



出擊

就是最佳防衛

Fearless!

攻守道癌症保障計劃
Fearless Cancer Protection Plan

危疾保障 · 分紅壽險
Critical Illness Protection • Participating life

出擊就是最佳防衛 Fearless!

人生是實踐理想的場地。有挑戰，就有超越的可能。癌症一直都是都市人的其中一個重大的顧慮，但富衛相信，它不過是困難的一種。周全備戰，不足畏懼。**攻守道癌症保障計劃**（「本計劃」）助您360°面對挑戰。針對確診癌症，本計劃將提供投保額之100%作為癌症權益¹（如適用）。本計劃亦體貼您的所需，於確診患上癌症起2年內提供中醫診症、營養師諮詢、心理輔導及物理治療之延伸癌症治療權益²。從此，讓您無慮延展生命，敢想，敢實現。

Life is a journey of fulfilling your dreams. Challenges open up a world of possibilities! One of the biggest fears in life has always been cancer, but we believe it is only a hurdle you can face without fear providing you are adequately prepared. **Fearless Cancer Protection Plan** (the “Plan”) helps you to face the challenge with a 360° support and provides 100% of Sum Insured as Cancer Benefit¹ (if applicable). To cater to your specific needs, the Plan offers a range of Post Cancer Treatment Benefits² within 2 years from the first confirmed diagnosis of cancer, including Chinese Medicine Consultation, Dietician Consultation, Counselling Services and Physiotherapy, helping you to live your life without fear!

速度戰勝疾病

Win with prompt action

及早發現，及時治療，是戰勝癌症的關鍵。本計劃提供多達兩次原位癌或早期癌症權益³的保障賠償，每次可獲預支相等於投保額之20%作賠償金額（每名被保人每次最高賠償額為240,000港元 / 30,000美元）（「預支限額」）。被保人自能把握時機，儘早進行最優質治療。

An early detection and prompt treatment is a key to win the battle against cancer. The Plan provides up to 2 claims of Carcinoma-in-situ or Early Stage Cancer Benefit³ and each claim offers an advance payment equivalent to 20% of Sum Insured (subject to a maximum of HK\$240,000 / US\$30,000 per claim per insured) (“Limited Advanced Payment”). Thereby enabling you to focus on getting the best treatment available as early as possible.



頂尖醫療團隊 讓您輕鬆安心

Top medical team for your peace of mind

治療要心無旁騖，人必須心安，富衛承諾給您最貼心服務。一旦確診癌症，美國最頂尖醫療機構可為您上陣，給予第二次醫療意見⁷。業內最優秀醫師，候命協助。除了癌症專家，本計劃亦可提供轉介服務（「家庭關懷服務」）⁸幫助安家。透過家庭關懷服務，您可立即獲得一系列精心挑選的轉介服務，包括家居清潔、養生湯水、托兒、寵物護理等。

An optimal treatment requires complete peace of mind. At FWD we are committed to giving you the most considerate care. As soon as cancer is diagnosed, a top U.S. medical institution can consult for a Second Medical Opinion⁷, with a team of renowned doctors ready to assist. Apart from cancer specialists, the Plan can also provide referral service (“Family Care Services”)⁸ to help with taking care of your home. Through Family Care Services, you have immediate access to a wide range of carefully selected referral services including home-cleaning service, Chinese soup service, child care service and pet care service.





全身而退 全新開始

A new beginning with a full premium refund

於保單期滿日，您更可獲得100%總已繳保費回贈(不包括任何利息)⁴，讓您在人生旅途上，繼續享受精彩人生。即使您選擇提早退保，亦可根據保費回贈表所示的總已繳保費的既定百分比，獲得退回部分保費⁴。此外，本計劃並會發放特別紅利⁵ (如有)，加強您作為治療癌症或追求理想的儲備。

Upon policy maturity date, 100% of total premiums paid will be refunded (without interests)⁴, enabling you to continue to enjoy an enriching life. Even in the case of surrender, a partial amount of the total premiums paid according to the designated percentage of Refund of Premium Table could still be refunded⁴. In addition, the Plan offers Special Bonus⁵ (if any) to give you extra leverage in your cancer treatment or in pursuing your dreams.



輕鬆投保 放心交託

Simple application, your future in safe hands

本計劃投保簡易，保費相宜⁹。您只須回答幾條有關核保需要的問題便可作出投保而無須進行任何身體檢查或提交有關健康狀況證明¹⁰。從此，您只須盡情拓展人生。

Application is quick and easy with affordable premiums⁹. Simply answer a few underwriting questions without the need for any medical check-up or submission of proof of health¹⁰. You can then concentrate on living your life to the fullest.



敢變 應萬變

Embracing the changes in life

隨著人生階段轉變，需求亦變。本計劃提供彈性配合您所需，不論您當時的健康狀況如何，讓您在40及/或65歲(下次生日年齡)自由選擇投保一份新的癌症保障計劃⁶而無需提交任何可受保證明。

As you enter into different life stages, your needs may change. The Plan provides the flexibility for you to freely apply for a new cancer protection plan⁶ when you turn 40 and / or 65 years old (Age Next Birthday) irrespective of your health condition at the time without evidence of insurability.

計劃種類 Plan Type	基本計劃 Basic Plan		
保障年期 Benefit Term	至85歲 To age 85		
投保年齡 (下次生日年齡) Issue Age (Age Next Birthday)	1 - 65	1 - 60	1 - 55
保費供款年期 Premium Payment Term	10年 10 years	15年 15 years	20年 20 years
保費結構 Premium Structure	保費為非保證 ⁹ , 但不會按照被保人之下次生日年齡而增加。 The premium is non-guaranteed ⁹ but it will not be increased based on the age of the Insured on his or her next birthday.		
保單貨幣 Currency	港幣 HKD / 美元 USD		
繳付方式 Premium Payment Mode	每月 / 每半年 / 每年 Monthly / Semi-Annually / Annually		
最低投保額 Minimum Sum Insured	180,000港元 / 22,500美元 (每保單計) HK\$180,000 / US\$22,500 (per policy)		
最高投保額 Maximum Sum Insured	10,000,000港元 / 1,250,000美元 (每被保人計) ¹¹ HK\$10,000,000 / US\$1,250,000 (per life) ¹¹		
退保價值 ⁴ Surrender / Maturity Benefit ⁴	保費回贈 (按以下保費回贈表之既定百分比) + 特別紅利 ⁵ (如有) Refund of Premium (based on the designated percentage as shown in the below Refund of Premium Table) + Special Bonus ⁵ (if any)		
	保費回贈表 (不包括利息) Refund of Premium Table (without interest)		
	保單年度完結 End of Policy Year		保費回贈 (總已繳保費的百分比) Refund of Premium (Percentage of Total Premiums Paid)
	1 - 9	0%	
10 - 14	5%		
15 - 19	20%		
20 - 24	35%		
25 - 29	50%		
30 - 34	65%		
第35個保單年度完結及以後 (至保單期滿日前) End of the 35 th policy year and thereafter (before the policy maturity date)	80%		
保單期滿日 (85歲) Policy maturity date (age 85)	100%		
癌症權益 ¹ Cancer Benefit ¹	投保額的100% + 特別紅利 ⁵ (如有) - 預支限額 100% of the Sum Insured + Special Bonus ⁵ (if any) - Limited Advanced Payment		
原位癌或早期癌症權益 ³ (每被保人最多2次) Carcinoma-in-situ or Early Stage Cancer Benefit ³ (maximum 2 claims per insured)	每次為預支投保額的20% (每名被保人每次最高賠償為 240,000港元 / 30,000美元) + 按比例之特別紅利 ⁵ (如有) Advanced payment of 20% of the Sum Insured (subject to a maximum of HK\$240,000 / US\$30,000 per claim per insured) + a proportionate Special Bonus ⁵ (if any)		
延伸癌症治療權益 ² (中醫診症、心理輔導、營養師諮詢及物理治療) Post Cancer Treatment Benefit ² (Chinese Medicine Consultation, Counseling Services, Dietician Consultation and Physiotherapy)	每日1次, 每次就診最高賠償額600港元 / 75美元, 終身合計限額最多20次 (適用於首次確認診斷患上癌症日起計2年內之延伸癌症治療權益之指定治療) Up to US\$75 / HK\$600 per visit, 1 visit per day and 20 visits per lifetime (applicable to designated treatments under Post Cancer Treatment Benefit within 2 years from the date of first confirmed diagnosis of cancer)		
身故權益 ¹² Death Benefit ¹²	保費回贈 (按以上保費回贈表之既定百分比) + 特別紅利 ⁵ (如有) + 10,000港元 / 1,250美元 Refund of Premium (based on the designated percentage as shown in the above Refund of Premium Table) + Special Bonus ⁵ (if any) + HK\$10,000 / US\$1,250		
於指定年齡可增購癌症保障計劃 ⁶ Option to apply for new cancer protection plan at specified age ⁶	可選擇於緊接被保人40及 / 或65歲 (下次生日年齡) 當日或之後的保單週年可購買一份新的癌症保障計劃而無需提交任何可受保證明。(每被保人合計可增購之上限為原本基本投保額的100%或1,000,000港元 / 125,000美元, 以較低者為準) Option to apply for a new cancer protection plan upon the Policy Anniversary which immediately comes on or after the respective ages of 40 and / or 65 (Age Next Birthday) of the insured without evidence of insurability. (the aggregate maximum of the Sums Insured shall be 100% of initial Sum Insured at the inception of original policy or HK\$1,000,000 / US\$125,000 per insured, whichever is lower)		

家庭關懷服務⁸
Family Care Services⁸

服務支援 - 於原位癌或早期癌症權益或癌症權益賠償後，可獲得一系列的服務的轉介，包括以下任何各項服務：· 家居清潔服務 · 養生湯水服務 · 托兒服務 · 寵物護理服務
Service Program - refer a series of services upon Cancer Benefit or Carcinoma-in-situ or Early Stage Cancer Benefit has been paid, including the below items: • Home-cleaning service • Chinese soup service • Child care service • Pet care service

第二醫療意見⁷
Second Medical Opinion⁷

服務支援
Service Program

有關權益限制及不保事項之詳情，請參閱相關保單條款。

Limitation of benefits and exclusions apply, please refer to the relevant Policy Provisions for details.

特定器官之原位癌或早期癌症 Carcinoma-in-situ or early stage malignancy of specific organs

特定器官之原位癌 Carcinoma-in-situ of specific organs

乳房 Breast	睪丸 Testes
子宮頸 Cervix Uteri	前列腺 Prostate
子宮 Uterus	其他特定器官 (結腸及直腸、陰莖、肺、肝臟、胃及食道、鼻咽及泌尿道 (而膀胱原位癌是指包括患有Ta級別的膀胱乳頭狀癌)) Other specific organs (colon and rectum, penis, lung, liver, stomach and esophagus, nasopharynx and urinary tract (for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included))
卵巢 Ovary	
輸卵管 Fallopian Tube	
陰道 Vagina	
特定器官之早期癌症	Early stage malignancy of specific organ
早期慢性淋巴性白血病	Chronic lymphocytic leukaemia

有關特定器官的原位癌或早期癌症詳情，請參閱附於保單內之「特定器官之原位癌或早期癌症定義詮釋」。

Please refer to the "Definition of Carcinoma-in-situ or Early Stage Malignancy of Specific Organs" as set out in the policy for details of carcinoma-in-situ or early stage malignancy of specific organs.

備註：

- 癌症權益只保障受保癌症。受保癌症指惡性腫瘤，其特徵為惡性細胞漸進地不受控制地生長及擴散，侵入及破壞正常及周邊組織。主要的介入性治療或大型手術被認為是必要的，或已經進行舒緩治療。癌症必須由組織病理學報告證實腫瘤呈陽性。以下的情況除外：(i)除慢性淋巴性以外的白血病類別中，沒有造成造血骨髓內白血病細胞廣泛擴散的情況；(ii)原位癌 (包括子宮頸上皮內贅瘤CIN-1、CIN-2及CIN-3) 或組織學上被界定為癌前病變的情況；(iii)所有皮膚癌，除非能夠證實腫瘤已經轉移或是利用Breslow 組織學檢驗方法證明最高厚度超過1.5mm的惡性黑色素瘤；(iv)非致命的癌症，如TNM組織學分期在T1(a)或T1(b) (或其他分級方法中同等或更低分級) 的前列腺癌；(v)微小甲狀腺乳頭狀癌；(vi)非侵入性膀胱乳頭狀癌，組織學上被界定為TaNOM0或更低的分級；(vii)RAI級別I或Binet級別A-I或以下級別的慢性淋巴性白血病。若與被保人之相關癌症有關的症狀之呈現、狀況之產生或相關診斷是在保單簽發日或最後批准復效日 (以較遲者為準) 起計90日內發生，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」或「我們」) 將不會支付癌症權益。若被保人於首次確認診斷患上癌症的14日後仍然生存，本計劃會支付癌症權益，但倘若被保人於該14日內身故，則本計劃只會支付身故權益。每張本計劃保單下的癌症權益，只會就被保人終身賠償一次。當癌症權益支付以後，投保人無需繼續繳付任何保費及富衛的責任只限於提供延伸癌症治療權益。癌症權益和身故權益將不會同時被支付。如原位癌或早期癌症權益曾被或應被支付，預支限額將減低應付的癌症權益及特別紅利 (如有) 將會按比例相應減少。有關癌症權益的條款及細則、受保癌症之詳情及定義及不保事項，請參閱保單條款。
- 只適用於在癌症權益獲賠償的情況下，於首次確認診斷患上癌症日起計2年內，富衛將會按延伸癌症治療權益就治療該受保癌症之合理及慣常的收費以實報實銷形式作出賠償。每名被保人每次就診最高賠償額為600港元 / 75美元 (每日1次)，終身合計上限最多20次。即使被保人受保於多於1份本計劃之保單，每被保人 (以終身計) 之延伸癌症治療權益上限仍為每日1次，每次600港元 / 75美元 (終身合計上限最多20次)。
- 原位癌或早期癌症權益只保障特定器官之原位癌或早期癌症。若與被保人之相關原位癌或早期癌症有關的症狀之呈現、狀況之產生或相關診斷是在保單簽發日或最後批准復效日 (以較遲者為準) 起計90日內發生，富衛將不會支付原位癌或早期癌症權益。最多可獲2次的原位癌或早期癌症權益賠償 (每被保人計) 必須為兩處不同特定器官的原位癌或早期癌症，每名被保人每次上限為240,000港元 / 30,000美元，當此權益獲預支後，預支限額將減低應付的癌症權益及特別紅利 (如有) 將會按比例相應減少，但有關保單之投保額及保費將不會相應調低。若被保人同時擁有多於1份保單作出類似或相關之賠償，其每次可得之原位癌或早期癌症權益總金額不得超過最高限額240,000港元 / 30,000美元 (每被保人計)。有關原位癌或早期癌症權益的條款及細則、特定器官之原位癌或早期癌症之詳情及定義及不保事項，請參閱保單條款。
- 如保單沒有曾就或應就任何癌症權益或身故權益作出賠償，投保人可於退保或保單期滿時獲回贈總已繳保費 (不包括任何利息) 之既定百分比及特別紅利 (如有)。詳情請參閱保費回贈表。如原位癌或早期癌症權益曾被或應被支付，預支限額將不會減低保費回贈金額，惟特別紅利 (如有) 將會按比例相應減少。
- 當保單生效期達10年或以上，特別紅利 (此為非保證金額) 可能會於該保單作出癌症權益賠償或身故權益賠償、退保、保單期滿或若保單失效且未於一年保單復效期內申請復效，在該復效期屆滿時支付。按比例之特別紅利 (如有) 亦可能會於支付原位癌或早期癌症權益時派發，及後應付的特別紅利 (如有) 將會按比例相應減少。
- 投保人可於緊接被保人40及 / 或65歲 (下次生日年齡) 當日或之後的保單週年日前後31日內購買一份新的癌症保障計劃而無需提交任何可受保證明 (每被保人合計可增購之上限為原有基本投保額的100%或1,000,000港元 / 125,000美元，以較低者為準)，並且在原基本保單沒有應付或曾被支付任何權益及於原保單簽發時沒有附加保費及 / 或額外不保事項的情況下方可行使。於指定年齡可投保新癌症保障計劃受限於富衛當時提供之計劃，並須符合富衛當時生效的一切規則及規定及每名被保人於所有指定危疾計劃的最高總投保額所限。此權益一經行使便不可撤回。
- 第二醫療意見服務由國際SOS提供，並且非保證續保，所有相關服務收費及費用 (如有) 需由被保人自行支付。富衛將不會就國際SOS的行為或疏忽負上任何責任。而有關詳情或將被不時調整，富衛恕不另行通知。
- 家庭關懷服務由奧思禮提供，並且非保證續保。所有相關收費及費用 (如有) 需由被保人自行支付。富衛將不會就奧思禮及 / 或任何其附屬機構的行為或疏忽負上任何責任。而有關詳情或將被不時調整，富衛恕不另行通知。
- 保費率並非保證不變，富衛保留不時對保費作出檢討及調整之權利。
- 適用於就本計劃總投保額不超過2,000,000港元 / 250,000美元 (需視乎富衛豁免身限額要求) 之香港居民，並符合相關核保規定。
- 需受富衛當時所規定之每位被保人於所有指定危疾計劃的最高總投保額所限。
- 身故權益將會就沒有應付或曾被支付癌症權益的情況下支付。如原位癌或早期癌症權益曾被或應被支付，預支限額將不會減低身故權益，惟特別紅利 (如有) 將會按比例相應減少。

重要事項及聲明:

1. 本產品由富衛承保，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。
2. 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。本產品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。
3. 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，本計劃不受香港特別行政區存款保障計劃所保障。
4. 本產品乃一項含有儲蓄成份的危疾保障產品。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。
5. 本產品是一項儲蓄保險產品。如您在保單期滿前退保，您可收回的款項可能會低於您已繳付的保費總額。
6. 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（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。
7. 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。
8. 有關過去紅利資料，請參考富衛網頁 (<https://www.fwd.com.hk/tc/regulatory-disclosures/fulfilment-ratios/>)。以下是富衛派發紅利的理念、投資策略及投資工具（最新資料請參考富衛網頁 <https://www.fwd.com.hk/tc/regulatory-disclosures/dividend-bonus-declaration-philosophy/>）：

派發紅利的理念

由富衛發出的分紅保單設有非保證紅利予保單持有人（「您」）。紅利包括週年紅利¹、期滿紅利、歸原紅利及特別紅利。透過釐定紅利，您可分享到分紅保單的財務表現帶來的成果。財務表現包括過去表現和未來展望，涵蓋但不限於以下事項：

1. 投資回報；
2. 支出費用；
3. 續保率；
4. 理賠經驗

根據我們的紅利政策，富衛最少每年檢視紅利一次。如財務表現與預期有別，我們可能會作出調整，以致實際釐定的紅利跟權益說明文件存有差異。

紅利建議會由我們的董事會檢視及批核，再由董事會主席、一位獨立非執行董事及委任精算師在適當考慮紅利政策及公平待客原則下以書面形式公布。

我們會每年最少一次通知您今年及預計派發的紅利。如今年及預計派發的紅利有所變更，將於保單年結通知書上列明。

緩和調整機制

財務表現是難以準確預測的。為了協助您去策劃財務，我們會以一個緩和調整機制以求使保單年內派發的紅利更穩定。

當財務表現較預期好（差），我們可能會保留部分盈餘（虧損），於未來的年份反映出來，以確保您會獲更穩定的紅利。因產品各具特色，我們會採取不同程度的緩和調整。

滙集保單

貫徹保險合同的性質，我們亦會將類似的保單滙集，以便分散保單持有人面對的風險。此舉有助穩定財務表現（和紅利派發）。

為使每位保單持有人能得到合理的分配，我們或會將同一產品按批次派發不同的紅利，以更準確反映相應財務表現。因此，不同產品及不同批次之間的紅利調整的次數及幅度可能會有所不同。一般而言，較高風險的產品的紅利調整次數及幅度會較高。

投資策略

為優化回報，富衛的投資策略會按不同產品而制定。這些資產組合採取均衡分佈投資策略，包括：

- 投資級別的固定收益類型證券
- 股權類投資，以提高長遠的投資表現。投資可包括上市股票、對沖基金、共同基金、私募基金和房地產

此產品的長期資產配置如下：

資產類型	目標資產配置比重 (%)
固定收益類型證券	目標之75% - 95%
股權類型投資	目標之5% - 25%

資產組合會按照投資規模，橫跨於不同地區及行業，以分散投資風險。

同時，我們會根據保單貨幣選擇作出該貨幣的直接投資或使用貨幣對沖工具，使保單的貨幣風險得以緩解。目前來說，大部分資產投資於美國和亞太地區，並以美元計算。

此外，投資專家還積極管理資產組合，密切監察投資表現。除了定期檢視外，富衛還保留更改投資策略的權利，並將任何重大變更通知保單持有人。

投資工具

紅利將會被有關投資組合的表現影響，其中包括固定收益類型證券和股權類型投資。有關表現並非不變及將會被市場環境的改變所影響：

固定收益類型證券

- 固定收益類型證券的回報來自購買證券後所得的利息收入。在一個較高（較低）的市場利率環境下，公司較大機會從新資金中（例如：來自票息，期滿收益，新供款的收入）得到較高（較低）的利息收入；
- 固定收益類型證券違約或其評級下跌將不利於投資回報

股權類型投資

- 股權類型投資的市價變動將導致投資組合的市值有所變化。市場價格上升（下跌）會令投資組合的市場價值上調（下調）。
- 股權類型投資中紅利類型收入的變動將影響投資結果。從有關投資中得到較高（較低）紅利類型收入會改善（虧損）投資回報。

¹包含累積紅利的利息

9. 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。

10. 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。

11. 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：

- (i) 識辨非豁免「財務帳戶」的帳戶（「非豁免財務帳戶」）；
- (ii) 識辨非豁免財務帳戶的個人持有人及非豁免財務帳戶的實體持有人作為稅務居民的司法管轄區；
- (iii) 斷定以實體持有的非豁免財務帳戶為「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；
- (iv) 收集各當局要求關於非豁免財務帳戶的資料（「所需資料」）；及
- (v) 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。

索償通知

任何身故權益、癌症權益或原位癌或早期癌症權益索償應在被保人身故或首次確認診斷患上癌症或特定器官之原位癌或早期癌症日的30天（在任何情況下不遲於6個月）內，以書面通知富衛有關索償。除非富衛另作決定，任何於上述6個月期限外之癌症權益、身故權益或原位癌或早期癌症權益將不會受理。

任何延伸癌症治療權益索償應在被保人就相關治療或諮詢之日的30天（在任何情況下不遲於6個月）內，以書面通知富衛有關索償。除非富衛另作決定，任何於上述6個月期限外之延伸癌症治療權益索償將不會受理。

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。富衛之賠償責任僅限於不附帶利息之總已繳保費，而一切已賠償權益亦將扣除。

等候期

若被保人在保單簽發日起計90天內出現相關癌症或特定器官之原位癌或早期癌症之徵狀、狀況或被證實患有上述癌症或特定器官之原位癌或早期癌症，富衛將不作癌症權益或原位癌或早期癌症權益之賠償。

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。保單持有人將承擔本公司無法履行保單財務責任的違約風險。

流動性風險

本產品為長期保險保單。此長期保險保單有既定的保單期限，保單期限由保單生效日起至保單期滿日止。保單含有價值，如您於較早的保障年期或保單期滿日前退保，您可收回的金額可能會大幅低於您已繳付的保費總額。投保本計劃有機會對您的財務狀況構成流動性風險，您須承擔本計劃之流動性風險。

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。

提早退保風險

如您在較早的保障年期或在保單期滿日前退保，您可收回的款額可能會大幅低於您已繳付的保費總額。

不保證權益

不保證權益（包括但不限於週年紅利 / 特別紅利）是非保證的，並按照派發紅利的理由由富衛自行決定。

不保事項

以下不保事項適用於癌症權益、原位癌或早期癌症權益及延伸癌症治療權益。若被保人在保單簽發日起計九十天內出現相關癌症或特定器官之原位癌或早期癌症之徵狀、狀況或被證實患有上述癌症或特定器官之原位癌或早期癌症，本公司將不作癌症權益或原位癌或早期癌症權益之賠償。若被保人直接或間接由下列任何原因引致損失 / 索償，將不能獲得賠償：1. 感染人類免疫缺乏病毒（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。2. 受保前已存在之狀況。3. 由於服用過量有毒性之藥物，精神科藥物，吸毒或濫用酒精或濫用溶劑及物質而引起的狀況，醫生處方開列用於治療傷病之藥物除外。

保費調整

保費為非保證，並可因各種因素而大幅增加，當中包括但不限於索償經驗及保單續保率。但保費不會按照被保人之下次生日年齡而增加。

保費年期及欠繳保費

保單的保費供款年期為10年或15年或20年。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。若在寬限期後仍未繳付保費而保單沒有現金價值，保單將由首次未繳保費的到期日起終止。若保單有可作貸款的現金價值，本公司將自動從該現金價值以貸款形式撥出部份現金以墊繳保費。當保單貸款及利息總額相等於或超過保單可貸款的現金價值時，保單將會終止，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. 被保人身故日；或2. 被保人85歲生日前之保單週年日；或3. 依本公司退保相關規定所認定之退保日；或4. 寬限期滿後仍未繳付保費（在此情況下，本保單於保費最初到期未繳日失效）；或5. 當被保人的首次確診診斷患上癌症日起計的兩年期間屆滿；或6. 根據本計劃簽發的所有保單下所應付的延伸癌症治療權益，總治療次數累計已達20次。為免存疑，倘保單於被保人首次確診診斷患上癌症日起計的2年期間屆滿，被保人只要尚生即可繼續享有延伸癌症治療權益直至該2年期間終結為止或總治療次數已達其累計上限，以較早出現者為準。

重要字句

首次確診診斷

指根據組織病變測試結果，首次被醫生確定為癌症或特定器官之原位癌或早期癌症的診斷。是次癌症或特定器官之原位癌或早期癌症診斷的日期將根據首次從被保人體內取出而符合後確認該診斷的組織樣本、培養物、血液樣本或其他化驗檢查的日期而定。只根據病歷、身體上及放射性結果作出對癌症或特定器官之原位癌或早期癌症之診斷，並不能符合本保單要求之診斷準則。

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) 符合被保人所患癌症的診斷及符合處理被保人所患癌症之常規治療；(b) 醫生為被保人所患癌症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；及(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。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。

合理及慣常

指就費用、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，富衛保留調整本保單所定之任何或所有應付賠償額的權利。

已存在之狀況

指被保人在保單簽發日之前已存在或一直存在的任何狀況或疾病、其直接致病因素已存在或一直存在、其徵狀或病徵已為被保人及 / 或保單權益人知道或按理應知，或任何化驗室的測試或調查顯示可能有該狀況或疾病的存在。

Remarks:

1. Cancer Benefit is only applicable to covered cancers. Covered cancer shall mean the presence of a malignant tumour that is characterised by progressive, uncontrolled growth, spread of malignant cells and invasion and destruction of normal and surrounding tissue. Major interventionist treatment or major surgery must be considered necessary or palliative care must have been initiated. Cancer must be positively diagnosed with histopathological confirmation. The following tumours are excluded: (i) Leukaemia other than chronic lymphocytic leukaemia if there is no generalized dissemination of leukaemia cells in the blood-forming bone marrow; (ii) Tumours showing the malignant changes of carcinoma in situ (including cervical dysplasia CIN-1, CIN-2 and CIN-3) or which are histologically described as pre-malignant; (iii) All skin cancers, unless there is evidence of metastases or the tumour is a malignant melanoma of greater than 1.5mm maximum thickness as determined by histological examination using the Breslow method; (iv) Non life-threatening cancers, such as prostate cancers which are histologically described as TNM Classification T1(a) or T1(b), or are of another equivalent or lesser classification; (v) Papillary micro-carcinoma of the thyroid; (vi) Non-invasive papillary cancer of the bladder histologically described as TaNOMO or of a lesser classification; and (vii) Chronic lymphocytic leukaemia with staging Rai Stage I or Binet Stage A-I or less classification. FWD Life Insurance Company (Bermuda) Limited (Incorporated in Bermuda with limited liability) ("FWD" or "We") shall not pay the Cancer Benefit where the symptoms appear, the condition occurs or the diagnosis relating to the relevant cancer occurs within the first 90 days from the policy date or the date of last reinstatement date, whichever is later. If the insured survives more than 14 days from the date of the first confirmed diagnosis of cancer, the Cancer Benefit will be payable. However, if the insured dies within such 14 days, only the Death Benefit is payable. Cancer Benefit under each policy of this Plan shall be payable only once during the insured's lifetime. After the Cancer Benefit is paid, the policy owner does not need to pay any further premium and all FWD's liability (if any) shall be limited to the Post Cancer Treatment Benefit. Cancer Benefit shall not be paid in conjunction with the Death Benefit. If any Carcinoma-in-situ or Early Stage Cancer Benefit is payable or has been paid, the Cancer Benefit payable will be reduced by Limited Advanced Payment and the Special Bonus (if any) thereafter shall be reduced on a pro rata basis accordingly. Please refer to the Policy Provisions for the terms and conditions of Cancer Benefit, details and definition of covered cancers and exclusions.
2. FWD would only reimburse the reasonable and customary charges incurred for the Post Cancer Treatment Benefit to treat covered cancer within 2 years from the first date of confirmed diagnosis of cancer, provided that Cancer Benefit has been paid or become payable. It is subject to HK\$600 / US\$75 per visit per insured (1 visit per day) and maximum aggregate number of 20 visits per life. Even if the insured is insured by more than 1 policy of the Plan, the maximum Post Cancer Treatment Benefit (per life) is still HK\$600 / US\$75 per visit per insured and 1 visit per day (subject to the maximum aggregate number of 20 visits per life).
3. Carcinoma-in-situ or Early Stage Cancer Benefit is only applicable to carcinoma-in-situ or early stage malignancy of specific organs. FWD shall not pay the Carcinoma-in-situ or Early Stage Cancer Benefit where the symptoms appear, the condition occurs or the diagnosis relating to the relevant cancer occurs within the first 90 days from the policy date or the date of last reinstatement date, whichever is later. The maximum of 2 claims (per insured) of Carcinoma-in-situ or Early Stage Cancer Benefit must be carcinoma-in-situ or early stage malignancy of specific organs occurring in two different specific organs and is subject to a maximum of HK\$240,000 / US\$30,000 per insured of each claim. After this benefit is paid in advance, the Cancer Benefit payable will be reduced by Limited Advanced Payment and the Special Bonus (if any) thereafter shall be reduced on a pro rata basis accordingly, but the Sum Insured and premium of the policy will remain unchanged. If the insured has more than 1 policy with a similar or related benefit, the total payment of Carcinoma-in-situ or Early Stage Cancer Benefit shall not exceed the maximum amount of HK\$240,000 /

US\$30,000 per life for each claim. Please refer to the Policy Provisions for the terms and conditions of Carcinoma-in-situ or Early Stage Cancer Benefit, details and definition of carcinoma-in-situ or early stage malignancy of specific organs and exclusions.

4. If no Cancer Benefit or Death Benefit has been paid or become payable under the policy, a designated percentage of the total premiums paid (without interest) and Special Bonus (if any) would be refunded to the policy owner when the policy is surrendered or matured. Please refer to the Refund of Premium Table for details. If any Carcinoma-in-situ or Early Stage Cancer Benefit is payable or has been paid, the premium refundable will not be reduced by Limited Advanced Payment but the Special Bonus (if any) thereafter shall be reduced on a pro rata basis accordingly.
5. When the policy has been in effect for 10 years or more, a Special Bonus, which is not guaranteed, may be payable under the policy upon the payment of Cancer Benefit or Death Benefit under the policy, surrender, maturity or at the end of the one year reinstatement period if the policy lapses and is not reinstated within the period. A proportionate Special Bonus, if any, may be also paid upon payment of the Carcinoma-in-situ or Early Stage Cancer Benefit. Special Bonus (if any) will then be reduced on a pro rata basis accordingly.
6. The policy owner has the right to apply for a new cancer protection plan within 31 days immediately before or after relevant Policy Anniversary which immediately comes on or after the respective ages of 40 and / or 65 (Age Next Birthday) of the insured without providing further evidence of insurability on the insured (the aggregate maximum of the Sums Insured under such new policies shall be the initial Sum Insured of original policy or HK\$1,000,000 / US\$125,000 per life, whichever is lower), provided that no benefit has been paid or become payable under the original policy, and no loading premium and / or additional individual exclusions when the original policy is issued. This right shall be subject to the plan available at the time of application and such terms and conditions of FWD and the aggregate maximum Sum Insured per life of all designated critical illness policies, which is determined by FWD's then rules and regulations. This benefit is irrevocable after execution.
7. The service is provided by International SOS and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the insured. FWD shall not be responsible for any act or failure to act on the part of International SOS. Details of the services may be revised from time to time without FWD's prior notice.
8. The service is provided by Aspire Lifestyles ("Aspire") and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the insured. FWD shall not be responsible for any act or failure to act on the part of Aspire and / or any of its affiliates. Details of the services may be revised from time to time without FWD's prior notice.
9. Premium rates are not guaranteed and FWD reserves the right to review and revise the premium rates from time to time.
10. Only applicable to Hong Kong residents whose aggregate Sum Insured under the Plan does not exceed HK\$2,000,000 / US\$250,000 (subject to the aggregate non-medical check-up limit of FWD) and subject to relevant underwriting requirements.
11. Subject to the aggregate maximum Sum Insured per life of all designated critical illness policies, which is determined by FWD's prevailing rules and regulations.
12. The Death Benefit is payable if no Cancer Benefit is payable or has been paid. If any Carcinoma-in-situ or Early Stage Cancer Benefit is payable or has been paid, Death Benefit will not be reduced by Limited Advanced Payment but the Special Bonus (if any) thereafter shall be reduced on a pro rata basis accordingly.

Important Notes and Declarations:

1. 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.
2. 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 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 product must be conducted and completed in the Hong Kong Special Administrative Region.
3. 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 Hong Kong Special Administrative Region.
4. This product is a critical illness product with a 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.
5. The product is a savings insurance product. If you surrender your Policy before its maturity date, the amount you get back may be less than the total premium you have paid.
6. 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.
7. 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).
8. Please refer to FWD's website (<https://www.fwd.com.hk/en/regulatory-disclosures/fulfilment-ratios/>) for dividend / bonus history. The dividend / bonus declaration philosophy, investment strategy and investment vehicle of FWD are shown below (Please refer to FWD's website for latest information: <https://www.fwd.com.hk/en/regulatory-disclosures/dividend-bonus-declaration-philosophy/>):

Dividend / Bonus Declaration Philosophy

FWD issues participating policies, which offer the policyholders ("You") with dividend/bonus benefits that are not guaranteed. Dividend/bonus includes annual dividend¹, terminal dividend, reversionary bonus and special bonus.

Through the dividend/bonus declaration, you participate in the financial performance of the participating products. The financial performance of participating products covers the experience and future outlook of a number of factors, including but not limited to:

1. Investment return;
2. Expenses;
3. Persistency;
4. Claims experience.

FWD reviews the dividend/bonus at least annually based on our dividend policy. The dividend/bonus could be adjusted if the financial performance is different from the expectation, and as a result the actual declared dividend/bonus may be different from the benefit illustrations.

The dividend/bonus recommendation is reviewed and approved by our Board of Directors (the "Board"), with written declaration by the Chairman of the Board, an Independent Non-Executive Director and the Appointed Actuary on due regard to our dividend policy as well as the principle of fair treatment of customers.

The current year and projected dividend/bonus would be communicated to you at least annually. Any changes in the current year and projected dividend/bonus will be reflected in the policy annual statement.

Smoothing

Financial performance is unforeseeable. To facilitate your financial planning, we have a smoothing process aiming to deliver a more stable dividend/bonus payouts during the policy term.

When the financial performance is better (worse) than expected, we may hold back a portion of the gains (losses), which will be passed back to you over the future years to ensure a more stable dividend/bonus payouts. Due to the variation of features and benefits of different products, different levels of smoothing may also be applied.

Pooling

Consistent with the nature of insurance contracts, we also group similar policies together to pool the risks amongst a larger number of policyholders to provide diversification benefits, which help to stabilize the financial performance (and hence the dividend/bonus payouts).

To maintain the fairness between policyholders, we may also separate different generations of policies of the same product into different buckets with different dividend/bonus scales, with an aim to more closely reflect the underlying financial performance. As a result, the frequency and magnitude of the dividend/bonus adjustments may vary among different products and buckets. In general, the adjustments on dividend/bonus are more frequent and significant for products with higher risk profile.

Investment Strategy

FWD's investment strategies are customized for different products to optimize the return. In particular, these asset portfolios employ a balanced asset allocation investment strategy, which consists of

- Investment-grade fixed income type securities
- Equity-type investments to enhance the investment performance in the long run. This may include listed equity, hedge funds, mutual funds, private equity and property

The current long-term target asset allocation of this Product is as follows:

Asset Type	Target asset allocation (%)
Fixed income type securities	75% - 95% of Target
Equity-type investments	5% - 25% of Target

The asset portfolios also target to provide diversification across different geographic regions and industries to the extent the size of portfolio can support.

Currency exposure of the underlying policies is mitigated by closely matching either through direct investments in the same currency denomination or the use of currency hedging instruments. Currently, the majority of the asset is invested in the United States and Asia Pacific and denominated in USD.

Furthermore, the asset portfolio is actively managed by investment professionals to closely monitor the investment performance. In addition to conducting regular review, FWD also reserves the right to change the investment strategy and shall notify policyholders for any material changes.

Investment Vehicle

The dividend/bonus rate will be influenced by the performance of the underlying investment portfolio, which consists of both fixed income type securities and equity-type investments. The performance is not static and will be highly affected by the change in market conditions:

Fixed income type securities

- The return of fixed income type securities arise from the interest income ("the yield") attained at the purchase of the securities. Under a higher (lower) market interest rates environment, the company is more likely to attain higher (lower) interest income with the new money (e.g., proceeds from coupons, maturities, new contributions);
- The defaults or downgrades of the fixed income type securities will result in unfavorable investment performance.

Equity-type investments

- The movement of the market price of the equity-type investments will result in change in the market value of the portfolio. Rise (fall) in the market price will increase (decrease) the market value of the portfolio.
- The change in dividend-type income from the equity-type investments will impact the investment results. Higher (lower) dividend-type income from the underlying investment will improve (worsen) the investment results.

¹Include interest on accumulated dividends

9. 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.
10. To surrender the Policy, the Policy Owner needs to send FWD a completed surrender form or by any other means acceptable by FWD.
11. FWD must comply with the following requirements of the Inland Revenue Ordinance to facilitate the Inland Revenue Department 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 non-financial entities (NFEs)" and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;
 - (iv) to collect information on NEFAs ("Required Information") which is required by various authorities; and
 - (v) 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.

Notice of Claim

Written notice of any claim for Death Benefit, Cancer Benefit or Carcinoma-in-situ or Early Stage Cancer Benefit must be given to FWD within 30 days (and in any case no later than 6 months) from the date of death of the Insured or the date of the First Confirmed Diagnosis of Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs. Any claims for Cancer Benefit or Death Benefit or Carcinoma-in-situ or Early Stage Cancer Benefit received after the said 6-month period shall not be accepted, unless FWD in its sole discretion decides otherwise.

Written notice of any claim for Post Cancer Treatment Benefit must be given to FWD within 30 days (and in any case no later than 6 months) from the date of relevant treatment or consultation. Any claims for Post Cancer Treatment Benefit received after the said 6-month 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 FWD's opinion, may affect FWD's risk assessment, including but not limited to, age, gender and other material facts declared on the relevant application form, FWD may collect the premium shortfall with interest, refund the excess premium without interest and/ or void this Policy from the Policy Date, unless FWD confirms otherwise in writing. FWD's liability shall be limited to the amount of Total Premiums Paid without interest, less any benefit which has been paid under this Policy.

Waiting period

FWD will not pay the Cancer Benefit or Carcinoma-in-situ or Early Stage Cancer Benefit where the symptoms appear, the condition occurs or the diagnosis relating to the relevant Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs occurs within the first 90 days from the Policy Date.

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.

Liquidity risk

This product is a long term insurance policy. This policy of long term insurance will be made for certain determined term of years starting from the policy effective date to the policy maturity date. The policy contains value and, if you surrender your policy in the early policy years or before its maturity date, the amount you get back 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 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 the Company fulfills all of its contractual obligations.

Early surrender risk

If you surrender your policy in the early policy years or before its maturity date, the amount of the benefit you will get back may be considerably less than the total amount of the premiums you paid.

Non-guaranteed benefits

Non-guaranteed benefits (including but not limited to Annual Dividend / Special Bonus) are not guaranteed and are determined at FWD's discretion based on its Dividend / Bonus declaration philosophy.

Exclusions

The below exclusions apply to Cancer Benefit, Carcinoma-in-situ or Early Stage Cancer Benefit and Post Cancer Treatment Benefit.

The Company will not pay the Cancer Benefit or Carcinoma-in-situ or Early Stage Cancer Benefit where the symptoms appear, the condition occurs or the diagnosis relating to the relevant Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs occurs within the first 90 days from the Policy Date. This Policy shall not cover any loss / claim directly or indirectly caused by or resulting from any of the following: 1. 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. 2. Pre-existing Conditions. 3. Any condition arising out of consumption of poisoning drugs, psychiatric drug, drug abuse, alcohol abuse, abuse of solvents, and other substances unless prescribed by a Medical Practitioner for treatment.

Premium adjustment

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

Premium term and non-payment of premium

The premium payment term of the policy is 10,15 or 20 years.

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 and the policy has no cash value, the policy will be terminated from the date the first unpaid premium was due. If the policy has any loanable cash value, the Company shall automatically advance the amount of premium due as a loan against such loanable cash value of the policy. Once the total amount of outstanding loan and interest accrued thereon is equal to or exceeds the loanable cash value of the policy, the policy will be terminated. 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 85th 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 end of the Grace Period of any premium due and not received by the Company (and in which case, this Policy shall cease to be in force from the first due date of the outstanding premium). 5. The expiry date of a period of 2 years from the date of the Insured's First Confirmed Diagnosis of Cancer. 6. The aggregate number of visits over which Post Cancer Treatment Benefit is payable of multiple policies issued under this Plan reaches 20 visits. For the avoidance of doubt, in the event that this Policy expires prior to the expiry of a period of two (2) years from the date of the Insured's First Confirmed Diagnosis of Cancer, the Insured shall, so long as he / she is still alive, continue to be covered by the Post Cancer Treatment Benefit until the expiry of such two-year period or the maximum aggregate number of visits thereof is fully reached, whichever is earlier.

Important Words**First Confirmed Diagnosis**

shall mean the first time that a diagnosis of Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs is made by a Medical Practitioner and confirmed by histopathological tests results. Date of diagnosis of Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs suffered by the Insured will be the day when tissue specimen, culture, blood specimen or any other laboratory investigation upon which the diagnosis is determined is first taken from the Insured. A diagnosis of Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs based on history, physical and radiological findings only shall not meet the standards of diagnosis required by 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 Insured's Cancer; (b) recommended by a Medical Practitioner for the care or treatment of the Insured' Cancer 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; and (c) not furnished primarily for the personal comfort or convenience of the Insured or any medical service provider. Experimental, screening and preventive services or supplies shall not be considered as Medically Necessary.

Reasonable and Customary

shall mean, in relation to a fee, a charge or an expense, 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 person under the care, supervision or order of a Medical Practitioner; (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 expense is incurred. FWD reserves the right to adjust any and all benefits payable under this Policy which in our opinion is not Reasonable and Customary.

Pre-existing Conditions

shall mean any condition or illness in respect of an Insured, which existed or was existing; or where its direct cause existed or was existing; or where the Insured and/or the Policy Owner was aware or should reasonably have been aware of signs or symptoms of the condition or illness; or where any laboratory test or investigation showed the likely presence of the condition or illness, in each case, prior to the Policy Date.

以上資料只供參考及旨在描述產品主要特點，有關條款細則的完整及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。

This product material is for reference only and is indicative of the key features of the product. For the full and exact terms and conditions and the full list of exclusions of the product, please refer to the policy provisions of this product. 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.



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