富衛人壽保險(澳門)股份有限公司 FWD Life Insurance Company (Macau) Limited



全面終身 醫療保障

Comprehensive Life Medical Protection

暖懷醫療保障計劃 Embrace Medical Plan

醫療•非分紅壽險 Medical ● Non-participating Life Insurance





全面終身醫療保障

暖懷 - 全面的關顧,有如一個關懷的擁抱; 富衛暖懷醫療保障計劃,為閣下提供完善的實報 實銷住院醫療保障。

在面對突如其來的疾病時,仍可無懼沉重的醫療 開支,安心享有理想的治療。

保證續保

無論身體狀況是否有變或過往索償紀錄如何,已投保計劃 可獲保證每年續保1至100歲。

嚴重疾病治療 覆蓋更多

嚴重疾病之相關治療費用往往不菲。計劃特別覆蓋癌症放 射療法及化學療法²與腎臟透析²,舒緩經濟負擔及心理壓 力。

健康人生保費優惠

保持健康不只代表悠然享受美好人生,更帶來實際財政得益。如連續兩年或以上沒有索償紀錄,來年續保保費可享 折扣如下:

於保單續保日前無索償年期	無索償折扣 (來年續保保費)
連續2個保單年度	10%
連續3個保單年度	10%
連續4個保單年度	10%
連續5個保單年度或以上	15%

彈性保障級別及額外保障選擇

設有經濟、標準、特等及優等四種保障計劃;除經濟計劃 適合加強現有醫療保障外,如欲有更充裕之額外保障,亦 可選擇保障期至100歲之自選醫療增值保障,最高覆蓋超出 基本計劃賠償後的金額之85%³,應付龐大醫療開支,亦可 遊刃有餘。

涵括門診手術 方便快捷

隨著醫學的進步以及麻醉藥物的普及,計劃亦涵蓋於診所 內進行的簡單手術4,例如白內障手術、結腸鏡檢查等,讓 您可以在接受治療的同時,繼續如常地生活。

免費環球支援服務

身處外地不幸遇上意外或疾病,可免費享有國際SOS⁵24小時環球支援計劃之全球保障服務,包括電話醫療諮詢、緊急醫療撤離及遺體運送等服務。

Comprehensive Life Medical Protection

Embrace - a heart-warming hug and a full-on expression of care.

FWD Embrace Medical Plan provides you with a thoughtful and direct reimbursement coverage on hospitalization.

Embrace life with tenderness, love and care even when facing unfortunate illnesses and unexpected expenses.

Embrace longevity

Whether there is any change in health conditions or any previous insurance claim, all successfully applied insurance plans are guaranteed renewable¹ until the age of 100.

Embrace with power

Serious illness and medical costs can be a setback to your wellness. This plan also covers Radiotherapy and Chemotherapy for Cancer Benefit² and Kidney Dialysis Benefit². Combat illness and embrace life using the strongest power with us.

Embrace wellness

Staying healthy is more than simply life enjoyment but is also a precious wealth. In the case that there are no claims for two or more consecutive years, you will be eligible for a discount in the following year's premium according to the table below:

No claim period immediately prior to the Policy's renewal date	No Claim Premium Discount on following year's premium		
2 consecutive Policy years	10%		
3 consecutive Policy years	10%		
4 consecutive Policy years	10%		
5 or more consecutive Policy years	15%		

Embrace flexibility

A wide range of insurance choices for you: Economy, Standard, Superior and Premier protection plans. Economy plan is an ideal supplement to any existing medical plan. An additional medical booster benefit is also available with enhanced protection until the age of 100, which pays up to 85%³ of eligible expenses in excess of the benefits paid by Embrace. This offers you extra flexibility to ease any huge medical burden.

Embrace convenience

With recent advances in anaesthetic drugs and medical techniques, this plan also covers many simple surgeries, such as cataract operation and colonoscopy, carried out in clinics⁴. This added convenience will help you return to normal days of work and life in no time.

Embrace the world

When coming across unexpected illness or accidents overseas, the International SOS⁵ 24-hour Worldwide Assistance Program gives the most immediate support, including phone medical advice, emergency medical evacuation and repatriation of mortal remains.

暖懷醫療保障計劃 Embrace Medical Plan					
計劃類型 Plan Type	基本計劃 / 附約 Basic Plan / Rider				
計劃級別 Plan Level	經濟 Economy 標準 Standard 特等 Superior 優等 Premie				
投保年齡(下次生日年齡) Issue Age (Age Next Birthday)	1 (15⊟) — 65 1(15 days) – 65				
保障年期 Benefit Term	保證每年續保 ¹ 至100歲 Guaranteed yearly renewable ¹ to age 100				
保費供款年期 Premium Payment Term	至99歲 To age 99				
保費 Premium Structure	 ● 按被保人年齡、性別及所選計劃級別而定 ● 每年按被保人年齡遞增 ● 非保證 ● Based on the Insured's age and gender, and the selected plan level ● Adjust yearly as the Insured's age increases ● Non-Guaranteed 				
貨幣 Currency	基本計劃:美元 / 港幣 附約:美元 / 港幣 (與基本計劃相同) Basic Plan: USD / HKD Rider: USD / HKD (Must be the same as the Basic Plan)				
繳付方式 Premium Payment Mode	每月 / 每半年 / 每年 Monthly / Semi-Annually / Annually				
保障範圍 Protection Coverage	詳情請參閱保障表 Please refer to the benefit schedule for details				
其他 Others	 ●健康人生保費優惠:無索償折扣* ●國際SOS 24小時環球支援服務 ● Healthy Lifestyle Reward: No Claim Premium Discount* ● International SOS 24-hour Worldwide Assistance Program 				

自選醫療增值保障 Optional Medical Booster Benefit				
計劃級別 Plan Level	標準 Standard	特等 Superior	優等 Premier	
投保年齡(下次生日年齡) Issue Age (Age Next Birthday)	1	(15⊟) — 65 1 (15 days) –	65	
保障年期 Benefit Term	保證每年續保 ¹ 至100歲 Guaranteed yearly renewable ¹ to age 100			
保費供款年期 Premium Payment Term	至99歲 To age 99			
保費 Premium Structure	 • 按被保人年齡、性別及所選計劃級別而定 • 每年按被保人年齡遞增 • 非保證 • Based on the Insured's age and gender, and the selected plan level • Adjust yearly as the Insured's age increases • Non-Guaranteed • Non-Guaranteed • Statement 			
貨幣 Currency	必須與暖懷醫療保障計畫	则相同 Must be the same a	s Embrace Medical Plan	
繳付方式 Premium Payment Mode	必須與暖懷醫療保障計畫	则相同 Must be the same a	s Embrace Medical Plan	
保障範圍 Protection Coverage	詳情請參閱保障表	Please refer to the benefit	schedule for details	

* 無索償折扣亦適用於自選醫療增值保障(如已附加)。

* No Claim Premium Discount is also applicable to Optional Medical Booster Benefit, if attached.

暖懷醫療保障計劃 Embrace Medical Plan

每項傷病之賠償可達合資格醫療費用的百分之百,最高賠償限額如下: Pays 100% of eligible expenses, up to the following limits per Disability:

保障範圍(港幣) Coverage (HKD)	颂迹 Economy	標準 Standard	怯笑 Superior
住院保障 Hospitalization Benefits			13 - Ouperior	度 、 于 Fremier
每天住房費(最多以150天為限)				
Daily Room and Board (up to a max of 150 days)	370	825	1,450	3,000
深切治療部每天費用(最多以30天為限)				
Daily Charges for Intensive Care (up to a max of	2,000	2,600	4,000	5,000
30 days)	,		,	- ,
家屬陪伴附加床位費(每天)				
(被保人須在12歲以下)(最多以30天為限)	300	500	900	1,800
Companion Bed (per day)	500	500	500	1,000
(for Insured age below 12) (up to a max of 30 days)				
主診醫生每天巡房費(最多以150天為限)				
Daily Attending Physician's Hospital Visit (up to a max	370	825	1,450	3,000
of 150 days) 專科醫生會診費 Specialist Consultation	2,800	6,500	7,500	12,500
等所置上言の頁 Specialist Consultation 醫院雜費 Miscellaneous Hospital Charges	7,000	10,000	16,500	27,000
雪阮釉質 Miscellaneous Hospital Charges	7,000	10,000	10,000	21,000
手術費(依手術賠償表) Surgeon's Fees (Per Surgical S	Schedule)			
等級一 Class 1	3,000	4,400	6,500	8,500
等級二 Class 2	7,500	10,500	16,000	20,000
等級三 Class 3	16,000	22,000	30,500	40,000
等級四 Class 4	28,000	38,000	54,800	72,000
等級五 Class 5	28,000	68,000	96,000	130,000
		」 	-	-
麻醉師費 Anaesthetist's Fees		35% of the Surg		
	Ē	最高為手術費賠償	額百分之三十五	- L
手術室費 Operating Theatre Charges	Up to	35% of the Surg	geon's Fees paya	able
【其他醫療保障 Other Medical Benefits				
出院後門診(每次)(包括中醫醫療費)				
(以出院後或門診手術後45天內計算,每日一次,				
最多以10次為限)	050	700	750	400
Post-Hospitalization (per visit) (including Chinese Medicine Consultation)	250	300	350	400
(1 visit/day for a max of 10 visits within 45 days				
after hospitalization or Clinical Surgery)				
私家看護(每天)				
(以出院後30天內計算,最多以30天為限)	500	700	1,100	2,000
Home Nursing (per day) (up to a max of 30 days	500	700	1,100	2,000
within 30 days after hospitalization)				
救護車運送至醫院 Ambulance to Hospital	200	250	300	350
緊急意外門診醫療費	1,800	5,000	6,500	14,000
Emergency Out-Patient Accident Treatment Charges				
癌症放射療法及化學療法 ²	不適用 Nil	80,000	130,000	200,000
Radiotherapy and Chemotherapy for Cancer ² 腎臟透析 ² Kidney Dialysis ²	太海田 N :1	200.000	750.000	500.000
肖澱透析"Kidney Dialysis" 人壽保障 Life Protection	不適用 Nil	200,000	350,000	500,000
身故權益 Death Benefit	5,000	10,000	15,000	20,000
意外身故權益 Accidental Death Benefit	5,000	10,000	15,000	20,000
	3,000	10,000	13,000	20,000

自選醫療增值保障(保障至100歲) Optional Medical Booster Benefit (Coverage Up To Age 100)

每項傷病之賠償最高可達扣減暖懷合資格醫療費用賠償後餘額之百分之八十五,最高賠償限額如下:

This pays up to 85% of eligible expenses in excess of the benefits paid by Embrace, up to the following limits per Disability:

保障範圍(港幣) Coverage (HKD)	經濟 E	conomy	標準 Standard	特等 Superior	優等 Premier
住院保障 Hospitalization Benefits					
每天住房費(超過150天後之每天限額)					
Daily Room and Board (In excess of 150 days and up to daily limit of)	不適	用 Nil	825	1,450	3,000
深切治療部每天費用			按	」 R院方之慣常收費	
Daily Charges for Intensive Care	不適	用 Nil		ind Customary	
主診醫生每天巡房費(超過150天後之每天限額)					
Daily Attending Physician's Hospital Visit (In excess of 150 days and up to daily limit of)	不適	用 Nil	825	1,450	3,000
專科醫生會診費 Specialist Consultation	不適	用 Nil		」 R院方之慣常收費	
醫院雜費 Miscellaneous Hospital Charges		用 Nil		ind Customary	
手術保障 Surgical Benefits	.,				Ū
手術費(依手術賠償表)				選醫療增值保障	
Surgeon's Fees (Per Surgical Schedule)	不適	用 Nil		と音源すられた。	
麻醉師費 Anaesthetist's Fees	「不適	用 Nil		he maximum lin	
手術室費 Operating Theatre Charges		用 Nil		oster Benefit pe	
最高賠償限額 Maximum Limit	110				,
每項傷病最高賠償限額					
Maximum Limit per Disability	不適	用 Nil	100,000	150,000	250,000
每張保單終身賠償限額 ^ (本公司就個別保單之自選醫療增值保障於緊接被保人 74歲生日後之保單週年日起計累算支付之保障金額上 限。) Overall Lifetime Limit per Policy ^ (the limit which applies to the aggregate amounts paid on or after the policy anniversary immediately following the 74th birthday of the Insured under Optional Medical Booster Benefit of individual policy.)		用 Nil	280,000	420,000	700,000
個人終身賠償總額 ^ (本公司就同一個被保人繕發,並根據最新之規章和規 定被本公司指明或劃分為自選醫療增值保障權益(不論 是否附加於暖懷醫療保障計劃或附約)之其他保單及附 約(「其他相關保單及附約」)中,於上限生效日起計累 算所有由本公司支付之保障總額的絕對上限。「上限 生效日」為所有其他相關保單及附約中緊接被保人74 歲生日後之最早保單週年日。) Overall Lifetime Limit per Life ^ (the absolute cap which applies to all amounts paid in aggregate on or after the Limit Effective Date under all Optional Medical Booster Benefit and under any other benefits described or characterised by the Company based on its prevailing rules and regulations as optional medical booster benefits in any other policies and riders (whether or not under the Embrace Medical Plan / Rider) issued by the Company in respect of the same Insured ("Other Relevant Policies and Riders"). "Limit Effective Date" is the date of the earliest policy anniversary under all Other Relevant Policies and Riders which immediately follows the 74th birthday of the Insured.)	不適	用 Nil		1,200,000	

^ 於被保人100歲前[,]有關之自選醫療增值保障將於總賠償達至「每張保單終身賠償限額」或「個人終身賠償總額」時終止。

[^] The relevant optional medical booster benefits shall be immediately terminated once the aggregate amount paid has reached either Overall Lifetime Limit per Policy or Overall Lifetime Limit per life before Insured reaches age 100.

有關此保單之所有不保事項,請參閱保單條款。如以美元為保單貨幣,以上賠償限額之兑換率固定為1:8 (美元:港幣),並不受匯率變 動影響。

註:

- 1. 富衛人壽保險(澳門)股份有限公司(「富衛」)保留於每保單週年檢討此保單之保費率及/或權益之權利。
- 此權益並不會於保單生效日或保單復效日計起90日內支付,亦不適用於經濟級別。如總賠償額相等於此保單所註明之最高賠償上限,此保障將自動終止。
- 3. 每項傷病受有關傷病最高賠償額約束,且並不適用於經濟級別。詳情請參閱有關自選醫療增值保障之保障表。
- 4. 受保障的門診手術,已詳列於保單合約的手術賠償表內。
- 5. 此服務由國際SOS提供,富衛將不會就國際SOS的行為或疏忽負上任何責任。
- 6. 包括已註明在保單條款手術賠償表內的門診手術保障。

以上資料只供參考及旨在描述基本計劃及附約主要特點,有關條款細則的詳細資料,請參閱保單條款。

本單張及保單條款內容於描述上有任何歧異,應以保單條款中文原義為準。本單張中英對照,如有任何歧異,概以中文原義為準。

For all the exclusions under the Policy, please refer to the Policy Provisions. For policies in US dollars, the exchange rate for the benefit schedule above is fixed at 1:8 (USD:HKD), irrespective of currency fluctuations.

Remarks:

- 1. FWD Life Insurance Company (Macau) Limited ("FWD") reserves the right to revise, modify or adjust the benefits payable under the Policy and/or the premium rates at each Policy anniversary.
- 2. The benefit(s) are not payable during the first 90 days from the Effective Date or date of reinstatement of the Policy, and are not available under the Economy plan. The benefit(s) will automatically terminate once the aggregate claim amount is equal to the maximum benefit limit as stated under the Policy.
- 3. Subject to maximum limits per Disability and not available under the Economy plan. Please refer to the benefit schedule of Optional Medical Booster Benefit for more details.
- 4. The list of Clinical Surgeries is specified in the Surgical Schedule of the Policy Provisions.
- 5. The service is provided by International SOS. FWD shall not be responsible for any act or failure to act on the part of International SOS.
- 6. Includes coverage for Clinical Surgery as specified in the Surgical Schedule of the Policy Provisions.

The above information is for reference only and is indicative of the key features of the Plan. For a complete explanation of the terms and conditions, please refer to the Policy Provisions. In the event of any ambiguity or inconsistency between the terms of this leaflet and the Policy Provisions, the Policy Provisions in Chinese shall prevail. In the event of any discrepancy between the English and Chinese version of this leaflet, the Chinese version shall prevail.

重要事項及聲明:

- i. 本產品由富衛人壽保險(澳門)股份有限公司(「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,您應考慮本產品是否適合您的需要及您是否完全明白本產品所涉及的風險。除非您完全明白及同意本產品適合您,否則您不應申請或購買本產品。在申請本計劃前,請細閱以下相關風險。
- ii. 本產品資料是由富衛發行。富衛對本產品資料所載資料的準確性承擔一切責任。本產品資料只在澳門特別行政區派發,並不能詮釋 為在澳門特別行政區境外出售,游說購買或提供富衛的保險產品。本產品的銷售及申請程序必須在澳門特別行政區境內進行及完成 手續。
- iii. 本產品是一項保險產品。繳付之保費並非銀行存款或定期存款,本計劃不受澳門特別行政區存款保障計劃所保障。
- iv. 本產品乃一項醫療保障產品,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/或本計劃的利益説明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,富衛根據保單權益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(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)後支付。
- vii. 如您對保單不滿意,則在您未曾於本保單下作出過任何索償的前提下,您有權在「冷靜期」內以書面要求取消保單及取回所有已繳 交的保費。您必須確保富衛辦事處在您的保單的「冷靜期」(保單交付給您/您的代表或《通知書》(説明已經可領取保單和「冷靜 期」的屆滿日)發予您/您的代表後起計的21天內,以較早者為準。)屆滿日或之前直接收到附有您的親筆簽署的通知書。富衛辦事 處的地址為澳門商業大馬路301-355號財神商業中心12樓。
- viii. 於保單或附約生效期間,保單權益人可向富衛作出書面申請退回或終止保單或附約。
- ix. 本產品之保單條款受澳門特別行政區的法律所規管。
- x. 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。本單張及保單條款內容於描述上有任何歧異,應以保單條款中文原義為準。如欲在投保前參閱保險合約條款及細則,您可向富衛索取。本單張中英對照, 如有任何歧異,概以中文原義為準。

富衛人壽保險(澳門)股份有限公司(「富衛」)必須遵從下列規定以便財政局自動交換某些財務帳戶資料:

- (i) 識辨非豁除「財務帳戶」的帳戶(「非豁除財務帳戶」);
- (ii) 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税務居民的司法管轄區;
- (iii) 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税務居民的司法管轄區;
- (iv) 收集有關非豁除財務帳戶的資料(「所需資料」);及
- (v) 向財政局提供所需資料。
- 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。

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本公司的信貸風險。保單權益人將承擔本公司無法履行保單財 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,因匯率波動引致的潛在損失將對你於本產品可獲得的利益及繳付保費的負擔構成負面影響。

Important Notes and Declarations:

- i. This product is underwritten by FWD. FWD is solely responsible for all features, Policy approval, coverage and benefit payment under the product. FWD recommends that you carefully consider whether the product is suitable for you in view of your financial needs and that you fully understand the risk involved in the product before submitting your application. You should not apply for or purchase the product unless you fully understand it and you agree it is suitable for you. Please read through the following related risks before making any application of the product.
- ii. This product material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Macao 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 Macao Special Administrative Region. All selling and application procedures of the product must be conducted and completed in the Macao Special Administrative Region.
- iii. This product is an insurance product. The premium paid is not a bank savings deposit or time deposit. The product is not protected under the Deposit Protection Scheme in the Macao Special Administrative Region.
- iv. This product is a medical protection product 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 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 satisfied with the Policy, you have the right to cancel it within the Cooling-off Period and obtain a refund of any premium paid provided that you have not made any claims under the Policy. A written notice signed by you should be received by the office of FWD at 12/F, Fortuna Business Centre, 301-355 Av. Comercial De Macau, Macau within the Cooling-Off Period (that is, 21 days after either the delivery of the Policy or the issue of a Notice informing you or your representative that the Policy is available for collection and Expiry Date of the Cooling-off Period, whichever is earlier).
- viii. While the Policy or rider is in force, the Policy Owner may surrender or terminate the Policy or rider by sending a written request to FWD.
- ix. The Policy Provisions of the product are governed by the laws of the Macao Special Administrative Region.
- x. 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 the product. In the event of any ambiguity or inconsistency between the terms of this leaflet and the Policy Provisions, the Policy Provisions in Chinese shall prevail. If you want to read the terms and conditions of the policy provisions before making an application, you can obtain a copy from FWD. In the event of discrepancies between the English and Chinese versions of this product material, the Chinese version shall prevail.

FWD Life Insurance Company (Macau) Limited ("FWD") must comply with the following requirements to facilitate the Financial Services Bureau automatically exchanging certain financial account information:

- (i) to identify accounts as non-excluded "financial accounts" ("NEFAs");
- (ii) to identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
- (iii) 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;
- (iv) to collect information on NEFAs ("Required Information"); and
- (v) to furnish Required Information to the Financial Services Bureau.
- The Policy Owner must comply with requests made by FWD to comply with the above listed requirements.

What are the key product risks?

Credit risk

This product is an insurance policy issued by the Company. The application of this insurance product and all benefits payable under your policy are subject to the credit risk of the Company. You will bear the default risk in the event that the Company 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, the potential loss arising from such exchange rate movement may have a negative impact on the benefits you receive from the product and your burden of the premium payment.

通脹風險

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

不保事項

若被保人直接或間接由下列任何原因引致支出住院、手術或醫療相關之任何費用,將不能獲得任何賠償:1. 護理或治療有下列情形:(j) 已由任何公司或保險公司依照其保險計劃作出賠償。如護理或治療之任何部份並不包括在該賠償內,此不保事項條款將不適用;(ii)任 何住院、門診手術、治療、療程或其他醫療服務非醫療需要;或(jij)任何超出正常與慣例之收費的費用。 2. 先天性疾患。 3. 受保前 已存在之傷病。 4. 保單生效日或復效日起的首三十天內所發生之疾病或病症。 5. 感染人類免疫力缺乏病毒(HIV)所引致之任何疾 病,包括愛滋病(AIDS)和/或各種突變,衍生或變異(因輸血而感染除外)。 6. 蓄意自我毁傷或企圖自殺,不論當時神智是否清醒, 或是否受藥物或酒精影響。 7. 由於服用酒精或毒品或類似之藥物或藥製劑過量引起的傷病,除非是醫生處方開列用於治療傷病之藥 物。 8.非因治療或診斷傷病之例行身體檢查、健康檢查或測試,或非醫療需要之任何治療。 9.因手術,物理或化學方法避孕,或避孕 逆轉,或治療不育所引致的症狀。 10. 美容或外科整形手術;與傷病無關的預防或疫苗接種治療;眼鏡、視力問題矯正輔助;助聽器、 聽力治療及其處方。但針對全然因保單生效日起發生之意外所遭受的身體受傷,而需進行前述手術或治療者,不受此限。 11. 牙齒保 健、手術及治療,但若健全自然牙齒之損壞全然因保單生效日起受傷所致,且僅為恢復受傷前存在自然牙齒的基本功能者,則不在此 限。 12. 精神、心理、心智、神經或情緒之障礙,及任何因此引起的生理或身心症狀。 13. 保單生效日起一百二十天內,任何對扁桃 腺、腺樣增生或婦女生殖器官疾病的治療或手術。 14. 戰爭或軍事行為、恐怖主義或恐怖份子行動(包括已宣告或未宣告), 敵對行 動、暴動、革命、反叛、政變或篡權;或在任何國家或國際權力機構之海、陸、空部隊中服役。 15. 以下原因引起之傷病:(j)除賽跑 外的各種競速比賽。(ii) 在機動車輛道路外駕駛電單車。(iii) 除以乘客身份購票乘搭合格持牌之商業飛機以外的飛行活動。(iv) 高 空跳傘或滑翔運動。(v)需使用呼吸器的深水潛泳(三十米以上)。(vi)需使用繩索及/或岩釘的遊繩下降和登山運動。(vii)除於溜 冰場滑冰以外的冬季運動。(viji)參與任何形式有報酬及收入的專業運動。(ix)蓄意犯險(由本公司界定)[,]但為救助人類生命除外。 (x)核輻射、核污染或使用任何核子武器的游離或燃燒所產生的污染。 16. 懷孕、分娩(包括手術接生)、流產、墮胎及產前檢查或產 後護理。 17. 參與任何犯罪的活動。 18. 變性手術。 19. 包皮環切手術,但依本保單相關條款有醫療需要而進行包皮環切手術者不受此 限。

若被保人直接或間接由下列任何原因引致死亡,將不獲發意外身故權益:1. 疾病或任何感染,由意外受傷之傷口引發之感染則不在此限。2.懷孕、分娩(包括手術接生、流產)或墮胎,因意外而提前或導致分娩或流產亦屬不保事項。3.蓄意自我毀傷或企圖自殺,不 論當時神智是否清醒,或是否受藥物或酒精影響。4.服用任何未經合格註冊醫生合法處方之藥物。5.被保人受酒精影響而遭受或導致 意外。6.自願或非自願服用或吸入毒藥、氣體或煙霧,但被保人因職業相關遭遇危險,導致意外服用或吸入上述物品則不在此限。7. 戰爭或軍事行為、恐怖主義或恐怖份子行動(包括已宣告或未宣告),敵對行動、暴動、革命、反叛、政變或篡權;或在任何國家或國 際權力機構之海、陸、空部隊中服役。8.除以乘客身份購票乘搭合格持牌之商業飛機以外的飛行活動。9.參與任何犯罪的活動。10. 除賽跑外的各種競速比賽。11.核輻射、核污染或使用任何核子武器的游離或燃燒所產生的污染。12.參與任何形式有報酬及收入的專 業運動。

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

保單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本公司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,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。

終止保單

保單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.依本公司退保相關規定所認 定之退保日。4.保單已告終止。5.若保單權益人不接受本公司按保單條款調整之保障、限制及/或不保事項條款,或不繳交新保費,本 公司於新保費逾期未繳三十天後有權終止本保單。6.寬限期滿後仍未繳付保費。

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 the Company fulfills all of its contractual obligations.

Exclusions

The Company shall not be liable to pay any benefits under this Policy in respect of hospitalization, surgical and other medical fees and expenses incurred directly or indirectly caused by: 1. Care or treatment for which (i) reimbursement has been paid by any company or other insurer under other insurance policy covering the Insured. However, if any part of the care or treatment is not covered by such reimbursement, such exclusion will not apply; (ii) any Confinement, Clinical Surgery, treatment, procedure or other medical services which are not Medically Necessary; or (iii) any charges exceeding the Normal and Customary Charges for the benefits. 2. Congenital Conditions. 3. Pre-existing Conditions. 4. Sickness, Disease or Illness when occurring during the first thirty (30) days from the Effective Date or the date of reinstatement of the Policy. 5. Human Immunodeficiency Virus (HIV) related illness, including Acquired Immunization Deficiency Syndrome (AIDS) and/or any mutations, derivations or variations thereof, which is derived from an HIV infection, except due to blood transfusion. 6. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not. 7. Disability arising out of excessive consumption of alcohol or narcotics or similar drugs or agents unless prescribed by a Physician for treatment of a Disability. 8. Routine physical examinations, health check-ups or tests not incidental to treatment or diagnosis of a Disability or any treatments which are not Medically Necessary. 9. Conditions arising from surgical, mechanical or chemical contraceptive methods of birth control or the reversal of birth control or treatment pertaining to infertility. 10. Cosmetic surgery or plastic surgery, preventive or vaccination treatment not related to a Disability, eye glasses, corrective aids and refractions or hearing aids and treatment for the same, and prescriptions thereof except as necessitated by bodily Injuries wholly caused by an Accident occurring on or after the Effective Date. 11. Dental care, surgery and treatment, except as necessitated by the need to restore sound natural teeth that are damaged wholly by Injury occurring on or after the Effective Date, and the restoration is only to restore the basic function of the natural teeth that existed prior to the Injury. 12. Psychiatric, psychological, mental, nervous or mood disorders, and any physiological or psychosomatic manifestations thereof. 13. Treatment or surgery for tonsils, adenoids or any diseases peculiar to the female generative organs within one hundred and twenty (120) days from the Effective Date of this Policy. 14. War or any act of war, terrorism or terroristic activities, declared or undeclared, hostilities, rebellion, revolution, insurrection, coup or usurped power or active duty in the military, naval or air forces of any country or international authority. 15. Any Disability resulting from: (i) Racing of any kind other than on foot. (ii) Motorcycling other than on roadways designed primarily for motor traffic. (iii) Aviation or aeronautics other than as a fare paying passenger on a duly licensed commercial aircraft. (iv) Skydiving and parasailing. (v) Deep water diving over thirty (30) meters requiring the use of breathing apparatus. (vi) Abseiling and mountain climbing requiring the use of ropes and/or pitons. (vii) Winter sports other than ice-rink skating. (viii) Participation in all forms of professional sports competition with reward and income. (ix) Deliberate exposure to exceptional danger in the opinion of the Company except in an effort to save human life. (x) Nuclear radiation, or contamination or the use of ionization or combustion of any nuclear weapons. 16. Pregnancy, childbirth (including surgical delivery), miscarriage, abortion and prenatal or postnatal care. 17. The participation in any criminal event. 18. Trans-sexual surgery. 19. Circumcision, unless medically required subject to the clause on circumcision under this Policy.

No Accidental Death Benefit is payable under this Policy when the death of the Insured is directly or indirectly caused by: 1. Disease or infection (except infections which occur through an accidental cut or wound). 2. Pregnancy, childbirth (including surgical delivery), miscarriage and abortion irrespective of whether such event is accelerated or induced by an Injury. 3. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not. 4. Any drug unless taken in accordance with the lawful directions and prescription of a qualified and registered Physician. 5. Accident occurring while or because the Insured is under the influence of alcohol. 6. Poison, gas or fumes, voluntarily or otherwise taken, absorbed or inhaled, other than as a result of an Accident arising from a hazardous incident in relation to the Insured's occupation. 7. War or any act of war, terrorism or terroristic activities, declared or undeclared, hostilities, rebellion, revolution, insurrection, coup or usurped power or active duty in the military, naval or air forces of any country or international authority. 8. Aviation or aeronautics other than as a fare paying passenger on a duly licensed commercial aircraft. 9. The participation in any criminal event. 10. Racing of any kind other than on foot. 11. Nuclear radiation, or contamination or the use of ionization or combustion of any nuclear weapons. 12. Participation in all forms of professional sports competition with reward and income.

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 policy ends on the policy anniversary immediately preceding the Insured's 100th birthday.

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

Termination conditions

The Policy 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 Policy surrender. Such date is determined in accordance with the Company's applicable rules and regulations in relation to Policy surrender. 4. The termination of the Policy. 5. If the Policy Owner refuses to take the revised benefits by the Company according to the benefit term with such restrictions, limitations, and/or exclusions or pay the revised premiums, the Company can terminate the Policy when the new premiums have been due for 30 days. 6. The end of the Grace Period of any premiums due and not received by the Company.

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