

Hospital & Surgical Benefit

Prepare for the Unexpected

CHUBB®
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NEW PATIENT INFORMATION FORM



Hospital & Surgical Benefit



Accidents and illnesses are unpredictable and can happen to anyone. That's why Chubb Life's Hospital & Surgical Benefit (the "Rider") is here to help. While the Rider is in force, it covers against the actual expenses incurred from accidents¹ and illnesses², including those arising from hospital confinement and surgery, post-hospital treatment, and more. It is a plan that helps relieve the corresponding financial burden, supporting both the insured and you.

Comprehensive Coverage for Both In-Patient and Post-Hospital Expenses

The Rider provides comprehensive coverage for the charges incurred not just during hospital confinement but also from post-hospital treatments. There are 3 benefit levels (Private, Semi-private and Ward) for you to select to meet your budget and needs. The maximum amount and limitations of all benefits payable under each benefit level is stated in the Benefit Schedule in this product brochure.

• **In-Patient Expenses³**

The Rider provides comprehensive cover for the actual charges during hospital confinement⁴, like those arising from daily room and board, intensive care⁵, a series of surgical expenses (including surgeon's fee, anaesthetist's fee and operation theatre fee) and specialist's fees.

To enhance protection for the insured, you may select the optional Top-Up Benefit⁶ under the Rider. Should the Eligible Expenses (as specified below) to be paid exceed the maximum amount payable under the relevant benefits, Top-Up Benefit will pay 80% of the shortfall up to the maximum amount of Top-Up Benefit.

"Eligible Expenses" mean expenses incurred for daily room and board, miscellaneous expenses, surgeon's fee, anaesthetist's fee, operation theatre fee, physician's fee and companion's bed.

The Rider also covers mental or nervous disorders treatment for schizophrenia and anorexia if such treatment is carried out in a hospital and is certified by a registered medical practitioner.

"Chubb Life", the "Company", "we", or "our" herein refers to Chubb Life Insurance Company Ltd. (Incorporated in Bermuda with Limited Liability).

- **Post-Hospital Treatment³**

Protection under the Rider goes beyond hospital confinement. The Rider covers the charges incurred by the insured for follow-up treatments by attending registered medical practitioner, chiropractor and physiotherapist within 31 days immediately after hospitalization. Expenses relating to home nursing incurred after the insured being discharged from hospital will be covered as well.

Emergency Accident Out-Patient Treatment and Accident Dental Treatment³

In the event of accidental injury, costs arising from treatment at a hospital's out-patient department within 24 hours of the accident will be covered⁷.

The Rider will also reimburse the charges incurred for the treatment of sound natural teeth that arises from an accident, if such treatment is taken within 31 days of the accident and in a legally registered dental clinic or hospital.

Coverage for Death of the Insured

If the insured passes away unexpectedly, we understand how difficult the time will be for the insured's family. The Rider will provide the following support in the situations described below:

- **Compassionate Death Benefit³**

Compassionate Death Benefit will be paid to the beneficiary upon the insured's death.

- **Additional Death Benefit for Organ Donor³**

An additional death benefit will be payable to the beneficiary if an organ of the insured is donated in Hong Kong after death, provided that we have received proof of the organ donation⁸.

- **Medical Accident and Incident Extension Benefit³**

If the insured, while undergoing any medical procedure or treatment in a hospital, dies directly as a consequence of any erroneous or negligent action, a Medical Accident and Incident Extension Benefit will be paid⁹ to the beneficiary.

Enhanced Protection for Extra Peace of Mind

- **Lifetime and Worldwide Protection**

The Rider will provide protection up to age¹⁰ 100 of the insured. Moreover, reimbursement will also be made if the relevant expenses are incurred outside Hong Kong.

- **Complimentary Worldwide Emergency Assistance Services¹¹**

The Rider offers the insured complimentary worldwide emergency assistance services through the provision of medical evacuation and repatriation when the insured travels outside his/her country of residence.

- **Pairing up with Basic Plan for Comprehensive Protection**

The Rider can be attached to most of Chubb Life's basic plans, enhancing the insurance coverage already enjoyed by the insured.

Benefit Schedule³

Hospital and Surgical Benefits (HK\$ [^])	Class I (Private)	Class II (Semi-private)	Class III (Ward)	Class I Plus (Private)	Class II Plus (Semi-private)	Class III Plus (Ward)
				(These classes include Top-Up Benefit)		
Hospital Expenses						
• Daily Room and Board* (Maximum limit per day) (Maximum 180 days per disability ¹²)	\$ 3,250	\$ 1,650	\$ 800	\$ 3,250	\$ 1,650	\$ 800
• Miscellaneous Expenses* (Maximum limit per disability)	\$ 25,200	\$ 16,800	\$ 10,500	\$ 25,200	\$ 16,800	\$ 10,500
• Intensive Care (Maximum limit per disability) (Maximum 150 days per disability)	\$ 450,000	\$ 300,000	\$ 225,000	\$ 450,000	\$ 300,000	\$ 225,000
• Home Nursing (Maximum limit per day) (Maximum 31 days per disability)	\$ 1,650	\$ 850	\$ 750	\$ 1,650	\$ 850	\$ 750
Surgical Expenses* (Maximum limit per disability, subject to the Surgical Schedule [@])						
• Surgeon's Fee						
- Complex Operation	\$ 92,000	\$ 63,000	\$ 42,000	\$ 92,000	\$ 63,000	\$ 42,000
- Major Operation	\$ 61,640	\$ 42,210	\$ 28,140	\$ 61,640	\$ 42,210	\$ 28,140
- Intermediate Operation	\$ 31,280	\$ 21,420	\$ 14,280	\$ 31,280	\$ 21,420	\$ 14,280
- Minor Operation	\$ 16,560	\$ 11,340	\$ 7,560	\$ 16,560	\$ 11,340	\$ 7,560
• Anaesthetist's Fee	35 % of Surgeon's Fee payable					
• Operation Theatre Fee	35 % of Surgeon's Fee payable					

Benefit Schedule³ (Continue)

Hospital and Surgical Benefits (HK\$ [^])	Class I (Private)	Class II (Semi-private)	Class III (Ward)	Class I Plus (Private)	Class II Plus (Semi-private)	Class III Plus (Ward)
				(These classes include Top-Up Benefit)		
Physician's Fee* (Maximum limit per day) (Maximum 180 days per disability)	\$ 3,250	\$ 1,650	\$ 800	\$ 3,250	\$ 1,650	\$ 800
Specialist's Fee (Maximum limit per disability)	\$ 8,000	\$ 5,000	\$ 3,000	\$ 8,000	\$ 5,000	\$ 3,000
Post-Hospital Treatment (Maximum limit per disability) (Within 31 days after discharge from hospital)	\$ 4,500	\$ 3,000	\$ 1,500	\$ 4,500	\$ 3,000	\$ 1,500
Companion's Bed* (Maximum limit per day) (Maximum 90 days per disability)	\$ 900	\$ 650	\$ 400	\$ 900	\$ 650	\$ 400
Emergency Accident Out-Patient Treatment (Maximum limit per disability caused by accident)	\$ 38,000	\$ 19,000	\$ 9,500	\$ 38,000	\$ 19,000	\$ 9,500
Compassionate Death Benefit	\$ 50,000	\$ 20,000	\$ 15,000	\$ 50,000	\$ 20,000	\$ 15,000
Accident Dental Treatment (Maximum limit per disability) (Within 31 days after accident)	\$ 5,500	\$ 4,500	\$ 3,500	\$ 5,500	\$ 4,500	\$ 3,500
Medical Accident and Incident Extension Benefit (Maximum limit per insured) (Within 30 days after incident)	\$ 400,000	\$ 280,000	\$ 150,000	\$ 400,000	\$ 280,000	\$ 150,000
Additional Death Benefit for Organ Donor	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000
Mental or Nervous Disorders Treatment (Maximum limit per insured)	\$ 70,000	\$ 60,000	\$ 50,000	\$ 70,000	\$ 60,000	\$ 50,000
Top-Up Benefit (Maximum limit per disability) (80% of unrecoverable Eligible Expenses* per disability)	Not applicable			\$ 400,000	\$ 200,000	\$ 100,000
Worldwide Emergency Assistance Services	Available					

[^] Or equivalent amount in US Dollars.

* Eligible Expenses for Top-Up Benefit.

@ For details of the Surgical Schedule, please refer to the policy document.

More about Hospital & Surgical Benefit

Basic Information	
Product Type	This product is a rider and must be attached to our basic plan.
Benefit Term and Premium Payment Term	Up to age 100 of the insured
Renewability	The Rider is guaranteed to be renewed on every policy anniversary without evidence of insurability on the insured as long as you pay the premium. We reserve the right to revise the premium rates, Benefit Schedule and terms and conditions at the time of such renewal.
Issue Age of the Insured	Age 0 (15 days) - 65
Premium Payment Mode	Monthly / quarterly / semi-annual / annual, following that of the basic plan to which the Rider is attached.
Premium Structure	<p>After the Rider is issued, premium will be adjusted every year based on the premium rate (which generally will increase as the age of the insured increases) applicable to the insured at that time.</p> <p>Note: Premium rates are not guaranteed. You should refer to the benefit illustration for the premium calculated based on the current scale of premium rates. Please also refer to the “Key Product Risks - Premium Adjustment” under the “Important Information” section in this product brochure for premium rate adjustment factors. The Company reserves the right to review and adjust the premium rates from time to time upon prior written notice to policyowners.</p>
Currency	HK Dollar (HK\$) / US Dollar (US\$)

Remarks:

- “Accident(al)” in the Rider means drowning or a bodily injury caused by violent, accidental, external and visible means and the injury shall, solely and independently of any cause, result in the insured’s hospital confinement or need for treatment.
“Treatment” in the Rider means a surgical or medical procedure, the sole purpose of which is the cure or relief of illness or injury.
- “Illness” or “disease” in the Rider means a physical condition marked by a pathological deviation from the normal healthy state.
- The payment of the benefits under the Rider is also subject to the terms and conditions specified in the policy document. You should refer to the policy document for more details. Please note that we will deduct any outstanding premiums together with accrued interest before making any benefit payment under the policy to which the Rider is attached.
- To be eligible for reimbursement of the expenses incurred for any hospital confinement, the insured must be confined in the hospital for a continuous period of six hours.
- The benefit for intensive care will be payable when the charges incurred by the insured for an intensive care unit in a hospital are over the benefit of daily room and board.
- Top-Up Benefit will terminate on the anniversary of the policy to which the Rider is attached when the insured reaches the age of 75.
- If confinement in the hospital is then recommended by the registered medical practitioner treating the insured, the Emergency Accident Out-patient Treatment benefit paid to the insured shall be counted as part of the miscellaneous expenses and subject to the maximum limit of the miscellaneous expenses as specified in the Benefit Schedule in this product brochure.
- “Organ” in the Rider means organs and tissues of a human being that can be donated after death including kidney, liver, heart, lung, cornea, bone and skin. Irrespective of the number of organs donated, the Additional Death Benefit for Organ Donor is payable once.
- The Medical Accident and Incident Extension Benefit will become payable provided that the following conditions are fulfilled:
 - The death occurs within 30 days of such recorded and proven incident;
 - A public admission of such incident and liability is made by the said hospital and verified and confirmed by the relevant government authority, a Court of Law, Coroner’s Inquest or the Medical Council; and
 - The death is independent of any other cause other than the termination of life support system after brain death has been established.
- In this product brochure, “age” refers to the age at the nearest birthday.
- This service is arranged through a third-party service provider and is not part of the policy or benefit item under the policy provisions of the Rider. Both the Company and the third party service provider reserve the right to terminate or vary the service in their sole discretion without further notice. We shall not be responsible for any act or failure to act on the part of the third party service provider.
- “Disability” under the Rider means any disability resulting from illness or accidental bodily injury arising from the same cause including any and all complications therefrom, except that if the insured completely recovers for a period of 90 days continuously following the latest discharge from hospital, or the date of last treatment, or laboratory test, or completion of prescribed drugs course to that disability, whichever is later, any subsequent treatment shall be considered a new disability.

Important Information

This product brochure is for general reference only and is not part of the policy. It provides an overview of the key features of this product and should be read along with other materials which cover additional information about this product. Such materials include, but not limited to, policy provisions that contain exact terms and conditions, benefit illustrations (if any) and other policy documents and other relevant marketing materials, which are all available upon request. You might also consider seeking independent professional advice if needed.

Hospital & Surgical Benefit is designed for individuals looking for long-term financial planning to meet their needs for financial protection against adversities and preparation for health care needs.

Key Product Risks

The following information helps you better understand the key product risks associated with this product that you may need to pay attention before application.

- **Premium Payment Term**
You should only apply for this product if you intend to pay the premium for the whole of the premium payment term. Should you cease paying premiums early, you may lose your insurance coverage and the premiums paid under this product.

- **Premium Adjustment**
The Company reserves the right to review and adjust the premium rates of this product based on our expectation and experience on claims. The Company will give prior written notice of any adjustment in premium rates.
- **Credit Risk**
This product is issued and underwritten by the Company. Your policy is therefore subject to the credit risk of the Company. If the Company is unable to satisfy the financial obligation of the policy, you may lose your insurance coverage and the premiums paid.
- **Exchange Rate Risk**
For the policy denominated in currencies other than local currency, you are subject to exchange rate risk. The political and economic environment can affect the currency exchange rate significantly. Exchange rate fluctuates and is determined by the Company from time to time. Any transaction in foreign currencies involves risk. You should take exchange rate risk into consideration when deciding the policy currency.
- **Inflation Risk**
Please note that the medical costs in the future are likely to be higher than they are today due to inflation. Hence, the benefit amounts and the premium rates of this product may be adjusted in the future to reflect the inflation.

Termination

The Rider and its coverage will be terminated automatically on the occurrence of the earliest of the following:

- Lapse of the Rider when the premium for the Rider is not paid by the end of the grace period;
- If the policy to which the Rider is attached has been converted to a reduced paid-up insurance or extended term insurance due to non-payment of premium (if applicable), or surrendered, expired, lapsed, cancelled or terminated;
- The insured's death;
- On the expiry date of the Rider, i.e. the anniversary of the policy (to which the Rider is attached) on which the insured reaches the age of 100; or
- Upon your written request for cancellation of the Rider.

You may cancel the Rider by submitting the form prescribed by us. You may contact your licensed insurance intermediary or contact our Customer Service Center at +852 2894 9833 to get a copy of the form.

Key Exclusions

• No benefits will be paid if the treatment of the illness or injury is a direct or indirect consequence of any of the following:

- Pre-existing conditions;
- Congenital conditions that have manifested or were diagnosed before the insured attains age 12;
- Care or treatment for which payment is not required or is waived or is recoverable from a third party;
- Pregnancy, childbirth, miscarriage or abortion;
- War, declared or undeclared, invasion, civil commotion, revolution or any warlike operations;
- Actual or attempted violation of the law, resistance to arrest, drug or alcohol abuse, suicide, self-inflicted injuries, or sexually transmitted diseases;
- Psychogeriatric or psychiatric condition;
- Injuries caused by hazardous sports or aviation activities;
- Cosmetic or plastic surgery or procedure or any elective surgery or procedure;

- Eyeglasses and refraction or hearing aids, and prescriptions therefor;

- Dental care or treatment;

- General checkup or health tests;

- Vaccination and immunization injections;

- Convalescence or rest care in sanitarium;

- Room, board, home nursing care or special hospital services not in accordance with the diagnosis and treatment of disability for which hospital confinement is required;

- Infection with Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS);

- Disabilities arising from nuclear weapon material, ionizing radiation or contamination by radioactivity from any nuclear fuel; or

- Prostheses, corrective devices or medical appliances which are not surgically required.

• No benefits will be paid for hospitalization which is resulted from illness and/or its symptoms occurred during the waiting period.

Waiting period is the first 30 days from the date of issue of the policy to which the Rider is attached, the date of issue of the Rider, the date of issue of the latest endorsement (if applicable) or the date of last reinstatement of the policy to which the Rider is attached, whichever is the latest. For the following illnesses, the waiting period is the first 120 days from the date of issue of the policy to which the Rider is attached, the date of issue of the Rider, the date of issue of the latest endorsement (if applicable) or the date of last reinstatement of the policy to which the Rider is attached, whichever is the latest: tonsils, adenoid, hernia or a disease particular to the female generative organs.

No waiting period will be required if hospitalization is due to emergency treatment resulting from accident.

Revision of Benefits

We reserve the right to revise the benefits payable under the Rider to keep the level of benefits in line with the changing medical costs. The premium of the Rider will be adjusted accordingly. We shall notify you the changes in writing at least 30 days prior to the anniversary of the policy to which the Rider is attached.

Product Limitation

- Benefits under the Rider are payable only if the treatments, medical procedures or medical services received by the insured are Medically Necessary (except for Compassionate Death Benefit and Additional Death Benefit for Organ Donor). “Medically Necessary” means a medical service which is:
 - consistent with the diagnosis and customary western medical treatment for the condition;
 - in accordance with standards of good medical practice;
 - not for the convenience of the insured or the registered medical practitioner;
 - for which the charges are fair and reasonable for such Disability, and medically necessary shall be construed accordingly; and
 - not experimental in nature.
- Coverage for circumcision is included under the Rider. However, if the date of issue of the policy to which the Rider is attached or the date of issue of the Rider, whichever is later, is on a date before the insured attains the age of 18, (a) we will not be liable for the actual charges incurred during the 1st year after such date; and (b) thereafter, the total net reimbursement amounts under the Rider and Top-Up Benefit (if any) will be subject to the deductible for which you will be liable as set out below while the Rider is in force:

Year in which Circumcision is Performed after the Date of Issue of the Policy to which the Rider is Attached or the Date of Issue of the Rider, Whichever is Later	Deductible (HK\$[^])
Between the 2 nd and the 3 rd years	\$ 5,000
Between the 4 th and the 5 th years	\$ 3,000
After the 5 th year	Nil

[^] Or equivalent amount in US Dollars.

- When the insured is entitled to benefits payable under another insurance policy or reimbursed through any other means, the benefits under the Rider shall be limited to the lesser of:
 - (i) Balance of expenses not covered by benefits payable under another insurance policy or any other means; or
 - (ii) The maximum limit of each benefit as specified in the Benefit Schedule in this product brochure.

- If the actual class of ward during confinement is above the class of ward entitled under the Rider, whether voluntarily or involuntarily, the amount of Top-Up Benefit payable by the Company will be multiplied by an Adjustment Factor as defined below:

Class of Ward Entitled under the Rider	Actual Class of Ward During Confinement	Adjustment Factor
Ward	Semi-private	50%
Ward	Private	25%
Semi-private	Private	50%

For avoidance of doubt, the classification of wards by each hospital is for reference only. The Company reserves the right to determine the applicable Adjustment Factor in the event that the classification of ward by the hospital exceeds, in our view, the level of normal classifications.

Claims

We must be notified in writing within 20 days from the date of admission to hospital in the event of any claim under the Rider and failure to do so may invalidate a claim unless it can be shown that the circumstances have not been reasonably possible to give such notice and that notice was given as soon as reasonably possible. Admission of any claim will be subject to the proof as required to be provided by you.

You should provide the proof to us within 30 days from the date on which the insured is discharged from the hospital. The original documentation and receipts together with a fully completed claim form must be submitted. The cost incurred in providing such proof and medical examination shall be borne by you. You may contact your licensed insurance intermediary or contact our Customer Service Center at +852 2894 9833 to get a copy of the form, or you can download it from our Company website at life.chubb.com/hk.

Disclosure

In the event of material misrepresentation, fraud or non-disclosure, we will contest the policy and all the monies paid to us under the policy will be forfeited.

Collection of Premium Levy by Insurance Authority


The Insurance Authority started collecting levy on insurance premiums from policyowners for policies issued in Hong Kong since January 1, 2018. For details of the levy and its collection arrangement, please visit our Company website at life.chubb.com/hk or contact our Customer Service Center at +852 2894 9833. In the event that we refund your premiums, whether in full or in part, e.g. upon cancellation of your policy during the cooling-off period, the proportionate levy paid by you will also be refunded accordingly.

Contact Us

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This product brochure is intended as a general reference and does not form part of the policy. Please refer to the policy documents for the exact terms and conditions. It is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or solicitation to buy or provision of any of our products outside Hong Kong.

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