

American Express Medical Protector

Your peace of mind medical coverage, exclusive to American Express Cardmembers

Designed to cover expenses from simple in-patient costs to medical treatments, our protection will bring you and your family extra peace of mind.

American Express Medical Protector provides flexible medical insurance to support you when unexpected medical situations happen in your life.



Plan highlights

Coverage with up to HKD 5,000,000 sum insured

- To protect you against any unexpected medical costs incurred during hospitalization and medical treatment, this Plan offers two plan levels with maximum benefits up to HKD 2,000,000 for Standard Plan and HKD 5,000,000 for Premier Plan annually.
- Apart from the in-patient medical benefits provided, this Plan offers coverage on oncology (including treatment on target therapy, chemotherapy and radiotherapy), dialysis, organ transplant, AIDS/HIV treatment, post-surgery out-patient benefit and specialist treatment due to critical illness, etc.
- 24-hour worldwide emergency assistance on hospital admission guarantee, emergency medical evacuation, overseas telephone medical advice and referral service, etc., available when the insured person is outside Hong Kong.

No sub-limits for all in-patient benefits with 100% reimbursement

- All in-patient medical expenses, including room[^], board and general nursing charges, in-hospital doctor's call fees, hospital special services charges, surgical charges, anaesthetist's fees, intensive care charges and in-hospital specialist consultation fees, etc. will be compensated without any sub-limits by types of surgical operation.
- Surgical charges are extended to cover any procurement or use of special braces, appliances, etc. for angioplasty (as this serves as an extension to the related benefit, it comes with a sub-limit).
- Minor surgical operations carried out by registered doctor at a medical clinic are also covered.

[^] If the insured person stays in a hospital and confines in a semi-private room or ward, the reimbursement of all eligible medical expenses will be up to 100%; if the insured person confines in a private room, all eligible medical expenses covered by the standard plan and the premier plan will be reduced to 30% and 50% respectively; if the insured person stays in a suite, VIP room, deluxe private room or equivalent, no benefit shall be payable.

Direct settlement of pre-approved in-patient medical expenses[#]

- To ensure you receive medical treatment with no hassle, we will settle all the eligible in-patient medical expenses incurred in Hong Kong hospitals under the pre-approved direct settlement feature of this Plan so that you need not make any payment upon discharge.

Wide range of voluntary deductible options

- You may opt for the voluntary deductible cover to enjoy a lower initial premium by sharing a portion of the in-patient medical claim amount.

Peace of mind protection up to aged 100 years[†]

- This Plan offers coverage up to age 100 years[†] so that you can enjoy real peace of mind.

Special care for children

- Coverage is available from aged 15 days to allow you to cover your beloved children.
- Accompanying bed benefit for a parent to accompany any insured person aged under 16 years confined in the hospital due to sickness or accident.

Choices of Asia and Worldwide plans

- In order to meet different customer needs, we provide choices of Asia and Worldwide plans as coverage areas.

More benefits for you and your family

No claim discount

- If you have not made any claim in the period of insurance, your insurance premium will be discounted for the following years upon renewal, with 2% in the first no claim year, followed by 5% in the second no claim year, and accumulated up to a maximum of 8% in the third no claim year and the subsequent consecutive no-claim years.

Extra family discount

- 5% premium discount will be offered for family enrollment with spouse or children.

[#] The Pre-admission Assessment Service is rendered by the service provider which is nominated by Zurich Insurance Company Ltd, and this service is available for private hospitals in Hong Kong only. If you require such service, please contact the claims 24-hour hotline through 2903 9446 to obtain Pre-assessment Application Form.

[†] Zurich Insurance Company Ltd reserves the right to renew at our discretion and to revise the premium, add new conditions and apply exclusions to the policy at the time of annual renewal.

Benefit table

Coverage		Standard Plan	Premier Plan
		Maximum benefits per insured person per policy year (HKD)	
Annual limit		2,000,000	5,000,000
Issue age		15 days to 65 years old	
Protection age		Offer protection and renewal up to 100 years old†	
Limit of cover per room type†		100% reimbursement for semi-private room/ward 30% reimbursement for private room	100% reimbursement for semi-private room/ward 50% reimbursement for private room
In-patient Basic Benefits			
Room and Board	Room, board and general nursing charges	100% of the actual expenses	
	Room, board and general nursing for intensive care unit		
	Accompanying bed benefit (parent accommodation)		
Surgical cover	In-hospital doctor's call fees	100% of the actual expenses	
	In-hospital specialist consultation fees		
	Hospital special services charges		
	Surgical charges (including anaesthetist's fee and operating theatre charges)		
	Out-patient surgery		
Other Medical Treatment			
Oncology		80% of the actual expenses up to maximum 200,000	90% of the actual expenses up to maximum 300,000
Dialysis			
Organ transplant		80% of the actual expenses	90% of the actual expenses
Prosthetic devices		80% of the actual expenses up to maximum 30,000 per item	80% of the actual expenses up to maximum 50,000 per item
AIDS/HIV treatment		80% of the actual expenses up to maximum 80,000	90% of the actual expenses up to maximum 120,000
Accidental dental treatment		80% of the actual expenses	90% of the actual expenses
Local ambulance		100% actual expenses	
Post-surgery Cover			
Post-surgery out-patient benefit		100% of the actual expenses up to maximum 2,000 per disability	100% of the actual expenses up to maximum 2,500 per disability
Home nursing fees		100% of the actual expenses up to maximum 30 days per disability	100% of the actual expenses up to maximum 60 days per disability
Post-surgery specialist treatment due to critical illness		80% of the actual expenses up to maximum 100,000 per disability	90% of the actual expenses up to maximum 120,000 per disability
Worldwide Emergency Assistance			
Guarantee of hospital admission deposit		Maximum 39,000	
Emergency medical evacuation		Actual cost	
Compassionate visit		One economy class return airfare	
Return of unattended dependent		One economy class one-way airfare	
Arrangement of limousine service		Limousine service will be arranged to return the insured person who is hospitalized in Hong Kong for a period in excess of seven consecutive days back home	
Home nursing care referral assistance		Available	
Medical service provider referral			
Telephone medical advice			
Voluntary Deductible (optional)			
Voluntary deductible		Applicable to claims for in-patient and surgical expenses only. Insured persons can enjoy extra savings on premium by paying a fixed deductible account for each and every claim	
Deductible amount (HKD)	20,000	Available	
	50,000	Not available	Available

‡ Zurich Insurance Company Ltd reserves the right to renew at our discretion and to revise the premium, add new conditions and apply exclusions to the policy at the time of annual renewal.

† No benefit payable for any insured person confined in a Suite, VIP or Deluxe Private Room or equivalent or any room charge that is higher than a private room type of charges.

Notes

1. The waiting period of this policy is 30 days from the effective date, or the upgrade effective date, or the effective date of any endorsement or extension of cover which is subsequently added (applicable to the extension only), or last reinstatement date, whichever is later. During such period, no benefit will be payable for any sickness, disease or condition sustained by the insured person with the signs or symptoms first manifested or occurred within such waiting period. For the avoidance of doubt, waiting period is not applicable to accidental injury.
2. The policy shall remain in force for a period of one year from the policy effective date and this policy will be automatically renewed at our discretion. Zurich Insurance Company Ltd reserves the right to alter the terms and conditions, including but not limited to the premiums, benefits, benefits amount or exclusions of this policy at the time of renewal of any period of insurance by giving 30 days' written notice to you.
3. 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, Zurich Insurance Company Ltd 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. Such notice of cancellation must be provided to Zurich Insurance Company Ltd 30 days before premium due date. In such event, Zurich Insurance Company Ltd 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.
4. 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 we may request you to return all monies paid by us for previous claims if 1) you have incorrectly stated the health information of the insured person, 2) omitted material information during enrollment or 3) provided fraudulent documentation or fraudulently represented information during enrollment or when making a claim.
5. Zurich Insurance Company Ltd only covers the charges and/or expenses of the insured person on medically necessary and reasonable and customary basis. Please refer to Part 1 of the policy provisions for the definition of "Medically Necessary/Medical Necessity" and "Reasonable and Customary Charges".
6. Cover is available for aged between 15 days and 65 years (including 15 days and 65 years old) and the maximum renewal age is up to age 100 years.
7. The insured person must be a Hong Kong citizen or resident holding a valid Hong Kong Identity Card, with a permanent address and live in Hong Kong as a usual country of residence and will not consecutively stay in other country for over 120 days a year.
8. The reimbursement of all eligible medical expenses will be up to 100% for hospital confinement under semi-private room or ward. If the insured person confines in a hospital for private room, the reimbursement of all eligible medical expenses will be reduced to 30% and 50% under Standard Plan and Premier Plan respectively. No benefit shall be payable for insured person confined in a suite, VIP or deluxe private room or equivalent.
9. The pre-admission assessment service for the direct settlement of hospitalization and surgical charges arrangement is available for private hospital admission in Hong Kong only while the insurance payment must be settled by American Express® Card. For any non-eligible medical expenses, insured person is required to authorize Zurich Insurance Company Ltd to collect shortfall of medical expenses (if any) from the designated American Express® Card account.
10. If the insured person sustains any accident or illness after leaving Hong Kong for over 90 days, this policy will not cover any claim incurred overseas.
11. Zurich Insurance Company Ltd reserves the right to revise or adjust the premium under the following circumstances:
 - According to Zurich's applicable premium rate at the time of renewal (which will be based on several factors, including but not limited to medical price inflation, projected future medical costs, claims experience and expenses incurred by you and/or in relation to this product, and any changes in benefit) by giving 30 days' advance written notice to you.
 - The premium rate should be adjusted automatically according to the attained age of the insured person at the time of renewal.
12. If no claim has been made in the period of insurance, the insured person will be entitled to 2% no claim premium discount at the annual renewal and the no claim discount can be accumulated up to a maximum of 8% in the third no claim year and the subsequent consecutive no-claim years.
13. For insured person whose occupation involves jobs that engaged principally in the use of light machinery or engines (e.g. electrician, cook, baker, private car driver, etc.), handle heavy machinery at a regular basis, requiring high degree of physical exertion or working in extra hazardous environments (e.g. delivery worker, interior decorator, transportation contractor, etc.), the premium is subject to the approval of Zurich Insurance Company Ltd.
14. All amendments to the insurance benefits must be submitted to Zurich Insurance Company Ltd in writing. Such request shall be subject to our right to amend any terms and conditions, including but not limited to the premium rates or benefits or exclusions of this policy.
15. This Plan is available in either annual or monthly payment mode. Any premium payment(s) must be settled by American Express® Card.
16. The insured must notify us in writing of any change in his/her or insured person's usual country of residence within the first 30 days of the change. Changes in usual country of residence outside the insured's or insured person's usual country of residence as declared to us shall result, at our sole discretion, in the coverage being modified or the policy being cancelled.

Major exclusions of the policy

1. Any pre-existing condition, any condition resulting from abortion, maternity, pregnancy and other complications arising from pregnancy, contraceptive or contraceptive devices, infertility or sterilization of either sex;
2. Cosmetic surgery or plastic surgery for purposes of beautification except as medically necessitated by an injury, refractive errors of the eyes, eye tests or fitting of glasses or surgical correction of nearsightedness, or any dental surgery of any nature whatsoever except procedure necessitated by damage to sound natural teeth as a result of any injury occurring during the period of insurance. Benefit is payable purely for emergency condition and to alleviate the pain including consultation, staunch bleeding, tooth extraction and x-ray provided such treatment is provided within two weeks of the accident and in a legally registered dental clinic or hospital;
3. Congenital abnormalities; hernia up to the age of eight years of insured person;
4. Medical treatment and surgery for anal fistulae, cholecystitis; calculi of kidney or urethra or bladder; gall bladder calculi diabetes mellitus; gastric or duodenal ulcer; hallux valgus; hypertension; cardiac vascular disease or heart disease or disorder; tuberculosis; bone tumors; malignancies of blood or bone marrow unless the insured person has been continuously covered by this policy for 180 consecutive days immediately preceding such surgery or treatment;
5. Medical treatment and surgery for cataracts, glaucoma/retinal disorder, breast mass/tumor, endometriosis, diseased tonsils, haemorrhoids/piles, thyroid disorder, hyperthyroidism, vocal nodule, tumours/polyp/cyst/lesion/mass/lump of skin/subcutaneous or muscular tissue, pathological abnormalities of nasal septum or turbinates, sinus conditions, polyps/cyst/lesion/mass/lump/fibroid/tumour/cancer of internal organs, circumcision unless the insured person has been continuously covered by this policy for 365 consecutive days immediately preceding such surgery or treatment;
6. Procurement or use of special braces, appliances, equipment, including but not limited to organ, prosthetic appliances, hearing aids, wheelchairs, crutches, denture, CPAP machine or any other similar equipment;
7. Treatment of disabilities arising out of engaging in professional or hazardous sports or pastimes such as climbing, mountaineering, pot-holing, skydiving, parachuting, hang-gliding, para-sailing, water skiing, ballooning, all diving, motor cycling, hunting, aviation or aeronautics (other than as fare-paying passenger on a duly licensed commercial aircraft), ice hockey, figure skating, ice or water ski-jumping, show jumping, rugby, racing of any kind other than on foot or where the insured person would or could earn any remuneration from engaging in such sport or race or participating in any illegal acts;
8. Air travel except as a fare-paying passenger in a properly licensed aircraft operated by a licensed commercial air carrier or engaging in naval or military or armed force or services;

9. War, direct participation in strike, riot or civil commotion, 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, any act of terrorism;
10. Elective overseas treatment for non-emergency conditions and charges for non-medical services such as telephone, television, radio, telex, extra meal, extra bed or similar facilities;
11. Any cyber act that results in any accident, disability, sickness and/or injury.

Claims procedure

For application of Pre-admission Assessment Service and direct settlement:

Step 1: Contact our Claims Hotline and return us with Pre-admission Assessment - Application Form completed by the attending doctor **no later than three working days** prior to admission date.

Step 2: Claim form completed and signed by the attending doctor **within 14 days** upon discharge.

For non-direct settlement claim:

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

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

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

Remarks

Zurich Insurance Company Ltd (a company incorporated in Switzerland with limited liability) is the insurance underwriter of American Express Medical Protector ("the Plan") and solely responsible for all coverage and compensation. Zurich Insurance Company Ltd is not a subsidiary or an affiliate of American Express International, Inc. Zurich Insurance Company Ltd reserves the right of final approval of this Plan. The leaflet is only a summary and does not constitute any part of the contract. For details, please refer to policy terms and conditions and exclusion clauses of this Plan and the above description is neither an offer to sell nor a solicitation to purchase any particular insurance product.

American Express International, Inc. ("We/we") identifies insurance providers and products that may be of interest to you. In this role we do not act as an agent or fiduciary for you, and we may act on behalf of the insurance provider, as permitted by law. We want you to be aware that we receive commissions from providers and commissions may vary by provider and product. Also, in some cases, an American Express entity outside of the country may be the reinsurer and may earn reinsurance income. The arrangements we have with certain providers, including the potential to reinsure products, may also influence what products we identify. We do not require you to purchase any insurance product, and you may choose to cover your insurance needs from other sources on terms they may make available to you.

American Express International, Inc. is the licensed insurance agency appointed by Zurich Insurance Company Ltd.

In the event of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between American Express International, Inc. and the customer out of the selling process or processing of the related transaction, American Express International, Inc. will enter into a Financial Dispute Resolution Scheme process with the customer; however any disputes over the contractual terms of the product should be resolved directly between Zurich Insurance Company Ltd and the customer.

This leaflet is only an illustration 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. Zurich Insurance Company Ltd reserves the right of final approval and decision. The English version shall prevail in case of inconsistency between the English and Chinese versions.

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.

**Act now! Call Zurich Enrollment Hotline
+852 2903 9432 for enquiries and enrollment.**

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