

THE HONG KONG UNIVERSITY OF SCIENCE AND TECHNOLOGY

Benefits Summary for Staff Medical Insurance Scheme for 2024/2025

(For Emeritus Faculty and Senior Professionals Medical Scheme)

<u>HOSPITALISATION & SURGICAL BENEFITS</u> ^(Note 1)	Group 1 HK\$
Daily Room & Board and General Nursing Care ^(Note 2)	
<i>Limit per Day</i>	2,400
Intensive Care Unit and General Nursing Care ^(Note 3)	
<i>Limit per Disability per Policy Year</i> ^(Note 4)	55,900
Other Hospital Services ^(Note 5)	
<i>Limit per Disability per Policy Year</i>	50,160
Surgeon's Fee ^(Note 6)	
<i>Limit per Disability per Policy Year</i>	
Complex Operation	88,000
Major Operation	44,000
Intermediate Operation	22,000
Minor Operation	8,800
Anaesthetist's Fee	
<i>Limit per Disability per Policy Year</i>	
Complex Operation	22,000
Major Operation	11,000
Intermediate Operation	6,600
Minor Operation	3,080
Operating Room	
<i>Limit per Disability per Policy Year</i>	
Complex Operation	22,000
Major Operation	11,000
Intermediate Operation	6,600
Minor Operation	3,080
In-Hospital Physician's Consultation ^(Note 7)	
<i>Limit per Day</i>	2,400
In-Hospital Specialist Physician's Consultation	
<i>Limit per Disability per Policy Year</i>	13,750
Home Nursing	
<i>Limit per Day</i>	840
Daily Cash Benefit (Non-Network only) ^(Note 8)	
Government (HA) Hospital Benefit (General Ward)	
<i>Limit per Day</i>	1,200
Increased Overseas Hospitalisation Benefit (Non-Network only) ^(Note 9)	
<i>Due to accidental cause</i>	200% of basic hospitalisation benefits
Annual Overall Limit Per Person	782,000
Chemotherapy / Radiotherapy / Renal Dialysis Treatment received in hospital and outpatient setting	
<i>Limit per Policy Year</i>	100,000

OUTPATIENT BENEFITS

Consultation inclusive of medicines

(i) General Physician's Consultation - Clinic

Telemedicine Service - General Physician's Consultation ^(Note 11&12)

(a) Network Clinic

Consultation including up to 5 days' basic necessary medication, subject to a copayment of \$15 payable for each visit by Member

(b) Non-Network Clinic ^(Note 10)

90% reimbursement up to maximum limit per visit

345

(ii) General Physician's Consultation – Home Visit

90% reimbursement up to maximum limit per visit

345

Specialist Physician's Consultation (Including chiropractic treatment) #

Telemedicine Service - Specialist Physician's Consultation (network clinic only) # ^(Note 11)

Maximum limit per Policy Year

(applicable to both Network & Non-Network clinics)

8,500

(a) Network Clinic

Consultation inclusive of 5 days' basic necessary medication, subject to a copayment of \$15 payable for each visit by Member up to maximum limit per Policy Year

(b) Non-Network Clinic ^(Note 10)

90% reimbursement up to maximum limit per Policy Year

Physiotherapy #

(a) Network Clinic

Coverage limited to one visit per day, subject to payment of a copayment of \$15 by Member

(b) Non-Network Clinic ^(Note 10)

90% reimbursement up to maximum limit for one visit per day

345

Basic Diagnostic Testing #

(a) Network Clinic (100% reimbursement)

(b) Non-Network Clinic (90% reimbursement)

Maximum limit per Policy Year

(applicable to both Network & Non-Network diagnostic testing centers)

7,000

Prescribed Long-term Medicine (Non-Network only) #

- from any legitimate source other than doctor's clinic

90% reimbursement up to maximum limit per Policy Year

7,000

Chinese Medicine (including Chinese herbal medicine, bonesetting, acupuncture and Tui Na) received from Registered/Listed Chinese Medicine Practitioner in Hong Kong

Consultation inclusive of medicines

Maximum 20 Visits per Policy Year

(applicable to both Network & Non-Network clinics)

(a) Network Clinic

Consultation including up to 2 packs of necessary herbs, subject to a copayment of \$15 payable for each visit by Member

(b) Non-Network Clinic

90% reimbursement up to maximum limit per visit

200

Annual Overall Limit Per Person

28,335

Subject to referral by a Physician, except referral requirement is waived for Specialist Physician's Consultation at Network/Non-Network clinic (but referral is still required for Chiropractic treatment).

- Notes:
- (1) *The Hospitalisation and Surgical Benefits shall cover operating room expenses for surgery done in the day care unit of a Hospital where no room and board and Physician's services is being charged, subject to the maximum limit of Operating Room benefit.*
 - (2) *For confinement in HA Hospitals, 100% of room and board shall be reimbursed for Members under Group 1 residing in Private room and Members under Group 2 residing in Semi-Private room. Other hospital items shall be reimbursed according to the benefit limit specified in the Benefits Summary.*
 - (3) *The Intensive Care Unit and General Nursing Care Benefit is payable for the actual charges incurred for room, board and general nursing care if a Member is accommodated in an Intensive Care Unit recommended by the doctor-in-charge, subject to the maximum shown in this Summary. Payments made under this provision shall be in lieu of the Daily Room & Board and General Nursing Care Benefit.*
 - (4) *Policy Year shall mean a period of 12 months commencing 1 July of the year to 30 June of the following year.*
 - (5) *Advanced diagnostic imaging (MRI, CT scans, nuclear medicine) shall be payable under Other Hospital Services.*
 - (6) *The Surgeon's Fee Benefit also covers post-surgical care within 180 days after discharge from hospital, but not expenses incurred in respect of post-surgical in-hospital doctor's visits which are covered under the In-Hospital Physician's Consultation Benefit.*
 - (7) *The In-Hospital Physician's Consultation Benefit is extended to cover post-surgical ward round in-hospital doctor's visits.*
 - (8) *This benefit will be payable in lieu of Daily Room & Board and General Nursing Care when confinement is in a General Ward of Hospital Authority's hospitals in Hong Kong or Macau.*
 - (9) *This Increased Hospitalisation Benefit shall not apply to hospitalisation within the People's Republic of China including Hong Kong SAR and Macau SAR.*
 - (10) *Exceptionally, reimbursement will be for 100% of the actual expenses up to maximum entitlement as stated in the above benefits summary for the following:*
 - general outpatient, specialist outpatient consultation or physiotherapy treatment at the Government clinic;*
 - attendance at an Accident and Emergency Department of hospitals under the Hospital Authority*
 - (11) *Telemedicine Service excludes reimbursement for medication delivery charge*
 - (12) *Cover is extended to include Non-Network Telemedicine Services provided by EC Healthcare, DrGo, UMP, QHMS*