富衛人壽保險(百慕達)有限公司（於百慕達註冊成立之有限公司）
FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability)

全面護衛
尊尚一生

Privileged Medical Care for the Privileged Ones

衛一醫療總匯 - 醫療•非分紅壽險
TheOne Medical Solution – Medical • Non-Participating life

特約保險代理商
Appointed Insurance Agency

交通銀行 BANK OF COMMUNICATIONS

承保公司
Underwritten by

FWD insurance

衛一 醫療總匯

TheOne Medical Solution

健康是人生最重要的財富，絕對值得維護。現在的安逸尊貴生活，可能會被突如其來的疾病打亂。在醫療費用日益增長的前提下，我們都想確保在人生每個階段，可享用優質的醫療服務，又不會影響現有的生活質素。 衛一 醫療總匯（「本計劃」）的保障就是要讓你將醫療費用的擔憂放心交托。

Health is the most precious treasure in life which deserves the greatest defence. Your current peaceful, enjoyable life can be disturbed by unexpected illnesses. Despite the ever-increasing medical costs, we all want to ensure we can enjoy high quality medical services at different life stages without impact to our quality of life. TheOne Medical Solution (the "Plan") offers you comprehensive medical coverage that gives you a peace of mind.

周全保障 顯赫護航

Comprehensive protection throughout life

為您尊貴的人生旅程時刻守護，本計劃高達1億港元的個人終身保障限額[1]，不僅涵蓋各類住院及手術保障，更為指定危疾治療特設指定危疾之全數保障—豁免每年自付費機制[2]，並為您提供定期健康檢查所需的開支[3]。其中，住院及手術的保障範圍，覆蓋每日標準私家病房[4]住院費用、手術費用、醫生巡房及專科醫生費用等。

To ensure you have an all-round protection during your life's journey, the Plan provides a Lifetime Limit of up to HK$100 million[1], including a range of hospitalization and surgical benefits, as well as providing First-dollar Coverage – Deductible Waived for Designated Critical Illness[2]. What's more, it provides reimbursement for your regular health screen[3]. Hospitalization and surgical benefits include daily hospital accommodation in a Standard Private Room[4], surgery fees, physician's visit and specialist's fees, etc.

9種不同計劃組合 切合您個人的理想

9 different plan options to fit your specific needs

本計劃為您特設3種不同計劃種類，分別為3個不同地區提供保障，且另有3個不同額度的每年自付費[5]選擇（0港元，4萬港元及8萬港元）可與之組合，讓您輕鬆打造最切合理想的生活保障。假設您選擇毋需承擔任何每年自付費[5]的優等計劃，便可享有覆蓋環球的醫療保障。倘若您本身已有僱主提供的醫療保障而僅尋求覆蓋亞洲地區的額外醫療保障，每年自付費[5]為4萬或8萬港元的標準計劃或能滿足您所需。

The Plan provides 3 different types of plans that cover 3 different geographic areas. Furthermore, 3 Annual Deductible[5] options (HK$0, HK$40,000 and HK$80,000) could be chosen to tailor your most ideal life protection. For example, Premier Plan with HK$0 deductible could provide a worldwide full medical coverage to you. If you have employer-sponsored medical coverage and are looking for additional medical coverage in Asia, our Standard Plan with Annual Deductible[5] of HK$40,000 or HK$80,000 may satisfy your needs.

指定危疾之全數保障–豁免每年自付費[2]

First-dollar Coverage – Deductible Waived for Designated Critical Illness Benefit[2]

現代都市人的巨大壓力及不良生活習慣，往往會增加患上危疾的風險。香港每4名男性及每5名女性中，便分別有1人於75歲前患上癌症[6]。一旦不幸罹患危疾，難免對您與您的家人帶來突如其來的財務負擔。本計劃正好針對您的顧慮及需求，為指定危疾治療提供指定危疾之全數保障—豁免每年自付費[2]，為您與您的家人免除治療危疾開支的擔憂（賠償額需視乎不同計劃的每年保障限額、個人終身保障限額及個別保障最高的保障額而定），專心捍衛健康及家庭。

Heavy stress and unhealthy habits raise the risk of suffering from critical illnesses. In Hong Kong, 1 out of every 4 men or 5 women is diagnosed with cancer before the age of 75[6]. Critical illnesses may cause an unexpected financial burden on you and your family. The Plan is focused around your concerns and needs, offering First-dollar Coverage – Deductible Waived for Designated Critical Illness[2] to ease your and your family's financial stress due to related medical expenses (The amount of benefit is subject to applicable Annual Limit, Lifetime Limit and limits for specific benefit items). The Plan provides protection for your family as well as your health.

貼心的額外保障
Tailored extra benefits

為關顧一旦不幸需要接受指定治療及器官移植的被保人接受更佳的醫療服務，本計劃在原有的每年保障限額上，額外提高高達200萬港元的每年保障限額[7]，應付不同醫療開支，包括：器官及骨髓移植、癌症化學療法、放射療法、免疫療法、標靶治療、癌症賀爾蒙療法、質子治療及腎臟透析。

In the event that the insured needs specific treatments and organ transplantation to receive better medical services, on top of its original Annual Limit, the Plan provides additional Annual Limit of up to HK$2 million to cover medical expenses of organ and bone marrow transplantation, chemotherapy, radiotherapy, immunotherapy, target therapy, cancer hormonal therapy, proton therapy and kidney dialysis[7].

保證終身續保[8] 使您後顧無憂
Guaranteed lifetime renewal privilege for peace of mind[8]

本計劃提供的保證終身續保保障消除您因歲月增長或健康轉變導致保單終止的憂慮。即使您的健康、財務或索償記錄有任何重大改變，富衛均保證為您的保障延續至被保人100歲（下次生日年齡）[8]（視乎續保時富衛仍否持續提供本計劃，並受當時適用的條款及細則、保單利益及保費率所限。保單利益及保費並非保證及富衛將對其保留更改的權利。）

The guaranteed lifetime renewal privilege of the Plan takes away your concern over policy discontinuity due to old age and changes in health conditions. Regardless of any significant changes in your health, financial condition or claim history, FWD guarantees that your policy will be renewable until the age of 100 (Age Next Birthday)[8] of the Insured, subject to the continual availability of the Plan, terms and conditions applicable, the benefits and the prevailing premium rates of the Plan at the time of renewal. Benefits and premium are not guaranteed and subject to change by FWD.

保障靈活 與您未來同步
Flexible protection aligned to your future needs

考慮到您未來的人生規劃可能有所轉變，本計劃特許您於緊接50、55、60或65歲（下次生日年齡）的保單週年享有一次（以終身計）減低現有之每年自付費[5]而無需提交任何可受保證明[9]，確保您一路獲享最切合未來所需的保障。

Your needs vary as you go through different life stages. The Plan enables you to switch to a lower Annual Deductible[5] option once (per lifetime) when you turn 50, 55, 60 or 65 (Age Next Birthday) without the need to provide proof of insurability[9], meeting any changing needs in the future for protection.

貼心看顧 支援覆蓋全球
Worldwide support service

當您身處外地遇上意外或疾病，本計劃的全球緊急援助服務將妥善照顧您的需要。您只需致電本計劃的24小時環球緊急支援服務熱線，即可免費獲得由國際SOS[10]提供的24小時環球緊急支援服務，包括電話醫療諮詢、緊急醫療撤離及遺體運送等服務。

If you meet an accident or suffer an illness whilst abroad, your needs will be well taken care of with our Worldwide Emergency Assistance. All you need to do is call our 24-hour emergency assistance hotline to enjoy round-the-clock worldwide support and assistance provided by International SOS[10] 24-hour Worldwide Assistance Services that includes phone medical advice, emergency medical evacuation and repatriation of mortal remains, etc.

衛一 醫療總匯

投保年齡（下次生日年齡）	1（15日）- 70
保障年期	保證每年續保[8]至被保人100歲
保費供款年期	至被保人100歲
繳付方式	每年 / 每半年 / 每月
保單貨幣	美元 / 港幣

保障範圍一覽表

保障項目	最高賠償限額		
計劃級別	標準計劃	特等計劃	優等計劃
保障地區	亞洲[11]	環球（美國除外）[12]	環球[13]
每年保障限額	8,000,000港元 / 1,000,000美元	12,000,000港元 / 1,500,000美元	16,000,000港元 / 2,000,000美元
個人終身保障限額[1]	40,000,000港元 / 5,000,000美元	60,000,000港元 / 7,500,000美元	100,000,000港元 / 12,500,000美元
每年自付費[5]選擇 (只適用於保障一覽表項目1至5)	0 / 40,000 / 80,000港元 0 / 5,000 / 10,000美元		
1. 住院保障			
住房費（標準私家病房[4]）	全數保障		
家屬陪床費	全數保障		
私家看護費[14]	全數保障（以每個保單年度計算：最多30日）	全數保障（以每個保單年度計算：最多60日）	全數保障（以每個保單年度計算：最多90日）
	（個人終身最多為180日）		
專科醫生費	全數保障		
醫生巡房費	全數保障		
深切治療部費用	全數保障		
醫院雜費[15]	全數保障		
每日住院現金[16]（入住香港公立醫院之大房）	1,500港元 / 187.5美元（以每個保單年度計算：最多30日）		
自願選擇入住私家病房以下病房的每日住院現金[16]（入住香港私家醫院）	1,500港元 / 187.5美元（以每個保單年度計算：最多30日）		
精神疾病治療	不適用	全數保障（以每個保單年度計算：最多30日及以個人終身計算：最多180日）	
2. 手術保障			
手術費用（包括手術費、手術室費、麻醉師費及門診手術費）	全數保障		
器官及骨髓移植	全數保障		
醫療裝置	指定項目[17]：全數保障 其他項目：每項96,000港元 / 12,000美元（以個人終身計算）		
3. 住院前及出院後保障			
住院前門診保障[18]	全數保障（於住院前的31日內診治及每日最多診治1次）		
出院後門診保障	全數保障（於出院後的60日內的診治以及每日最多診治1次）		
出院後私家看護[14]	全數保障（於出院後的31日內的服務及每個保單年度最多31日）		

TheOne Medical Solution

Issue Age (Age Next Birthday)	1 (15 days) – 70
Benefit Term	Guaranteed yearly renewable[8] to age 100 of the Insured
Premium Payment Term	To age 100 of the Insured
Premium Payment Mode	Annually / Semi-annually / Monthly
Currency	USD / HKD

Schedule of Benefit

Benefit Schedule	Maximum Benefit Limit		
Plan Level	Standard Plan	Superior Plan	Premier Plan
Area of Cover	Asia[11]	Worldwide ex USA[12]	Worldwide[13]
Annual Limit	HK$8,000,000 / US$1,000,000	HK$12,000,000 / US$1,500,000	HK$16,000,000 / US$2,000,000
Lifetime Limit[1]	HK$40,000,000 / US$5,000,000	HK$60,000,000 / US$7,500,000	HK$100,000,000 / US$12,500,000
Annual Deductible[5] options (Only available for item 1 – 5 of this Schedule of Benefit)	HK$0 / 40,000 / 80,000 US$0 / 5,000 / 10,000		
1. Hospitalization Benefits			
Room and Board (Standard Private Room[4])	Full Cover		
Companion Bed	Full Cover		
Private Nursing Care's Fee[14]	Full Cover (up to a max. of 30 days per policy year)	Full Cover (up to a max. of 60 days per policy year)	Full Cover (up to a max. of 90 days per policy year)
	(maximum 180 days per lifetime)		
Specialist's Fee	Full Cover		
Physician's Hospital Visit	Full Cover		
Charges for Intensive Care	Full Cover		
Miscellaneous Hospital Charges[15]	Full Cover		
Daily Hospital Cash[16] (for Confinement in general ward of public hospital in Hong Kong)	HK$1,500 / US$187.5 (up to a max. of 30 days per policy year)		
Daily Hospital Cash for Voluntary Room and Board Stay Below Private Room[16] (Stay in private hospital in Hong Kong)	HK$1,500 / US$187.5 (up to a max. of 30 days per policy year)		
Psychiatric Treatment	Not Applicable	Full Cover (up to 30 days per policy year and 180 days per lifetime)	
2. Surgical Benefits			
Surgery Fee (including Surgeon Fee, Operation Theatre Fee, Anaesthetist's Fee and Outpatient Surgery Fee)	Full Cover		
Organ and Bone Marrow Transplantation	Full Cover		
Medical Appliances	Specified Items[17] : Full Cover Other Items: HK$96,000 / US$12,000 per item per life		
3. Pre- and Post-Hospitalization Benefits			
Pre-Hospitalization Outpatient[18]	Full Cover (within 31 days before hospitalization and maximum 1 visit per day)		
Post-Hospitalization Outpatient	Full Cover (within 60 days immediately after discharge from hospitalization and maximum 1 visit per day)		
Post-Hospitalization Home Nursing[14]	Full Cover (up to a maximum of 31 days per policy year within 31 days after discharge from hospitalization)		

保障範圍一覽表（續）

4. 延伸保障			
指定危疾之全數保障 - 豁免每年自付費[2] (只適用於附有每年自付費的保單)	全數保障 - 豁免每年自付費[2,5] **指定危疾** • 癌症 • 末期肺病 • 原發性肺動脈高壓 • 腎衰竭 • 嚴重類風濕關節炎 • 末期疾病	• 暴發性肝炎 • 心肌病 • 冠狀動脈手術 • 主動脈手術 • 急性心肌梗塞	• 慢性肝病 • 心瓣手術 • 中風 • 主要器官移植 • 柏金遜症
癌症化學療法及放射療法	全數保障（包括免疫療法、標靶治療、癌症賀爾蒙療法及質子治療）		
腎臟透析	全數保障		
因接受器官及骨髓移植、癌症化學療法及放射療法及腎臟透析的額外每年保障限額[7]	1,000,000港元 / 125,000美元	1,500,000港元 / 187,500美元	2,000,000港元 / 250,000美元
人類免疫力缺乏病毒 / 愛滋病治療[19]	800,000港元 / 100,000美元（以個人終身計算）		
妊娠併發症[20]	全數保障		
中醫治療	不適用	每次350港元 / 43.75美元（於出院後的60日內的診治，每日最多診治1次及每個保單年度最多診治10次）	
5. 緊急牙科治療保障			
緊急牙科治療[15]	全數保障（意外引致）		
6. 健康檢查保障			
健康檢查[21]	不適用	每2個保單年度1次，最高以4,000港元 / 500美元為限（附有每年自付費[5]的保單則為每2個保單年度1次，最高以2,000港元 / 250美元為限）	每2個保單年度1次，最高以6,000港元 / 750美元為限（附有每年自付費[5]的保單則為每2個保單年度1次，最高以3,000港元 / 375美元為限）
7. 人壽保障			
身故權益	80,000港元 / 10,000美元		
意外身故權益	80,000港元 / 10,000美元		
8. 其他			
於指定年齡減低每年自付費[5]之權益	可選擇於緊接50 / 55 / 60 / 65歲（下次生日年齡）時的保單週年日前後31日內行使，而毋需提交任何可受保證明。保費將根據各因素，包括但不受限於新的每年自付費[5]、其計劃級別、其年齡及當時的保費表釐定。個人終身最多只可行使一次。		
24小時環球緊急支援服務[10]	服務支援		
第二醫療意見[10]	服務支援		

您可於富衛網頁參閱自付費例子或其他資料。

富衛將會根據以上保單利益的合理及慣常的收費作出賠償。合理及慣常 – 指以下：

(i) 就費用、收費或開支而言，指須符合以下條件的任何費用或開支：（a）為醫療需要之治療、物資或醫療服務的實際收費，並在醫生的護理、監管或命令下，為患病或受傷人士提供符合良好醫療服務標準的護理；（b）有關費用不超過在收取費用當地提供類似治療、醫療物品或醫療服務的一般收費標準；（c）不包括任何因為有保險才會衍生的費用；及（d）不得超過實際產生的費用、收費或開支。富衛保留根據但不限於該筆合資格費用衍生的地區政府、相關機構及認可之醫療組織提供的有關公布或資料如收費表等以決定任何該等收費是否合理及慣常收費的權利。對於富衛認為不屬合理及慣常收費的費用，富衛保留調整此保單所定之任何或所有應付賠償額的權利。

(ii) 就住院而言，指在住院期間所進行之醫療服務和治療，必須符合醫療實踐中普遍接受的專業標準，並且不應超過當地治療同類疾病或受傷的一般標準。

以上保障及利益均適用於本計劃。有關本計劃的保費，可參閱相關之保費表。

富衛保留隨時修訂保障利益、條款及細則及保費之權利。

以上保障及利益均設有等候期，除個別提及的等候期、人壽保障及意外引致的治療外，等候期為30日。

Schedule of Benefit (Continued)

4. Extended Benefits			
First-dollar Coverage – Deductible waived for Designated Critical Illness[2] (Only applicable to Annual Deductible policies)	First-dollar coverage - Waive Annual Deductible[2, 5] **Designated Critical Illnesses** • Cancer • Fulminant Hepatitis • Chronic Liver Disease • End Stage Lung Disease • Cardiomyopathy • Heart Valve Surgery • Primary Pulmonary Arterial Hypertension • Coronary Artery Disease Surgery • Stroke • Kidney Failure • Surgery to Aorta • Major Organ Transplantation • Severe Rheumatoid Arthritis • Heart Attack • Parkinson's Disease • Terminal Illness		
Chemotherapy and Radiotherapy	Full Cover (including immunotherapy, target therapy, cancer hormonal therapy and proton therapy)		
Kidney Dialysis	Full Cover		
Additional Annual Limit for Organ and Bone Marrow Transplantation, Chemotherapy and Radiotherapy and Kidney Dialysis[7]	HK$1,000,000 / US$125,000	HK$1,500,000 / US$187,500	HK$2,000,000 / US$250,000
HIV / AIDS Treatment[19]	HK$800,000 / US$100,000 (per lifetime)		
Pregnancy Complications[20]	Full Cover		
Traditional Chinese Medicine	Not Applicable	HK$350 / US$43.75 per visit (within 60 days after discharge from hospitalization. Maximum 1 visit per day and up to 10 visits per policy year)	
5. Emergency Dental Treatment Benefit			
Emergency Dental Treatment[15]	Full Cover (Due to Accident)		
6. Health Screening Benefit			
Health Screen[21]	Not Applicable	Once and up to HK$4,000 /US$500 for every 2 policy years (For policies with Annual Deductible[5], once and up to HK$2,000 / US$250 per 2 policy years)	Once and up to HK$6,000 / US$750 for every 2 policy years (For policies with Annual Deductible[5], once and up to HK$3,000 / US$375 per 2 policy years)
7. Life Protection			
Death Benefit	HK$80,000 / US$10,000		
Accidental Death Benefit	HK$80,000 / US$10,000		
8. Other			
Guaranteed Convertibility to Reduce Annual Deductibles[5] at Specified Ages	Privilege to reduce Annual Deductible[5] within 31 days before or after the Policy Anniversary at age 50 / 55 / 60 / 65 (Age Next Birthday) without providing proof of insurability. The premium would be based on factors, including but not limited to new Annual Deductible[5], Plan Level and age of the Insured and the premium table applicable at that time. This right can only be exercised once by lifetime.		
24-Hour Worldwide Assistance Services[10]	Service Program		
Second Medical Opinion[10]	Service Program		

You may refer to the deductible example or other information at FWD's website.

Reasonable and Customary charges for the above benefits will be paid by FWD. Reasonable and Customary - shall mean the following:

(i) in relation to a fee, a charge or an expense, shall mean any fee or expense which (a) is actually charged for treatment, supplies or medical services that are Medically Necessary and in accordance with standards of good medical practice for the care of an ill or injured person under the care, supervision or order of a Physician; (b) does not exceed the usual or reasonable average level of charges for similar treatment, supplies or medical services in the location where the expense is incurred; (c) does not include charges that would not have been made if no insurance existed; and (d) does not exceed the actual fee, charge or expense incurred. FWD reserves the right to determine whether any particular charge is Reasonable and Customary with reference but not limited to, any relevant publication or information made available, such as schedule of fees, by the government, relevant authorities and recognized medical association at the location where the Eligible Expense is incurred. FWD reserves the right to adjust any and all benefits payable under the Policy which in our opinion is not Reasonable and Customary;

(ii) in relation to a Confinement shall mean the admission and length of a Confinement, and medical services and treatment received during which, are in accordance with generally accepted professional standards of medical practice, and do not exceed the usual standard for the treatment of similar illness or injury at the location where such Confinement is made.

The above coverage and benefits are applicable to the Plan. For the premium of the Plan, please refer to the corresponding premium table for details.

FWD reserves the right to revise the benefits payable, terms and conditions and the premium at any time.

A 30-day waiting period is applicable for the above benefits, except the specific waiting periods stated above, Life Protection and the treatment due to accident.

備註：

1. 個人終身保障限額指富衛人壽保險（百慕達）有限公司（於百慕達註冊成立之有限公司）（「富衛」）保障被保人的所有保單及附加保障（如有）可支付的最高賠償總額，不論生效與否。
2. 只適用於附有每年自付費之保單及受每年及個人終身保障限額所限。於保單生效日或上次復效日起計90日內，就期間出現徵狀或診斷出之指定危疾相關的住院或手術費所作出之索償，每年自付費的結餘將不會被豁免。有關指定危疾之詳情及定義，請參閱本單張保障範圍一覽表、保單條款及保單資料頁。
3. 只適用於指定計劃級別受限於相關的限額。詳情請參閱本單張「保障範圍一覽表」及保單條款。
4. 標準私家病房指被保人在住院期間入住設有浴室的標準單人病房，但不包括設有廚房、飯廳或客廳的任何上等級病房。如被保人入住設有多等級私家病房的醫院，標準私家病房則指該醫院所提供之價錢最低的私家病房。
5. 每年自付費指須由保單權益人或被保人自行負擔的部份合資格費用，該費用將從賠償額中扣減。
6. 資料來源: 香港醫院管理局「癌病資料統計中心」於2012年11月的資料。
7. 如富衛就器官及骨髓移植、癌症化學療法、放射療法、免疫療法、標靶治療、癌症賀爾蒙療法、質子治療及腎臟透析的保障支付賠償時，富衛將提高該保單年度的每年保障限額。此保障於每個保單年度只適用一次。而個人終身保障限額則維持不變。詳情請參閱保單條款。
8. 保證終身續保受限於富衛是否持續提供本計劃、每年續保時將根據當時的條款及細則包括但不受限於保單終止條文、保單利益和保費率。續保保費並非保證及每次續保之保費將根據續保時的年齡(下次生日)及當時的保費表釐定。保費表根據各因素，包括但不受限於相關的醫療費用的通脹及富衛不時的索賠數據及保單續保情況釐定。富衛保留隨時作出修改保單利益、條款及細則及保費的權利。
9. 該申請須於相關的保單週年日之前或後31日內提出。此權利只可就被保人的終身行使一次及不可撤回。
10. 此服務由國際SOS提供，並且非保證續保，富衛將不會就國際SOS的行為或疏忽負上任何責任。而富衛或將不時調整有關詳情，恕不另行通知。倘若被保人在外地旅遊或暫時居住國外並不超過連續90天，此項由國際SOS提供的服務將適用於該被保人。
11. 亞洲包括阿富汗、孟加拉、不丹、汶萊、柬埔寨、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、澳門、中國內地、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。
12. 環球（美國除外）包括全球各地，但不包括美國。
13. 在下列情況下，富衛將在本計劃下應支付之相關賠償金額（人壽保障除外）減低百分之五十：(a) 若被保人在美國住院、接受治療及 / 或醫療服務時，已於過去十二個月內居住美國達一百八十三日或以上（包括到達及離境當日）；及 / 或（b）若被保人於美國之任何住院或接受門診手術並沒有獲富衛預先批核(因意外或緊急事故直接引致則除外）。若被保人於過去十二個月已居住於美國達一百八十三日或以上（包括到達及離境當日），富衛保留權利於任何時間將本計劃由優等計劃更改至標準計劃。
14. 只適用當被保人於手術後或完成深切治療部治療後的服務。
15. 有關可賠償項目詳情，請參閱保單條款。
16. 「每日住院現金」不會連同「自願選擇入住私家病房以下病房的每日住院現金」一同賠償。
17. 指定項目包括（i）起搏器；(ii）經皮冠狀動脈腔內成形術的支架；(iii）眼內人造晶體；(iv）人工心瓣；(v）金屬或人工關節置換；(vi）人工韌帶置換或植入；及（vii）人工椎間盤。
18. 只適用於導致被保人需要住院的門診諮詢。
19. 此保障的等候期為5年。
20. 此保障的等候期為1年。
21. 此保障只適用於18歲（下次生日年齡）或以上之被保人，及等候期為2年。

Remarks

1. Lifetime Limit refers to the maximum aggregate amount of benefits payable under all insurance policies and supplemental benefits (if any) issued by FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) ("FWD") covering the insured during his / her lifetime, regardless whether the insurance policies are still in force.
2. Only applicable to policies with Annual Deductible and subject to the Annual Limit and Lifetime Limit. FWD shall not waive the payment of any balance of Annual Deductible if the confinement is related to a designated crises whose symptoms appear or relevant diagnosis or surgery occurs within the first 90 days from the Policy Date or the last policy reinstatement date. Please refer to the Schedule of Benefit of this brochure, Policy Provisions, and Policy Schedule for the details and definition of Designated Critical Illness.
3. Only applicable to designated Plan Level and up to the relevant limit. Please refer to Schedule of Benefit of this brochure and Policy Provisions for details.
4. Standard Private Room means a single occupancy room with adjoining bathroom for the insured's use during his / her confinement, but excluding any room of upper class with its own kitchen, dining or sitting room(s) in a hospital. If the Insured is confined in a hospital which offers multiple classes of private rooms, the Standard Private Room shall refer to the lowest priced private room offered by the hospital.
5. Annual Deductible shall means the part of eligible expenses which shall be borne by the policy owner or the insured and which has to be deducted from the reimbursable sum.
6. Source: Information from Hong Kong Cancer Registry, Hospital Authority as of November 2012.
7. When the benefit is payable under Organ and Bone Marrow Transplantation, Chemotherapy, Radiotherapy, immunotherapy, target therapy, cancer hormonal therapy, proton therapy and Kidney Dialysis, FWD shall increase the Annual Limit for that policy year. This benefit is only available once per policy year. The amount of Lifetime Limit shall remain unchanged. Please refer to Policy Provisions for details.
8. Lifetime guaranteed renewal is subject to the continual availability of the Plan offered by FWD, terms and conditions applicable including but not limited to Termination Provisions, benefits, and premium rates at the time of renewal. Renewal premiums are not guaranteed and the premiums for each renewal are determined based on the age (at next birthday) and the premium table applicable upon renewal. Premium table is subject to change based on factors including but not limited to the inflation of related medical expense, FWD's medical claim experience and persistency of policies from time to time. FWD reserves the right to revise the benefit payable, terms and conditions and premiums at any time.
9. The application should be made within 31 days immediately before or after the relevant policy anniversary. This right can only be exercised once per lifetime of the insured and is irrevocable.
10. The service is provided by International SOS and is not guaranteed renewable. FWD shall not be responsible for any act or failure to act on the part of International SOS. FWD may revise the details of the services from time to time without prior notice. International SOS benefits are available to FWD's insureds when travelling outside the home country or country of residence for periods not exceeding 90 consecutive days per trip.
11. Asia includes Afghanistan, Bangladesh, Bhutan, Brunei, Cambodia, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Mainland China, Malaysia, Maldives, Mongolia, Myanmar, Nepal, North Korea, Pakistan, Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
12. Worldwide exclude USA includes worldwide exclude the USA.
13. FWD shall reduce the amount of benefit payable (except Life Protection) under this Plan to 50% of the relevant benefit payable if: (a) the Insured has taken up residence in the USA for at least 183 days in the past 12 months (including the days of arrival and departure) at the time of confinement, medical treatment and / or service in the USA; and / or (b) the Insured is under confinement or undergoes clinical surgeries in the USA without obtaining FWD's pre-authorisation unless it is directly due to an accident or emergency. FWD reserves the right to change the Plan from Premier Plan to Standard Plan at any time if the Insured has taken up residence in the USA for at least 183 days in the past 12 months (including the days of arrival and departure).
14. Only applicable after the insured's surgery or discharged from Intensive Care Unit.
15. Please refer to the Policy Provisions for the details of the items which the benefits are payable.
16. "Daily Hospital Cash" will not be paid in conjunction with "Daily Hospital Cash for Voluntary Room and Board Stay below Private Room".
17. Specified Items include (i) Pace maker; (ii) Stents for Percutaneous Transluminal Coronary Angioplasty; (iii) Intraocular lens; (iv) Artificial cardiac valve; (v) Metallic or artificial joints for joint replacement; (vi) Prosthetic ligaments for replacement or implantation between bones; and (vii) Prosthetic intervertebral disc.
18. Only applicable to the outpatient consultations result in hospitalization of the insured.
19. The waiting period of this benefit is 5 years.
20. The waiting period of this benefit is 1 year.
21. Only applicable to the insured who is aged 18 (Age Next Birthday) or above and the waiting period of this benefit item is 2 years.

重要事項及聲明：

i. 本計劃由富衛承保，富衛全面負責一切計劃內容、保單批核、保障及賠償事宜。在投保前，您應考慮本計劃是否適合您的需要及您是否完全明白本計劃所涉及的風險。除非您完全明白及同意本計劃適合您，否則您不應申請或購買本計劃。在申請本計劃前，請細閱以下相關風險。

ii. 本計劃資料是由富衛發行。富衛對本計劃資料所載資料的準確性承擔一切責任。本計劃資料只在香港特別行政區派發，並不能詮釋為在香港特別行政區境外出售，游說購買或提供富衛的保險產品。本計劃的銷售及申請程序必須在香港特別行政區境內進行及完成手續。

iii. 本計劃是一項保險產品。繳付之保費並非銀行存款或定期存款，本計劃不受香港特別行政區存款保障計劃所保障。

iv. 本計劃乃一項個人償款住院保險產品，並沒有任何儲蓄成份。保險費用成本及保單相關費用已包括在本計劃的所需繳付保費之內，儘管本計劃的主要推銷文件 / 小冊子及 / 或本計劃的銷售文件沒有費用與收費表 / 費用與收費部份或沒有保費以外之額外收費。

v. 所有核保及理賠決定均取決於富衛，富衛根據投保人及被保人於投保時所提供的資料而決定接受投保申請還是拒絕有關申請，並退回全數已繳交之保費及保費徵費（如有）（不連帶利息）。富衛保留接納 / 拒絕任何投保申請的權利並可拒絕您的投保申請而毋須給予任何理由。

vi. 以上全部權益及款項將於扣除保單負債（如有）（如未清繳之保費或保單貸款及其利息），如有，後支付。

vii. 如果您對保單不完全滿意，則有權改變主意。

我們相信此保單將滿足您的財務需要。但是，如果您不完全滿意，您有權以書面通知本公司要求取消保單及取回所有您已繳交的保費及保費徵費（但不附帶利息）。此書面通知必須由您親筆簽署，並確保富衛辦事處在交付保單當天或向您 / 您的代表交付冷靜期通知書當天(以較早者為準)緊隨的21個曆日內直接收到附有您的親筆簽署的書面通知。冷靜期通知書發予您 / 您的指定代表(與保單分開)，通知您有權於規定的21個曆日內取消保單。若您在申請取消保單前曾經就有關保單提出索償並獲得賠償，則不會獲退還。如有任何疑問，您可以（1）致電我們的服務熱線3123 3123；（2）親臨富衛保險綜合服務中心；(3）電郵至cs.hk@fwd.com，我們很樂意為您進一步解釋取消保單之權利。

viii. 本計劃之保障年期為1年及於每一保單週年日將自動續保一年。富衛保留調整、修訂、變更本保單保障、限制、不保事項條款，及任何額外保障之權利。富衛會於保單週年日前最少30天通知保單權益人有關的調整諸如新保費率及保費到期日。

ix. 如要將保單退保，保單權益人需要向富衛提交填妥的退保申請表格或以富衛接受的任何其他方式通知富衛。

x. 富衛必須遵從稅務條例的下列規定以便稅務局自動交換某些財務帳戶資料：

(a) 識辨非豁除「財務帳戶」的帳戶（「非豁除財務帳戶」）；

(b) 識辨非豁除財務帳戶的個人持有人及非豁除財務帳戶的實體持有人作為稅務居民的司法管轄區；

(c) 斷定以實體持有的非豁除財務帳戶為「被動非財務實體」之身份及識辨控權人作為稅務居民的司法管轄區；

(d) 收集有關非豁除財務帳戶的資料（「所需資料」）；及

(e) 向稅務局提供所需資料。

保單權益人必須遵從富衛所提出的要求用以符合上述規定。

重複保險

若被保人可從其他來源獲發還全部或部份於本保單條款的權益條款之費用，保單權益人應通知富衛。富衛將只負責賠償其餘數(如有)。然而，若提交所有單據之核證副本予富衛作為證據，這些從其他來源獲發之賠償或退還將計入每年自付費之餘額。倘富衛已賠償可從其他來源獲發還的費用，有關費用應退還給富衛。而每項保障之最高賠償額不得超過保單資料頁註明之保障限額。

索償通知

任何索償應在被保人出院或完成門診手術或身故30天內，或在任何情況下從被保人出院或完成門診手術或身故計起不超過6個月，以書面通知富衛有關索償。除非富衛另作決定，任何於上述期限外之索償將不會受理。

不正確披露或不披露

在回應富衛的核保問題時，您或被保人須披露所有重要事實。重要事實即事實、信息或情況，特別是與醫學有關的事實，例如病史、吸煙狀況等會影響富衛在確定保費或是否承保該風險的決定。如果您或被保人不確定信息是否重要，請採取謹慎的方法，向富衛披露。

對富衛而言，不正確披露或不披露任何重要事實，可能會影響風險評估，其中包括但不限於以下各項：年齡、性別，以及有關申請表申報的其他重要事實。除非富衛以書面形式確認，否則不正確披露或不披露這些重要事實可能會導致本保單自保單簽發日起失效。

Important Notes and Declarations:

i. This Plan is underwritten by FWD. FWD is solely responsible for all features, Policy approval, coverage and benefit payment under the Plan. FWD recommends that you carefully consider whether the Plan is suitable for you in view of your financial needs and that you fully understand the risk involved in the Plan before submitting your application. You should not apply for or purchase the Plan 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.

ii. This Plan material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this Plan material. This Plan material is intended to be distributed in the Hong Kong Special Administrative Region 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 the Hong Kong Special Administrative Region. All selling and application procedures of the Plan must be conducted and completed in the Hong Kong Special Administrative Region.

iii. This Plan is an insurance product. The premium paid is not a bank savings deposit or time deposit. The Plan is not protected under the Deposit Protection Scheme in the Hong Kong Special Administrative Region.

iv. This Plan is an individual indemnity hospital insurance plan without any savings element. 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.

v. 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.

vi. All the above benefits and payment are paid after deducting policy debts (if any, e.g. unpaid premiums or premium loan and the interest of the loan).

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

We trust 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 the office of 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 our Customer Service Hotline on 3123 3123; (2) visit our FWD Insurance Solutions Centres; (3) email to cs.hk@fwd.com and we will be happy to explain your cancellation rights further.

viii. The period of cover is 1 year, and the policy will be automatically renewed at each Policy Anniversary. FWD reserves the right to revise, amend or modify the benefits payable, restrictions, limitations, exclusions under this Policy and any supplementary benefits. FWD shall notify the Policy Owner in writing at least 30 days before the Policy Anniversary effecting such revision specifying, among others, the new premium rate and its due date.

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

x. FWD must comply with the following requirements of the Inland Revenue Ordinance to facilitate the Inland Revenue Department automatically exchanging certain financial account information:

(a) to identify accounts as non-excluded "financial accounts" ("NEFAs");

(b) to identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;

(c) to determine the status of NEFA-holding entities as "passive NFEs" and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;

(d) to collect information on NEFAs ("Required Information"); and

(e) to 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.

Double Insurance

If the Insured is entitled to a refund of all or part of expenses specified in Benefit Provisions of this Policy from any other sources, the Policy Owner shall notify FWD. FWD shall only be liable for the excess, if any, of such expenses over the amount recoverable from such other sources. However, such compensation or reimbursement from any other sources will count towards the Balance of Annual Deductible provided that certified copy(s) of all the bills are submitted to FWD as evidence. If FWD shall have paid the amount recoverable from such other sources, the same shall be refunded to FWD. The maximum amount payable under each item of benefits shall not exceed the limit of this benefit as stated in the Policy Schedule.

Notice of Claim

Written notice of a claim must be given to FWD within 30 days from the date of Discharge or Clinical Surgery, or the date of death of the Insured, or in any case not beyond 6 months from the date of discharge from Confinement or Clinical Surgery, 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

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.

Incorrect disclosure or non-disclosure of any material facts which, in our opinion, may affect our risk assessment, including but not limited to, age, gender and other material facts declared on the relevant application form, may render this Policy void from the Policy Date, unless FWD confirms otherwise in writing.

本產品有哪些主要風險?

信貸風險

本產品是由本公司發出的保單。投保本保險產品或其任何保單利益須承受富衛的信貸風險。保單權益人將承擔富衛無法履行保單財務責任的違約風險。

外幣匯率及貨幣風險

投保外幣為保單貨幣的保險產品須承受外幣匯率及貨幣風險。請注意外幣或會受相關監管機構控制及管理（例如，外匯限制）。若保險產品的貨幣單位與您的本國貨幣不同，任何保單貨幣對您的本國貨幣匯率之變動將直接影響您的應付保費及可取利益。舉例來說，如果保單貨幣對您的本國貨幣大幅貶值，將對您於本產品可獲得的利益構成負面影響。如果保單貨幣對您的本國貨幣大幅增值，將增加您繳付保費的負擔。

通脹風險

請注意通脹會導致未來生活費用增加。即使富衛履行所有合約責任，實際保單權益可能不足以應付將來的保障需要。

保費調整

保費為非保證並將每年按照被保人於續保時之下次生日年齡而訂定。保費會因各種因素而大幅增加，當中包括但不限於年齡、索償經驗及保單續保率。

保費年期及欠繳保費

本計劃的保費供款年期的終結日為被保人100歲生日前之保單週年日。

任何到期繳付之保費均可獲富衛准予保費到期日起計30天的寬限期。若在寬限期屆滿後仍未繳付保費，本計劃將由首次未繳保費的到期日起終止，而您可能會失去全部權益。

What are the key product risks?

Credit risk

This product 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.

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 product. 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.

Premium adjustment

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

Premium term and non-payment of premium

The premium payment term of the Plan ends on the policy anniversary immediately preceding the Insured's 100th birthday.

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 Plan will be terminated from the date the first unpaid premium was due. Please note that once the Plan is terminated on this basis, you will lose all of your benefits.

不保事項

除非本計劃及 / 或附加保障（如有）列明，否則富衛並無責任就本計劃的保障作出賠償，假如：1. 被保人之受傷或病患為已存在之狀況，或是由已存在之狀況引起； 2. 倘若於中國內地的醫院接受的治療，有關醫院並非本公司認可的指定醫院；3. 被保人於保單簽發日或本計劃之復效日後首30日內出現的病症、疾病或病患； 4. 與以下事項直接或間接有關或因其直接或間接所引致的住院、治療及 / 或收費： 1）被保人的妊娠、代母身份、分娩或終止妊娠（妊娠併發症保障所列的保障除外）、節育、不育或人工受孕或任何一性別絕育；2）戰爭、敵對行為（不論已宣戰與否）、叛亂、暴動、暴亂、罷工、民事騷亂、恐怖主義行動、核污染、生物污染或化學污染； 3）海、陸或空軍任務，或跟隨任何國家、地區或組織的軍隊進行的任何行動或軍事服役； 4）被保人參與任何刑事罪行或非法行為； 5）在神志清醒或精神錯亂，或在持續酗酒或濫用藥物的情況下企圖自殺或自殘； 6）美容或外科整形手術、任何牙科治療或手術、口腔或口腔手術護理、檢查度數、眼科測試或眼鏡配置，或近視手術矯正的治療（例如但不限於放射狀角膜切開術及角膜切除術），除非該等治療已於保單內明確列出； 7）為被保人的利益而購買或使用醫療裝置及器具，包括但不限於眼鏡、隱形眼鏡、助聽器或輪椅（除非該等醫療裝置及醫療器材已於保單內明確列明。）； 8）被保人作出預防性治療、預防性藥物、康復治療、身體檢查或健康檢查（不論有或沒有任何正面成果）；被保人接種及疫苗注射;被保人接受基因測試或輔導;或任何不被本公司視為醫療需要的治療； 9）就被保人之受傷或病患而進行之相關治療或測試與香港常規醫療或診斷不一致； 10）被保人使用的麻醉劑（除非為醫生處方），或被保人濫用藥物或酗酒； 11）保健品及所有特殊的中藥及 / 或補藥，包括燕窩、靈芝、人蔘、姬松茸、羚羊角粉、鹿茸、冬蟲夏草、阿膠、海馬、麝香、珍珠粉及紫河車，及任何由本公司不時全權決定的中藥及 / 或補藥； 12）被保人進行深海潛水或參與或參加任何非徒步進行的比賽、使用繩索或由嚮導帶領的攀山活動，或其他專業或具危險性的運動或消遣，包括但不限於延緩張傘式的跳傘活動、跳傘、滑翔機駕駛、水上滑翔傘、打獵、航空或飛行活動（以乘客身份購票乘搭持有牌照之商業飛機除外）、跳台滑雪或跳水、馬術障礙比賽； 13）愛滋病或受人類免疫力缺乏病毒感染的任何相關的併發症。保單內之人類免疫力缺乏病毒 / 愛滋病治療保障除外； 14）因識別服務、取得替換器官，或由捐贈者身上移除器官而招致的移植服務費用、所有相關的運輸費用及行政費用； 15）器官捐贈； 16）被保人患有精神紊亂、心理或精神疾病、行為問題或人格障礙。除非該事項已明確地於精神疾病治療保障內列明； 17）天生缺憾、遺傳失常、先天性或遺傳疾病或發育期間出現異常情況（只適用於該異常於被保人年滿十六歲前已產生徵狀或病徵，或已被診斷患上疾病）； 18）任何由本公司決定並只為物理治療或就檢查徵狀及 / 或病徵而進行之診斷影像、化驗室檢查或其他診斷程序的住院； 19）於家中、礦泉療養地、水療場地、天然治療診所、療養院、或並非註冊急性治療醫院的長期保健設施接受服務、治療或療養； 20）任何不屬醫療需要的治療、檢查、服務或供應品；任何超出本公司決定的合理及慣常收費的收費； 21）非醫療服務，包括但不限於探訪者用餐、收音機、電話、電視、影印、傳真、個人物品及醫療報告之收費； 22）被保人接受的醫療實驗及 / 或非主流醫療技術 / 程序 / 治療，或尚未得到政府、相關機構及當地認可醫學會批准之新型藥物 / 藥品 / 幹細胞治療，或由未註冊成為能為急性治療醫院的設施進行的治療及程序，或由被保人的親屬或一般居住在被保人家中的人士提供的服務； 23）睡眠疾病（由專科醫生確認可致命的睡眠窒息症治療及已獲本公司預先批核之治療除外）、患有學習困難的兒童所接受之治療，例如語言或行為障礙、過度活躍症、或發育問題，例如身體矮小； 24）治療過度肥胖（包括病態肥胖）、控制體重計劃或減肥手術（由專科醫生於傳統治療方法失敗後確認是必需的減肥手術及已獲本公司預先批核之治療除外）； 25）除人類免疫力缺乏病毒 / 愛滋病治療外，由性接觸傳染的疾病或性問題，如性功能障礙（不論其原因），性別有關的問題或變性或性別重新分配； 26）若被保人維持覺醒但並無意識的持續性植物人狀態超過4星期並於醫院接受超過連續90日的治療； 27）可從任何途徑收回之費用； 28）任何列於保單之批注（如有）中不保事項條款下的活動或疾病。

若被保人在保單簽發日或復效日（以較遲者為準）起13個月內因自殺身亡，無論其精神正常與否，富衛之賠償責任，僅限於退回所有不連利息之已繳付保費，而一切欠款及已賠償利益亦將扣除。

有關意外身故權益、其他權益及國際SOS提供之服務的不保事項，請參閱保單條款。

終止保單

本計劃將在下列其中一個日期終止，以較早為準： 1. 被保人身故。 2. 被保人100歲生日前之保單週年日。 3. 依富衛相關規定所認定之本計劃的退保日。 4. 所有相關保單支付的賠償總額達至個人終身保障限額之日。 5. 根據以下而終止本計劃之日：(i) 若所更換之居住地方或職業被本公司當時適用之發行規則歸類為不可承保者。 (ii) 由於富衛不再提供本計劃，本計劃不能再續保。(iii) 若保單權益人不接受本公司按保單條款調整之保障，或不繳交新保費，富衛於新保費逾期未繳三十天後有權終止本計劃。(iv) 索償在任何方面屬虛假、具有欺詐成分、故意誇大或曾使用欺詐性方式或手段或文件以獲取本計劃下的賠償。 6. 寬限期滿後仍未繳付保費。

如欲查詢詳情，請聯絡交通銀行(香港)有限公司。

Exclusions

Despite anything stated in the Plan and / or supplementary benefits (if any), FWD shall not be liable to pay any benefits under the Plan if: 1. the Insured's illness or injury is a Pre-existing Condition or results from the complications of a Pre-existing Condition; 2. in case of medical treatment in Mainland China, the subject Hospital is not a designated Hospital approved by FWD; 3. the Insured's sickness, disease or illness occurs during the first 30 days from the Policy Date or the date of reinstatement of the Plan; 4. the Confinement, treatment or charges incurred relate to or arise as a direct or indirect result of: 1) the Insured's pregnancy, surrogacy, childbirth or termination of pregnancy (except for the Pregnancy Complications Treatment), birth control, infertility or human assisted reproduction, or sterilisation of either sexes; 2) war, hostilities (whether war is declared or not), rebellion, insurrection, riot, strike, civil commotion, terrorist act, nuclear contamination, biological contamination or chemical contamination; 3) naval, military or air-force services, or any operation or combat duty with any armed force of any country, territory, organization; 4) the Insured's participation in any criminal offence or illegal acts; 5) attempted suicide or self-inflicted injuries while sane or insane, or any condition caused by chronic alcoholism or drug addiction; 6) cosmetic or plastic surgery, dental treatment or surgery of any kind, oral or oro-surgical care, eye refraction, eye tests or fitting of glasses, or surgical correction of nearsightedness (such as but not limited to radial keratomoty and keratectomy), unless such a treatment is explicitly covered by this Policy; 7) procurement or use of medical appliances and medical devices for the benefit of the Insured including but not limited to spectacles, contact lenses, hearing aids or wheelchairs (unless such medical appliances and medical devices are explicitly covered by this Policy); 8) preventive treatments, preventive medicines, convalescence, physical examinations, or health checks (with or without any positive finding) on the Insured; vaccination and immunisation received by the Insured; genetic testing or counselling on the Insured; or any treatment which is not deemed Medically Necessary by the Company; 9) treatment or tests carried out in relation to the Insured's illness or injury are not consistent with customary medical treatment or diagnosis in Hong Kong; 10) narcotics used by the Insured unless taken as prescribed by a Physician, or the Insured's abuse of drugs or alcohol; 11) health supplements and all specialized Chinese herbs and / or tonic medicine including bird's nest, lingzhi, gingseng, agaricus blazei murill, antelope horn powder, antler, cordyceps sinensis, donkey-hide gelatin, hippocampus, moschus, pearl powder, placenta hominis and any other Chinese herbs and / or tonic medicine determined by the Company in its absolute discretion from time to time; 12) scuba diving or engaging in or taking part in any kind of race other than on foot, mountaineering involving the use of ropes or guides by the Insured or other professional or hazardous sports or pastimes including but not limited to skydiving, parachuting, hang-gliding, parasailing, hunting, aviation or aeronautics (other than as fare paying passenger on a duly licensed commercial aircraft), ice or water ski-jumping, show jumping; 13) AIDS or any complications associated with HIV Infection except for the HIV / AIDS Treatment Benefit; 14) transplant service for which the cost incurred in connection with identifying service and procuring a replacement organ or any costs incurred for removal of the organ from the donor, all associated transportation costs and administrative costs; 15) donation of organ; 16) mental disorder, psychological or psychiatric conditions, behavioural problems or personality disorder of the Insured unless such occurrence is covered by the Psychiatric Treatment Benefit; 17) birth defects, genetic disorders, Congenital Conditions, or inherited disorders or developmental conditions (only applicable if the disorder gives rise to signs or symptoms or was diagnosed before the Insured attains 16th years of age) of the Insured; 18) any Confinement primarily for physiotherapy or for the investigation of signs and / or symptoms with diagnostic imaging, laboratory investigation or other diagnostic procedures as determined by the Company; 19) rest cures and services or treatment received in any home, spa, health hydro, nature cure clinic, sanatorium or long term care facility that is not a registered acute treatment hospital; 20) any treatment, investigation, services or supplies which are not Medically Necessary; any charges which exceed the Reasonable and Customary Charges as determined by the Company; 21) non-medical services, including but not limited to guest meals, radio, telephone, television, photocopy, telex, personal items, and medical report charges; 22) experimental and / or unconventional medical technology / procedure / therapy performed on the Insured; novel drugs / medicines / stem cell therapy not yet approved by the government, relevant authorities and recognised medical association in the locality, or treatment and procedures carried out by a facility not recognized as an acute treatment hospital, or services performed by a relative of the insured or a person who ordinarily resides in the insured's home; 23) sleep disorders (except for the treatment of sleep apnoea which is life-threatening as confirmed by a Specialist and approved by the Company in advance), treatment for learning difficulties in children, such as dyslexia or behavioural problems, attention deficit hyperactivity disorder, or development problems such as shortness of stature; 24) treatment of obesity (including morbid obesity), weight control programmes or bariatric surgery (except when bariatric surgery is necessary as confirmed by a Specialist after failure of conventional treatments and approved by the Company in advance); 25) treatment of sexually transmitted diseases; venereal diseases, sexual problems, such as impotence, whatever the cause, gender issues or gender re-assignment except for the HIV / AIDS Treatment Benefit; 26) treatment whilst staying in Hospital for more than 90 consecutive days if the Insured is in a persistent vegetative state characterized by wakefulness without awareness for more than 4 weeks; 27) expenses that are recoverable from any other source; 28) any activity or disease which falls under the exclusion(s) as shown on the endorsement(s) (if any) of this Policy.

If the Insured dies by suicide, whether sane or insane, within 13 calendar months from the later of the Policy Date or the date of reinstatement, FWD's liability shall be limited to the amount of the premiums paid without interest, less any indebtedness and any benefit payment under this Policy.

Please refer to the Policy Provision for the exclusions of Accidental Death Benefit, other benefits and services provided by International SOS.

Termination conditions

The Plan shall terminate on the earliest of the following: 1. The death of the Insured. 2. The policy anniversary immediately preceding the 100th birthday of the Insured. 3. The date of the surrender of the Plan. Such date is determined in accordance with FWD's applicable rules and regulations in relation to surrender. 4. The date the aggregate benefits paid under all relevant insurance policies reach the Lifetime Limit. 5. Termination of the Plan if: (i) the change of place of residence or occupation of the Insured is to one which is classified by FWD as not insurable pursuant to FWD's then underwriting rules. (ii) the Plan cannot be renewed as FWD no longer offers the Plan. (iii) the Policy Owner refuses to accept the benefits revised by FWD according to the Benefit Terms or pay the revised premiums, FWD can terminate the Plan when the new premiums have been due for 30 days. (iv) a claim is, in any respect, false, fraudulent, intentionally exaggerated or if fraudulent means or devices or documentation has been used to obtain benefit under this Plan. 6. The end of the Grace Period of any premiums due and not received by the Company.

For enquiries, please contact Bank of Communications (Hong Kong) Limited.

重要字句

意外

- 指在保單有效期間所發生之無法預見、突如其來、猛烈及非自願的一宗或連串由外在及意外可見事故，且為導致身體損傷之唯一及直接原因，並獨立於任何其他原因，包括但不限於疾病或自然出現的狀況或退化過程。

住院或入住

- 指被保人因受保疾病或受保損傷並在醫生書面建議下以住院病人身份入住醫院或心理/精神病醫院並接受有醫療需要之治療，且該段逗留期間須為連續6小時或以上。從開始住院至出院期間，被保人必須在該醫院或心理/精神病醫院連續入住而未有間斷或缺席。

先天性疾患

- 指出生時即已存在、無論保單權益人或被保人已知或未知之身體異常，以及被保人在出生後至年滿16歲之前發展出之身體異常，其中包括但不限於斜視、腦積水、睾丸未降、梅克爾憩室、扁平足、心房室間隔缺損及間接腹股溝疝。

受保疾病

- 指在保單簽發日30天後身體出現由正常健康狀態產生病理變化的生理狀態。在此保單內，患病是指任何已接受檢查、診斷或治療之疾病，或其徵狀或病徵已顯現並促使一個普通及謹慎的人尋求診斷、護理或治療。若被保人與醫生對疾病的徵狀或病徵的意見有抵觸或不一致時，富衛將以醫生的專業意見為依歸。

受保損傷

- 指被保人在保單有效期間出現純粹因意外而直接引致的身體損傷。

合資格費用

- 指被保人因本保單下的受保疾病或受保損傷而接受醫療需要治療或服務而產生之合理及慣常費用。

醫療需要

- 指有必要且符合以下條件的醫療服務、程序或物資：(a)符合受保疾病或受保損傷的診斷及符合處理該等傷病之常規治療；(b)醫生或外科醫生為受保疾病或受保損傷所建議之護理或治療，且基於認可的醫療標準為香港的醫療專業普遍接受為有效、適當及必須的護理；(c)並非純粹為被保人或任何醫療服務提供者的個人便利或舒適而提供的；及(d)於住院的情況下，以被保人所患之受保疾病或受保損傷的傷病而言，在不住院的情況下不能得到安全及合理的治療；於接受門診手術的情況下，以被保人所患之受保疾病或受保損傷的傷病而言，在不做手術的情況下並不可能得到安全及合理的治療。實驗性、普查及預防性質的服務或物資均不被視為醫療需要。

已存在之狀況

- 指在保單簽發日之前的(1)任何身體、醫療或精神狀況或(2)任何疾病或受傷：
  (a) 已存在，不論保單權益人或被保人已知或未知；或
  (b) 曾接受醫生檢查、診斷或治療；或
  (c) 曾向醫生諮詢；或
  (d) 已出現有關徵狀或病徵。

以上資料只供參考及旨在描述產品主要特點，有關條款細則的詳細資料及所有不保事項，請參閱保單條款。如本單張及保單條款內容於描述上有任何歧義或不一致，應以保單條款為準。如欲在投保前參閱保險合約條款及細則，您可向富衛索取。本產品之保單條款受香港的法律所規管。

Important Words

Accident

– shall mean an unforeseen, unexpected, violent, and involuntary external event or contiguous series of events of accidental and visible nature which shall be the sole and direct cause of a bodily injury and independently of any other causes including but not limited to illness or any naturally occurring condition or degenerative process while this Policy is in force.

Confinement or Confined

– shall mean admission of the Insured into a Hospital or Mental/Psychiatric Hospital as an In-Patient on written recommendation of a Physician for Medically Necessary treatment as a result of Covered Illness or Covered Injury, provided that the duration of such stay is at least 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 or Mental/Psychiatric Hospital without any physical absence or interruption.

Congenital Conditions

– shall mean 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.

Covered Illness

– shall mean a physical condition marked by a pathological deviation from the normal healthy state which manifests and commences more than 30 days after the Policy Date. In this Policy, an illness is regarded as having occurred when it has been investigated, diagnosed or treated or when its signs or symptoms have manifested which would cause an ordinary prudent person to seek diagnosis, care or treatment. In the event of any conflict or discrepancy of opinions relating to the signs or symptoms of an illness and their manifestation between a Physician and the Insured, FWD shall adopt and follow the Physician's professional opinion.

Covered Injury

– shall mean bodily damage to the Insured caused solely and directly by an Accident that occurs while this Policy is in force.

Eligible Expenses

– shall mean only those Reasonable and Customary amount incurred by the Insured for the Medically Necessary treatment or services in respect of Covered Illness or Covered Injury as provided under this Policy.

Medically Necessary

– shall mean medical service, procedure or supply which are necessary and is (a) consistent with the diagnosis and customary medical treatment for the Covered Illness or Covered Injury; (b) recommended by a Physician or Surgeon for the care or treatment of the Covered Illness or Covered Injury 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; (c) not furnished primarily for the personal comfort or convenience of the Insured or any medical service provider; and (d) for Confinement, which the Insured's Covered Illness or Covered Injury could not safely and adequately be treated while not confined, and for Clinical Surgery which the Insured's Covered Illness or Covered Injury could not safely and adequately be treated without any surgery. Experimental, screening and preventive services or supplies shall not be considered as Medically Necessary.

Pre-existing Conditions

– shall mean (1) any physical, medical or mental condition or (2) any illness or injury:

(a) that existed whether it was known or unknown to the Policy Owner or the Insured; or

(b) that was investigated, diagnosed, or treated by a Physician; or

(c) for which Physician was consulted; or

(d) the signs or symptoms of which commenced,

before the Policy Date.

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 material. In the event of any ambiguity or inconsistency between the terms of this leaflet 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.

向人壽保險客戶披露的重要事項

第1部份：定義與釋義

在下述的披露及聲明中：

- 「銀行」指交通銀行(香港)有限公司
- 「保險公司」指富衛人壽保險(百慕達)有限公司
- 「保險計劃/本計劃」指產品刊物所列明之保險計劃名稱的保險產品
- 「投保申請」指填寫申請書號碼的相關申請
- 「本人/投保人」指投保申請內之投保人
- 「被保人/受保人」指投保申請內之受保人

第2部份：向投保人披露的重要事項

2.1 銀行與保險公司的關係及責任

- 銀行為保險公司之獲委任保險代理商，銀行負責代理銷售由保險公司承保的保險計劃及協助為閣下辦理本計劃的投保手續。
- 本計劃是由保險公司承保，保險公司已獲保險業監管局授權經營，並受其監管。本計劃為保險公司之產品，而非銀行之產品。保險公司全面負責一切計劃內容、保單批核、保障及賠償事宜。有關本計劃保單之權益、權利及賠償，保單持有人或受益人應向保險公司作出查詢及追索。
- 對於銀行與客戶之間因銷售過程或處理有關交易而產生的合資格爭議(定義見金融糾紛調解計劃的金融糾紛調解的中心職權範圍)，銀行須與客戶進行金融糾紛調解計劃程序；然而，對於有關產品的合約條款的任何爭議應由保險公司與客戶直接解決。

2.2 風險披露

本計劃所須承受之主要風險包括但不限於：

- 信貸風險
  投保本計劃或本計劃的任何保單權益須承受保險公司的信貸風險。閣下就本計劃支付的保費將成為保險公司的資產的一部份。閣下對該資產並無任何產權或擁有權，亦不享有與這些資產有關的任何權利。如追討賠償，閣下只可向保險公司追索。
- 流動性及提取風險
  本計劃屬非投資相連長期保險類別，長期保險類別保單會有一定的既定保單期限，保單期限由保單生效起至保單期滿止，該期限可以為幾年、十年以上或至被保人終身。部份具有保單價值的長期保險保單戶口(包括但不限於儲蓄壽險、終身壽險或年金等)，如閣下在保單生效早期需要退保或在保單期滿日前提早退保，閣下可收回的款額可能會大幅低於閣下已繳付的保費。投保本計劃有機會對閣下財務狀況構成流動性風險，閣下須承擔本計劃之流動性風險。
- 匯率及貨幣風險(只適用於人民幣為保單貨幣計劃或選擇以外幣為保單貨幣的情況)
  - 投保以人民幣為保單貨幣的計劃或選擇以外幣為保單貨幣須承受匯率及貨幣風險，人民幣兌港幣匯率及外幣兌港幣匯率可升可跌。
  - 如閣下選擇以港幣繳付保費，閣下必須以保險公司不時全權根據市場人民幣與港幣的兌換率(適用於保單貨幣為人民幣)或所選外幣與港幣的兌換率(適用於保單貨幣為外幣)而釐定的匯率繳付保費。因此，人民幣與港幣的兌換率、所選外幣與港幣的兌換率之變動將直接影響以港幣繳付之保費，如因匯率浮動而導致人民幣或所選外幣在保單簽發後升值，日後以港幣計算之保費將會較投保時保費為高。
  - 應付權益(包括退還保費等)將以人民幣或所選外幣支付。(以人民幣作為保單貨幣的保單，如閣下選擇以港幣收取有關權益，有關支付金額將以保險公司不時全權根據市場人民幣與港幣的兌換率而釐定的匯率計算後以與人民幣同等價值的港幣支付。以外幣作為保單貨幣的保單，如閣下選擇以港幣收取有關權益，有關支付金額將以保險公司不時全權根據市場該外幣與港幣的兌換率而釐定的匯率計算後以與該外幣同等價值的港幣支付。)任何人民幣兌港幣匯率、外幣兌港幣匯率之波動將會直接影響以港幣結算的權益，如有關權益於到期支付時以港幣計算而人民幣或所選外幣大幅貶值，閣下將失去大部分的應付權益。
  - 若因法規變動或因其他由保險公司全權決定之理由，以人民幣為保單貨幣的保單之保費或權益無法以人民幣或港幣支付；以外幣為保單貨幣的保單之保費或權益無法以所選外幣或港幣支付，保險公司可依其認為公正與適當之條件全權決定有關保單可收取保費、應付權益及退還保費之貨幣、貨幣兌換匯率及其計算。
  - 人民幣現時並非自由兌換的貨幣，透過或由香港銀行進行的人民幣兌換或提供的人民幣服務，須受制於若干有關人民幣的政策或其他限制及相應的有關監管要求。有關要求將不時更改而毋須另行通知。
- 市場及利率風險（適用於保險計劃附有保證及/或非保證回報）
  - 市場波動及利率變化不會影響客戶保單的保證回報部份（例如：保證現金價值）。非保證回報部份（例如：保單紅利）可能受市場及利率風險影響保險公司實際派發予保單的金額及保險公司的積存年利率決策可能受市場及利率風險影響，因此，閣下需承擔人壽保單非保證回報部份所牽涉的市場及利率風險。
- 通脹風險
  - 由於通脹會導致未來生活費增加，即使保險公司履行所有有關保單條款及責任，閣下現有的預期保障及/或回報可能無法滿足閣下未來的需求。

Disclosure of Important Information to Life Insurance Customers

Part 1 : Definitions and Interpretation

In the Disclosures and Declarations stated below:

- The "Bank" means Bank of Communications (Hong Kong) Limited
- "Insurance Company" means FWD Life Insurance Company (Bermuda) Limited.
- The "Plan" means the insurance plan in the product brochure.
- "Insurance Application" means the insurance application with the application number.
- "I/Applicant" means the applicant listed in the Insurance Application
- "Insured" means the insured person listed in the Insurance Application

Part 2 : Disclosure of Important Information to Applicant

2.1 Relationship between the Bank and Insurance Company

- The Bank is an appointed insurance agent of Insurance Company. The Bank is responsible for the distribution and selling of the Plan which is underwritten by Insurance Company and assists you to handle the Insurance Application procedures for the Plan.
- The Plan is underwritten by the Insurance Company. Insurance Company is authorized and regulated by Insurance Authority. The Plan is a product of the Insurance Company but not the Bank. Insurance Company is fully responsible for all features, policy approval, coverage and claims under the Plan. In respect of the benefits, rights and claims related to the policy of the Plan, the policyholder or beneficiary should enquire and recourse Insurance Company.
- In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between the Bank and the customer arising from the selling process or processing of the related transaction, the Bank is required to enter into a Financial Dispute Resolution Scheme process with the customer; however any dispute concerning the contractual terms of the product should be resolved directly between the Insurance Company and the customer.

2.2 Risk disclosures

Key risks associated with the Plan include but not limited to,

- Credit Risk
  Application of the Plan and all benefits payable under the Plan are subject to the credit risk of Insurance Company. All premiums you paid under the Plan shall become part of the assets of Insurance Company. You do not have any property rights or ownership rights to these assets, nor do you have any rights related to these assets. Your recourse is against Insurance Company only.
- Liquidity and Withdrawal Risk
  The Plan is a product under non-linked long term insurance category. Long term insurance policy will have a certain determined benefit term starting from the policy effective date until the policy maturity date. The benefit could be few years, over ten years or a lifelong period of the Insured. Some of the long term insurance policies contain policy value under the policy (including but not limited to endowment insurance, whole life insurance or annuity, etc.), if you need to surrender your policy in the early stage of the policy or before the policy maturity date, the recoverable amount 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 & Currency Risk (Applicable to the plan with policy currency denominated in RMB or to those policies with policy currency denominated in foreign currency as selected.)
  - Application of plan with policy currency denominated in RMB or the policy with policy currency denominated in foreign currency is subject to exchange rate and currency risk. Exchange rate of RMB against Hong Kong Dollar ("HKD") and exchange rate of any foreign currency against HKD may fall as well as rise.
  - If you choose to pay the premium(s) in HKD, you must pay the premium(s) based on a market-based currency exchange rate of HKD to RMB (applicable to the policy currency denominated in RMB) or a market-based currency exchange rate of HKD to the selected foreign currency (applicable to the policy currency denominated in foreign currency) which is solely determined by Insurance Company from time to time. Any fluctuations in the exchange rate of HKD to RMB, as well as in the exchange rate of HKD to the foreign currency will have a direct impact on the amount of premium paid in HKD. If the RMB or the selected foreign currency appreciates after the Policy is issued due to exchange rate fluctuation, the premium payable later will be higher than the initial premium when calculated in HKD.
  - All Benefits payable (including refund of premium etc.) will be settled in RMB or in foreign currency as selected. For the policy with policy currency denominated in RMB, if you choose to receive any benefits under the Plan in HKD, the amount payable will be the HKD equivalent of the RMB based on a market-based currency exchange rate of HKD to RMB, as solely determined by Insurance Company from time to time. For the policy with policy currency denominated in foreign currency, if you choose to receive any benefits under the Plan in HKD, the amount payable will be the HKD equivalent of the selected foreign currency based on a market-based currency exchange rate of HKD to such foreign currency, as solely determined by Insurance Company from time to time. Any fluctuations in the exchange rate of HKD to RMB, as well as in the exchange rate of HKD to the foreign currency will have a direct impact on the value of your benefit(s) as calculated in HKD and if the RMB or the selected foreign currency depreciates substantially against the HKD upon a benefit(s) becoming payable, you will lose a substantial portion of the benefit(s) in HKD terms.

2.3保費逾期繳交或未付款的情況及後果

- 有儲蓄成份的保險產品[有儲蓄但沒有投資成份](適用於非分紅保單)或有投資成份的保險產品[投資決定及風險由保險公司承擔](適用於分紅保單)
  如有任何保費逾期繳交或未付款，保單會自動貸款墊繳保費(如適用)，或被終止。在保單進行自動貸款墊繳保費期間，保險公司會自動以貸款形式從保單的現金價值撥出現金用以墊繳已到期的保費，一旦保單的貸款及其累積利息相等於或超出保單所累積之現金價值時，保單將自動終止。如保單被自動終止，保單將會變成毫無價值及保單的受保人將會失去保單的保險保障。
- 有投資成份的保險產品[投資決定及風險由保險公司承擔] (適用於萬用壽險計劃)
  如有任何保費逾期繳交或未付款，保單會進行保費假期。於保費假期期間，一切相關費用將持續於戶口價值內扣除。當戶口價值低於零時，保單將自動終止。如保單被自動終止，保單將會變成毫無價值及保單的受保人將會失去保單的保險保障。

2.4非保證權益部份的陳述 （只適用於附有非保證權益的計劃）

- 有投資成份的保險產品[投資決定及風險由保險公司承擔](適用於分紅保單)
  對於分紅型傳統保險計劃，產品刊物所說明可適用於保險計劃之非保證部份(包括但不限於累積利息、紅利及獎賞)為非保證的，列明數值只作說明之用。保險公司有絕對酌情權不時釐定此等數值，其數值是基於多種因素包括但不限於市場狀況、投資前景、保單續保率、索償經驗及保險公司之投資回報來釐定。此等數值亦非對保單於未來之表現作出的預測或保證。在保單有效期內，此等數值可以變更。因此，實際派發之非保證部份或會低於或高過所示的數值。將來實際所得權益及/或回報，可能低於或高於現時列出的收權益及/或回報。若閣下選擇提取保單的非保證部份(包括但不限於累積利息、紅利及獎賞)，保單的累積權益及/或非保證回報將會相應調低或低於列明數值。
- 有投資成份的保險產品[投資決定及風險由保險公司承擔] (適用於萬用壽險計劃)
  對於萬用壽險計劃，產品刊物所說明可適用於保險計劃之非保證部份(包括但不限於派息率及利息)為非保證的，列明數值只作說明之用。保險公司有絕對酌情權不時釐定此等數值，其數值是基於多種因素包括但不限於市場狀況、投資前景、保單續保率、索償經驗及保險公司之投資回報來釐定。此等數值亦非對保單於未來之表現作出的預測或保證。在保單有效期內，此等數值可以變更。因此，實際派發之非保證部份或會低於或高過所示的數值。將來實際所得權益及/或回報，可能低於或高於現時列出的權益及/或回報。若閣下選擇提取保單的非保證部份 (包括但不限於派發利息及獎賞)，保單的累積權益及/或非保證回報將會相應調低或低於列明數值。

2.5保險計劃的產品單張及保單條款

- 本計劃的保單條款及產品小冊子由保險公司發行。保險公司對保單條款及產品小冊子所載資料承擔一切責任。
- 本計劃的產品小冊子或其他有關本計劃的產品文件只限在香港特別行政區派發，並不能詮釋為在香港特別行政區境外提供或出售或游說購買保險公司的產品。本計劃只限在香港特別行政區境內範圍銷售及辦理投保手續。
- 本計劃的保單受香港特別行政區的法律所規管。

2.6費用及收費

- 本計劃是一項保險產品，支付的部分保費會用作支付保險和相關費用。
- 人壽保險費用成本及/或保單相關費用已包括在本計劃的所需繳付保費之內，儘管本計劃的產品刊物及/或本計劃的《保險利益說明》沒有《費用與收費表》/費用與收費部份或沒有保費以外之額外收費，這既不代表閣下無需承擔任何費用與收費，也不代表本計劃沒有任何費用與收費。如本計劃的產品刊物及/或本計劃的《保險利益說明》設有《費用與收費表》/費用與收費部份(如萬用壽險計劃)，閣下在辦理投保申請前應詳細閱讀及清楚了解每一收費項目的內容。

2.7不受存款保障計劃所保障

- 本計劃並非銀行存款或定期存款，本計劃及本計劃之所有繳付保費不受香港特別行政區存款保障計劃所保障。

- If the premium(s) and/ or benefit(s) under the Plan with policy currency denominated in RMB cannot be paid in RMB or in HKD, the policy with policy currency denominated in foreign currency cannot be paid in selected foreign currency or in HKD either due to a change in regulation(s) or for such other reasons as Insurance Company may, in its absolute discretion solely determine, Insurance Company shall, based on such terms as it deems just and proper, at its sole discretion determine the currency, the currency exchange rate and the manner of calculating the premium(s) receivable, the benefit(s) payable and the premium refundable under the Plan.
- RMB is currently not freely convertible. Conversion of RMB or provision of RMB services through banks is subject to relevant RMB policies, other restriction and applicable regulatory requirements in Hong Kong. No prior notice will be given for any changes on such requirements which may be made from time to time.

- Market and Interest Rate Risk (Applicable to the Plan with guaranteed return and/or non-guaranteed return)
  - Market fluctuation and change in interest rate will not affect the guaranteed return part (e.g. guaranteed cash value) of the policy. Non-guaranteed return part (e.g. Policy Dividends) is subject to market and interest rate risk. Actual amount of the non-guaranteed return paid by Insurance Company and the determination of the interest rate for policy dividend accumulation made by Insurance Company may be varied due to market and interest rate risk. You need to bear the market and interest rate risk associated with non-guaranteed return of the Plan.

- Inflation Risk
  - The cost of living in the future may be higher than expected due to the effect of inflation. Therefore your current planned benefits and/or returns may be insufficient to meet your future needs even if the Insurance Company has fulfilled its contractual terms and obligations.

2.3 The circumstances and consequences of late payments or non-payments of premiums

- Insurance product with savings element [with savings but without investment element] (Applicable to non-participating policy) or Insurance product with investment element (Investment decisions and risks borne by Insurance Company) (Applicable to participating policy)
  Should there is any late payment or non-payment of premiums, the policy will be subject to automatic premium loan (if applicable) or termination of the policy. During automatic premium loan, Insurance Company shall automatically advance the premium due as a loan. The policy shall automatically be terminated if at any time sums loaned and accrued interest equal or exceed the accumulated cash value under the policy. If the policy is terminated automatically, the policy will become valueless and the Insured of the policy will lose his/her insurance protection under the policy.

- Insurance product with investment element (Investment decisions and risks borne by Insurance Company) (Applicable to Universal Life Insurance Plan)
  Should there is any late payment or non-payment of premiums, the policy will exercise premium holiday. During Premium Holiday, all relevant charges will be continuously deducted from the Policy Account. When the Account Value is equal to or less than zero, the Policy shall automatically be terminated. If the policy is terminated automatically, the policy will become valueless and the Insured of the policy will lose his/her insurance protection under the policy.

2.4 The description of non-guaranteed items (Applicable to the plan with non-guaranteed benefits only)

- Insurance product with investment element (Investment decisions and risks borne by Insurance Company) (Applicable to participating policy)
  For traditional participating insurance plans, any illustrated values of non-guaranteed items that are applicable to this plan (including but not limited to accumulated interest rates, dividends and bonuses) are not guaranteed and are for illustrative purposes only. It is determined by Insurance Company from time to time at its absolute discretion based on a series of factors including but not limited to market conditions, investment outlook, policy persistency, claims experience, and Insurance Company's investment return. It is neither an estimate nor guarantee of the Policy performance in the future. The non-guaranteed items are subject to change during the term of the policy. The actual amounts of the non-guaranteed items may be lower than or higher than those illustrated. The actual amounts of benefits and/or returns may be lower than or higher than the currently illustrated benefits and/or returns. If you choose to withdraw the non-guaranteed items (including but not limited to the accumulated dividends and bonuses) of the policy, the accumulated benefit and/or non-guaranteed returns will be reduced accordingly or lower than the illustrated values.

- Insurance product with investment element (Investment decisions and risks borne by Insurance Company) (Applicable to Universal Life Insurance Plan)
  Any illustrated values of non-guaranteed items that are applicable to the plan (including but not limited to bonuses, crediting rates and interest) are not guaranteed and are for illustrative purposes only. It is determined by Insurance Company from time to time at its absolute discretion based on a series of factors including but not limited to market conditions, investment outlook, policy persistency, claims experience, and Insurance Company's investment return. It is neither an estimate nor guarantee of the Policy performance in the future. The non-guaranteed items are subject to change during the term of the policy. The actual amounts of the non-guaranteed items may be lower than or higher than those illustrated. The actual amounts of benefits and/or returns may be lower than or higher than the currently illustrated benefits and/or returns. If you choose to withdraw the non-guaranteed items (including but not limited to the accumulated dividends and bonuses) of the policy, the accumulated benefit and/or non-guaranteed returns will be reduced accordingly or lower than the illustrated values.

2.5 The information contained in the product brochure and policy provision of insurance plan

- The policy provisions and product brochure of the Plan are issued by the Insurance Company. Insurance Company accepts full responsibility for the information contained in the policy provisions and product brochure.

- The product brochure and any product materials of the Plan are intended to be distributed in the Hong Kong Special Administrative Region (HKSAR) only and shall not be construed as an offer to sell or solicitation to buy or provision of any insurance products of Insurance Company outside HKSAR. All selling and application procedures of the Plan must be conducted and completed in the HKSAR.

- The law governing the policy of the Plan is the laws of Hong Kong Special Administrative Region.

2.8 核保及理賠決定由保險公司作出

- 所有核保審核及理賠決定均取決於保險公司，保險公司將根據閣下所提供的資料而決定接受或拒絕投保申請，如屬拒絕申請個案，保險公司將退回全數已繳交之保費及保險徵費(如有)(利息除外)。

2.9 保單貸款

- 如人壽保單具備現金價值，保單權益人可向保險公司申請保單貸款。所有保單貸款均附帶利息，利息按保險公司不時採用的利率計算。保單貸款及累計應付利息成為保單負債的一部份。當保單之總保單負債金額相等或超過現金價值時，保單將會被終止，受保人的人壽保障將會被終止及保單會變成毫無價值。

2.10 佣金披露

- 保險公司會向銀行就銷售此計劃提供佣金及業績獎金，而銀行目前所採用之銷售員工花紅或獎勵金制度，已包含員工多方面之表現，並非只著重銷售金額。銷售員工所獲的花紅、獎勵金或酬金並非單獨或直接按銷售員工的銷售表現或對銀行的營利貢獻度直接計算。

2.11 稅務申報及金融罪行

- 就閣下及閣下的保單，保險公司對香港及外地之法律或監管機構及政府或稅務機關負有某些責任，而保險公司可不時就該等責任要求您提供相關資料。此外，閣下應就您的稅務責任尋求獨立專業意見。

第3部份：冷靜期權利的披露

3.1「冷靜期」之權利

- 閣下有權在冷靜期內以書面通知保險公司取消保單，並取回已繳保費及保險徵費(如有)，惟閣下必須未曾於保單獲得任何賠償。有關書面通知必須由閣下簽署，並確保由保單或《保單發出通知書》(通知閣下保單已經可以領取及冷靜期屆滿日)交付閣下或閣下的指定代表後起計21個曆日內(以較先者為準)，呈交至香港中環德輔道中308號富衛金融中心8樓。

3.2「冷靜期」之權利 (只適用於整付保費壽險計劃)

- 閣下有權在冷靜期內以書面通知保險公司取消保單，並取回已繳保費及保險徵費(如有)(須扣除市值調整*)，惟閣下必須未曾於保單獲得任何賠償。有關書面通知必須由閣下簽署，並確保由保單或《保單發出通知書》(通知閣下保單已經可以領取及冷靜期屆滿日)交付閣下或閣下的指定代表後起計21個曆日內(以較先者為準)，呈交至香港中環德輔道中308號富衛金融中心8樓。

*可作出市值調整的權利及其計算基準將於產品小冊子中予以披露。

2.6 Fees and Charges

- The Plan is an insurance product. Part of the premiums will pay for the insurance and related costs.
- The costs of insurance and the related costs of the policy are included in the premium paid under the Plan despite the product brochure and/or the illustration documents of the Plan have no schedule/section of fees and charges or no additional charge apart from the premium. This does not mean that you do not have to bear any fees and charges, nor does it mean that the Plan does not have any fees and charges. If the product brochure contains the schedule/section of fees and charges(such as universal life insurance plan), you should read it thoughtfully to ensure you understand each fee & charge item before making the Insurance Application.

2.7 No coverage under Deposit Protection Scheme

- The Plan is not the savings deposit or time deposit of the Bank. The Plan and all premiums paid under the Plan are not protected under the Deposit Protection Scheme in Hong Kong Special Administrative Region.

2.8 Underwriting and claims decision are made by Insurance Company

- Insurance Company shall make final decisions on all the underwriting and claims. Insurance Company will base on the information provided by you to decide whether to accept or decline your application, in the event of a refusal of your application, Insurance Company will refund all the premiums and insurance levies (if any) that have been paid (without interest).

2.9 Policy Loan

- If the life insurance policy contains cash value, policyholder can apply for policy loan from Insurance Company. Interest charge will be imposed under the policy loans. The applicable interest rate is determined by Insurance Company and it is subject to change from time to time. Policy loan together with its accumulated interest will form parts of policy indebtedness. When the amount of policy indebtedness is equal to or larger than total cash value of the policy, the policy will be terminated automatically. The policy will become valueless and the Insured of the policy will lose his/her insurance protection.

2.10 Commission Disclosure

- Insurance Company will provide commission and sales bonus to the Bank subject to the sales of the Plan. The bonuses, incentives or remuneration packages which are provided by the Bank to their licensed insurance intermediaries have considered the staff's overall performance including various areas, not only determined by their sales performance or contribution on revenue to the Bank.

2.11 Tax reporting and financial crime

- Insurance Company has certain obligations to Hong Kong and foreign legal or regulatory bodies and government or tax authorities regarding you and your policy and the Insurance Company may from time to time request information from you in response to these obligations. You are recommended to seek your own independent professional advice regarding your tax liabilities.

Part 3 : Disclosure of Cooling-off Rights

3.1 "Cooling-off Rights"

- You have the right to cancel the policy by written notice within the cooling-off period and obtain a refund of any premiums and premium levy (if any) paid provided that no claim has been made under it. You must submit a written notice signed by you to the Insurance Company at 8/F., FWD Financial Centre, 308 Des Voeux Road Central, Hong Kong within 21 calendar days after the delivery of the policy or Notice of Policy Issuance (notification about the availability of the policy and the expiry date of cooling-off period) to you or your representative, whichever is earlier.

3.2 "Cooling-off Rights" (applicable to single premium insurance plan only)

- You have the right to cancel the policy by written notice within the cooling-off period and obtain a refund of any premiums and premium levy (if any) paid (less any market value adjustment*) provided that no claim has been made under it. You must submit a written notice signed by you to the Insurance Company at 8/F., FWD Financial Centre, 308 Des Voeux Road Central, Hong Kong within 21 calendar days after the delivery of the policy or Notice of Policy Issuance (notification about the availability of the policy and the expiry date of cooling-off period) to you or your representative, whichever is earlier.

* The right to apply an market value adjustment and its basis of calculation will be disclosed in the product brochure.

PMH055BOC2204

敢 至係人生
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FWD insurance

衛一醫療總匯 TheOne Medical Solution

(2022年9月1日起生效 Effective from 1 September, 2022)

基本計劃(港元)年繳保費表(中國內地人士除外)

Basic Plan (HK$) Annual Premium Table (Excluding Mainland Chinese)

每年自付費 Annual Deductible	0			40,000			80,000		
下次生日年齡 Age at next birthday	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan
1-4	10,275	12,563	22,090	4,361	5,238	10,086	3,456	4,208	7,914
5-15	9,786	11,965	21,039	4,154	4,989	9,605	3,292	4,007	7,538
16	9,809	12,112	21,261	4,164	5,056	9,707	3,300	4,079	7,617
17	9,832	12,259	21,481	4,174	5,123	9,807	3,307	4,150	7,697
18	9,854	12,407	21,703	4,184	5,191	9,909	3,315	4,222	7,776
19	9,856	12,839	22,369	4,185	5,392	10,213	3,315	4,383	8,015
20	9,857	13,269	23,033	4,196	5,604	10,551	3,325	4,549	8,292
21	9,858	13,390	23,458	4,207	5,687	10,781	3,336	4,611	8,486
22	9,859	13,507	23,510	4,218	5,770	10,841	3,346	4,672	8,544
23	9,861	13,872	23,562	4,228	5,960	10,901	3,356	4,819	8,603
24	9,862	14,225	23,613	4,239	6,146	10,959	3,367	4,946	8,663
25	9,863	14,363	23,666	4,250	6,232	11,020	3,377	4,993	8,724
26	10,401	14,839	23,932	4,493	6,451	11,124	3,572	5,166	8,807
27	10,940	15,315	24,199	4,738	6,669	11,227	3,768	5,340	8,888
28	11,472	15,789	24,464	4,980	6,888	11,329	3,963	5,513	8,971
29	12,003	16,265	25,030	5,223	7,109	11,569	4,158	5,688	9,163
30	12,320	16,740	25,765	5,373	7,329	11,888	4,279	5,864	9,416
31	12,687	17,092	26,134	5,548	7,496	12,033	4,420	5,996	9,534
32	12,867	17,445	26,502	5,639	7,665	12,180	4,494	6,129	9,653
33	13,146	17,797	27,238	5,775	7,835	12,495	4,606	6,263	9,903
34	13,491	18,150	27,974	5,941	8,004	12,808	4,741	6,396	10,153
35	13,698	18,503	28,710	6,047	8,174	13,120	4,827	6,530	10,401
36	14,195	19,141	29,447	6,282	8,472	13,458	5,016	6,766	10,670
37	14,454	19,380	29,814	6,411	8,593	13,627	5,122	6,861	10,804
38	14,625	19,619	29,991	6,502	8,714	13,709	5,197	6,956	10,869
39	14,845	19,859	30,332	6,615	8,836	13,867	5,290	7,051	10,994
40	14,946	19,923	30,921	6,676	8,880	14,138	5,340	7,085	11,207
41	15,416	19,989	32,367	6,902	8,925	14,800	5,524	7,120	11,732
42	15,752	20,460	33,814	7,070	9,151	15,463	5,660	7,298	12,257
43	16,088	21,204	35,259	7,238	9,502	16,125	5,796	7,575	12,782
44	16,751	22,022	36,705	7,554	9,886	16,788	6,053	7,879	13,308
45	17,767	23,046	38,152	8,031	10,363	17,591	6,437	8,257	13,925
46	18,878	24,458	39,856	8,528	10,979	18,378	6,836	8,749	14,536
47	20,001	25,633	41,555	9,030	11,487	19,161	7,239	9,155	15,146
48	20,792	26,574	43,244	9,383	11,890	19,940	7,523	9,476	15,749
49	21,594	27,514	44,929	9,740	12,290	20,717	7,808	9,796	16,350
50	22,574	28,455	46,602	10,177	12,689	21,488	8,159	10,115	16,947
51	23,390	29,396	48,938	10,539	13,086	22,565	8,450	10,433	17,783
52	24,215	30,609	51,262	10,906	13,603	23,636	8,743	10,846	18,614
53	25,396	32,505	53,578	11,432	14,421	24,705	9,164	11,500	19,440
54	26,414	34,521	55,881	11,883	15,290	25,766	9,528	12,194	20,261
55	27,794	36,659	58,176	12,499	16,209	26,825	10,020	12,929	21,077
56	29,360	38,934	62,141	13,170	17,198	28,625	10,552	13,718	22,488
57	31,315	41,344	66,119	14,011	18,248	30,426	11,219	14,553	23,902
58	33,307	43,909	70,114	14,864	19,364	32,232	11,895	15,441	25,318
59	35,117	46,630	74,125	15,631	20,545	34,043	12,503	16,383	26,735
60	37,196	50,415	78,542	16,514	22,193	36,036	13,202	17,696	28,298
61	39,524	53,847	84,206	17,503	23,682	38,596	13,984	18,881	30,304
62	42,274	57,806	89,880	18,673	25,402	41,156	14,910	20,251	32,310
63	45,459	63,085	95,565	20,027	27,697	43,715	15,981	22,079	34,315
64	49,153	69,948	101,266	21,598	30,684	46,276	17,225	24,457	36,321
65	53,201	77,867	108,450	23,317	34,127	49,511	18,585	27,200	38,854
66	56,544	83,486	117,248	24,780	36,590	53,527	19,752	29,163	42,006
67	61,084	90,409	123,983	26,771	39,623	56,602	21,338	31,580	44,419
68	63,775	93,944	130,644	27,950	41,173	59,643	22,277	32,816	46,805
69	66,781	97,135	138,012	29,268	42,571	63,007	23,328	33,930	49,445
70	69,893	100,302	144,791	30,632	43,959	66,101	24,415	35,036	51,874
71^	73,596	103,205	147,087	32,254	45,231	67,149	25,708	36,050	52,696
72^	77,407	111,652	153,206	33,925	48,934	69,942	27,040	39,001	54,888
73^	81,090	115,611	158,944	35,539	50,668	72,562	28,325	40,384	56,944
74^	84,839	119,571	165,525	37,183	52,404	75,566	29,636	41,767	59,302
75^	88,624	121,682	172,931	38,841	53,329	78,948	30,958	42,506	61,955
76^	92,949	124,057	177,623	40,736	54,369	81,090	32,469	43,335	63,636
77^	97,404	131,976	186,397	42,688	57,841	85,096	34,023	46,100	66,780
78^	101,731	140,950	196,201	44,585	61,773	89,571	35,535	49,236	70,292
79^	106,159	145,174	207,433	46,526	63,624	94,698	37,083	50,710	74,315
80^	110,507	149,661	214,842	48,432	65,591	98,081	38,602	52,277	76,970
81^	115,297	152,036	222,639	50,531	66,631	101,640	40,273	53,108	79,764
82^	120,379	159,427	233,111	52,758	69,871	106,421	42,049	55,690	83,516
83^	124,908	162,330	242,521	54,742	71,143	110,717	43,631	56,703	86,886
84^	129,771	165,234	247,618	56,875	72,417	113,043	45,330	57,718	88,712
85^	133,781	171,041	252,765	58,631	74,961	115,393	46,731	59,747	90,556
86^	138,393	171,041	258,654	60,653	74,961	118,082	48,341	59,747	92,667
87^	141,824	172,231	263,161	62,156	75,483	120,139	49,540	60,162	94,281
88^	145,290	176,359	267,915	63,676	77,292	122,310	50,752	61,603	95,984
89^	148,585	178,492	272,713	65,119	78,227	124,500	51,902	62,348	97,702
90^	151,537	182,615	277,552	66,413	80,034	126,709	52,933	63,789	99,437
91^	153,972	185,682	282,434	67,481	81,378	128,938	53,784	64,860	101,186
92^	156,406	188,849	287,142	68,547	82,766	131,087	54,634	65,966	102,872
93^	158,841	192,372	292,107	69,614	84,310	133,354	55,485	67,197	104,652
94^	161,274	196,063	297,116	70,681	85,927	135,641	56,334	68,486	106,446
95^	163,709	200,149	302,165	71,747	87,719	137,945	57,185	69,914	108,255
96^	166,143	204,605	307,259	72,815	89,670	140,271	58,036	71,470	110,080
97^	168,578	209,128	312,168	73,882	91,653	142,513	58,886	73,050	111,838
98^	170,809	214,987	317,344	74,859	94,220	144,875	59,665	75,096	113,693
99^	173,243	217,935	322,562	75,927	95,513	147,258	60,515	76,126	115,561

^ 續保保費以供參考　^ Renewal premium for reference

重要事項：1) 本保費表只供參考，並不能作為富衛人壽保險(百慕達)有限公司(「富衛」)與任何人士或團體所訂立之任何合約或該合約的任何部分。有關「衛一醫療總匯」及「衛一醫療總匯附約」(統稱：「本計劃」)之詳情，請參閱產品冊子及保單條款。 2) 保證終身續保受限於富衛是否持續提供本計劃、每年續保時將根據當時的條款及細則包括但不受限於保單終止條文、保單利益和保費率。續保保費並非保證及每次續保之保費將根據續保時的年齡(下次生日)及當時的保費表釐定。保費表根據各因素，包括但不受限於相關的醫療費用的通脹及富衛不時的索賠數據及保單續保情況釐定。富衛保留隨時作出修改保單利益、條款及細則及保費的權利。 3) 實際年繳保費或會因核保結果，包括但不限於國籍及職業核保，而與本保費表所列的年繳保費有所不同。 4) 保費付款形式倍數：半年繳保費 = 年繳保費 x 0.52，月繳保費 = 年繳保費 x 0.09。 5) 衛一醫療總匯附約年繳保費 = 衛一醫療總匯之年繳保費減免184港元(港元保單)或24美元(美元保單)。衛一醫療總匯附約非年繳保費 = 衛一醫療總匯之年繳保費減免184港元(港元保單)或24美元(美元保單)後，再乘以上述保費付款形式倍數。

Important Notes : 1) This premium table is for reference only and not regarded as a contract or any part thereof between FWD Life Insurance Company (Bermuda) Limited ("FWD") and any other parties. Please refer to the product brochure and policy provisions for the details of TheOne Medical Solution and TheOne Medical Solution Rider (collectively called: the "Plan"). 2) Lifetime guaranteed renewal is subject to the continual availability of the Plan offered by FWD, terms and conditions applicable including but not limited to Termination Provisions, benefits, and premium rates at the time of renewal. Renewal premiums are not guaranteed and the premiums for each renewal are determined based on the age (at next birthday) and the premium table applicable at that time when the policy is renewed. Premium table is subject to change based on factors including but not limited to the inflation of related medical expense, FWD's medical claim experience and persistency of policies from time to time. FWD reserves the right to revise the benefits payable, terms and conditions and premiums at any time. 3) The actual annual premium may be varied from the annual premium stated in this premium table according to the result of underwriting, including but not limited to nationality and occupational underwriting. 4) Premium payment modal factor: Half Yearly Premium = Annual Premium x 0.52, Monthly Premium = Annual Premium x 0.09. 5) TheOne Medical Solution Rider annual premium = subtracting HK$184 (for Hong Kong Dollar policy) or US$24 (for United States Dollar policy) from TheOne Medical Solution annual premium. TheOne Medical Solution Rider non annual premium = subtracting HK$184 (for Hong Kong Dollar policy) or US$24 (for United States Dollar policy) from TheOne Medical Solution annual premium and then multiplying by the above premium payment modal factor.

衛一醫療總匯 TheOne Medical Solution

(2022年9月1日起生效 Effective from 1 September, 2022)

基本計劃(美元)年繳保費表(中國內地人士除外)

Basic Plan (US$) Annual Premium Table (Excluding Mainland Chinese)

每年自付費 Annual Deductible	0			5,000			10,000		
下次生日年齡 Age at next birthday	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan
1-4	1,318	1,612	2,834	561	672	1,294	444	540	1,016
5-15	1,255	1,536	2,698	534	640	1,232	424	514	968
16	1,260	1,554	2,727	536	649	1,246	425	525	978
17	1,262	1,574	2,756	537	658	1,259	425	533	988
18	1,265	1,592	2,785	538	667	1,272	426	543	999
19	1,265	1,648	2,869	538	692	1,311	426	563	1,028
20	1,265	1,702	2,955	539	720	1,354	428	585	1,064
21	1,265	1,719	3,009	541	731	1,383	429	593	1,089
22	1,265	1,732	3,016	542	741	1,392	430	600	1,096
23	1,265	1,780	3,023	543	765	1,399	431	620	1,104
24	1,265	1,826	3,030	544	789	1,406	432	636	1,112
25	1,267	1,843	3,035	546	801	1,415	435	641	1,119
26	1,336	1,904	3,070	578	828	1,427	460	664	1,130
27	1,405	1,965	3,104	608	856	1,441	485	685	1,141
28	1,471	2,026	3,138	639	885	1,454	509	708	1,152
29	1,540	2,087	3,210	671	913	1,485	534	731	1,177
30	1,581	2,148	3,304	690	941	1,526	551	752	1,209
31	1,628	2,192	3,352	712	962	1,544	568	770	1,224
32	1,652	2,238	3,399	724	984	1,563	577	787	1,240
33	1,686	2,283	3,493	742	1,005	1,603	592	805	1,270
34	1,731	2,328	3,587	763	1,027	1,644	609	821	1,303
35	1,758	2,374	3,683	777	1,049	1,684	621	838	1,334
36	1,822	2,456	3,777	807	1,087	1,727	644	869	1,369
37	1,854	2,486	3,824	824	1,103	1,749	659	881	1,387
38	1,876	2,517	3,847	835	1,119	1,759	667	894	1,395
39	1,905	2,548	3,891	850	1,134	1,779	679	905	1,412
40	1,918	2,556	3,966	857	1,140	1,814	685	909	1,438
41	1,977	2,565	4,151	887	1,145	1,899	709	914	1,505
42	2,021	2,625	4,336	909	1,175	1,983	727	937	1,572
43	2,064	2,720	4,522	930	1,220	2,068	745	972	1,640
44	2,149	2,825	4,707	970	1,269	2,154	777	1,011	1,707
45	2,280	2,956	4,893	1,031	1,330	2,257	827	1,059	1,787
46	2,422	3,137	5,111	1,095	1,409	2,357	878	1,123	1,866
47	2,566	3,288	5,328	1,159	1,474	2,459	930	1,176	1,943
48	2,667	3,409	5,546	1,205	1,526	2,557	966	1,217	2,020
49	2,770	3,530	5,762	1,250	1,577	2,657	1,003	1,258	2,098
50	2,895	3,651	5,976	1,307	1,628	2,756	1,048	1,297	2,174
51	3,001	3,770	6,275	1,353	1,679	2,894	1,085	1,338	2,281
52	3,105	3,925	6,574	1,400	1,746	3,032	1,122	1,392	2,388
53	3,257	4,169	6,871	1,467	1,850	3,168	1,177	1,476	2,494
54	3,388	4,428	7,166	1,525	1,961	3,305	1,223	1,565	2,599
55	3,564	4,702	7,459	1,604	2,079	3,440	1,286	1,659	2,703
56	3,766	4,993	7,968	1,690	2,205	3,671	1,354	1,761	2,884
57	4,016	5,302	8,477	1,798	2,341	3,902	1,439	1,868	3,066
58	4,272	5,631	8,991	1,907	2,484	4,134	1,526	1,981	3,248
59	4,504	5,979	9,504	2,005	2,635	4,365	1,605	2,102	3,429
60	4,771	6,465	10,070	2,119	2,847	4,622	1,694	2,270	3,629

衛一醫療總匯 TheOne Medical Solution

(2022年9月1日起生效 Effective from 1 September, 2022)

基本計劃(美元)年繳保費表(中國內地人士除外)

Basic Plan (US$) Annual Premium Table (Excluding Mainland Chinese)

每年自付費 Annual Deductible	0			5,000			10,000		
下次生日年齡 Age at next birthday	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan
61	5,069	6,905	10,798	2,245	3,037	4,950	1,794	2,422	3,887
62	5,422	7,412	11,525	2,396	3,258	5,278	1,913	2,598	4,143
63	5,830	8,088	12,254	2,569	3,553	5,606	2,050	2,832	4,401
64	6,302	8,969	12,984	2,770	3,935	5,935	2,210	3,137	4,658
65	6,822	9,985	13,905	2,991	4,377	6,349	2,384	3,489	4,983
66	7,251	10,705	15,033	3,179	4,692	6,864	2,534	3,739	5,386
67	7,833	11,591	15,897	3,433	5,081	7,258	2,737	4,050	5,696
68	8,178	12,046	16,750	3,585	5,280	7,648	2,858	4,208	6,002
69	8,563	12,455	17,696	3,754	5,459	8,079	2,993	4,352	6,341
70	8,962	12,861	18,564	3,929	5,637	8,476	3,132	4,493	6,652
71^	9,436	13,232	18,858	4,136	5,800	8,610	3,298	4,623	6,757
72^	9,925	14,316	19,644	4,351	6,275	8,969	3,469	5,002	7,038
73^	10,398	14,823	20,378	4,557	6,497	9,303	3,632	5,179	7,302
74^	10,878	15,331	21,223	4,769	6,719	9,690	3,800	5,356	7,604
75^	11,364	15,601	22,172	4,981	6,839	10,124	3,970	5,450	7,945
76^	11,918	15,906	22,773	5,223	6,972	10,398	4,164	5,556	8,160
77^	12,489	16,922	23,899	5,474	7,417	10,911	4,364	5,912	8,563
78^	13,045	18,073	25,156	5,718	7,922	11,484	4,557	6,313	9,013
79^	13,612	18,613	26,595	5,967	8,158	12,142	4,755	6,503	9,529
80^	14,168	19,188	27,545	6,210	8,411	12,576	4,950	6,704	9,870
81^	14,784	19,494	28,545	6,479	8,544	13,032	5,165	6,810	10,227
82^	15,436	20,441	29,888	6,765	8,959	13,645	5,393	7,141	10,709
83^	16,015	20,813	31,094	7,020	9,122	14,195	5,595	7,271	11,140
84^	16,639	21,186	31,747	7,293	9,286	14,495	5,813	7,401	11,375
85^	17,153	21,929	32,406	7,517	9,611	14,795	5,992	7,662	11,611
86^	17,744	21,929	33,163	7,777	9,611	15,140	6,199	7,662	11,882
87^	18,183	22,083	33,740	7,970	9,678	15,404	6,353	7,714	12,089
88^	18,628	22,612	34,350	8,165	9,910	15,682	6,508	7,900	12,307
89^	19,050	22,885	34,964	8,350	10,030	15,963	6,655	7,994	12,527
90^	19,430	23,413	35,585	8,516	10,262	16,246	6,787	8,180	12,750
91^	19,741	23,807	36,212	8,652	10,434	16,532	6,896	8,317	12,973
92^	20,054	24,213	36,814	8,789	10,613	16,808	7,006	8,458	13,190
93^	20,366	24,665	37,451	8,925	10,810	17,099	7,115	8,616	13,418
94^	20,679	25,137	38,093	9,063	11,018	17,391	7,223	8,781	13,648
95^	20,990	25,662	38,742	9,201	11,248	17,688	7,332	8,965	13,880
96^	21,301	26,233	39,394	9,337	11,498	17,985	7,441	9,164	14,115
97^	21,614	26,813	40,023	9,474	11,751	18,273	7,551	9,366	14,339
98^	21,900	27,564	40,686	9,599	12,081	18,575	7,650	9,630	14,577
99^	22,212	27,941	41,356	9,736	12,247	18,881	7,759	9,762	14,816

^ 續保保費以供參考　^ Renewal premium for reference

重要事項：1) 本保費表只供參考，並不能作為富衛人壽保險(百慕達)有限公司(「富衛」)與任何人士或團體所訂立之任何合約或該合約的任何部分。有關「衛一醫療總匯」及「衛一醫療總匯附約」(統稱：「本計劃」)之詳情，請參閱產品冊子及保單條款。 2) 保證終身續保受限於富衛是否持續提供本計劃、每年續保時將根據當時的條款及細則包括但不受限於保單終止條文、保單利益和保費率。續保保費並非保證及每次續保之保費將根據續保時的年齡(下次生日)及當時的保費表釐定。保費表根據各因素，包括但不受限於相關的醫療費用的通脹及富衛不時的索賠數據及保單續保情況釐定。富衛保留隨時作出修改保單利益、條款及細則及保費的權利。 3) 實際年繳保費或會因核保結果， 包括但不限於國籍及職業核保， 而與本保費表所列的年繳保費有所不同。 4) 保費付款形式倍數：半年繳保費 = 年繳保費 x 0.52，月繳保費 = 年繳保費 x 0.09。 5) 衛一醫療總匯附約年繳保費 = 衛一醫療總匯之年繳保費減免184港元(港元保單)或24美元(美元保單)。衛一醫療總匯附約非年繳保費 = 衛一醫療總匯之年繳保費減免184港元(港元保單)或24美元(美元保單)後，再乘以上述保費付款形式倍數。

Important Notes : 1) This premium table is for reference only and not regarded as a contract or any part thereof between FWD Life Insurance Company (Bermuda) Limited ("FWD") and any other parties. Please refer to the product brochure and policy provisions for the details of TheOne Medical Solution and TheOne Medical Solution Rider (collectively called: the "Plan"). 2) Lifetime guaranteed renewal is subject to the continual availability of the Plan offered by FWD, terms and conditions applicable including but not limited to Termination Provisions, benefits, and premium rates at the time of renewal. Renewal premiums are not guaranteed and the premiums for each renewal are determined based on the age (at next birthday) and the premium table applicable at that time when the policy is renewed. Premium table is subject to change based on factors including but not limited to the inflation of related medical expense, FWD's medical claim experience and persistency of policies from time to time. FWD reserves the right to revise the benefits payable, terms and conditions and premiums at any time. 3) The actual annual premium may be varied from the annual premium stated in this premium table according to the result of underwriting, including but not limited to nationality and occupational underwriting. 4) Premium payment modal factor: Half Yearly Premium = Annual Premium x 0.52, Monthly Premium = Annual Premium x 0.09. 5) TheOne Medical Solution Rider annual premium = subtracting HK$184 (for Hong Kong Dollar policy) or US$24 (for United States Dollar policy) from TheOne Medical Solution annual premium. TheOne Medical Solution Rider non annual premium = subtracting HK$184 (for Hong Kong Dollar policy) or US$24 (for United States Dollar policy) from TheOne Medical Solution annual premium and then multiplying by the above premium payment modal factor.

衛一醫療總匯 TheOne Medical Solution

(2022年9月1日起生效 Effective from 1 September, 2022)

基本計劃(港元)年繳保費表(適用於中國內地人士)

Basic Plan (HK$) Annual Premium Table (Applicable to Mainland Chinese)

每年自付費 Annual Deductible	0			40,000			80,000		
下次生日年齡 Age at next birthday	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan
1-4	11,302	13,820	24,300	4,798	5,762	11,095	3,802	4,628	8,706
5-15	10,764	13,161	23,143	4,570	5,488	10,567	3,622	4,408	8,292
16	10,790	13,323	23,387	4,581	5,562	10,678	3,629	4,488	8,380
17	10,815	13,487	23,630	4,592	5,636	10,789	3,638	4,566	8,467
18	10,839	13,649	23,874	4,603	5,709	10,901	3,647	4,645	8,554
19	10,842	14,124	24,606	4,604	5,931	11,234	3,647	4,822	8,816
20	10,843	14,596	25,337	4,616	6,165	11,606	3,659	5,004	9,121
21	10,844	14,729	25,804	4,628	6,256	11,859	3,669	5,072	9,334
22	10,846	14,858	25,861	4,640	6,348	11,925	3,682	5,139	9,399
23	10,847	15,259	25,919	4,651	6,557	11,990	3,692	5,302	9,464
24	10,848	15,647	25,976	4,664	6,761	12,056	3,704	5,441	9,529
25	10,850	15,800	26,033	4,675	6,856	12,123	3,715	5,492	9,596
26	11,442	16,322	26,326	4,944	7,095	12,236	3,929	5,683	9,688
27	12,035	16,847	26,620	5,213	7,336	12,351	4,145	5,875	9,777
28	12,619	17,369	26,912	5,478	7,577	12,463	4,359	6,065	9,869
29	13,204	17,891	27,534	5,746	7,820	12,728	4,574	6,258	10,080
30	13,553	18,414	28,342	5,912	8,062	13,076	4,708	6,451	10,357
31	13,956	18,802	28,748	6,103	8,246	13,238	4,862	6,596	10,488
32	14,155	19,189	29,153	6,204	8,433	13,398	4,944	6,742	10,618
33	14,461	19,577	29,963	6,354	8,618	13,746	5,067	6,889	10,894
34	14,841	19,964	30,772	6,536	8,805	14,089	5,215	7,036	11,169
35	15,068	20,353	31,582	6,652	8,992	14,433	5,310	7,184	11,442
36	15,615	21,056	32,393	6,911	9,319	14,804	5,518	7,443	11,737
37	15,899	21,318	32,795	7,052	9,453	14,990	5,635	7,547	11,885
38	16,089	21,581	32,992	7,153	9,586	15,081	5,717	7,652	11,956
39	16,330	21,845	33,365	7,277	9,720	15,254	5,818	7,756	12,094
40	16,441	21,916	34,013	7,345	9,769	15,552	5,875	7,793	12,328
41	16,958	21,988	35,604	7,593	9,819	16,281	6,076	7,833	12,905
42	17,328	22,506	37,196	7,778	10,067	17,009	6,227	8,028	13,484
43	17,697	23,325	38,785	7,963	10,452	17,738	6,376	8,333	14,060
44	18,427	24,225	40,376	8,310	10,875	18,467	6,658	8,667	14,639
45	19,545	25,351	41,967	8,834	11,399	19,351	7,082	9,083	15,319
46	20,766	26,904	43,842	9,381	12,078	20,215	7,519	9,624	15,990
47	22,001	28,196	45,711	9,933	12,637	21,077	7,964	10,071	16,661
48	22,873	29,231	47,569	10,322	13,079	21,934	8,276	10,424	17,324
49	23,754	30,266	49,422	10,715	13,519	22,789	8,590	10,776	17,985
50	24,832	31,301	51,263	11,195	13,957	23,636	8,975	11,128	18,641
51	25,729	32,335	53,831	11,594	14,394	24,821	9,295	11,477	19,562
52	26,637	33,670	56,388	11,998	14,964	26,001	9,618	11,931	20,475
53	27,936	35,756	58,936	12,575	15,864	27,176	10,082	12,651	21,384
54	29,056	37,973	61,470	13,072	16,818	28,343	10,481	13,414	22,288
55	30,573	40,325	63,993	13,749	17,831	29,508	11,023	14,223	23,185
56	32,297	42,828	68,355	14,486	18,918	31,487	11,608	15,090	24,738
57	34,448	45,480	72,731	15,411	20,074	33,469	12,342	16,010	26,292
58	36,638	48,299	77,125	16,351	21,300	35,456	13,085	16,986	27,850
59	38,629	51,293	81,538	17,194	22,600	37,448	13,753	18,021	29,409
60	40,916	55,458	86,397	18,165	24,413	39,640	14,522	19,465	31,128
61	43,477	59,232	92,627	19,254	26,051	42,456	15,383	20,770	33,335
62	46,502	63,587	98,868	20,541	27,943	45,272	16,401	22,276	35,542
63	50,005	69,394	105,122	22,031	30,467	48,086	17,580	24,287	37,747
64	54,068	76,942	111,393	23,758	33,752	50,904	18,947	26,903	39,954
65	58,522	85,654	119,296	25,649	37,540	54,462	20,444	29,920	42,739
66	62,198	91,835	128,973	27,260	40,249	58,880	21,727	32,080	46,207
67	67,193	99,450	136,382	29,449	43,586	62,262	23,472	34,738	48,862
68	70,153	103,338	143,709	30,747	45,290	65,608	24,505	36,098	51,486
69	73,459	106,849	151,814	32,196	46,828	69,308	25,661	37,324	54,390
70	76,883	110,333	159,270	33,696	48,355	72,712	26,857	38,540	57,062
71^	80,956	113,525	161,795	35,481	49,755	73,864	28,279	39,657	57,966
72^	85,148	122,817	168,527	37,317	53,828	76,937	29,745	42,902	60,378
73^	89,200	127,172	174,838	39,093	55,736	79,818	31,158	44,422	62,639
74^	93,324	131,528	182,078	40,901	57,645	83,123	32,600	45,945	65,232
75^	97,487	133,851	190,224	42,725	58,662	86,843	34,054	46,756	68,150
76^	102,245	136,463	195,385	44,810	59,807	89,199	35,717	47,668	70,000
77^	107,145	145,174	205,037	46,958	63,625	93,606	37,427	50,710	73,458
78^	111,904	155,046	215,821	49,044	67,950	98,528	39,090	54,159	77,322
79^	116,776	159,692	228,177	51,179	69,986	104,169	40,791	55,781	81,747
80^	121,559	164,628	236,327	53,275	72,151	107,889	42,463	57,505	84,668
81^	126,827	167,239	244,903	55,584	73,295	111,804	44,302	58,419	87,741
82^	132,418	175,370	256,423	58,034	76,858	117,063	46,255	61,260	91,868
83^	137,399	178,563	266,773	60,217	78,258	121,789	47,994	62,373	95,575
84^	142,748	181,758	272,380	62,563	79,659	124,349	49,864	63,490	97,584
85^	147,160	188,145	278,042	64,495	82,458	126,933	51,404	65,722	99,613
86^	152,232	188,145	284,520	66,719	82,458	129,891	53,176	65,722	101,933
87^	156,007	189,455	289,477	68,372	83,031	132,153	54,495	66,178	103,709
88^	159,819	193,995	294,708	70,044	85,021	134,541	55,826	67,763	105,583
89^	163,444	196,342	299,984	71,631	86,050	136,950	57,092	68,583	107,473
90^	166,692	200,877	305,308	73,055	88,038	139,381	58,226	70,168	109,380
91^	169,370	204,251	310,678	74,229	89,516	141,832	59,163	71,347	111,304
92^	172,047	207,734	315,856	75,402	91,042	144,196	60,098	72,563	113,159
93^	174,725	211,611	321,319	76,576	92,742	146,690	61,033	73,917	115,117
94^	177,402	215,669	326,828	77,749	94,520	149,204	61,967	75,335	117,091
95^	180,080	220,165	332,383	78,923	96,490	151,740	62,905	76,905	119,081
96^	182,758	225,066	337,985	80,097	98,639	154,298	63,840	78,617	121,088
97^	185,436	230,041	343,385	81,270	100,819	156,764	64,774	80,355	123,022
98^	187,891	236,486	349,078	82,346	103,643	159,363	65,632	82,605	125,062
99^	190,568	239,728	354,819	83,520	105,065	161,984	66,567	83,738	127,118

^ 續保保費以供參考　^ Renewal premium for reference

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衛一醫療總匯 TheOne Medical Solution

(2022年9月1日起生效 Effective from 1 September, 2022)

基本計劃(美元)年繳保費表(適用於中國內地人士)

Basic Plan (US$) Annual Premium Table (Applicable to Mainland Chinese)

每年自付費 Annual Deductible	0			5,000			10,000		
下次生日年齡 Age at next birthday	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan	標準計劃 Standard Plan	特等計劃 Superior Plan	優等計劃 Premier Plan
1-4	1,452	1,774	3,118	617	740	1,424	489	595	1,118
5-15	1,382	1,690	2,969	587	704	1,356	467	567	1,066
16	1,386	1,709	3,001	590	714	1,371	468	577	1,076
17	1,389	1,731	3,032	591	724	1,385	468	588	1,088
18	1,392	1,752	3,063	592	734	1,400	469	598	1,098
19	1,392	1,814	3,156	592	762	1,442	469	620	1,131
20	1,392	1,873	3,250	593	792	1,489	471	643	1,172
21	1,392	1,891	3,311	595	805	1,522	472	652	1,198
22	1,392	1,906	3,318	598	815	1,531	473	661	1,207
23	1,392	1,959	3,325	599	843	1,539	474	682	1,215
24	1,392	2,010	3,332	600	869	1,548	475	700	1,223
25	1,393	2,027	3,340	602	880	1,557	479	706	1,231
26	1,469	2,095	3,377	636	911	1,571	506	731	1,244
27	1,545	2,161	3,415	670	942	1,585	533	754	1,255
28	1,619	2,229	3,452	703	974	1,600	560	779	1,267
29	1,696	2,295	3,532	739	1,004	1,634	589	805	1,294
30	1,738	2,363	3,636	760	1,036	1,679	605	829	1,330
31	1,791	2,412	3,687	784	1,059	1,698	625	848	1,348
32	1,817	2,463	3,739	797	1,084	1,719	636	866	1,363
33	1,855	2,511	3,844	816	1,107	1,763	651	885	1,398
34	1,905	2,560	3,946	840	1,131	1,808	670	904	1,434
35	1,935	2,612	4,051	855	1,155	1,852	683	922	1,468
36	2,004	2,702	4,154	889	1,196	1,900	709	956	1,506
37	2,041	2,735	4,207	907	1,213	1,924	725	970	1,526
38	2,065	2,769	4,232	919	1,231	1,936	734	983	1,534
39	2,096	2,802	4,281	935	1,248	1,958	747	995	1,553
40	2,110	2,812	4,362	943	1,254	1,995	754	1,001	1,583
41	2,176	2,821	4,567	976	1,260	2,089	781	1,006	1,657
42	2,225	2,888	4,770	1,000	1,293	2,181	800	1,030	1,730
43	2,269	2,993	4,974	1,023	1,341	2,276	819	1,070	1,805
44	2,364	3,108	5,179	1,067	1,396	2,370	855	1,113	1,878
45	2,507	3,252	5,382	1,134	1,463	2,483	909	1,165	1,966
46	2,665	3,450	5,623	1,205	1,550	2,593	967	1,236	2,052
47	2,823	3,617	5,862	1,274	1,622	2,704	1,023	1,293	2,138
48	2,934	3,751	6,101	1,327	1,679	2,813	1,063	1,338	2,222
49	3,048	3,883	6,339	1,376	1,734	2,923	1,103	1,384	2,308
50	3,185	4,016	6,574	1,438	1,792	3,032	1,153	1,427	2,391
51	3,301	4,147	6,903	1,488	1,847	3,184	1,194	1,473	2,509
52	3,417	4,318	7,232	1,540	1,921	3,335	1,235	1,531	2,627
53	3,584	4,587	7,557	1,614	2,035	3,486	1,294	1,625	2,743
54	3,728	4,871	7,884	1,678	2,157	3,636	1,346	1,722	2,860
55	3,922	5,173	8,206	1,764	2,287	3,785	1,415	1,826	2,974
56	4,143	5,493	8,765	1,860	2,426	4,039	1,490	1,937	3,173
57	4,418	5,832	9,326	1,978	2,575	4,293	1,584	2,054	3,373
58	4,699	6,194	9,890	2,098	2,733	4,548	1,678	2,180	3,574
59	4,955	6,578	10,454	2,205	2,898	4,802	1,766	2,312	3,772
60	5,248	7,112	11,077	2,331	3,132	5,085	1,864	2,497	3,993
61	5,576	7,596	11,878	2,470	3,342	5,445	1,974	2,665	4,276
62	5,963	8,154	12,677	2,636	3,584	5,806	2,105	2,859	4,557
63	6,413	8,898	13,480	2,826	3,909	6,167	2,256	3,115	4,840
64	6,934	9,866	14,283	3,049	4,329	6,529	2,431	3,451	5,124
65	7,504	10,983	15,297	3,291	4,815	6,984	2,623	3,838	5,481
66	7,977	11,775	16,536	3,497	5,162	7,551	2,788	4,114	5,925
67	8,616	12,751	17,487	3,777	5,590	7,985	3,011	4,455	6,266
68	8,997	13,251	18,426	3,944	5,808	8,413	3,144	4,628	6,603
69	9,421	13,702	19,465	4,130	6,006	8,887	3,292	4,788	6,976
70	9,859	14,147	20,421	4,321	6,202	9,323	3,446	4,943	7,318
71^	10,380	14,556	20,744	4,551	6,380	9,471	3,627	5,087	7,433
72^	10,919	15,749	21,608	4,785	6,904	9,866	3,816	5,503	7,742
73^	11,437	16,306	22,417	5,014	7,148	10,235	3,996	5,697	8,033
74^	11,966	16,865	23,345	5,245	7,392	10,659	4,181	5,893	8,364
75^	12,500	17,162	24,390	5,479	7,524	11,136	4,367	5,996	8,739
76^	13,109	17,498	25,051	5,746	7,670	11,437	4,580	6,113	8,976
77^	13,738	18,614	26,289	6,022	8,158	12,003	4,800	6,503	9,420
78^	14,350	19,881	27,672	6,290	8,714	12,633	5,014	6,946	9,915
79^	14,973	20,475	29,255	6,564	8,974	13,356	5,231	7,154	10,482
80^	15,586	21,106	30,301	6,832	9,252	13,834	5,445	7,374	10,857
81^	16,263	21,443	31,400	7,128	9,399	14,336	5,682	7,492	11,251
82^	16,980	22,484	32,878	7,442	9,855	15,010	5,932	7,856	11,781
83^	17,617	22,895	34,204	7,722	10,035	15,616	6,156	7,998	12,254
84^	18,303	23,304	34,924	8,022	10,215	15,945	6,395	8,142	12,513
85^	18,869	24,122	35,648	8,269	10,573	16,275	6,591	8,428	12,772
86^	19,519	24,122	36,480	8,555	10,573	16,656	6,820	8,428	13,070
87^	20,002	24,291	37,114	8,767	10,646	16,945	6,989	8,487	13,298
88^	20,491	24,873	37,785	8,982	10,902	17,251	7,159	8,690	13,538
89^	20,956	25,175	38,461	9,186	11,034	17,560	7,322	8,795	13,781
90^	21,372	25,755	39,143	9,368	11,288	17,871	7,467	8,998	14,025
91^	21,716	26,188	39,833	9,518	11,478	18,185	7,586	9,148	14,271
92^	22,060	26,634	40,495	9,669	11,674	18,489	7,707	9,304	14,509
93^	22,402	27,131	41,197	9,819	11,892	18,808	7,826	9,479	14,760
94^	22,746	27,651	41,903	9,970	12,121	19,130	7,946	9,660	15,014
95^	23,090	28,228	42,616	10,120	12,374	19,457	8,065	9,861	15,268
96^	23,432	28,856	43,334	10,271	12,648	19,785	8,186	10,082	15,526
97^	23,776	29,495	44,025	10,422	12,927	20,101	8,306	10,304	15,774
98^	24,091	30,320	44,756	10,558	13,289	20,432	8,417	10,593	16,036
99^	24,433	30,735	45,491	10,709	13,471	20,768	8,536	10,738	16,298

^ 續保保費以供參考　^ Renewal premium for reference

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PREMIER

THE ONE cierge

ONE TEAM HEALTH MANAGEMENT

臻一尊貴優才醫護管理團隊

FWD insurance

ONE PLAN
ONE TEAM
ONE STOP

一份保障 一個團隊 一站式

PAN-ASIA HEALTH SOLUTIONS
泛亞貴賓醫護服務

每個人也希望身邊有一個值得信賴的伙伴，即使遇上健康問題，也可以藉此專心休養及享受人生！富衛作為您信賴的伙伴，除為您提供全面的醫療保障外，更度身訂造為您提供專屬的醫護服務。**臻一尊貴優才醫護管理團隊**（「**本服務**」）[1]，本服務網絡遍佈泛亞區（包括香港、中國、台灣、新加坡及日本）（「**泛亞區**」），由專業醫療管理團隊給您貼心的禮賓式待遇，於您最需要時提供周全妥貼的一站式醫護服務安排，打點康復途上的各項細節，真正化繁為簡。

Everyone would like to be with a reliable partner to focus on their recovery and enjoy life even when facing any health problems. FWD, as your trusted partner, not only provides you with comprehensive medical protection coverage, but also customises dedicated health services especially for your needs. **PREMIER THE ONEcierge One Team Health Management** (the "**Service**") [1] offers you priority and tailor-made treatment with an one-stop approach in the territories of the Pan-Asia Region (including Hong Kong, Mainland China, Taiwan, Singapore and Japan) (the "**Pan-Asia Region**") from a professional health management team, helping you when you need help most. You can relax with ease knowing FWD is there to take care of all aspects of your wellness.

專科醫療團隊為您提供
優質醫療服務
Professional & Experienced
Medical Specialist Team as your Partner

一個專業的醫療管理團隊，可助您馬上獲得最合適的醫療意見及治療。因此，本服務為您提供頂尖的專科醫療網絡團隊，聯繫泛亞區多間頂級網絡醫院，讓您選擇最合適的醫生及醫院[2]，接受最適時的治療。
本服務提供廣泛專業醫療意見，透過住院醫療諮詢服務[3]，讓您對醫療評估及治療更加充滿信心。有了這個專業醫療專家作後盾，即使不幸患上任何疾病，您也可從容面對。

A professional medical service provider is undoubtedly your best assurance to receiving prompt and suitable medical advice and treatment. The Service provides you with a leading network of specialists so you can receive the most suitable treatment from the best-suited doctor and top-tiered network hospitals[2] in the Pan-Asia Region.
The Service also provides you with extensive professional medical advice, through the Inpatient Medical Advice Service[3], so you can feel comfortable with the medical assessment and treatment. With our professional team of experts as your guardian angel, you will be hassle free even when facing any illness or disease.

優越代辦
泛亞區住院手續
Superior Hospitalization
Arrangement where you prefer

稱得上尊尚服務，就必定以您為尊。若本服務之主診醫生建議您需要住院，專科醫療網絡團隊便會安排您盡快入院及盡早得到治療。另外，本服務亦可為您安排在泛亞區接受治療，提供專屬行程相關協助[4]，包括預訂機位、安排住宿、機場接送及協助辦理簽證申請。我們的醫護團隊會為您預先安排，您便可以安心治療及休養。

The Service always puts your interest first. Should you require hospitalization as diagnosed by your consulting doctor of the Service, the team of specialists will arrange for you to be admitted to hospital and receive treatment promptly. Besides, the Service arranges medical treatment for you in the Pan-Asia Region and provides you with personalized travel-related assistance[4] in flights, accommodation, ground transfers and visa application. The medical team arranges what is needed in advance so you can rest assured that you will receive treatment and recover well.

優質高效理賠程序及
無憂出院免找數服務[5]
Efficient and Seamless Claims Resolution
and Cashless Facility[5]

本服務的專科醫療網絡團隊將協助您於入院前向富衛申請安排優質高效理賠程序。在成功安排整個程序後，富衛更會提供貼心的無憂出院免找數服務，代您繳付住院開支。免除出院後之索償手續，讓您安心康復及更有效率地運用您的儲備。

The team of specialists of the Service will assist you to apply for an efficient and seamless claims resolution arrangement with FWD prior to hospital admission. Upon the successful arrangement of the whole process of this resolution, FWD will then provide you with a Cashless Facility and pay the hospitalization fees and charges on your behalf. Payment and claim requests for such fees and charges can be dispensed with and you can focus on recovery and managing your cash reserve more effectively!

從此，就由本服務作為保障您健康的伙伴！
From now on, let the Service be your partner in safeguarding your health!

臻一尊貴優才醫護管理團隊熱線[6]
PREMIER THE ONEcierge One Team Health Management Hotline[6]

香港 Hong Kong: (852) 8120 9066
內地免費電話Toll-free number for Mainland: 400 9303078
24 小時全天候支援 24-hour full support

有關保單資料查詢，請致電您的理財顧問或服務熱線(852) 3123 3123。
For any enquiries about policy information, please contact your advisor or our Service Hotline at (852) 3123 3123.

注意事項 Note:

- 所有醫療服務的可索償金額將受有關合資格計劃之保障所限，包括但不限於保障項目及賠償額。
- 在接受任何醫療服務前，請先向醫生尋求獨立意見以確保您的身體狀況適合接受有關醫療服務。此外，所有互康、其醫療網絡團隊及百滙的醫生均為獨立之專業醫護人員，而非富衛之僱員或代表。富衛並不會就他們所提供的醫療服務或治療之行為、疏忽或遺漏承擔責任。
- 您須同意富衛、互康、其醫療網絡團隊及百滙就為您提供的服務所得的個人資料記錄、分享、使用和歸檔。此資料亦會被用作以培訓及質量保證的用途。若您不提供相關的個人資料，可能導致該服務提供者無法提供有關的服務給您。
- The claimable amount of medical expenditure is subject to the benefit of Eligible Plans, including but not limited to benefit items and benefit amount.
- Please seek doctor's individual advice on appropriateness of any medical service to be provided. Doctors of HMG and its healthcare network team and Parkway are all individual healthcare personnel instead of employees or representatives of FWD. FWD will not be responsible for any act, negligence or omission of medical service or treatment on the part of them.
- You are required to consent to FWD, HMG and its healthcare network team and Parkway, recording, sharing, using and archiving your personal data in pursuance of the Service 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.

以上資料只供參考及旨在描述本服務的主要特點，並非合資格計劃保單保障內容。有關合資格計劃條款細則的詳細資料，請參閱該計劃之保單條款。本單張中英對照，如有任何歧異，概以英文原義為準。
The above information is for reference only and is indicative of the key features of the Service instead of the benefit of Eligible Plans. For a complete explanation of the terms and conditions of Eligible Plans, please refer to their Policy Provisions. In the event of any discrepancy between the English and Chinese version of this leaflet, the English version shall prevail.

1 本服務由互康集團（「互康」）、其醫療網路團隊及新加坡百匯醫療集團（「百匯」）提供。本服務並非保單條款之一部分或保障內容，並只適用於衛一醫療總匯及/或指定保險計畫的基本計畫及附約（「合資格計畫」）。富衛人壽保險（百慕達）有限公司（於百慕達註冊成立之有限公司）（「富衛」）有權隨時撤銷或調整本服務而無需另行通知，並保留絕對決定權。富衛亦將不會就互康及/或其醫療網路團隊及/或百匯的行為、疏忽或失誤負上任何責任。本服務只適用於泛亞區。

2 醫院指於泛亞區一系列網絡醫院，根據本服務提供醫療意見及治療。有關泛亞區網絡醫院列表的詳細資料，請致電服務熱線 (852) 3123 3123。

3 住院醫療諮詢服務是由互康及其醫療網絡團隊向合資格計劃的被保人提供住院醫療意見。如被保人確診患上嚴重疾病而持有入院建議信，互康就所提供相關的醫療文件及報告作出評估，包括所提供的醫療文件及報告的說明及於泛亞區其他可行的治療方案及相關預算醫療費用。醫療安排之最後決定由被保人作出。請注意住院醫療諮詢不可被視為醫療診斷，如被保人需要醫療診斷，將另行收費。富衛有權隨時撤銷或調整此項服務而無需另行通知，並保留絕對決定權。

4 被保人須負責繳付該行程及住宿的所有相關費用及收費。行程相關協助只適用於台灣、新加坡及日本。

5 無憂出院免找數服務（「免找數服務」）為一項就被保人於住院期間所衍生的受保開支而作出墊支的行政安排，而並非合資格計劃保單保障內容及非保證可成功的安排，富衛有權隨時撤銷或調整此項服務而無需另行通知，並保留絕對決定權。在成功安排無憂出院免找數服務後，富衛會為被保人向相關醫院代支醫療費用。如合資格計劃之保單仍有每年自付費餘額（如適用），保單權益人須於入院時繳付該餘額。如已代支的醫療費用高於保障上限時，富衛將向保單權益人收取該等金額。

6 此熱線由互康管理。請注意，此熱線只供非緊急預約醫生之用，並非作緊急用途。

1 The Service, provided by HealthMutual Group Limited ("HMG") and its healthcare network team and Parkway Hospitals Singapore ("Parkway"), is not a part of the Policy or benefit item under the Policy Provisions and only applicable to TheOne Medical Solution and/ or designated insurance basic plans or riders ("Eligible Plans"). FWD Life Insurance Company (Bermuda) Limited (Incorporated in Bermuda with limited liability) ("FWD") reserves the right to terminate or vary the Service in its sole discretion without further notice. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team and Parkway. The Service is only applicable in the Pan-Asia Region.

2 Hospital means a variety of network hospitals in the Pan-Asia Region providing medical advice and treatment under the Service. Please contact our Service Hotline (852) 3123 3123 to get more information about the list of hospitals in the Pan-Asia Region.

3 Inpatient Medical Advice Service is provided by HMG and its healthcare network team and this service offers inpatient medical advice for the Insured of Eligible Plans. Should the Insured be diagnosed with serious diseases and obtain a hospital admission letter, HMG will make an assessment based on the Insured's medical reports as appropriate, including explanations of the medical report, alternative medical treatment and associated estimated medical expenses in the Pan-Asia Region. A final decision on the medical treatment arrangement shall be made solely by the Insured. Please note that Inpatient Medical Advice shall not be considered as medical consultation. If the Insured would like to have medical consultation, all relevant costs will be borne by the Insured. FWD reserves the right to terminate or vary this service in its sole discretion without further notice.

4 The Insured is responsible for all relevant fees and charges required of the travel and accommodation related items. Travel related assistance is only applicable to Taiwan, Singapore & Japan.

5 Cashless Facility ("Cashless Facility") is an administrative arrangement to pay the covered expenditures when the Insured is under confinement, but not a benefit item under Policy Provisions or a guaranteed successful arrangement. FWD reserves the right to terminate or vary the service in its sole discretion without further notice. FWD would pay the medical cost to the relevant hospital on behalf of the Insured after successful arrangement of Cashless Facility. If there is Annual Deductible balance (if any) of Eligible Plan, policyowners are required to pay such balance when admission of hospitalization. If the medical cost paid by FWD is higher than the maximum amount of benefit, FWD would seek reimbursement from policyowners for such amount.

6 This hotline is operated by HMG. Please note that this hotline is for non-emergency reservation of doctor consultation instead of for emergencies.