

Healthy Medical Comprehensive Protection

Coping with the increase customer demand for medical protection and the dramatic rise of medical cost in Hong Kong, Bank of China Group Insurance Company Limited (“BOCG Insurance”) is delighted to present the newly-launched Healthy Medical Comprehensive Protection (“the Plan”). This comprehensive plan puts three basic benefits including Hospital and Surgical, Supplementary Major Medical and Hospital Cash under one roof. To better meet your needs, the Plan also provides you with the choice of optional cover such as Out-patient, Dental, Maternity or Critical Illness to give you and/or your family members a total comprehensive health guard.

Product Highlights:

1. Guaranteed lifetime renewal

The Plan offers you guaranteed lifetime renewal for Hospital and Surgical, Out-patient and Dental benefits. Regardless of the insured person’s health or claims condition, BOCG Insurance will not impose any additional premium or terms on the insured person after the inception date of their cover. However, BOCG Insurance reserves the right to amend or adjust the premium and terms for all policies covered under Healthy Medical Comprehensive Protection.

2. Premium Discount

- If two or more family members¹ are insured under the same policy, you can enjoy 10% discount on premium;
- An insured person with no claim made in basic benefits for 3 consecutive policy years or above will be entitled to receive 15% renewal premium discount on basic benefit in the next policy year.

3. Flexible Combination²

Each family member can opt to take up different plan and optional benefits³ under the same policy. Child(ren)⁴ can be insured on his/her own but the application must be submitted by the parent.

4. An array of supreme services

- In addition to 24-hour Worldwide Emergency Assistance Service, a hospital deposit guarantee of HK\$40,000 will be provided in the event of emergency overseas hospital confinement;
- 15-day free policy review period⁵;
- You can visit BOCG Insurance’s website anytime, anywhere for premium calculation, claim status, claim record, Body Mass Index enquiry, downloading of policy wordings, claim forms and details of network doctor, etc.

5. Free health Check-up

In the first year of insurance, each insured person will be entitled to a basic health check-up plan. Once every 2 consecutive years of insurance thereafter, a comprehensive health check-up plan for male, female or child will be provided.

Remarks :

1. Family members mean the insured and/or his/her legally married spouse and/or his/her child(ren).
2. Different insured persons under the same policy can apply for different basic benefits, plan and optional benefits.

3. Insured person must insure basic benefits prior to the application of optional benefits.
4. Child(ren) means unmarried child(ren) who is/are from 15 days to 17 years old , or full-time student(s) aged 23 or below.
5. Your policy will become effective after 10 working days upon receipt and acceptance of your application by BOCG Insurance. If the policy does not suit your need, you may return the policy together with a written notice to BOCG Insurance for cancellation within 15 days after the policy effective date (If you have received the policy or any other relevant document(s), please return the full set to BOCG Insurance). If no claim has been made by the insured person during the review period, all paid premium will be refunded.

I. Basic Benefits⁶ – enroll in all or 2 out of 3

Insured Items and Coverage		Maximum Limit (HK\$) (per insured person)			
A	Hospital and Surgical Benefits (per disability) - compulsory item	Plan 1	Plan 2	Plan 3	Plan 4 (Medical top up plan) ⁷
	1. Room and Board (maximum of 100 days) , each day limit	\$500	\$1,150	\$2,500	Maximum annual overall limit is \$150,000 and 50% reimbursement for each claim and no item limit is applied. Note: This benefit will become invalid if the insured person does not own a valid hospital & surgical insurance upon submission of claims.
	2. Physician’s Visit Fees (maximum of 100 days), (including follow up consultations immediately within 6 weeks after discharged from a non-surgical hospitalization), each day limit	\$500	\$1,150	\$2,500	
	3. Hospital Services Fees	\$10,000	\$15,000	\$22,500	
	4. Surgical Expenses (payable in accordance with “Classification Schedule” and to include 2 pre-surgical assessments and the post–surgical care within 6 weeks after discharge)				
	- Complex	\$25,000	\$40,000	\$60,000	
	- Major	\$15,000	\$25,000	\$40,000	
	- Medium	\$7,000	\$11,000	\$16,000	
	- Minor	\$3,300	\$5,000	\$6,000	
	- Post surgical treatment by registered Chinese medical practitioner, 1 visit per day, maximum of 5 visits per disability , each day limit	\$100	\$130	\$160	
	5. Operating Theatre Fees	up to 30% of Surgical Expenses in A4			
	6. Anaesthetist’s Fees	up to 30% of Surgical Expenses in A4			
	7. Specialist’s Fees (Referral letter issued by the qualified attending physician is required. The time lag between the issuance date of referral letter and the relevant consultation date must not exceed 6 months)	\$2,500	\$4,500	\$7,000	
	8. Intensive Care	\$12,000	\$18,000	\$22,000	
	9. Extra Bed Accommodation (accompany insured child(ren) hospital confinement; maximum of 100 days) , each day limit	\$400	\$700	\$900	
	10. Accidental Emergency Out-patient Treatment Expenses	\$800	\$1,200	\$1,800	
	11. Chemotherapy/Radiotherapy/Renal Dialysis Treatment	\$15,000	\$30,000	\$45,000	
	12. Cash allowance for health supplement (payable from the 8th day of hospital confinement onward after surgical operation, maximum 5 days per disability), each day limit	\$150	\$250	\$450	
	13. Special cash allowance for public hospital confinement in Hong Kong (maximum of 50 days) , each day limit	\$350	\$600	\$900	
	Annual overall limit for insured person aged 76 or above under Item A.	\$150,000	\$300,000	\$500,000	
B	Supplementary Major Medical Benefit (per disability)				
	Applicable to the exhaustion of “Hospital and Surgical Benefits” payable under Basic Benefits Item A3 to A8 ⁸ (reimbursement in accordance with percentage)	\$125,000 80%	\$250,000 80%	\$450,000 a. 80% or b. 100%	N/A
C	Hospital Daily Cash Benefits				
	<ul style="list-style-type: none"> ● Regardless of the basic benefits or plan selected, insured child(ren) will be covered under Plan 1 only. ● For overseas (means outside HKSAR) hospital confinement, the claim of each insured person cannot exceed 90 days in each policy year, if hospital confinement is in the Mainland of China, maximum limit in this coverage will be reduced by half. 				
	1. Daily hospital cash (maximum of 365 days per event)	\$250	\$450	\$900	\$250
	2. Double indemnity due to any one of following events (maximum of 365 days per event)	\$500	\$900	\$1,800	\$500

	<ul style="list-style-type: none"> i Confinement in the Intensive Care Unit (maximum of 90 days per event) ii Receiving major organ transplant surgery or first diagnosed with cancer disease iii Suffering from defined infectious disease⁹ (maximum benefit payable up to 30 days for each infectious disease) iv Temporary leaving Hong Kong but not exceeding 60 days and hospital confinement is required during this period (excluding the Mainland of China or Macau), maximum of 30 days per event v The insured and insured legal spouse are hospitalized at the same time due to the same accident 			
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Free Services

1.	24-hour Worldwide Emergency Assistance Service (in the event of emergency overseas hospital confinement, maximum HK\$40,000 overseas hospital deposit guarantee service can be arranged)	Please refer to policy for details
2.	In the first policy year, each insured person is eligible to enjoy a basic health check-up plan ¹⁰ in accordance with the insured plan. Check-up items include blood group, rubella, cholesterol, urinalysis, triglycerides, diabetes screening, paediatric assessment, etc. For every two consecutive years of insurance thereafter, a comprehensive health check-up plan dedicated for male, female and child(ren) will be provided.	-

II. Optional Benefits⁶ (Additional coverage under “Optional Benefits” can be added after Basic Benefits are applied)

Insured Items and Coverage		Maximum Limit (HK\$) (per insured person)		
		Plan 1	Plan 2	Plan 3
D	Out-patient Benefits (only 1 visit per day in total is allowed amongst item 1 to 4 below)			
	Network and Non-network doctor	Network doctor	Network doctor	Network doctor and Non-network doctor
	1. General Practitioner (3 days western medication) Maximum limit per visit Maximum visits per year Co-payment – Network doctor Co-payment – Non-network doctor	- Unlimited \$30 N/A	- Unlimited \$10 N/A	Non-network doctor \$350 Unlimited \$0 20%
	2. Specialist (referral letter is required, 5 days western medication) Maximum limit per visit Maximum visits per year Co-payment – Network doctor Co-payment – Non-network doctor	- Unlimited \$50 N/A	- Unlimited \$30 N/A	Non-network doctor \$700 Unlimited \$20 20%
	3. Chinese Medical Practitioner (include bonesetter & acupuncture) Maximum limit per visit Maximum visits per year Co-payment – Network doctor Co-payment – Non-network doctor	N/A	- 10 \$0 N/A	\$180 10 \$0 20%
	4. Physiotherapy and Chiropractor Treatment (referral letter is required) Maximum limit per visit Maximum visits per year Co-payment – Network doctor Co-payment – Non-network doctor	- 10 \$0 N/A	- 10 \$0 N/A	\$340 10 \$0 20%
	5. Diagnostic X-ray and laboratory tests (referral letter is required) Maximum limit per year Co-payment – Network doctor Co-payment – Non-network doctor	\$2,500 \$0 N/A	\$3,000 \$0 N/A	\$4,000 \$0 20%

E Dental Benefits				
	Reimbursement in accordance with percentage:	80%	100%	N/A
	1. Intra-oral small film radiograph (maximum limit per film)	\$50	\$60	
	2. Scaling, polishing and prophylaxis (maximum limit per visit, maximum visit per year)	\$250 (1 visit)	\$350 (2 visits)	
	3. Fillings, extraction (maximum limit per tooth)	\$250	\$350	
	4. Drainage of abscess (maximum limit per tooth)	\$150	\$250	
	5. Root canal fillings (maximum limit per root)	\$500	\$1,000	
	Maximum aggregate limit per policy year	\$1,500	\$3,000	
F Maternity Benefits (per pregnancy) (not applicable to child)				
	Including pre-natal and post-natal out-patient expenses. These benefits are not applicable to pregnancy or birth of a child within 9 months from the policy commencement date of these benefits.			
	1. Caesarian section	\$10,000	\$12,000	\$20,000
	2. Normal delivery	\$7,000	\$9,000	\$13,500
	3. Miscarriage	\$5,000	\$7,000	\$10,500
G Critical Illness (not applicable to child)				
	1. A lump sum payment will be provided if first diagnosed with one of the covered Critical Illness ¹¹ . Before a claim becomes payable, the insured person must be alive for at least 30 days after being first diagnosed.	\$80,000	\$120,000	\$200,000
	2. Upon approval of a claim for Critical illness from an insured person, such insured person's benefit under this "item G" will be terminated immediately.			
	3. A waiting period of 90 days: No benefit will be payable for Critical Illness where the signs or symptoms of which or the diagnosis of which first occurred within 90 days immediately followed the coverage effective date.			

- Remarks :**
- All charges incurred must be reasonable and customary.
 - Plan 4 "Medical top up plan" provides the insured person(s) with supplementary top up Hospital and Surgical insurance protection to supplement the inadequate protection of the existing insurance (e.g. medical insurance offered by your employer). Compensation will only be made on the shortfall of the first hospital and surgical insurance policy and subject to 50% reimbursement for each claim and up to the maximum annual overall limit. Maximum enrollment age is 65 years old with renewal age up to 70 years old. Insured person aged 71 or above can convert insured plan to Plan 1 or Plan 2 (If the insured person opts to convert to Plan 3, he/she is required to submit documentary proof, showing that his/her coverage is equivalent to or better than Plan 3's coverage limit before the conversion).
 - If the insured daily maximum limit for Room & Board is less than the actual amount charged for Room & Board by the hospital for hospital confinement, BOCG Insurance reserves the right to adjust the benefit payable under Supplementary Major Medical Benefit.
 - Defined infectious diseases are: malaria, cholera, meningococcal infection, dengue fever, tetanus or SARS.
 - Health check-up will be conducted at BOCG Insurance's designated clinics or medical centres. BOCG Insurance will not be liable for the services provided or negligence of the relevant clinics or medical centres.
 - 40 types of Critical Illness coverage includes Cancer, Cardiomyopathy, Coronary Artery Bypass Grafting, Heart Valve Replacement, Primary Pulmonary Arterial Hypertension, Surgery To Aorta, Heart Attack, Alzheimer's Disease, Bacterial Meningitis, Tuberculous Meningitis, Benign Brain Tumor, Coma, Encephalitis, Brain Damage, Motor Neurone Disease, Multiple Sclerosis, Muscular Dystrophy, Paraplegia/Paralysis, Parkinson's Disease, Poliomyelitis, Stroke, Progressive Bulbar Palsy, Blindness, Loss of Hearing, End Stage Lung Disease, Fulminant Viral Hepatitis, Kidney Failure, Loss of Independent Existence, Loss of Speech, Major Burns, Major Organ Transplant, Loss of Limbs, Total And Permanent Disability, Liver Failure, HIV Through Blood Transfusion, Aplastic Anaemia, Elephantiasis, Severe Rheumatoid Arthritis, Terminal Illness, Vegetative State (persistent).

Premium (calculated in HKD and on per insured person basis. If two or more family members¹ are insured under the same policy, 10% premium discount will be provided)

I. Basic Benefits – Hospital and Surgical¹²+ Supplementary Major Medical¹³ (A+B Benefits)

Age Group	Monthly				Annual			
	Plan 1	Plan 2	Plan 3 a ¹³	Plan 3 b ¹³	Plan 1	Plan 2	Plan 3 a ¹³	Plan 3 b ¹³
15 days – 17 years old	\$139	\$198	\$332	\$380	\$1,588	\$2,265	\$3,792	\$4,344
18 – 30 years old	\$148	\$237	\$439	\$487	\$1,690	\$2,709	\$5,014	\$5,566
31 – 45 years old	\$189	\$302	\$558	\$607	\$2,159	\$3,449	\$6,381	\$6,934
46 – 55 years old	\$248	\$400	\$771	\$836	\$2,833	\$4,571	\$8,813	\$9,558
56 – 60 years old	\$270	\$447	\$877	\$942	\$3,081	\$5,105	\$10,021	\$10,767
61–70 years old*	\$366	\$589	\$1,085	\$1,151	\$4,180	\$6,732	\$12,403	\$13,149
71–75 years old*	\$552	\$912	\$1,364	\$1,430	\$6,311	\$10,421	\$15,593	\$16,340
76 years old or above*	\$490	\$832	\$1,234	\$1,234	\$5,600	\$9,509	\$14,100	\$14,100

* 66 years old or above is applicable to renewal only; 76 years old or above can be renewed on Hospital and Surgical Benefits only.

I. Basic Benefits – Hospital and Surgical¹² + Hospital Daily Cash¹⁴ (A+C Benefits)

Age Group	Monthly				Annual			
	Plan 1	Plan 2	Plan 3	Plan 4	Plan 1	Plan 2	Plan 3	Plan 4
15 days – 17 years old	\$117	\$164	\$263	\$89	\$1,340	\$1,874	\$3,002	\$1,016
18 – 30 years old	\$140	\$226	\$418	\$110	\$1,598	\$2,585	\$4,781	\$1,259
31 – 45 years old	\$193	\$307	\$590	\$144	\$2,209	\$3,503	\$6,739	\$1,649
46 – 55 years old	\$281	\$439	\$921	\$187	\$3,206	\$5,013	\$10,531	\$2,137
56 – 60 years old	\$321	\$500	\$1,042	\$259	\$3,664	\$5,715	\$11,908	\$2,954
61–70 years old *	\$304	\$497	\$955	\$209	\$3,470	\$5,684	\$10,911	\$2,393
71 years old or above*	\$490	\$832	\$1,234	-	\$5,600	\$9,509	\$14,100	-

* 61 years old or above can be renewed on Hospital and Surgical Benefits only. Upon renewal of Plan 4, insured person aged 71 or above can convert insured plan to Plan 1 or Plan 2. If the insured person opts to convert to Plan 3, he/she is required to submit documentary proof, showing that his/her coverage limit is equivalent to or better than Plan 3's coverage limit before the conversion).

I. Basic Benefits – Hospital and Surgical¹² + Supplementary Major Medical¹³ + Hospital Daily Cash¹⁴ (A+B+C Benefits)

Age Group	Monthly				Annual			
	Plan 1	Plan 2	Plan 3 a ¹³	Plan 3 b ¹³	Plan 1	Plan 2	Plan 3 a ¹³	Plan 3 b ¹³
15 days – 17 years old	\$153	\$214	\$365	\$406	\$1,750	\$2,451	\$4,170	\$4,640
18 – 30 years old	\$174	\$269	\$489	\$530	\$1,985	\$3,077	\$5,590	\$6,059
31 – 45 years old	\$225	\$347	\$653	\$694	\$2,575	\$3,968	\$7,459	\$7,929
46 – 55 years old	\$327	\$499	\$1,011	\$1,070	\$3,736	\$5,698	\$11,553	\$12,225

56 – 60 years old	\$365	\$559	\$1,082	\$1,141	\$4,175	\$6,384	\$12,366	\$13,037
61–70 years old *	\$366	\$589	\$1,085	\$1,151	\$4,180	\$6,732	\$12,403	\$13,149
71–75 years old*	\$552	\$912	\$1,364	\$1,430	\$6,311	\$10,421	\$15,593	\$16,340
76 years old or above*	\$490	\$832	\$1,234	\$1,234	\$5,600	\$9,509	\$14,100	\$14,100

* 61-75 years old can be renewed on Hospital and Surgical Benefits and Supplementary Major Medical Benefits only; 76 years old or above can be renewed on Hospital and Surgical Benefits only.

II. Optional Benefits

Age Group/Benefits	Monthly			Annual		
	Plan 1	Plan 2	Plan 3	Plan 1	Plan 2	Plan 3
D. Out-patient¹² Benefit	Network		Network & Non-network (80% Reimbursement)	Network		Network & Non-network (80% Reimbursement)
15 days – 4 years old	\$289	\$396	\$477	\$3,300	\$4,523	\$5,446
5 – 30 years old	\$232	\$331	\$468	\$2,656	\$3,780	\$5,349
31 – 45 years old	\$232	\$331	\$588	\$2,656	\$3,780	\$6,724
46 – 60 years old	\$232	\$331	\$746	\$2,656	\$3,780	\$8,528
61–70 years old	\$297	\$417	\$960	\$3,390	\$4,760	\$10,972
71 years old or above	\$297	\$417	\$1,119	\$3,390	\$4,760	\$12,792
E. Dental¹² Benefit						
15 days or above	\$76	\$135	N/A	\$869	\$1,541	N/A
F. Maternity Benefit (not applicable to child)						
18 – 30 years old	\$332	\$415	\$622	\$3,790	\$4,738	\$7,107
31 – 40 years old	\$373	\$466	\$700	\$4,264	\$5,330	\$7,996
41 – 50 years old	\$290	\$363	\$544	\$3,317	\$4,146	\$6,219
G1. Critical Illness (non-smoking) (not applicable to child)						
18 – 30 years old	\$13	\$18	\$31	\$145	\$211	\$351
31 – 40 years old	\$35	\$52	\$89	\$405	\$598	\$1,021
41 – 45 years old	\$58	\$88	\$151	\$667	\$1,004	\$1,729
46 – 50 years old	\$86	\$133	\$228	\$988	\$1,518	\$2,609
51 – 55 years old*	\$124	\$191	\$330	\$1,421	\$2,188	\$3,769
56 – 60 years old*	\$180	\$278	\$479	\$2,062	\$3,173	\$5,474
G2. Critical Illness (smoking) (not applicable to child)						
18 – 30 years old	\$18	\$26	\$43	\$203	\$295	\$492
31 – 40 years old	\$50	\$73	\$125	\$567	\$837	\$1,429
41 – 45 years old	\$82	\$123	\$212	\$934	\$1,406	\$2,421
46 – 50 years old	\$121	\$186	\$320	\$1,384	\$2,126	\$3,653
51 – 55 years old*	\$174	\$268	\$462	\$1,989	\$3,063	\$5,277
56 – 60 years old*	\$253	\$389	\$671	\$2,887	\$4,443	\$7,663

*51-60 years old is for renewal only

Remarks :

- 12. Hospital and Surgical, Out-patient and Dental Benefits: enrolment age is up to 65 years old, aged 66 or above is for renewal only.
- 13. Supplementary Major Medical Benefits: enrolment age is up to 65 years old and renewal age is up to 75 years old. Claim reimbursement percentage for Plan 3a and Plan 3b are 80% and 100% respectively.
- 14. Hospital Daily Cash Benefits: both enrolment and renewal age is up to 60 years old. Regardless of the basic benefits or plan selected, insured child(ren) will be covered under Plan 1 only.

Eligibility and geographical limit

- Age: the insured and his/her spouse should be aged 18 or above.
- Child(ren): can be insured on his/her own but the application must be submitted by the parent.
- Insured and Insured person: must be a legal resident of the Hong Kong Special Administrative Region
- Geographical coverage: Worldwide. Applicable to below cover items
 - 1. Hospital and Surgical (include Medical top up plan), Dental, Maternity, Critical Illness;
 - 2. Supplementary Major Medical (limited to accidental emergency situation), Hospital Daily Cash (limited to 90 days hospital confinement in each policy year), Out-patient (limited to Plan 3).

Insuring and renewal age limit:

Insured Items	Insured age group	Renewal ages
A. Hospital and Surgical	15 days - 65 years old	lifetime
B. Supplementary Major Medical	15 days - 65 years old	up to 75 years old
C. Hospital Daily Cash	15 days - 60 years old	up to 60 years old
D. Out-patient	15 days - 65 years old	lifetime
E. Dental	15 days - 65 years old	lifetime
F. Maternity	18 - 50 years old	up to 50 years old
G. Critical Illness	18 - 50 years old	up to 60 years old

Premium payment methods

1. Payment made by credit card

- (1) Annual payment: Please complete the Credit Card Authorization Form in the proposal form and submit it along with the proposal form to BOCG Insurance.
- (2) Monthly payment: Please complete the Credit Card Authorization Form in the proposal form and submit it along with the proposal form to BOCG Insurance. In the first month BOCG Insurance will collect 3 months advance premium from the client's credit card account.

2. Payment made by cheque (For annual payment only)

You can make a crossed cheque payable to "Bank of China Group Insurance Company Limited" and submit it along with the proposal form to BOCG Insurance.

Auto-renewal service

If you do not receive any notice of amendment on renewal terms by BOCG Insurance before the expiry date of your policy year, simply pay the required premium for the coming policy year, and your policy will be renewed automatically.

Major exclusions (For more details, please refer to the policy)

Congenital conditions, any latent illness or disease existed prior to the effective date of the policy, sickness occurred within 15 days from the effective date of the coverage, routine physical examination, dental treatment (except cover

is provided under Dental benefit), eye tests, cosmetic or plastic surgery, pregnancy or childbirth (except cover is provided under maternity benefit), fertility or infertility treatment, AIDS, HIV related sickness or injury (except cover is provided under Critical Illness), alcoholism, mental disorders, drug addiction, venereal diseases, illegal acts, war, strike, riot, act of terrorism, professional sports or high risks activities, all hospitalization expenses incurred primarily for examinations (such as diagnostic scanning, X-ray examination, etc) or physiotherapy, etc.

Revisions, notice of termination and claims note

- Premium and term adjustment: Premium and terms is determined both by the plan selected at the date of application and by the age of the insured person, additional premium will be imposed upon the insured person entering into another pre-set age group at time of policy renewal.
- Plan revision: The insured can revise the policy simply by giving a written notice to BOCG Insurance 30 days prior to the expiry date of the policy. The new plan and premium will only become effective on the first day of the new policy year.
- Termination of policy and premium refund:
 1. If the insured terminates the policy or any one of the insured person's benefits before the expiry of the policy, no premium will be refunded, the insured should pay 100% of annual premium.
 2. If the insured person is covered under "Plan 4 - Medical top-up plan" and gives written notice to terminate the policy during the policy period for the reason of Company Medical insurance cancellation due to his/her termination of service, the insured person shall be entitled to the return of a proportionate part of the paid annual premium upon submission of evidence of proof document. At the same time, the insured person can request to convert his/her insured plan to Plan 1 or 2 or 3 (if Plan 3 is selected, insured person should submit documentary proof showing that his/her previous company medical insurance coverage is equivalent to or better than Plan 3 limit before the conversion).
- Claims note: If a claim has incurred, the insured person is required to provide BOCG Insurance as soon as possible with written notice together with the evidence of proof for the claim item. Claims payment and the settlement advice will be sent to the insured within 14 working days after the sufficient evidence of proof is received.

Terms & conditions:

- The Plan is underwritten by BOCG Insurance.
- BOCG Insurance reserves the sole right to determine whether the application is acceptable or not in accordance with the information submitted at the time of application by the insured or insured person.
- BOCG Insurance reserves the right to amend or withhold any terms and conditions without prior notice.
- This promotional material is for reference only. Details of the coverage are subject to the terms and conditions stipulated in the policy by BOCG Insurance.

Customer Service Hotline : (852) 3187 5100 OR enquire through your agent/broker

BOCG Insurance Website : www.bocgroup.com/bocg-ins/

