CTF Life
周大福人壽

“Move Beyond”

Personal Accident Plan

Life Protection+ Series

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"Move Beyond" Personal Accident Plan

Accidents can happen at any time, whether in daily life or during sports activities. When they do, they may not only result in medical expenses but also bring additional pressure to your everyday life. **Chow Tai Fook Life Insurance Company Limited ("CTF Life")** proudly presents the **"Move Beyond" Personal Accident Plan ("Move Beyond" / "the Plan")** to help you stay protected. The Plan **provides protection against accidental risks in everyday life and, especially for sports enthusiasts, offers a doubled limit for the Accidental Inpatient Medical Expenses Benefit**, giving you extra support as you push and embrace new challenges with confidence.

From everyday life to every competition,
protecting you through courageous challenge.

Plan Features*

Regardless of age or gender, enjoy one flat-rate premium.
Just HKD 1 per day, making protection simpler and more accessible.

Accidental Inpatient Medical Expenses Benefit[1]

The Plan provides an **Accidental Inpatient Medical Expenses Benefit of up to HKD 10,000 (per accident) for eligible inpatient medical expenses arising from accidental injury.** Reimbursement is based on the actual expenses incurred and may cover medical practitioner consultation fees, surgical fees, room and board, as well as follow-up consultations after discharge, so you can focus on recovery with greater peace of mind.

Doubled Limit for Designated Sport Events[2,3]

If the Insured **unfortunately sustains an accidental injury while participating in a Designated Sport Event[2], the benefit limit of the Accidental Inpatient Medical Expenses Benefit will be doubled to a maximum of HKD 20,000 (per accident)[3]**, further strengthening the protection so you can enjoy every challenge and perform at your best with confidence.

Accidental Outpatient Care Benefit[4]

If the Insured suffers an **accidental injury and needs outpatient or emergency consultation, the Plan will reimburse eligible medical expenses**, including prescribed western medication, dressings, physiotherapy and diagnostic imaging tests etc, up to HKD 380 (once per policy year).

Accidental Death Benefit

If the Insured **dies within 180 days from the date of an accident that causes the injury**, the Plan will provide an Accidental Death Benefit of HKD 100,000 payable to the beneficiary.

Compassionate Death Benefit

Upon the death of the Insured, whether due to an accident or any other cause, the Plan will provide a **Compassionate Death Benefit** of HKD 10,000, offering timely financial support and care for the family.

For further details of the Plan, please contact your financial consultant, call the CTF Life Customer Service Hotline at 2866 8898, or browse the Company's website at www.ctflife.com.hk.

* For details of the benefits, terms and benefit limitations, please refer to the Benefit Schedule and the relevant policy documents.

At-a-Glance Table

Basic Information	
Policy Type	Basic Plan
Policy Currency	HKD
Issue Age	15 days to age 45
Benefit Term	Up to age 60
Premium Mode	Annual payment
Annual Premium	HKD 365

Benefit Schedule

Benefit Item#	Benefit Limit (HKD)
Accidental Inpatient Medical Expenses Benefit	
i. Maximum amount per accident	10,000 (increased to 20,000 if the accident occurs during a Designated Sport Event[2] and the specified conditions are fulfilled[3])
ii. Maximum amount per Policy Year	20,000
Accidental Outpatient Care Benefit (Maximum amount per accident)	380 (once per policy year)
Accidental Death Benefit	100,000
Compassionate Death Benefit	10,000

For details of the benefits, terms and conditions, please refer to the Policy Provisions.

Remarks

1. If the Insured is confined in a hospital for 3 or more consecutive days within 24 hours from the date of the accident that causes the Injury, the Company shall reimburse the actual charges incurred for the following Medically Necessary treatments or services, provided that such eligible expenses and/or charges are Reasonable and Customary and comply with the principle of "Medically Necessary", subject to the maximum benefit limit stated under the Accidental Inpatient Medical Expenses Benefit, including: (i) visits and/or consultations by the attending Medical Practitioner and/or Specialist during confinement; (ii) room and board (including meals provided by the hospital); (iii) admission to the Intensive Care Unit; (iv) surgical treatment performed by a Surgeon (including the relevant fees and charges of an anaesthetist and the operating theatre); (v) diagnostic imaging tests, Physiotherapy, drugs and medicines prescribed by the attending Medical Practitioner and/or Specialist and consumed by the Insured during confinement, and any other medical services charged as miscellaneous charges by the hospital; (vi) outpatient visit or emergency consultation prior to confinement; (vii) follow-up outpatient visits and/or consultations to the attending medical practitioner and/or specialist within 90 calendar days after the discharge from the hospital; and (viii) dental care or surgery necessitated by the Injury, and not being replacement of natural teeth, or installation, removal or replacement of denture or prosthesis such as bridges or crowns, or any related expenses.
2. Designated Sport Events include fencing, football or basketball competitions or events organised or sponsored by The Schools Sports Federation of Hong Kong, China or the Company, as well as Covered Public Running Events, which refer to running, including cross-country running, marathons, road running and trail running, but excluding any multi-discipline sports with running as one of its elements. The details, definitions and applicable scope of Designated Sport Events shall be determined and amended by the Company from time to time. Please refer to the Policy Provisions for details.
3. The maximum amount per accident for the Accidental Inpatient Medical Expenses Benefit will be increased by 100% if all of the following conditions are fulfilled: (i) the Insured is a participant in a Designated Sport Event, meaning the Insured is a contestant in or participates in the Designated Sport Event other than being a volunteer or spectator, and sustains an Injury during the covered period of such Designated Sport Event; (ii) the medical expenses incurred due to the same Injury shall be payable under the Accidental Inpatient Medical Expenses Benefit; and (iii) satisfactory proof acceptable to the Company is provided to prove that the Insured was a registered participant in the Designated Sport Event that causes the Injury.
4. If the Insured receives Medically Necessary treatments or services from a Medical Practitioner in an outpatient unit of a hospital or a clinic within 24 hours from the date of the accident that causes the Injury, the Company shall reimburse the actual expenses incurred for the consultations, western medications prescribed, dressings, physiotherapy and/or diagnostic imaging tests, provided that such expenses are Reasonable and Customary and comply with the principle of "Medically Necessary". This Accidental Outpatient Care Benefit shall not pay or be payable for any treatment or service received in an outpatient visit or emergency consultation prior to confinement; such expenses shall be paid or payable under the Accidental Inpatient Medical Expenses Benefit.

Disclosure of Important Information:

1. Cooling-off Right

If you wish to exercise the cooling-off right, you may cancel the purchased policy by giving us written notice and obtain a refund of the premium and levy paid. The written notice must be signed by you and submitted to our office at 7/F, NEO, 123 Hoi Bun Road, Kwun Tong, Kowloon, within 21 days immediately following the day of delivery of the policy or the Cooling-off Notice to you or your designated representative, whichever is earlier. The Cooling-off Notice should state that the policy is ready and specify the expiry date of the cooling-off period.

2. Grace Period

A grace period of 31 days (the "Grace Period") will be allowed on each premium due date for you to pay the premium, during which the policy will remain in force. If you do not pay the premium on or before the premium due date, that premium will be overdue. If the premium remains unpaid at the end of the Grace Period, the policy will terminate from the last premium due date. Unless the overdue premium is paid before the end of the Grace Period, the policy will be automatically terminated, you will lose the protection under the policy, and we will not be liable to pay any benefit arising from any event occurring during the Grace Period.

3. Key Product Risks

i. Policy Reinstatement
If the policy lapses and terminates due to non-payment of any premium, you may apply for reinstatement within 6 months from the premium due date of the premium in default, subject to the Company's prevailing administrative requirements. Please refer to the Policy Provisions for details of policy reinstatement.

ii. Inflation Risk
When reviewing the benefit limits under the Benefit Schedule, please note that the cost of living in the future may be higher than it is today due to inflation. In such circumstances, even if the Company fulfils all of its contractual obligations under the policy, you will receive less in real terms.

4. Other Key Product Risks

i. "Move Beyond" Personal Accident Plan is issued in Hong Kong dollars. The premiums received by us in a currency different from your policy currency will be converted to the policy currency at the prevailing exchange rate determined by us from time to time with reference to market rates.

ii. All monies payable under your policy will be paid in HK dollars, or in the policy currency upon your request. The amount payable by us in a currency different from your policy currency will be converted at the prevailing exchange rate determined by us from time to time with reference to market rates. Therefore it may be subject to foreign exchange risks in the process of currency conversion.

iii. "Move Beyond" Personal Accident Plan is a policy issued by the Company. The policy benefits are subject to the Company's credit risk.

5. Change in Occupation

If the Insured changes occupation or job duties or engages in an additional occupation, the Insured should inform the Company in writing within 1 month of such change so that the Company may conduct underwriting reassessment. Please refer to the Policy Provisions for details.

6. General Exclusions

The Plan shall not cover any loss, death or expenses arising directly or indirectly from or caused by any of the following:

i. war, declared or undeclared, revolution or any warlike operations ;
ii. violation or attempted violation of the law or resistance to arrest;
iii. engaging in services in armed forces in times of declared or undeclared war or while under orders for warlike operations or restoration of public order;
iv. entering, exiting, operating, being transported, or in any way engaging in air travel except as a fare paying passenger in any aircraft operated by a commercial passenger airline on a regular scheduled passenger trip over its established passenger route;
v. childbirth, miscarriage, pregnancy, or any connected complications notwithstanding that such event may have been accelerated or induced by Injury;
vi. engaging in a sport in a professional capacity or where the Insured would or could earn income or remuneration from engaging in such sport;
vii. Acquired Immune Deficiency Syndrome or AIDS, and/or any illness or Injury commencing in the presence of a seropositive test for human immunodeficiency virus (HIV), and any related disease;
viii. self-inflicted injury including suicide or any attempt thereat while sane or insane and/or any event of consumption of or being under the influence of alcohol, poison, medication, drugs or sedatives unless prescribed by a Medical Practitioner;
ix. disease or infection (except illnesses causing infections which occur due to an accidental cut or wound);
x. 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 ;
xi. any confinement, surgery, medical treatment, investigation, service or supplies which are not Medically Necessary, any charges which exceed the Reasonable and Customary charges as determined by the Company; or
xii. any confinements solely for the purpose of allied health services including but not limited to Physiotherapy, occupational therapy and speech therapy .

7. Medically Necessary

Eligible medical expenses are subject to the principle of "Medically Necessary". "Medically Necessary" means confinement, treatment, procedure, supplies or other medical services which are required for the diagnosis or direct treatment of the Insured's Injury; and are appropriate with regard to the signs and symptoms of the Insured's Injury; and are generally accepted by the medical profession in Hong Kong as effective, appropriate and essential based upon recognised standards of the health care specialty involved; and are not experimental, preventive, screening or investigative in nature; and, for confinement only, where the Insured's Injury could not safely and adequately be treated without confinement.

8. Policy Termination, Premium Adjustment and Changes to Product Content

i. Policy Termination
The policy will terminate upon the earliest occurrence of any of the following circumstances:
(a) any non-payment of premiums by the Policy Owner at the end of the Grace Period; or
(b) your request to surrender or terminate the policy is accepted by the Company; or
(c) matures on the policy end date; or
(d) the death of the Insured.
The Company reserves the right for non-renewal of the policy under the Plan, provided that the Company gives written notice 30 days before the policy anniversary.

ii. Premium Adjustment
To continue providing you with protection, we will regularly review the premium rates of the Plan. If necessary, we may make corresponding premium adjustments, provided that the written notice of the premium rates will be given not less than at least 30 days before the policy anniversary. Factors considered in reviewing premium rates include but are not limited to:
(a) claim costs incurred from all policies under this plan and the expected claim outgo in the future which reflects medical trends, medical cost inflation and the change in the product features revision
(b) historical investment returns and the future outlook of the product's backing asset
(c) policy surrenders and lapses
(d) expenses directly related to the policy and indirect expenses allocated to this product

iii. Changes to Product Content
We reserve the right to revise the benefits and/or any restrictions/limitations of the Plan by giving at least 30 days' written notice of such changes before the policy anniversary.
Unless you notify us in a written request to cancel the Plan within 30 days after such revisions take effect, the revised premium, benefits and/or restrictions/limitations will take effect automatically on the next policy anniversary. If you have paid the revised premium before we receive your cancellation notice, we will refund such premium to you without interest.

9. Benefit Limitations

(a) We will not cover (i) any Pre-existing Condition and (ii) any loss or disability that is suffered by the Insured prior to the accident or already exists when the accident happens. Pre-existing Condition is the existence of a condition of the Insured for which medical advice, diagnosis, care or treatment was recommended or received before the policy effective date or the date of any reinstatement (whichever is later); or any sign or symptom within a 5-year period immediately preceding the policy effective date or the date of any reinstatement (whichever is later).
(b) Please note that no benefits shall be paid or payable if the Insured is confined, treated, Unequivocally Diagnosed, undergone, or certified in Mainland China (excluding Hong Kong and Macau Special Administrative Region), unless it is a hospital of Grade 2A or above as classified by the government of the People's Republic of China, or in a hospital which is on the list of approved hospitals as determined by us from time to time, and such list of approved hospitals will be provided to the Policy Owner upon request.

10. Claims Procedures and Proof of Injury

If you need to make a claim, the Policy Owner must give us written notice within 30 days from the date of the accident and submit the required forms and documentary proof within 90 days from the date of the accident. You may download the Accident Claim Form from the "Claims Support" section of the Company's website, obtain the claim form from your financial consultant, or call the CTF Life Customer Service Hotline at 2866 8898.

11. Policy Cancellation

The Company reserves the right to cancel the policy under the Plan at any time by giving at least 30 days' prior written notice to the Policy Owner. We will refund the excess premium on a pro-rata basis.

"Move Beyond" Personal Accident Plan may be purchased as a standalone policy and does not need to be bundled with other type(s) of insurance products. You are required to read the relevant product brochure, policy provisions and illustrations of the Plan presented by your licensed insurance intermediary in order to fully understand the details of the definitions, charges, product features, exclusions, and conditions of payment of claims, etc., as well as complete terms and conditions.

This document is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or a solicitation to buy or provision of any of our products outside Hong Kong. Chow Tai Fook Life Insurance Company Limited hereby declares that it has no intention to offer to sell, to solicit to buy or to provide any of its products in any jurisdiction other than Hong Kong in which such offer to sell or solicitation to buy or provision of any product of Chow Tai Fook Life Insurance Company Limited is illegal under the laws of that jurisdiction.

A person who is not a party to the policy (including but not limited to the Insured and the Beneficiary) has no right to enforce any terms of the policy. The Contracts (Rights of Third Parties) Ordinance does not apply to the policy nor any document issued pursuant to the policy.

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Chow Tai Fook Life Insurance Company Limited
(Incorporated in Bermuda with limited liability)

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