

附件 1
SCHEDULE 1

招商信诺人寿保险有限公司
招商信诺全球员工团体医疗保险

CIGNA & CMC Life Insurance Co. Ltd.
CIGNA & CMC Global Group Medical Insurance Clauses

第一条 保险合同的构成

Clause 1 Composition of the Insurance Contract

招商信诺全球员工团体医疗保险合同（以下简称“本合同”）由保险单、保险条款、批注、贴批单、投保单、**保险责任清单**，与本合同有关的投保文件、声明、被保险人名单、其他书面文件构成。

CIGNA& CMC Global Group Medical Insurance Contract (hereinafter referred to as the “Contract”) is composed of the insurance policy with the accessory provisions, endorsements, the insurance application form, *list of benefit*, and the application documents, the declarations, the name lists of *insured persons*, and other writing agreements related to the Contract.

第二条 投保条件

Clause 2 Application Eligibility

一、凡属**中华人民共和国**境内法人机构或境外法人驻华机构，身体健康且年龄在 18 周岁至 70 周岁的在职人员，均可作为被保险人，由其所在单位作为投保人向招商信诺人寿保险有限公司（以下简称“**本公司**”）投保本保险。被保险人数应占投保人符合参保条件成员总数的 75%以上（含 75%），必须不低于 5 人，且需满足以下条件：

Any person working for a legal person organization registered in People’s Republic of China (“PRC”) or subordinates which is registered in PRC while her parent body is an overseas registered legal person organization, who is in good health and of age of between 18 and 70 can be qualified as an *insured person*. His or her policyholder can apply for the insurance coverage under the Contract as the applicant for insurance. The number of the *insured persons* should take more than 75% (including 75%) of the policyholder’s total qualified members and cannot be less than 5. An *insured person* must:

- 是由投保人聘用、支付薪水的正式职员；
- be full-time staff nominated and sponsored by the *policyholder*, and

- 移居**住所国**以外的地区之前，或移居至**住所国**以外地区的第一个月内通知**本公司**。如投保人未在此期限内通知**本公司**，**本公司**可拒绝承保。被保险人移居至**住所国**以外地区的第一个月后，投保人需向**本公司**提供被保险人的健康证明，并经**本公司**审核同意后才承保；
- be notified to the *company* before becoming, or within the first month that they become, resident outside their *country of domicile*. If the *policyholder* does not tell the *company* within this period, the *company* may decline cover, or require evidence of good health to determine whether or not the person will be accepted for cover; and
- 如**被保险人**或其**家属**，在第一次被邀请时拒绝参加本保险，但后来决定参加本保险的，**本公司**可要求该**被保险人**或**家属**进行自费医疗检查，并将根据该检查结果决定是否接受其参保申请。
- If a staff member of the *policyholder* (or their *dependant* if applicable) refuses to be an *insured person* when it is first offered and they later decide to join the *contract*, the *company* may require the *insured person* or *dependant* to undertake a medical examination at their expense. The results of the examination will determine whether the *company* accepts the application.

二、身体健康的**被保险人的家属**，即**被保险人的**未婚子女和 70 周岁以下的配偶，经**本公司**同意可由投保人统一向**本公司**投保本保险；其中对于**被保险人的**未婚子女，被保险人需在其治疗开始之前向**本公司**提供未婚子女的姓名，但仅包括治疗开始时年龄不满 25 周岁且仍在接受全日制教育或与**被保险人**居住在同一住所的子女。

An *insured person's dependant* who are in good health, including his or her spouse (of age of less than 70) and children (the *insured person's* unmarried children, whose names have been provided to the *company* prior to the commencement of any *treatment*, but only if those persons are under age 25, either in full-time education or residing at the same residence as the *insured person* at the commencement of any *treatment*.) can be qualified as the *insured person's dependant* subject to the agreement of the *company*. The applicant shall apply for coverage for all of them to the *company*.

第三条 保障地区

Clause 3 Area of Coverage

本公司提供三类保障地区供投保人选择，具体如下：

Based on different insurance liabilities, especially different area scope of insurance liabilities, the *company* provides the *insured person* with the following three types of areas of coverage for selecting (**selected area of coverage**):

一、世界各地；

- Area I worldwide, or

二、世界各地，但不包括美国，加拿大和加勒比地区；或

- Area II -worldwide, excluding USA, Canada and the Caribbean, or

三、香港。

- Area III -Hong Kong

所有美国公民将选择**世界各地**为保障地区，除非**本公司**收到**被保险人**签署的放弃以美国为保障地的申请表。

As selected by the *policyholder* on the *start date* of the *contract*. All U.S Nationals will be allocated Area I cover unless the *company* has received the U.S. Waiver Form signed by the *insured person*.

第四条 保障范围

Clause 4 Scope of Coverage

本保险的保障及服务范围包括：

The contract covers:

- 一、基本医疗责任。由**医疗人员**推荐的服务或产品产生的费用，应被**本公司**的**医疗团队**确认为是治疗和护理**损伤或疾病**所必需的，费用金额以不超过**保险责任清单**中本保险项目下的保险金额为限；
 - costs of services or supplies which are recommended by a *medical practitioner*, and are *medically necessary* for the care and *treatment* of an *injury* or *sickness*, as determined by the *company's medical team*, up to limits shown in the *list of benefits*;
- 二、妊娠及生育责任（一经选择，将作为附加保险项目显示在**保险责任清单**的所选保险范围内）。
 - [Pregnancy and maternity benefits (if selected – this will be shown in the Cover Selected as Maternity in the list of benefits)]
- 三、健康体检责任（一经选择，将作为附加保险项目显示在**保险责任清单**的所选保险范围内）。
 - [Wellness tests (if selected – this will be shown in the Cover Selected as *Wellness Benefit* in the list of benefits)].
- 四、视力保险责任（一经选择，将作为附加保险项目显示在**保险责任清单**所选保险范围内）。
 - [Vision benefits (if selected – this will be shown in the Cover Selected as Vision Benefit in the list of benefits)].
- 五、国际服务。
 - international services
- 六、血液护理服务。

- blood care services

第五条 保险责任

Clause 5 Insurance Liability

一、基本医疗责任。本公司将根据**保险责任清单**列明的**保险责任**项目、给付比例、给付限额、疾病观察期以及免赔额等约束条件赔偿**被保险人**或其**家属**因进行**疾病治疗**及使用与**疾病治疗**有关的服务而支出的合理费用，或按本合同提供相关的服务。上述**疾病治疗**和相关的服务需满足：

The *company* will refund reasonable costs for a *patient's treatment* and for services related to *treatment* which are shown in the *list of benefits*. This *treatment* and these services must be:

- (1) 发生在所选保障地区范围内；或
 - (i) in the *selected area of coverage*, or
- (2) 离开所选保障地区 30 天内因紧急情况而进行的紧急救治，无论是由于商务还是娱乐的目的，只要**被保险人**或**家属**离开所选保障地区的原因不是为了接受**疾病治疗**（除非因由**医疗援助服务提供机构**执行的紧急运送）。
 - (ii) in respect of emergency conditions where *treatment* commences within a period of 30 days of absence from the *selected area of coverage*, whether the absence is for the purposes of business or pleasure, where the *insured person* or their *dependant* do not travel to have *treatment* (except because of emergency evacuation performed by the *medical assistance provider*). For the purposes of this clause 5 paragraph 2 item (ii) 'Emergency treatment' shall have the following meaning:

关于本条(2)中的“**紧急救治**”指为了防止因**疾病**、**损伤**或其他紧急情况导致**被保险人**或其**家属**的健康严重受损而进行的必要**疾病治疗**。保障范围仅包括医生、**专家**或**本公司**的**医疗人员**实施的医学治疗和紧急事件发生后 24 小时内开始的住院治疗。

'Emergency treatment' - *treatment* which is medically necessary to prevent the immediate and significant effects of illnesses, injuries or conditions which if left untreated could result in a significant deterioration in health. Only medical treatment through a physician, *specialist* or *medical practitioner* and hospitalisation that commences within 24 hours of the emergency event will be covered.

在任一**保险年度**内，**病人**接受一次**疾病治疗**所支付的费用或接受多次**疾病治疗**累计支付的费用所获得的赔偿不得超过接受**疾病治疗**时的**保险责任清单**所约定的限额。对于超出**保险责任清单**约定限额的**疾病治疗**费用，**本公司**不负责赔偿。对于**被保险人**或**家属**已经通过其它保险或其他渠道获得赔偿的，**本公司**仅在**保险责任清单**所约定的限额内支付余额。

The *benefits* that a *patient* can receive in relation to the cost of one course of *treatment* or to the cumulative cost of more than one course, as appropriate, cannot be more than the annual limits that were in the *list of benefits* when *treatment* was given. The *company* will not pay for the proportion

of any cost of *treatment* that is over the *benefit* limits in the *list of benefits*. In respect of any expenses for which the *insured person* or a *dependant* has been or can be reimbursed from any other insurance or source, the *company* reserves the right to recover such expenses from any source.

在任一**保险年度**内，如果**住院病人**是 18 周岁以下的未成年人，其父母或法定监护人在医院进行陪护的，**本公司**将赔偿最多 30 天的陪同住院费用。该**保险责任**将在该未成年人年满 18 周岁生日当日终止。**本公司**赔偿以上费用的条件是：

If the *patient* is a child under 18 and they go to *hospital* as an *in-patient*, the *company* will pay for a parent or legal guardian to stay with them for up to 30 days in any *year of insurance*. Cover for this particular *benefit* will stop in the child's 18th birthday. The *company* will only pay the cost if:

(1) 陪护人员是该未成年人的父母或法定监护人；

- it is the parent or legal guardian who stays with the child;

(2) 未成年人接受的治疗属于本保险的**保险责任**范围；及

- the *treatment* a child receives is covered by the *contract*; and

(3) 在医院的住宿费用是合理的。

- the cost of *hospital* accommodation is reasonable.

根据**保险责任**清单，需要取得预授权条件的则需在**疾病治疗**前内获得**本公司**的同意，但因“**紧急救治**”者除外。

If medical treatment requires pre-authorization the patient must obtain approval from the *company*. Pre-authorization is not required for emergency treatment.

本公司同时赔偿包括辅助治疗在内的**疾病治疗**费用，如顺势疗法或针灸，前提是**医疗人员**（非辅助治疗**医疗人员**）推荐进行该**疾病治疗**。若医生、**专家**或**本公司**的**医疗人员**推荐，**本公司**也将根据**保险责任**清单提供员工心理辅导服务。

The *company* will also pay costs for *treatment* involving complementary medicine - for example, homeopathy or acupuncture - up to the limits shown in the *list of benefits*, if a *specialist* (other than a specialist in complementary medicine) recommends this *treatment*.

如**医疗人员**提供脊椎指压治疗法或整骨疗法，在任一**保险年度**内**本公司**赔偿的数额将不超过**保险责任**清单所载的总限额。

If the *patient's* medical practitioner refers them for chiropractic treatment or osteopathy, the *company* will pay up to the total limit shown in the current *list of benefits* in any *year of insurance*.

本公司将对经批准的器官移植手术发生的或与之有关费用进行赔偿，包括抑制免疫反应的药物治疗费用，器官获取费用，及捐献者的医疗费用。针对捐献者应付的医疗费用金额需扣除其他保险或渠道为此应付费用的数额。**被保险人**应在发生任何与器官捐赠有关的费用之前与**本公司**联系。

The *company* will pay charges made for or in connection with approved organ transplant services, including immunosuppressive medications, organ procurement costs, and donor's medical costs. The amount payable for donor's medical costs is reduced by the amount payable for those costs from any other insurance or source. Certain transplants will not be covered based on general limitations (i.e. experimental procedures). The *insured person* must contact the *company* before incurring any costs relating to organ donation.

本公司将支付荷尔蒙补充治疗的费用，但是，采取未经证实和尚存疑问的方法或程序的**疾病治疗**将不在保障范围内。

The *company* will pay costs of *treatment* for Hormone Replacement Treatment. However, *treatment* involving unproven or questionable methods or procedures will not be covered.

二、妊娠及生育责任。指本保险针对**符合条件的女性**提供的有关怀孕或分娩所有方面的保障，（本项**保险责任**仅在被选择后适用，请参照**保险责任清单**中已选保险项来确定是否已选择该**保险责任**，一经选择，该**保险责任**将被视为有效）。包括任何并发症，但不包括：

Pregnancy and Maternity Benefits. Pregnancy and maternity benefits means all aspects of benefits for pregnancy or childbirth, including any complications, for any *eligible female* covered under the *contract* (**This benefit will only apply if selected, please refer to the Cover Selected in the policy schedule to confirm if this benefit has been selected.. There are also details about this benefit in the list of benefits that also forms part of this policy if it has been selected**) but excluding:

(1) 自愿终止妊娠的**疾病治疗**，除非由两位医生出具书面材料证明怀孕会危及母亲生命或心理稳定；及

- *Illness treatment* by way of the intentional termination of pregnancy unless two medical practitioners certify in writing that the pregnancy would endanger the life or mental stability of the mother; and

(2) **家属**生育后住院接受的保育**疾病治疗**，除非本**保单**另行承保的**疾病治疗**过程中**医疗需要**所要求的。

- *Illness treatment* by way of nursery care for a *dependant* in a hospital following childbirth, unless due to *medical necessity* during illness treatment that is otherwise covered by this *contract*.

三、健康体检责任。健康体检指**医疗人员**采取的包含以下各项的检查（本项**保险责任**仅在被选择后适用，请参照**保险责任清单**中已选保险项来确定是否已选择该**保险责任**，一经选择，该**保险责任**将被视为有效。）：

Wellness tests - (**This benefit will only apply if selected, please refer to the Cover Selected in the policy schedule to confirm if this benefit has been selected. There are also details about this benefit in the list of**

benefits that also forms part of this policy if it has been selected.) tests carried out by a *medical practitioner* consisting of the following:

(1) 每年的帕帕尼科拉乌检查，通常被称为巴氏涂片（检查）。

- An annual papanicolaou screening, commonly known as a pap smear.

(2) 每年针对 50 周岁及以上男性**被保险人或家属**进行的前列腺筛查，通常称为前列腺特异性抗原（PSA）检查。

- An annual prostate screening, commonly known as a prostate specific antigen (PSA) test for *insured persons* or *dependants* that are aged 50 or older and who are male.

(3) 为乳癌筛查或诊断目的进行进行的乳腺X线摄影检查（mammogram），且不超过：

- Mammograms for breast cancer screening or diagnostic purposes not to exceed:

(i) 35周岁到39周岁无症状女性**被保险人或家属**，每年一次基准乳腺X线摄影检查；

(i) one baseline mammogram for asymptomatic female *insured persons* or *dependants* aged 35 to 39;

(ii) 40 周岁到 49 周岁无症状女性**被保险人或家属**，每两年一次，或因**医疗需要**每年多次，进行的乳腺 X 线摄影检查；

(ii) a mammogram for asymptomatic female *insured persons* or *dependants* aged 40 to 49, every two years or more, if medically necessary;

(iii) 50 周岁及以上女性**被保险人或家属**，每年一次乳腺 X 线摄影检查。

(iii) a mammogram every year for female *insured persons* or *dependants* aged 50 or over

(4) 在**保险责任清单**限额内的例行成人体检。

- Routine adult physical exams to the limits shown in the *list of benefits*.

(5) 以下**保险责任**，一经选择，亦可作为保险项目或附加保险项目并由**保险责任清单**进行详细规定：

- **The following benefits are also available under Wellness Benefit, if selected and will be detailed in the list of benefits.**

为预防目的，针对六周岁及以下儿童**家属**依据**适当年龄间隔**进行的检查，该检查包括由**医疗人员**开展的或在其监督下进行的、达到**正规治疗**标准的以下服务：

Tests at any of the *appropriate age intervals* for a *dependant* child who is aged 6 or less for charges made for the purpose of preventive care, consisting of the following services delivered or supervised by a *medical practitioner*, which services amount to *orthodox treatment*:

- (i) 儿童的病史评估；
 - Medical history of the child
- (ii) 体检；
 - Physical examination
- (iii) 发育评估；
 - Development assessment
- (iv) 先期辅导；及
 - Anticipatory guidance, and
- (v) 必要的免疫和实验测试。
 - Appropriate immunisations and laboratory tests;

因以下原因产生的费用不包括在内：

Excluding any charges for:

- (i) 对每一名儿童**家属**，在其每一适当年龄间隔进行的检查外的检查，或超过总次数 13 次的检查费用；
 - More than one visit to a *medical practitioner* for child preventive care services at each of the appropriate age intervals up to a total of 13 visits for each *dependant child*;
- (ii) 本保险为其另行规定了保险责任的服务。
 - Services for which benefits are otherwise provided under this *insurance*.
- (iii) 儿童家属接种的以下疫苗，即：
 - Immunisations to *dependant* children namely:
 - (a) DTP (白喉，百日咳和破伤风)；
DPT (Diphtheria, Pertussis and Tetanus)
 - (b) MMR (麻疹，腮腺炎和风疹)；
MMR (Measles, Mumps and Rubella)
 - (c) HiB (B 型流行性感嗜血杆菌)；
HiB (Haemophilus influenza Type b)
 - (d) 小儿麻痹症；
Polio

(e) 流行性感冒；
Influenza

(f) 乙型肝炎；
Hepatitis B

(g) 脑膜炎。
Meningitis

(iv) **被保险人或家属**接种的与旅行有关的疫苗，即

- Immunisations to *insured persons* or *dependants* related to travel, namely

(a) 破伤风，每十年一次；
Tetanus - every 10 years

(b) 甲型肝炎；
Hepatitis A

(c) 乙型肝炎；
Hepatitis B

(d) 脑膜炎；
Meningitis

(e) 狂犬病；
Rabies

(f) 霍乱；
Cholera

(g) 黄热病；
Yellow fever

(h) 日本脑炎；
Japanese encephalitis

(i) 小儿麻痹症追加针剂；
Polio booster

(j) 伤寒症；

Typhoid

(k) 疟疾，采用每日或每周内服药的形式。

Malaria - tablet form, daily or weekly

四、视力保障责任。视力保障指与**被保险人**或**家属**视力有关的以下程序或治疗（本项**保险责任**仅在被选择后适用，请参照保险单中已选保险项来确定是否已选择该**保险责任**，一经选择，该**保险责任**将在作为本合同一部分的**保险责任清单**内进行详细规定。）：

Vision benefits - procedures and *treatment* relating to the vision of the *insured person* or *dependant* consisting of the following: **(This benefit will only apply if selected, please refer to the Cover Selected in the policy schedule to confirm if this benefit has been selected. There are also details about this benefit in the list of benefits that also forms part of this policy if it has been selected.)**

- (1) 由验光师或眼科医生进行的眼科检查；
 - an eye examination by an optometrist or ophthalmologist
- (2) 提供矫正视力的镜片；
 - the provision of lenses to correct vision
- (3) 提供眼镜框架。
 - the provision of eyeglass frames

但不包含以下任何费用：

But always excluding:

- (1) 一个**保险年度**内进行超过一次眼科检查所支付的费用；
 - payment for more than one eye examination in any one *year of insurance*
- (2) 太阳镜，除非是由医疗处方开具的；
 - sunglasses, unless medically prescribed
- (3) 眼科药物或手术**疾病治疗**；
 - medical or surgical *treatment* of the eye
- (4) 非因医疗必需且非由验光师或眼科医生建议使用的眼镜，或此类眼镜的框架。
 - lenses which are not a medical necessity and are not prescribed by an optometrist or ophthalmologist or frames for such lenses.

五、国际服务。指由本保险下**医疗援助服务提供机构**提供的国际服务。本保险为**被保险人**或**家属**属于保险范围的**疾病治疗**提供以下服务：

International services - The international services are provided by the *medical assistance provider* under the *contract*. The services to the *insured person* or *dependant* while covered for *treatment* under the *contract* are:

(1) **保险责任及范围确认服务**

a. Confirmation of *benefit* service

在**中国**正常营业时间之外，**被保险人及家属**可拨打**本公司**国际热线服务电话获得有关本保险下提供的**保险责任**的解释，以及所需**疾病治疗**是否为本保险所承保。

Outside the *PRC* business hours, *insured persons* and their *dependants* may call the International Helpline of the *company* for an explanation of the *benefit* provided by the *contract*.

(2) 旅行信息服务

b. Travel information service

被保险人及其家属可在出行之前拨打**本公司**国际热线服务电话就与其拟定旅行相关的医疗事务获得建议。

Insured persons and their *dependants* may contact the International Helpline of the *company* to get advice on medical issues relevant to their intended travel, before leaving.

(3) 海外合格医疗**专家**推荐服务；

c. Referral to competent medical *specialists* abroad

被保险人及其家属可以拨打**本公司**国际热线服务电话了解其所在或将要居住或前往旅行的**住所国**以外国家的合适的**医疗人员**的具体情况。

Insured persons and their *dependants* may contact the International Helpline of the *company* to get details of a suitable *medical practitioner* in the country in which they are or will be residing or in the country to which they will be travelling, if neither of the countries is their *country of domicile*.

(4) 远程医疗咨询服务；

d. Long distance medical advice

如**被保险人及其家属**无法在当地获得**医疗人员**的建议，可拨打**本公司**国际热线服务电话以获得**医疗人员**的医疗建议。

Insured persons and their *dependants* may contact the International Helpline of the *company* to get medical advice from a *medical practitioner* if they are unable to get advice from a *medical practitioner* locally.

(5) 紧急运送

e. Emergency evacuation

紧急医疗运送需经**本公司**的**医疗团队**事先授权。如在运送发生之前不可能获得事先授权的，应在事后及时获得授权。**本公司**将仅就那些在发生前不可能合理获得事先授权的情况下发生的紧急医疗运送进行事后授权。医疗运送应被**本公司**的**医疗团队**认定为是为防止**疾病、损伤**或其他不治疗即可致健康严重受损情形立即产生重大影响而在医疗上所需要的，且**疾病治疗**无法在当地获得。**医疗援助服务提供机构**将在适当的医疗监控下将**病人**安排运送到最近的可以提供必要**疾病治疗**的**医院**。

Emergency medical evacuations must be pre-authorised by the *company's medical team*. Where it is not possible for pre-authorisation to be sought before the evacuation takes place, this must be sought as soon as possible thereafter. The *company* will only authorise medical evacuations after the evacuation has occurred where it was not reasonably possible for authorisation to be sought before the evacuation took place. Medical evacuations must be determined by the *company's medical team* to be *medically necessary* to prevent the immediate and significant effects of illness, injury or conditions which if left untreated could result in a significant deterioration of health and it has been determined that the *treatment* is not available locally. The *medical assistance provider* will arrange for the transport of the *patient* to the nearest *hospital* offering the necessary *treatment*, under proper medical supervision.

本公司同时将对任何因**医疗需要**必须陪同**病人**的人的合理的交通费进行赔偿，但最高不超过经济级的标准。

Benefit will also be payable for the reasonable cost of travel (transport only) for any individual who, because of *medical necessity*, has to accompany the *patient*.

另外，在接受适当的**疾病治疗**之后，**本公司**将对**病人**和其陪同人员的返程交通费进行赔偿，但最高不超过经济级的标准。

In addition, *benefit* will be payable for travel for the return journey (economy class) of the *patient* and the person accompanying the *patient* after receipt of appropriate *treatment*.

(6) 医疗运返

f. Medical repatriation

医疗运返需经**本公司**的**医疗团队**事先授权。如在运返发生之前不可能获得事先授权的，应在事后及时获得授权。**本公司**将仅就那些在发生前不可能获得合理事先授权的情况下发生的医疗运返进行事后授权。医疗运返应被**本公司**的**医疗团队**认定为是为防止**疾病、损伤**或其他不治疗即可致健康严重受损情形立即产生重大影响而在医疗上所需要的，且**疾病治疗**无法在当地获得，同时因医疗原因需将**病人**送回**住所国**的。**医疗援助服务提供机构**将在适当的医疗监控下在合理可行的时间内尽快安排运送病人。

Medical repatriations must be pre-authorized by the *company's medical team*. Where it is not possible for pre-authorization to be sought before the repatriation takes place, this must be sought as soon as possible thereafter. The *company* will only authorize medical repatriation after the repatriation has occurred where it was not reasonably possible for authorization to be sought before the repatriation took place. Medical repatriation must be determined by the *company's medical team* to be *medically necessary* to prevent the immediate and significant effects of illness, injury or conditions which if left untreated could result in a significant deterioration of health and it has been determined that the *treatment* is not available locally, and that it is necessary for medical reasons for the *patient* to be returned to their *country of domicile*, the *medical assistance provider* will arrange for the transport under proper medical supervision as soon as reasonably practicable.

另外，在病人被紧急运送到最近的**医院**并开始**疾病治疗**后，经**医疗援助服务提供机构**指定的**医疗人员**与当地主治的**医疗人员**讨论后认为**病人**适宜被运返的，**本公司**保留要求将**病人**运回**病人住所国**的**医院**的权利。

In addition, the *company* reserves the right, after *treatment* has commenced following emergency evacuation to the nearest *hospital*, to request the repatriation of the *patient* to a *hospital* in the *patient's country of domicile*, when a *medical practitioner* named by the *medical assistance provider*, after speaking with a local attending *medical practitioner*, decides that the *patient* is fit to undertake the journey.

本公司同时将对任何因**医疗需要**必须陪同**病人**的个人所发生的交通费进行赔偿，但最高不超过经济级的标准。

Benefit will also be payable for the most economical cost of travel (transport only) for any individual who, because of *medical necessity*, has to accompany the *patient*.

另外，在接受适当的**疾病治疗**之后，**本公司**将对**病人**和其陪同人员的返程交通费进行赔偿，但最高不超过经济级的标准。

In addition, *benefit* will be payable for return travel cost (economy class) for the *patient* and the person accompanying the *patient* following receipt of appropriate *treatment*.

(7) 遗体运返

g. Repatriation of mortal remains

如**被保险人**或**家属**在其**住所国**之外身故，**医疗援助服务提供机构**将在合理可行时间内尽快安排将死者遗体运返其**住所国**。

If the *insured person* or *dependant* dies outside their *country of domicile*, the *medical assistance provider* will arrange as soon as reasonably practicable for the return of the bodily remains to the *country of domicile* of the deceased.

(8) 第三方交通费用

h. Transport costs for third parties

本公司将为陪同作为**家属的被保险人**的子女的一位父母，及任何因**医疗需要**必须陪同**病人**的人员发生的交通费用进行赔偿。

Benefit will be payable for the cost of travel for one parent to accompany the insured person's child who is a dependant and for any individual who because of medical necessity, has to go with the patient.

在**被保险人**或**家属**根据以上(5)项和(6)项被运送或运返之后，如果作为**家属的被保险人**的子女没有父母或年龄超过 18 周岁的成年人亲属的陪伴，**医疗援助服务提供机构**将在合理可行时间内尽快安排该**家属**返回其**住所国**。经**医疗援助服务提供机构**决定，合格的陪同人员（由**医疗援助服务提供机构**确认）将与该作为**家属**的子女同行。

If a *insured person's* child who is a *dependant* is left alone without a parent or adult relative over the age of 18 after the *insured person* or *dependant* is evacuated or repatriated - (f) and (g) above - the *medical assistance provider* will arrange as soon as reasonably practicable for the *dependant* to return to their *country of domicile*. Qualified attendants (confirmed by the *medical assistance provider*) will travel with the child who is a *dependant*, if the *medical assistance provider* decides.

医疗援助服务提供机构委任的**医疗人员**在与当地主治的**医疗人员**讨论且衡量了所有的医疗因素和考虑之后，将就进行运输的医疗需求、运输方式和/或时间、使用的医疗设备和参与的**医疗人员**，及最终目的地等方面做出决定。

The *medical practitioner* named by the *medical assistance provider*, after speaking to the local attending *medical practitioner* and taking account of all the medical factors and considerations, will make all decisions on the medical need for transportation, the means and/or timing of any transportation, the medical equipment and medical personnel to be used and the final destination.

只有在因紧急运送或医疗运返导致的**疾病治疗**或导致紧急运送或医疗运返的**疾病治疗**属于本保险保障范围内的，**本公司**才就国际紧急服务第(5)、(6)和(8)项下的**保险责任**进行赔偿。

Benefits for international emergency services (f), (g) and (i) will only be provided where the *treatment*, resulting from or resulting in the emergency evacuation or medical repatriation, is covered under the *contract*.

若国际紧急服务第(5)、(6)和(8)项下产生的费用不属于本保险保障范围的，投保人应将所有发生费用返还**本公司**。

The *policyholder* will refund to the *company* all expenses incurred for international emergency services (f), (g) and (i) which are not covered under the *contract*.

六、**血液护理服务**。提供**血液护理服务**的目的是为了确保在所选保障地区范围内的任何地方，且在需要难以获得满足的情况下，向需要**疾病治疗**的**被保险人**或**家属**提供紧急输血所

需的已过滤血液和复苏液以及无菌输血设备。**血液护理服务**将在**医疗援助服务提供机构**的指示下提供。**被保险人或家属**应向**医疗援助服务提供机构**提出提供**血液护理服务**的请求。

Blood Care Services - The purpose of the provision of *blood care services* is to ensure the availability to the *insured person* or *dependant*, while covered for *treatment* under the *contract*, of screened blood and resuscitation fluids for an emergency transfusion and sterile transfusion equipment in emergency situations anywhere within the *selected area of coverage* where such supplies are not readily available. *Blood care services* will be provided on the instruction of the *medical assistance providers*. Requests by the *insured person* or *dependant* for the provision of *blood care services* shall be made to the *medical assistance provider*.

在紧急情况下，我们将为需要血液护理服务的**被保险人或家属**提供辅助的运送服务，“紧急”是关于任何因意外事故造成的**损伤或疾病**，或者任何不可预见的严重的**疾病**，以至于通常需要将**被保险人或家属**从因**损伤或疾病**造成紧急事故的地点进行紧急运送。紧急情况的严重性评估将由一个**医疗援助服务提供机构**或其医疗援助代理人在征询当地主治**医疗人员**和一名**医疗人员**后作出。对紧急情况严重性的评估将考虑到**损伤或疾病**的严重程度和血液供应的安全程度，及**被保险人或家属**所在地的输血设备情况。

For the provision of this service, an “emergency” relates to any *injury* or *sickness* because of accident or unforeseen illness of such seriousness as would normally warrant the emergency evacuation of the *insured person* or *dependant* from the location in which the emergency was first manifested either by *injury* or *sickness*. The evaluation of the seriousness of the emergency will be made by a *medical assistance provider* or their medical assistance agent in consultation with a local attending *medical practitioner*, and a *medical practitioner*. The evaluation of the seriousness of the emergency will take into consideration the severity of the *injury* or *sickness* and the degree of safety of blood supplies, and transfusion equipment at the location of the *insured person* or *dependant*.

在**医疗援助服务提供机构**或其医疗援助代理人经征询当地主治**医疗人员**的意见后一致同意存在如下紧急情况的：

On agreement of an emergency situation between the *medical assistance provider* or their medical assistance agent in consultation with a local attending *medical practitioner*, where:

- (1) 当地无法获得过滤血液、复苏液和无菌输血设备；或
 - screened blood, resuscitation fluids and sterile transfusion equipment are not readily available locally; or
- (2) 当地可获得的血液未达到完全过滤或存在使**被保险人或家属**感染或传播**疾病**的严重风险。
 - the blood available locally is inadequately screened or otherwise presents a severe risk to the health of the *insured person* or *dependant* through infection or transmission of disease

一旦认定存在上述紧急情况，**血液护理服务**将向本保险项下的**被保险人或家属**提供**疾病治疗**所需的过滤血液、复苏液和无菌输血设备，并在可能的情况下将上述血液、复苏液和设备提供给当地主治医生。

the *blood care service* will make available the screened blood, resuscitation fluids and sterile transfusion equipment required for the *treatment* of the *insured person or dependant* while covered under the *contract* and, where possible, will deliver the blood, fluids and equipment to the local attending *medical practitioner*.

注：**医疗援助服务提供机构**仅能提供紧急救助服务，而不能满足可选择性手术或慢性血液病的需求，且上述情况不属于本合同保障的范围。

Note: *Medical assistance providers* are designed to cover emergency situations only. They are not designed to meet the needs of elective surgery or chronic blood disorders and there is no cover for such conditions under this section of the *policy*.

医疗援助服务提供机构将尽最大努力确保该提供给**被保险人或家属**的血液和设备的选择、运输和储存安排是按照可能的最高标准进行的，以保证所提供血液和设备的纯度、适用性和数量。如果由于任何**本公司**或**医疗援助服务提供机构**或其指定代理人无法控制的原因，血液和设备在抵达时不纯净，不适合其所需目的，或者数量不足，**被保险人或家属**同意对**本公司**或**医疗援助服务提供机构**或其指定代理人免责。同样，对于因处理，输入或使用**医疗援助服务提供机构**提供的血液或设备而直接导致且因任何**本公司**或**医疗援助服务提供机构**或其指定代理人无法控制的原因造成的损失或损害，**被保险人或家属**同意对**本公司**或**医疗援助服务提供机构**或其指定代理人免责。

Medical assistance provider will do its utmost to ensure that the selection, transportation and storage arrangements of the blood and equipment supplied to the *insured person or dependant* are carried out to the highest possible standards in order to seek to safeguard purity, fitness for purpose and quantity. If, for any reason beyond the control of the *company* or the *medical assistance provider* or its appointed agents, the blood and equipment is not pure on arrival, is unfit for the purposes for which it was intended, or it is of insufficient quantity, the *insured person or dependant* agrees to hold the *company, medical assistance provider* and its appointed agents blameless. Likewise, the *insured person or dependant* agrees to hold the *company, medical assistance provider* and its appointed agents blameless for any loss or damage caused for any reason beyond the control of the *company* or *medical assistance provider* or its appointed agents as a direct result of handling, transfusing or using the blood or equipment supplied by the *medical assistance provider*.

在紧急情况下，**医疗援助服务提供机构**将使用所有可得的联系和运输方式以履行其上述责任，但当发生可控范围外的故障、延迟或无法获得必要的服务时，**医疗援助服务提供机构**和**本公司**均不承担责任。

In an emergency, the *medical assistance provider* will use all available means of communication and transportation in order to fulfil its obligations outlined above but neither they nor the *company*

can accept any responsibility whatsoever for breakdown, delay or absence of any of the necessary services beyond the control of the *company* or the *medical assistance service*.

第六条 责任免除

Clause 6 Exclusions

本公司将不为以下**疾病治疗**及额外事项承担**保险责任**：

The *company* will not pay *benefit* for the following *treatment* and extras:

一、**本公司**核保后确定的**既往疾病治疗**，除非：

(1) *Treatment of a pre-existing illness* except where:

(i) 该病人曾至少连续六个月作为本保险下的**被保险人或家属**，且在此期间未曾接受任何关于该**既往疾病**的医疗建议或**疾病治疗**，或

(i) The *patient* has been an *insured person* or *dependant* under this insurance policy for a continuous period of at least 6 months, and has never received any medical advice or treatment regarding such *pre-existing illness* during the period, or

(ii) 该病人曾至少连续十二个月作为本保险下的**被保险人或家属**，或

(ii) The *patient* has been an *insured person* or a *dependant* under this insurance policy for a continuous period of at least 12 months, or

(iii) **本公司**核保后决定对**既往疾病治疗**承担**保险责任**的。

(iii) The Company has decided, after underwriting, to assume the insurer's liability for treatment of pre-existing illnesses.

二、因**被保险人或家属**故意自杀或自残造成的**损伤或疾病治疗**，或以任何方式与以上原因相关的**疾病治疗**。

(2) *Treatment* that arises from or is in any way connected with attempted suicide or any *injury* or illness that the *insured person* or *dependant* inflicts upon himself.

三、针对不可康复性语言障碍进行的治疗或与之相关的**疾病治疗**，或如果此治疗是：

(3) *Treatment* for or in connection with speech therapy that is not restorative in nature, or if such therapy is

(i) 用于改善未完全发育的语言技能；

(i) used to improve speech skills that have not fully developed;

(ii) 可以被认为监护性的或教育性的；或

(ii) can be considered custodial or educational; or

(iii) 为维持语言交流之目的。

(iii) is intended to maintain speech communication.

四、非意外伤害导致的牙科或矫正**疾病治疗**，除非该**保险责任**在**保险责任清单**里明确规定。

(4) Dental or orthodontic *treatment* unless *benefit* is specifically provided in the *list of benefits*.

五、作为对**门诊病人**的私人处方或敷料，除非已选**门诊病人保险责任清单**且该清单承担上述**保险责任**。

(5) Private prescriptions or dressings for use as an *out-patient* unless the *out-patient list of benefits* has been chosen and *benefit* is covered under that list.

六、在自然治疗诊所、健康 spa 及疗养院进行的**疾病治疗**。

(6) *Treatment* in nature cure clinics, health spas and nursing homes.

七、部分或全部由于住所原因而被安排居住在医院所支出的费用，或因非必要**疾病治疗**而住在**医院**导致费用，或**医院**已实质性成为住所或永久性住处而支出的费用。

(7) Charges for residential stays in a *hospital* which is arranged wholly or partly for domestic reasons or where *treatment* is not required or where the *hospital* has effectively become the place of domicile or permanent abode.

八、任何与妊娠或生育有关的**疾病治疗**，除非选择了妊娠或生育保障，并列示于**保险责任清单**。

(8) All aspects of pregnancy or childbirth unless maternity benefit is selected and shown in *list of benefits*.

九、因男性或女性出生控制所需或与之相关的**疾病治疗**。

(9) *Treatment* needed because of or relating to male or female birth control.

十、因不孕不育所需或与不孕不育有关的治疗，或任何生育**疾病治疗**，包括该**疾病治疗**产生的并发症，但是诊断不孕不育原因的调查除外。

(10) *Treatment* needed because of or relating to infertility or any type of fertility *treatment*, including complications arising out of such *treatment*, with the exception of the investigation of infertility to the point of diagnosis.

十一、自愿终止怀孕的**疾病治疗**，除非两个**医疗人员**书面证明怀孕将危及母亲的生命或精神稳定。

(11) *Treatment* by way of the intentional termination of pregnancy, unless two *medical practitioners* certify in writing that the pregnancy were to endanger the life or mental stability of the mother.

十二、**家属**分娩后在**医院**进行的疗养**疾病治疗**，除非因本合同另外承保该**医疗需要**而进行的**疾病治疗**。

(12) *Treatment* by way of nursery care for a *dependant* in a *hospital* following childbirth, unless due to *medical necessity* during *treatment* that is otherwise covered by this *policy*.

十三、为慢性肾衰竭或不可治愈性肾衰竭的支持性**疾病治疗**。

(13) Supportive *treatment* for chronic kidney failure or kidney failure which cannot be cured.

十四、改变一只或两只眼睛屈光度的**疾病治疗**，包括屈光状角膜切开术 (RK) 和屈光性角膜切削术 (PRK) ，除非**本公司**书面同意。

(14) *Treatment* to change the refraction of one or both eyes, including refractive keratotomy (RK) and photorefractive keratectomy (PRK), unless the *company* agrees in writing.

十五、由于从事或参加战争 (不论是否宣战) 、入侵、恐怖活动、叛乱、内战、暴动、军事、戒严、防暴的行为，**被保险人或家属**进行军队、海上或空中服务操作时直接或间接造成或引致的伤残。

(15) Injury or disability directly or indirectly caused or contributed to whilst engaging in or taking part in war, invasion, act of terrorist activities, rebellion (whether war be declared or not), civil war, commotion, military or usurped power, martial law, riot or the act of any lawfully constituted authority, or while the *insured person* or *dependants* are carrying out army, naval or air services operations, whether or not war has been declared.

十六、在所选保障地区以外进行的**疾病治疗**，且**病人**到该非所选保障地区的原因之一即为进行**疾病治疗**，但**医疗援助服务提供机构**安排的紧急运送或医疗运返的情况除外。

(16) *Treatment* outside the *selected area of coverage* if one of the reasons the *patient* travelled was for that *treatment*, except if the *medical assistance provider* has arranged emergency evacuation or medical repatriation.

十七、任何形式的非紧急旅行费用。

(17) Any form of non-emergency travel costs.

十八、任何未经**医疗援助服务提供机构**事先批准的国际紧急服务产生的费用。

(18) Any expenses for international emergency services which were not approved in advance by the *medical assistance provider*.

十九、在本保险未就所需**疾病治疗**提供保障的情况下发生的，因紧急运送、医疗运返产生的国际服务费用及第三方运输费。

(19) International services expenses for emergency evacuation, medical repatriation and transportation costs for third parties where the *treatment* needed is not covered under the *contract*.

二十、因海陆运送产生的任何费用。

(20) Any expenses for ship-to-shore evacuations.

二十一、变性手术或为该手术进行的任何术前准备或术后康复所需**疾病治疗**，如心理辅导，包括该**疾病治疗**引起的并发症所需的**疾病治疗**。

(21) Sex change operations or any *treatment* needed to prepare for or recover from these operations (for example, psychological counselling) including complications arising out of such *treatment*.

二十二、由于以下原因造成**损伤、疾病**或伤残而引起的治疗，或以任何方式与由以下原因造成**损伤、疾病**或伤残相关的**疾病治疗**：

(22) *Treatment* that arises from or is any way connected with injury, sickness or disablement as a result of

(1) 参加专业水准的体育活动；或

- taking part in a sporting activity on a professional basis; or

(2) 单独配戴水肺潜水或配戴水肺进行 30 米以下潜水的，除非潜水人是国际专业潜水教练协会 (PADI) 在此深度的合格潜水员 (或同等资质)。

- solo scuba-diving or scuba diving at depths below 30 metres unless the diver is PADI qualified (or equivalent) for that depth.

二十三、未达到**正规治疗**水平或不符合普遍接受的、习惯的或传统的医疗操作的任何形式的实验性**疾病治疗** (或程序)。

(23) Any form of experimental *treatment* (or procedure) that does not amount to *orthodox treatment* or does not adhere to the commonly accepted, customary or traditional practice of medicine.

二十四、与以下相关的费用：

(24) Expenses relating to:

(i.) 任何形式的绝育或避孕，包括输精管结扎术；

- any form of sterilisation or contraception including vasectomy;

(ii.) 任何形式的整形、美容或重塑手术或**疾病治疗**，包括为心理原因进行的上述手术或**疾病治疗**，除非病人因已由本保险承保的其他手术或因其发生意外事故直接造成该等手术或**疾病治疗**成为**医疗需要**；

- any form of plastic, cosmetic or reconstructive surgery or *treatment*, even for psychological reasons, unless it is of *medical necessity* as a direct result of the *patient* having an accident or because of other surgery, which itself would have been covered under the *contract*;

(iii.) 不属于**本公司**定义为**外科器具和/或医疗器械**的设备 (包括眼镜，除非已选**视力保险责任**，及助听器)；

- appliances (including spectacles unless the *vision benefit* has been selected and hearing aids) which do not fall within the *company's* definition of surgical appliance and/or medical appliance;
- (iv.) 听力检查，除了为 15 周岁以下的家属子女每年进行的一次听力检查；
 - hearing tests, except for one hearing test per annum for a *dependant* child under the age of 15 years;
- (v.) 附带费用，包括为买报纸、打出租车、打电话、请客人用餐和住酒店所花费的费用；
 - incidental costs including newspapers, taxi fares, telephone calls, guests' meals and hotel accommodation;
- (vi.) 例行检查或测试，包括健康透视和医疗检查。（如果选择了该保险项目选项，保险责任清单将对此进行详细规定，且健康体检责任将被包含在内）；
 - routine examinations or tests including health screens and medical examinations (**if *Wellness Benefit* has been selected, this will be detailed in the *policy schedule*, and coverage for Wellness tests will be included**);
- (vii.) 视力检查，除了为 15 周岁以下的子女家属每年进行的一次视力检查；
 - eye tests except for one eye test per annum for a *dependant* child under the age of 15 years;
- (viii.) 填写索赔表的成本或费用，或其他行政费用；
 - Costs or fees for filling in a claim form or other administration charges.
- (ix.) 已由或可由其他保险公司、其他人、组织或公共方案支付的费用。
 - Costs that have been paid by another insurance company, person, organisation or public programme.

第七条 保险期间

Clause 7 Insurance Period

本合同自**本公司**同意承保、收取首期保险费并签发保险单的次日零时开始生效，保险期间为一年，自本合同生效时起至保险期间届满日二十四时止。

The Contract starts to take effect on the next day (zero o'clock) after the day when the *company* agrees to underwrite the Contract, receives the initial premium and signs and issues the policy. The length of insurance period is one year starting from the day when the policy starts to take effect and expiring on the expiry day (24 o'clock) of the insurance period.

第八条 保险计划和保险费

Clause 8 Insurance Plans and Premium

投保人在投保时应与**本公司**协商确定本合同第三条所列的所选保障地区之一及本合同第四条所列的保障范围，并在保险单上载明。除本合同另有规定外，保险计划一经确定，中途不得变更。

The applicant shall consult with the *company* and decide upon one of the three **selected areas of coverage** listed in clause 3 and the scope of coverage provided in clause 4 when applying for the insurance coverage, and clearly indicate the choice in the insurance policy. Unless otherwise provided, once confirmed, the insurance plan shall not be changed.

本合同的交费方式分为月交、季交或年交。

The premium for the Contract can be paid on [monthly, quarterly, or annual] basis.

本公司保留决定本合同是否予以续保的权利，并有权调整保险费收费标准。

The *company* maintains the right to terminate the renewal of the Contract and the right to readjust the insurance premium rates.

第九条 明确说明和如实告知

Clause 9 Full Disclosure

订立本合同时，**本公司**应向投保人明确说明本合同的条款内容。对保险条款中免除责任的条款，**本公司**在订立合同时应当在投保单、保险单或者其他保险凭证上作出足以引起投保人注意的提示，并对该条款的内容以书面或者口头形式向投保人作出明确说明，未作提示或者明确说明的，该条款不产生效力。**本公司**可以就投保人、**被保险人**或**家属**的有关情况提出书面询问，投保人应当如实告知。

When concluding the Contract, the *company* shall explicitly describe the contents of the Contract terms and conditions to the applicant for the insurance, especially the exclusion clauses. The *company* may put forward written inquiry about the relevant information of the applicant, *insured person* or *dependant*, and the applicant, *insured person* or *dependant* shall disclose the information truthfully.

投保人故意或者因重大过失未履行如实告知义务，足以影响**本公司**决定是否同意承保或者提高保险费率的，**本公司**有权解除本合同。

If the applicant, *insured person* or *dependant* intentionally, or due to gross negligence, fails to perform the duty of truthful disclosure, which suffices to influence the *company's* decision as to whether to underwrite the insurance cover or to raise the insurance premium rate, the *company* has the right to terminate the Contract.

投保人故意不履行如实告知义务的，**本公司**对于本合同解除前发生的保险事故，不负给付保险金的责任，不退还保险费。

If the policyholder, *insured person* or *dependant* deliberately fails to perform its obligation of disclosure, the *company* shall not be liable to pay *insurance benefits* or refund the insurance premiums for insured events that occurred before the termination of the contract.

投保人因重大过失未履行如实告知义务，对保险事故的发生有严重影响的，**本公司**对本合同解除前发生的保险事故，不负给付保险金的责任，但退还未满期保险费。

If the applicant, *insured person* or *dependant* fails to perform the duty of truthful disclosure due to gross negligence, which failure has a material bearing on the occurrence of an insured event, the *company* has the right to terminate the Contract, and shall not be liable to pay *insurance benefits* for the insured events that occurred before the termination of the contract, but shall refund the unearned insurance premiums.

本公司在合同订立时已经知道投保人未如实告知的情况的，不会解除合同；发生保险事故的，**本公司**承担给付保险金的责任。

When concluding the Contract, the company has aware that the applicant, *insured person* or *dependant* fails to perform the duty of truthful disclosure, the company will not terminate the contract; and shall pay *insurance benefits* for occurred events which are covered in the benefit coverage.

上述规定的合同解除权，自**本公司**知道有解除事由之日起，超过三十日不行使而消灭。自本合同成立之日起超过二年的，**本公司**不得解除合同；发生保险事故的，**本公司**应当承担给付保险金的责任。

The right to terminate the contract as specified in the preceding paragraph shall be extinguished if it is not exercised within 30 days after the date on which the *company* learnt of the reason for termination. Once two years have lapsed from the date of formation of the contract, the *company* may not terminate the contract. If an insured event occurs, the *company* shall bear the obligation of paying *insurance benefits*.

第十条 受益人的指定和变更

Clause 10 Designation and Change of Beneficiary

除另有约定外，本合同各项医疗保险金受益人为**被保险人**或被保障的**家属**本人。

Unless otherwise provided, the beneficiary for insurance benefits under this Contract should be *the insured person* or *dependant*.

第十一条 保险事故的通知

Clause 11 Notice of an Insured Event

投保人、**被保险人**或**家属**知道保险事故发生后应当在三个月之内通知**本公司**。如果投保人、**被保险人**或**家属**故意或者因重大过失未及时通知，致使保险事故的性质、原因、损失程度等难以确定的，**本公司**对无法确定的部分，不承担给付保险金的责任，但**本公司**通过其他途径已经及时知道或者应当及时知道保险事故发生或者虽未及时通知但不影响**本公司**确定保险事故的性质、原因、损失程度的除外。

The applicant, *insured person* or *dependant* shall notify the *company* that an insured event has occurred within 3 months after his or her awareness of the insured event's occurrence. If the applicant, *insured person* or *dependant* intentionally fail to provide timely notice or fail to provide timely notice with

material negligence, which causes difficulty in identifying the nature of the event, the cause of the event, and the level of loss caused by the event, etc., the *company* is not liable to pay the portion of the benefits that is due for unidentifiable part of the event, unless, the *company* was made aware of, or should have been made aware of, the occurrence of the event, through other channels, in a timely manner, or if the failure to promptly notify the *company* of the occurrence of an event, does not affect the *company's* ability to identify the nature of the event, the cause of the event, and the level of loss caused by the event.

对于因迟延通知所增加的任何调查费用由受益人承担，但因不可抗力导致的迟延除外。

The beneficiary shall bear the investigation expenses which are additional due to the delayed notification except the delay caused by force of nature.

第十二条 保险金申请

Clause 12 Insurance Benefits Application

本合同有效期内，**被保险人或家属**发生**保险责任**范围内的费用支出，由**被保险人、家属**或其代理人作为申请人，填写保险金给付申请书，并凭下列证明和资料的原件向**本公司**申请给付保险金：

During the validity period of the Contract, for the expense under the insurance covers incurred by the *insured person or dependant*, the *insured person, dependant* or their agent shall fill in the application form for *insurance benefits* as the applicant and apply for compensation payment with the originals of the following proof documents and data:

一、保险单或投保人证明；

1、Insurance policy or the proof document for the applicant for insurance.

二、保险费交费凭证；

2、Proof document of payment of premium.

三、申请人户籍证明与身份证明；

3、The proof documents of the applicant's permanent residence and identity.

四、医院出具的医疗费用收据（属于急症的医疗费用收据需加盖医院的急症印章）、诊断证明及病历；

4、The receipts for payment of medical expenses issued by the hospital (the receipts for payment of medical expenses in respect of emergency cases should be stamped with the seal for emergency by the hospital), proof of diagnosis and case history in original.

五、若申请人为代理人，则应提供授权委托书、身份证明等文件；

5、If the applicant is an agent, the authorization proxy, proof of identity and others are needed.

六、申请人所能提供的与确认保险事故的性质、原因、伤害程度等有关的其他证明和资料。

6、 Other proof and data related with determining the nature, causes, extent of injury and others which the applicant can provide.

本公司收到申请人的保险金给付申请书及上述证明和资料后，将及时作出核定。情形复杂的，或者保险事故的性质、原因、损失程度等难以确定的，**本公司**将在调查核实后作出核定。

After the *company* receives the application for payment of *insurance benefits* and the above mentioned verification and materials from the applicant, the *company* will make a decision in a timely manner; however, if the application is more complicated or the cause and nature of the insured event or the level of loss caused by the event is difficult to identify the *company* will make a decision after the *company* completes an investigation

对确定属于**保险责任**的，在与申请人达成有关给付保险金数额的协议后 10 日内，履行给付保险金的义务；对不属于**保险责任**的，自作出核定之日起 3 日内向申请人发出拒绝给付保险金通知书并说明理由。

As for the parts of claims which are covered under the Contract according to the *Insurance Liabilities*, the *company* will pay the insurance benefits with 10 days after the *company* enters into a payment agreement with the applicant. As for the part of claims which is not covered under the Contract according to the *Insurance Liabilities*, the *company* will notify the applicant that the request is not covered under the Contract and explain the reason that the claim was rejected within 3 days of making the decision to reject the claim.

本公司自收到申请人的保险金给付申请书及上述证明和资料之日起 60 日内，对属于**保险责任**而给付保险金的数额不能确定的，根据已有证明和资料，按可以确定的最低数额先予以支付，**本公司**最终确定给付保险金的数额后，给付相应的差额。

Within 60 days after the *company* receives the application for payment of *insurance benefits* from the applicant together with the above mentioned proof documents and data, for the part of claims which is covered according to the insurance liabilities but the payment amount of which cannot be determined, the *company* shall pay for a minimum amount which can be determined according to the available proof documents and data first. After the *company* determines the final amount of payment for *insurance benefits*, the relevant difference shall be paid.

受益人对**本公司**请求给付保险金的诉讼时效期间为自其知道或者应当知道保险事故发生之日起 2 年。

The period of prescription for the lodging of a claim with the *company* for payment of *insurance benefits* by the beneficiary shall be two years, counting from the date on which he or she learnt or ought to have learnt of the occurrence of the insured event.

申请人申请给付保险金时，**本公司**认为如有必要，可要求相关医疗单位予以鉴定和复查。如需更多信息，**本公司**可以向实施治疗的医疗人员要求医疗报告。**本公司**同时可以要求病人进行单独的医疗检查。**本公司**将支付以上两项的费用。

When the applicant applies for payment of *insurance benefits*, the *company* may require the relevant medical agencies to provide a countercheck and appraisal if the *company* believes it is necessary. The

company may ask for a medical report from the *medical practitioner* who has carried out the *treatment*, if they need more information. The *company* may also require the *patient* to have an independent medical examination. The *company* will pay for both the medical report and independent medical examination

第十三条 保险金的给付

Clause 13 Payment of Insurance Benefits

本公司收到索赔申请和有关证明、资料后，将及时作出核定；情形复杂的，或者保险事故的性质、原因、损失程度等难以确定的，**本公司**将在调查核实后作出核定。

After the *company* receives the application for payment of insurance benefits and the relevant proof documents and data, the *company* will make a decision in a timely manner; however, if the application is more complicated or the cause and nature of the insured event or the level of loss caused by the event is difficult to identify the *company* will make a decision after the company completes an investigation.

对属于**保险责任**的，**本公司**在与受益人达成给付保险金的协议后 10 日内，履行给付保险金义务。

As for the part of the claims which is covered under the Contract according to the *Insurance Liabilities*, the *company* will pay the insurance benefits within 10 days after the company enters into a payment agreement with the beneficiary.

本公司未及时履行前款规定义务的，除支付保险金外，应当赔偿受益人因此受到的损失。

If the *company* fails to perform the previous paragraph's payment obligations on time, the *company* shall compensate the beneficiary for any losses that he or she suffers from such delay, in addition to the payment of the insurance benefits.

对不属于**保险责任**的，**本公司**自作出核定之日起 3 日内向受益人发出拒绝给付保险金通知书并说明理由。

As for the part of claims which is not covered under the Contract according to the *Insurance Liabilities*, the *company* will notify the applicant that the request is not covered under the Contract and explain the reason that the claim was rejected within 3 days of making the decision to reject the claim.

本公司在收到索赔申请及有关证明和资料之日起 60 日内，对给付保险金的数额不能确定的，根据已有证明和资料可以确定的数额先予支付；**本公司**最终确定给付保险金的数额后，将支付相应的差额。

Within 60 days after the *company* receives the application for payment of insurance benefits together with the relevant proof documents and data, for the parts of claims which is covered according to the insurance liabilities but the payment amount of which cannot be determined, the *company* shall pay for a minimum amount which can be determined according to the available proof documents and data first. After the *company* determines the final amount of payment for insurance benefits, the relevant difference shall be paid.

保险金以人民币支付，不含利息。

The insurance benefits shall be paid in Chinese Yuan (RMB) without any interest.

第十四条 其它核定结果

Clause 14 Other Decisions

未发生保险事故，被保险人或者受益人谎称发生了保险事故，向**本公司**提出索赔申请的，**本公司**有权解除合同，并不退还保险费。

If an insured event has not occurred by the insured or beneficiary falsely claims that such an event has occurred, and lodges a claim with the *company* for the payment of insurance benefits, the *company* shall have the right to terminate the Contract and shall not return the insurance premium.

投保人、被保险人故意制造保险事故的，**本公司**有权解除合同，不承担给付保险金的责任。

If the applicant or the insured deliberately causes an insured event, the *company* shall have the right to terminate the Contract and shall not be liable for the payment of insurance benefits.

保险事故发生后，投保人、被保险人或者受益人以伪造、变造的有关证明、资料或者其他证据，编造虚假的事故原因或者夸大损失程度的，**本公司**对虚报的部分不承担给付保险金的责任。

If the applicant, the insured or the beneficiary fabricates false causes for an insured event or overstates the extent of the losses, by means of forged or altered relevant proofs, information or other evidence after the occurrence of such event, the *company* shall not be liable for payment of insurance benefits for the portion that is false.

投保人、被保险人或者受益人有以上规定行为之一，致使**本公司**支付保险金或者支出费用的，应当在收到**本公司**相关通知后之日起 30 日内向**本公司**退回或者赔偿。

If the applicant, the insured or the beneficiary commits any of the acts specified in the preceding three paragraphs and causes the *company* to pay insurance benefits or incur expenses, he or she shall return the insurance proceeds to or compensate the *company* within 30 days after he or she receives the relevant notice sent by the *company*.

第十五条 被保险人或家属变动

Clause 15 Change of the Insured Person or Dependant

一、投保人因所属人员变动需要增加**被保险人及家属**的，应书面通知**本公司**，经**本公司**审核同意，于收取本合同规定的保险费的次日起开始承担**保险责任**。

If more *insured persons* and *dependants* need to be added according to the change of personnel, the applicant for insurance shall notify the *company* in writing. After examinations and approval, the *company* shall undertake the relevant insurance liability on the second day after the date of receiving the premium charged according to the Contract.

二、投保人因**被保险人**离职或其他原因需要减少**被保险人及家属**的，应书面通知**本公司**，本合同对该**被保险人及家属**所承担的**保险责任**自通知到达时终止。**本公司**向投保人退还其未到期保费。

If the number of *insured persons* or *dependants* needs to be reduced due to resignation of *insured persons* or other reasons, the applicant for insurance shall notify the *company* in writing. The insurance liabilities undertaken under the Contract shall be terminated upon receiving the notification. The matter shall be handled according to the relevant stipulations about the termination of the Contract by the applicant for insurance. The unearned premium shall be returned.

三、如果本合同**被保险人**人数减少到少于 5 人或者少于投保人中符合参保条件成员总数的 75% 的，**本公司**有权解除本合同，并按照投保人解除合同的有关规定办理。

If the number of *insured persons* under the Contract is reduced to less than 5, or less than 75% of the policyholder's total qualified members, the *company* has the right to terminate the Contract and handle the matter according to the relevant stipulations about termination of the Contract by the applicant for insurance.

关于加入或退出本保险的**被保险人或家属**，对其**保险责任**及保险费的收取，**本公司**将适用如下规定：

In respect of cover and billing for *insured persons* or *dependants* (where applicable) who are joining or leaving the *contract*, the *company* will apply the following format:

(1) 加入。任何在合同月的前 15 天 (含第 15 天) 加入本保险的**被保险人或家属**，**保险责任**自加入本合同之日开始。任何在合同月的第 15 天之后加入本保险的**被保险人或家属**，**保险责任**自加入本合同之日开始，但当月不收取保险费，自下个月开始收取保险费。

▪ Additions - any insured person or dependant (where applicable) who joins the contract during the first 15 days of a contract month, will be covered from the date of joining but will be billed for the entire month. Any insured person or dependant (where applicable) who joins the contract during the last 15 days of a contract month, will be covered from the date of joining but will not be billed for that month whereupon billing will commence at the beginning of the following month.

(2) 退出。在合同月的前 15 天 (含第 15 天) 退出本保险的**被保险人或家属**，**保险责任**至退出本合同之日结束，但当月不收取保险费。在合同月的第 15 天之后退出本保险的**被保险人或家属**，**保险责任**至退出本合同之日结束，但将按整月收取保险费。

▪ Terminations - any insured person or dependant (where applicable) who leaves the contract during the first 15 days of a contract month, will be covered up to the date of leaving but will not be billed for that month. Any insured person or dependant (where applicable) who leaves the contract during the last 15 days of a contract month, will be covered up to the date of leaving but will be billed for the entire month.

第十六条 保险责任终止

Clause 16 Termination of the Insurance Liability

一、本保险项下对**被保险人和其家属**的**保险责任**将在以下情况发生时立即终止：

Cover under the *contract* will end immediately for the *insured person* and their *dependants* in the following situations:

- (1) **被保险人死亡**。**被保险人死亡**的，投保人同意继续为其**家属**投保直至下一个**年度续签日**，对该**家属**的**保险责任**将在下一个**年度续签日**终止；
 - if the *insured person* dies. The *policyholder* may agree to continue cover for their *dependants* up to the next *annual renewal date* when their cover will end; or
- (2) **被保险人**不再为投保人工作；
 - if the *insured person* stops working for the *policyholder*; or
- (3) 投保人停止为**被保险人及其家属**（如有）支付保险费；或
 - if the *policyholder* stops paying premiums for the *insured person* and *dependants* (if any); or
- (4) 在保险单上载明的保险期间届满时本合同终止。
 - when this *policy* terminates at the expiry of the period shown in the *policy schedule*.

二、对**家属**的**保险责任**将在以下事件发生时终止：

Cover will end for the *dependant*:

- (1) 如果他或她死亡；或
 - if he or she dies; or
- (2) 他或她不再是**家属**。
 - when he or she ceases to be a *dependant*;

保险责任自下一个**年度续签日**终止。但如果**被保险人**离婚，**被保险人**与其**配偶**的最终离婚判决一发布或离婚手续办理完毕，对**配偶**的**保险责任**即终止。

Cover will end at the next *annual renewal date*. If an *insured person* gets divorced or the unmarried partners no longer live together or a civil partnership is dissolved, the spouse or unmarried or civil partner will no longer be considered as a *dependant* for the purposes of this *policy*. Cover for the *spouse* ends as soon as the final decree/final dissolution order has been granted.

三、在保险单显示的保险期间届满导致本合同终止之前，就所有的**被保险人和家属**而言，**保险责任**将在以下情况发生时立即终止：

Prior to the termination of the *policy* at the expiry of the period shown in the *policy schedule*, cover will end immediately for all *insured persons* and *dependants*,

- (1) **被保险人数**量首次少于 5 人或者少于投保人中符合参保条件成员总数的 75% 的。

- after the number of *insured persons* first falls below 5 or is less than 75% of the policyholder's total qualified members; or

(2) 投保人未按合同规定日期交付保险费的，自该日期次日起 31 日内若发生保险事故，**本公司仍负保险责任**；超过合同规定交付保险费日期 31 日的，本合同效力终止。

- If the applicant for insurance has not paid the premium on the specified dates, there will be 31 days of grace starting from the second day after the specified dates. If accidents insured against takes place within the *days of grace*, the Company shall undertake the insurance liability. If the premium is not paid within the *days of grace* as well, the validity of the Contract shall be terminated on the second day after the expiry of the *days of grace*.

四、当**被保险人或家属**回到其**住所国**居住三个月以上，该**被保险人或家属**的**保险责任**将终止。

Cover will end for a specific *insured person* or his *dependant(s)* when the *insured person* or *dependant* returns to live in his *country of domicile* for more than 3 months.

五、投保人解除合同

Policyholder may terminate the Contract:

(1) 本合同成立后，投保人可以要求解除本合同，但已经发生保险金给付的，投保人不得要求解除本合同。投保人要求解除本合同时，应填写解除合同申请书，并提交投保人证明、保险合同和最近一次保险费交费凭证。

(1) After the Contract is concluded, the applicant for insurance may demand to terminate the Contract. However, if payment for *insurance benefits* has already been made, the applicant for insurance may not demand to terminate the Contract. When demanding to terminate the Contract, the applicant for insurance shall fill in the Application Form for Termination of the Contract and submit the proof documents of the applicant for insurance, the Insurance Contract and the proof document of the most recent lot of premium which has been paid.

(2) 本合同自**本公司**接到解除合同申请书时终止。**本公司**于接到上述证明和资料之日起三十日内，向投保人扣除**手续费**后退还未满期保险费。

(2) The Contract shall be terminated upon receiving the Application for Termination of the Contract. The *company* shall return the unearned premium with the *service fees* deducted to the applicant for insurance within 30 days starting from the date of receiving the above mentioned proof documents and data.

第十七条 地址变更

Clause 17 Change of Address

投保人地址变更时，应及时以书面形式通知**本公司**；投保人未以书面形式通知的，**本公司**按所知最后的地址发送有关通知。

If the address of the applicant for insurance is changed, the applicant for insurance shall notify the *company* of that in writing in time. If the applicant for insurance has not notify the *company* of the change in writing, the *company* shall send the relevant notices to the last address it knows of.

第十八条 合同内容的变更

Clause 18 Modification of Contents of the Contract

在本合同有效期内，经投保人和**本公司**协商一致，可以变更本合同的有关内容，由**本公司**在保险单上批注或者附贴批单。

Within the valid period of the Contract, the relevant contents of the Contract may be modified subject to agreement being reached between the applicant for insurance and the *company*. The *company* shall note the modification in the policy or attach endorsements to this effect onto the policy.

第十九条 法律适用

Clause 19 Governing Law

本合同的订立、变更、解除、履行、争议解决以及与本合同有关的一切事宜，均适用中华人民共和国法律。

The conclusion, modification and change, termination, performance, handling of disputes and all the matters relevant to the Contract are subject to the jurisdiction of the PRC laws.

第二十条 争议处理

Clause 20 Dispute Settlement

本合同履行过程中发生争议时，可以从下列两种方式中选择一种争议处理方式：

For any disputes on any issues in relation to this Contract during the insurance period, the parties concerned shall resort to either of the following two dispute settlement methods:

一、因履行本合同发生的争议，由当事人协商解决，协商不成的，提交仲裁委员会仲裁；

● The relevant disputing parties shall solve the disputes arising from the performance of the Contract through consultation. If the disputes cannot be solved through consultation, they shall be submitted to the arbitration committee for arbitration.

二、因履行本合同发生的争议，由当事人协商解决，协商不成的，依法向本合同有管辖权的人民法院提起诉讼。

● The relevant disputing parties shall solve the disputes arising from the performance of the Contract through consultation. If the disputes cannot be solved through consultation, a lawsuit can be submitted to the People's Court in accordance with legal regulations.

第二十一条 释义

Clause 21 Definitions

下列词汇和短语具有指定含义。当以下词汇和短语出现在本合同相关文件中并表达该指定含义时，将以黑体字表示。所有标注星号的定义仅适用于涉及到被授权在美国接受治疗的情形。

The words and phrases set out below have the meanings specified. Where those words and phrases are used with those meanings, they will appear in italics in this guide, the list of benefits and ‘How to Claim’ procedure. All definitions that are marked with an asterisk apply to US-based admissions only.

除非另有规定，下文中词语的单数形式包含复数形式，“他”包含“她”的含义，反之亦然。Unless otherwise provided, the singular includes the plural and the masculine includes the feminine and vice versa.

“**中华人民共和国**”：简称中国。本合同所指中华人民共和国不包括香港、澳门和台湾地区。

“**People’s Republic of China**” –excluding HongKong, Macao and Taiwan.

“**年度续签日**”指本合同**生效日期**的每个周年日或**本公司**与投保人书面同意的其它日期。如该月份无对应的周年日，则以该月份的最后作为周年日。

‘**Annual renewal date**’ - the anniversary of the *start date* each year or any other date which the *company* and the *policyholder* may agree in writing.

“**适当年龄间隔**”指人出生、2个月、4个月、6个月、9个月、12个月、15个月、18个月、2周岁、3周岁、4周岁、5周岁和6周岁之间的间隔。

‘**Appropriate age intervals**’ - birth, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 2 years, 3 years, 4 years, 5 years and 6 years.

“**保险责任**”指**保险责任清单**所列的所有**保险责任**。

‘**Benefit**’ - any benefit shown in the *list of benefits*.

“**血液护理服务**”指本合同第五条所规定的提供已过滤血液和复苏液。

‘**Blood Care Services**’ - provision of screened blood and resuscitation fluids as set out in clause 5.

*“**CareAllies**”指美国一家与**疾病治疗**有关的索赔审查机构。

*‘**CareAllies**’ - a claims review organisation used in respect of *treatment* in the United States.

“**加勒比地区**”指安圭拉、安提瓜、阿鲁巴、巴哈马、巴巴多斯、伯利兹、百慕大、博内尔岛、开曼群岛、哥斯达黎加、古巴、库拉索岛、多米尼加、多米尼加共和国、萨尔瓦多、格林纳达、瓜德罗普岛、危地马拉、海地、洪都拉斯、牙买加、马提尼克岛、墨西哥、尼加拉瓜、巴拿马、波多黎各、圣基茨、圣卢西亚、圣文森特、特立尼达和多巴哥、以及美属维尔京群岛。

‘**Caribbean**’ - Anguilla, Antigua, Aruba, Bahamas, Barbados, Belize, Bermuda, Bonaire, Cayman Islands, Costa Rica, Cuba, Curacao, Dominica, Dominican Republic, El Salvador, Grenada, Guadeloupe, Guatemala, Haiti, Honduras, Jamaica, Martinique, Mexico, Nicaragua, Panama, Puerto Rico, St. Kitts, St. Lucia, St. Vincent, Trinidad and Tobago, and the Virgin Islands.

“**本公司**”指招商信诺人寿保险有限公司。

‘Company’ - CIGNA & CMC Life Insurance Co. Ltd.

“**继续留院审查**”指在病人住院期间，由CareAllies做出的关于病人继续留院**疾病治疗**合适性的审查和决定。（CSR）

‘Continued stay review’ - a review and decision by CareAllies, during the *patient’s* stay in *hospital*, on the suitability of the *patient’s* continued *treatment* as an in-patient. (CSR)

“**住所国**”指**被保险人**或**家属**的出生国，或依照中华人民共和国法律，被视为**被保险人**或**家属**拥有永久住所地且具有无限期居住打算的国家。

‘Country of domicile’ - the nation of the *insured person* or *dependant’s* birth or the nation in which they are deemed by the Law of the PRC to have their permanent place of residence and an indefinite intention to reside.

“**日间留院疾病治疗**”指入住**医院**并使用病床接受治疗，但并不在**医院**留宿。涉及在美国接受治疗的，此项还包括在外科医生手术室实施的外科手术。

‘Day case treatment’ - care involving admission to *hospital* and using a bed but not staying overnight. In respect of US based admissions, this also includes surgical procedures carried out in the doctor’s surgery.

“**家属**”指：

‘Dependant’

(1) **被保险人的配偶**，**被保险人**需在**疾病治疗**开始之前向**本公司**提供**配偶**的姓名；及

- the *insured person’s* spouse, whose name has been provided to the *company* prior to the commencement of any *treatment*;

(2) **被保险人的未婚子女**，**被保险人**需在**疾病治疗**开始之前向**本公司**提供未婚子女的姓名，但仅包括疾病治疗开始时年龄不满25周岁且仍在接受全日制教育或与**被保险人**居住在**同一住所**的**被保险人的子女**。

- the *insured person’s* unmarried children, whose names have been provided to the *company* prior to the commencement of any *treatment*, but only if those persons are under age 25, either in full-time education or residing at the same residence as the *insured person* at the commencement of any *treatment*.

“**生效日期**”指对**被保险人**及**家属**开始承保的日期。

‘Effective date’ - the date cover starts for the *insured person* and their *dependants*.

“**疾病治疗**”指由**医疗人员**控制的治愈或实质性缓解本保险范围内急慢性**疾病**情况的任何相关治疗。

‘Treatment’ - any relevant treatment controlled by a *medical practitioner* to cure or substantially relieve acute or chronic conditions within the scope of the *contract*.

“**符合条件的女性**”指**被保险人**，或**被保险人的配偶**。

‘**Eligible female**’ - a person who is a *insured person* or a *spouse* or partner of a *insured person*.

“**家庭护理**”指由一名合格护士到病人住处提供的专门护理服务：

‘**Home nursing**’ - visits from a *qualified nurse* to the *patient*’s home to give expert nursing services:

(1) 因医疗需要紧接着发生于**医院**治疗之后；

- immediately after *hospital treatment* for as long as is required by *medical necessity*;

(2) 因**医疗需要**提供的、通常发生在**医院**的**疾病治疗**。

- visits for as long as is required by *medical necessity* for *treatment* which would normally be provided in a *hospital*.

在以上任一情况下，该服务必须经治疗**病人**的**专家**建议方可提供。

In either case, the *specialist* who treated the *patient* must have recommended these services.

“**医院**”指在其所在国注册或被许可为内科或外科医院，并由**医疗人员**或**合格护士**为**病人**提供日常照料或护理的机构。

‘**Hospital**’ - any organisation which is registered or licensed as a medical or surgical hospital in the country in which it is located and where the *patient* is under the daily care or supervision of a *medical practitioner* or *qualified nurse*.

“**损伤**”指身体损伤。

‘**Injury**’ - a physical injury.

“**住院病人**”指病人在接受**疾病治疗**期间在**医院**留宿。

‘**In-patient**’ - A *patient* who stays overnight in *hospital* while undergoing *treatment*.

“**被保险人**”指由本合同投保人指定并支付薪水的每周最低工作时间不少于 30 小时的正式员工。

‘**Insured Person**’ - any *member* staff who is working the minimum of 30 hours per week, nominated and sponsored by the *policyholder* who becomes a *insured person* of the *contract*.

“**国际服务**”指由**医疗援助服务提供机构**为本保险安排的服务，如本合同第四条所列。

‘**International services**’ - services arranged by the *medical assistance provider* for the *contract* as set out in clause 4.

“**保险责任清单**”指**本公司**发布的关于本保险的**最新保险责任清单**，包括相关注释说明。

‘**List of benefits**’ - the latest list of benefits which the *company* has published for the International Employee Healthcare Insurance, including any notes to it.

“**医疗援助服务提供机构**”指提供医疗咨询、运送、援助和运返的服务。该援助服务支持多种服务且每天 24 小时提供。

‘**Medical assistance provider**’ - a service which provides medical advice, evacuation, assistance and repatriation. This service can be multi-lingual and assistance is available 24 hours per day.

“**医疗需要**”是指由**医疗团队**确定为符合以下条件的、医疗上必须包含的服务和用品：

‘**Medical necessity**’ - medically necessary covered services and supplies are those determined by the *medical team* to be:

- (1) 诊断或治疗疾病、**损伤**或其症状所需的；
 - required to diagnose or treat an illness, *injury*, disease or its symptoms;
- (2) **正规**并符合普遍接受的医疗执业标准的；
 - *orthodox*, and in accordance with generally accepted standards of medical practice;
- (3) 符合临床适当类型、频率、范围、地点和期限的；
 - clinically appropriate in terms of type, frequency, extent, site and duration;
- (4) 非主要为方便**病人**、医生或其他保健提供者的；及
 - not primarily for the convenience of the *patient*, physician or other health care provider; and
- (5) 以对于提供该类服务和用品合适的最低频率提供。
 - rendered in the least intensive setting that is appropriate for the delivery of the services and supplies.

在适用情况下，**本公司**的**医疗团队**可在决定合适的最低频率时，比较可选服务、设置或用品的成本效益。

Where applicable, the *medical team* may compare the cost-effectiveness of alternative services, settings or supplies when determining least intensive setting.

“**意外伤害**”是指意外事故对被保险人身体的任何部位所造成的伤害，这些伤害是在本合同有效期间由于外部性的、猛烈的和显而易见的手段所造成的，而且其发生不是由于疾病（包括潜在的疾病和机能障碍）所导致，也不是出于当事人的本意

‘**Accidental Injury**’ -An accident that results in physical damage or hurt, and it is caused by external, fierce and obvious hurt other than internal disease (including potential diseases and dysfunction) and intentional act during the insurance period.

“**医疗人员**”指依据**疾病治疗**提供地国家、州或其他监管地区的法律注册或被许可的医生或**专家**。

‘**Medical practitioner**’ - a doctor or *specialist* who is registered or licensed to practice medicine under the laws of the country, state or other regulated area in which the *treatment* is provided.

“**医疗团队**”指本公司的医务主任或**医疗援助服务提供机构**。

‘**Medical team**’ – means the *company’s* medical director or the *medical assistance provider*.

“**小型外科手术及相关疾病治疗**”指任何不需要全身麻醉或留宿**医院**的手术治疗或措施，例如一个内嵌脚趾指甲的手术**疾病治疗**。

‘**Minor surgical procedures and associated treatment**’ - any surgical treatment or procedure that does not require a general anaesthetic or overnight *hospital* stay, e.g. surgical *treatment* of an ingrown toe nail.

“**手术**”指在**外科手术附件**中被定义为手术的任何操作。

‘**Operation**’ - any procedure described as an operation in the *schedule of surgical procedures*.

“**正规**”指任一程序或**疾病治疗**在开始应用时在医学界被普遍所接受，且得到医疗特定领域内大量受人尊敬的、负责的且经验丰富的医生的赞成。

‘**Orthodox**’ - in relation to a procedure or *treatment* that is medically accepted at the time of the commencement of the procedure or *treatment*, in that it accords with that upheld by a respectable, responsible and substantial body of medical opinion, experienced in the particular field of medicine.

“**门诊病人**”指不需要因进行**专家咨询**或接受**疾病治疗**而需要留宿**医院**的**病人**。

‘**Out-Patient**’ - a *patient* who does not need to stay overnight in *hospital* for either consultation with a *specialist* or for *treatment*.

“**病人**”指接受治疗的**被保险人**或**家属**。

‘**Patient**’ - the *insured person* or *dependant* who undergoes *treatment*.

*“**入院前认证**”指入住美国**医院**前，由 CareAllies 就**被保险人**或**家属**是否事宜接受**住院病人疾病治疗**或**日间留院疾病治疗**进行的审查和初步决定。（PAC）

*‘**Pre-admission certification**’ - a review and an initial decision by *CareAllies*, before admission to a *hospital* in the United States, on the suitability of *in-patient treatment* or *day case treatment* for a *insured person* or *dependant* (PAC).

“**既往疾病**”指同时符合以下条件的任何**疾病**或**损伤**，或与此类**疾病**或**损伤**相关的症状：

‘**Pre-existing illness**’ - any *sickness* or *injury*, or symptoms linked to such *sickness* or *injury* for which:

(1)曾寻求或接受医疗咨询或**疾病治疗**；或

- medical advice or *treatment* has been sought or received; or

(2) 被保险人或家属知道，但没有为之寻求医疗咨询或疾病治疗；

- the *insured person* or *dependant* knew about and did not seek medical advice or *treatment* for;

(3) 且发生在生效日期之前 6 个月内。

- during the 6 months before the *effective date*.

“**私人救护车**”指经专门制造并经私人救护车服务认可作为救护车使用的车辆。

‘**Private ambulance**’ - a purpose-built vehicle operated as an ambulance by a recognised private ambulance service.

“**合格护士**”指依据**疾病治疗**提供地国家、州或其他监管地区法律注册或被许可的护士。

‘**Qualified nurse**’ - a nurse who is registered or licensed as such under the laws of the country, state or other regulated area in which the *treatment* is provided.

“**外科手术附件**”指**本公司**的首席医疗官核准的现行外科手术附件。

‘**Schedule of surgical procedures**’ - the current schedule of surgical procedures approved by the *company*’s chief medical officer.

“**短期**”是指与**疾病治疗**所需康复时间相一致的一段时间，该时间须经主治**医疗人员**指示并经**本公司**医务主任批准。

‘**Short-term**’ – means a period of time consistent with the recuperation time required for the *treatment* and as prescribed by the treating *medical practitioner* with the approval of the *company*’s medical director.

“**疾病**”指身体或精神上的疾病或妊娠。

‘**Sickness**’ - a physical or mental illness and pregnancy.

“**专家**”指符合同时以下条件的医生：

‘**Specialist**’ - a doctor who:

(1)接受过先进的专业培训；

- has received advanced specialist training;

(2) 在某一内科或外科领域执业；且

- practices a particular branch of medicine or surgery; and

(3) 担任或曾担任一家医院的顾问职位，或**本公司**认可的具有同等地位的其他职位。

- holds or has held a consultant appointment in a *hospital* or an appointment which the *company* accepts as being of equivalent status.

根据**疾病治疗**提供地国家、州或其他监管地区的法律注册或被许可为物理治疗师的仅为**保险责任清单**约定的物理治疗之目的而被视为**专家**。

A physiotherapist who is registered or licensed as such under the laws of the country, state or other regulated area in which the *treatment* is provided is only a *specialist* for the purpose of physiotherapy as described in the *list of benefits*.

“**配偶**”指被保险人的法定丈夫或妻子，或本公司在本保险下接受承保的**被保险人**未婚或事实伴侣。

‘Spouse’ - the *insured person's* legal husband or wife, or unmarried or civil partner the *company* has accepted for cover under the *contract*.

“**外科器具和/或医疗器械**”指：

‘Surgical appliance and/or Medical Appliance’ –

(1) 为外科手术之目的或与之相关所需的假肢，假体或设备；或

- an artificial limb, prosthesis or device which is required for the purpose of or in connection with surgery; or

(2) 因医疗所需作为手术后**疾病治疗**必需部分的人工装置或辅助设施；或

- an artificial device or prosthesis which is a necessary part of the *treatment* immediately following surgery for as long as required by medical necessity;

(3) 因医疗所需作为**短期**康复过程中的辅助设施或器械。

- a prosthesis or appliance which is medically necessary and is part of the recuperation process on a *short-term* basis.

“**视力保险责任**”指与**被保险人**或**家属**视力有关的操作和**疾病治疗**。

‘Vision benefit’ - procedures and *treatment* relating to the vision of an *insured person* or *dependant*.

“**健康测试保险责任**”指**保险责任清单**和条件里定义的由**医疗人员**实施的测试。

‘Wellness benefit’ - tests as defined in the *list of benefits* and conditions and carried out by a *medical practitioner*.

“**世界各地**”指世界各地及海上的每个国家，但不包括在**疾病治疗**开始日，任何中国政府禁止与其贸易往来且依据适用法律支付被视为不合法的国家。

‘Worldwide’ - every country throughout the world and at sea, excluding any country with whom, at the date of commencement of *treatment*, the Government of China has prohibited trade to the extent that payments are illegal under applicable law.

“**世界各地，除美国、加拿大和加勒比地区**”指不包括美国、加拿大和**加勒比地区**的其他**世界各地**。

‘Worldwide excluding USA, Canada and the Caribbean’ - *worldwide*, with the further exception of the United States of America, Canada and the *Caribbean*.

“**保险年度**”指自生效日期或年度续签日起算的一年期间。

‘Year of insurance’ - the annual period starting on the *start date* or *annual renewal date*.

手续费：指本合同的服务和管理成本，该成本占年度保险费的 35%。

‘Service fee’ – the cost of servicing and operating the policy which hold 35% of total annual premium.