

「樂康全面保」住院醫療附加保障
“MediZure” Hospitalization Rider



“MediZure” Hospitalization Rider

Unexpected illness will usually lead to large medical expenses and result in serious financial burden to you and your family. To enjoy a healthy life without financial worries, you should plan ahead with sufficient healthcare protection. FTLife offers “MediZure” Hospitalization Rider to protect you and your family every step all the way. The plan is specially designed for those aged 15 days to 70 years and provides protection up to age 100 with 3 different levels of benefits for your choice. The policy will be renewed on the policy anniversary date upon your payment of premium throughout the protection period. To benefit from a more comprehensive protection, you can choose to attach the optional “MediZure” Major Medical Rider.

Comprehensive Medical Coverage for Total Protection

The rider meets your needs by covering daily room and board, doctor’s visits and other medical related hospital expenses such as laboratory fees, X-ray examinations, medicines and injections taken during hospital confinement.

Surgical Benefit for Peace of Mind

In case a surgical operation is performed at the hospital due to illness or accident, our Surgical Benefit gives you peace of mind by covering the surgeon’s fees, operating theatre and anesthetist’s fees.

Compassionate Death Benefit for Extra Care

Regardless of the cause of death, whether accidental or natural, a Compassionate Death Benefit will be paid to your family. An additional death benefit will also be provided to organ donor (applicable to Hong Kong Permanent Residents only).

No Claim Discount for Better Financial Assistance

A No Claim Discount will be automatically offered to you upon policy renewal if policy remains effective and there is no claim for the past 3 consecutive years and without policy reinstatement. You can enjoy a 15% discount based on the premium of the previous year. Even claims for Out-patient Surgical Expenses will not affect you to enjoy the No Claim Discount.

Benefit Coverage	Maximum Benefit per Confinement (HKD)		
	Economy	Standard	Deluxe
Hospital Benefit			
Daily Room & Board	\$760	\$1,500	\$3,000
Maximum No. of Days	120	120	120
Daily Doctor’s Visits	\$760	\$1,500	\$3,000
Maximum No. of Days	120	120	120
Intensive Care	\$2,800	\$3,800	\$7,600
Maximum No. of Days	30	30	30
In-patient Specialist’s Fee	\$2,800	\$3,800	\$7,600
Miscellaneous Hospital Expenses	\$10,000	\$16,000	\$24,000

Surgical Benefit¹ (Per Schedule)			
Benefit Coverage	Economy	Standard	Deluxe
Surgical Expenses	\$42,000	\$63,000	\$84,000
- In-patient Surgical Expenses	\$42,000	\$63,000	\$84,000
- Out-patient Surgical Expenses ²	\$21,000	\$31,500	\$42,000
Anesthetist’s Fee	\$14,700	\$22,050	\$29,400
Operating Theatre Fee	\$14,700	\$22,050	\$29,400

Emergency Out-patient Treatment for Accidental Injury³			
Benefit Coverage	Economy	Standard	Deluxe
Emergency Out-patient Treatment for Accidental Injury ³	\$4,000	\$5,000	\$7,500

Daily Post Surgery Home Nursing			
Benefit Coverage	Economy	Standard	Deluxe
Daily Post Surgery Home Nursing	\$400	\$700	\$1,000
Maximum No. of Days	30	30	30

Benefit Coverage	Maximum Benefit per Confinement (HKD)		
	Economy	Standard	Deluxe
Post-hospitalization Chiropractic Treatment & Physiotherapy	\$300	\$400	\$500
Maximum No. of Days	10	10	10
Extra Bed for Family Members ⁴	\$200	\$350	\$500
Maximum No. of Days	30	30	30
Total Maximum per Confinement	\$375,600	\$641,400	\$1,179,900
Compassionate Death Benefit	\$15,000	\$20,000	\$30,000
Additional Death Benefit for Organ Donor ⁵	\$15,000	\$20,000	\$30,000

Please note:

- We reserve the right to revise, adjust, withdraw and/or supplement the benefits payable and/or any clauses/conditions under this Plan. We shall notify you in writing at least 30 days before the policy anniversary about the revised premium rates, benefits, clauses/conditions (if applicable) and their effective date(s).

- Only medical expenses arising from illnesses happen after 30 days of policy effective date are covered in this plan.

1 Surgical Fee Percentages vary subject to the Surgery item. Please contact your consultant for details.

2 Out-patient Surgical Expenses include :

- laboratory tests performed within 90 days before the operation; and
- any medically necessary medication on the date of such operation or surgical procedure; and
- one outpatient consultation visit before and one outpatient consultation visit after the date of such outpatient surgery for the same illness or injury, subject to the maximum daily benefit of Daily Doctor’s Visits and one visit per day.

If the insured is confined in hospital for the same cause within 90 days after the Out-patient operation, the total amount of the Out-patient Surgical Expenses and In-patient Surgical Expenses should not exceed the maximum total benefit for the In-patient Surgical Expenses.

3 If the insured suffers from accidental injury and receives treatment in the out-patient department of a hospital within 24 hours of the accident, the charges will be reimbursed.

4 The benefit is applicable to the insured who is aged below 16 or over 60.

5 The benefit is only applicable to Hong Kong Residents who have the organ donation operation carried out in Hong Kong hospitals.

“MediZure” Major Medical Rider

80% Reimbursement for Greater Financial Support

The optional “MediZure” Major Medical Rider is specially designed for those aged 15 days to 65 years and provides protection up to age 70 upon your payment of premium throughout the protection period. It offers extra layer of financial assistance and security for additional medical care. There is no deductible applying to the “MediZure” Major Medical Rider, 80% of the expenses^{6,7} in excess of the amount payable under the “MediZure” Hospitalization Rider will be reimbursed to you (subject to the maximum benefit amount per confinement).

Benefit Coverage	Maximum Benefit per Confinement (HKD)		
	Economy	Standard	Deluxe
“MediZure” Major Medical Rider	\$100,000	\$168,000	\$338,000
Deductible	NIL	NIL	NIL
Reimbursement Percentage	80%	80%	80%

6 The “MediZure” Major Medical Rider is payable for daily room and board expenses starting from the 121 day of hospital confinement and is subject to the maximum daily benefit amount of the selected “MediZure” Hospitalization Rider.

7 Only applicable to Daily Room and Board, Daily Doctor’s Visits, Miscellaneous Hospital Expenses, Surgical Expenses, Anesthetist’s Fee, Operating Theatre Fee, Intensive Care and Inpatient Specialist’s Fee.

Exclusions

This plan shall not cover the expenses for any confinement, surgery, treatment, examination, loss and/or benefit caused directly or indirectly, wholly or partly, voluntarily or involuntarily by any of the following:

- 1 Any medical service that is not consistent with the diagnosis and treatment for the illness or injury;
- 2 Suicide, self-inflicted injury, while sane or insane; any injury or disease suffered under or because of the influence of alcohol, poison, medication, drug, and sedatives or resulting from any unlawful or illegal act (whether attempted or committed) of the Insured;
- 3 Any condition resulting from infertility including in-vitro fertilisation or any other artificial induction methods, sterilization, pregnancy, childbirth, abortion, miscarriage, birth control or sexual dysfunction;
- 4 Any congenital anomalies or developmental problems including but not limited to Autism, Attention Deficit Hyperactivity Disorder, language disorders, mental/physical disorders and/or other developmental disabilities of which signs and symptoms have manifested or diagnosis has been made before the Insured attains the age of seventeen (17);
- 5 Dental care or surgery unless necessitated by Injury and not being replacement of natural teeth or installation, removal or replacement of denture or prosthesis such as bridges and crowns or related expenses;
- 6 General check-up, convalescence, custodial or rest care or any cosmetic or plastic surgery or elective surgery, oral and maxillofacial surgeries, and/or any medical service that is primarily for diagnostic scanning and examination or physical therapy;
- 7 Treatment or surgery for tonsils, adenoids, hernia until the Insured has been continuously covered under this Plan for a period of one hundred and twenty (120) calendar days immediately preceding such treatment or surgery;
- 8 Treatment or tests related to Human Immunodeficiency Virus (HIV) and/or HIV-related illness including Acquired Immune Deficiency Syndrome (AIDS) or AIDS-related complex;
- 9 Any injury resulted from war, declared or undeclared, civil war, strike, riots, revolution or terrorists acts;
- 10 Any non-medical services including all reusable items but not limited to wheelchairs, walking aids, braces, aspirators of any kind, haemodialysis machine and so forth;
- 11 Any Confinement, surgery, treatment or loss of the Insured within Mainland China (meaning any part of China except Hong Kong, Macau and Taiwan) which does not take place in a Grade 3A Hospital as classified by the government of the People's Republic of China

Disclosure of Important Information

1. Cooling Off Right

You may cancel your policy and get back your premium paid within the earlier of 21 days after the delivery of the policy or the issue of a notice to you or your representative. Such notice should inform you of the availability of the policy and expiry date of the cooling-off period. Please refer to the cooling off initiative issued by the Hong Kong Federation of Insurers from time to time for reference. You have to tell us by giving a written notice if you determine to exercise your cooling off right. Such written notice must be signed by you and received directly by us at 27/F, Wing On Centre, 111 Connaught Road Central, Hong Kong.

2. Key Product Risks

i. Premium Adjustment

We will adjust premiums yearly according to the attained age of the insured and at a rate* to be determined by us at the time of renewal.

* Rates are determined based on factors including but not limited to the actual experience of claims, interest rate, persistency and expense.

We will issue a written notice to inform you the premium amount at least 30 days in advance of premium renewal.

ii. Termination

We have the right to terminate the plan before the end of the protection period under the following circumstances:

- Non-payment of premiums at the end of the grace period of 31 days from its due date; or
- The basic plan is cancelled or surrendered or terminated; or
- The basic plan is converted into paid-up or extended term insurance plan (if applicable).

We reserve the right not to renew this plan by giving at least 30 days' notice in writing to you before any policy anniversary.

iii. Inflation Risk

When you review the values shown in the benefit illustrations, please note that the cost of living in the future is likely to be higher than it is today due to inflation. In that case you will receive less in real terms even if we meet all of our contractual obligations under the policy.

3. Other Key Product Risks

- "MediZure" Hospitalization Rider Plan is issued either in HK dollar or US dollar. Premiums shall be paid either in HK dollars or in policy currency only. You can specify the policy currency at the time of application. Policy currency cannot be altered once the policy has been issued.

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

- "MediZure" Hospitalization Rider Plan is an insurance policy issued by us. The insurance benefits are subject to the company's credit risks.

Insurance Policy Product Brochure Addendum -

I. Foreign Account Tax Compliance Act

Under the U.S. Foreign Account Tax Compliance Act (“FATCA”), a foreign financial institution (“FFI”) is required to report to the U.S. Internal Revenue Service (“IRS”) certain information on U.S. persons that hold accounts with that FFI outside the U.S. and to obtain their consent to the FFI passing that information to the IRS. An FFI which does not sign or agree to comply with the requirements of an agreement with the IRS (“FFI Agreement”) in respect of FATCA and/or who is not otherwise exempt from doing so (referred to as a “nonparticipating FFI”) will face a 30% withholding tax (“FATCA Withholding Tax”) on all “withholdable payments” (as defined under FATCA) derived from U.S. sources (initially including dividends, interest and certain derivative payments).

The U.S. and Hong Kong have agreed an inter-governmental agreement (“IGA”) to facilitate compliance by FFIs in Hong Kong with FATCA and which creates a framework for Hong Kong FFIs to rely on streamlined due diligence procedures to (i) identify U.S. indicia, (ii) seek consent for disclosure from its U.S. policyholders and (iii) report relevant tax information of those policyholders to the IRS.

FATCA applies to FTLife Insurance Company Limited (the “Company”) and this Policy. The Company is a participating FFI. The Company is committed to complying with FATCA. To do so, the Company requires you to:

- (i) provide to the Company certain information including, as applicable, your U.S. identification details (e.g. name, address, the US federal taxpayer identifying numbers, etc.); and
- (ii) consent to the Company reporting this information and your account information (such as account balances, interest and dividend income and withdrawals) to the IRS.

If you fail to comply with these obligations (being a “Non-Compliant Accountholder”), the Company is required to report “aggregate information” of account balances, payment amounts and number of non-consenting US accounts to IRS.

The Company could, in certain circumstances, be required to impose FATCA Withholding Tax on payments made to, or which it makes from, your policy. Currently the only circumstances in which the Company may be required to do so are:

- (i) if the Inland Revenue Department of Hong Kong fails to exchange information with the IRS under IGA (and the relevant tax information exchange agreement between Hong Kong and the U.S.), in which case the Company may be required to deduct and withhold FATCA Withholding Tax on withholdable payments made to your policy and remit this to the IRS; and
- (ii) if you are (or any other account holder is) a nonparticipating FFI, in which case the Company may be required to deduct and withhold FATCA Withholding Tax on withholdable payments made to your policy and remit this to the IRS.

You should seek independent professional advice on the impact FATCA may have on you or your policy.

II. Common Reporting Standard

Hong Kong has put in place a framework implementing the Automatic Exchange of Financial Account Information (“AEoI”) which allows for the exchange of financial information among tax authorities. The Company, as a reporting financial institution under the law, is required to collect and provide certain information of policyholders and beneficiaries to the Inland Revenue Department of the Hong Kong Special Administrative Region which exchanges such information with tax authorities of another jurisdiction or jurisdictions which has/have signed an AEoI agreement with Hong Kong and of which the policyholders and beneficiaries may be resident for tax purposes. Where a policyholder or beneficiary fails to provide any requested information, the Company reserves the right to take any action as it deems necessary in order for it to comply with the law.

「樂康全面保」住院醫療附加保障

意料之外的疾病往往帶來巨大的醫療開支，為您及家人帶來沉重的財政負擔。因此，要在無財政憂慮下輕鬆享受健康人生，一份完善的醫療保障是必需的。富通保險誠意推出「樂康全面保」住院醫療附加保障計劃，專為初生15日至70歲人士而設，並提供保障至100歲，配合三個不同級別的保障計劃以供選擇。此附加保單只需在受保期內按時繳付保費，便會於保單週年日續保。您更可以選擇附帶「樂康全面保」超額醫療附加保障，為您及家人作出更加妥善周全的保障。

保障範圍廣泛 照顧一應俱全

此附加保障將因您的需要，提供因入院所涉及的每日醫院住房費用、主診醫生巡房費及其他與醫療相關的醫院費用，例如化驗室檢驗費、X-光檢查、藥物及注射費用等。

外科手術賠償 盡享安枕無憂

若因疾病或意外，以需要於醫院接受外科手術，我們將賠償有關外科手術費、手術室及麻醉師費用。

身故恩恤津貼 送上真摯關懷

無論因意外離世或不幸身故，我們將提供身故恩恤津貼，為您的家人送上關懷。我們更為器官捐贈者（只適用於香港永久居民者）送上額外身故津貼。

無索償折扣優惠 理財更有預算

如連續3年沒有任何索償記錄、持續受保於本計劃及未有作保單復效，我們將於保單續保時，自動給予無索償折扣優惠，相等於前一年保費15%，惟有關保單必須於發放無索償折扣優惠時仍然生效。即使曾作出門診手術費索償，仍可獲得無索償折扣優惠。

保障範圍	每次住院最高賠償額 (港元)		
	經濟	標準	豪華
住院費用賠償			
每日住房費	\$760	\$1,500	\$3,000
最高賠償日數	120	120	120
每日主診醫生巡房費	\$760	\$1,500	\$3,000
最高賠償日數	120	120	120
深切治療病房費	\$2,800	\$3,800	\$7,600
最高賠償日數	30	30	30
住院專科醫生診費	\$2,800	\$3,800	\$7,600
住院雜費	\$10,000	\$16,000	\$24,000

手術費用賠償 ¹ (根據手術表計算)			
手術費	\$42,000	\$63,000	\$84,000
- 住院手術費	\$42,000	\$63,000	\$84,000
- 門診手術費 ²	\$21,000	\$31,500	\$42,000
麻醉師費	\$14,700	\$22,050	\$29,400
手術室費	\$14,700	\$22,050	\$29,400

意外受傷緊急門診治療費 ³	\$4,000	\$5,000	\$7,500
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手術後每日家中私人看護費	\$400	\$700	\$1,000
最高賠償日數	30	30	30

出院後脊椎治療及物理治療	\$300	\$400	\$500
最高賠償日數	10	10	10

保障範圍	每次住院最高賠償額 (港元)		
	經濟	標準	豪華
親人陪伴附加床位費 ⁴	\$200	\$350	\$500
最高賠償日數	30	30	30
每次住院最高賠償額	\$375,600	\$641,400	\$1,179,900
身故恩恤津貼	\$15,000	\$20,000	\$30,000
器官捐贈者額外身故津貼 ⁵	\$15,000	\$20,000	\$30,000

請注意：

- 本公司保留修訂、調整、取消及/或補加本計劃的保障及/或任何條款/細則的權利。本公司會在保單週年日最少30天前以書面通知閣下改變後的保費率、保障、條款/細則(如適用)及其生效日期。
- 只有在受保人保單生效30天後所出現之疾病而引致之醫療費用，方可包括在本計劃之承保範圍。

- 手術費用賠償百分比將根據手術項目而有所不同。請與您的顧問查詢有關詳情。
- 門診手術費同時包括：
 - 手術前90天內進行的實驗室化驗；及
 - 任何在手術或外科手術當天必需的醫藥費用；及
 - 就門診手術進行前及門診手術進行後各一次的門診治療而實際收取的費用(須因同一項疾病或同一次受傷於門診求診)，賠償限額為每日主診醫生巡房費的每日最高賠償，並以每日一次診治為限。
- 如受保者就相同的原因在門診手術後90天內入院，有關的門診手術費和住院手術費合共最高賠償額將不可超過住院手術費所設定的最高賠償額內。
- 如不幸意外受傷，並於意外發生後之24小時內，在醫院緊急門診部接受治療，即可獲得有關賠償。
- 適用於16歲以下或60歲以上的受保人。
- 只適用於在香港進行器官捐贈手術之香港居民。

「樂康全面保」超額醫療附加保障

賠償率高達80% 周全經濟支援

為讓您獲得更周全的經濟支援，更附有「樂康全面保」超額醫療附加保障以供選擇，專為初生15日後至65歲人士而設，並只需按時在受保期內繳付保費，便可獲得延至70歲的保障，以應付超出「樂康全面保」住院醫療附加保障賠償限額的額外醫療費用。超額醫療附加保障更不設自付額，我們將向您支付80%的額外醫療費用^{6,7}(不超過每次住院最高賠償額)。

保障範圍	每次住院最高賠償額 (港元)		
	經濟	標準	豪華
「樂康全面保」超額醫療附加保障	\$100,000	\$168,000	\$338,000
自付額	沒有	沒有	沒有
賠償率	80%	80%	80%

- 「樂康全面保」超額醫療附加保障將賠償自121天起的每日住房和住宿費用，而每日最高賠償額將按所選之「樂康全面保」住院醫療附加保障而定。
- 只適用於每日住房和住宿費用、每日主診醫生巡房費、住院雜費、手術費、麻醉師費、手術室費、深切治療病房費及住院專科醫生診費。

不保項目

不論直接或間接、完全或部份、自願或非自願，因下列情況所導致的住院、手術、治療、檢驗的費用、損失及/或賠償，本計劃均不作賠付：

- 1 任何對有關疾病或受傷所作出的診斷及治療不符合之醫療服務；
- 2 受保人自殺，自致的受傷，不論當時神智是否清醒；受保人在或因酒精、毒藥、藥物、毒品或鎮靜劑的影響下，或受保人因任何企圖實施或實施的非法或違法行為而引起的受傷或疾病；
- 3 不育包括體外受孕或其他人工受孕、絕育、懷孕、分娩、墮胎、流產、節育或性機能失常；
- 4 於受保人十七（17）歲前已顯現病徵或症狀或已被診斷之先天性畸形或異常發展之疾病，包括但不限於自閉症、過度活躍症、語言障礙、精神與體能異常及/或其他發展障礙；
- 5 牙科護理或牙科手術，惟因受傷以致必需進行此類護理或手術者除外；但賠償不包括替換真牙、或牙套或義製器官（例如牙橋或牙冠）之裝設、拆除或替換或有關費用；
- 6 一般身體檢查、療養、特別看護或靜養、整容或整形手術、非必需施行的手術、口腔頰面外科之手術及/或主要為作診斷掃描、影像學檢驗或物理治療的醫療服務；
- 7 扁桃腺、腺樣增殖體、疝氣之治療或手術。但若受保人在接受此類治療或手術時，本計劃已持續生效一百二十（120）個公曆日或以上不在此限；
- 8 有關人體免疫力缺乏病毒（HIV）及/或人體免疫力缺乏病毒的相關疾病（包括後天性免疫缺乏症候群（愛滋病）或其相關的疾病）的治療或檢查；
- 9 因戰爭（不論已宣戰與否）、內戰、暴動、叛亂、革命或恐怖襲擊而引致的受傷；
- 10 所有非醫療服務，包括一切可再用物品但不限於輪椅、步行輔助器、支架、各類抽吸器及洗腎機等之醫療物品。
- 11 受保人在中國大陸（即香港、澳門及台灣以外的中國的任何地區）的任何住院、手術、治療或損失，惟入住獲中華人民共和國政府評定為三級甲等的醫院除外。

重要提示

1. 冷靜期權益

閣下可於保單發出後21天內，或本公司向閣下或閣下的代表發出通知書後的21天內，以較先者為準，取消已購買的保單及取回已繳之保費金額。通知書應說明保單已備妥，並列明冷靜期的屆滿日期。請參閱香港保險業聯會就冷靜期權益不時發出的最新指引。如閣下決定行使冷靜期權益，閣下需以書面知會本公司有關取消保單的決定。該通知必須由閣下簽署及直接送達本公司（地址：香港干諾道中111號永安中心27樓）。

2. 主要產品風險

i. 保費調整

保費將每年根據受保人已屆的年齡調整，而保費率*將由本公司於續保時釐定。

* 保費率會因以下因素而影響，包括但不限於過去的索償紀錄、利率、持續率和費用。

本公司將於續保前不少於30日預先以書面通知閣下有關之保費金額。

ii. 保單終止

在下列情況下，本公司有權在保障期結束前終止閣下的計劃：

- 應繳之保費在31日的寬限期結束當日仍然未繳清；或
- 基本計劃已被取消或退保或終止；或
- 基本計劃被轉換為清繳保險或展期保險（如適用）。

本公司保留不為本保單續保的權利，惟須於保單週年日30天前發出書面通知。

iii. 通脹風險

當閣下查閱利益說明表的各項價值時，請注意由於通貨膨脹，未來生活的成本可能會比現時較高。在該等情況下，即使本公司完成所有其保單下的合同義務，閣下可能獲得比實質價值少。

3. 其他主要產品風險

- 「樂康全面保」住院醫療附加保障以美元或港元為保單貨幣。閣下可選擇以港元或保單貨幣支付保費。閣下可於投保時指定保單貨幣，但保單一經發出，閣下便不能更改保單貨幣。

若閣下以保單貨幣以外的其他貨幣支付保費，本公司會以其參考市場匯率後不時決定的當時的匯率，將有關保費兌換為保單貨幣。本公司將以港元或應閣下要求以保單貨幣發放所有本保單應付的款項。若本公司以保單貨幣以外的其他貨幣向閣下發放款項，該等款項亦將按本公司參考市場匯率後不時決定的當時的匯率兌換。兌換貨幣存在外幣匯兌風險。

- 「樂康全面保」住院醫療附加保障是由本公司發出的保單，閣下的保單利益受本公司的信貸風險影響。

壽險計劃保單產品宣傳單張附錄 -

I. 海外賬戶稅收合規法案

根據美國《海外賬戶稅收合規法案》(FATCA) [《海外賬戶稅收合規法案》]，海外金融機構 (FFI) (「海外金融機構」) 必須向美國稅務局 (IRS) (「美國稅務局」) 報告關於在美國境外持有該外國金融機構賬戶的美國人士的若干資料，並獲得其同意由海外金融機構將有關資料轉移至美國稅務局。如有海外金融機構不簽署或不同意遵守其與美國稅務局就《海外賬戶稅收合規法案》簽訂的協議 (「海外金融機構協議」) 及/或未獲豁免此安排 (稱為「非參與協議的海外金融機構」)，則其所有來自美國 (初期包括股息、利息及某些衍生金融工具繳款) 的「可預扣款項」(其定義與《海外賬戶稅收合規法案》所定義者相同) 將面臨百分之三十的預扣稅 (「海外賬戶稅收合規法案」預扣稅)。

美國和香港已正式簽訂一項跨政府協議 (IGA) (「跨政府協議」)，以促進香港各金融機構遵守《海外賬戶稅收合規法案》，並為香港各海外金融機構營造一個框架，以利用簡易盡職審查程序，(一) 識別美國身份標記、(二) 向其美國保單持有人尋求同意作出披露，及 (三) 向美國稅務局報告該等保單持有人的相關稅務資料。

《海外賬戶稅收合規法案》適用於富通保險有限公司 (「本公司」) 及此保單。本公司是參與協議的海外金融機構。本公司致力於遵守《海外賬戶稅收合規法案》。故此，本公司要求閣下：

- (i) 向本公司提供若干資料，包括 (如適用) 閣下的美國身份識別資料 (如姓名、地址、美國聯邦納稅人識別號碼等)；及
- (ii) 同意本公司向美國稅務局報告此等資料和閣下的賬戶資料 (如賬戶餘額、利息、紅利收入和提取的款項)。

如果閣下未能履行該等責任 (稱為「不合規賬戶持有人」)，本公司必須向美國稅務局報告包括賬戶結餘、收支總額和該等拒絕披露資料的美國賬戶數目的「綜合資料」。

本公司在某些情況下可能必須將《海外賬戶稅收合規法案》預扣稅強制加於其從閣下的保單所作出的付款或保單所收到的款項。目前，本公司只在下列情況可能必須採取上述行動：

- (i) 如果香港稅務局未能與美國稅務局根據跨政府協議 (及香港和美國簽訂的相關稅務資料交換協定) 交換資料，則本公司可能必須從閣下的保單所收到的可預扣款項扣減和扣起《海外賬戶稅收合規法案》預扣稅，並將該預扣稅匯至美國稅務局；及
- (ii) 如果閣下 (或任何其他賬戶持有人) 是一間非參與協議的海外金融機構，則本公司可能必須從閣下的保單所收到的可預扣款項扣減和扣起《海外賬戶稅收合規法案》預扣稅，並將該預扣稅匯至美國稅務局。

就《海外賬戶稅收合規法案》可能對閣下的保單可能帶來的影響，閣下應該尋求獨立專業意見。

II. 共同匯報標準

香港已設立了法律架構實施自動交換財務帳戶資料 (「自動交換資料」)，以容許稅務機構之間交換財務資料。作為法例下的一間申報財務機構，本公司須收集並向香港特別行政區稅務局申報保單持有人及受益人的若干資料，讓稅務局得以與保單持有人及受益人作為稅務居民或所屬的該等已與香港簽訂了自動交換資料協議的其他司法管轄區的稅務機構交換該等資料。如有保單持有人或受益人未能按要求提供所需資料，本公司保留權利採取其認為必須之行動以履行其在法例下的責任。



欲知「樂康全面保」住院醫療附加保障的詳情，請致電客戶服務熱線：2866 8898 或與您的理財顧問聯絡。

Please call our Customer Service Hotline: 2866 8898 or contact your Consultant for more details of "MediZure" Hospitalization Rider.

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富通保險有限公司

於百慕達註冊成立之有限公司

FTLife Insurance Company Limited

A company incorporated in Bermuda with limited liabilities

AM0124/1701

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