：普通病房													
Age 年齡	Deductible Option 自付費選項												
	HK$0		HK$15,000		HK$25,000		Age 年齡	HK$0		HK$15,000		HK$25,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳		Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
0	–	–	–	–	–	–	50	26,196	2,279	12,570	1,094	10,942	952
1	–	–	–	–	–	–	51	27,269	2,372	14,091	1,226	11,757	1,023
2	–	–	–	–	–	–	52	28,403	2,471	14,628	1,273	12,204	1,062
3	–	–	–	–	–	–	53	29,751	2,588	15,185	1,321	12,669	1,102
4	–	–	–	–	–	–	54	31,182	2,713	15,776	1,373	13,163	1,145
5	–	–	–	–	–	–	55	32,674	2,843	16,561	1,441	13,819	1,202
6	–	–	–	–	–	–	56	34,556	3,006	17,558	1,528	14,657	1,275
7	–	–	–	–	–	–	57	36,675	3,191	18,589	1,617	15,522	1,350
8	–	–	–	–	–	–	58	39,140	3,405	19,769	1,720	16,512	1,437
9	–	–	–	–	–	–	59	41,807	3,637	21,213	1,846	17,724	1,542
10	–	–	–	–	–	–	60	44,525	3,874	22,712	1,976	18,983	1,652
11	–	–	–	–	–	–	61	47,460	4,129	24,303	2,114	21,098	1,836
12	–	–	–	–	–	–	62	50,466	4,391	25,930	2,256	22,518	1,959
13	–	–	–	–	–	–	63	53,698	4,672	27,933	2,430	24,265	2,111
14	–	–	–	–	–	–	64	57,075	4,966	29,836	2,596	25,919	2,255
15	–	–	–	–	–	–	65	60,576	5,270	31,755	2,763	27,591	2,400
16	–	–	–	–	–	–	66	64,160	5,582	33,719	2,934	29,304	2,549
17	–	–	–	–	–	–	67	67,753	5,895	35,686	3,105	31,017	2,698
18	9,325	811	4,513	393	3,865	336	68	71,441	6,215	37,445	3,258	32,545	2,831
19	9,386	817	4,698	409	4,024	350	69	74,814	6,509	39,283	3,418	34,143	2,970
20	9,520	828	4,743	413	4,061	353	70	78,143	6,798	41,041	3,571	35,675	3,104
21	9,727	846	4,786	416	4,098	357	71	81,427	7,084	42,913	3,733	37,301	3,245
22	9,972	868	4,919	428	4,210	366	72	84,713	7,370	44,882	3,905	39,011	3,394
23	10,231	890	5,067	441	4,338	377	73	88,577	7,706	47,171	4,104	40,987	3,566
24	10,525	916	5,220	454	4,463	388	74	92,866	8,079	49,831	4,335	43,286	3,766
25	10,900	948	5,374	468	4,600	400	75	97,250	8,461	52,686	4,584	45,755	3,981
26	11,321	985	5,534	481	4,759	414	76	101,749	8,852	55,496	4,828	48,187	4,192
27	11,765	1,024	5,696	496	4,891	426	77	106,390	9,256	58,319	5,074	50,630	4,405
28	12,187	1,060	5,857	510	5,076	442	78	110,642	9,626	61,111	5,317	53,062	4,616
29	12,602	1,096	6,025	524	5,197	452	79	115,001	10,005	64,032	5,571	55,612	4,838
30	13,030	1,134	6,192	539	5,284	460	80	119,501	10,397	67,089	5,837	58,279	5,070
31	13,462	1,171	6,366	554	5,457	475	81*	124,148	10,801	69,719	6,066	60,569	5,270
32	13,810	1,201	6,543	569	5,705	496	82*	128,882	11,213	71,515	6,222	62,126	5,405
33	14,206	1,236	6,724	585	5,953	518	83*	133,749	11,636	72,946	6,346	63,364	5,513
34	14,644	1,274	6,911	601	6,109	531	84*	138,651	12,063	74,154	6,451	64,405	5,603
35	14,994	1,304	7,100	618	6,200	539	85*	142,731	12,418	75,364	6,557	65,449	5,694
36	15,357	1,336	7,293	634	6,436	560	86*	146,635	12,757	76,646	6,668	66,563	5,791
37	15,857	1,380	7,490	652	6,673	581	87*	150,693	13,110	77,903	6,778	67,659	5,886
38	16,386	1,426	7,697	670	6,907	601	88*	154,911	13,477	79,217	6,892	68,800	5,986
39	16,927	1,473	7,908	688	7,132	620	89*	159,403	13,868	80,565	7,009	69,977	6,088
40	17,606	1,532	8,153	709	7,316	636	90*	165,014	14,356	83,187	7,237	72,269	6,287
41	18,358	1,597	8,480	738	7,602	661	91*	170,181	14,806	86,619	7,536	75,276	6,549
42	19,018	1,655	8,848	770	7,872	685	92*	176,844	15,385	90,201	7,847	78,413	6,822
43	19,733	1,717	9,246	804	8,186	712	93*	183,953	16,004	93,937	8,173	81,688	7,107
44	20,474	1,781	9,659	840	8,496	739	94*	191,360	16,648	97,836	8,512	85,106	7,404
45	21,236	1,848	10,088	878	8,778	764	95*	199,078	17,320	101,904	8,866	88,670	7,714
46	22,140	1,926	10,535	917	9,374	816	96*	207,119	18,019	106,148	9,235	92,390	8,038
47	22,971	1,998	10,997	957	9,828	855	97*	215,501	18,749	110,577	9,620	96,273	8,376
48	24,094	2,096	11,504	1,001	10,320	898	98*	224,296	19,514	115,198	10,022	100,327	8,728
49	25,176	2,190	12,027	1,046	10,732	934	99*	234,072	20,364	120,068	10,446	104,585	9,099

* These rates apply only to Policy Renewal. 此保費只供續保之用。
1. All the currencies in this table are in Hong Kong dollars. 本保費表內之所有貨幣均以港元計算。
2. The initial premium is determined by the age and smoking habit of the Insured Person at the Policy Effective Date. 初始保費是根據受保人於保單生效日的年齡及吸煙習慣而計算。
3. The premium is adjusted at each Renewal based on the age of the Insured Person, according to the prevailing Standard Premium schedule. 保費會於每次續保時根據受保人的年齡按當時生效的標準保費表調整。
4. This Standard Premium schedule is subject to update from time to time at Cigna Healthcare's sole discretion. 信諾環球保留權利以不時更新此標準保費表。
5. This Standard Premium schedule does not include levy which is collected by the Insurance Authority. 此標準保費表並未包括由保險業監管局徵收的保費徵費。

Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（優越）– 標準保費表（2026年7月1日生效）

Premium for Smoker 吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列 – 靈活計劃（優越）										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK$0		HK$15,000		HK$25,000		HK$50,000		HK$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
0	–	–	–	–	–	–	–	–	–	–
1	–	–	–	–	–	–	–	–	–	–
2	–	–	–	–	–	–	–	–	–	–
3	–	–	–	–	–	–	–	–	–	–
4	–	–	–	–	–	–	–	–	–	–
5	–	–	–	–	–	–	–	–	–	–
6	–	–	–	–	–	–	–	–	–	–
7	–	–	–	–	–	–	–	–	–	–
8	–	–	–	–	–	–	–	–	–	–
9	–	–	–	–	–	–	–	–	–	–
10	–	–	–	–	–	–	–	–	–	–
11	–	–	–	–	–	–	–	–	–	–
12	–	–	–	–	–	–	–	–	–	–
13	–	–	–	–	–	–	–	–	–	–
14	–	–	–	–	–	–	–	–	–	–
15	–	–	–	–	–	–	–	–	–	–
16	–	–	–	–	–	–	–	–	–	–
17	–	–	–	–	–	–	–	–	–	–
18	13,240	1,152	5,998	522	5,193	452	4,534	394	3,851	335
19	13,594	1,183	6,241	543	5,412	471	4,721	411	4,003	348
20	13,952	1,214	6,319	550	5,476	476	4,931	429	4,177	363
21	14,322	1,246	6,396	556	5,541	482	5,067	441	4,283	373
22	14,840	1,291	6,674	581	5,686	495	5,203	453	4,399	383
23	15,431	1,342	6,852	596	5,862	510	5,358	466	4,522	393
24	16,040	1,395	7,565	658	6,285	547	5,515	480	4,601	400
25	16,513	1,437	7,875	685	6,429	559	5,704	496	4,668	406
26	17,290	1,504	8,066	702	6,707	584	5,868	511	4,717	410
27	18,290	1,591	8,257	718	6,846	596	6,038	525	4,766	415
28	18,847	1,640	8,434	734	6,991	608	6,200	539	4,816	419
29	19,110	1,663	8,621	750	7,205	627	6,372	554	4,863	423
30	19,380	1,686	8,869	772	7,246	630	6,633	577	4,931	429
31	19,888	1,730	9,020	785	7,379	642	6,817	593	5,228	455
32	20,404	1,775	9,198	800	7,562	658	7,002	609	5,565	484
33	20,933	1,821	9,381	816	7,827	681	7,187	625	5,924	515
34	21,473	1,868	9,647	839	7,968	693	7,376	642	6,164	536
35	22,019	1,916	9,832	855	8,214	715	7,572	659	6,329	551
36	22,896	1,992	10,108	879	8,499	739	7,770	676	6,496	565
37	23,585	2,052	10,387	904	8,525	742	7,977	694	6,670	580
38	24,200	2,105	10,680	929	8,759	762	8,190	713	6,853	596
39	24,430	2,125	11,060	962	9,003	783	8,407	731	7,040	612
40	24,778	2,156	11,425	994	9,223	802	8,723	759	7,210	627
41	26,134	2,274	12,155	1,057	9,633	838	9,107	792	7,519	654
42	27,189	2,365	12,501	1,088	10,101	879	9,483	825	7,866	684
43	28,360	2,467	13,140	1,143	10,591	921	9,885	860	8,242	717
44	29,567	2,572	13,650	1,188	11,105	966	10,338	899	8,630	751
45	30,865	2,685	14,400	1,253	11,722	1,020	10,844	943	9,094	791
46	32,593	2,836	15,143	1,317	12,237	1,065	11,386	991	9,504	827
47	33,949	2,954	15,996	1,392	12,803	1,114	11,866	1,032	9,926	864
48	35,720	3,108	16,748	1,457	13,410	1,167	12,372	1,076	10,384	903
49	37,562	3,268	17,531	1,525	14,038	1,221	12,878	1,120	10,855	944

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Cigna VHIS Series - Flexi Plan (Superior) - Standard Premium schedule (Effective from 1 July 2026)
信諾自願醫保系列 – 靈活計劃（優越）– 標準保費表（2026年7月1日生效）

Premium for Smoker 吸煙人士保費

Cigna VHIS Series – Flexi Plan (Superior) 信諾自願醫保系列 – 靈活計劃（優越）										
Accommodation Room Type: Semi-Private Room 病房類別：半私家病房										
Age 年齡	Deductible Option 自付費選項									
	HK$0		HK$15,000		HK$25,000		HK$50,000		HK$75,000	
	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳	Annual 年繳	Monthly 月繳
50	39,477	3,434	18,152	1,579	14,895	1,296	13,394	1,165	11,451	996
51	41,534	3,613	19,438	1,691	15,640	1,361	14,518	1,263	12,026	1,046
52	43,681	3,800	20,051	1,744	16,409	1,428	15,118	1,315	12,625	1,098
53	45,902	3,993	21,092	1,835	17,217	1,498	15,891	1,383	13,249	1,153
54	48,006	4,177	22,022	1,916	18,053	1,571	16,803	1,462	13,904	1,210
55	49,962	4,347	23,285	2,026	19,212	1,671	17,763	1,545	14,887	1,295
56	52,734	4,588	24,372	2,120	20,122	1,751	18,788	1,635	15,616	1,359
57	55,759	4,851	25,584	2,226	21,080	1,834	19,871	1,729	16,377	1,425
58	58,534	5,092	27,083	2,356	22,129	1,925	21,054	1,832	17,510	1,523
59	61,607	5,360	28,991	2,522	23,223	2,020	22,271	1,938	18,731	1,630
60	64,719	5,631	30,627	2,665	25,093	2,183	23,836	2,074	19,950	1,736
61	67,845	5,903	32,943	2,866	29,772	2,590	25,794	2,244	21,169	1,842
62	71,098	6,186	35,803	3,115	32,109	2,793	27,600	2,401	22,389	1,948
63	77,819	6,770	39,564	3,442	34,368	2,990	29,718	2,585	24,120	2,098
64	85,062	7,400	43,144	3,754	36,106	3,141	31,218	2,716	25,848	2,249
65	89,318	7,771	46,682	4,061	39,091	3,401	33,800	2,941	27,578	2,399
66	93,745	8,156	49,009	4,264	41,042	3,571	35,484	3,087	29,308	2,550
67	98,348	8,556	51,438	4,475	43,076	3,748	37,246	3,240	31,037	2,700
68	103,269	8,984	53,977	4,696	45,205	3,933	39,100	3,402	32,765	2,851
69	108,394	9,430	56,605	4,925	47,428	4,126	41,035	3,570	34,390	2,992
70	113,725	9,894	58,479	5,088	49,750	4,328	43,058	3,746	36,091	3,140
71	117,799	10,249	62,296	5,420	52,178	4,539	45,169	3,930	37,870	3,295
72	121,983	10,613	65,321	5,683	54,714	4,760	47,376	4,122	39,727	3,456
73	127,301	11,075	68,827	5,988	57,627	5,014	49,917	4,343	41,826	3,639
74	132,733	11,548	72,477	6,305	60,505	5,264	52,560	4,573	44,015	3,829
75	138,288	12,031	76,274	6,636	63,658	5,538	55,315	4,812	46,301	4,028
76	142,230	12,374	80,229	6,980	66,942	5,824	58,185	5,062	48,683	4,235
77	146,214	12,721	84,351	7,339	70,364	6,122	61,172	5,322	51,167	4,452
78	149,347	12,993	88,361	7,687	73,726	6,414	64,088	5,576	53,623	4,665
79	152,521	13,269	91,248	7,939	77,241	6,720	67,138	5,841	56,192	4,889
80	155,734	13,549	93,060	8,096	80,473	7,001	69,943	6,085	58,226	5,066
81*	159,847	13,907	95,478	8,307	83,472	7,262	72,546	6,312	59,728	5,196
82*	164,719	14,331	98,403	8,561	86,571	7,532	75,236	6,546	61,561	5,356
83*	169,425	14,740	100,056	8,705	89,391	7,777	77,201	6,716	62,566	5,443
84*	175,391	15,259	102,217	8,893	91,323	7,945	78,882	6,863	63,904	5,560
85*	181,535	15,794	103,691	9,021	92,863	8,079	80,419	6,996	64,794	5,637
86*	187,419	16,305	105,313	9,162	94,406	8,213	81,844	7,120	65,837	5,728
87*	193,491	16,834	106,922	9,302	95,955	8,348	83,282	7,246	66,872	5,818
88*	199,760	17,379	109,494	9,526	97,931	8,520	84,728	7,371	68,014	5,917
89*	206,234	17,942	113,266	9,854	100,472	8,741	86,183	7,498	69,262	6,026
90*	212,917	18,524	117,169	10,194	103,199	8,978	87,649	7,625	71,207	6,195
91*	219,819	19,124	121,210	10,545	105,924	9,215	89,120	7,753	73,730	6,415
92*	226,939	19,744	125,395	10,909	108,909	9,475	91,060	7,922	76,340	6,642
93*	234,295	20,384	129,724	11,286	112,703	9,805	94,232	8,198	79,042	6,877
94*	241,890	21,044	134,211	11,676	116,631	10,147	97,513	8,484	81,841	7,120
95*	249,731	21,727	138,853	12,080	120,698	10,501	100,912	8,779	84,738	7,372
96*	257,826	22,431	143,659	12,498	124,908	10,867	104,428	9,085	87,735	7,633
97*	266,186	23,158	148,633	12,931	129,267	11,246	108,067	9,402	90,839	7,903
98*	274,813	23,909	153,783	13,379	133,776	11,639	111,834	9,730	94,053	8,183
99*	284,229	24,728	159,206	13,851	138,511	12,050	115,809	10,075	97,431	8,476

* These rates apply only to Policy Renewal. 此保費只供續保之用。

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