

HealthNoble Medical Insurance Plan

「貴族」醫療保險計劃







Premier health insurance for a life of distinction

優越醫療保障 不一樣的優裕人生

At Zurich, we understand your desire to pursue a prestigious lifestyle. You require superior medical services, sense of security knowing that all medical expenses will be covered. It is with this in mind we present HealthNoble Medical Insurance Plan, to meet your medical needs.

Customized to your individual needs, HealthNoble Medical Insurance Plan includes up to USD 3,000,000 protection per year, allowing you to enjoy quality medical services of your choice. Alternatively, Zurich offers the Semi-private Room coverage at a more preferential rate. We also have a special medical service team ready to provide Personal Concierge Services with private consulting and advisory services.

For a modest premium, you will benefit from luxurious, convenient and comfortable medical services. Alleviating concerns and saving time, HealthNoble Medical Insurance Plan affords you more opportunities to enjoy every moment of your life.

蘇黎世深明 閣下追求美滿的生活。您需要更優質的醫療計劃,確保足以償付所有醫療開支,無後顧之憂。我們想法一致,特意推出「貴族」醫療保險計劃,全方位照顧您的醫療需要。

「貴族」醫療保險計劃度身而設,提供每年高達3,000,000美元的充裕保障額,讓您悉隨己意,盡享更多優質醫療服務選擇。此外,蘇黎世為您提供半私家房住院保障,讓您享有更優惠的保費。我們更特設醫療顧問團隊,提供尊貴的禮賓服務,讓您專享私人醫療諮詢及顧問服務。

只需特惠的保費·即可盡享優越、方便及舒適的醫療服務。「貴族」 醫療保險計劃助您拋卻憂慮·省卻時間·享受理想人生的每分每秒。

Prestigious health plans, customized to meet your personal needs 更尊貴的醫療計劃 度身訂造 切合個人需要



Multiple protection

- An exceptional, high insured sum of up to USD 3,000,000 per year.
- Full cover of hospital expenses within the annual policy limit, with no cap set as sub-limit.
- Cashless Arrangement Service for Hospitalization² at private hospitals in Hong Kong, with no advance medical expenses or claims for reimbursement afterwards.
- Free value-added services, inclusive of Zurich Emergency Assistance Services with emergency medical evacuation, repatriation services and Personal Concierge Services³ with nursing care services, renowned medical specialists priority appointment service, as well as Second Medical Opinion from the world's top medical centers.
- With range of Wellness Benefits⁴ offered for the diverse needs of different genders and ages.
- Full cover for cancer and dialysis, as well as organ transplant cover up to USD 100,000 per disability.
- Renewable lifetime⁵ and without lifetime benefit limit⁶.

Customized solution

- · The option of covering hospitalization expenses in a semiprivate room at hospitals is value for money. To give you the ultimate privacy that you can have similar to a private room but in a more preferential premium rates.
- High Voluntary Deductible up to USD 10.000 enables you to complement your group medical insurance with premium savings.
- Maternity Benefit⁷ of your choice.

Peace of mind

- Flexible combination of coverage to meet personal health and financial needs.
- Enjoy peace of mind as the coverage limit is calculated per policy year, you will be protected by the full limit in each new insured period.

- Sub-limit applies for treatment costs of organ transplant, AIDS and HIV.
- Cashless Arrangement Service for Hospitalization is subject to pre-authorization and is applicable to Premier Plan and Platinum Plan.
- Personal Concierge Services are offered according to the plan selected. Wellness Benefits are applicable if insured with Outpatient Benefits.
- Zurich reserves the right to renew at our discretion and to amend the premium, benefits, terms and conditions upon policy renewal.
- Maximum benefits per insured person per policy year shall apply.

 Maternity Benefit is only applicable when both husband and wife are enrolled together and their child will be born in Hong Kong. The benefit is payable only when the insured person has been continuously covered under this benefit for 12 months or more.

多方面保障

- 每年特高保障額達3,000,000美元。
- 保單每年最高賠償額內之住院開支全數賠償1,並無設細項
- 入住本港私家醫院可享「住院免找數服務」, 免除先付款 而後索償的煩惱。
- 免費增值服務包括提供緊急醫療運送及運返之蘇黎世 緊急支援服務、提供護理服務及專科名醫預約之禮賓 服務³及由世界頂級醫療中心提供的第二醫療意見。
- 特備保健保障4,迎合不同性別及年齡人士的多元化需要。
- 癌症、腎透析治療全數賠償保證;器官移植保障每宗傷 疾高達100,000美元。
- 可終生續保⁵及不設終生賠償上限⁶。

度身訂做方案

- 半私家房住院保障選擇,提供更超值之全面保障,並讓您 以更優惠的保費、盡享猶如私家病房的高度私隱、安心無憂。
- 高達10,000美元自願性自負額,以強化團體醫療保障,並 節省保費。
- 自選產科保障7。

無憂保障

- 保障靈活組合,切合個人健康及財務需要。
- 保障額以每個保單周年獨立計算,每年保證獲享全額保障, 倍感安心。

- at. 個別限額適用於器官移植、愛滋病及人體免疫力缺乏症之醫療開支。 「住院免找數服務」須經預先批核、並只適用於優越計劃及尊尚計劃。 禮寶服務按所選之保障計劃而提供。 保健保障適用於自選附加門診醫療保障之受保人士。

- 於每年續訂保單時·蘇黎世保留酌情每年續保及在續保時調整保費、保障、條款及細則
- 設有每受保人每保單年度之最高賠償額。

Personal Concierge Services - Personalized attention at the time you need 禮賓服務 專為尊貴的您而設

Customer Service Hotline

Apart from providing general customer services, our hotline is supported by in-house registered nurse to provide nursing advisory services. The call centre is accredited with ISO 9001 & 10002, ensuring the quality of our deliverables when you are in need of our services. Our services include:

- benefit entitlement explanation
- claims enquiry
- support in claims processing

Professional Nursing Advisory Services

We can arrange in-house registered nurse to provide nursing advice on minor injuries or illnesses, routine health issues, medication advice, general health advice, pre-surgery and postsurgery counseling, so you are able to access nursing advice from home.

Priority Appointment Service^{1,2}

With the network of specialists available from HealthNoble Medical Insurance Plan, you will have priority in making appointments with renowned specialists, including Cardiologists and Cardiothoracic surgeons. This appointment service includes outpatient appointment and reminder, surgery scheduling and related arrangements to minimize waiting time. Your health is always our foremost priority.

Medical Concierge Services^{1,3}

Medical Concierge Services include arrangement of doctor on-call service, home nurse or escort nurse arrangement, medication delivery to your office and home, house call service for blood taking or specimen collection, on-site vaccination, sourcing of medical accessories, post-natal visits at home, paramedical services such as physiotherapy, psychologist, dietitian, speech therapy, occupational health, etc.

Second Medical Opinion^{1,2}

Should the insured person suffer from a designated critical illnesses, we can help deliver your relevant medical records and reports to top-notch overseas medical centers, where leading pathologists will diagnose the illness and review the treatment plan, to minimize any worries. These centers offer state-of-theart medical resources to help patients make informed choices on treatment programs. For rare diseases, these centers also offer professional expertise and latest updates on specific cases.

客戶服務熱線

除了提供一般的客戶服務外,我們的客戶服務熱線由註冊 護士支援,提供專業護理意見。我們的熱線中心更獲得 ISO9001及10002認證,確保服務能配合您所需。服務 包括:

- 保障講解
- 索償查詢
- 協助索償

專業護理咨詢服務

我們可安排註冊護士為您提供專業護理咨詢服務,包括輕 微傷病護理、日常健康問題、服用藥物建議、一般健康常 識、手術前後輔導;讓您安坐家中,盡享全面的特別護理 資訊。

優先預約服務1,2

「貴族」醫療保險計劃特備專科醫生網絡,助您優先預約 著名的專科醫生,包括心臟病科及心臟外科手術專家。 服務包括門診醫療、預約及提示外科手術日程及相關之安 排,以減低輪候時間。您的健康永遠是我們最首要的考 慮。

醫療禮賓服務^{1,3}

醫療禮賓服務包括安排醫生到診、家庭看護及護送服 務、藥物送遞服務至您的辦公室或家中、上門抽血及抽 取樣本、上門防疫注射、醫療物料搜集、產後護理服 務、輔助醫療服務如物理治療、心理治療、營養師、言語 治療師及職業健康等。

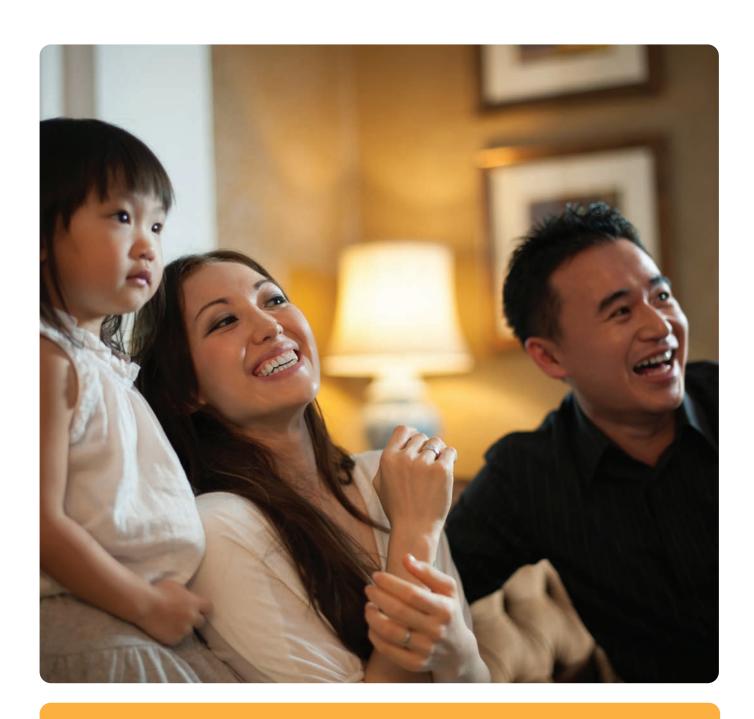
第二醫療意見1,2

若投保人患上指定危疾,我們可將病者相關的醫療記錄和 報告送付海外的專業醫療中心,由頂尖病理學家作出診 斷,檢視治療方案,以減少病者憂慮。此等中心具備全球 最先進的醫療資源·有助病者作出明確而合適的治療方案 決定。對於一些罕見的疾病,中心更可提供專業建議及不 同範籌病例的最新資訊。

Remarks:

- Applicable to Premier Plan and Platinum Plan only.
- 2. The treatment expenses will be borne by the insured person unless they are covered by this plan.
- Services are provided at the insured person's own expenses.

- 1. 只限優越計劃及尊尚計劃。 2. 有關治療費用如非屬本計劃承保範圍·將由受保人支付。
- 3. 服務之費用須由受保人支付



Full insured amount annually

Insured amounts are calculated annually, rather than based on each illness or lifetime insured. Even if you have made a claim in the previous year, your insured amount will not be deducted in each new insured period, to ensure you are protected by the full insured amount at annual renewal.

每保單年度盡享全數保障額

保障額每年獨立計算,而非按每宗傷疾或終生保障額計算。 縱使已於前一年提出索償,新一個保單年度的保障額將不被 扣減,確保你於每個續保年度內均享獲全額保障。

Exclusive offers. Extra convenience.

專享服務 方便倍添

Cashless Arrangement Service for Hospitalization

All necessary inpatient medical expenses, pre-approved for private hospitals in Hong Kong, can be paid directly to hospitals for insured persons. So you don't have to pay any expenses upon discharge from the hospital. With HealthNoble Medical Insurance Plan, your attention can be dedicated to recovery the soonest.

No Claim Discount²

If you haven't made any claims during the insured period, as an insured person you'll be entitled to the following premium discounts upon policy renewal:

「住院免找數服務」直接支付住院醫療開支

當受保人入住本港私家醫院,我們會直接向醫院支付所有得到 預先批核之住院醫療費用, 您於出院時無須繳付相關開支。 「貴族」醫療保險計劃,讓您專心休養以盡快康復。

無索償折扣優惠2

若投保人於保單年度內並無提出索償,即可享有以下之續保 保費折扣:

Claim-free period of insurance 無索償之保單年度	No Claim Discount 無索償折扣
First period of insurance 首個保單年度	5%
Second consecutive period of insurance 緊接的第二個保單年度	10%
Third consecutive period of insurance or above 緊接的第三個或之後的保單年度	15%

Family Enrollment Discount³

Enroll together with your spouse and/or child(ren), and each insured family member will be entitled to an additional 5% premium discount.

Corporate Discount³

To a corporate customer, we treasure your care to provide extensive medical benefits to your valuable staff and executives, providing your employees peace of mind with a comprehensive protection. In addition to No Claim Discount, a Corporate Discount of 5% will be offered if the insurance is taken out by a company with a minimum of five staff members to be insured.

- 1. Cashless Arrangement Service for Hospitalization is subject to pre-authorization and is
- applicable to Premier Plan and Platinum Plan only.

 No Claim Discount is applicable to the relevant premium for Sections 1 to 6 only.
- Insured persons can only receive either the Family Enrollment Discount or the Corporate Discount.

家庭投保優惠。

若投保人與配偶及/或子女一同投保,每位家庭成員可享5% 保費折扣。

團體折扣優惠。

我們明白企業為回饋辛勤的員工或行政人員而購買高額醫療 保障作為員工福利的需要,以免除他們的後顧之憂。企業若 以公司名義投保,而投保員工達五名或以上,除可享有無索 償折扣外,更可享額外5%團體保費折扣。

- **備註:** 1. 「住院免找數服務」須經預先批核·並只適用優越計劃及尊尚計劃。
- 2. 無索償折扣優惠只適用於第一至六節有關之保費 3. 投保人只可享有家庭投保或團體折扣優惠。







Flexibility to suit your lifestyle

靈活彈性 迎合您生活所需

Voluntary Deductible up to USD 10,000, and coverage limits from USD 1,000,000 to USD 3,000,000, are available for you to choose from. You are even free to select additional coverage, or upgrade to a Standard Private Room service to suit for your lifestyle.

自願性自負額高達10,000美元,保障額由1,000,000美元至 3,000,000美元,隨您按自己需要而選擇。您更可自選附加保 障或升級至私家房住院保障,以滿足個人所需。



Essential 精選 Premier 優越 Platinum 尊尚 USD 1,000,000 美元 USD 2,000,000 美元 USD 3,000,000 美元 **Semi-private Room Standard Private Room** 半私家房 私家房 USD 2,500 美元/ USD 5,000 美元/ USD 10,000 美元/ policy year 保單年 不設自願性自負額 policy year 保單年 policy year 保單年 **Outpatient Benefits & Dental Care Maternity Benefits Wellness Benefits** 牙科保健 產科保障

Remarks:

Optional cover is only applicable to Premier Plan and Platinum Plan. Maternity benefit is only applicable when both husband and wife are

門診醫療保障及保健計劃

enrolled together and their child will be born in Hong Kong. The benefit is payable only when the insured person has been continuously covered under this benefit for 12 months or more

備註·

- (精註: 1. 自選保障只適用於優越計劃及尊尚計劃。 2. 產科保障只適用於夫婦一同投保及其子女於香港出生之受保 人士。受保人必須連續受保於產科保障12個月或以上·方可獲 得賠償。

Plan summary 計劃概況

Issue age	15 days - 64 years old (19 - 50 years old for Maternity Benefit)		
投保年齡	由15日至64歳(產科保障由19至50歳)		
Protection age	Lifetime (up to age 50 for Maternity Benefit)		
保障年齢	終身續保(產科保障續保至50歲)		
Currency of sum insured	USD		
賠償額貨幣	美元		
Room type	Semi-private Room¹/Standard Private Room		
病房類別	半私家房'/私家房		
Area covered	Hong Kong (Worldwide, Accidental injury or emergency only) ²		
保障地域	香港 (全球只限意外受傷或急症) 2		
Voluntary deductible options (USD)	2 500/5 000/10 000		
自願性自負額 (美元)	2,500/5,000/10,000		
Payment mode	Annual/Quarterly		
付款方法	年繳 /季繳		

- Should the insured person enroll in a Semi-private Room cover under this policy but his/ her hospital confinement is in a Standard Private Room, the reimbursement percentage of the eligible benefits under Sections 1 to 4 will be adjusted to 50% of the maximum benefits payable under the policy. No benefit shall be payable for the insured person confined in any room type with a higher classification than a Standard Private Room.
- 2. When the insured person is staying overseas exceeding 120 days at the time of accidental injury or emergency occured, the benefits will not be payable.

- 1. 若受保人選擇半私家房保障·而於住院時入住私家病房·第1至4節之合資格費用將按 保單最高賠償額之百分之五十賠償。若受保人人住任何高於私家病房等級之病房皆不在保障範圍之內。
- 2. 如意外受傷或急症發生時受保人身處香港以外的地方連續120日或以上,保障將不適用。

Table of benefits 保障範圍一覽表

Coverage 保障範圍		Maximum benefits per insured person per policy year (USD) 每位受保人於每保單年度之最高賠償額(美元)		
		Essential Plan 精選計劃	Premier Plan 優越計劃	Platinum Plan 尊尚計劃
	ual limit 注年度最高賠償額	1,000,000	2,000,000	3,000,000
	tion 1 - Room and Board 節 - 住房及膳食費用			
1.1	Room and Board 房租及膳食費用			
1.2	Accompanying Bed Benefit (Parent Accommodation) (If the insured person is under 16 years old) 陪伴床位保障(父母陪伴床位) (只限16歲以下之受保人)	Full refund 全數賠償	Full refund 全數賠償	Full refund 全數賠償
	tion 2 - Surgical Cover 節 - 手術費用保障			
	In-hospital Medical Practitioner's Call Fees 醫生巡房費			
2.2	In-hospital Specialist Consultation Fees 住院專科醫生費			Full refund 全數賠償
2.3	Hospital Special Services Charges 醫院雜費	Full refund 全數賠償	Full refund 全數賠償	
2.4	Surgical Charges (including Anaesthetist's Fee and Operating Theatre Charges) 手術費用 (包括麻醉科醫生費用及手術室費用)	王剱賠債	土数阳俱	
2.5	Day Patient Surgery 日間病人手術費用			
Sect 第3i	tion 3 - Cancer, Dialysis and Transplant Treatment 節 – 癌症、腎透析及移植治療保障			
3.1	Chemotherapy and Radiotherapy for Cancer ¹ 化療及放射治療癌症 ¹	Full refund	Full refund	Full refund
3.2	Dialysis 腎透析	全數賠償	全數賠償	全數賠償
3.3	Organ Transplant 器官移植	50,000/disability 每宗傷疾50,000	100,000/disability 每宗傷疾100,000	100,000/disability 每宗傷疾100,000
	tion 4 - Other Medical Treatment 節 - 其他醫學治療			
	Prosthetic Devices 人造義體 /義肢	Full refund 全數賠償	Full refund 全數賠償	Full refund 全數賠償
4.2	AIDS/HIV Treatment 愛滋病 /人體免疫力衰竭病毒治療	100,000	100,000	100,000
4.3	Accidental Dental Treatment 意外牙科治療	Full refund	Full refund 全數賠償	Full refund 全數賠償
4.4	Local Ambulance 本地救護車服務	全數賠償		
Sect 第56	tion 5 - Pre and Post-Surgery Cover 節 - 手術前及手術後保障			
	Post-surgery Outpatient Benefit (within 60 days after discharge from hospital) 手術後之門診保障 (手術後60日內)			
5.2	Post-surgery Specialist Treatment due to Critical Illness ² (within 120 days after discharge from hospital) 危疾手術後專科醫生之治療 ² (出院後120日內)	Full refund 全數賠償	Full refund 全數賠償	Full refund 全數賠償
5.3	Home Nursing Fees (max. 30 days immediately after discharge from hospital) 家居看護 (出院後30天內)	王教賠負	土	土教和博
5.4	Pre-hospitalization Outpatient Consultation (within 30 days before hospital confinement) 手術住院前門診咨詢 (入院前30日內)			

Table of benefits 保障範圍一覽表

Coverage 保障範圍		Maximum benefits per insured person per policy year (USD) 每位受保人於每保單年度之最高賠償額(美元)			
		Essential Plan 精選計劃	Premier Plan 優越計劃	Platinum Plan 尊尚計劃	
Sect 第6額	ion 6 - Zurich Emergency Assistance 茚 – 蘇黎世緊急支援服務				
6.1	Overseas Telephone Medical Advice 海外電話醫療顧問服務		/7 medical advice includ 包括24/7醫療意見服務	ed	
6.2	Overseas Medical Service Provider Referral 海外轉介醫療服務供應商	包括24// 黄原总兄服务 Included 包括			
6.3	Overseas Guarantee of Hospital Admission Deposit 海外入院按金保證		15,000 15,000		
6.4	Overseas Emergency Medical Evacuation or Repatriation 海外緊急醫療運送或運返服務	Actual cost 實銷費用			
6.5	Arrangement of Limousine Service in Hong Kong (hospitalized in Hong Kong for a period in excess of 7 consecutive days) 於香港安排轎車接送 (在香港住院超過連續7日)	Included 包括			
選擇 Secti 第7館	Extended optional benefits (Applicable to Premier Plan and Platinum Plan only) 選擇性附加保障(只適用於優越計劃及尊尚計劃) Section 7 - Outpatient Benefits & Wellness Benefits 第7節 - 門診及保健保障 Section 7.1 - Outpatient Benefits				
	Medical Practitioner Fees including Consultations - Maximum limit - Maximum no. of visits 普通科醫生費用包括診症費 - 最高保障額 - 最多次數		Full refund 10 visits 全數賠償10次	Full refund 30 visits 全數賠償30次	
7.1.2	Specialist Fees including Consultations ³ - Maximum limit - Maximum no. of visits 專科醫生費用包括診症費 ³ - 最高保障額 - 最多次數		Full refund 10 visits 全數賠償10次	Full refund 30 visits 全數賠償30次	
7.1.3	Diagnostic Procedures and Lab Tests ³ 診斷及化驗 ³		Full refund	Full refund	
7.1.4	Prescribed Drugs and Dressings 處方藥物及包紮	N/A 不適用	全數賠償	全數賠償	
7.1.5	Traditional Chinese Medicine Practitioner/ Bonsetter/Acupuncturist ⁴ - Maximum limit - Maximum no. of visits 中醫 /跌打 /針灸 ⁴ - 最高保障額 - 最多次數	را المسارات	100/visit 5 visits 100 /灾 5灾	100/visit 10 visits 100 /灾 10次	
7.1.6	Physiotherapist/Chiropractor ⁵ on referral by Medical Practitioner - Maximum limit - Maximum no. of visits 由醫生轉介的物理治療師/脊醫 ⁵ - 最高保障額 - 最多次數		100/visit 5 visits 100 /灾 5灾	100/visit 10 visits 100 /灾 10次	

Remarks:

- Remarks:
 Target therapy is applicable to Premier Plan and Platinum Plan only.
 Critical Illness refers to benign brain tumour, chronic liver disease, heart attack and major organ transplant.
 Subject to written referral from a registered Medical Practitioner.
 Maximum one visit per day for Traditional Chinese Medicine Practitioner, Bonesetter and Acupuncturist.
 Maximum one visit per day for Physiotherapist and Chiropractor.

- 備註: 1. 標肥治療只適用於優越計劃及尊尚計劃。 2. 危疾是指良性腦部腫痛、慢性肝病、心臟病及主要器官移植。 3. 需獲得註冊西醫書面轉介。 4. 中醫、跌打及針灸以每日一次診治為限。 5. 物理治療師及脊醫以每日一次診治為限。

Table of benefits 保障範圍一覽表

Coverage 保障範圍		Maximum benefits per insured person per policy year (USD) 每位受保人於每保單年度之最高賠償額(美元)		
		Essential Plan 精選計劃	Premier Plan 優越計劃	Platinum Plan 尊尚計劃
(Free	on 7.2 - Wellness Benefits cover if Section 7 Outpatient Benefit is selected 節 – 保健計劃(如選擇門診保障之附加保障))		
7.2.1	Baby and Child Vaccinations 嬰兒及兒童疫苗注射	N/A 不適用	80% refund (max. 300) 賠償80% (最高300)	
7.2.2	Adult Vaccinations 成人疫苗注射		80% refund (max. 200) 賠償80% (最高200)	
7.2.3	Routine Physical Examination (1 examination per 2 years) 常規身體檢查 (每2年1次檢查)		100	400
7.2.4	Mammogram and Pap Smear Test (for females age 35 and over) 乳房造影圖及柏氏子宮頸抹片檢查 (女性35歳及以上)		80% refund (max. 325) 賠償80%(最高325)	
7.2.5	PSA Test (for males age 50 and over) 前列腺癌抗原檢查(男性50歲及以上)		80% refund (max. 325) 賠償80% (最高325)	
7.2.6	Dietary Consultation (1 visit per year) 營養諮詢(每年1次)		100	100
	on 8 - Dental Care ⁶ 茚 - 牙科保健 [©]			
8.1	Routine Examinations (1 visit per year) 常規檢查(每年1次)	N/A 不適用	50% refund (max. 1,000) 賠償50% (最高1,000)	賠償90% (最高1,000)
8.2	Major Restorative Treatment 重大牙齒復修手術	1 22/13	50% refund (max. 2,000) 賠償50% (最高2,000)	
Secti 第9額	on 9 - Maternity Benefit [®] 6 – 產科保障 [®]			
child (a) No (c) Pr 因 (包) (a) 順	rnity costs associated with normal pregnancy and birth, pre and post-natal check-ups and delivery costs: ormal Delivery or (b) Caesarean Section egnancy Complications 孕及生育而引致的婦產費用 括產前及產後檢查或生產費用): 產或 (b) 剖腹生產 娠併發症	N/A 不適用	80% refund (max. 10,000) 賠償80% (最高10,000)	, , ,
Section 第10	on 10 - Voluntary Deductible (Applicable to Sections 1-5 節 - 自願性自負額(適用於第一至第五節)	5)		
а	USD 2,500美元			
b	USD 5,000美元	./	. /	. /
С	USD 10,000美元		~ · · · · · · · · · · · · · · · · · · ·	<u> </u>
	onal Concierge Services/Cashless Arrangement So 服務 /「住院免找數服務」	ervice For Hospitaliz	ation	
	mer Service Hotline/Professional Nursing Advisory Services 服務熱線 /專業護理咨詢服務	✓	✓	✓
Priority Appointment Service ⁸ /Medical Concierge Services ⁹ /Second Medical Opinion ⁸ 優先預約服務 ⁸ /醫療禮賓服務 ⁹ /第二醫療意見 ⁸		N/A	✓	✓
Cash 「住	lless Arrangement Service for Hospitalization ¹⁰ 院免找數服務」 ¹⁰	不適用	✓	/

- Remarks:
 6. Routine Examinations benefit is payable only when the insured person has been continuously covered under this benefit for six months or more. Major Restorative Treatment benefit is payable only when the insured person has been continuously covered under this benefit for 12 months or more.
 7. Maternity benefit is only applicable when both husband and wife are enrolled together and their child will be born in Hong Kong. The benefit is payable only when the insured person has been continuously covered under this benefit for 12 months or more.
 8. The treatment expenses will be borne by the insured person unless they are covered by this plan.
 9. Services are provided at the insured person's own expenses.
 10. Cashless Arrangement Service for Hospitalization is subject to pre-authorization.

- 備註:
 6. 受保人必須連續受保於此保障六個月或以上·方可獲得常規檢查之賠償。受保人必須連續受保於此保障12個月或以上·方可獲得重大牙齒復修手術之賠償。
 7. 產科保障適用於大學一向投保及其子女於香港出生之受保人士。受保人必須連續受保於產科保障12個月或以上·方可獲得賠償。
 8. 有關治療費用如非屬本計劃承保範圍·將由受保人支付。
 9. 服務之費用須由受保人支付。
 10. 「住院免找數服務」須經預先批核。

Important notes

- 1. The insured person must be a Hong Kong citizen or resident in Hong Kong holding a valid HKID card, and with a permanent address and live in Hong Kong as a usual country of residence.
- Any treatments outside Hong Kong is covered as the result of accidental injury or emergency only and is subject to the condition that the insured person is not staying overseas exceeding 120 consecutive days at the time of injury or disease occurred.
- 30 days waiting period is applicable to Sections 1 to 7 for both inpatient and optional outpatient benefits, except for accidental injury.
- 4. Six months waiting period is applicable to Section 8.1 Routine Examinations under dental treatment.
- 12 months waiting period is applicable to Section 8.2 Major Restorative Treatment under dental treatment and Section 9 -Maternity Benefit.
- 6. Should the insured person enroll in a Semi-private Room cover under this policy but his/her hospital confinement is in a Standard Private Room, the reimbursement percentage of the eligible benefits under Sections 1 to 4 will be adjusted to 50% of the maximum benefits payable under the policy. No benefit shall be payable for the insured person confined in any room type with a higher classification than a Standard Private Room.
- We reserve the right to revise or adjust the premium under the following circumstances:
 - (i) According to our 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.
 - (ii) The premium rate should be adjusted automatically according to the attained age of the insured person at the time of renewal.
- 8. All amendments to the insurance benefits will only be accepted upon policy renewal and must be subject to the approval of Zurich Insurance Company Ltd.
- 9. Minimum annual premium per policy is HKD 4,000.
- 10. Exchange rate of benefits is USD 1 = HKD 7.8.
- 11. 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 our discretion. We reserve 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.
- 12. You have the right to cancel the policy by returning the policy to us 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, we 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 us. In such event, we 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.
- 13 Zurich Insurance Company Ltd 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 Insurance Company Ltd may request you to return all monies paid by Zurich Insurance Company Ltd 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.

重要事項

- 1. 受保人必須為香港居民及持有有效香港身份證·在香港擁有一個恆常居所及以香港為慣常居住地。
- 2. 所有在香港以外接受的治療只限意外受傷或急症,唯受保人 每次離開香港不可連續超過120天。
- 3. 30天等候期適用於第1至7節的住院及選擇性門診保障·唯意外受傷除外。
- 4. 六個月等候期適用於第8.1節 牙科保障之常規檢查。
- 5. 12個月等候期適用於第8.2節 牙科保障之重大牙齒復修手術 及第9節 - 產科保障。
- 6. 若受保人選擇半私家房保障,而於住院時入住私家病房, 第1至4節之合資格費用將按保單最高賠償額之百分之五十 賠償。若受保人入住任何高於私家病房等級之病房皆不 在保障範圍之內。
- 7. 本公司保留權利,在以下情況更改或調整保費:
 - (i) 本公司會根據續保時的適用保費率調整保費(將基於多個因素,包括但不限於醫療通脈,預期未來醫療費用,理 賠紀錄及您及/或這產品招致之費用,及保障之更改) ,並於調整保費前30天以書面通知您。
 - (ii) 於續保時,保費將按受保人之實際年齡自動調整。
- 8. 所有保險保障的修訂必須於續保時方可提出申請及必須獲得蘇黎世保險有限公司的批核方能生效。
- 9. 每份保單的最低保費為每年4,000港元。
- 10. 保障之兌換率為1美元=7.8港元。
- 11. 從保單生效日起計,本保單會維持生效一年及由本公司酌情每年自動續保。惟本公司保留權利在任何保險期之續保前30日向您提供書面通知以更改保單條款,包括但不限於保費、保障、保障額或不承保事項。
- 12. 您有權在冷靜期內即緊接保單交付予閣下之日起計的21日內交還保單及附上您的簽署之書面通知書要求取消保單。若未曾獲賠償或沒有將獲發的賠償,本公司將會把您已付之保費無息全數退還。若您曾獲賠償或將獲得賠償,則不獲發還保費。在冷靜期過後,您可於30日前向本公司提出書面通知以取消此保單,如在該保單生效日至取消保單生效日期間無索償紀錄,您已繳交之全年但未到期之保費將根據適用之比率計算扣減並退還。
- 13. 若(i)您就受保人健康狀況作出了失實聲明·(ii)在投保申請中遺漏重要資料·或(iii)在投保申請或索償時提供了欺詐性的文件或有欺詐成分的申述·蘇黎世保險有限公司有權宣告保單自保單生效日起無效,並可能拒絕退還已繳交的相關保費,及/或可能要求您退還過去索償中蘇黎世保險有限公司支付的所有款項。

Major Exclusions

This policy will not cover any claim arising directly or indirectly from:

- 1. acquisition of the organ to be used for organ transplantation and all expenses incurred by the donor, who is someone other than the insured person, including all costs related to organ donation as the donor;
- 2. air travel except as a passenger in a properly licensed aircraft operated by a licensed commercial air carrier, private jet or helicopter; or engaging in naval or military or armed force or services;
- 3. contraceptive or contraceptive devices, infertility or any other method of inducing pregnancy, sterilization of either sex; any condition resulting from abortion, maternity, pregnancy including but not limited to pregnancy test, pre-natal care as well as post-natal care and other complications arising from pregnancy, unless you have purchased the optional Maternity Benefits under Part 4 Extended Optional Benefits and cover is then provided as described in the plan benefits;
- 4. any costs incurred by any insured person outside any period of insurance of this policy or for any period of insurance of this policy for which the appropriate premium has not been paid;
- 5. any expense for health or dietary supplements and all specialized Chinese herbs and/or tonic medicine such as but not limited to bird's nest, lingzhi, red ginseng, American ginseng, radix ginseng silvestris, cordceps sinensis, agaricus blazei murill, sika deer antler, donkey-hide gelatin, hippocampus, antelope horn powder, placenta hominis, musk, and pearl powder, etc;
- 6. any pre-existing condition or related conditions, unless disclosed to and accepted by us;
- 7. any treatment including services and supplies which are not medically necessary;
- 8. any treatment or expenses incurred within the waiting period except those arising out of an accidental injury;
- 9. charges for non-medical services such as telephone, television, radio, telex, extra meal, extra bed or similar facilities;
- 10. congenital abnormalities arising out of the same or resulting therefrom, including but not limited to epilepsy, strabismus, hydrocephalus, and hernia;
- 11. convalescence, custodial or rest care or sanitaria care, or treatment received in any home, health hydro, nature cure clinic, sanatorium or long term care facility;
- 12. cosmetic surgery or plastic surgery for purposes of beautification except as medically necessitated by an injury or accident;
- 13. dental work or surgery, unless you have purchased the optional Dental Care under Part 4 Extended Optional Benefits and cover is then provided as described in the plan benefits. We shall reimburse for procedures necessitated by damage to sound natural teeth as a result of an injury or accident occurring during the period of insurance. Benefit is payable purely for emergency condition and to alleviate the pain and in a legally registered dental clinic or hospital but in all circumstances shall not cover any restorative or remedial work, the use of any precious metals, orthodontic treatment of any kind, replacement of natural teeth, denture and prosthetic services such as bridges and crowns, their replacement and related expenses;
- 14. disease or sickness arising from asbestos;
- 15. any treatment provided outside of Hong Kong unless as the result of an accident or an emergency.
- 16. experimental treatment and drugs, unproven or pioneering medical and surgery techniques;
- 17. refractive defects of the eyes, eye tests or fitting of glasses or surgical correction of nearsightedness;
- 18. general check-up, vaccination or inoculations for immunization; quarantine purposes which is not medically necessary, unless you have purchased the optional Wellness Benefit under Part 4 Extended Optional Benefits and cover is then provided as described in the plan benefits;
- 19. 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;
- 20. procurement or use of special braces, appliances, equipment, including but not limited to organ; prosthetic appliances, hearing aids, cochlear implants, wheelchairs, crutches, denture or any other similar equipment, except for those named in Section 4.1 Prosthetic Devices under Part 3 Benefits;
- 21. professional sports, or where the insured person would or could earn any remuneration from engaging in such sport or race or participating in any illegal acts;
- 22. suicide, attempted suicide, intentional self-injury, insanity or any functional disorder or psychiatric condition of the mind, including but not confined to psychoses, neuroses, depression of any kind, anxiety, anorexia nervosa, bulimia, gender reassignment, schizophrenia and other behavioral disorders; abuse of alcohol, drugs or other addictive substances and any costs associated from such dependency or abuse;
- 23. treatment by any person other than a registered medical practitioner or by any person who ordinarily resides in the insured person's home;

- 24. treatment for learning difficulties in child(ren), such as dyslexia or behavioural problems, attention deficit, hyperactivity disorder, or development problems such as shortness of stature;
- 25. treatment of obesity, or treatment for the purpose of weight reduction or gain regardless of the existence of morbid or comorbid conditions, removing fat or surplus tissue;
- 26. venereal diseases, sexually-transmitted diseases, communicable disease requiring by law isolation or quarantine;
- 27. war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, direct participation in strike, riot or civil commotion or any kinds of participation in any act of terrorism; and
- 28. any cyber act that results in any accident, disability, sickness and/or injury.

主要不承保事項

本保單將不會承保因下列事故直接或間接引致之索償:

- 1. 購買器官作器官移植,以及並非受保人本身的器官捐贈者招致的所有費用,包括與捐贈器官有關的費用;
- 2. 飛行除非以乘客身份乘搭由持牌商業航空公司營運的正式持牌航機、私人飛機或直升機;或服役於海軍、軍事或武裝部隊;
- 3. 避孕劑或避孕用具,男女兩性的不育或任何方式的人工受孕,絕育手術;任何因流產、婦產、妊娠引致的狀況、包括但不限於分娩測試,產前、產後護理及其他有關併發症,除非閣下已購買第四部份 選擇性附加保障的產科保障;
- 4. 受保人並非於本保單保險期內招致的費用,或於本保單保險期內欠繳保費期間招致的費用;
- 5. 任何保健食品或飲食補給品及所有專門中藥材及/或滋補藥物的費用,包括但不限於燕窩、靈芝、红参、花旗參、野生參、 蟲草、姬松茸、鹿茸、阿膠、海馬、羚羊角粉、紫河車、麝香及珍珠末等;
- 6. 投保前已存在之傷疾或與此有關的疾病狀況,除非已向本公司透露並已獲接納;
- 7. 任何非醫療必需所招致的治療或服務開支;
- 8. 任何於等候期內所引起的治療或費用,因意外損傷導致除外;
- 9. 非醫療服務費用,如電話、電視、電台、電訊、額外膳食、加床或同類設施的收費;
- 10. 先天性缺陷,包括但不限於腦癇症、斜視、腦積水、受保人於八歲或之前所患之疝氣;
- 11. 療養、監護療養或靜養,或任何於家中、水療中心、自然療法診所、療養院或長期護養院接受的治療;
- 12. 以美容為目的之美容手術或整容手術,惟因意外的損傷導致醫療需要的治療除外;
- 13. 任何性質的牙科手術,除非閣下已購買第四部份 選擇性附加保障的牙科保健。本公司會賠償天然健全牙齒於保險期內因意外導致的損傷。本保障只適用於緊急下紓減痛楚的治療,但治療必須於合法註冊牙醫診所或醫院進行。儘管有前文規定,本保障並不涵蓋任何修復性或補救治療、任何貴金屬用料、任何性質之矯牙手術、更換天然牙齒、假牙及矯形服務如齒橋、齒冠及其更換及相關費用;
- 14. 石棉導致的疾病;
- 15. 除非純粹因意外引起或屬於緊急情況,任何於香港境外所接受之治療;
- 16. 試驗性治療及藥物、未經證明或先導的藥物及手術技術;
- 17 眼部驗光毛病、例行眼部測試、配眼鏡糾正視力或近視矯正手術;
- 18. 任何非醫療必需的一般身體檢查、疫苗注射或預防針,除非閣下已購買第四部份 選擇性附加保障的保健保障;
- 19. 任何核子燃料或核子武器物料燃燒後所產生的核子廢料所引致的電離子輻射或放射性污染;
- 20. 購置或使用特製支架、器材、設備,包括但不限於器官、義肢裝置、助聽器、人工耳蝸植入術、輪椅、拐杖、假牙、或任何 其他同類設備,惟列於第三部份第四節4.1項 – 人造義體/義肢的保障除外;
- 21. 職業運動、任何形式的競賽,或因受保人參與此等運動、競賽賺取報酬或參與任何非法活動;
- 22. 自殘、企圖自殺、蓄意自我傷殘、精神失常或神經系統失調或精神疾病,包括但不限於精神病、神經官能症、任何類別抑鬱症、焦慮症、厭食症、暴食症、變性手術、精神分裂症及其他行為失常病症、酗酒、濫藥或其他成癮的事物及其引起之費用;
- 23. 由非醫生或通常居於受保人家中的人士提供的治療;
- 24. 兒童學習障礙的治療‧例如閱讀困難或行為問題、專注不足/過度活躍症‧或發育障礙如身形矮小;
- 25. 肥胖的治療或所有以增加或减少體重為目的之治療(無論是否屬於病態肥胖或有否並存疾病);
- 26. 性病、透過性傳染疾病、法律規定隔離或檢疫的傳染病;
- 27. 戰爭、侵略、外敵入侵、敵對局面(不論正式宣戰與否)、內戰、叛亂、革命、暴亂、軍事政變或奪權行動、直接參與罷工、暴動或內亂或以任何方式參予恐怖活動;及
- 28. 任何由網絡行為引致的意外、傷疾、疾病及/或損傷。

Product Limitation

We only cover the charges and/or expenses of the insured person on medically necessary and reasonable and customary 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 on recognized standards of the health care specialty involved and which are:
 - (i) consistent with the diagnosis and customary medical treatment for the condition; or
 - (ii) in accordance with standards of good and prudent medical practice; or
 - (iii) performed at a reasonable and customary charge on treatment of a covered injury or sickness; or
 - (iv) is not rendered primarily for diagnostic tests, diagnostic scanning purpose, imaging examination, laboratory test or physiotherapy without medical treatment, medication or surgery.

Note: (i)-(iii) apply to all circumstances, whereas (iv) applies to day patient case or hospital confinement only.

- "Reasonable and Customary Charges" means in relation to a fee, a charge or an expense, any fee or expense which:
 - (i) is charged for treatment, supplies or medical services that are medically necessary and in accordance with standards of good medical practice for the care of an injured or ill person under the care, supervision or order of a registered medical practitioner;
 - (ii) does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and
 - (iii) does not include charges that would not have been made if no insurance existed.

We reserve the right to determine whether any particular hospital/medical charge is a reasonable and customary charge with reference including but not limited to any relevant publication or information made available, such as schedule of fees, by the government, relevant authorities and recognized medical association in the locality. We also reserve the right to adjust any or all benefits payable in relation to any hospital/medical charges which is not a reasonable and customary charge based on the above mentioned reference.

產品限制

我們只會根據醫療必需和合理及慣常的原則,為受保人所需支付的費用及/或開支作出賠償。

- 1. 「醫療必需」是指損傷或疾病必須或有需要之照顧、治療或醫療服務,並此等治療在專業認可的醫學標準中普遍接受為有效、適當及不可缺的,並以下列各項作為提供有關服務之必要性:
 - (i) 因應有關診斷或治療而所需;及
 - (ii) 符合良好及謹慎的行醫標準;及
 - (iii) 以合理及慣常收費的標準為受保損傷或疾病進行的治療收費;及
 - (iv) 於沒有醫療治療包括藥物或接受任何手術下,使用醫療服務的目的並非純為診斷檢查、診斷掃描、影像檢查、化驗檢查或物理治療。

註:(i)至(iii)項適用於所有情況,惟第(iv)項只適用於日間病人或住院情況。

- 2.「合理及慣常收費」是指就任何費用、收費或開支而言,符合以下規定的費用或開支:
 - (i) 屬於醫療必需而乃按照良好醫療守則·為着照顧由註冊醫生治理、監督的受傷或患病人士或按醫生指示所提供的治療、用品或醫療服務之費用;
 - (ii) 不超過招致費用當地同類治療、用品或醫療服務的正常收費水平;及
 - (iii) 並不包括如非有投購保險便不會招致的費用。

本公司保留權利釐定個別醫院 / 醫療費用是否屬於合理及慣常收費,參考的基準包括但不限於任何可取得的相關刊物或資料,例 如當地政府、相關部門及認可醫療協會公佈的收費表。如根據上述參考資料,任何醫院 / 醫療費用並非合理及慣常收費,本公司 保留權利調整任何或所有應付賠償的金額。

Claims procedures

1. For application of Cashless Arrangement Service for Hospitalization:

Contact our Customer Service Hotline and return us with the Cashless Arrangement Service for Hospitalization Application Form completed by the attending medical practitioner **no later than 3 workings days** prior to admission date.

Cashless Arrangement Service for Hospitalization in Hong Kong (Applicable to Premier Plan & Platinum Plan only)

Cashless Arrangement Service is rendered by the service provider which is nominated by us, and this service is available for private hospitals in Hong Kong only. If you require such service, please make your application by following the procedures below:

- (i) Call Customer Service Hotline through +852 2903 9382 to obtain Pre-assessment Application Form.
- (ii) Complete Parts I & II of the Pre-assessment Application Form by you and your attending medical practitioner and return it to the service provider by fax +852 2802 6633 or email zurich.medical@hk.zurich.com not less than 3 working days prior to your admission to the hospital for assessment.
- (iii) After receiving your application, the service provider will inform you whether your application is approved within 3 working days. Should the pre-assessment be approved, the service provider will contact the hospital for direct settlement arrangement.

The assessment is based on information before admission. The actual reimbursement is subject to the information supplied by your attending medical practitioner and the hospital after you are discharged from the hospital, actual circumstances and details of the insurance coverage, exclusion clauses, terms and conditions stated in the policy and any other relevant document.

You will be required to authorize us to collect shortfall in payment on medical expenses, if any, from a credit card account designated by you. If hospitalization is due to illness/injury or sickness classified under exclusion, application of this service will not be accepted.

2. For non-direct settlement claims:

Step 1: Notify us within 30 days from the date of treatment in hospitals.

Step 2: Complete the claim form and supply us the the required original documents as appropriate.

For details of the required documents under different claims, please refer to the policy terms and conditions.

索償程序

1. 申請住院免找數服務程序:

致電本公司客戶服務熱線及由您和您的主診醫生填妥住院免找數服務申請表,並在入院前不少於3個工作天交回本公司。

住院免找數服務(只限優越及尊尚計劃)

住院免找數服務由本公司所委任的服務機構代表提供服務,及此服務祇適用於香港之私家醫院。申請手續如下:

- (i) 致電客戶服務熱線+852 2903 9382索取住院評估申請表格。
- (ii) 由您和您的主診醫生填妥預先住院評估申請表之甲及乙部份,並在入院前不少於3個工作天傳真致+852 2802 6633或電郵至zurich.medical@hk.zurich.com本公司授權的服務機構代表作入院評估。
- (iii) 收到申請後,本公司所委任的服務機構代表將在3個工作天內評估您之申請及通知您申請是否得到接納。如申請被接納, 本公司所委任的服務機構代表會聯絡醫院作直接結算安排。

住院評估是基於入院前所得之資料。實際賠償金額將根據索償表格提供之資料、實際情況、保單上列明之保障項目、不承保 事項、條款及細則等所約束。

您須提供治療資料及授權本公司從您的信用卡帳戶收取醫療費用的差額(如有)。如因不受保事項的任何損傷或疾病而引致 入院,申請均不會獲接納。

2. 申請住院索償程序:

步驟1:入院後30天內通知本公司。

步驟2:填寫賠償申報表及提交所需正本的証明文件。

就有關不同索償所需的證明文件,請參閱保單條款及細則。



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.

本宣傳資料只供參考之用,並不構成保險合約的一部分。有關此項保障計劃的內容細則及不承保事項將詳細列於保單之內,如有任何差異,均以保單內之條款細則為準。如中文譯本與英文有任何歧異,均以英文本為準,蘇黎世保險有限公司對所有事項保留最終批核及決定權。

About Zurich

Being part of Zurich Insurance Group, Zurich Insurance (Hong Kong) offers a full range of flexible general insurance and life insurance products for individuals as well as corporate customers, catering to their insurance, protection and investment needs. Our presence in Hong Kong dates back to 1961. We are one of the top five general insurance providers in Hong Kong*. Zurich Insurance Group (Zurich) is a leading multi-line insurer that serves its customers in global and local markets. With about 55,000 employees, it provides a wide range of property and casualty, and life insurance products and services in more than 215 countries and territories. Zurich's customers include individuals, small businesses, and mid-sized and large companies, as well as multinational corporations. The Group is headquartered in Zurich, Switzerland, where it was founded in 1872. The holding company, Zurich Insurance Group Ltd (ZURN), is listed on the SIX Swiss Exchange and has a level I American Depositary Receipt (ZURVY) program, which is traded over-the-counter on OTCQX. Further information about Zurich is available at www.zurich.com.

* Source: Insurance Authority, based on gross premiums, 2018.

關於蘇黎世

蘇黎世保險(香港)是蘇黎世保險集團轄下之機構,竭誠為個人、商業及企業客戶提供多方 面又靈活的一般保險及人壽保險服務,照顧他們在保險、保障及投資上的需要。集團在香港 的業務始於 1961 年,至今已於本港一般保險市場上成為五大保險公司之一 *。蘇黎世保險集 團(蘇黎世)是一家全球領先的多險種保險公司,為全球及本地市場的客戶提供服務。蘇黎 世現有僱員約55,000名,為客戶提供各種財產及意外保險和人壽保險產品及服務。公司客戶 包括遍及 215 多個國家和地區的個人、大中小型企業及跨國公司。集團總部設立在瑞士蘇黎 世,公司成立於 1872 年。蘇黎世的控股公司蘇黎世保險集團公司(ZURN)在瑞士證券交易 所(SIX Swiss Exchange)上市·具有在OTCQX場外交易的一級美國存託憑證計劃(ZURVY)。 請瀏覽 www.zurich.com 了解有關蘇黎世的更多資訊。

*來源:保險業監管局,按毛保費計算,2018年。

Zurich Insurance Company Ltd (a company incorporated in Switzerland with limited liability) 蘇黎世保險有限公司(於瑞士註冊成立之有限公司)

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