

Voluntary Health Insurance Scheme (“VHIS”) - General Underwriting Guidelines & Disclosure Obligations

自願醫保計劃 - 一般核保指引及披露責任

With the approval of Health Bureau (“HB”), Chow Tai Fook Insurance Company Limited (“the Company”) has successfully registered as a qualified VHIS provider (Registration Number: 00028). The Company currently offers 5 VHIS Certified Plans which are “WiseCare” Medical Insurance Plan¹ “BetterCare” Medical Insurance Plan², “TopCare” Medical Insurance Plan³, “FlexiCare” Medical Insurance Plan⁴ and “ChampCare” Medical Insurance Plan⁵. For details, please refer to the relevant product brochure and Terms and Benefits.

周大福人壽保險有限公司（「本公司」）已成功獲得醫務衛生局（「醫衛局」）批准註冊成為合資格自願醫保的產品提供者（註冊編號：00028）。本公司現提供五款自願醫保認可產品：「卓康保」醫療保障計劃¹、「樂康保」醫療保障計劃²、「摯康保」醫療保障計劃³、「悅康保」醫療保障計劃⁴和「逸康保」醫療保障計劃⁵。詳情請參閱相關之產品小冊子及保單條款及保障。

For new insurance application(s), the Company would follow VHIS underwriting guidelines formulated by the Company for risk assessments and underwriting decisions. Underwriting factors include but not limited to health questionnaire or health-related information, issue age, occupational grouping and place(s) of residence. If there is insufficient information on an application, the Company may postpone handling such application until all requested information and/or document(s) have been provided. Possible underwriting decisions to be made by the Company after assessment are set out below:

- 1) Acceptance of insurance application with Standard Premium offer; or
- 2) Acceptance of insurance application with Premium Loading offer; or
- 3) Acceptance of insurance application with Case Based Exclusion (s) offer; or
- 4) Acceptance of insurance application with Premium Loading and Case-Based
- 5) Exclusion(s) offer; or Decline of insurance application.

The Company will notify policy servicing representative with reasons and details of applying Premium Loading and/or Case-Based Exclusion(s), or decline of application, which the message will be delivered to Policy Holders/Insured Persons.

對於新投保申請，本公司將遵照本公司制定之自願醫保產品核保指引作風險評估及承保決定。核保因素包括但不限於健康問卷或相關健康資料、繕發年齡，職業分類和居住地域。如個別申請資料不足，本公司或會延後處理有關申請，直至申請人已提交所有所需文件及／或資料。經本公司評估後可採取之承保決定詳列如下：

- 1) 接受以標準保；或
- 2) 接受以附加保費承保；或
- 3) 接受以指定不保事項承保；或
- 4) 接受以附加保費及指定不保事項承保；或
- 5) 拒絕投保申請。

本公司會通知保單業務代表附加保費及／或指定不保事項，或拒絕申請的原因和詳情，而該資訊會傳遞至保單持有人或受保人。

For existing Policy Holders/Insured Persons having in-force eligible medical plan(s) of the Company, the Company had already offered those Policy Holders with an one-off migration arrangement from their existing medical plan(s) to a VHIS Certified Plan through designated underwriting process and/or answering health questionnaire where required (“the migration”) upon launch of VHIS in 2019. The migration arrangement was optional and the relevant Policy Holders could opt for a new VHIS Certified Flexi Plan (different designated Flexi Plans as product offerings) or a Standard Plan upon requests. In any event that the migration does not proceed successfully (e.g. owing to rejection of migration application after underwriting, or the Policy Holder refused to accept the Company’s underwriting decision to accept the migration application with Premium Loading and/or Case- Based Exclusion(s) offer, etc.) the relevant Policy Holder may choose to keep and maintain his/her existing medical plans according to their medical need.

對於現持有本公司生效之合資格醫療計劃的保單持有人或受保人，本公司已於2019年自願醫保推出時根據指定核保程序及／或回答健康問卷（如需要），為保單持有人提供一次性由現有醫療計劃轉移至自願醫保計劃的安排（「該轉移」）。然而，該轉移是非強制的，相關保單持有人可選擇以新投保申請自願醫保靈活計劃（不同的指定靈活計劃可供選擇）或要求選擇標準計劃。若轉移最終不成功（例如因本公司在核保後，拒絕轉移申請，或有關保單持有人拒絕接受本公司以附加保費及／或以個別不保事項接受轉移申請之核保決定等），有關保單持有人可根據其醫療需要選擇保留和維持其現有之醫療計劃。

Last but not least, if customers do not fulfill the obligation for disclosure, i.e. misrepresentation, non-disclosure or any fraud detected, the Company has the right to declare the Terms and Benefits void from the Policy Effective Date and notify the Policy Holder that no coverage shall be provided for the Insured Person.

最後但同樣重要，若客戶未能實行披露義務，如：虛假陳述、不披露或檢測任何欺騙行為，本公司有權宣布本保單條款和保障自保單生效日期起無效，並通知保單持有人受保人無保險保障。

For VHIS Certified Plans applications, only one Policy Holder is allowed per policy.

每份自願醫保計劃保單只允許一名保單持有人。

Remarks 備註：

1. Certification Number of "WiseCare" Medical Insurance Plan: S00028-01-000-03 (This plan is a certified Standard Plan)

「卓康保」醫療保障計劃認可編號：S00028-01-000-03 (此計劃為認可標準計劃)

2. Certification Number of "BetterCare" Medical Insurance Plan: F00021-01-000-03, F00021-02-000-03, F00021-03-000-03, F00021-04-000-03, F00021-05-000-03 and F00021-06-000-03 (This plan is a certified Flexi Plan)

「樂康保」醫療保障計劃認可編號：F00021-01-000-03、F00021-02-000-03、F00021-03-000-03、F00021-04-000-03、F00021-05-000-03及F00021-06-000-03 (此計劃為認可靈活計劃)

3. Certification Number of "TopCare" Medical Insurance Plan: F00037-01-000-03, F00037-02-000-03, F00037-03-000-03, F00037-04-000-03, F00037-05-000-03, F00037-06-000-03, F00037-07-000-03 and F00037-08-000-03 (This plan is a certified Flexi Plan)

「摯康保」醫療保障計劃認可編號：F00037-01-000-03, F00037-02-000-03, F00037-03-000-03, F00037-04-000-03, F00037-05-000-03, F00037-06-000-03, F00037-07-000-03 and F00037-08-000-03 (此計劃為認可靈活計劃)

4. Certification Number of "FlexiCare" Medical Insurance Plan: F00064-01-000-03, F00064-02-000-03, F00064-03-000-03, F00064-04-000-03 (This plan is a certified Flexi Plan)

「悅康保」醫療保障計劃認可編號：F00064-01-000-03, F00064-02-000-03, F00064-03-000-03, F00064-04-000-03 (此計劃為認可靈活計劃)

5. Certification Number of "ChampCare" Medical Insurance Plan : F00077-01-000-01, F00077-02-000-01, F00077-03-000-01, F00077-04-000-01, F00077-05-000-01, F00077-06-000-01, F00077-07-000-01, F00077-08-000-01, F00077-09-000-01, F00077-10-000-01, F00077-11-000-01, F00077-12-000-01, F00077-13-000-01, F00077-14-000-01 (This plan is a certified Flexi Plan)

「逸康保」醫療保障計劃認可編號：F00077-01-000-01, F00077-02-000-01, F00077-03-000-01, F00077-04-000-01, F00077-05-000-01, F00077-06-000-01, F00077-07-000-01, F00077-08-000-01, F00077-09-000-01, F00077-10-000-01, F00077-11-000-01, F00077-12-000-01, F00077-13-000-01, F00077-14-000-01 (此計劃為認可靈活計劃)

周大福人壽保險有限公司

(於百慕達註冊成立之有限公司)

CTF Life Insurance Company Limited

(Incorporated in Bermuda with limited liability)