

Healthy Plus Refundable Hospital Income Plan

Celebrate life to the fullest
Plan ahead for the future

Medical • Non-participating Life



Healthy Plus Refundable Hospital Income Plan

Unexpected illnesses or injuries may catch you off guard, which is why a comprehensive hospital income plan is your strongest pillar of support that will empower you to embrace life's challenges with ease!

Healthy Plus Refundable Hospital Income Plan (the "Plan") provides you with various daily hospital cash benefits for up to 1,000 days regardless of the actual hospital expenses, giving you a profound sense of reassurance.

The Plan features 10 plan levels. You can select the protection that suits your needs and budget best. Certain plan levels are applicable to children under 18 years old as the Insured. In addition to the standard hospital cash benefit payable for hospitalization caused by sickness or injury, the Plan provides extra protection such as additional hospital cash benefits involving accidents, public transport accidents and any covered infectious diseases to provide timely assistance in unexpected circumstances.

It's time to take charge of a healthy future. By paying premiums for just 6 years, you can enjoy 12 years of protection. Alternatively, with a 10-years premium payment term, you will be covered for 20 years. You will enjoy a refund exceeding Total Premiums Paid¹ as Maturity Benefit at maturity regardless of any claims made during the benefit term! With the 10-years option, the Maturity Benefit is 108% Total Premiums Paid¹.



Choices of 10 plan levels

The Plan offers two premium payment terms for you to choose: 6-years premium payment term (with 12-years benefit term) and 10-years premium payment term (with 20-years benefit term). There are 10 plan levels in each premium payment term for you to select. During the Insured's Confinement at hospital due to sickness, disease, illness or injury, you will receive Daily Hospital Cash Benefit^{2,3}, which amounts up to 1,000 days under this Policy.



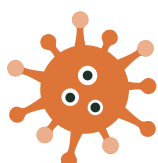
Additional Accidental Daily Hospital Cash Benefit^{3,4}

If the Insured is confined at a hospital as a result of an Accident, an Additional Accidental Daily Hospital Cash Benefit^{3,4} will be payable up to 90 days per Confinement.



Additional Accidental Daily Hospital Cash Benefit involving Public Transport^{3,5}

If the Insured is confined at a hospital as a result of an accident involving public transport, an Additional Accidental Daily Hospital Cash Benefit involving Public Transport^{3,5} will be payable up to 365 days under this Policy.



Additional Infectious Diseases Daily Hospital Cash Benefit⁶

Further, if the Insured is in a Confinement due to any Covered Infectious Disease, an Additional Infectious Diseases Daily Hospital Cash Benefit⁶ will be payable up to 30 days under this Policy.



Extra Discount for Protection of You and Your Beloved

Once you have applied for your own policy, if you apply for this Plan for your spouse and/or children at the same time, your policy/policies can enjoy 5% discount off the premium throughout the premium payment term⁷ (the “Family Discount”).



Life Protection

The Plan offers a life protection of an amount equivalent to the sum of 10 times of Daily Hospital Cash Benefit^{2,3} and 100% of Total Premiums Paid¹ to ease the Insured’s family needs in the unfortunate event of death of the Insured. There will be an additional Accidental Death Benefit of an amount equivalent to 100 times of Daily Hospital Cash Benefit^{2,3} if the death of the Insured is caused by an Accident.



Refund of Premium

At maturity, you will enjoy a refund of 104% of Total Premiums Paid¹ at 12th Policy Anniversary for 6-years premium payment term; or 108% of Total Premiums Paid¹ at 20th Policy Anniversary for 10-years premium payment term regardless of your claims made during the benefit term. The Surrender Benefit which is expressed as a percentage of Total Premiums Paid¹ up to the date of surrender⁸ is payable if the Plan is surrendered before the maturity.

Plan Information

Plan Type	Basic Plan	
Benefit Term	12 years (6-years Premium Payment Term) 20 years (10-years Premium Payment Term)	
Issue Age (Age Next Birthday)	Plan A / B / F / G 6-years Premium Payment Term: 1 - 65 10-years Premium Payment Term: 1 - 60	Plan C / D / E / H / I / J 6-years Premium Payment Term: 18 - 65 10-years Premium Payment Term: 18 - 60
Premium Structure	The premium is non-guaranteed ⁹ but it will not be increased based on the age of the Insured on his or her next birthday.	
Currency	HKD / USD	
Premium Payment Mode	Annually / Monthly	

Benefit Schedule

Benefits	Plan A	Plan B	Plan C	Plan D	Plan E
	Plan F	Plan G	Plan H	Plan I	Plan J

I. Daily Hospital Cash Benefit^{2,3}

Coverage per day of Confinement	HK\$ 360 / US\$ 45	HK\$ 640 / US\$ 80	HK\$ 1,000 / US\$ 125	HK\$ 1,440 / US\$ 180	HK\$ 2,000 / US\$ 250
Maximum Coverage under this Policy	1,000 Days				

II. Additional Accidental Daily Hospital Cash Benefit^{3,4}

Coverage per day of Confinement	HK\$ 360 / US\$ 45	HK\$ 640 / US\$ 80	HK\$ 1,000 / US\$ 125	HK\$ 1,440 / US\$ 180	HK\$ 2,000 / US\$ 250
	(Payable in addition to Daily Hospital Cash Benefit ^{2,3})				
Maximum Coverage per Confinement	90 Days				

III. Additional Accidental Daily Hospital Cash Benefit involving Public Transport^{3,5}

Coverage per day of Confinement	HK\$ 360 / US\$ 45	HK\$ 640 / US\$ 80	HK\$ 1,000 / US\$ 125	HK\$ 1,440 / US\$ 180	HK\$ 2,000 / US\$ 250
	(Payable in addition to Daily Hospital Cash Benefit ^{2,3} and Additional Accidental Daily Hospital Cash Benefit ^{3,4})				
Maximum Coverage under this Policy	365 Days				

Benefit Schedule

Benefits	Plan A	Plan B	Plan C	Plan D	Plan E
	Plan F	Plan G	Plan H	Plan I	Plan J

IV. Additional Infectious Diseases Daily Hospital Cash Benefit⁶

Coverage per day of Confinement	HK\$ 360 / US\$ 45	HK\$ 640 / US\$ 80	HK\$ 1,000 / US\$ 125	HK\$ 1,440 / US\$ 180	HK\$ 2,000 / US\$ 250
	(Payable in addition to Daily Hospital Cash Benefit ^{2,3})				

Maximum Coverage under this Policy	30 Days				
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V. Death Benefit	An amount equivalent to the sum of 10 times of Daily Hospital Cash Benefit ^{2,3} and 100% of Total Premiums Paid ¹
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VI. Additional Death Benefit	An amount equivalent to 100 times of Daily Hospital Cash Benefit ^{2,3}
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VII. Surrender Benefit	It is a percentage of Total Premiums Paid ¹ up to the date of surrender ⁸ as set out below:			
	6-years Premium Payment Term (with 12-years Benefit Term):			
	Surrender during the Policy Year	% of Total Premiums Paid	Surrender during the Policy Year	% of Total Premiums Paid
1 st	0%	7 th	65%	
2 nd	10%	8 th	75%	
3 rd	20%	9 th	85%	
4 th	30%	10 th	95%	
5 th	40%	11 th	97%	
6 th	55%	12 th	99%	

Benefit Schedule

Benefits	Plan A	Plan B	Plan C	Plan D	Plan E	
	Plan F	Plan G	Plan H	Plan I	Plan J	
VII. Surrender Benefit	10-years Premium Payment Term (with 20-years Benefit Term):					
	Surrender during the Policy Year		% of Total Premiums Paid	Surrender during the Policy Year		% of Total Premiums Paid
	1 st - 2 nd		0%	12 th		73%
	3 rd		10%	13 th		76%
	4 th		20%	14 th		79%
	5 th		30%	15 th		82%
	6 th		40%	16 th		85%
	7 th		50%	17 th		88%
	8 th		55%	18 th		91%
	9 th		60%	19 th		94%
	10 th		65%	20 th		97%
	11 th		70%	/		
VIII. Maturity Benefit	<ul style="list-style-type: none"> 6-years Premium Payment Term (with 12-years Benefit Term): 104% of Total Premiums Paid¹ 10-years Premium Payment Term (with 20-years Benefit Term): 108% of Total Premiums Paid¹ 					
	FWD Care	24-hour Worldwide Assistance Service ¹⁰			Service Program	
CANcierge ¹¹			Service Program			

Benefit Schedule

Benefits	Plan A	Plan B	Plan C	Plan D	Plan E
IX. 12-month Out-patient Medical Service ¹²	Available for Plans A-E Only (The service is only available for 12 months period and only offered once throughout the entire Benefit Term of the Plan.)				
	Coverage Summary (HKD)				
	General Consultation <i>Inclusive of 3 days basic medication</i>				
	• No of visits/day		1 visit		
	• Co-payment per visit		HK\$50		
	• Max. visits/member		30 visits		
	Specialist Consultation - Subject to referral letter by registered western medical practitioner - Inclusive of up to 5 days basic medication				
	• No of visits/day		1 visit		
	• Co-payment per visit		HK\$100		
	• Max. visits/member		10 visits		
	Traditional Chinese Medicine <i>Inclusive of 2 days of basic herbs</i>				
	• No of visits/day		1 visit		
	• Co-payment per visit		HK\$50		
	• Max. visits/member		10 visits		
	Physiotherapy and Bone-setting <i>Physiotherapy Treatment (Subject to referral letter by registered western medical practitioner) and Bone-setting Services</i>				
• No of visits/day		1 visit			
• Co-payment per visit		\$0			
• Max. visits/accident		5 visits at same appointed clinic			

This product material is for reference only and is indicative of the key features of the product. For the exact terms and conditions and the full list of exclusions of the product, please refer to the policy provisions of this product. In the event of any ambiguity or inconsistency between the terms of this product material and the policy provisions, the policy provisions shall prevail. In case you want to read the terms and conditions of the policy provisions before making an application, you can obtain a copy from FWD. The policy provisions of the product are governed by the laws of Hong Kong.

Premium Table

Premiums of the Plan stated below is based on various factors, including but not limited to the age, gender and plan level. The premium is non-guaranteed⁹ and may significantly increase due to factors including but not limited to claims experience and policy persistency. However, premium will not be increased based on the age of the Insured on his or her next birthday.

Please refer to the premium table “Family Discount (5% off the premium)” if the Insured of your policy is the spouse or children of the Related Insured of another policy of the Plan⁷.

Premium payment modal factor: Annual Premium = Monthly Premium ÷ 0.09.

The premiums in the premium table are calculated based on standard rates and are for reference only. The actual premium will be determined by FWD upon approval of application.

This premium table does not include levy which will be collected by the Insurance Authority.

Monthly Premium Table (USD) (6-years Premium Payment Term with 12-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	272.97	351.00	/	/	/	153.00	227.97	/	/	/
4 - 17	216.00	276.03	/	/	/	119.97	180.00	/	/	/
18 - 31	182.97	226.98	285.03	369.00	478.98	117.00	160.02	218.97	302.04	413.01
32 - 36	198.00	260.01	326.97	424.98	551.97	131.04	194.04	260.01	358.02	485.01
37 - 41	213.03	282.96	353.97	477.00	614.97	145.98	216.99	288.00	410.04	548.01
42 - 46	231.03	326.97	465.03	635.04	842.04	164.97	260.01	397.98	568.98	774.99
47 - 51	282.96	416.97	600.03	828.99	1,107.99	216.99	350.01	532.98	763.02	1,042.02
52 - 56	324.99	502.02	741.96	998.01	1,324.98	269.01	434.97	675.00	930.96	1,258.02
57 - 60	402.03	622.98	918.99	1,238.04	1,644.03	333.00	540.00	837.99	1,153.98	1,559.97
61 - 65	478.98	744.03	1,096.02	1,476.99	1,962.99	397.98	644.04	999.99	1,377.00	1,863.00

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	272.97	351.00	/	/	/	153.00	227.97	/	/	/
4 - 17	216.00	276.03	/	/	/	119.97	180.00	/	/	/
18 - 31	185.04	228.96	289.98	377.01	489.96	118.98	162.99	223.02	309.96	423.00
32 - 36	191.97	252.00	313.02	419.04	538.02	125.01	185.04	245.97	351.99	470.97
37 - 41	206.01	267.03	326.97	434.97	559.98	140.04	199.98	260.01	369.00	494.01
42 - 46	215.01	294.03	414.99	563.04	744.03	147.96	226.98	348.03	495.99	676.98
47 - 51	248.04	362.97	519.03	708.03	933.03	180.99	296.01	451.98	641.97	866.97
52 - 56	304.02	453.96	666.99	925.02	1,229.04	237.96	387.99	600.03	857.97	1,162.98
57 - 60	377.01	563.04	827.01	1,148.04	1,524.96	294.03	480.96	744.03	1,064.97	1,441.98
61 - 65	450.00	671.04	988.02	1,370.97	1,820.97	350.01	575.01	888.03	1,270.98	1,720.98

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	259.32	333.45	/	/	/	145.35	216.57	/	/	/
4 - 17	205.20	262.23	/	/	/	113.97	171.00	/	/	/
18 - 31	173.82	215.63	270.78	350.55	455.03	111.15	152.02	208.02	286.94	392.36
32 - 36	188.10	247.01	310.62	403.73	524.37	124.49	184.34	247.01	340.12	460.76
37 - 41	202.38	268.81	336.27	453.15	584.22	138.68	206.14	273.60	389.54	520.61
42 - 46	219.48	310.62	441.78	603.29	799.94	156.72	247.01	378.08	540.53	736.24
47 - 51	268.81	396.12	570.03	787.54	1,052.59	206.14	332.51	506.33	724.87	989.92
52 - 56	308.74	476.92	704.86	948.11	1,258.73	255.56	413.22	641.25	884.41	1,195.12
57 - 60	381.93	591.83	873.04	1,176.14	1,561.83	316.35	513.00	796.09	1,096.28	1,481.97
61 - 65	455.03	706.83	1,041.22	1,403.14	1,864.84	378.08	611.84	949.99	1,308.15	1,769.85

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	259.32	333.45	/	/	/	145.35	216.57	/	/	/
4 - 17	205.20	262.23	/	/	/	113.97	171.00	/	/	/
18 - 31	175.79	217.51	275.48	358.16	465.46	113.03	154.84	211.87	294.46	401.85
32 - 36	182.37	239.40	297.37	398.09	511.12	118.76	175.79	233.67	334.39	447.42
37 - 41	195.71	253.68	310.62	413.22	531.98	133.04	189.98	247.01	350.55	469.31
42 - 46	204.26	279.33	394.24	534.89	706.83	140.56	215.63	330.63	471.19	643.13
47 - 51	235.64	344.82	493.08	672.63	886.38	171.94	281.21	429.38	609.87	823.62
52 - 56	288.82	431.26	633.64	878.77	1,167.59	226.06	368.59	570.03	815.07	1,104.83
57 - 60	358.16	534.89	785.66	1,090.64	1,448.71	279.33	456.91	706.83	1,011.72	1,369.88
61 - 65	427.50	637.49	938.62	1,302.42	1,729.92	332.51	546.26	843.63	1,207.43	1,634.93

Premium Table

Premium Table

Monthly Premium Table (USD) (10-years Premium Payment Term with 20-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	90.99	117.00	/	/	/	51.03	75.96	/	/	/
4 - 17	72.00	91.98	/	/	/	39.96	60.03	/	/	/
18 - 31	88.02	108.99	136.98	177.03	230.04	55.98	77.04	105.03	144.99	198.00
32 - 36	95.04	125.01	156.96	204.03	264.96	63.00	92.97	125.01	171.99	233.01
37 - 41	101.97	135.99	170.01	228.96	295.02	70.02	104.04	137.97	197.01	262.98
42 - 46	110.97	156.96	223.02	305.01	404.01	79.02	125.01	190.98	272.97	371.97
47 - 51	135.99	199.98	288.00	397.98	531.99	104.04	168.03	255.96	366.03	500.04
52 - 56	155.97	241.02	356.04	478.98	636.03	128.97	208.98	324.00	447.03	603.99
57 - 60	192.96	298.98	441.00	594.00	789.03	160.02	259.02	402.03	554.04	748.98

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	90.99	117.00	/	/	/	51.03	75.96	/	/	/
4 - 17	72.00	91.98	/	/	/	39.96	60.03	/	/	/
18 - 31	89.01	109.98	138.96	180.99	234.99	56.97	78.03	107.01	149.04	203.04
32 - 36	91.98	120.96	150.03	200.97	258.03	60.03	89.01	117.99	169.02	225.99
37 - 41	99.00	127.98	156.96	208.98	269.01	66.96	96.03	125.01	177.03	236.97
42 - 46	102.96	141.03	198.99	270.00	357.03	71.01	108.99	167.04	237.96	324.99
47 - 51	118.98	173.97	249.03	340.02	448.02	87.03	142.02	216.99	307.98	415.98
52 - 56	145.98	217.98	320.04	443.97	590.04	114.03	186.03	288.00	412.02	558.00
57 - 60	180.99	270.00	396.99	550.98	731.97	141.03	231.03	357.03	511.02	692.01

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	86.44	111.15	/	/	/	48.48	72.16	/	/	/
4 - 17	68.40	87.38	/	/	/	37.96	57.03	/	/	/
18 - 31	83.62	103.54	130.13	168.18	218.54	53.18	73.19	99.78	137.74	188.10
32 - 36	90.29	118.76	149.11	193.83	251.71	59.85	88.32	118.76	163.39	221.36
37 - 41	96.87	129.19	161.51	217.51	280.27	66.52	98.84	131.07	187.16	249.83
42 - 46	105.42	149.11	211.87	289.76	383.81	75.07	118.76	181.43	259.32	353.37
47 - 51	129.19	189.98	273.60	378.08	505.39	98.84	159.63	243.16	347.73	475.04
52 - 56	148.17	228.97	338.24	455.03	604.23	122.52	198.53	307.80	424.68	573.79
57 - 60	183.31	284.03	418.95	564.30	749.58	152.02	246.07	381.93	526.34	711.53

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	86.44	111.15	/	/	/	48.48	72.16	/	/	/
4 - 17	68.40	87.38	/	/	/	37.96	57.03	/	/	/
18 - 31	84.56	104.48	132.01	171.94	223.24	54.12	74.13	101.66	141.59	192.89
32 - 36	87.38	114.91	142.53	190.92	245.13	57.03	84.56	112.09	160.57	214.69
37 - 41	94.05	121.58	149.11	198.53	255.56	63.61	91.23	118.76	168.18	225.12
42 - 46	97.81	133.98	189.04	256.50	339.18	67.46	103.54	158.69	226.06	308.74
47 - 51	113.03	165.27	236.58	323.02	425.62	82.68	134.92	206.14	292.58	395.18
52 - 56	138.68	207.08	304.04	421.77	560.54	108.33	176.73	273.60	391.42	530.10
57 - 60	171.94	256.50	377.14	523.43	695.37	133.98	219.48	339.18	485.47	657.41

Premium Table

Monthly Premium Table (HKD) (6-years Premium Payment Term with 12-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	2,729.97	3,510.00	/	/	/	1,530.00	2,279.97	/	/	/
4 - 17	2,160.00	2,760.03	/	/	/	1,199.97	1,800.00	/	/	/
18 - 31	1,829.97	2,269.98	2,850.03	3,690.00	4,789.98	1,170.00	1,600.02	2,189.97	3,020.04	4,130.01
32 - 36	1,980.00	2,600.01	3,269.97	4,249.98	5,519.97	1,310.04	1,940.04	2,600.01	3,580.02	4,850.01
37 - 41	2,130.03	2,829.96	3,539.97	4,770.00	6,149.97	1,459.98	2,169.99	2,880.00	4,100.04	5,480.01
42 - 46	2,310.03	3,269.97	4,650.03	6,350.04	8,420.04	1,649.97	2,600.01	3,979.98	5,689.98	7,749.99
47 - 51	2,829.96	4,169.97	6,000.03	8,289.99	11,079.99	2,169.99	3,500.01	5,329.98	7,630.02	10,420.02
52 - 56	3,249.99	5,020.02	7,419.96	9,980.01	13,249.98	2,690.01	4,349.97	6,750.00	9,309.96	12,580.02
57 - 60	4,020.03	6,229.98	9,189.99	12,380.04	16,440.03	3,330.00	5,400.00	8,379.99	11,539.98	15,599.97
61 - 65	4,789.98	7,440.03	10,960.02	14,769.99	19,629.99	3,979.98	6,440.04	9,999.99	13,770.00	18,630.00

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	2,729.97	3,510.00	/	/	/	1,530.00	2,279.97	/	/	/
4 - 17	2,160.00	2,760.03	/	/	/	1,199.97	1,800.00	/	/	/
18 - 31	1,850.04	2,289.96	2,899.98	3,770.01	4,899.96	1,189.98	1,629.99	2,230.02	3,099.96	4,230.00
32 - 36	1,919.97	2,520.00	3,130.02	4,190.04	5,380.02	1,250.01	1,850.04	2,459.97	3,519.99	4,709.97
37 - 41	2,060.01	2,670.03	3,269.97	4,349.97	5,599.98	1,400.04	1,999.98	2,600.01	3,690.00	4,940.01
42 - 46	2,150.01	2,940.03	4,149.99	5,630.04	7,440.03	1,479.96	2,269.98	3,480.03	4,959.99	6,769.98
47 - 51	2,480.04	3,629.97	5,190.03	7,080.03	9,330.03	1,809.99	2,960.01	4,519.98	6,419.97	8,669.97
52 - 56	3,040.02	4,539.96	6,669.99	9,250.02	12,290.04	2,379.96	3,879.99	6,000.03	8,579.97	11,629.98
57 - 60	3,770.01	5,630.04	8,270.01	11,480.04	15,249.96	2,940.03	4,809.96	7,440.03	10,649.97	14,419.98
61 - 65	4,500.00	6,710.04	9,880.02	13,709.97	18,209.97	3,500.01	5,750.01	8,880.03	12,709.98	17,209.98

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	2,593.47	3,334.50	/	/	/	1,453.50	2,165.97	/	/	/
4 - 17	2,052.00	2,622.03	/	/	/	1,139.97	1,710.00	/	/	/
18 - 31	1,738.47	2,156.48	2,707.53	3,505.50	4,550.48	1,111.50	1,520.02	2,080.47	2,869.04	3,923.51
32 - 36	1,881.00	2,470.01	3,106.47	4,037.48	5,243.97	1,244.54	1,843.04	2,470.01	3,401.02	4,607.51
37 - 41	2,023.53	2,688.46	3,362.97	4,531.50	5,842.47	1,386.98	2,061.49	2,736.00	3,895.04	5,206.01
42 - 46	2,194.53	3,106.47	4,417.53	6,032.54	7,999.04	1,567.47	2,470.01	3,780.98	5,405.48	7,362.49
47 - 51	2,688.46	3,961.47	5,700.03	7,875.49	10,525.99	2,061.49	3,325.01	5,063.48	7,248.52	9,899.02
52 - 56	3,087.49	4,769.02	7,048.96	9,481.01	12,587.48	2,555.51	4,132.47	6,412.50	8,844.46	11,951.02
57 - 60	3,819.03	5,918.48	8,730.49	11,761.04	15,618.03	3,163.50	5,130.00	7,960.99	10,962.98	14,819.97
61 - 65	4,550.48	7,068.03	10,412.02	14,031.49	18,648.49	3,780.98	6,118.04	9,499.99	13,081.50	17,698.50

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	2,593.47	3,334.50	/	/	/	1,453.50	2,165.97	/	/	/
4 - 17	2,052.00	2,622.03	/	/	/	1,139.97	1,710.00	/	/	/
18 - 31	1,757.54	2,175.46	2,754.98	3,581.51	4,654.96	1,130.48	1,548.49	2,118.52	2,944.96	4,018.50
32 - 36	1,823.97	2,394.00	2,973.52	3,980.54	5,111.02	1,187.51	1,757.54	2,336.97	3,343.99	4,474.47
37 - 41	1,957.01	2,536.53	3,106.47	4,132.47	5,319.98	1,330.04	1,899.98	2,470.01	3,505.50	4,693.01
42 - 46	2,042.51	2,793.03	3,942.49	5,348.54	7,068.03	1,405.96	2,156.48	3,306.03	4,711.99	6,431.48
47 - 51	2,356.04	3,448.47	4,930.53	6,726.03	8,863.53	1,719.49	2,812.01	4,293.98	6,098.97	8,236.47
52 - 56	2,888.02	4,312.96	6,336.49	8,787.52	11,675.54	2,260.96	3,685.99	5,700.03	8,150.97	11,048.48
57 - 60	3,581.51	5,348.54	7,856.51	10,906.04	14,487.46	2,793.03	4,569.46	7,068.03	10,117.47	13,698.98
61 - 65	4,275.00	6,374.54	9,386.02	13,024.47	17,299.47	3,325.01	5,462.51	8,436.03	12,074.48	16,349.48

Premium Table

Premium Table

Monthly Premium Table (HKD) (10-years Premium Payment Term with 20-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	909.99	1,170.00	/	/	/	510.03	759.96	/	/	/
4 - 17	720.00	919.98	/	/	/	399.96	600.03	/	/	/
18 - 31	880.02	1,089.99	1,369.98	1,770.03	2,300.04	559.98	770.04	1,050.03	1,449.99	1,980.00
32 - 36	950.04	1,250.01	1,569.96	2,040.03	2,649.96	630.00	929.97	1,250.01	1,719.99	2,330.01
37 - 41	1,019.97	1,359.99	1,700.01	2,289.96	2,950.02	700.02	1,040.04	1,379.97	1,970.01	2,629.98
42 - 46	1,109.97	1,569.96	2,230.02	3,050.01	4,040.01	790.02	1,250.01	1,909.98	2,729.97	3,719.97
47 - 51	1,359.99	1,999.98	2,880.00	3,979.98	5,319.99	1,040.04	1,680.03	2,559.96	3,660.03	5,000.04
52 - 56	1,559.97	2,410.02	3,560.04	4,789.98	6,360.03	1,289.97	2,089.98	3,240.00	4,470.03	6,039.99
57 - 60	1,929.96	2,989.98	4,410.00	5,940.00	7,890.03	1,600.02	2,590.02	4,020.03	5,540.04	7,489.98

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	909.99	1,170.00	/	/	/	510.03	759.96	/	/	/
4 - 17	720.00	919.98	/	/	/	399.96	600.03	/	/	/
18 - 31	890.01	1,099.98	1,389.96	1,809.99	2,349.99	569.97	780.03	1,070.01	1,490.04	2,030.04
32 - 36	919.98	1,209.96	1,500.03	2,009.97	2,580.03	600.03	890.01	1,179.99	1,690.02	2,259.99
37 - 41	990.00	1,279.98	1,569.96	2,089.98	2,690.01	669.96	960.03	1,250.01	1,770.03	2,369.97
42 - 46	1,029.96	1,410.03	1,989.99	2,700.00	3,570.03	710.01	1,089.99	1,670.04	2,379.96	3,249.99
47 - 51	1,189.98	1,739.97	2,490.03	3,400.02	4,480.02	870.03	1,420.02	2,169.99	3,079.98	4,159.98
52 - 56	1,459.98	2,179.98	3,200.04	4,439.97	5,900.04	1,140.03	1,860.03	2,880.00	4,120.02	5,580.00
57 - 60	1,809.99	2,700.00	3,969.99	5,509.98	7,319.97	1,410.03	2,310.03	3,570.03	5,110.02	6,920.01

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	864.49	1,111.50	/	/	/	484.53	721.96	/	/	/
4 - 17	684.00	873.98	/	/	/	379.96	570.03	/	/	/
18 - 31	836.02	1,035.49	1,301.48	1,681.53	2,185.04	531.98	731.54	997.53	1,377.49	1,881.00
32 - 36	902.54	1,187.51	1,491.46	1,938.03	2,517.46	598.50	883.47	1,187.51	1,633.99	2,213.51
37 - 41	968.97	1,291.99	1,615.01	2,175.46	2,802.52	665.02	988.04	1,310.97	1,871.51	2,498.48
42 - 46	1,054.47	1,491.46	2,118.52	2,897.51	3,838.01	750.52	1,187.51	1,814.48	2,593.47	3,533.97
47 - 51	1,291.99	1,899.98	2,736.00	3,780.98	5,053.99	988.04	1,596.03	2,431.96	3,477.03	4,750.04
52 - 56	1,481.97	2,289.52	3,382.04	4,550.48	6,042.03	1,225.47	1,985.48	3,078.00	4,246.53	5,737.99
57 - 60	1,833.46	2,840.48	4,189.50	5,643.00	7,495.53	1,520.02	2,460.52	3,819.03	5,263.04	7,115.48

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	864.49	1,111.50	/	/	/	484.53	721.96	/	/	/
4 - 17	684.00	873.98	/	/	/	379.96	570.03	/	/	/
18 - 31	845.51	1,044.98	1,320.46	1,719.49	2,232.49	541.47	741.03	1,016.51	1,415.54	1,928.54
32 - 36	873.98	1,149.46	1,425.03	1,909.47	2,451.03	570.03	845.51	1,120.99	1,605.52	2,146.99
37 - 41	940.50	1,215.98	1,491.46	1,985.48	2,555.51	636.46	912.03	1,187.51	1,681.53	2,251.47
42 - 46	978.46	1,339.53	1,890.49	2,565.00	3,391.53	674.51	1,035.49	1,586.54	2,260.96	3,087.49
47 - 51	1,130.48	1,652.97	2,365.53	3,230.02	4,256.02	826.53	1,349.02	2,061.49	2,925.98	3,951.98
52 - 56	1,386.98	2,070.98	3,040.04	4,217.97	5,605.04	1,083.03	1,767.03	2,736.00	3,914.02	5,301.00
57 - 60	1,719.49	2,565.00	3,771.49	5,234.48	6,953.97	1,339.53	2,194.53	3,391.53	4,854.52	6,574.01

Premium Table

Annual Premium Table (USD) (6-years Premium Payment Term with 12-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	3,033	3,900	/	/	/	1,700	2,533	/	/	/
4 - 17	2,400	3,067	/	/	/	1,333	2,000	/	/	/
18 - 31	2,033	2,522	3,167	4,100	5,322	1,300	1,778	2,433	3,356	4,589
32 - 36	2,200	2,889	3,633	4,722	6,133	1,456	2,156	2,889	3,978	5,389
37 - 41	2,367	3,144	3,933	5,300	6,833	1,622	2,411	3,200	4,556	6,089
42 - 46	2,567	3,633	5,167	7,056	9,356	1,833	2,889	4,422	6,322	8,611
47 - 51	3,144	4,633	6,667	9,211	12,311	2,411	3,889	5,922	8,478	11,578
52 - 56	3,611	5,578	8,244	11,089	14,722	2,989	4,833	7,500	10,344	13,978
57 - 60	4,467	6,922	10,211	13,756	18,267	3,700	6,000	9,311	12,822	17,333
61 - 65	5,322	8,267	12,178	16,411	21,811	4,422	7,156	11,111	15,300	20,700

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	3,033	3,900	/	/	/	1,700	2,533	/	/	/
4 - 17	2,400	3,067	/	/	/	1,333	2,000	/	/	/
18 - 31	2,056	2,544	3,222	4,189	5,444	1,322	1,811	2,478	3,444	4,700
32 - 36	2,133	2,800	3,478	4,656	5,978	1,389	2,056	2,733	3,911	5,233
37 - 41	2,289	2,967	3,633	4,833	6,222	1,556	2,222	2,889	4,100	5,489
42 - 46	2,389	3,267	4,611	6,256	8,267	1,644	2,522	3,867	5,511	7,522
47 - 51	2,756	4,033	5,767	7,867	10,367	2,011	3,289	5,022	7,133	9,633
52 - 56	3,378	5,044	7,411	10,278	13,656	2,644	4,311	6,667	9,533	12,922
57 - 60	4,189	6,256	9,189	12,756	16,944	3,267	5,344	8,267	11,833	16,022
61 - 65	5,000	7,456	10,978	15,233	20,233	3,889	6,389	9,867	14,122	19,122

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	2,881.35	3,705.00	/	/	/	1,615.00	2,406.35	/	/	/
4 - 17	2,280.00	2,913.65	/	/	/	1,266.35	1,900.00	/	/	/
18 - 31	1,931.35	2,395.90	3,008.65	3,895.00	5,055.90	1,235.00	1,689.10	2,311.35	3,188.20	4,359.55
32 - 36	2,090.00	2,744.55	3,451.35	4,485.90	5,826.35	1,383.20	2,048.20	2,744.55	3,779.10	5,119.55
37 - 41	2,248.65	2,986.80	3,736.35	5,035.00	6,491.35	1,540.90	2,290.45	3,040.00	4,328.20	5,784.55
42 - 46	2,438.65	3,451.35	4,908.65	6,703.20	8,888.20	1,741.35	2,744.55	4,200.90	6,005.90	8,180.45
47 - 51	2,986.80	4,401.35	6,333.65	8,750.45	11,695.45	2,290.45	3,694.55	5,625.90	8,054.10	10,999.10
52 - 56	3,430.45	5,299.10	7,831.80	10,534.55	13,985.90	2,839.55	4,591.35	7,125.00	9,826.80	13,279.10
57 - 60	4,243.65	6,575.90	9,700.45	13,068.20	17,353.65	3,515.00	5,700.00	8,845.45	12,180.90	16,466.35
61 - 65	5,055.90	7,853.65	11,569.10	15,590.45	20,720.45	4,200.90	6,798.20	10,555.45	14,535.00	19,665.00

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	2,881.35	3,705.00	/	/	/	1,615.00	2,406.35	/	/	/
4 - 17	2,280.00	2,913.65	/	/	/	1,266.35	1,900.00	/	/	/
18 - 31	1,953.20	2,416.80	3,060.90	3,979.55	5,171.80	1,255.90	1,720.45	2,354.10	3,271.80	4,465.00
32 - 36	2,026.35	2,660.00	3,304.10	4,423.20	5,679.10	1,319.55	1,953.20	2,596.35	3,715.45	4,971.35
37 - 41	2,174.55	2,818.65	3,451.35	4,591.35	5,910.90	1,478.20	2,110.90	2,744.55	3,895.00	5,214.55
42 - 46	2,269.55	3,103.65	4,380.45	5,943.20	7,853.65	1,561.80	2,395.90	3,673.65	5,235.45	7,145.90
47 - 51	2,618.20	3,831.35	5,478.65	7,473.65	9,848.65	1,910.45	3,124.55	4,770.90	6,776.35	9,151.35
52 - 56	3,209.10	4,791.80	7,040.45	9,764.10	12,973.20	2,511.80	4,095.45	6,333.65	9,056.35	12,275.90
57 - 60	3,979.55	5,943.20	8,729.55	12,118.20	16,096.80	3,103.65	5,076.80	7,853.65	11,241.35	15,220.90
61 - 65	4,750.00	7,083.20	10,429.10	14,471.35	19,221.35	3,694.55	6,069.55	9,373.65	13,415.90	18,165.90

Premium Table

Premium Table

Annual Premium Table (USD) (10-years Premium Payment Term with 20-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	1,011	1,300	/	/	/	567	844	/	/	/
4 - 17	800	1,022	/	/	/	444	667	/	/	/
18 - 31	978	1,211	1,522	1,967	2,556	622	856	1,167	1,611	2,200
32 - 36	1,056	1,389	1,744	2,267	2,944	700	1,033	1,389	1,911	2,589
37 - 41	1,133	1,511	1,889	2,544	3,278	778	1,156	1,533	2,189	2,922
42 - 46	1,233	1,744	2,478	3,389	4,489	878	1,389	2,122	3,033	4,133
47 - 51	1,511	2,222	3,200	4,422	5,911	1,156	1,867	2,844	4,067	5,556
52 - 56	1,733	2,678	3,956	5,322	7,067	1,433	2,322	3,600	4,967	6,711
57 - 60	2,144	3,322	4,900	6,600	8,767	1,778	2,878	4,467	6,156	8,322

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	1,011	1,300	/	/	/	567	844	/	/	/
4 - 17	800	1,022	/	/	/	444	667	/	/	/
18 - 31	989	1,222	1,544	2,011	2,611	633	867	1,189	1,656	2,256
32 - 36	1,022	1,344	1,667	2,233	2,867	667	989	1,311	1,878	2,511
37 - 41	1,100	1,422	1,744	2,322	2,989	744	1,067	1,389	1,967	2,633
42 - 46	1,144	1,567	2,211	3,000	3,967	789	1,211	1,856	2,644	3,611
47 - 51	1,322	1,933	2,767	3,778	4,978	967	1,578	2,411	3,422	4,622
52 - 56	1,622	2,422	3,556	4,933	6,556	1,267	2,067	3,200	4,578	6,200
57 - 60	2,011	3,000	4,411	6,122	8,133	1,567	2,567	3,967	5,678	7,689

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	960.45	1,235.00	/	/	/	538.65	801.80	/	/	/
4 - 17	760.00	970.90	/	/	/	421.80	633.65	/	/	/
18 - 31	929.10	1,150.45	1,445.90	1,868.65	2,428.20	590.90	813.20	1,108.65	1,530.45	2,090.00
32 - 36	1,003.20	1,319.55	1,656.80	2,153.65	2,796.80	665.00	981.35	1,319.55	1,815.45	2,459.55
37 - 41	1,076.35	1,435.45	1,794.55	2,416.80	3,114.10	739.10	1,098.20	1,456.35	2,079.55	2,775.90
42 - 46	1,171.35	1,656.80	2,354.10	3,219.55	4,264.55	834.10	1,319.55	2,015.90	2,881.35	3,926.35
47 - 51	1,435.45	2,110.90	3,040.00	4,200.90	5,615.45	1,098.20	1,773.65	2,701.80	3,863.65	5,278.20
52 - 56	1,646.35	2,544.10	3,758.20	5,055.90	6,713.65	1,361.35	2,205.90	3,420.00	4,718.65	6,375.45
57 - 60	2,036.80	3,155.90	4,655.00	6,270.00	8,328.65	1,689.10	2,734.10	4,243.65	5,848.20	7,905.90

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	960.45	1,235.00	/	/	/	538.65	801.80	/	/	/
4 - 17	760.00	970.90	/	/	/	421.80	633.65	/	/	/
18 - 31	939.55	1,160.90	1,466.80	1,910.45	2,480.45	601.35	823.65	1,129.55	1,573.20	2,143.20
32 - 36	970.90	1,276.80	1,583.65	2,121.35	2,723.65	633.65	939.55	1,245.45	1,784.10	2,385.45
37 - 41	1,045.00	1,350.90	1,656.80	2,205.90	2,839.55	706.80	1,013.65	1,319.55	1,868.65	2,501.35
42 - 46	1,086.80	1,488.65	2,100.45	2,850.00	3,768.65	749.55	1,150.45	1,763.20	2,511.80	3,430.45
47 - 51	1,255.90	1,836.35	2,628.65	3,589.10	4,729.10	918.65	1,499.10	2,290.45	3,250.90	4,390.90
52 - 56	1,540.90	2,300.90	3,378.20	4,686.35	6,228.20	1,203.65	1,963.65	3,040.00	4,349.10	5,890.00
57 - 60	1,910.45	2,850.00	4,190.45	5,815.90	7,726.35	1,488.65	2,438.65	3,768.65	5,394.10	7,304.55

Premium Table

Annual Premium Table (HKD) (6-years Premium Payment Term with 12-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	30,333	39,000	/	/	/	17,000	25,333	/	/	/
4 - 17	24,000	30,667	/	/	/	13,333	20,000	/	/	/
18 - 31	20,333	25,222	31,667	41,000	53,222	13,000	17,778	24,333	33,556	45,889
32 - 36	22,000	28,889	36,333	47,222	61,333	14,556	21,556	28,889	39,778	53,889
37 - 41	23,667	31,444	39,333	53,000	68,333	16,222	24,111	32,000	45,556	60,889
42 - 46	25,667	36,333	51,667	70,556	93,556	18,333	28,889	44,222	63,222	86,111
47 - 51	31,444	46,333	66,667	92,111	123,111	24,111	38,889	59,222	84,778	115,778
52 - 56	36,111	55,778	82,444	110,889	147,222	29,889	48,333	75,000	103,444	139,778
57 - 60	44,667	69,222	102,111	137,556	182,667	37,000	60,000	93,111	128,222	173,333
61 - 65	53,222	82,667	121,778	164,111	218,111	44,222	71,556	111,111	153,000	207,000

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	30,333	39,000	/	/	/	17,000	25,333	/	/	/
4 - 17	24,000	30,667	/	/	/	13,333	20,000	/	/	/
18 - 31	20,556	25,444	32,222	41,889	54,444	13,222	18,111	24,778	34,444	47,000
32 - 36	21,333	28,000	34,778	46,556	59,778	13,889	20,556	27,333	39,111	52,333
37 - 41	22,889	29,667	36,333	48,333	62,222	15,556	22,222	28,889	41,000	54,889
42 - 46	23,889	32,667	46,111	62,556	82,667	16,444	25,222	38,667	55,111	75,222
47 - 51	27,556	40,333	57,667	78,667	103,667	20,111	32,889	50,222	71,333	96,333
52 - 56	33,778	50,444	74,111	102,778	136,556	26,444	43,111	66,667	95,333	129,222
57 - 60	41,889	62,556	91,889	127,556	169,444	32,667	53,444	82,667	118,333	160,222
61 - 65	50,000	74,556	109,778	152,333	202,333	38,889	63,889	98,667	141,222	191,222

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	28,816.35	37,050.00	/	/	/	16,150.00	24,066.35	/	/	/
4 - 17	22,800.00	29,133.65	/	/	/	12,666.35	19,000.00	/	/	/
18 - 31	19,316.35	23,960.90	30,083.65	38,950.00	50,560.90	12,350.00	16,889.10	23,116.35	31,878.20	43,594.55
32 - 36	20,900.00	27,444.55	34,516.35	44,860.90	58,266.35	13,828.20	20,478.20	27,444.55	37,789.10	51,194.55
37 - 41	22,483.65	29,871.80	37,366.35	50,350.00	64,916.35	15,410.90	22,905.45	30,400.00	43,278.20	57,844.55
42 - 46	24,383.65	34,516.35	49,083.65	67,028.20	88,878.20	17,416.35	27,444.55	42,010.90	60,060.90	81,805.45
47 - 51	29,871.80	44,016.35	63,333.65	87,505.45	116,955.45	22,905.45	36,944.55	56,260.90	80,539.10	109,989.10
52 - 56	34,305.45	52,989.10	78,321.80	105,344.55	139,860.90	28,394.55	45,916.35	71,250.00	98,271.80	132,789.10
57 - 60	42,433.65	65,760.90	97,005.45	130,678.20	173,533.65	35,150.00	57,000.00	88,455.45	121,810.90	164,666.35
61 - 65	50,560.90	78,533.65	115,689.10	155,905.45	207,205.45	42,010.90	67,978.20	105,555.45	145,350.00	196,650.00

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	28,816.35	37,050.00	/	/	/	16,150.00	24,066.35	/	/	/
4 - 17	22,800.00	29,133.65	/	/	/	12,666.35	19,000.00	/	/	/
18 - 31	19,528.20	24,171.80	30,610.90	39,794.55	51,721.80	12,560.90	17,205.45	23,539.10	32,721.80	44,650.00
32 - 36	20,266.35	26,600.00	33,039.10	44,228.20	56,789.10	13,194.55	19,528.20	25,966.35	37,155.45	49,716.35
37 - 41	21,744.55	28,183.65	34,516.35	45,916.35	59,110.90	14,778.20	21,110.90	27,444.55	38,950.00	52,144.55
42 - 46	22,694.55	31,033.65	43,805.45	59,428.20	78,533.65	15,621.80	23,960.90	36,733.65	52,355.45	71,460.90
47 - 51	26,178.20	38,316.35	54,783.65	74,733.65	98,483.65	19,105.45	31,244.55	47,710.90	67,766.35	91,516.35
52 - 56	32,089.10	47,921.80	70,405.45	97,639.10	129,728.20	25,121.80	40,955.45	63,333.65	90,566.35	122,760.90
57 - 60	39,794.55	59,428.20	87,294.55	121,178.20	160,971.80	31,033.65	50,771.80	78,533.65	112,416.35	152,210.90
61 - 65	47,500.00	70,828.20	104,289.10	144,716.35	192,216.35	36,944.55	60,694.55	93,733.65	134,160.90	181,660.90

Premium Table

Premium Table

Annual Premium Table (HKD) (10-years Premium Payment Term with 20-years Benefit Term)

Age Next Birthday	Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	10,111	13,000	/	/	/	5,667	8,444	/	/	/
4 - 17	8,000	10,222	/	/	/	4,444	6,667	/	/	/
18 - 31	9,778	12,111	15,222	19,667	25,556	6,222	8,556	11,667	16,111	22,000
32 - 36	10,556	13,889	17,444	22,667	29,444	7,000	10,333	13,889	19,111	25,889
37 - 41	11,333	15,111	18,889	25,444	32,778	7,778	11,556	15,333	21,889	29,222
42 - 46	12,333	17,444	24,778	33,889	44,889	8,778	13,889	21,222	30,333	41,333
47 - 51	15,111	22,222	32,000	44,222	59,111	11,556	18,667	28,444	40,667	55,556
52 - 56	17,333	26,778	39,556	53,222	70,667	14,333	23,222	36,000	49,667	67,111
57 - 60	21,444	33,222	49,000	66,000	87,667	17,778	28,778	44,667	61,556	83,222

Age Next Birthday	Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	10,111	13,000	/	/	/	5,667	8,444	/	/	/
4 - 17	8,000	10,222	/	/	/	4,444	6,667	/	/	/
18 - 31	9,889	12,222	15,444	20,111	26,111	6,333	8,667	11,889	16,556	22,556
32 - 36	10,222	13,444	16,667	22,333	28,667	6,667	9,889	13,111	18,778	25,111
37 - 41	11,000	14,222	17,444	23,222	29,889	7,444	10,667	13,889	19,667	26,333
42 - 46	11,444	15,667	22,111	30,000	39,667	7,889	12,111	18,556	26,444	36,111
47 - 51	13,222	19,333	27,667	37,778	49,778	9,667	15,778	24,111	34,222	46,222
52 - 56	16,222	24,222	35,556	49,333	65,556	12,667	20,667	32,000	45,778	62,000
57 - 60	20,111	30,000	44,111	61,222	81,333	15,667	25,667	39,667	56,778	76,889

Age Next Birthday	Family Discount (5% off the premium) – Male (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	9,605.45	12,350.00	/	/	/	5,383.65	8,021.80	/	/	/
4 - 17	7,600.00	9,710.90	/	/	/	4,221.80	6,333.65	/	/	/
18 - 31	9,289.10	11,505.45	14,460.90	18,683.65	24,278.20	5,910.90	8,128.20	11,083.65	15,305.45	20,900.00
32 - 36	10,028.20	13,194.55	16,571.80	21,533.65	27,971.80	6,650.00	9,816.35	13,194.55	18,155.45	24,594.55
37 - 41	10,766.35	14,355.45	17,944.55	24,171.80	31,139.10	7,389.10	10,978.20	14,566.35	20,794.55	27,760.90
42 - 46	11,716.35	16,571.80	23,539.10	32,194.55	42,644.55	8,339.10	13,194.55	20,160.90	28,816.35	39,266.35
47 - 51	14,355.45	21,110.90	30,400.00	42,010.90	56,155.45	10,978.20	17,733.65	27,021.80	38,633.65	52,778.20
52 - 56	16,466.35	25,439.10	37,578.20	50,560.90	67,133.65	13,616.35	22,060.90	34,200.00	47,183.65	63,755.45
57 - 60	20,371.80	31,560.90	46,550.00	62,700.00	83,283.65	16,889.10	27,339.10	42,433.65	58,478.20	79,060.90

Age Next Birthday	Family Discount (5% off the premium) – Female (Insured)									
	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Plan J
1 - 3	9,605.45	12,350.00	/	/	/	5,383.65	8,021.80	/	/	/
4 - 17	7,600.00	9,710.90	/	/	/	4,221.80	6,333.65	/	/	/
18 - 31	9,394.55	11,610.90	14,671.80	19,105.45	24,805.45	6,016.35	8,233.65	11,294.55	15,728.20	21,428.20
32 - 36	9,710.90	12,771.80	15,833.65	21,216.35	27,233.65	6,333.65	9,394.55	12,455.45	17,839.10	23,855.45
37 - 41	10,450.00	13,510.90	16,571.80	22,060.90	28,394.55	7,071.80	10,133.65	13,194.55	18,683.65	25,016.35
42 - 46	10,871.80	14,883.65	21,005.45	28,500.00	37,683.65	7,494.55	11,505.45	17,628.20	25,121.80	34,305.45
47 - 51	12,560.90	18,366.35	26,283.65	35,889.10	47,289.10	9,183.65	14,989.10	22,905.45	32,510.90	43,910.90
52 - 56	15,410.90	23,010.90	33,778.20	46,866.35	62,278.20	12,033.65	19,633.65	30,400.00	43,489.10	58,900.00
57 - 60	19,105.45	28,500.00	41,905.45	58,160.90	77,266.35	14,883.65	24,383.65	37,683.65	53,939.10	73,044.55

Remarks

- Total Premiums Paid means the sum of the premiums due and paid as at the relevant date.
- Daily Hospital Cash Benefit will be payable for each day of the Insured's Confinement as a result of Disability, for a maximum cumulative of 1,000 days under this Policy. Benefit payable is limited to a maximum of 3 times of Confinements per policy year after the Insured's age next birthday reaches 56. If the maximum coverage of Daily Hospital Cash Benefit under this Policy is reached, the Additional Accidental Daily Hospital Cash Benefit, Additional Accidental Daily Hospital Cash Benefit involving Public Transport and Additional Infectious Diseases Daily Hospital Cash Benefit will not be paid.
- If the Insured's Confinement occurs in Mainland China, Daily Hospital Cash Benefit, Additional Accidental Daily Hospital Cash Benefit & Additional Accidental Daily Hospital Cash Benefit involving Public Transport will be limited to a maximum of 7 days per Confinement in Mainland China.
- The Additional Accidental Daily Hospital Cash Benefit is in addition to other benefits payable under this Policy, and is payable only when the Daily Hospital Cash Benefit is paid or payable for that Confinement. Additional Accidental Daily Hospital Cash Benefit will be payable for each day during the period of the Insured's Confinement as a result of an Accident, for a maximum of 90 days per Confinement.
- The Additional Accidental Daily Hospital Cash Benefit involving Public Transport is in addition to other benefits payable under this Policy, and is payable only when the Daily Hospital Cash Benefit and Additional Accidental Daily Hospital Cash Benefit are paid or payable for that Confinement. Additional Accidental Daily Hospital Cash Benefit involving Public Transport will be payable for a maximum cumulative of 365 days under this Policy.

The Additional Accidental Daily Hospital Cash Benefit involving Public Transport would be payable if the Insured's Confinement is a result of an Accident suffered (a) while riding as a passenger on a public transport, or (b) in an accident directly caused by a public transport, provided that at the time of the Accident the Insured is not (i) the driver of any vehicle, (ii) navigating any vessel, (iii) piloting any aircraft, and/or (iv) working in the course of employment on board any vehicle, vessel or aircraft.

- The Additional Infectious Diseases Daily Hospital Cash Benefit is in addition to other benefits payable under this Policy, and is payable only when the Daily Hospital Cash Benefit is paid or payable for that Confinement. Additional Infectious Diseases Daily Hospital Cash Benefit will be payable for each day of the Insured's Confinement as a result of Covered Infectious Disease(s), for a maximum cumulative of 30 days under this Policy and it is not applicable to Confinement in Mainland China. Covered Infectious Diseases include:

1	Acute poliomyelitis	9	Diphtheria	17	Rabies
2	Amoebic dysentery	10	Hand, Foot and Mouth disease	18	Scarlet fever
3	Anthrax	11	Japanese encephalitis	19	Severe Acute Respiratory Syndrome**
4	Avian Influenza*	12	Legionnaires' disease	20	Tetanus
5	Chickenpox	13	Leprosy	21	Tuberculosis
6	Cholera	14	Malaria	22	Yellow fever
7	Creutzfeldt-Jakob disease	15	Measles		
8	Dengue fever	16	Plague		

* A viral disease in humans caused by Influenza A virus (strains H5N1 or H7N3 or H7N7 or H7N9 or H9N2 or other strains which are defined by World Health Organization) which are also adapted to and are proved to be originating from birds. Infections caused by any other type of Influenza virus strain will not be covered.

** A viral respiratory disease in humans which is caused by SARS coronavirus (SARS-CoV). Other respiratory diseases or other forms of the coronavirus (including SARS-CoV-2 causing COVID-19) are not covered.

- The terms and conditions of this Family Discount are listed below:
 - Each policy owner of the policy of the Plan will be entitled to a 5% premium discount throughout the premium payment term if the respective Insured of the policy is a child or spouse of the insured of another policy of the Plan ("the Related Insured").
 - The Family Discount amount is equal to 0.05 multiplied by the corresponding annual/ monthly premium, and rounded to the nearest 2 decimal places.
 - Each policy owner will enjoy the Family Discount for each policy once only regardless of the number of eligible policies of the Family Discount. Please refer to the "Family Discount (5% off the premium)" tables above for the amount of discounted premium.

Important to know

Remarks

- If the policy of the Related Insured is cancelled during the cooling off period, the Family Discount will not apply to all policies of the Insured and the Related Insured. Only the premium and insurance levy actually paid by the applicants will be refunded if the relevant policy is cancelled during the cooling off period.
 - The application submission date and the issuance date of the policy are based on the records of FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) (“FWD”). FWD will not be responsible for any delay, loss, error or unrecognized situation due to computer and / or Internet’s connection, technical problem, malfunction or accident.
 - The Family Discount cannot be changed, returned, exchanged for other gifts, redeemed for cash and cannot be resold. The Family Discount is not applicable to any other existing policies or any policy conversions.
 - FWD reserves the final decision in approving any applications and any disputes that may arise from this Family Discount.
 - FWD reserves the right to amend the terms and conditions of this Family Discount or discontinue this Family Discount at any time without prior notice. All decisions made by FWD shall be final and binding.
8. Date of surrender is determined in accordance with the FWD applicable rules and regulations in relation to Policy surrender.
9. Premium rates are not guaranteed and FWD reserves the right to review the premium rates at each Policy Anniversary.
10. The services are currently provided by International SOS Assistance (HK) Ltd (“International SOS”) and are not guaranteed renewable. FWD shall not be responsible for any act or failure to act on the part of International SOS and the professionals. Details of the services or service provider may be revised from time to time without prior notice from FWD.
11. CANcierge is currently provided by HealthMutual Group Limited (“HMG”) and its healthcare network team, and is not a part of the policy or benefit item under the policy provisions. FWD reserves the right to change the service provider, terminate or vary CANcierge in its sole discretion without further notice. FWD will not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team. For details, please refer to the attached brochure of CANcierge.
12. The 12-month Out-patient Medical Service is currently provided by Quality HealthCare Medical Services Limited (“QHMS”) and the professionals from QHMS are independent healthcare professionals and not FWD employees nor representatives. The service will be provided within the 12-month period set out in the welcome letter of the service, while the Plan is in force, and it will be offered once only throughout the entire benefit term of the Plan. The currency of the coverage and co-payment of the services will be in HKD regardless of the currency of the Plan. FWD reserves the right to change the service provider and its scope of service in its sole discretion without further notice. FWD shall not be liable for any matters in respect of any services provided by QHMS including but not limited to their actions, negligence or omission of medical services or treatments, the quality and/or appropriateness and/or suitability of the medical prescriptions, supplies, procedures, treatments, facilities and services as suggested, recommended or offered by QHMS. The terms and conditions of this service are listed below:
- (a) The service is provided in Hong Kong only and is non-transferrable and only applicable to the Insured whose life is insured under the Plan.
 - (b) The Insured is required to present his/her medical card and identification document (HKID/ Passport/ Birth Certificate for child age 11 or below) at the network clinic before receiving any treatments.
 - (c) For scope of service under physiotherapy and bone-setting, covered treatments will only be provided only if the Insured sustains an Injury due to an Accident which occurs when the Plan is in force and the date of the first treatment consultation falls within 60 days from the date of occurrence of such Accident.
 - (d) A referral letter which is issued by a registered western medical practitioner in the Hong Kong Special Administrative Region is required for physiotherapy treatment and specialist consultation for the first visit and the referral letter will be valid for 60 days from the date of issuance.
 - (e) For any disputes regarding this service, all decisions made by FWD and/or QHMS shall be final and conclusive.

Key Product Risks

Credit risk

This plan is an insurance policy issued by FWD. The application of this insurance product and all benefits payable under your policy are subject to the credit risk of FWD. You will bear the default risk in the event that FWD is unable to satisfy its financial obligations under this insurance contract.

Liquidity risk

This plan is a long term insurance policy. This policy of long term insurance will be made for certain determined term of years starting from the policy effective date to the policy maturity date. The policy contains value and, if you surrender your policy in the early policy years or before its maturity date, the amount you get back may be considerably less than the total premium you have paid. Application of the Plan may constitute the liquidity risk to your financial condition. You need to bear the liquidity risk associated with the Plan.

Exchange rate and currency risk

The application of this insurance product with the policy currency denominated in a foreign currency is subject to that foreign currency's exchange rate and currency risk. The foreign currency may be subject to the relevant regulatory bodies' control (for example, exchange restrictions). If your home currency is different from the policy currency, please note that any exchange rate fluctuation between your home currency and the policy currency of this insurance product will have a direct impact on the amount of premium required and the value of benefit(s) to be received. For instance, if the policy currency of the insurance product depreciates substantially against your home currency, there is a negative impact on the benefits you receive from the plan. If the policy currency of the insurance product appreciates substantially against your home currency, your burden of the premium payment is increased.

Inflation risk

The cost of living in the future may be higher than now due to the effects of inflation. Therefore, the benefits under this policy may not be sufficient for the increasing protection needs in the future even if FWD fulfills all of its contractual obligations.

Early surrender risk

If you surrender your policy in the early policy years or before the end of the benefit term, the amount of the benefit you will get back may be considerably less than the total amount of the premiums you paid.

Premium adjustment

The premium is non-guaranteed and may significantly increase due to factors including but not limited to claims experience and policy persistency. However, premium will not be increased based on the age of the Insured on his or her next birthday.

Premium term and non-payment of premium

The premium payment term of the policy is 6 or 10 years. FWD allows a Grace Period of 30 days after the premium due date for payment of each premium. If a premium is still unpaid at the expiration of the Grace Period, the policy will be terminated from the date the first unpaid premium was due. Please note that once the policy is terminated on this basis, you will lose all of your benefits.

Termination conditions

This Policy shall terminate on the earliest of the following:

1. The death of the Insured; or
2. The Maturity Date; or
3. The date of Policy surrender. Such date is determined in accordance with FWD's applicable rules and regulations in relation to Policy surrender (To surrender the Policy, the Policy Owner needs to send FWD a completed surrender form or by any other means acceptable by FWD); or
4. On the premium due date, if the Policy Owner has not paid the premium within the Grace Period.

12-month Out-patient Medical Service shall terminate on the earliest of the following:

1. Upon the expiry of the 12-month period as specified in the welcome letter of 12-Month Out-patient Medical Service to be sent after policy inception; or
2. termination of the Plan.

Key Product Risks

Exclusions

No Hospitalization Benefits (includes Daily Hospital Cash Benefit, Additional Accidental Daily Hospital Cash Benefit, Additional Accidental Daily Hospital Cash Benefit involving Public Transport and Additional Infectious Diseases Daily Hospital Cash Benefit) is payable under this Policy when the Confinement is directly or indirectly caused by:

1. Congenital Conditions.
2. Pre-existing Conditions.
3. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not; Disability arising out of excessive consumption of alcohol or narcotics or similar drugs or agents unless prescribed by a Physician for the treatment of a Disability.
4. Conditions arising from surgical, mechanical or chemical contraceptive methods of birth control or the reversal of birth control or treatment pertaining to infertility.
5. Cosmetic surgery or plastic surgery, preventive or vaccination treatment not related to a Disability, except as necessitated by bodily Injuries wholly caused by an Accident occurring on or after the Commencement Date; dental care, surgery and treatment, except as necessitated by the need to restore sound natural teeth that are damaged wholly by Injury occurring on or after the Commencement Date and the restoration is only to restore the basic function of the natural teeth that existed prior to the Injury.
6. War or any act of war, terrorism or terroristic activities, declared or undeclared, hostilities, rebellion, revolution, insurrection, coup or usurped power or active duty in the military, naval or air forces of any country or international authority.
7. Any Disability resulting from:
 - (i) Racing of any kind other than on foot.
 - (ii) Participation in all forms of professional sports competition with reward and income.
 - (iii) Motorcycling other than on roadways designed primarily for motor traffic.
 - (iv) An activity in the air other than as a fare paying passenger on a duly licensed commercial aircraft.
 - (v) Deep water diving over thirty (30) meters requiring the use of breathing apparatus.
 - (vi) Abseiling and mountain climbing requiring the use of ropes and/or pitons.
 - (vii) Winter sports other than ice-rink skating.
 - (viii) Deliberate exposure to exceptional danger in the opinion of FWD except in an effort to save human life.
 - (ix) Nuclear radiation, or contamination or the use of ionization or combustion of any nuclear weapons.
8. Mental disorder, psychological or psychiatric condition, behavioral problems or personality disorder, or sleep disorder.
9. Pregnancy, childbirth (including surgical delivery), miscarriage which is not a result of Accident, abortion and prenatal or postnatal care.
10. The participation in any criminal event (including the consumption of illegal drugs).
11. Trans-sexual surgery.
12. Confinements in Mainland China to a Hospital classified as Class or Tier 2B or below, as defined by the State Council Ministry of Health of Mainland China.

No Daily Hospital Cash Benefit shall be paid in respect of any Human Immunodeficiency Virus (HIV) related Disability, including Acquired Immunization Deficiency Syndrome (AIDS) and/or any mutations, derivations, variations or complications, which is derived from an HIV infection (except due to blood transfusion), unless the signs or symptoms of such Disability first occur after the Policy has been effective for 5 consecutive Policy Years from the Commencement Date of this Policy. The maximum period for which the Daily Hospital Cash Benefit is payable in respect of HIV related Disabilities is 30 days per Policy Year regardless of the number of HIV related Disabilities suffered.

Key Product Risks

No Accidental Death Benefit is payable under this Policy when the death of the Insured is directly or indirectly caused by:

1. Disease or infection (except infections which occur through an accidental cut or wound).
2. Pregnancy, childbirth (including surgical delivery) and abortion irrespective of whether such event is accelerated or induced by an Injury.
3. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not.
4. Any drug unless taken in accordance with the lawful directions and prescription of a qualified and registered Physician.
5. Accident occurring while or because the Insured is under the influence of alcohol.
6. Poison, gas or fumes, voluntarily or otherwise taken, absorbed or inhaled, other than as a result of an Accident arising from a hazardous incident in relation to the Insured's occupation.
7. War or any act of war, terrorism or terroristic activities, declared or undeclared, hostilities, rebellion, revolution, insurrection, coup or usurped power or active duty in the military, naval or air forces of any country or international authority.
8. Any activity in the air other than as a fare paying passenger on a duly licensed commercial aircraft.
9. The participation in any criminal event (including the consumption of illegal drugs).
10. Racing of any kind other than on foot.
11. Nuclear radiation, or contamination or the use of ionization or combustion of any nuclear weapons.
12. Participation in all forms of professional sports competition with reward and income.

12-month Out-patient Medical Service will not cover any expenses related to the followings:

1. Routine/Preventive physical examination and investigations
2. Pregnancy test, contraceptive related, birth control, sterilization of either sex, infertility (in-vitro fertilization or any other artificial method of inducing pregnancy), and sexual dysfunction
3. Pregnancy and its complication including but not limited to ectopic pregnancy, abortion and miscarriage
4. Sexually transmitted disease or human immunodeficiency virus infection related
5. Psychiatric, mood disorder, mental diseases, behavioral disorders
6. Congenital, developmental or hereditary conditions or diseases
7. Dental related
8. Eye refraction or eyesight related (e.g. routine eye tests, fitting of spectacles or lenses, LASIK, etc)
9. Cosmetic or plastic surgery for the purpose of beautification
10. Rental or purchase of prosthesis, prosthetic devices, or medical equipment or appliances (e.g. wheelchair, CPAP machine, hearing aids, crutches, aero chamber, etc)
11. Supplement, appetite stimulants, anti-depressants, any treatment or medication for weight control, medication on request (e.g. travelling medicine), over-the-counter drugs (e.g. shampoo, lotion) and lubricant (e.g. artificial tears)
12. Vaccinations, immunisations and any preventive care
13. Acupuncture, pilates, shockwave including those performed by physiotherapist
14. Tui Na, cupping, massage therapy including those performed by Chinese Medicine Practitioner
15. Experimental medical technology or procedure
16. Chronic alcoholism or abuse of alcohol, drugs addiction or abuse of drugs
17. Dietitian and Traditional Chinese Medicine consultation (unless otherwise specified in the Schedule)
18. Accidents that arise directly or indirectly from hazardous or professional sports
19. War, invasion, act of foreign enemy, act of terrorism, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, or direct participation in strike, riot or civil commotion

Important to know

Key Product Risks

20. Suicide, self-inflicted injury, or any attempted suicide whether sane or insane
21. Any treatment or disability directly or indirectly arising from or consequent upon illegal activity
22. Female hormonal tests or assays and female hormonal replacement therapy unless resulting from a disease
23. All cancer treatments (e.g. chemotherapy, radiotherapy, target therapy and IV infusion, PET and PET-CT scan, genetic tests, etc)
24. Any diagnostic and imaging investigation performed at hospital setup, including both inpatient and outpatient
25. Any service provided out of QH Network Panel or out of scheme benefit coverage

Waiting period

No Hospitalization Benefits (includes Daily Hospital Cash Benefit, Additional Accidental Daily Hospital Cash Benefit, Additional Accidental Daily Hospital Cash Benefit involving Public Transport and Additional Infectious Diseases Daily Hospital Cash Benefit) is payable under this Policy if the insured suffers any Sickness, Disease or Illness within the first 30 days from Commencement Date of this Policy. However, FWD will pay for Injury that happens on or after the Commencement Date.

Suicide

If the Insured dies by suicide, whether sane or insane, within 13 calendar months from the Commencement Date, FWD's liability shall be limited to the amount equal to the premiums paid without interest, less any outstanding insurance levy and any benefit which has been paid under this Policy.

Important Notes

Cancellation Right within Cooling-off Period

If you are not fully satisfied with this policy, you have the right to change your mind.

FWD trusts that this policy will satisfy your financial needs. However, if you are not completely satisfied, you have the right to cancel and obtain a full refund of the insurance premium paid by you and levy paid by you without interest by giving us written notice. Such notice must be signed by you and received directly by FWD within 21 calendar days immediately following either the day of delivery of the policy or a Cooling-off Notice to you or your nominated representative, whichever is the earlier. The notice is the one sent to you or your nominated representative (separate from the policy) notifying you of your right to cancel within the stated 21 calendar day period. No refund can be made if a claim payment under the policy has been made prior to your request for cancellation. Should you have any further queries, you may (1) call FWD Service Hotline on 3123 3123; (2) visit FWD Insurance Solutions Centres; (3) email to cs.hk@fwd.com and FWD will be happy to explain your cancellation rights further.

While the Policy or rider (if applicable) is in force, the Policy Owner may surrender or terminate the Policy or rider (if applicable) by sending a written request to FWD.

Cancellation Right after Cooling-off Period

To surrender the Policy, the Policy Owner needs to send FWD a completed surrender form or by any other means acceptable by FWD.

Important Notes

Declaration relating to the Foreign Account Tax Compliance Act and Automatic Exchange of Financial Account Information

FWD is obliged to comply with the following legal and/or regulatory requirements in various jurisdictions as promulgated and amended from time to time, such as the United States Foreign Account Tax Compliance Act, and the automatic exchange of financial account information regime (“AEOI”) followed by the Inland Revenue Department (the “Applicable Requirements”). These obligations include providing information of clients and related parties (including personal information) to relevant local and international authorities and/or to verify the identity of the clients and related parties. In addition, our obligations under the AEOI are to:

- I. identify accounts as non-excluded “financial accounts” (“NEFAs”);
- II. identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
- III. determine the status of NEFA-holding entities as “passive NFEs” and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;
- IV. collect information on NEFAs (“Required Information”) which is required by various authorities; and
- V. furnish Required Information to the Inland Revenue Department.

The Policy Owner must comply with requests made by FWD to comply with the above listed requirements.

Renewal

This Policy shall be automatically renewed at each Policy Anniversary for another Policy Year until the Maturity Date based on the then terms and conditions of this Policy, provided that premiums under this Policy are paid when due. The premium rates for each renewal are not guaranteed and subject to change at the sole discretion of FWD due to factors including but not limited to claims experience and policy persistency.

Notice of Claim

Written notice of a claim must be given to FWD within 30 days (and in any case no later than 6 months) from the date of Discharge from Confinement or the date of death of the Insured. Any claims received after the said period shall not be accepted, unless FWD in its sole discretion decides otherwise.

Incorrect Disclosure or Non-Disclosure

Your policy is based on the information you and the Insured gave FWD during the application process. It is important that you and the Insured were truthful and accurate with all of the information, including but not limited to Age and gender you provided, as this information helped FWD to decide if you and they were eligible for the policy, and what you need to pay.

You or the Insured are/is required to disclose all material facts in response to FWD’s underwriting questions. Material facts are the facts, information or circumstances, in particular medically-related facts, e.g. medical history, smoking status, etc., that would influence the judgment of FWD in setting the premium, or in determining whether to insure the risk. If you or the Insured are/is uncertain as to whether or not a certain piece of information is material, please take a cautious approach and disclose it to FWD.

You should let FWD know immediately if the information you or the Insured gave FWD was inaccurate, misleading or exaggerated. If you or the Insured did not provide accurate and truthful information, or you or they gave misleading or exaggerated information, your benefits or premium under your policy may be affected, and in some cases FWD may cancel your policy.

Important to know

Important Words

Accident

An unforeseen and unexpected event or contiguous series of events of violent, accidental, external and visible nature which shall be the sole cause of a bodily Injury while this Policy is in force.

Confinement

A period during which the Insured is admitted into a Hospital as an in-patient for Medically Necessary services or treatments on the written recommendation of a Physician as a result of a Disability, provided that the duration of such stay is not less than 6 consecutive hours. Throughout the period from the Insured's admission until his/her Discharge, the Insured is required to be continuously confined in the Hospital without any physical absence or interruption.

If two or more Confinements are due to the same or related Disability, or to any complications arising from it, such Confinements shall be regarded as one Confinement if each of them is not separated by more than 90 days.

Congenital Conditions

Medical abnormalities existing at the time of birth, regardless of whether they are known or unknown to the Policy Owner or the Insured, as well as neonatal physical abnormalities developing before the Insured attains 16 years of age, and shall include but are not limited to strabismus (squint), hydrocephalus, undescended testicle, Meckel's diverticulum, flat foot, heart septal defect and indirect inguinal hernias.

Disability

Any Sickness(es), Disease(s), Illness(es) or Injury(ies) and shall include all Disabilities arising from the same cause including any complications arising from it. More than one Disability per Confinement will be treated as a single Disability for the purpose of benefit payments under this Policy while this Policy is in force. The Disability must be confirmed by a Physician with the supporting of the clinical and medical evidences.

Injury

Bodily damage caused directly by an Accident independently of any other causes while this Policy is in force.

Medically Necessary

Medically Necessary means medical or health care services and Confinement which are necessary and consistent with the diagnosis and customary medical treatment for the Disability and recommended by a Physician or Surgeon for the care or treatment of the Disability involved and must be widely accepted professionally in Hong Kong as effective, appropriate and essential based upon recognized standards of the health care specialty involved.

In no event will any of the following be considered to be Medically Necessary:

1. Confinement mainly for the personal comfort or convenience of the Insured or the Physician or any other person.
2. Confinement which the Insured's Disability could safely and adequately be treated while not confined.
3. Confinement for experimental, screening and preventive services, routine physical examinations, health check-ups, or tests not incidental to treatment or diagnosis of a Disability.

Pre-existing Conditions

Any physical, medical or mental condition or any sickness, disease, illness or injury:

1. which existed whether it was known or unknown to the Policy Owner or the Insured; or
2. which was investigated, diagnosed, or treated by a Physician; or
3. for which Physician was consulted; or
4. the signs or symptoms of which commenced, before the Commencement Date.

Declarations

- This product is underwritten by FWD. FWD is solely responsible for all features, policy approval, coverage and benefit payment under the product. FWD recommends that you carefully consider whether the product is suitable for you in view of your financial needs and that you fully understand the risk involved in the product before submitting your application. You should not apply for or purchase the product unless you fully understand it and you agree it is suitable for you. Please read through the following related risks before making any application of the product.
- This product material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Hong Kong Special Administrative Region (“Hong Kong”) only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products of FWD outside Hong Kong. All selling and application procedures of the product must be conducted and completed in Hong Kong.
- This product is an insurance product. The premium paid is not a bank savings deposit or time deposit. The product is not protected under the Deposit Protection Scheme in Hong Kong.
- This product is a refundable medical protection product (hospital cash benefit with 12-month Out-patient Medical Service, if applicable). The costs of insurance and the related costs of the policy are included in the premium paid under this plan despite the product brochure/leaflet and/or the illustration documents of this plan having no schedule/section of fees and charges or no additional charge noted other than the premium.
- All underwriting and claims decisions are made by FWD. FWD relies upon the information provided by the applicant and the insured in the insurance application to decide to accept or decline the application with a full refund of any premium paid and any insurance levy paid without interest. FWD reserves the right to accept / reject any insurance application and can decline your insurance application without giving any reason.
- All the above benefits and payment are paid after deducting policy debts (if any, e.g. any outstanding premium, any outstanding levy and any amount you owed FWD).

For more information

Please contact your financial advisor,
call our Service Hotline or
simply check out our website.

fwd.com.hk



Service Hotline
3123 3123

Ready to help

**FWD Professional Health
Assistance Services**

CANCIERGE

One Plan One Team One Stop Solution

Everyone would like to be along with a reliable partner, so as to focus on their recovery and enjoy life even when facing any health problems. CANCierge¹ gives you priority treatment from a professional health management team with a one stop approach, helping you when you need it most.

Professional & Experienced Medical Team as your partner

A professional medical service provider is undoubtedly your best option to provide prompt & suitable medical advice and treatment. That's why CANCierge¹ provides you with a dedicated network of specialists so that you could receive suitable treatment from the best-suited doctor.

Tailor-made Support and Hospitalisation Arrangement

CANCierge¹ always puts your interest first. Should you require hospitalisation and/or treatment due to a Covered Cancer² as diagnosed by CANCierge's doctor³, the team of specialists will arrange for you to be admitted to hospital and receive tailor-made treatment, as well as provide follow-up consultation and supportive therapies.

Efficient and Seamless Claims Resolution

The team of specialists will assist you to apply for efficient and seamless claims resolution arrangement to FWD and so you can leave the formalities of claims submission to the team.

CANCierge⁴:
Hong Kong: (852) 8120 9066
Toll-free number for Mainland: 400 9303078
24-hour full support

For any enquiries about policy information, please contact your advisors or FWD's Service Hotline at (852) 3123 3123.

Remark:

- Any medical advice, opinion or services are provided by doctors of CANCierge and/ or its healthcare team who are all external third-party service providers. They are independent contractors and are not agents of FWD. For any specific questions on medical matters or situations, you are advised to consult your doctor or other healthcare professionals. FWD shall not be responsible for any act, negligence or omission of medical advice, opinion, service or treatment on the part of them.

- You are required to consent to FWD, HealthMutual Group Limited and its healthcare network team, recording, sharing, using and archiving your personal data in pursuance of CANCierge¹ being offered to you as well as for their training and quality assurance purposes. Failure to provide the relevant personal data may result in the said service providers being unable to provide the relevant services to you.
- This product material should be read along with the illustration documents and/or other relevant marketing materials of Healthy Plus Refundable Hospital Income Plan.

Note:

- CANCierge, provided by HealthMutual Group Limited ("HMG") and its healthcare network team, is provided by external third party and does not form part of the Policy or benefit item under the Policy Provisions and only applicable to Healthy Plus Refundable Hospital Income Plan. FWD reserves the right to suspend, terminate or vary CANCierge in its sole discretion without further notice. FWD is not the supplier of the service and shall have no obligation or responsibility for any act, negligence or failure to act on the part of HMG and its healthcare network team. CANCierge is only available in Hong Kong region.
- Covered Cancer refers to the first symptoms that occur after the first 30 days from the Commencement Date and are subsequently confirmed by a specialist as meeting the definition of Cancer or Carcinoma-in-situ as below:
 - Cancer is a malignant tumour characterized by uncontrolled growth of malignant cells and the invasion of tissue. Cancer includes leukaemia (other than chronic lymphocytic leukaemia of RAI stage 0) but does not include non-invasive cancers in situ or any non-melanoma skin cancer of AJCC stage I or below. A diagnosis of Cancer must be supported by histopathological, cytopathological patterns, radiological tests, blood tests and other laboratory tests results.
 - Carcinoma-in-situ is focal autonomous new growth of carcinomatous cells which have not yet infiltrated normal tissue beyond the epithelial basement membrane. For Carcinoma-in-situ of cervix uteri, it must be at a grading of CIN III. A diagnosis of Carcinoma-in-situ must be supported by a histopathological biopsy report.
- The list of CANCierge's doctors may be revised from time to time without prior notice.
- This hotline is operated by HMG. Please note that this hotline is for non-emergency reservation of doctor consultation instead of for emergencies.

The information above is for reference only and none of the above is binding upon FWD or HMG.

The service is provided by HMG and it is not guaranteed renewable. FWD shall not be responsible for any act or failure to act on the part of HMG and the professionals referred by HMG. FWD reserves the right to amend, suspend or terminate CANCierge and to amend the relevant terms and conditions at any time without prior notice.

International SOS 24-hour Worldwide Assistance Services

General Benefits and Terms

The following SOS benefits are available to you when travelling outside the home country or usual country of residence for periods not exceeding 90 consecutive days per trip.

The International SOS 24-hour Worldwide Assistance Services is provided as a benefit by International SOS (“Intl.SOS”). Intl. SOS is not an agent of FWD and FWD shall not accept any liability for the services provided by Intl.SOS, or their availability. The contract between Intl.SOS and you are separate and independent to the Policy.

Medical Assistance:

1 Telephone Medical Advice

Intl.SOS will arrange for the provision of medical advice to you over the telephone.

2 Arrangement and Payment of Emergency Medical Evacuation

Intl.SOS will arrange and pay for the air and/or surface transportation and communication for moving you to the nearest hospital where appropriate medical care is available.

3 Arrangement and Payment of Emergency Medical Repatriation

Intl.SOS will arrange and pay for the return of you to the home country or usual country of residence following an emergency medical evacuation for subsequent in-hospital treatment in a place outside the home country or usual country of residence.

4 Arrangement and Payment of Repatriation of Mortal Remains

Intl.SOS will arrange for transporting your mortal remains from the place of death to the home country or usual country of residence and pay for all expenses reasonably and unavoidably incurred in such transportation so arranged by Intl.SOS or alternatively pay the cost of burial at the place of death as approved by Intl.SOS.

5 Arrangement of Hospital Admission and Guarantee of Hospital Admission Deposit

If the medical condition of you is of such gravity as to require hospitalisation, Intl.SOS will assist you in the hospital admission. In case of hospital admission duly approved by Intl. SOS and you are without means of payment of the required hospital admission deposit, Intl.SOS will on behalf of your guarantee or provide such payment up to US\$5,000. The provision of such guarantee by Intl.SOS is subject to Intl.SOS first securing payment from you through your credit card or from the funds from your family. Intl.SOS shall not be responsible for any third party expenses which shall be solely your responsibility.

6 Delivery of Essential Medicine

Intl.SOS will arrange to deliver you the essential medicine, drugs and medical supplies that are necessary for your care and/or treatment but which are not available at your location. The delivery of such medicine, drugs and medical supplies will be subject to the laws and regulations applicable locally. Intl.SOS will not pay for the costs of such medicine, drugs or medical supplies and any delivery costs thereof.

7 Arrangement and Payment of Compassionate Visit and Hotel Accommodation (US\$1,000 subject to a sub-limit US\$250 per day)

Intl.SOS will arrange and pay for one economy class return airfare and hotel accommodations for a relative or a friend of you to join who, when travelling alone, are hospitalised outside the home country or usual country of residence for a period in excess of seven (7) consecutive days, subject to Intl.SOS’ prior approval and only when judged necessary by Intl.SOS on medical and compassionate grounds.

8 Arrangement and Payment of Return of Minor Children

Intl.SOS will arrange and pay for the economy class one-way airfare for the return of minor children [aged 18 years old and below, unmarried] to the home country or usual country of residence if they are left unattended as a result of the accompanying your illness, accident or emergency medical evacuation. Escort will be provided, when necessary, at no charge.

9 Arrangement and Payment of Convalescence Expenses (US\$1,000 subject to a sub-limit US\$250 per day)

Intl.SOS will arrange and pay for the additional hotel accommodation expenses necessarily and unavoidably incurred by you related to an incident requiring emergency medical evacuation, emergency medical repatriation or hospitalisation. Intl.SOS’ prior approval, subject to its determination on medical grounds, is required in respect of such payment.

10 Arrangement and Payment of Unexpected Return to the Home Country or Usual Country of Residence

In the event of the death of your close relative in your home country or usual country of residence while you are travelling overseas (save for in the case of migration) and necessitating an unexpected return to your home country or usual country of residence, Intl.SOS will arrange and pay for one economy class return airfare for the return of you to your home country or usual country of residence.

11 Arrangement and Payment of Return of Insured Person to Original Work Site

Following your emergency medical evacuation or emergency medical repatriation and within one (1) month period, Intl. SOS will, upon your request, arrange and pay for a one-way economy class airfare to return you to the original work location.

Travel Assistance:

1 Inoculation and Visa Requirement Information

Intl.SOS shall provide information concerning visa and inoculation requirements for foreign countries, as those requirements are specified from time to time in the most current edition of World

Health Organization Publication “Vaccination Certificates Requirements and Health Advice for International Travel” (for inoculations) and the “ABC Guide to International Travel Information” (for visas). This information will be provided to you at any time, whether or not you are travelling or an emergency has occurred.

2 Lost Luggage Assistance

Intl.SOS will assist you if you lost your luggage while travelling outside the home country or usual country of residence by referring you to the appropriate authorities involved.

3 Lost Passport Assistance

Intl.SOS will assist you if you lost your passport while travelling outside the home country or usual country of residence by referring you to the appropriate authorities involved.

4 Legal Referral

Intl.SOS will provide you with the name, address, telephone numbers, if requested by you and if available, office hours for referred lawyers and legal practitioners. Intl.SOS will not give any legal advice to you.

5 Emergency Travel Service Assistance

Intl.SOS shall assist you in making reservations for air ticket or hotel accommodation on an emergency basis when travelling overseas.

Intl.SOS, at its sole discretion, may provide medical assistance as described above to you on a fee-for-service basis for those cases which do not fall within the service scope, subject to Intl.SOS receiving additional financial guarantees or indemnification from FWD and/or you prior to rendering such services on a fee-for-service basis.

This product material should be read along with the illustration documents and/or other relevant marketing materials of Healthy Plus Refundable Hospital Income Plan.

The information above is for reference only and none of the above is binding upon FWD or International SOS.

The service is currently provided by International SOS and the medical advice is provided by medical service providers which are not employee and/or agent of FWD. The service is not guaranteed renewable. FWD shall not be responsible or liable to you or the Policy Holder for anything in relation to such service given by International SOS and the medical service providers. FWD reserves the right to amend, suspend or terminate the International SOS 24-hour Worldwide Assistance Services and to amend the relevant terms and conditions at any time without prior notice.

This leaflet is issued by FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) (“FWD”) and is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products or services of FWD outside Hong Kong. All selling and application procedures of the insurance plans and services must be conducted and completed in Hong Kong.