

Crisis EasyGo – UCanCover / Crisis EasyGo – UStillCover

**Empowering your next chapter after health challenges -
now you can be protected and go full speed ahead again**

Critical Illness Protection • Participating Life



You deserve to be protected

No one truly understands the importance of being protected from critical illness better than those who have been through it. Ironically, for them to gain or re-gain coverage is often a dream.

Getting underwriting approval is much harder and the application process is much longer, if the application is not rejected outright. Even if it is accepted, only basic coverage can often be offered.

In other words, critical illness coverage is generally less accessible to those who need it more.

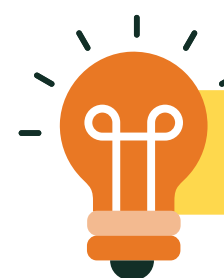
But not anymore...

Restart your crisis protection

If you have recovered from cancer or have suffered from a heart disease or stroke, and are seeking financial support for medical treatment in case of both early-stage and serious illnesses, we want you to feel optimistic about your future as we strive to provide coverage for those uncovered.

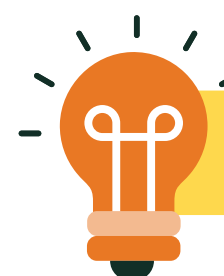
First-in-Hong Kong⁺

We are bringing you Crisis EasyGo – UCanCover and Crisis EasyGo – UStillCover (“the Plans”), participating critical illness protection plans with a simplified underwriting approach specially designed to offer whole life coverage with limited premium payment term for those who have critical illness historyⁱ. Say goodbye to complicated applications and lengthy processes! Simplified underwriting approach is designed to streamline your experience, ensuring you can focus on what matters most—your health and well-being.



– **5-year relative survival rate is 84% for both prostate cancer and female breast cancerⁱⁱ, indicating cancer survival rates and recovery keep improving.**

Crisis EasyGo – UCanCover, specially designed for those who have recovered from cancer, offers coverage against 62 Crises including Cancer and 53 Special Diseases including Carcinoma-in-situ or Early Stage Malignancy of Specific Organs. That means even if you are unfortunately diagnosed with a covered Disease after recovering from cancer, you will still be well-protected.



– **People with atherosclerotic CVDs were 20% more likely to develop cancer than those without CVDs (“cardiovascular diseases”)ⁱⁱⁱ.**

Crisis EasyGo – UStillCover, specially designed for those who have bravely battled CVDs, provides protection against 26 Crises including Cancer and 23 Special Diseases including Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, giving you the financial support necessary to navigate the challenges in the event you’re diagnosed with any one of them.

Despite their simplicity, the coverage provided by the Plans, including a Crisis Benefit and a Special Disease Benefit, serves as solid financial support for you to overcome the challenge of covered Diseases.

At FWD, we are committed to meeting your protection needs.

ⁱ The Insured can be covered under Crisis EasyGo – UCanCover or Crisis EasyGo – UStillCover provided that he/she passes the underwriting questions. For relevant underwriting requirements, terms and conditions, please refer to the complete underwriting questions.

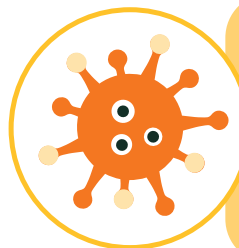
ⁱⁱ Source: Overview of Hong Kong Cancer Statistics of 2021, Hospital Authority

ⁱⁱⁱ Source: JACC Journals, August 2023

Easy protection

over what you need the most

We recognise that applying for insurance can often be a daunting experience, especially for those who have critical illness history. Their insurance application may be full of obstacles and challenges. That's why the Plans make it easy to apply for coverage with minimal documentation and reduced limitations related to health conditions. You can complete your application quickly just by answering a few underwriting questions, ensuring that you receive the protection you need without the hassle of lengthy medical exams or complicated forms.



Cancer survivors had **42%** higher risk of developing incident CVDs than those who did not develop cancer

Source: JACC Journals, July 2022

People with CVDs were **13%** more likely to develop cancer than those without CVDs

Source: JACC Journals, August 2023

Despite the correlation between cancer and CVDs



Crisis EasyGo – UCanCover

provides coverage on 62 Crises including Cancer, Heart Attack, Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Stroke for those recovered from cancer

Crisis EasyGo – UStillCover

provides coverage on 26 Crises including Cancer, and up to 2 claims for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs for those suffered from CVDs



Giving you peace of mind

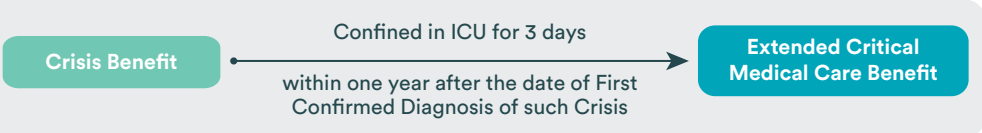


Coverage for Those who Recovered or Suffered from Critical Illnesses

First-in-Hong Kong*

We know how difficult it is to find critical illness cover once you have been diagnosed with cancer, heart diseases or stroke. In addition to protection against 62 Crises, which covers Cancer even you have suffered from Cancer before, Crisis EasyGo – UCanCover also covers 53 Special Diseases. Crisis EasyGo – UStillCover provides coverage on 26 Crises and 23 Special Diseases. There's no simpler way to achieve your need for protection against critical illnesses.^{1,2,3}

Furthermore, after the Crisis Benefit¹ has been paid or is payable, the Plans provide Extended Critical Medical Care Benefit⁴ - extended protection in respect of the same Crisis for an additional 50% of the Initial Sum Insured if the Insured is Confined in an Intensive Care Unit ("ICU") for 3 or more consecutive days with the use of Invasive Life Support for the same Crisis within one year.



Once the Aggregate Limit has been reached after payment of Crisis Benefit and while the Policy is still in force, if Total Claims paid for any Crisis Benefit and/or Special Disease Benefit equals 100% of the Initial Sum Insured, the rest of the premium payable under the Plans will be waived.³



From Defined Diseases to Undefined/Unknown Diseases

Unknown diseases can strike you and your family when you least expect it. The Plans offer a Life Impact Benefit⁵ which provides coverage when the Insured is faced with undefined/unknown illnesses and Injuries that cause a more severe impact to the Insured’s life to a state as specified. It is payable if the Insured is Confined in an ICU for 3 or more consecutive days with the use of Invasive Life Support and experiences 1 or more of the following conditions within the same 120-day period which is caused by the same illness or Injury:



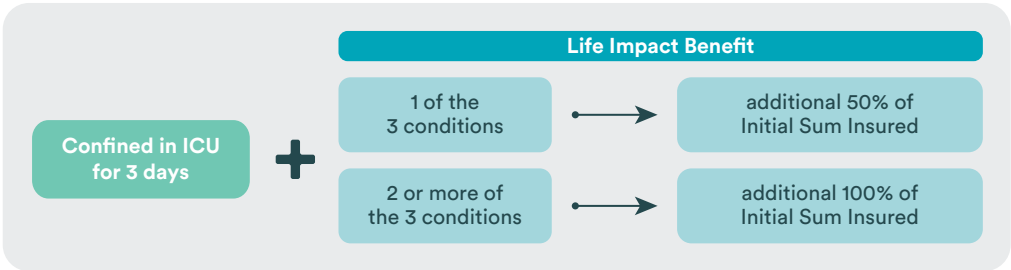
(i) The Insured is Confined in a Hospital for 10 or more consecutive days (including anytime Confined in an ICU);



(ii) A Medical Practitioner confirms that the Insured will need Lifelong Prescription Medicine which is Medically Necessary; or



(iii) The Insured has surgery under general, spinal or epidural anesthetic which is Medically Necessary.



This Life Impact Benefit⁵ is up to an additional 100% of the Initial Sum Insured.



Medical Check-up for Your Wellness

Early detection is always the better option, so to help you maintain your well-being, the Plans offer a Medical Check-up⁶ on each of the 2nd, 4th, 6th, 8th and 10th Policy Anniversaries of the Plans.



Saving and Protection in One Plan

In addition to critical illness coverage, the Plans offer you Guaranteed Cash Value from the 3rd Policy Anniversary and Special Bonus from the 5th Policy Anniversary (if any)⁷ when you surrender the policy before 100% of the Initial Sum Insured is claimed.



After suffering from a stroke, **50%** of patients experience moderate-to-severe impairments that require special care or long-term care.

Source: Northwestern Medicine Website: Life After Stroke

Ongoing treatment may be necessary to fully recover from a critical illness. The Plans provide a series of health assistance services to support your recovery journey.



FWD Care

Professional Health Solutions to Simplify Your Life

On top of giving you protection against diseases, the Plans also give you access to a priority health assistance service: Critical Illness Protection Plan – PREMIER The ONEcierge One Team Health Management (“PREMIER THE ONEcierge”)⁸. It’s designed to give you access to well-rounded health service, provided by third party service providers. Simply call the service hotline and PREMIER THE ONEcierge will provide you with a network of leading specialists so that you can receive the most appropriate treatment from the best-suited doctors and access top-tiered network hospitals in the Pan-Asia Region. If hospitalisation is required, our team could make the necessary arrangements with the hospital for confinement. All you’ll need to do is concentrate on your treatment and recovery.

Optimal treatment requires complete peace of mind. At FWD, we are committed to giving you the most thoughtful care. As soon as a designated crisis is diagnosed, a top U.S. medical institution can be consulted for a Second Medical Opinion⁹ with a team of renowned doctors standing by to assist. Apart from crisis specialists, the Plans can also provide referral services (“Family Care Services”)¹⁰ to help with taking care of your home.

+ Per a comparison made on 30 Sep 2024 among the critical illness insurance plans of key insurers available in Hong Kong, FWD is the first insurance company in Hong Kong to launch a participating whole life critical illness plan with Special Disease Benefit, Life Impact Benefit and Extended Critical Medical Care Benefit for those recovered from cancer or suffered from heart diseases or stroke under simplified underwriting approach.

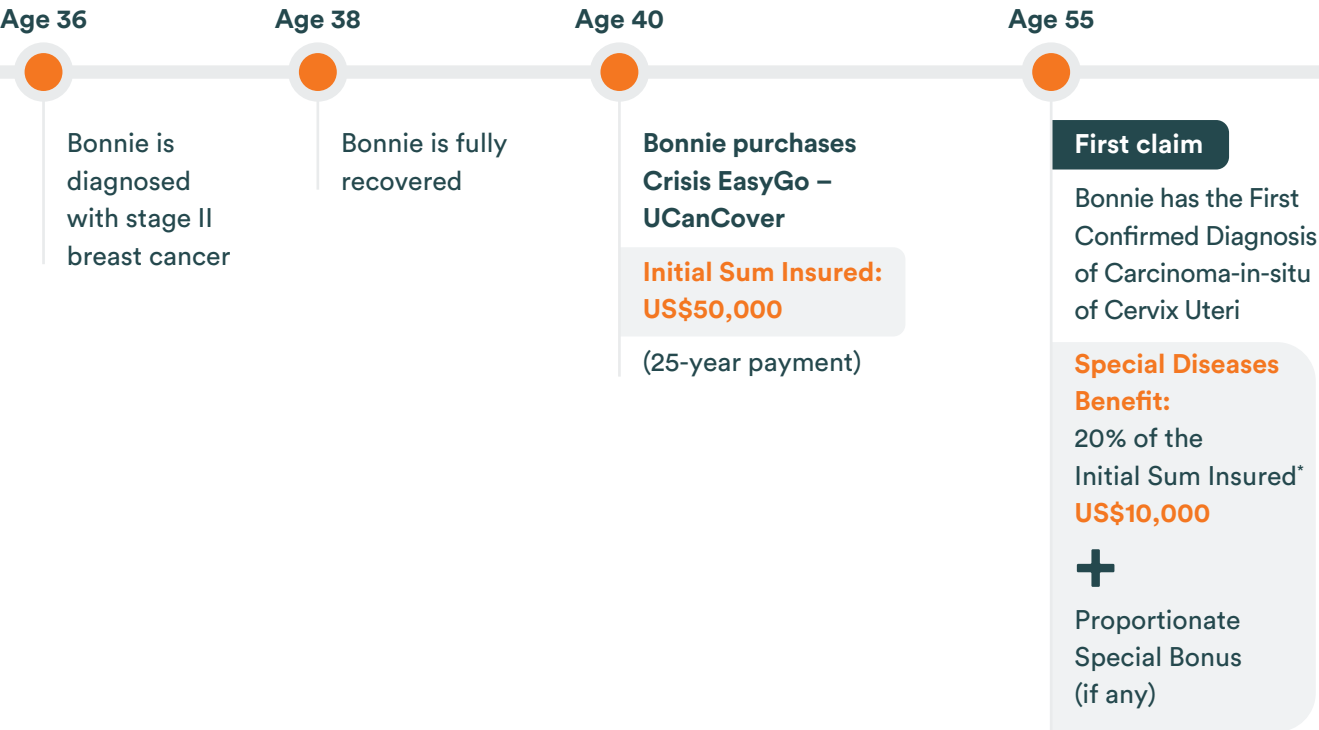
Gear up. Don’t lag behind.
Talk to us today!

Example 1

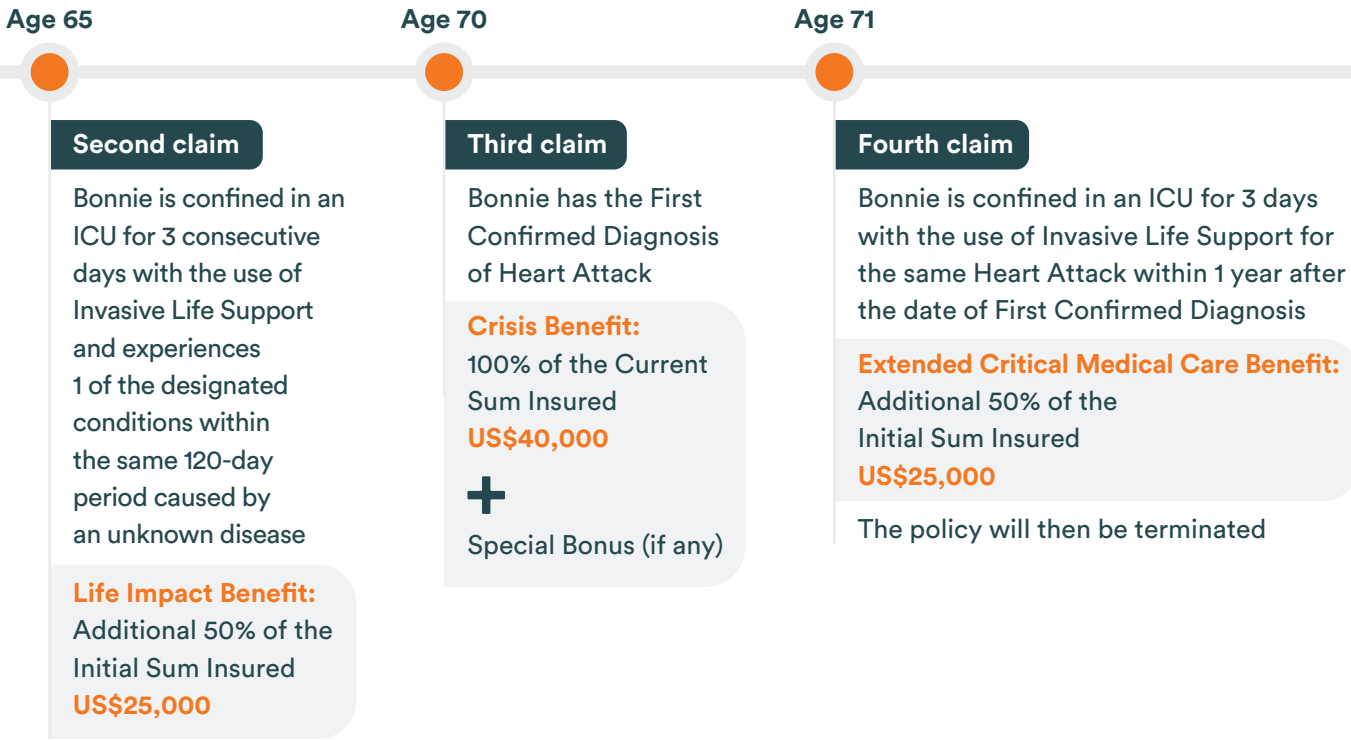
Avoid repeating the same mistakes



Insured:
Bonnie (Age 40 ("Age next birthday"), non-smoker)
Occupation:
Advertising design manager
Family status:
Single, getting married



Bonnie started her career in advertising design after graduation. The workload and pressure fatigued her constantly and she kept feeling ill. She started visiting doctors and was diagnosed with stage II breast cancer. She didn't have insurance protection at the time. After a surgical resection and 2 years of follow-up, the doctor confirms there is no need for medication or follow-up for the time being. Bonnie is eager to get critical illness insurance but her application is rejected by several insurance companies. Luckily, Bonnie discovers **Crisis EasyGo – UCanCover** which offers simplified underwriting approach and accepts application for patients recovered from cancer. She is now well protected in case of further critical illness.



* up to US\$50,000

This is for illustrative purpose only and assume that
a) all premiums are paid in full when due, c) underwriting requirements and the definitions and claims requirements of the benefits are fulfilled, and
b) there is no indebtedness under the policy, d) the Initial Sum Insured of the Basic Plan of the policy remains unchanged throughout the policy term.

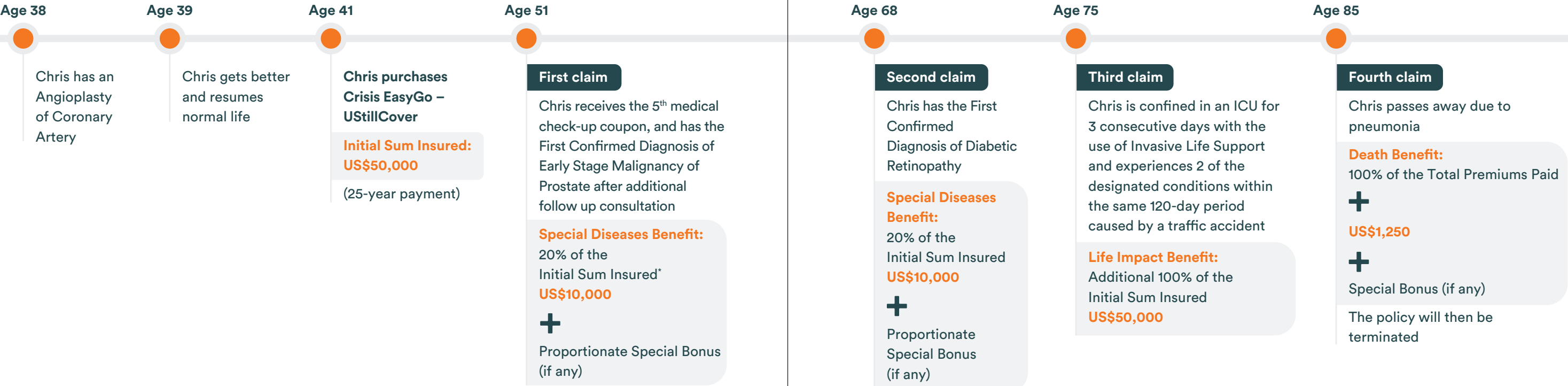
Example 2

Getting prepared for future risks



Insured:
Chris (Age 41 (“Age next birthday”), non-smoker)
Occupation:
Logistics practitioners
Family status:
Single

Chris works in the logistics industry and needs to take overnight shifts every month. He thought he was healthy but his blocked arteries was discovered in a health check and an Angioplasty of Coronary Artery was performed. During the recovery period, Chris realises critical illness protection is very important and wonders if he could still apply for a critical illness insurance plan to prepare for the possibility of critical illness in the future. He has tried submitting applications to several insurance companies but they were all rejected. Fortunately, Chris notices and successfully applies for **Crisis EasyGo – UStillCover** which offers simplified underwriting approach and accepts application for patients suffered from Angioplasty of Coronary Artery.



* up to US\$50,000

This is for illustrative purpose only and assume that
a) all premiums are paid in full when due, c) underwriting requirements and the definitions and claims requirements of the benefits are fulfilled, and
b) there is no indebtedness under the policy, d) the Initial Sum Insured of the Basic Plan of the policy remains unchanged throughout the policy term.

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Plan Summary				
Plan Name	Crisis EasyGo – UCanCover			Crisis EasyGo – UStillCover
Plan Type	Basic Plan			
Benefit Term	To the Policy Anniversary immediately preceding the 100 th birthday of the Insured			
Issue Age (Age Next Birthday)	18 - 60	18 - 55	18 - 50	18 - 45
Premium Payment Term	10 years	15 years	20 years	25 years
Premium Structure	The premium is non-guaranteed ¹¹ but it will not be increased based on the age of the Insured on his or her next birthday			
Currency	HKD/USD			
Premium Payment Mode	Monthly/Annually			
Minimum Initial Sum Insured	HK\$120,000/US\$15,000 (per policy)			
Maximum Initial Sum Insured ¹²	HK\$500,000/US\$62,500 (per life)			
Crisis Benefit ^{1,3}	For Cancer during 2 nd and 3 rd Policy Year	Advanced payment of 50% of the Initial Sum Insured	100% of the Current Sum Insured + Special Bonus (if any) ⁷	
	For Cancer in 4 th Policy Year and thereafter	100% of the Current Sum Insured + Special Bonus (if any) ⁷		
	All other Crises except Cancer			
Special Disease Benefit ^{1,2}	For Carcinoma-in-situ or Early Stage Malignancy of Specific Organs during 2 nd and 3 rd Policy Year	Advanced payment of 10% of the Initial Sum Insured	Advanced payment of 20% of the Initial Sum Insured + proportionate Special Bonus (if any) ⁷	
	For Carcinoma-in-situ or Early Stage Malignancy of Specific Organs in 4 th Policy Year and thereafter	Advanced payment of 20% of the Initial Sum Insured + proportionate Special Bonus (if any) ⁷		
	All other Special Diseases except Carcinoma-in-situ or Early Stage Malignancy of Specific Organs			

Plan Summary		
	Subject to a maximum of HK\$400,000/US\$50,000 per Insured of each claim under all policies of the Crisis EasyGo Series for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery (if applicable)	
Life Impact Benefit ⁵	If the Insured is Confined in an Intensive Care Unit for 3 or more consecutive days with the use of Invasive Life Support and experiences 1 or more of the designated conditions within the same 120-day period which must be caused by the same illness or Injury:	Additional 50% of the Initial Sum Insured if the Insured experiences 1 of the designated conditions Additional 100% of the Initial Sum Insured if the Insured experiences 2 or more of the designated conditions
Extended Critical Medical Care Benefit ⁴	Additional 50% of the Initial Sum Insured	
Surrender Benefit / Maturity Benefit	Guaranteed Cash Value + Special Bonus (if any) ⁷	
Death Benefit	100% of the Total Premiums Paid + HK\$10,000/US\$1,250 + Special Bonus (if any) ⁷	
Medical Check-up ⁶	Medical check-up coupon will be offered on each of the 2 nd , 4 th , 6 th , 8 th and 10 th Policy Anniversaries of the Plans if all premiums are paid when due	
Critical Illness Protection Plan – PREMIER THE ONEcierge One Team Health Management ⁸	Service Program	
Second Medical Opinion ⁹	Service Program	
Family Care Services ¹⁰	Service Program	
Extended Grace Period Benefit ¹³	Available since the 2 nd Policy Year, if the Policy Owner becomes a parent, gets married or divorced, or becomes involuntarily unemployed during the Premium Payment Term of the Plans, the Policy Owner can choose to apply for the Extended Grace Period Benefit to stay protected by the Plans while enjoying an extended grace period for premium payment up to 365 days	

Crises covered in Crisis EasyGo – UCanCover

Group 1 : Cancer

- Cancer

Group 2 : Illnesses related to Organ Failure

- | | |
|---|---|
| - Aplastic Anaemia | - Major Organ Transplantation (lung, pancreas, liver, bone marrow) |
| - Chronic Liver Disease | - Medullary Cystic Disease |
| - Chronic Lung Disease | - Occupationally Acquired HIV |
| - End Stage Lung Disease (including Chronic Obstructive Lung Disease, Severe Bronchiectasis and Severe Emphysema) | - Severe Pulmonary Fibrosis |
| - Fulminant Hepatitis | - Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis |
| - HIV Due to Blood Transfusion | - Surgical Removal of One Lung |

Group 3 : Illnesses related to Circulatory System

- | | |
|-----------------------------------|---|
| - Cardiomyopathy | - Kidney Failure |
| - Coronary Artery Disease Surgery | - Major Organ Transplantation (kidney, heart) |
| - Eisenmenger’s Syndrome | - Other Serious Coronary Artery Disease |
| - Heart Attack | - Primary Pulmonary Arterial Hypertension |
| - Heart Valve Surgery | - Stroke |
| - Infective Endocarditis | - Surgery to Aorta |

Group 4: Illnesses related to Nervous System

- | | |
|----------------------------|----------------------------------|
| - Alzheimer’s Disease | - Multiple Sclerosis |
| - Apallic Syndrome | - Muscular Dystrophy |
| - Bacterial Meningitis | - Paralysis |
| - Benign Brain Tumour | - Parkinson’s Disease |
| - Blindness | - Poliomyelitis |
| - Creutzfeld-Jacob Disease | - Progressive Bulbar Palsy |
| - Encephalitis | - Progressive Muscular Atrophy |
| - Loss of Hearing | - Progressive Supranuclear Palsy |
| - Major Head Trauma | - Severe Myasthenia Gravis |
| - Motor Neurone Disease | |

Group 5: Other Illnesses

- | | |
|---|-------------------------------|
| - Amputation of Feet due to Complication from Diabetes Mellitus | - Loss of Speech |
| - Chronic Adrenal Insufficiency | - Major Burns |
| - Chronic Relapsing Pancreatitis | - Necrotizing Fasciitis |
| - Coma | - Pheochromocytoma |
| - Crohn’s Disease | - Severe Osteoporosis* |
| - Ebola | - Severe Rheumatoid Arthritis |
| - Elephantiasis | - Systemic Sclerosis |
| - Loss of Independent Existence | - Terminal Illness |
| - Loss of Limbs | - Ulcerative Colitis |

Special Diseases covered in Crisis EasyGo – UCanCover

Group 1 : Cancer^

- Carcinoma-in-situ of Specific Organs (all organs except skin, including but not limited to the organs listed below)

a) Breast	i) Pancreas
b) Cervix Uteri	j) Penis
c) Colon and Rectum	k) Stomach and Esophagus
d) Fallopian Tube	l) Testis
e) Liver	m) Urinary Tract (for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included)
f) Lung	n) Uterus
g) Nasopharynx	o) Vagina
h) Ovary	
- Early Stage Malignancy of Specific Organs

a) Chronic Lymphocytic Leukaemia	c) Thyroid
b) Prostate	d) Non Melanoma Skin Cancer

Group 2: Illnesses related to Organ Failure

- | | |
|--|--|
| - Acute Aplastic Anaemia | - Moderately Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis |
| - Biliary Tract Reconstruction Surgery | - Skin Transplantation |
| - Liver Surgery | - Surgical Removal of One Kidney |
| - Miliary Tuberculosis | |
| - Moderately Severe Chronic Lung Disease | |

Group 3: Illnesses related to Circulatory System

- | | |
|---|---------------------------------------|
| - Angioplasty for Carotid Arteries | - Insertion of a Vena-Cava Filter |
| - Angioplasty of Coronary Artery^ | - Keyhole Coronary Bypass Surgery |
| - Cardiac pacemaker / defibrillator insertion | - Minimally Invasive Surgery to Aorta |
| - Carotid Artery Surgery | - Percutaneous Valve Surgery |
| - Early Cardiomyopathy | - Pericardiectomy |
| - Early Renal Failure | - Secondary Pulmonary Hypertension |

Group 4: Illnesses related to Nervous System

- | | |
|---|--|
| - Cochlear Implant Surgery | - Moderately Severe Bacterial Meningitis |
| - Cerebral Aneurysm Requiring Surgery | - Moderately Severe Brain Damage |
| - Early Amyotrophic Lateral Sclerosis | - Moderately Severe Muscular Dystrophy |
| - Early Multiple Sclerosis | - Moderately Severe Paralysis |
| - Early Progressive Bulbar Palsy | - Moderately Severe Parkinson’s Disease |
| - Early Progressive Muscular Atrophy | - Moderately Severe Poliomyelitis |
| - Less Severe Encephalitis | - Severe Psychiatric Illness |
| - Loss of Sight in One Eye | - Surgery for Subdural Haematoma |
| - Moderately Severe Alzheimer's Disease | - Surgical Removal of Pituitary Tumour |

Group 5: Other Illnesses

- | | |
|---|--|
| - Acute Necrohemorrhagic Pancreatitis | - Early Elephantiasis |
| - Adrenalectomy for Adrenal Adenoma | - Loss of Speech due to Vocal Cord Paralysis |
| - Amputation of One Foot due to Complication from Diabetes Mellitus | - Moderately Severe Burns |
| - Coma for 48 hours | - Moderately Severe Rheumatoid Arthritis |
| - Crohn's Disease (Regional Enteritis) | - Osteoporosis with Fractures* |
| - Diabetic Retinopathy | - Severance of One Limb |
| | - Severe Central or Mixed Sleep Apnea |

Crises covered in Crisis EasyGo – UStillCover

Group 1 : Cancer

- Cancer

Group 2 : Illnesses related to Organ Failure

- Chronic Liver Disease
- Fulminant Hepatitis
- HIV Due to Blood Transfusion
- Occupationally Acquired HIV

Group 4: Illnesses related to Nervous System

- Bacterial Meningitis
- Creutzfeld-Jacob Disease
- Encephalitis
- Major Head Trauma
- Motor Neurone Disease
- Multiple Sclerosis
- Muscular Dystrophy
- Poliomyelitis
- Progressive Muscular Atrophy
- Progressive Supranuclear Palsy
- Severe Myasthenia Gravis

Group 5: Other Illnesses

- Amputation of Feet due to Complication from Diabetes Mellitus
- Chronic Adrenal Insufficiency
- Crohn’s Disease
- Ebola
- Elephantiasis
- Loss of Limbs
- Major Burns
- Necrotizing Fasciitis
- Severe Osteoporosis*
- Ulcerative Colitis

Special Diseases covered in Crisis EasyGo – UStillCover

Group 1 : Cancer^

- Carcinoma-in-situ of Specific Organs (all organs except skin, including but not limited to the organs listed below)
 - a) Breast
 - b) Cervix Uteri
 - c) Colon and Rectum
 - d) Fallopian Tube
 - e) Liver
 - f) Lung
 - g) Nasopharynx
 - h) Ovary
 - i) Pancreas
 - j) Penis
 - k) Stomach and Esophagus
 - l) Testis
 - m) Urinary Tract (for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included)
 - n) Uterus
 - o) Vagina
- Early Stage Malignancy of Specific Organs
 - a) Chronic Lymphocytic Leukaemia
 - b) Prostate
 - c) Thyroid
 - d) Non Melanoma Skin Cancer

Group 2: Illnesses related to Organ Failure

- Biliary Tract Reconstruction Surgery
- Liver Surgery
- Miliary Tuberculosis
- Skin Transplantation

Group 4: Illnesses related to Nervous System

- Early Amyotrophic Lateral Sclerosis
- Early Multiple Sclerosis
- Early Progressive Muscular Atrophy
- Less Severe Encephalitis
- Moderately Severe Bacterial Meningitis
- Moderately Severe Brain Damage
- Moderately Severe Muscular Dystrophy
- Moderately Severe Poliomyelitis
- Surgery for Subdural Haematoma

Group 5: Other Illnesses

- Adrenalectomy for Adrenal Adenoma
- Amputation of One Foot due to Complication from Diabetes Mellitus
- Crohn's Disease (Regional Enteritis)
- Diabetic Retinopathy
- Early Elephantiasis
- Moderately Severe Burns
- Osteoporosis with Fractures*
- Severance of One Limb

* The claim for Severe Osteoporosis and Osteoporosis with Fractures will only be paid if at the time of diagnosis the Insured is below aged 70 (age next birthday).

^ Subject to HK\$400,000/US\$50,000 per Insured of each claim under all policies of Crisis EasyGo Series.

Note : Benefits relating to Crisis and Special Disease are payable according to the policy provisions. Please refer to the definition of Crises and Special Diseases in the policy provisions for the details of Crises and Special Diseases.

Remarks

- 1

While this policy is in force, if the Insured has the First Confirmed Diagnosis of Crisis or Special Disease and survives for a period of at least 14 days from the date of the First Confirmed Diagnosis of Crisis or Special Disease, FWD Life Insurance Company (Bermuda) Limited (incorporated in Bermuda with limited liability) (“FWD”, “We”, “Us” or “Our”) will pay to the Policy Owner the Crisis Benefit or Special Disease Benefit (as the case may be).

Upon the payment of claims under Special Disease Benefit or the payment of Crisis Benefit for Cancer during the 2nd and 3rd Policy Year (Applicable to Crisis EasyGo – UCanCover only), the Current Sum Insured of the Policy will be reduced accordingly. Current Sum Insured means the Initial Sum Insured less any claims paid and/or payable for Special Disease Benefit or Crisis Benefit for Cancer during the 2nd and 3rd Policy Year (Applicable to Crisis EasyGo – UCanCover only) under the Policy. Crisis Benefit, Guaranteed Cash Value, future premium and non-guaranteed Special Bonus (if any) will be reduced accordingly. The following payment(s) under each claim of Special Disease Benefit will not be higher than the reduced Current Sum Insured.
- 2

Applicable to Crisis EasyGo – UCanCover: Each Special Disease is payable once only (except for Angioplasty of Coronary Artery). A maximum of two claims can be made in respect of Angioplasty of Coronary Artery under the Plan. To be eligible for the second claim under Angioplasty of Coronary Artery, the treatment must be performed on a location of stenosis or obstruction in a major coronary artery where no stenosis greater than 60 percent was identified in the coronary angiogram relating to the first claim of this illness, for which benefit has been paid.

Applicable to Crisis EasyGo – UStillCover: Each Special Disease is payable once only (except for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs). A maximum of two claims can be made in respect of Carcinoma-in-situ or Early Stage Malignancy of Specific Organs under the Plan. To be eligible for the second claim under Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, the claims must be a Carcinoma-in-situ or Early Stage Malignancy of one of the covered organs that is different from the organ(s) of the previous claims for which benefit(s) have/has been paid. If the relevant covered organ has both a left and a right component (such as, but not limited to the lungs or breasts), the left side and right side of the organ shall be considered one and the same organ.
- 3

This Crisis Benefit will be payable until the Aggregate Limit has been reached while this Policy is in force. Once the Aggregate Limit has been reached after the payment of Crisis Benefit and while the Policy is still in force, if the total claims paid of Crisis Benefit and/or Special Disease Benefit under the Policy reaches 100% of the Initial Sum Insured, FWD will waive the balance of premium payable under the Policy falling due immediately after the date following the First Confirmed Diagnosis of the Crisis which leads the Total Claims paid under the Policy to reach 100% of the Initial Sum Insured.
- 4

While this Policy is in force, after Crisis Benefit has been paid or is payable, it becomes Medically Necessary for the Insured to be Confined in an Intensive Care Unit for 3 or more consecutive days with the use of Invasive Life Support in respect of the same covered Crisis, provided that the first day of Confinement of Intensive Care Unit is within 1 year after the date of First Confirmed Diagnosis of such Crisis, FWD shall pay Extended Critical Medical Care Benefit. This benefit will be payable only once under this Policy.
- 5

This additional benefit amount will not be deducted from the Current Sum Insured. This benefit will be payable only once under this Policy. This benefit will be automatically terminated on the Policy Anniversary immediately preceding the 86th birthday of the Insured. This benefit is also subject to the following conditions,

1

if (a) any of Crisis Benefit, and (b) Life Impact Benefit are payable by FWD as a result of same incident, FWD will not pay the Life Impact Benefit; and/ or

2

if any preceding claim for illness or Injury has been paid under Crisis Benefit, FWD will not pay the Life Impact Benefit for the same illness or Injury.
- 6

Provided that all premiums are paid when due and the Policy is in force, the Insured is entitled to a maximum of 5 medical check-ups under this Policy offered by third party service providers designated by FWD. The terms and conditions of the check-up service will be determined at the sole discretion of FWD at the time the services are provided. FWD reserves the right to amend or exchange any of the above benefits without prior notice to the Policy Owner and/or the Insured.
- 7

When the policy has been in effect for 5 years or more, a Special Bonus, which is not guaranteed, may be payable under the policy upon the payment of Crisis Benefit, Death Benefit, Surrender Benefit or Maturity Benefit under the policy, or at the end of the one year reinstatement period if the policy lapses and is not reinstated within that period. A proportionate non-guaranteed Special Bonus, if any, may also be paid upon payment of the Special Disease Benefit. Non-guaranteed Special Bonus (if any) will then be reduced on a pro rata basis accordingly. Non-guaranteed Special Bonus will be payable until Total Claims of Crisis Benefit and/or Special Disease Benefit under the policy reaches 100% of the Initial Sum Insured.
- 8

PREMIER THE ONEcierge is currently provided by HealthMutual Group Limited (“HMG”) and its healthcare network team and Parkway Hospitals Singapore (“Parkway”) and shall not form a part of the policy or benefit item under the policy provisions. FWD reserves the right to terminate or vary the service in its sole discretion without further notice. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team and Parkway. This service is only available in the Pan-Asia Region. The hotline for PREMIER THE ONEcierge is (852) 8120 9066 for Hong Kong and there is also a toll-free number 400 9303078 for Mainland. For details, please refer to the attached leaflet of FWD Professional Health Assistance Services.

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The service is currently 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 solely. FWD shall not be responsible for any act or failure to act on the part of International SOS. Details of the services and service provider may be revised from time to time without giving any notice. For details, please refer to the attached leaflet of FWD Professional Health Assistance Services.
- 10

The service is currently 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 solely. 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 and service provider may be revised from time to time without FWD’s prior notice. For details, please refer to the attached leaflet of FWD Professional Health Assistance Services.
- 11

Premium rates are not guaranteed and FWD reserves the right to review the premium rates from time to time.
- 12

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.
- 13

You must provide FWD with all documents and information FWD requires within 30 days from the date you first receive relevant proof. If any premium is unpaid at the end of the Extended Grace Period, the premium shall be in default and the Policy shall cease to be in force from the date of the first unpaid premium was due without prejudice to any claim arising prior to the date the Policy ceases to be in force. Any due and unpaid premium shall be deducted from any benefit otherwise payable. You are only entitled to apply and claim for the Extended Grace Period Benefit once under this Policy.

Dividend / Bonus Information & Investment Strategy

Dividend / Bonus Information

The non-guaranteed reversionary bonus (if any), non-guaranteed annual dividend (if any), non-guaranteed special bonus (if any) and non-guaranteed interest for funds on deposit (if any) (including but not limited to Premium Deposit Account and Bonus Lock-in Account (if any)) is determined based on the latest dividend/bonus declaration philosophy and investment strategy of FWD that shown below (Please refer to FWD’s website for latest information: <https://www.fwd.com.hk/en/regulatory-disclosures/dividend-bonus-declaration-philosophy/>)

You may also refer to below FWD’s website for dividend/bonus history: (<https://www.fwd.com.hk/en/regulatory-disclosures/fulfillment-ratios/>)

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 dividend (if any), terminal dividend (if any), reversionary bonus (if any), special bonus (if any) and interest for funds on deposit (if any).

Through the dividend/bonus declaration, you participate in the financial performance of the participating products. The financial performance 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. FWD may also deduct as appropriate any cost and expense to support the policy benefits (such as charges to support guarantee) which will be reflected in the actual declared dividend/bonus.

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.

Dividend / Bonus Information & Investment Strategy (Cont.)

Funds on Deposits

The Plans may allow the policyholders to place funds with us in arrangements including but not limited to non-guaranteed accumulated annual dividends (if any), guaranteed and non-guaranteed accumulated cash coupons (if any), guaranteed and non-guaranteed accumulated annuity payments (if any), Premium Deposit Account (if any), Bonus Lock-in Account (if any), Special Bonus Lock-in Account (if any) and unpaid amount under death benefit settlement option (if any), potentially earning interest at a non-guaranteed interest rate. To determine such non-guaranteed interest rate, we consider the financial performance on the pool of assets in which these amounts are invested with reference to the past experience and future outlook. This pool of assets is segregated from other investments of the Company and may include fixed income-type securities.

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	30% - 100%
Equity-type investments	0% - 70%

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

We may also utilize derivatives to manage our investment risk profile and for hedging purposes.

Our currency strategy is to mitigate the currency exposure through matching the asset portfolio to the underlying policy denomination. For fixed income-type securities, this may be achieved through direct investments in the underlying policy denomination or use of currency hedging instruments if the currency of the investment is different from the underlying policy denomination. For equity-type investments, they may carry a currency exposure different from the underlying policy in order to provide diversification benefits through investments across various geographical areas and industries. Furthermore, the asset portfolio is actively managed by investment professionals to closely monitor the investment performance and investment outlook. 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.

Key Product Risks

Credit risk

The Plans are insurance policies issued by FWD. The application of these insurance products and all benefits payable under your policy are subject to the credit risk of FWD. You will bear the default risk in the event that FWD is unable to satisfy its financial obligations under this insurance contract.

Liquidity risk

The Plans are long term insurance policies. These policies 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. Applications of the Plans may constitute the liquidity risk to your financial condition. You need to bear the liquidity risk associated with the Plans.

Exchange rate and currency risk

The application of these insurance products 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 these policies may not be sufficient for the increasing protection needs in the future even if FWD 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 Reversionary Bonus/Annual Dividend/Special Bonus/Interest for Funds On Deposit) are not guaranteed and are determined at FWD's discretion based on its Dividend/Bonus declaration philosophy. Under certain circumstances, the non-guaranteed benefits may be zero.

Premium adjustment

The premiums of the Plans are non-guaranteed and FWD reserves the right from time to time to review, vary and significantly increase the premium due to factors including but not limited to claims experience, policy persistency and interest rate environment, provided any premium review shall be applied to all other policies of the same kind. 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 Plans are 10, 15, 20 or 25 years.

FWD 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, FWD 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 and you may lose all of your benefits.

Key Product Risks (Cont.)

Termination conditions

The Plans shall terminate on the earliest of the following:

1. The death of the Insured;
2. The Maturity Date of the Policy;
3. The date of Policy surrender. Such date is determined in accordance with FWD's applicable rules and regulations in relation to Policy surrender;
4. The date of termination of the Policy due to default in payment of any premium determined in accordance with Grace Period or Extended Grace Period Benefit (as the case may be);
5. The Indebtedness equals or exceeds the Guaranteed Cash Value of the Policy; or
6. The Total Claims paid and/or payable reaches 100% of the Initial Sum Insured (except when Crisis Benefit is payable, this Policy will be terminated when Extended Critical Medical Care Benefit has been paid or terminated).

Exclusions

The below exclusions apply to Crisis Benefit, Special Disease Benefit, Life Impact Benefit and Extended Critical Medical Care Benefit.

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 (Except "HIV due to Blood Transfusion" and "Occupationally Acquired HIV").
2. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not.
3. The participation in any criminal event.
4. 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.

Please refer to policy provisions for the exclusion for the respective benefits.

Waiting Period

Crisis EasyGo – UCanCover

We will pay the Crisis Benefit (except due to Cancer), Special Disease Benefit (except due to Carcinoma-in-situ or Early Stage Malignancy of Specific Organs) and Life Impact Benefit only where the First Symptoms appear, the condition occurs and the diagnosis or surgery relating to the relevant Disease or illness occurs after the first 90 days from the Policy Date. This first 90 days limitation does not apply if any Disease or illness is solely and directly caused by an Accident and independently of any cause.

If the claim for Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs is a recurrence of the cancer or carcinoma-in-situ, where such cancer or carcinoma-in-situ has mentioned under the application form and existed before the Policy Date, We will pay the Crisis Benefit and Special Disease Benefit only if the First Confirmed Diagnosis of the subsequent Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs takes place after the first year from the Policy Date.

If the claim for Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs is not a recurrence of the cancer or carcinoma-in-situ, where such cancer or carcinoma-in-situ has mentioned under the application form and existed before the Policy Date, We will pay the Crisis Benefit and Special Disease Benefit only where the First Symptoms appear, the condition occurs and the diagnosis or surgery relating to the relevant Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs occurs after the first year from the Policy Date.

This first year limitation does not apply if any Cancer or Carcinoma-in-situ or Early Stage Malignancy of Specific Organs is solely and directly caused by an Accident and independently of any cause.

Key Product Risks (Cont.)

Crisis EasyGo – UStillCover

We will pay the Crisis Benefit, Special Disease Benefit and Life Impact Benefit only where the First Symptoms appear, the condition occurs and the diagnosis or surgery relating to the relevant Disease or illness occurs after the first 90 days from the Policy Date. This first 90 days limitation does not apply if any Disease or illness is solely and directly caused by an Accident and independently of any cause.

Please refer to policy provisions for the waiting period for the respective benefits.

Suicide

If the Insured dies by suicide, whether sane or insane, within 13 calendar months from the Policy Date, FWD's liability shall be limited to the amount of the premiums paid without interest, less any outstanding insurance levy, Indebtedness and any benefit which has been paid under this Policy.

Important Notes

Cancellation Right within Cooling-off Period

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 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.

Cancellation Right after Cooling-off Period

To surrender the Policy, the Policy Owner needs to send FWD a completed surrender form or by any other means acceptable by FWD.

Declaration relating to the Foreign Account Tax Compliance Act and Automatic Exchange of Financial Account Information

FWD is obliged to comply with the following legal and/or regulatory requirements in various jurisdictions as promulgated and amended from time to time, such as the United States Foreign Account Tax Compliance Act, and the automatic exchange of financial account information regime ("AEOI") followed by the Inland Revenue Department (the "Applicable Requirements"). These obligations include providing information of clients and related parties (including personal information) to relevant local and international authorities and/or to verify the identity of the clients and related parties. In addition, our obligations under the AEOI are to:

- I. identify accounts as non-excluded "financial accounts" ("NEFAs");
- II. identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
- III. 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. collect information on NEFAs ("Required Information") which is required by various authorities; and
- V. furnish Required Information to the Inland Revenue Department.

The Policy Owner must comply with requests made by FWD to comply with the above Applicable Requirements.

Notice of Claim

Written notice of any claim for Death Benefit, Crisis Benefit, Special Disease Benefit, Life Impact Benefit and Extended Critical Medical Care 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, the date of the relevant medical treatment or First Confirmed Diagnosis of such respective Crisis or Special Disease. Any claims for Death Benefit, Crisis Benefit, Special Disease Benefit, Life Impact Benefit and Extended Critical Medical Care Benefit received after the said 6-month period shall not be accepted, unless FWD in its sole discretion decides otherwise.

Please refer to policy provisions for claiming procedures for Extended Grace Period Benefit.

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, including but not limited to, age, gender and other material facts declared on the relevant application form, in FWD's opinion, may affect FWD's risk assessment. As the case may be, FWD may collect the premium shortfall with interest and any additional insurance levy, refund the excess premium and insurance levy without interest or even void this Policy from the Policy Date. In case the Policy is declared void from the Policy Date, FWD's liability shall be limited to the amount of Total Premiums Paid and total insurance levy paid without interest, less any benefit which has been paid under this Policy.

Important Words

Confinement or Confined

The period when the Insured stays in a Hospital as an in-patient for Medically Necessary treatment of an illness or Injury. The Hospital stay must be for at least 6 continuous hours or, if this does not happen, the Hospital must charge for room and board. The Insured cannot leave the Hospital before he or she is discharged. Confinement ends when the Hospital issues its final accounts in preparation for the Insured to formally leave, or be discharged from, the Hospital.

Disease(s)

The Disease(s) covered under this Policy are shown in a table as set out in “Appendix 1: List of Diseases Covered” of policy provisions. Each Disease is further defined in Appendix 2 or Appendix 3 of policy provisions.

First Confirmed Diagnosis

The first time that a diagnosis of a Crisis or Special Disease (as the case may be) is made by a Medical Practitioner and confirmed by histopathological and/or cytopathological patterns and/or radiological tests, blood tests and/or other laboratory tests results. Date of diagnosis of a Crisis or Special Disease 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. For Cancer and Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, a diagnosis based on history, physical and radiological findings only will not meet the standards of diagnosis required by this Policy.

First Symptoms

Any condition or illness or any of its direct causes in respect of an Insured, 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.

Invasive Life Support

A medical service, procedure or supply which is necessary and is:

- Extracorporeal Membrane Oxygenation (ECMO); or
- Left ventricular assist device (LVAD) or intra-aortic balloon pump; or
- Ventilatory support by invasive artificial airway (endotracheal tube or tracheostomy tube) for a minimum of 3 days.

The following are not covered: Prolonged admission and ventilation in Intensive Care Unit or surgery done for organ donation; admission to Intensive Care Unit or surgery for cosmetic, weight reduction or gender transformation purposes; hospitalisation for psychiatric or mental illness; surgery to correct vision or refractory disorder; or hospitalisation to High Dependency Unit (HDU), or general hospital ward. However, ventilation by any non-invasive ventilator such as CPAP, BiPAP or Face mask, is specifically excluded.

Medically Necessary

A medical service, procedure or supply which is necessary and is:

- a. consistent with the diagnosis and customary medical treatment for the Insured’s disease;
- b. recommended by a Medical Practitioner for the care or treatment of the Insured’s disease 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 are not considered Medically Necessary.

Declarations

- These products are underwritten by FWD. FWD is solely responsible for all features, policy approval, coverage and benefit payment under the products. FWD recommends that you carefully consider whether the products are suitable for you in view of your financial needs and that you fully understand the risk involved in the products before submitting your application. You should not apply for or purchase the products unless you fully understand them and you agree they are suitable for you. Please read through the following related risks before making any application of the products.
- 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 (“Hong Kong”) 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 Hong Kong. All selling and application procedures of the products must be conducted and completed in Hong Kong.
- The products are insurance products. The premium paid is not a bank savings deposit or time deposit. The product is not protected under the Deposit Protection Scheme in Hong Kong.
- These products are participating life product with savings element. The premiums of these Plans have covered the costs of insurance and the related costs of the policy 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.
- The products are a participating life 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.
- 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 and any insurance levy paid without interest. FWD reserves the right to accept/reject any insurance application and can decline your insurance application without giving any reason.
- All the above benefits and payment are paid after deducting policy debts (if any, e.g. unpaid premiums or policy loan with interest).

This product material is for reference only and is indicative of the key features of the products. For the full and exact terms and conditions and the full list of exclusions of the products, please refer to the policy provisions of these products. 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 products are governed by the laws of Hong Kong.

For more information

Please contact your financial advisor,
call our Service Hotline or
simply check out our website.

fwd.com.hk



Service Hotline
3123 3123



Learn more about
Crisis EasyGo – UCanCover /
Crisis EasyGo – UStillCover