

Pioneer Medical Support Service Programme Document

This Pioneer Medical Support Service Programme Document (“**Programme Document**”) forms part of the policy provisions to which this Programme Document is attached. The Service(s) (as defined under Section 1 below) under this Programme Document is subject to the terms of this Programme Document and the policy provisions. In the event of any conflict between the terms of this Programme Document and the policy provisions, the policy provisions shall prevail.

The Service(s) is provided directly by HealthMutual Group Limited (“**HMG**”) or its sub-contractor(s), if any, to the Owner or the Insured (as defined under Section 1 below). Nothing herein shall create the relationships of agency or partnership or employment between the Company and HMG (or its Sub-contractor(s), if any).

Refer to Section 3 below, the Owner and the Insured acknowledge that there would be transfer of information (including personal data of the Owner and the Insured) between the Company and HMG and between HMG and its sub-contractor(s), if any, and for record for the purpose of performing the Service(s) contemplated under this Programme Document, to which the Owner and the Insured has given prescribed consent. In this connection, HMG and its sub-contractor(s), if any, may contact the Owner and the Insured if necessary.

Unless otherwise stated, the Service(s) will be effective from the Policy Effective Date of the Plan.

SECTION 1 – DEFINITIONS

Unless otherwise stated, the definitions used in the Policy shall apply to this Programme Document.

“**Designated Service Centers**” refers to some designated service centers under HMG’s network. A list of the designated service center(s) will be updated from time to time.

“**Insured**” means the individual designated as “Insured” in the Policy Specifications or relevant endorsement as the insured under the Plan.

“**Network Doctors**” refers to a group of professional medical specialists and doctors registered under HMG’s network. A list of the Network Doctors will be updated from time to time.

“**HMG Network**” refers to some designated hospitals and healthcare providers under HMG’s network. A list of the HMG Network will be updated from time to time.

“**Day Case Centers**” refers to centers or special hospital units which provide medical care on an outpatient basis, including diagnosis, observation, consultations and treatments.

“**Owner**” means the individual designated as “Owner” in the Policy Specifications or relevant endorsement as the owner or policy holder of the Plan.

“**Plan**” means the eligible insurance plan(s) issued by the Company for such Service(s).

“**Service(s)**” means any of the Cancer Consultation Service, Cashless Arrangement Service and Specialist Referral Service to be provided by HMG to the Owner or the Insured listed in Section 2 of this Programme Document which are subject to change at the sole discretion of the Company without any notice.

SECTION 2 – SERVICE ENTITLEMENT

The Owner or the Insured is eligible to apply for the Service(s) provided that the Plan remains in force at the time of use of the Service(s). Details of the Service(s) are as follows:

2.1. Cancer Consultation Service

The Cancer Consultation Service is available to the Insured upon cancer diagnosis made by a Medical Practitioner. This is a value adding service for the Insured.

The Owner or the Insured may call the Medical Support Service Hotline (refer to Section 2.3 below) to request for this Cancer Consultation Service. By this Cancer Consultation Service, the Insured shall be eligible to obtain one (1) free consultation per diagnosed cancer by a Network Doctor. The Cancer Consultation Service shall be handled by a Network Doctor at the Designated Service Centers provided the Insured can provide adequate medical documents and diagnosis reports with the cancer diagnosis.

The Cancer Consultation Service to be given by the Network Doctors is limited to:

- (i) explanation of medical documents and diagnosis reports of the Insured;
- (ii) provision of information on the common course of medical treatment; and
- (iii) provision of information on the range of medical expenses.

If the Insured wish to continue with further consultations and treatments with the Network Doctors, the Insured may arrange further appointments directly with the Designated Service Centers. The Designated Service Centers shall charge the regular consultation charges.

The Cancer Consultation Service is only available within Hong Kong.

2.2. Cashless Arrangement Service

The Cashless Arrangement Service will be available for designated operation(s) or procedure(s) at the designated hospital(s)/Day Case Center(s). The Owner or the Insured shall seek our prior approval by completing the prescribed pre-approval form before the Insured's operation(s) or procedure(s).

Subject to the provisions (i) to (vii) below, the Company shall settle the eligible medical expenses directly with the designated hospital(s)/Day Case Center(s) after the Insured's completion of the designated operation(s) or procedure(s):

- (i) adequate and reasonable time shall be allowed between application and approval of this Cashless Arrangement Service;
- (ii) this Cashless Arrangement Service is an administrative arrangement to pay for the covered medical expenses when the Insured undergoes designated operation(s) or procedure(s), but not a benefit item under the Policy Provisions;
- (iii) This Cashless Arrangement Service is subject to payment of shortfall amount (if any) by the Insured before discharging from designated hospitals / Day Case Centers. The Insured will be notified of the shortfall amount (if any) upon approval of this Cashless Arrangement Service.
- (iv) This Cashless Arrangement Service is only available for one hundred eighty (180) calendar days upon the Policy Effective Date or the date of reinstatement, whichever is the later;
- (v) This Cashless Arrangement Service is subject to the approval of the Company on a case-by-case basis;
- (vi) The Company reserves the right to terminate or vary the Cashless Arrangement Service in its sole discretion without any notice; and
- (vii) The approval of Cashless Arrangement Service does not mean that the relevant claim will be admitted by the Company and the Company has the right to recoup any excess amount paid via this Cashless Arrangement Service over the eligible claimed amount.

2.3. Medical Support Service Hotline

HMG shall offer to the Owner or the Insured a Medical Support Service Hotline (number at +852 3792 0280 subject to change without any notice) available from Mondays to Fridays from 9:00am to 6:00pm and Saturdays from 9:00am to 1:00pm except Public Holidays and Sundays for the following service:

- (i) Specialist Referral Service: HMG shall offer to the Owner or the Insured a Medical Support Service Hotline for information regarding Specialist Referral Service at a Designated Service Center. For the avoidance of doubt, Specialist Referral Service is solely for non-emergency Specialist Referral and the Insured shall bear the consultation fee and any fee arising from the specialist consultation;
- (ii) Cancer Consultation Service: HMG shall assist the Insured for arranging appointment of the Cancer Consultation Service; and
- (iii) Coordination of Cashless Arrangement Service: HMG shall assist the Insured to complete the application procedures and to facilitate and coordinate the pre-approval process of the Cashless Arrangement Service.

SECTION 3 – RESPONSIBILITIES OF THE INSURED

Pursuant to Section 2 above, for the purpose of applying for the Service(s), the Owner or the Insured (and/or the Insured's representative) has/have to provide HMG with the following information:

- (i) Insured's full name and the Policy number of the Plan or personal identification card number of the Insured (applicable for Sections 2.1 to 2.3);

Below are only applicable for Sections 2.1 and 2.2:

- (ii) the address(es) and the telephone number(s) at which HMG can reach the Owner or the Insured (and/or the Insured's representative);
- (iii) the medical history of the Insured (if necessary); and
- (iv) prescribed authorization form duly signed by the Owner or the Insured (and/or the Insured's representative) confirming use of the Service(s) and authorizing HMG to collect medical records of the Insured from the relevant Medical Practitioner.

Nothing in the Policy, the Plan and this Programme Document shall restrict the Insured's freedom to choose Medical Practitioner(s), hospital(s) and/or the treatment(s), therapy(ies), medicine, prescription(s), in respect of which the Insured shall make his/her own decisions. The Owner or the Insured is/are reminded to refer to the provisions of the Policy, the Plan or this Programme Document to ascertain his/her benefits and entitlements carefully.

SECTION 4 – LIABILITIES

Neither the Company nor HMG shall be liable for the Service(s) provided by the Medical Practitioner(s), the Day Case Centers and/or hospital(s) to the Insured.

Notwithstanding anything in the provisions of the Policy, the Plan and this Programme Document, the Company shall not be responsible and will not be held liable for any loss or damage, whatsoever and howsoever, directly or indirectly, caused by, arising from or in connection with the Service(s) provided by HMG or its sub-contractor(s), if any. HMG and its sub-contractor(s), if any, have no authority to make any representation for and on behalf of the Company.

The Company reserves the right to change the service provider of the above Service(s) and shall have the right to change the above Service(s) without prior notice to the Owner or the Insured.

SECTION 5 – AUTOMATIC TERMINATION

The Service(s) shall terminate automatically upon:

- (i) the termination of the Plan; or
- (ii) the termination of the Service(s) by either HMG or the Company at its full discretion and in such a case, a written notice will be sent to the Owner at least thirty (30) calendar days in advance.

SECTION 6 – Right of Third Parties

The Contracts (Right of Third Parties) Ordinance (Cap. 623 of the Laws of Hong Kong) shall not apply to this Programme Document and unless specifically herein provided no person other than the parties to this Programme Document shall have any rights under it nor shall it be enforceable by any person other than the parties to it.

SECTION 7 – Governing Laws

This Programme Document is governed by and construed in accordance with the laws of Hong Kong.