

Employee Voluntary Critical Illness Insurance Plan

At Zurich, we understand that every employee is unique in their needs for a comprehensive medical plan. As you go through different life stages, your medical needs change. One of the major medical expenses that burden most people are from critical illnesses. Your group medical benefit might not be enough to ease the financial burden if a critical illness is diagnosed suddenly.



With our Employee Voluntary Critical Illness Insurance Plan, you can obtain additional cover of critical Illness according to your individual needs and extend cover to your beloved family members. To enjoy continuation of coverage, you can also convert the sum insured from Group Critical Illness Insurance Plan to this voluntary plan upon termination of employment or retirement.

Act now to prepare the comprehensive medical plan to you and your family members. We make sure you have the protection and care when you need it, to speed up your recovery and ease your financial burdens.

Highlights on Voluntary Critical Illness

- Enroll a personal critical illness insurance plan with group discount
- Cover 41 major critical illnesses
- Maximum sum insured (inclusive of Group Critical Illness Cover) up to HKD750,000
- Extend the cover to employee's family members*
- Extend your peace of mind upon retirement or resignation
- Onvert the sum insured from Group Critical Illness Insurance Plan to this voluntary plan with no health declaration and waiting period
- Enjoy 5% premium discount if you enroll with your family members*
- Enrolment is simple and easy with no medical check-up

Enrolment eligibility

- Applicant must be insured by Employer's Group Critical Illness Insurance Plan from Zurich
- Family member* can enjoy the Voluntary Critical Illness protection once the employee has enrolled to this plan
- Over for insured person aged from 15 days to 70 years and renewable up to aged 75 years
- Over for dependent and unmarried child(ren) aged from 15 days to 17 years
- * Family shall include the applicant, his/her spouse and/or dependent and unmarried child(ren) aged below 17 years

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List of critical illness coverage

Payment for 100% sum insured for any one of the critical illnesses defined and this protection shall cease when the sum insured is fully reimbursed.

Illnesses related to the heart					
Coronary Artery by-pass Surgery	Heart Attack	Heart Value Surgery	Pulmonary Arterial Hypertension	Surgery to Aorta	
Illnesses related to m	Illnesses related to major organs and functions				
Blindness	Chronic Relapsing Pancreatitis	End Stage Liver Disease	End Stage Lung Disease	Fulminant Viral Hepatitis	
Kidney Failure	Deafness	Loss of Limb	Loss of Speech	Major Burns	
Major Organ Transplant	Total and Permanent Disability				
Illnesses related to ne	ervous system				
Alzheimer's Disease	Brain Damage	Brian Surgery	Benign Brain Tumour	Coma	
Encephalitis	Major Head Trauma	Multiple Sclerosis	Muscular Dystrophy	Motor Neurone Disease	
Paralysis	Parkinson Disease	Poliomyelitis	Stroke	Apallic Syndrome	
Others					
Cancer	Elephantiasis	Loss of Independent Existence	Severe Rheumatoid Arthritis	Systemic Lupus Erythematosus	
Terminal Illness	AIDS due to Blood Transfusion	Occupational acquired HIV	Aplastic Anaemia		

Level of Premium

The sum insured amount of Employee Voluntary Critical Illness Insurance Plan is divided into 5 units.

Sum Insured of Employee Voluntary Critical Illness Insurance Plan (HKD)				
Unit 1	Unit 2	Unit 3	Unit 4	Unit 5
150,000	300,000	450,000	600,000	750,000

Remark: Maximum total sum insured for Group Critical Illness Insurance Plan and Employee Voluntary Critical Illness Insurance Plan is HKD750,000.

Highlights on Group Critical Illness Conversion

To enjoy continuation of coverage, employees can also convert the sum insured from Group Critical Illness Insurance Plan to this voluntary plan upon termination of employment or retirement. If you are diagnosed with a critical illness covered by us, you can be flexible to cope with the financial burden of medical expenses.

- Maximum converted sum insured up to HKD450,000 with no medical check-up
- No health declaration is required
- Waiting period is waived

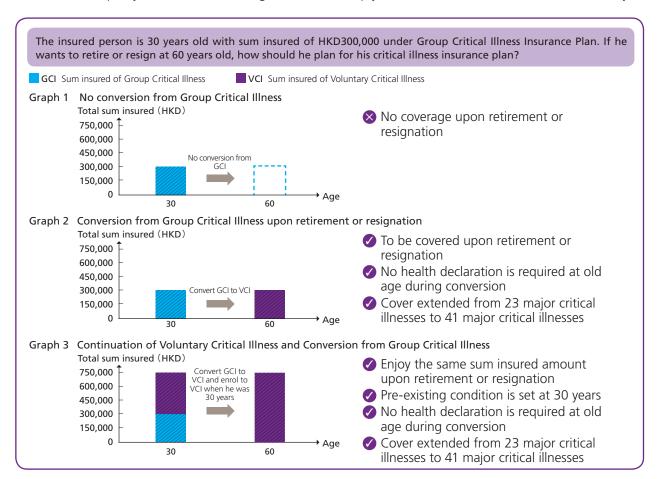
Eligibility for converting the sum insured from Group Critical Illness

- Applicants must be under cover of his/her Employer's Group Critical Illness policy underwritten by Zurich for a minimum of 12 consecutive months
- Employer's Group Critical Illness Insurance policy must be valid at the date the applicant submits his/her application
- Insured person must submit the completed and signed enrolment form with proof of resignation or retirement within 30 days of termination
- Applicants must be 70 years or below



Act now! To ease the financial burdens from Critical Illness with full benefits

To reduce the risk of not being covered because of age or health reason, please enroll the Employee Voluntary Critical Illness Insurance Plan immediately and convert the sum insured from your Group Critical Illness Insurance Plan upon your retirement or resignation. It will help you to ease the financial burdens and anxiety.



Case sharing

Mr. Chan has been working at the company since he was 30 years old and his company had enrolled to Group Critical Illness Insurance Plan with a sum insured of HKD300,000 for him. Mr. Chan had also enrolled to Voluntary Critical Illness Insurance Plan with a sum insured of HKD450,000. He retired at 60 years old and he converted the sum insured of Group Critical Illness Insurance Plan to Voluntary Critical Illness Insurance Plan. Afterwards he was diagnosed with Cancer. Fortunately, he converted the sum insured of Group Critical Illness and has renewed his Voluntary Critical Illness policy years after years. He is finally indemnified by his Voluntary Critical Illness policy of HKD750,000 to manage his medical expenses and daily costs.



If Mr. Chan had not enrolled to Voluntary Critical illness Insurance Plan and converted the sum insured of Group Critical Illness to Voluntary Critical Illness, he has no critical illness insurance coverage and cannot recover his health so soon.

Premium table

The below table shows the sum insured per HKD 150,000.

Monthly premium

	Premium for sum insured per HKD 150,000 (HKD)			
Attained age	Non-smoker		Smoker	
	Male	Female	Male	Female
15 days - 5 years	11	13	Not applicable	Not applicable
6 - 17 years	12	15	13	15
18 - 24 years	14	16	16	21
25 - 29 years	22	27	27	39
30 - 34 years	35	42	47	68
35 - 39 years	54	62	78	109
40 - 44 years	83	88	119	150
45 - 49 years	142	134	195	222
50 - 54 years	222	214	339	345
55 - 59 years	341	296	565	472
60 - 64 years	380	483	1,045	745
65 - 69 years [^]	1,150	647	1,671	1,039
70 - 74 years [^]	1,732	791	2,322	1,278

Annual premium

	Premium for sum insured per HKD 150,000 (HKD)			
Attained age	Non-smoker		Smoker	
	Male	Female	Male	Female
15 days - 5 years	132	156	Not applicable	Not applicable
6 - 17 years	144	180	156	180
18 - 24 years	168	192	192	252
25 - 29 years	264	324	324	468
30 - 34 years	420	504	564	816
35 - 39 years	648	744	936	1,308
40 - 44 years	996	1,056	1,428	1,800
45 - 49 years	1,704	1,608	2,340	2,664
50 - 54 years	2,664	2,568	4,068	4,140
55 - 59 years	4,092	3,552	6,780	5,664
60 - 64 years	4,560	5,796	12,540	8,940
65 - 69 years^	13,800	7,764	20,052	12,468
70 - 74 years [^]	20,784	9,492	27,864	15,336

[^] For renewal only

Notes

- This policy shall cease when the sum insured is paid.
- Policy waiting period: 90 days.
- The insured person must survive after the diagnosis for at least 30 days.
- Minimum annual premium per policy is HKD300.
- The policy shall remain in force for a period of one year from the policy effective date and this policy will be automatically renewed at our discretion. We reserve the right to alter the terms and conditions, including but not limited to the premiums, benefits, benefits amount or exclusions of this policy at the time of renewal of any period of insurance by giving 30 days' written notice to you.
- You have the right to cancel the policy by returning the policy to us and attaching a notice signed by you requesting cancellation within the cooling-off period i.e. 21 days immediately following the day of delivery of this policy. In the event that no claim payment has been or is to be made, we will refund to you all the premiums you have paid without interest. In the event that a benefit payment has been made or is to be made, no refund of premium shall be made. After the cooling-off period, you have the right to cancel this policy by giving 30 days' advance notice in writing to us. In such event, we will refund the unearned premium actually paid by you provided that no claim has been made during the period starting from the policy effective date to the date on which the cancellation takes effect.
- We reserve the right to declare the policy void from the policy effective date and may refuse to refund any applicable premium paid and/or we may request
 you to return all monies paid by us for previous claims if (i) you have incorrectly stated the health information of the insured person, (ii) omitted material
 information during enrollment or (iii) provided fraudulent documentation or fraudulently represented information during enrollment or when making a claim.
- We reserve the right to revise or adjust the premium under the following circumstances:
 - According to our applicable premium rate at the time of renewal (which will be based on several factors, including but not limited to medical price inflation, projected future medical costs, claims experience and expenses incurred by you and/ or in relation to this product, and any changes in benefit) by giving 30 days' advance written notice to you.
 - The premium rate should be adjusted automatically according to the attained age of the insured person at the time of renewal.

Major exclusions

- 1. Failure to seek or follow any medical advice of a registered medical practitioner;
- 2. Any sickness, illness or disease other than specified as critical illness as defined herein;
- 3. Any critical illness of which, the signs or symptoms first occurred within ninety (90) days from the effective date of this policy, or upgrade effective date for this section (applicable to the upgrade portion only), or last reinstatement date, whichever is the latest (this exclusion shall be waived if the critical illness is caused by accident as defined);
- 4. Any critical illness which the insured person does not survive after the diagnosis for a period of at least thirty (30) days (this exclusion shall be waived if the critical illness is caused by accident as defined);
- 5. Any pre-existing condition;
- 6. Any condition resulting from childbirth, miscarriage, abortion, pregnancy, including but not limited to pregnancy test, pre-natal care as well as post-natal care and other complications arising from pregnancy, contraceptive or contraceptive devices, infertility or sterilization of either sex; venereal diseases:
- 7. Congenital abnormalities, including but not limited to epilepsy, strabismus, hydrocephalus;
- 8. Suicide, attempted suicide, intentional self-injury, insanity or mental disorder of any kind, psychosis, stress or depression, or under the influence of alcohol or drugs otherwise than prescribed by registered medical practitioner;
- 9. Engaging in any kind of sport or race in a professional capacity or where the insured person would or could earn any remuneration from engaging in such sport or race;
- 10. Participating in any illegal activity, including but not limited to robbery, drug abuse or assault;
- 11. Air travel except as a fare-paying passenger in a properly licensed aircraft operated by a licensed commercial air carrier;
- 12. Any costs incurred by any insured person for any policy period of this policy for which the appropriate premium has not been paid;
- 13. HIV (Human Immunodeficiency Virus) and/or HIV-related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivative or variations thereof however caused or however named. This exclusion shall be waived if the diagnosis is one (1) of the defined critical illnesses covered under this policy);
- 14. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, direct participation in strike, riot or civil commotion;
- 15. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel, or from any nuclear weapons material;
- 16. Disease or sickness arising from asbestos.
- 17. Any cyber act that results in accident, disability, sickness and/or injury.

Product limitation

We only cover the charges and/or expenses of the insured person on medically necessary basis.

 $\hbox{``Medically necessary'' means necessary for having or the necessity to have a medical service which is:}$

- consistent with the diagnosis and customary medical treatment for the condition; and
- in accordance with standards of good and prudent medical practice; and
- not furnished primarily for the convenience of registered medical practitioner or any other medical service providers; and
- furnished at the most appropriate level sufficient to safely and adequately treat the insured person's disability and are performed in the least costly setting required for treatment of a covered disability; and
- not rendered primarily for diagnostic tests, diagnostic scanning purpose, imaging examination, laboratory test or physiotherapy without medical treatment including medication or surgery.

Claims procedure

Step 1: Notify us in writing as soon as possible;

Step 2: Fill in a claim form and supply the following original documents as appropriate.

Critical Illness

- Receipts of all attending medical practitioner/specialist(s) showing:
 - name of the patient
 - date of consultation
 - diagnosis and/or treatment given
- Certificates and reports by the specialist(s) as specified in the respective critical illness

This leaflet is only an illustration and does not constitute any part of the insurance contract. For full terms and conditions and exclusions, please refer to the policy document itself which shall prevail in case of inconsistency. We reserve the right of final approval and decision. (The English version shall prevail in case of inconsistency between the English and Chinese versions)





Important information about the Insurance Authority Levy

有關保險業監管局徵費之重要資訊

From January 2018, the Insurance Authority ("IA") requires all Hong Kong policyholders to pay a levy on their insurance premiums. The purpose of the levy is to finance the IA, and it is calculated as a percentage of the premium paid. Please refer to the table below for applicable levy rate. 由2018年1月起,保險業監管局(「保監局」)將向香港保單持有人收取保費徵費。收取保費 徵費旨在支持保監局營運、徵費計算方法為已繳保費的百分比。徵費率詳情請參閱下表。

Period 期間	Levy rate 徵費率	
Jan 1, 2018 – Mar 31, 2019 (both dates inclusive) 2018年1月1日 — 2019年3月31日(包括首尾兩日)	0.04%	
Apr 1, 2019 – Mar 31, 2020 (both dates inclusive) 2019年4月1日 — 2020年3月31日(包括首尾兩日)	0.06%	
Apr 1, 2020 – Mar 31, 2021 (both dates inclusive) 2020年4月1日 — 2021年3月31日(包括首尾兩日)	0.085%	
From Apr 1, 2021 onwards 2021年4月1日及以後	0.1%	

Levy collected by the Insurance Authority (if any) has been imposed on this policy at the applicable rate and would be remitted in accordance with the prescribed arrangements. For further information, please visit http://www.zurich.com.hk/ia-levy.

保險業監管局將就此保單按適用比率收取徵費。徵費將會按照指定安排匯出。詳情請瀏覽 http://www.zurich.com.hk/ia-levy °

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