

KEY PRODUCT RISKS

This document is intended to provide a brief summary of the key product risks only. Please refer to the Plan Terms and Conditions for details and for meanings of capitalised terms.

Change in Place of Residence

You must inform us of any change of Place of Residence (i.e. the jurisdiction(s) in which a person legally has the right of abode) of the Insured Person by giving us at least thirty (30) days' notice prior to the date of the next Renewal. We may apply any new Premium Loading to your policy upon Renewal to reflect any change in risks associated with the change of Place of Residence of the Insured Person.

If the new Place of Residence of the Insured Person is subject to Sanctions or war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power, we will consider the notification on a case-by-case basis, and may

- (a) apply any new Premium Loading upon Renewal to reflect any change in risks associated with the change of Place of Residence of the Insured Person; or
- (b) decide not to Renew the Plan and refund any premium(s) paid for the period in which no cover will be in place without interest.

Unless otherwise specified, this Plan contains no restrictions with respect to where the Insured Person travels to, studies or works.

“Place of Residence” shall mean the jurisdiction(s) in which a person legally has the right of abode. A change in the Place of Residence shall mean the situation where a person has been granted the right of abode of additional jurisdiction(s), or has ceased to have the right of abode of existing jurisdiction(s). For the avoidance of doubt, a jurisdiction in which a person legally has the right or permission of access only but without the right of abode, such as for the purpose of study, work or vacation, shall not be treated as a Place of Residence.

Location Intended for Sale and Applicable Law

This Plan is intended for sale only in Hong Kong.

If you or the Insured Person is temporarily or permanently outside of Hong Kong or subject to the laws of any other place, we are entitled to not comply with a particular term or condition of this Plan if we reasonably believe that we would breach any laws of Hong Kong or the place of your location by complying with such term or condition.

This might include declining to service some of your requests related to this Plan. We will not be liable for any losses, damages, claims, liabilities or costs you or any other relevant person may suffer from our exercise of our rights under this Section.

Termination

This Plan shall be automatically terminated at the earliest occurrence of the followings:-

- (a) when all four (4) Multiple Cover Benefits have been paid;
- (b) the death of the Insured Person;
- (c) the Plan Anniversary immediately following the eighty-fifth (85th) birthday of the Insured Person; and
- (d) the date on which this Plan is cancelled or terminated.

Termination of this Plan shall be without prejudice to any claim arising prior to such termination unless otherwise stated. The payment or acceptance of any premium hereunder subsequent

to termination of this Plan shall not create any liability upon us but we will refund any such premium without interest.

Product Feature Revision

We reserve the right to revise the Plan Terms and Conditions upon Renewal by giving you prior notice of at least thirty (30) days.

Premium Adjustment Risk

Standard Premium rates are not guaranteed and are subject to change based on our emerging experience in relation to claims, persistency and expenses and any change in the benefit structure. Therefore, Renewal premiums may be higher or lower than the premium currently reflected.

Credit and Solvency Risk

The payment of benefits under this Plan is subject to our credit and solvency risk. In the event of our insolvency, you may lose the coverage stipulated in this Plan in addition to any premiums you have paid.

Inflation Risk

Due to inflation, the costs of living and medical treatments may rise and the amount of benefit payable may become insufficient to meet the Beneficiaries' future needs even if our full contractual obligations are met. You are advised to consider the likely impact of future inflation when choosing a Sum Insured.

KEY EXCLUSIONS

No benefit will be payable under the Plan for Major Critical Illness, Major Surgical Procedure or death caused directly or indirectly, wholly or partly by any of the following events and/or in the following circumstances:

- (a) **Waiting period:** the Insured Person dies or suffers from any illness, the sign(s) and/or symptom(s) of or undergoes a surgery, the cause(s) and/or condition(s) which; are manifested within ninety (90) days following the Policy Effective Date (except for an illness or surgery caused directly by an Accident and diagnosed within ninety (90) days from the date of the Accident);
- (b) **Multiple Cover Benefit Waiting Period:** the Insured Person suffers from any illness (except for Subsequent Cancer) the sign(s) and/or symptom(s) of or undergoes a surgery the cause(s) and/or condition(s) which are manifested within a period of two (2) years following the date when the preceding Major Critical Illness Benefit or Multiple Cover Benefit becomes payable under this Plan;
- (c) **Survival Period:** the Insured Person fails to survive for at least fourteen (14) days from the date of diagnosis of the Major Critical Illness and/or the completion of the Major Surgical Procedure (except for the Major Medical Treatment (as defined in the **Definitions of Major Critical Illnesses and Surgical Procedures**), where the fourteen (14) -day survival period will commence from the date of discharge from the post-surgical care in the Intensive Care Unit (as defined in the **Definitions of Major Critical Illnesses and Surgical Procedures**));
- (d) **Pre-existing Condition(s);**
- (e) **HIV and AIDS:** any illness, disease, ptomaines or infection (except infection which directly results from an accidental cut or wound). This includes infection with any Human Immunodeficiency Virus (HIV) and/or any HIV-related illness including AIDS and/or any mutations, derivations or variations thereof, except for (1) AIDS/HIV due to Blood Transfusion or (2) Occupationally Acquired HIV (as defined in the **Definitions of Major Critical Illnesses and Surgical Procedures**);
- (f) **Drugs, suicide and illegal activities:**
 - (i) dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents;
 - (ii) intentional self-inflicted injuries;
 - (iii) attempted suicide or threatened suicide, while sane or insane;
 - (iv) illegal activity; or
 - (v) violation or attempted violation of the law, or resistance to arrest;
- (g) **Armed forces:** participation in any armed force or peace-keeping activities;
- (h) **Nuclear, biological, and chemical activities:** nuclear, biological, and chemical related activities. This includes, but is not limited to, nuclear fission, nuclear fusion, ionizing radiation or contamination by radioactivity from any nuclear fuel, nuclear waste resulting from combustion of nuclear fuels or nuclear weapons, or any act of nuclear, chemical or biological terrorism, including but not limited to the use of nuclear, biological or chemical weapons and agents; or
- (i) **War and terrorism:** revolutions and war (declared or undeclared), acts of terrorism.

The above paragraphs are for reference only. You should refer to “Part 3: What is not covered” in the Plan Terms and Conditions for the complete list and details of exclusions.

KEY PRODUCT INFORMATION

What conditions are covered under Multiple Cover Benefit

Each claim for a subsequent Major Critical Illnesses or Major Surgical Procedure (excluding Supplementary Coverages) must satisfy the definition as specified in the **Definitions of Major Critical Illnesses and Surgical Procedures**; and in the case of

- (a) a subsequent Heart Attack following any preceding Heart Attack claim(s) that we have paid, demonstrates fresh diagnostic findings evidencing occurrence and diagnosis of a new event;
- (b) a subsequent Stroke following any preceding Stroke claim(s) that we have paid, demonstrates fresh diagnostic findings evidencing occurrence and diagnosis of a new event and of new or increased neurological functional impairment;
- (c) a subsequent Cancer following any preceding Cancer claim(s) that we have paid, is:
 - (i) any Cancer that has reappeared, metastasised, continued without remission, or a new primary Cancer, that is diagnosed after your preceding Cancer claim; and
 - (ii) the Cancer exists at, or after the end of the Multiple Cover Benefit Waiting Period; and
 - (iii) the Insured Person has received Active Treatment for it in the 12 months immediately prior (except for a new primary cancer).

For avoidance of doubt, we do not cover Subsequent Cancer if it is your first Cancer claim. Any first Cancer claim under this benefit shall remain subject to Section 2.2.3 (b) and (d) in the Plan Terms and Conditions.

“Active Treatment” shall mean one or a combination of Interventions prescribed by or administered under the direct supervision of a Registered Medical Specialist as the best clinical option for the Insured Person; and approved by the government, relevant authorities and/ or recognized medical association of the country or region where the treatment is sought; for the purpose of prolonging the Insured Person's survival and/or increasing the likelihood of medical resolution or complete medical recovery.

"Intervention" above shall mean Cancer directed surgery, radiotherapy, cytotoxic chemotherapy, targeted therapy or immunotherapy. It does not include any treatment given solely as palliative care, hormonal therapy, or any other therapies or treatments not listed here.

What conditions are not covered under Multiple Cover Benefit

- (a) the same Major Critical Illness or Major Surgical Procedure for which a Major Critical Illness Benefit or Multiple Cover Benefit has already been paid (except for Heart Attack, Stroke and Cancer);
- (b) a Major Critical Illness or Major Surgical Procedure which, in our opinion (as confirmed by a Registered Medical Specialist acceptable to us):
 - (i) is a complication of;
 - (ii) arises in connection with;
 - (iii) results from; or
 - (iv) is a treatment fora condition for which a Major Critical Illness Benefit or Multiple Cover Benefit has already been paid (except for Subsequent Cancer)
- (c) any subsequent Coronary Artery By-Pass Grafts or Other Serious Coronary Artery Disease, if Major Critical Illness Benefit or Multiple Cover Benefit has already been paid for Heart Attack;
- (d) any Major Critical Illness (except for Subsequent Cancer) or Major Surgical Procedure that occurred or was diagnosed during the Multiple Cover Benefit Waiting Period.

The above paragraphs are for reference only. You should refer to “Part 2: What is covered” in the Plan Terms and Conditions for the details.