





Underwritten by:

Sun Life Hong Kong Limited

(Incorporated in Bermuda with limited liability)

VHIS Certified Standard Plan

Distributed by:

Dah Sing Bank, Limited



Wouldn't it be great if

you could enjoy essential protection for your priceless health

Your greatest fortune in life is good health and peace of mind. To protect both, it's essential to have a plan that can support each step of your recovery journey, from generous coverage to quick claims, giving you the flexibility to choose private healthcare if public hospitals cannot meet your needs.

This is where Sun Life steps in – your trusted partner for life's journey and achieving life's dreams. As a certified Voluntary Health Insurance Scheme ("VHIS") Provider (VHIS Provider Registration Number: 00018) under the Health Bureau of the Government of the Hong Kong Special Administrative Region, we are pleased to present **WeHealth** (VHIS Certification Number: S00018-01-000-02), a VHIS Certified Standard Plan designed to give Hong Kong residents¹ essential medical coverage for enduring support and peace of mind.

Remark:

How can WeHealth help you?

WeHealth is an individual indemnity Hospital insurance plan that can help to provide financial security for you and your family who is 15 days to age 80. With no Lifetime Benefit Limit, no restriction in the choice of healthcare services providers and choice of ward class in Hospital, and guaranteed Renewal up to age 100⁵, you and your family could enjoy the benefits of quality medical treatment without any stress.

What's more, the qualifying premiums you pay for yourself and every dependent² you insure under this plan are eligible to apply for tax deductions, up to a limit of HKD8,000 per Insured Person per fiscal year³. You can claim tax deductions³ for as many insured dependents as you like, as long as you are the Policy Holder. This way, you can protect yourself and all your loved ones, while enjoying valuable tax benefits.

Key Features



Worldwide protection in affordable premiums without Lifetime Benefit Limit



Continued protection with guaranteed Renewal up to age 100⁵



Added convenience with cash subsidy for Day Case Procedures



Extra care for nonsurgical cancer treatment



7x24 eClaims service for streamlined financial support



Value-added services for ultimate convenience

Remarks

- 2 Dependent refers to "specified relative" defined in the Inland Revenue Ordinance (Cap. 112), subject to the then prevailing underwriting and administrative rules of Sun Life Hong Kong Limited (the "Company" or "Sun Life"). For meaning of "specified relative", please refer to the website of the Inland Revenue Department.
- Whether tax deduction is allowable for the qualified premiums paid under this Certified Plan are subject to the prevailing tax law of Hong Kong and the individual circumstances of the Policy Holder (as taxpayer in Hong Kong) and the Insured Person(s). Please refer to the website of the Inland Revenue Department and the Inland Revenue Ordinance (Cap. 112) for details. The Company and Dah Sing bank, Limited does not provide tax advice and you should consult independent tax advisor for tax advice.





WeHealth offers affordable medical protection you can rely on again and again, without limiting how much you can claim during your lifetime. To support your recovery journey, **WeHealth** reimburses your Medically Necessary treatment expenses up to a limit of HKD420,000 per Policy Year, including hospitalization costs, surgical fees, Day Case Procedures, psychiatric treatment, and more.

Except psychiatric treatment, all benefits from **WeHealth** are applicable around the globe. You are free in choosing your most trusted healthcare services providers and suitable ward class in Hospital without limitation on wherever you are. Moreover, **WeHealth** provides protection for unknown Pre-existing Conditions⁴, offering crucial support even if life takes an unexpected turn. This begins with partial coverage in the 2nd Policy Year, gradually increasing to full coverage from the 4th Policy Year onwards, as shown in the table below.

Policy Year	Coverage for unknown Pre-existing Condition(s)	
1 st Policy Year	No coverage	
2 nd Policy Year	25% reimbursement	
3 rd Policy Year	50% reimbursement	
4 th Policy Year onwards	100% reimbursement	

Remark:

4 Pre-existing Condition(s) shall mean, in respect of the Insured Person, 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. An ordinary prudent person shall be reasonably 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 the Policy Holder or the Insured Person is requested but fails to disclose to the Company upon submission of Application, that the Insured Person is suffering from a Pre-existing Condition, and such Pre-existing Condition has been treated or diagnosed or has manifested signs or symptoms 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 terms and benefits of this Certified Plan void, demand repayment of any benefits paid and/or refuse to provide coverage under the terms and benefits of the Certified Plan.





WeHealth offers guaranteed Renewal up to the age of 100⁵, you can enjoy peace of mind regardless of any change in your health conditions. Renewal premiums will be based on your attained age and the prevailing premium rates at the time of Renewal.



With advances in medical technology, simple Day Case Procedures⁶ like cataract surgery, colonoscopy, and gastroscopy can now be performed in a medical clinic, day case procedure center or Hospital, with no need for hospitalization. To help you get convenient treatment with minimal disruption to your daily routine, **WeHealth** offers a cash benefit of HKD1,000 per Day Case Procedure, with no limit on the number of Day Case Procedures you can claim for.

In addition, **WeHealth** offers a reimbursement when you visit a day clinic for pre- and post-surgical care after discharged or undergone a Day Case Procedure. You can claim a maximum of HKD580 per visit for 1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure and 3 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure), up to a limit of HKD3,000 per Policy Year.

Remarks

- 5 Subject to terms and benefits of the Certified Plan.
- 6 Please refer to www.sunlife.com.hk/wehealth_ssp_en for the Benefit Schedule and Schedule of Surgical Procedures.





If cancer strikes, **WeHealth** steps in to provide critical support by reimbursing you for Prescribed Non-surgical Cancer Treatments, up to a limit of HKD80,000 per Policy Year. This includes radiotherapy, chemotherapy, targeted therapy, immunotherapy, and hormonal therapy, giving you access to the treatment when you need it, for better support in the recovery journey.



To ensure that your claims are quick, convenient, and hassle-free, all hospital and surgical claims⁷ for **WeHealth** can be submitted through the My Sun Life HK app together with the supporting documents. This unique digital platform streamlines the claim process so you can enjoy financial support anytime, anywhere, as part of your smooth journey to recovery.

Remark:

7 Please refer to www.sunlife.com.hk/Claims_en for the hospitalization and surgical claims procedure.



To enhance your medical protection, WeHealth offers the following Value-added Services⁸ as extra safeguards.

Our Medical Concierge Services can help you choose your suitable doctor and treatment plan within a dedicated network of high-quality specialists to support you for comfortable recovery in an extensive network. Services include: • Appointment for specialist consultation, doctor referral, Designated Day Case Procedure and accessing Confinement • Booking for Confinement and treatment at our network Hospitals/clinics

Cashless Arrangement for Designated Day Case Procedure⁹

Once the cashless arrangement is approved prior to your Designated Day Case Procedure, all eligible medical expenses incurred during your Designated Day Case Procedure will be settled on your behalf¹⁰ - allowing you to focus on recovery without having to worry about making claims after performing Designated Day Case Procedure.

Hospital Admission Service in Mainland China¹¹

If you need to be admitted to a network Hospital while you are in Mainland China, you do not need to pay any deposit upfront for admission.

Family Care Benefit

If you are Confined in Hong Kong at least 10 consecutive days, you can arrange the following service from the third-party service provider to assist you getting back to normal life.

- Spouse Care
- Parental Care
- Child Care
- Pet Care
- Home Care
- Hospital Discharge Assistance

Worldwide Emergency Assistance Benefits

With our free 24-hour Worldwide Emergency Assistance Benefits, you can enjoy the assurance of emergency medical assistance wherever you travel, including:

- Medical evacuation and repatriation
- Pre-paid Hospital admission deposit
- Transportation of essential medication and medical equipment, and more

Remarks:

- 8 The Value-added Services are provided by third-party company and are not guaranteed to be renewable. Please refer to "Value-added Services" section under our company website www.sunlife.com.hk for more details. Sun Life is not responsible for any act, negligence or failure to act on the part of the designated third-party company or service provider. Sun Life will not be liable for any loss or damage, costs or other expenses whatsoever and howsoever, directly or indirectly, caused by, arising from or in connection with the services.
- 9 You may need to settle your shortfall of your medical bill. Please refer to the "Value-added Services" section under our company website www.sunlife.com.hk for details.
- 10 Approval for this service is subject to the relevant terms and conditions and the acceptance of the Letter of Guarantee (LoG) by the designated Hospitals. The giving of the LoG or subsequent LoG from Sun Life or our designated medical service providers shall not be deemed as admission of our liability to pay and/or reimburse the Policy Holder under the Policy or a waiver of any breach of the Terms and Benefits of the Policy. Please refer to the "Value-added Services" section under our company website www.sunlife.com.hk for pre-approval procedures and the designated clinical surgery list.
- 11 We facilitate the cashless arrangement of Hospital deposit fees for maximum amount of RMB40,000 only, and all other Confinement fees and the deposit fee shall be settled by the Insured Person with the Hospital upon discharge. Prior approval is required and approval for this service is subject to the relevant terms and conditions.

Case Study

Mr. A wants to get affordable medical protection for his wife, whose savings will not be enough to cover her medical expenses throughout their golden years due to rising medical costs. He takes up **WeHealth** for his wife, who is healthy at the start of the Policy.





Mr. A (Policy Holder), age 55 Mrs. A (Insured Person), age 48

WeHealth

Annual Benefit Limit: HKD420,000 per Policy Year Lifetime Benefit Limit: Nil

WeHealth



Tax deduction³ benefit for Mr. A

	Year 1	Year 2	Year 3 and onwards
Annual premium paid	HKD3,621	HKD3,783	Continuous tax
Tax-deductible amount	HKD3,621	HKD3,783	deduction benefit as long as Mr. A renews
Amount of tax saved	HKD3,621 x 15%* = HKD543	HKD3,783 x 15%* = HKD567	the WeHealth Policy.

^{*}Assume the tax rate paid by Mr. A is 15%



Mrs. A requires to undergo open reduction for arm +/- internal fixation (Surgery category: Major) and hospitalize for 3 days.

Items	Actual Expenses	Benefit amount payable for WeHealth	
Room and board	HKD2,400 (HKD800 x 3)	HKD2,250 (HKD750 x 3)	
Miscellaneous charges	HKD12,000	HKD12,000	
Attending doctor's visit fee	HKD2,400 (HKD800 x 3)	HKD2,250 (HKD750 x 3)	
Surgeon's fee	HKD30,000	HKD25,000	
Anaesthetist's fee	HKD10,000	HKD8,750 (HKD25,000 x 35%)	
Operating theatre charges	HKD28,000	HKD8,750 (HKD25,000 x 35%)	
Prescribed Diagnostic Imaging Tests ¹² - MRI of upper limb	HKD5,800	HKD4,060 (HKD5,800 x 70%)	
Pre- and post-Confinement/Day Case Procedure outpatient care	HKD1,650 (HKD550 x 3)	HKD1,650 (HKD550 x 3)	
	Total expense for Mrs. A is HKD92,250	Total claim amount for Mrs. A is HKD64,710	





Guaranteed Renewal up to age 100

Purchase WeHealth

Mrs. A is healthy at the start of the Policy.

3rd Policy Year

Mrs. A falls down from stairs and is injured with fracture of arm, she needs to undergo surgical operation and hospitalize for 3 days.

The above case is an example for illustrative purpose only. The Company shall only reimburse "Reasonable and Customary" and "Medically Necessary" Eligible Expenses in accordance with the Terms and Benefits of this Certified Plan. For details on benefit payable items, please refer to Benefit Schedule of this product brochure.

Remark:

12. Prescribed Diagnostic Imaging Tests are subject to 30% coinsurance.

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Key Product Information

VHIS Certified Standard Plan	WeHealth	
Type of Medical Insurance Product	Basic plan	
Annual Benefit Limit	HKD420,000 per Policy Year	
Lifetime Benefit Limit	Nil	
Issue Age ¹³	15 days-age 80	
Benefit Term	Guaranteed renewable up to age 100 ⁵ (Please note that benefits may be revised by Sun Life to reflect various factors including but not limited to medical developments and medical inflation upon Renewal. The terms and benefits will not be less favourable than the latest version of the Standard Plan terms and benefits published by the Government at the time of Renewal, as long as Sun Life maintains the registration as a VHIS provider.)	
Premium Payment Term	To age 100	
Premium Payment Mode	Annually/Semi-Annually/Monthly	
Currency	HKD	
Premium Structure	Premium amount is determined based on the attained age and varies with age and other factors. Premiums are not guaranteed and may be revised to reflect policy experience (e.g. claim experience, medical inflation and benefit changes over time).	

Benefit Schedule

Benefit items ^{14,15}	Benefit limit			
(a) Room and board	HKD750 per day Maximum 180 days per Policy Year			
(b) Miscellaneous charges	HKD14,000 per Policy Year			
(c) Attending doctor's visit fee	HKD750 per day Maximum 180 days per Policy Ye	ar		
(d) Specialist's fee ¹⁶	HKD4,300 per Policy Year			
(e) Intensive care	HKD3,500 per day Maximum 25 days per Policy Year	r		
	Subject to surgical category for the Surgical Procedures ⁶ :	ne surgery/procedure in the Schedule of		
	Surgical category	Benefit limit (per surgery)		
(f) Surgeon's fee	Complex	HKD50,000		
	Major	HKD25,000		
	Intermediate	HKD12,500		
	Minor	HKD5,000		
(g) Anaesthetist's fee	35% of Surgeon's fee payable ¹⁹			
(h) Operating theatre charges	35% of Surgeon's fee payable ¹⁹			
(i) Prescribed Diagnostic Imaging Tests ^{16,17}	HKD20,000 per Policy Year Subject to 30% Coinsurance			
(j) Prescribed Non-surgical Cancer Treatments ¹⁸	HKD80,000 per Policy Year			
(k) Pre- and post-Confinement/Day Case Procedure outpatient care ¹⁶	 HKD580 per visit, up to HKD3,000 per Policy Year 1 prior outpatient visit or Emergency consultation per Confinement/ Day Case Procedure 3 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure) 			
(l) Psychiatric treatments (applicable to Hong Kong only)	HKD30,000 per Policy Year			

Remarks

- 14 Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above.
- 15 All benefits are not subject to any restriction in the choice of healthcare services providers and ward class in Hospital. All benefits are applicable worldwide except for psychiatric treatments which shall be payable for the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong as recommended by a Specialist.
- 16 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.
- 17 Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
- 18 Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- 19 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.

Other benefits			
(1) Death or surgical benefit due to medical negligence	Death benefit: HKD80,000 Surgery benefit: HKD80,000 per Policy Year		
(2) Compassionate death benefit	HKD10,000		
(3) Day surgery cash benefit	HKD1,000 per surgical procedure		

Other limits		
Annual Benefit Limit for benefit items (a) – (l)	HKD420,000 per Policy Year	
Lifetime Benefit Limit for benefit items (a) – (l)	Nil	

Key Product Risks:

1. Non-guaranteed premium rate

Premium of this Certified Plan is expected to increase with age and may be reviewed and adjusted from time to time, in order to reflect the experience and change in future expectation. We reserve the right to adjust the premium for any group of insureds with similar risk profiles at every benefit anniversary during the premium payment term. Factors include but not limited to the following would be considered and reflected during the review:

- a. Claim costs incurred under this Certified Plan and the expected claim costs in the future;
- b. Expenses directly related to and indirect expenses allocated to the Policy.

2. Adjustment of premium

Irrespective of whether the Company revises these Terms and Benefits upon Renewal, the Company shall have the right to adjust the Standard Premium according to the prevailing Standard Premium Schedule adopted by the Company on an overall Portfolio basis. For the avoidance of doubt, if the Premium Loading is set as a percentage of the Standard Premium (i.e. rate of Premium Loading), the amount of Premium Loading payable shall be automatically adjusted according to the change in Standard Premium.

During each Policy Year and upon Renewal, the Company shall not impose any additional rate of Premium Loading (or any additional amount of Premium Loading if the Premium Loading is set in monetary terms rather than as a percentage of the Standard Premium) or Case-based Exclusion(s) on the Insured Person by reason of any change in the Insured Person's health conditions.

For factors that may affect Premium Loading, please refer to Frequently Asked Questions in our website www.sunlife.com.hk/en/insurance/voluntary-health-insurance-scheme/.

3. Premium payment term and related cost

We will Renew this Policy automatically at each anniversary of this Policy for another Policy Year provided that premiums are paid on the premium due date. Part of the premiums paid will be used to pay for the insurance and related costs. If you do not pay a premium on or before the premium due date, a grace period of 31 days from its due date will be allowed for the payment, during which time this Policy will continue in effect. If a premium has not been paid to us by the date on which the grace period expires, the Policy will lapse automatically on the due date.

4. Inflation risk

The cost of living in the future is likely to be higher than it is today due to inflation, so the benefit may be insufficient to meet your needs even if we meet our contractual obligation. You should hence consider the impact of inflation when you plan the benefit.

5. Credit risk

This Certified Plan is an insurance Policy issued by Sun Life Hong Kong Limited and your benefits are subject to the paying ability of Sun Life Hong Kong Limited. In the event that we become insolvent and unable to meet the contractual obligation under the Policy, you may lose all or part of your premiums paid and benefits.

6. Policy termination

This Policy shall be automatically terminated on the earliest of the followings:

- a. where this Policy is terminated due to non-payment of premiums after the grace period of thirty one (31) days after the due date:
- b. the day immediately following the death of the Insured Person; or
- c. the Company has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this Policy;

Termination shall be effective at 00:00 hours of the effective date of termination.

7. Unknown Pre-existing Conditions

Eligible Expenses arising from Pre-existing Condition(s) that the Policy Holder and/or Insured Person was not aware and would not reasonably have been aware of at the time of submission of Application, including any updates of and changes to the required information (if so requested by the Company under Section 8 of Part 1 of the Terms and Benefits of Certified Plan), shall be payable in accordance with the Terms and Benefits, subject to the following waiting period and reimbursement arrangement:

1st Policy Year	No coverage
2 nd Policy Year	25% reimbursement
3 rd Policy Year	50% reimbursement
4 th Policy Year onwards	Full coverage

For example, Mr. B is diagnosed with coronary heart disease in the 3^{rd} policy year and the amount payable is HKD30,000. However, if it is arising from Pre-existing Condition that Mr. B was not aware and would not reasonably have been aware of at the time of submission of Application, the amount payable will be HKD30,000 x 50% = HKD15,000.

Limitation of Eligible Expenses:

- a. "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:
 - i. require the expertise of, or be referred by, a Registered Medical Practitioner;
 - ii. be consistent with the diagnosis and necessary for the investigation and treatment of the Disability;
 - iii. 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;
 - iv. 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
 - v. 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.
- b. "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):
 - i. treatment or service fee statistics and surveys in the insurance or medical industry;
 - ii. internal or industry claim statistics;
 - iii. gazette published by the Government; and/or
 - iv. other pertinent source of reference in the locality where the treatments, services or supplies are provided
- c. Please refer to the Terms and Benefits of the Certified Plan for the detailed definitions of 'Reasonable and Customary' and 'Medically Necessary'.

General Exclusions:

The Company shall not pay any benefits in relation to or arising from the following expenses:

- 1. Expenses incurred for treatments, procedures, medications, tests or services which are not Medically Necessary.
- 2. Expenses incurred for the whole or part of the Confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a Registered Medical Practitioner for Medically Necessary investigation or treatment of a Disability which cannot be effectively performed in a setting for providing Medical Services to a Day Patient.
- 3. Expenses arising from Human Immunodeficiency Virus ("HIV") and its related Disability, which is contracted or occurs before the Policy Effective Date. Irrespective of whether it is known or unknown to the Policy Holder or the Insured Person at the time of submission of Application, such Disability shall be generally excluded from any coverage of the terms and benefits of this Certified Plan if it exists before the Policy Effective Date. If evidence of proof as to the time at which such Disability is first contracted or occurs is not available, manifestation of such Disability within the first five (5) years after the Policy Effective Date shall be presumed to be contracted or occur before the Policy Effective Date, while manifestation after such five (5) years shall be presumed to be contracted or occur after the Policy Effective Date.
 - However, the exclusion under this entire Section 3 shall not apply where HIV and its related Disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the terms and benefits of this Certified Plan shall apply.
- 4. Expenses incurred for Medical Services as a result of Disability arising from or consequential upon the 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 (except for HIV and its related Disability, where Section 3 of this General Exclusions applies).

- 5. Any charges in respect of services for:
 - a. beautification or cosmetic purposes, unless necessitated by Injury caused by an Accident and the Insured Person receives the Medical Services within ninety (90) days of the Accident; or
 - b. correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
- 6. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the Insured Person and/or his family members, Hair Mineral Analysis (HMA), immunisation or health supplements. For the avoidance of doubt, this Section 6 does not apply to:
 - a. treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other Medical Services provided;
 - b. removal of pre-malignant conditions; and
 - c. treatment for prevention of recurrence or complication of a previous Disability.
- 7. Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for Emergency Treatment and surgery during Confinement arising from an Accident. Follow up dental treatment or oral surgery after discharge from Hospital shall not be covered.
- 8. Expenses incurred for Medical Services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
- 9. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during Confinement or on the day of the Day Case Procedure.
- 10. Expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydropathy, homeotherapy and other similar treatments.
- 11. Expenses incurred for 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. Expenses incurred for Medical Services provided as a result of 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 medical program or insurance policy provided by any government, company or other third party.
- 14. Expenses incurred for treatment for Disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

Important Notes:

This brochure is for reference only and does not contain the full Terms and Benefits of this Certified Plan. Please refer to a sample of this Certified Plan on our website for details including but not limited to definitions of capitalized terms and full terms and conditions of coverage and exclusions.

1. Levy on insurance premium

Effective from January 1, 2018, all Policy Holders are required to pay a levy on their insurance premium for all new and inforce Policies collected by the Insurance Authority through insurance companies. The applicable levy rate will be determined by reference to the Policy Effective Date or anniversary of the Policy. For levy details, please visit our website at www.sunlife.com.hk/levy_eng or Insurance Authority's website at www.ia.org.hk.

2. Cancellation right

If you are not fully satisfied with your Policy, you have the right to cancel your Policy within the cooling-off period and obtain a refund of any premium and levy paid.

By giving us a written request, your Policy will then be cancelled and any premium and levy paid will be refunded, provided that: (1) your written request for cancellation must be signed by you and received directly by our office (G/F, Cheung Kei Center Tower B, No. 18 Hung Luen Road, Hunghom, Kowloon) or through email (hk_csd@sunlife.com) within 21 calendar days immediately following the day of delivery of the Policy or the cooling-off notice informing you or your representative about the availability of the Policy and the expiry date of the cooling-off period, whichever is earlier, and (2) no refund of any premium and levy paid can be made if any payment from the Company under the Policy has been made prior to the request for cancellation.

After the cooling-off period, you can request cancellation of this Policy before the end of policy term by giving 30 days prior written notice to the Company. However, no refund of any premium and levy paid can be made under the Policy.

Important Notes from the Insurance Agent of Dah Sing Bank, Limited:

This brochure is for reference only and does not contain the full Terms and Benefits of this Certified Plan. Please refer to a sample of this Certified Plan on our website for details including but not limited to definitions of capitalized terms and full terms and conditions of coverage, and exclusions.

1. NOT a bank savings plan

This plan is an insurance plan without savings element. It is NOT a bank deposit nor a bank savings plan with free life insurance coverage. Your contribution is a payment of life insurance premiums to Sun Life Hong Kong Limited but NOT a banking transaction like placement of savings deposit, withdrawal from a bank or fund transfer.

2. Suicide clause

If the Insured Person under this Policy dies by suicide, whether sane or insane, within 1 year of the Policy Effective Date, then we will not pay the Compassionate death benefit as set out in the Terms and Benefits of this Certified Plan.

3. Guaranteed Renewal up to Age 100

This Policy is a yearly renewable plan. The Renewal of this Policy is guaranteed provided this plan is continually offered by Sun Life. The plan will remain Renewable as long as Sun Life maintains its registered status as a VHIS provider. For details, please refer to the Terms and Benefits of this Certified Plan.

4. Claims procedures

All claims incurred in respect of the Terms and Benefits shall be submitted to the Company within ninety (90) days after the date on which the Insured Person is discharged from the Hospital, or (where there is no Confinement) the date on which the relevant Medical Service is performed and completed. Claims under this insurance plan must be made by you to Sun Life Hong Kong Limited directly. You can get the appropriate claim form by calling Sun Life Hong Kong Limited Customer Service Hotline (852) 2103 8928 in Hong Kong or visiting www.sunlife.com.hk or any Sun Life Hong Kong Limited Customer Service Centre. For details, please refer to the Terms and Benefits of this Certified Plan provided by Sun Life Hong Kong Limited. If you wish to know more about claim related matter, you may visit our company website www.sunlife.com.hk/en/claims/.

5. Product features revision

Sun Life Hong Kong Limited reserves the right to revise the benefit structure, terms and conditions and/or product features, so as to keep pace with the times for medical advancement and to provide you with continuous protection or any changes in requirements for complying with the VHIS. We will give you a written notice of any revision 30 days before the end of policy year or upon renewal.

6. Prepayment arrangement

Prior to the settlement of renewal premium due, prepaid premium will accumulate interest with Sun Life Hong Kong Limited, in a designated account of the policy but will not form part of the paid premium until it is payable, and at a non-guaranteed interest rate which may vary from time to time without prior notice and may be higher or lower than that illustrated in the illustration of the policy. If the prepaid premium is insufficient to pay renewal premium due, the Policy Holder is required to pay the outstanding premium in order to keep the policy in force, otherwise the policy may lapse after the grace period.

Only full withdrawal of the balance of the prepaid premium and levy on prepaid premium will be accepted by Sun Life Hong Kong Limited. Upon policy cancellation or full withdrawal of the balance of the prepaid premium and levy on prepaid premium before the end of the premium payment term, the relevant balance of the prepaid premium and levy on prepaid premium shall be returned to the Policy Holder, and any interest on the balance of the prepaid premium and levy on prepaid premium of that policy year will be forfeited.

Glossary of Terminology:

The following terminologies used in **WeHealth** are different from Sun Life's existing terminologies presented in the forms, correspondences, e-Services, My Sun Life HK mobile app and other platforms (if applicable). We therefore provide you the mapping table for your easy reference.

Terminologies in WeHealth	Existing Terminologies
Policy Holder	Policy Owner
Insured Person	Insured
Policy Issuance Date	Issue Date
Policy Effective Date	Policy Date
Policy Schedule	Policy Summary
Case-base Exclusion	Exclusion
Confinement/Confined	Admission
Premium Loading	Loading
Schedule of Surgical Procedures	Surgical Schedule

Growing Brighter with Brilliant Company Awards



Awards for Excellence in Finance 2024 – Ming Pao

Award for Excellence in GBA Medical Services



10Life 5-Star Insurance Award 2024

Life Insurer of the Year 15 5-Star Accolades Awards



The Hong Kong Insurance Awards 2023 - The Hong Kong Federation of Insurers

Most Innovative Product and Service (Life Insurance)

Outstanding Claims Management
Outstanding Digital Marketing Campaign



Financial Services Awards of Excellence 2023 - Hong Kong Economic Journal

ESG Savings and Insurance



Excellence Awards 2023 - Hong Kong Economic Times

Excellence in Sustainable Wealth Inheritance (Insurance)

Excellence in Greater Bay Area Insurance Customer Service



GBA Insurance Awards 2023 – Metro Finance

Outstanding Marketing Strategies – ESG



Corporate Brand Awards of Excellence 2023 - Hong Kong Economic Journal

Wealth Inheritance and Saving Insurance Plan Award

High-End Cross Border Customer Service Experience Award



Outstanding ESG Enterprises Recognition Scheme 2023 - Sing Tao News Corporation Limited x The Hong Kong Polytechnic University

ESG Recommendation Award
Outstanding ESG Corporate Governance Award



Sing Tao Service Awards 2023 - Sing Tao Daily

Greater Bay Area Wealth Inheritance Services (Hong Kong)

Voluntary Health Insurance Scheme



iMoney Enterprise Brand Awards 2022 – iMoney

Best Green Insurance (Financial Service Category)

Most Caring Society Insurance (Financial Service Category)



Now Business News Channel Leadership Business Award 2022

Greater Bay Area Financial Insurance Award of Excellence



The Hong Kong Council of Social Service

Caring Company 22nd consecutive year (2002-2024)

MPF Awards



"The 2023 MPF Awards" by MPF Ratings



Hong Kong 2022 Refinitiv Lipper Fund Awards

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Sun Life is a leading international financial services organization providing a diverse range of products and services to individuals and corporate clients through our professional and experienced distributors. We provide comprehensive solutions to address your life and health protection, wealth management, and retirement planning needs. Besides offering a wide range of products, we are also an experienced group benefit and third-party administrator in the pension administration business.

We truly understand the needs of your various life stages and offer a wide range of products including Savings & Protection, Health & Accident, Universal Life, and Investment-Linked Assurance Schemes. **WeHealth** is part of Sun Life's Health & Accident series, providing effective financial support when you need it.

Sun Life Product Portfolio



What's next? You can find out more:

- **▶** Website: sunlife.com.hk
- ▶ Client Service Hotline: 2103 8928
- ▶ Please contact your Advisor

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Applicant should seek independent professional advice before making any decision if necessary. **WeHealth** is underwritten by Sun Life Hong Kong Limited. Dah Sing Bank, registered as a licensed insurance agency, is the authorized licensed insurance agency of Sun Life Hong Kong Limited and distributes the insurance products for Sun Life Hong Kong Limited. **WeHealth** is the product of Sun Life Hong Kong Limited but not the product of Dah Sing Bank. In respect of an eligible dispute (as defined in the Terms of Reference for Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between Dah Sing Bank and the client out of the selling process or processing of the related transaction, Dah Sing Bank is required to enter into a Financial Dispute Resolution Scheme process with the client.

The service(s)/product(s) mentioned herein is/are not targeted at clients in the EU. "Sun Life", the "Company", "we" or "us" refers to Sun Life Hong Kong Limited. "Dah Sing Bank" refers to Dah Sing Bank, Limited.

Sun Life Hong Kong Limited

(Incorporated in Bermuda with limited liability)

Client Service Centre

G/F, Cheung Kei Center Tower B, No. 18 Hung Luen Road, Hunghom, Kowloon

Client Service Hotline: 2103 8928

Fax: 2103 8938 sunlife.com.hk

A member of the Sun Life group of companies. Head Office in Toronto, Canada.







WeHealth (VHIS Certified Standard Plan) 永明港健康醫療保(自願醫保認可產品標準計劃)



Annual Standard Premium schedule (in HKD) 年繳**標準保費**表(港元)

Attained Age 實際年齡	Male 男	Female 女	Attained Age 實際年齢	Male 男	Female 女
0	2,280	1,746	50	3,488	3,951
1	2,280	1,746	51	3,664	4,132
2	2,280	1,746	52	3,847	4,320
3	2,280	1,746	53	4,040	4,517
4	2,091	1,624	54	4,243	4,698
5	1,902	1,502	55	4,500	4,886
6	1,713	1,380	56	4,680	5,082
7	1,524	1,258	57	4,914	5,286
8	1,336	1,138	58	5,161	5,498
9	1,336	1,138	59	5,419	5,682
10	1,336	1,138	60	5,692	5,873
11	1,336	1,138	61	5,958	6,052
12	1,336	1,138	62	6,237	6,234
13	1,336	1,138	63	6,530	6,424
14	1,336	1,138	64	6,835	6,656
15	1,336	1,138	65	7,155	6,895
16	1,318	1,328	66	7,491	7,143
17	1,318	1,328	67	7,842	7,401
18	1,318	1,328	68	8,209	7,667
19	1,318	1,328	69	8,594	8,035
20	1,318	1,328	70	8,996	8,419
21	1,330	1,381	71	9,448	8,851
22	1,342	1,434	72	9,924	9,304
23	1,354	1,487	73	10,421	9,782
24	1,366	1,540	74	10,946	10,259
25	1,378	1,592	75	11,610	10,867
26	1,422	1,665	76	12,194	11,396
27	1,469	1,741	77	12,807	11,951
28	1,518	1,821	78	13,449	12,534
29	1,568	1,881	79	14,125	12,984
30	1,620	1,943	80	14,835	13,448
31	1,664	1,995	81	15,207	13,597
32	1,709	2,049	82	15,589	13,747
33	1,755	2,104	83	15,979	13,899
34	1,802	2,157	84	16,381	14,235
35	1,888	2,256	85	16,792	14,580
36	1,939	2,313	86	17,213	14,935
37	1,991	2,373	87	17,646	15,296
38	2,045	2,433	88	18,088	15,668
39	2,100	2,492	89	18,542	16,061
40	2,157	2,552	90	19,007	16,464
41	2,263	2,671	91	19,430	16,831
42	2,375	2,795	92	19,865	17,205
43	2,492	2,925	93	20,307	17,588
44	2,614	3,053	94	20,760	17,980
45	2,743	3,185	95	21,222	18,380
46	2,878	3,325	96	21,696	18,789
47	3,020	3,470	97	22,180	19,206
48	3,169	3,621	98	22,673	19,633
49	3,325	3,783	99	23,180	20,070

WeHealth (VHIS Certified Standard Plan) 永明港健康醫療保(自願醫保認可產品標準計劃)

Semi-annual Standard Premium schedule (in HKD)

半年繳標準保費表(港元)

Attained Age 實際年齡	Male 男	Female 女	Attained Age 實際年齡	Male 男	Female 女
0	1,185.60	907.92	50	1,813.76	2,054.52
1	1,185.60	907.92	51	1,905.28	2,148.64
2	1,185.60	907.92	52	2,000.44	2,246.40
3	1,185.60	907.92	53	2,100.80	2,348.84
4	1,087.32	844.48	54	2,206.36	2,442.96
5	989.04	781.04	55	2,340.00	2,540.72
6	890.76	717.60	56	2,433.60	2,642.64
7	792.48	654.16	57	2,555.28	2,748.72
8	694.72	591.76	58	2,683.72	2,858.96
9	694.72	591.76	59	2,817.88	2,954.64
10	694.72	591.76	60	2,959.84	3,053.96
11	694.72	591.76	61	3,098.16	3,147.04
12	694.72	591.76	62	3,243.24	3,241.68
13	694.72	591.76	63	3,395.60	3,340.48
14	694.72	591.76	64	3,554.20	3,461.12
15	694.72	591.76	65	3,720.60	3,585.40
16	685.36	690.56	66	3,895.32	3,714.36
17	685.36	690.56	67	4,077.84	3,848.52
18	685.36	690.56	68	4,268.68	3,986.84
19	685.36	690.56	69	4,468.88	4,178.20
20	685.36	690.56	70	4,677.92	4,377.88
21	691.60	718.12	71	4,912.96	4,602.52
22	697.84	745.68	72	5,160.48	4,838.08
23	704.08	773.24	73	5,418.92	5,086.64
24	710.32	800.80	74	5,691.92	5,334.68
25	716.56	827.84	75	6,037.20	5,650.84
26	739.44	865.80	76	6,340.88	5,925.92
27	763.88	905.32	77	6,659.64	6,214.52
28	789.36	946.92	78	6,993.48	6,517.68
29	815.36	978.12	79	7,345.00	6,751.68
30	842.40	1,010.36	80	7,714.20	6,992.96
31	865.28	1,037.40	81	7,907.64	7,070.44
32	888.68	1,065.48	82	8,106.28	7,148.44
33	912.60	1,094.08	83	8,309.08	7,227.48
34	937.04	1,121.64	84	8,518.12	7,402.20
35	981.76	1,173.12	85	8,731.84	7,581.60
36	1,008.28	1,202.76	86	8,950.76	7,766.20
37	1,035.32	1,233.96	87	9,175.92	7,953.92
38	1,063.40	1,265.16	88	9,405.76	8,147.36
39	1,092.00	1,295.84	89	9,641.84	8,351.72
40	1,121.64	1,327.04	90	9,883.64	8,561.28
41	1,176.76	1,388.92	91	10,103.60	8,752.12
42	1,235.00	1,453.40	92	10,329.80	8,946.60
43	1,295.84	1,521.00	93	10,559.64	9,145.76
44	1,359.28	1,587.56	94	10,795.20	9,349.60
45	1,426.36	1,656.20	95	11,035.44	9,557.60
46	1,496.56	1,729.00	96	11,281.92	9,770.28
47	1,570.40	1,804.40	97	11,533.60	9,987.12
48	1,647.88	1,882.92	98	11,789.96	10,209.16
49	1,729.00	1,967.16	99	12,053.60	10,436.40

The above table is for illustrative purpose only. 以上只供說明之用。

WeHealth (VHIS Certified Standard Plan) 永明港健康醫療保(自願醫保認可產品標準計劃)

Monthly Standard Premium schedule (in HKD)

月繳標準保費表(港元)

Attained Age 實際年齡	Male 男	Female 女	Attained Age 實際年齡	Male 男	Female 女
0	201.40	154.23	50	308.11	349.00
1	201.40	154.23	51	323.65	364.99
2	201.40	154.23	52	339.82	381.60
3	201.40	154.23	53	356.87	399.00
4	184.70	143.45	54	374.80	414.99
5	168.01	132.68	55	397.50	431.60
6	151.31	121.90	56	413.40	448.91
7	134.62	111.12	57	434.07	466.93
8	118.01	100.52	58	455.89	485.66
9	118.01	100.52	59	478.68	501.91
10	118.01	100.52	60	502.79	518.78
11	118.01	100.52	61	526.29	534.59
12	118.01	100.52	62	550.93	550.67
13	118.01	100.52	63	576.82	567.45
14	118.01	100.52	64	603.76	587.95
15	118.01	100.52	65	632.02	609.06
16	116.42	117.31	66	661.70	630.96
17	116.42	117.31	67	692.71	653.75
18	116.42	117.31	68	725.13	677.25
19	116.42	117.31	69	759.14	709.76
20	116.42	117.31	70	794.65	743.68
21	117.48	121.99	71	834.57	781.84
22	118.54	126.67	72	876.62	821.85
23	119.60	131.35	73	920.52	864.08
24	120.66	136.03	74	966.90	906.21
25	121.72	140.63	75	1,025.55	959.92
26	125.61	147.07	76	1,077.14	1,006.65
27	129.76	153.79	77	1,131.28	1,055.67
28	134.09	160.85	78	1,187.99	1,107.17
29	138.51	166.15	79	1,247.71	1,146.92
30	143.10	171.63	80	1,310.42	1,187.91
31	146.99	176.22	81	1,343.28	1,201.07
32	150.96	180.99	82	1,377.03	1,214.32
33	155.02	185.85	83	1,411.48	1,227.74
34	159.18	190.53	84	1,446.99	1,257.42
35	166.77	199.28	85	1,483.29	1,287.90
36	171.28	204.31	86	1,520.48	1,319.26
37	175.87	209.61	87	1,558.73	1,351.15
38	180.64	214.91	88	1,597.77	1,384.01
39	185.50	220.13	89	1,637.88	1,418.72
40	190.53	225.43	90	1,678.95	1,454.32
41	199.90	235.94	91	1,716.32	1,486.74
42	209.79	246.89	92	1,754.74	1,519.77
43	220.13	258.37	93	1,793.78	1,553.61
44	230.90	269.68	94	1,833.80	1,588.23
45	242.30	281.34	95	1,874.61	1,623.57
46	254.22	293.71	96	1,916.48	1,659.69
47	266.77	306.52	97	1,959.23	1,696.53
48	279.93	319.85	98	2,002.78	1,734.25
49	293.71	334.16	99	2,047.57	1,772.85
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The above table is for illustrative purpose only. 以上只供說明之用。

Remarks:

- 1. The amounts shown in blue rows are only applicable to policy Renewals.
- 2. The annual, semi-annual and monthly Standard Premium schedules ("Standard Premium Schedules") are applicable to both non-smoker and smoker, male and female. The Standard Premium Schedules do not include levy which is collected by the Insurance Authority.
- 3. Standard Premium is not guaranteed and is expected to increase with age. It may be revised to reflect the medical inflation, experience, change in future expectation and benefit changes over time. Irrespective of whether the Company revises the Terms and Benefits of this Policy upon Renewal, the Company shall have the right to adjust the Standard Premium according to the prevailing Standard Premium Schedules adopted by the Company on an overall Portfolio basis.
- 4. The Standard Premium Schedules are reference only and are subject to change by Sun Life Hong Kong Limited from time to time without notice.

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- 1. 在藍色方格內之保費金額只適用於續保。
- 2. 上述年繳、半年繳及月繳**標準保費**表 (「**標準保費**表」)適用於非吸煙者及吸煙者、男性及女性。**標準保費**表並未包括由保險業監管局 徵收的保費徵費。
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Sun Life Hong Kong Limited

(Incorporated in Bermuda with limited liability)

Client Service Centre

G/F, Cheung Kei Center Tower B, No. 18 Hung Luen Road, Hunghom, Kowloon

Client Service Hotline: 2103 8928 Fax: 2103 8938

sunlife.com.hk

香港永明金融有限公司

(於百慕達註冊成立之有限責任公司)

客戶服務中心

九龍紅磡紅鸞道 18 號祥祺中心 B座地下

客戶服務熱線: 2103 8928 傅真: 2103 8938

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永明金融集團成員之一 總公司設於加拿大多倫多 2023年7月編印 由香港永明金融有限公司刊發