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This Benefit Schedule forms part of your Policy with Avo Insurance Company Limited and it contains the limits which apply to the Benefit(s) you have chosen. You must read this Benefit Schedule together with your Policy and Policy Schedule.

Avo Cancer (Reimbursement) Protection Benefit Schedule
Top and Female Cancer

Benefit Items	Benefit Plan	
	Lite	**Plus**
Covered Organs	Brain, Colon, Gallbladder, Liver, Lung, Pancreas, Kidney, Stomach, Breast, Corpus uteri, Ovary and Cervix	
Maximum Benefit Limit (applicable to Section a-d)		
Lifetime Benefit Limit [1]	**HKD1,500,000**	**HKD3,000,000**
Covered Cancer Limit [2]	**HKD500,000**	**HKD1,000,000**
(a) Diagnostic Benefit		
Diagnostic Benefit (in-patient and/or out-patient)	**Reimbursement** Including but not limited to laboratory test, X-ray, CT scan, MRI scan, positron emission tomography (PET), fine-needle aspiration for cytology or histopathology, excisional biopsy for histopathology and any other diagnostic tests	
(b) Treatment Benefit		
(i) Active and Palliative Treatment Benefit (in-patient and/or out-patient)	**Reimbursement** Including but not limited to radiotherapy, chemotherapy, target therapy, hormonal therapy and immunotherapy	
Confinement Benefit: (ii) Hospital Room and Board (iii) Attending Doctor's Visit Fee (iv) Specialist's Fee (v) Intensive Care (vi) Surgical Expense (vii) Miscellaneous Hospitalization Expense (viii) Companion Bed	**Reimbursement**	
(ix) Pre- or Post-treatment Outpatient Benefit	**Reimbursement** Maximum 1 consultation per day	
(c) Reconstructive Surgery Benefit		
Reconstructive Surgery Benefit [3]	**Reimbursement**	
(d) Monitoring Benefit		
Monitoring Benefit	**Reimbursement** Up to 5 years after completion of active treatments	
(e) Extended Caring Benefit		
(i) Alternative Treatment Benefit - Traditional Chinese Medicines Treatment - Acupuncture - Physiotherapy [3] - Occupational Therapy [3] - Speech Therapy [3] - Dietician Consultation [3] - Chiropractic Therapy [3] - Psychological Counselling [3,4] - Home Nursing [3]	HKD700 per visit, maximum 1 visit per day (maximum 45 visits per covered cancer)	HKD800 per visit, maximum 1 visit per day (maximum 45 visits per covered cancer)
(ii) Medical Devices Benefit [3] (purchase or rental)	HKD5,000 per covered cancer	HKD10,000 per covered cancer
Waiting Period	90 days after Policy Effective Date	

Remarks:

1. "Lifetime Benefit Limit" means the maximum amount of benefits paid by the Company to the Policy Holder cumulatively since the inception of these Terms and Benefits.
2. "Covered Cancer Limit" means the maximum aggregate amount paid or payable in respect of the benefits for any one covered cancer. For the avoidance of doubt, the latest cancer is diagnosed with the same histopathology of any preceding cancer relapsed or metastasis within three (3) years of remission shall be treated as the same cancer.
3. A referral letter from the attending Registered Medical Practitioner is required.
4. For the insured person and one immediate family member.

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本***保障列表***是你與安我保險有限公司之間的保險契約一部份，並列出你所選擇的保障賠償限額。你必須連同本***保障列表***、你的***保單***及***保單列表***一併閱讀。

Avo癌症（實報實銷）保障之保障列表
常見及女性癌症

保障項目	保障計劃	
	Lite	**Plus**
受保器官	腦、大腸、膽囊、肝、肺、胰臟、腎、胃、乳房、子宮體、卵巢及子宮頸	
最高賠償限額（適用於a-d部分）		
終身保障限額 [1]	**1,500,000** 港元	**3,000,000** 港元
受保癌症限額 [2]	**500,000** 港元	**1,000,000** 港元
(a) 診斷保障		
診斷保障 （以住院及/或門診形式進行）	實報實銷 包括但不限於化驗、X 光檢查、電腦斷層掃描（"CT" 掃描）、磁力共振掃描（"MRI" 掃描）、正電子放射斷層掃描（"PET" 掃描）、細胞學或組織病理學的細針穿刺、組織病理切除活檢以及建立陽性診斷的任何其他診斷測試	
(b) 治療保障		
(i) 積極治療及紓緩治療保障 （以住院及/或門診形式進行）	實報實銷 包括但不限於放射性治療（電療）、化學治療（化療）、標靶治療、激素治療和免疫治療	
住院保障： (ii) 每日病房及膳食 (iii) 主診醫生巡房費 (iv) 專科醫生費用 (v) 深切治療 (vi) 手術費用 (vii) 住院雜費 (viii) 住院陪床	實報實銷	
(ix) 治療前或治療後的門診保障	實報實銷 每天僅限一次諮詢	
(c) 重建手術保障		
重建手術保障 [3]	實報實銷	
(d) 監察檢查保障		
監察檢查保障	實報實銷 由完成積極治療當日起計最長五年的費用	
(e) 延伸護理保障		
(i) 輔助治療保障 - 中醫治療 - 針灸 - 物理治療 [3] - 職業治療 [3] - 言語治療 [3] - 營養師諮詢 [3] - 脊椎治療 [3] - 心理輔導 [3,4] - 私家看護 [3]	每日一次診症，每次 700 港元 （每次受保癌症最高賠償 45 次）	每日一次診症，每次 800 港元 （每次受保癌症最高賠償 45 次）
(ii) 醫療裝置保障 [3] （購買或租借）	每次受保癌症 5,000 港元	每次受保癌症 10,000 港元
等候期	保單生效日後 90 天	

備註：

1. 「終身保障限額」是指本公司由本條款及保障生效起向保單持有人累計支付的最高賠償限額。
2. 「受保癌症限額」是指就任何一項受保癌症已支付或可支付的保障之最高賠償限額。為免生疑問，三年內任何最近期之癌症被診斷出與上一次癌症的復發或轉移擁有相同病理組織將視為相同癌症，並受同一受保癌症限額所規限。
3. 需要主診註冊醫生簽發的轉介信。
4. 適用於受保人和一名直系親屬。