

#### SCHEDULE 1 (cont'd)

## 附件 1 (续)

## 招商信诺人寿保险有限公司 招商信诺精英版附加全球员工牙科团体医疗保险条款

# CIGNA & CMC Life Insurance Co. Ltd. CIGNA & CMC Additional Global Group Dental Insurance (Elite) Clauses

#### 第一条 附加合同说明

**Clause 1 Instruction** 

招商信诺精英版附加全球员工牙科团体医疗保险(以下简称"本**附加合同**"),依主保险合同(以下简称"主合同",具体的主合同以**保单**约定为准)**投保人**的申请,经**本公司**同意后,附加在主合同上。凡本**附加合同**条款未做规定的内容,主合同条款适用本**附加合同**。如主合同条款与本**附加合同**条款互有抵触时,则以本**附加合同**条款规定为准。

CIGNA & CMC Additional Global Group Dental Insurance (Elite) Contract (hereinafter referred to as the "Additional Contract") is attached to the principal insurance contract (hereinafter referred to as the "Principal Contract", which shall be determined and agreed in the policy ) based on the application from policyholder of the Principal Contract and the acceptance of the company. For content which is not provided in the Additional Contract, the clauses of the Principal Contract shall apply. In the event that there is any discrepancy between the provision of the Principal Contract and that of the Additional Contract, the provision of the Additional Contract shall prevail.

#### 第二条 保险合同的构成

Clause 2 Composition of the Additional Contract

本**附加合同由保单**、保险条款、批注、附贴批单、投保单、**保险责任清单**,与**本附加合同** 有关的投保文件、声明、**被保险人**名单、其他书面文件构成。

The *Additional Contract* is composed of the insurance *policy* with the accessory provisions, endorsements, addendums, the insurance application form, the *list of benefits* and the application documents, the declarations, the name lists of *insured persons*, and other writing agreements related to the *Additional Contract*.

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#### 第三条 保险责任

#### **Clause 3 Insurance Liability**

本**附加合同**对**牙医**认可的**传统的治疗**费用承担**保险责任**,保险金数额不超过**保险责任清 单**所列限额。

The Additional Contract covers recognized costs of orthodox treatment by a dentist up to the limits shown in the list of benefits.

- 一、 本公司将根据保险责任清单赔偿被保险人因进行牙科治疗及在世界范围内接受与牙科治疗有关的服务而支出的合理费用。
- 1. The *company* will refund reasonable costs for a patient's dental treatment and for services related to dental treatment *worldwide* which are shown in the *list of benefits*.

由所选择计划而决定的**保险责任清单**的限额将以人民币计算。

The limits in the list of benefits depending on the plan selected will be applied in RMB.

病人接受一次治疗所支付的费用或接受多次治疗累计支付的费用所获得的适当赔偿不得超过接受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治疗费用本公司不负责赔偿。对于被保险人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 relating 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 *benefit* limits that were in the *list of benefits* when *treatment* was given. The *company* will not pay for the proportion of any *treatment* which is over the *benefit* limits in the *list of benefits*. In respect of any expenses for which the *insured person* has been or can be reimbursed from any other insurance or source, the *company* will reimburse the rest of the treatment which is below the *benefit* limits in the *list of benefits*.

**治疗**应被视为从第一次就诊当日开始起算。

*Treatment* is deemed to begin on the date of initial consultation.

若**病人**是一位18周岁以下的未成年人,且其需要住院**治疗**的,在任一**保险期间**内,**本公**司将对该未成年人的父母或法定监护人在医院进行陪护30天以内所发生的陪同住院费用进行赔偿。该特定**保险责任**将在该未成年人年满18周岁生日当天终止。**本公司**赔偿以上费用需同



#### 时满足:

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 *insurance period*. 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;
- (1) 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**附加合同的保险责任**范围;及
- (2) the treatment a child receives is covered by the Additional Contract; and
- (3) 在医院的住宿费用是合理的。
- (3) the cost of *hospital* accommodation is reasonable.

如某一程序或服务不在**保险责任清单**所列范围内,在接到索赔通知后,**本公司**将决定是 否将该程序或服务作为**保险责任**范围内事项处理,并决定其是否属于应承担的**保险责任**,以 及其所属的**保险责任**等级。如在接受**治疗**之前需要核实**保险责任**范围,**本公司**将根据**病人**要 求进行解释。

If a procedure or service is not shown in the *list of benefits*, the *company* will, after receiving notice of the claim, decide if the procedure or service is to be treated as being covered, the *benefit* payable, and the class into which it will fall. If clarification of cover is needed before *treatment*, the *company* will be able to advise the *patient* on request.

发生**牙科损伤**而需要进行紧急牙科**治疗**的,如本**附加合同**没有另外承保的,**本公司**将就该牙科程序或服务所发生的费用在**保险责任清单**所约定的限额内进行赔偿。而且,**本公司**仅在**保险责任清单**所约定的限额内就该**牙科损伤**的**治疗**费用负责赔偿。

If emergency dental *treatment* is needed because of *dental injury*, the *company* will refund costs up to the limit shown in the *list of benefits* incurred for dental procedures and services not otherwise covered under this *Additional Contract*. However, the *company* will only be responsible for costs relating to *treatment* of a *dental injury*, up to the limit shown in the *list of benefits*.

#### 所有**保险责任**应受限于以下任一规定:

In all cases refund of costs is also subject to:

- (1) **保险责任清单**所列的就某一特定程序或服务每次可支付赔偿的限额;
- (1) any limits shown in the *list of benefits* as to the number of time benefit is payable for a

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particular procedure or service;

- (2) **保险责任清单**所列的最高赔偿限额;
- (2) any maximum benefit limits stated in the *list of benefits*;
- (3) 保险条款所列的责任免除。
- (3) the exclusions set out in these policy terms;

如未满18周岁的**附带被保险人**需进行牙齿整形**治疗**,**主被保险人或附带被保险人**须在**治疗**之前向**本公司**提供主治**牙医**准备的全部以下信息以便**本公司**决定赔偿额度(只有在**治疗**开始之前由**本公司**确认属于**保险责任**的才会得到赔偿):

If any form of orthodontic *treatment* is needed, for children who are *additional insured persons* under the age of 18, the *main insured person* or *additional insured person* must send the following information prepared by the *dentist* who is to carry out the proposed *treatment* to the *company* before *treatment* starts, so that the *company* can confirm how much *benefit* will be payable (*benefit* will be payable only if the *company* has confirmed cover before *treatment* starts):

- (1) 拟进行治疗的说明;
- (1) a full description of the proposed *treatment*;
- (2) X射线和研究模型
- (2) X-rays and study models;
- (3) 预计所需**治疗**费用。
- (3) an estimate of the cost of the *treatment*.
- 二、 紧急运送。当**医疗援助服务提供机构**指定的一名**牙医**,在与当地的会诊**牙医**沟通之后,依据其专业判断认为存在引起**牙科损伤**的**紧急牙科情况**,且**治疗**无法在当地获得,需要被运送到其他地区的**医院**或牙科手术室进行**治疗**的,**医疗援助服务提供机构**将在适当的医疗监督下安排护送**病人**运送到最近的可以提供必要**治疗**的**医院**或牙科手术室。
- 2. Emergency evacuation When a *dentist* named by the *medical assistance provider*, after speaking with a local attending *dentist*, decides in his professional opinion that there is a dental emergency involving serious dental injury and that the patient needs to be moved to a hospital or dental surgery located in different area for treatment, which is not available at local, the medical assistance provider will arrange for the transport of the patient to the nearest hospital or dental surgery offering the necessary treatment, under proper medical supervision.

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**本公司**同时将*对任何因医疗需要必须陪同病人的人员从紧急运送出发地至紧急运送目的 地的合理交通费进行赔偿,但最高不超过<i>经济级的标准,陪同*人员仅限一名。

*Benefit* will also be payable for the reasonable cost (economy class) of travel from the start of the emergency evacuation to the destination of the emergency evacuation for any individual who, because of medical necessity, has to accompany with the *patient*. The number of accompanying person shall be limited to one.

另外,在接受适当的**治疗**之后,**本公司**将对**病人**以及因医疗需要陪同**病人**的人员从紧急运送目的地返回紧急运送出发地的合理交通费进行赔偿,但最高不超过经济级的标准,陪同人员仅限一名。

In addition, *benefit* will be payable for the return journey from destination of emergency evacuation to where it starts (economy class) for the *patient* and the person accompanying the *patient* after receipt of appropriate *treatment*. The number of accompanying person shall be limited to one.

#### 第四条 责任免除

**Clause 4 Exclusions** 

#### 对于以下治疗及其他额外事项本公司不负责赔偿:

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

## 一、不属于**保险责任**范围的治疗**,**包括:

- 1. Benefit is not payable for treatment which
  - 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;
  - is directly or indirectly caused or contributed to whist 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 or any lawfully constituted authority, or while the *insured persons* are carrying out army, naval or air services operations, whether or not war has been declared;
  - 纯粹的**美容**治疗;
  - is purely cosmetic;



- 非为维护**口腔健康**而必须的;
- is not necessary for continued *oral health*;
- 因**病人**从事任何非法行为所致。
- is in any way caused by the patient carrying out an illegal act.

#### 二、不属于赔偿范围的费用,包括:

- 2. Benefit is not payable for refunding costs which
  - ▶ 为完成索赔表所发生的费用或其他行政收费;
  - are fees for filling in a claim form or other administration charge;
  - 已由其他保险公司、其他人、组织或公共方案支付的费用。如被保险人同时还向其他保险公司投保的,本公司将只承担属于其应承担的保险责任的剩余部分。
  - have been or can be paid by another insurance *company*, person, organisation or public programme. If the *insured persons* are covered by other insurance, the *company* will only pay its part of the benefit.

### 三、不属于**保险责任**范围的程序、服务或事项包括:

- 3. Benefit is not payable for the following procedures, services or items
  - 更新任何丢失或被盗的牙科用具;
  - replacing any dental appliance which is lost or stolen;
  - 根据具有一般能力与技术的牙医可接受的标准,在齿桥、牙冠或假牙尚可用或在其可用的情况下对其进行更换;
  - replacing a bridge, crown or denture which is or can be made useable according to a standard acceptable to a dentist of ordinary competence;
  - 对于齿桥、牙冠或假牙安装使用不满五年而更换的,除非:
  - replacing a bridge, crown or denture within five years of original fitting unless:
    - (1) 因安装对颌假牙或摘除自有牙齿而导致需要更换的;或
    - (1) the replacement is needed because of the placement of an original opposing full denture or extraction of natural teeth is needed; or



- (2) <u>在本**附加合同**有效期间,**被保险人**因遭受损伤而导致其口腔中的齿桥、牙冠或</u>假牙被损坏而无法修复的。
- (2) the bridge, crown or denture, while in the mouth, has been damaged beyond repair because of an injury the *insured person* receives while covered under the *Additional Contract*.
- <u>更换上下颌第一、第二和第三颗磨牙以及第一、第二颗前磨牙的瓷贴面或丙烯酸酯贴</u> 面;
- porcelain or acrylic veneers on the upper and lower first, second and third molars and premolars;
- <u>上下颌第一、第二和第三颗磨牙的牙冠或桥体,或更换上、下颌第一,第二和第三颗磨</u> 牙,除非:
- crowns or pontics on or replacing the upper and lower first, second and third molars unless:
  - (1) 该牙齿是由烤瓷镶嵌金属或纯金属制成,例如:黄金合金牙冠;或
  - (1) they are constructed of either porcelain bonded-to-metal or metal alone, e.g. gold alloy crown; or
    - (2) 因常规或紧急牙科治疗需要而要求安装临时牙冠或桥体的。
  - (2) <u>a temporary crown or pontic is required as part of routine or emergency dental</u> treatment
- 通过任何形式的外科手术进行植入牙科装置的,包括安装任何假体器官;
- surgical implants of any type including any attaching prosthetic device;
- 任何实验性的或不符合可接受牙科标准的程序或材料;
- <u>procedures and materials which are experimental or which do not meet accepted dental</u> standards;
- 有关菌斑控制、口腔卫生和饮食习惯的教育;
- instruction for plaque control, oral hygiene and diet;
- 本公司认为不属于牙科治疗范围的程序、服务及产品,包括口腔清洗以及医院提供的不属于牙科治疗范围的服务及产品(住院原因或部分原因是为了进行牙科治疗的除外);

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- procedures, services and supplies which are deemed by the company to be medical procedures, services and supplies including mouthwashes and also including services and supplies provided in a hospital (except where dental treatment is neither wholly nor partly the reason for the stay in hospital);
- **主被保险人**或年满18周岁的**附带被保险人**接受牙齿整形**治疗**,但**保单**另有约定的除 外。
- orthodontic treatment for main *insured persons* or *additional insured persons* who are over the age of 18, unless otherwise provided in the *policy*.
- 咬合记录、精确度及半精确度装置;
- bite registration, precision or semi-precision attachments;
- 主要用于以下目的的程序、器具或修复(使用全套假牙的除外):
- procedures, appliances or restorations (except full dentures) whose main purpose is to:
  - (1) 改变(上下颌骨之间)垂直距离;
  - (1) change vertical dimensions; or
  - (2) 诊断颞下颌关节状况,或治疗颞下颌关节紊乱;
  - (2) diagnose or treat conditions or dysfunction of the temporomandibular joint; or
  - (3) 稳固牙周所及牙齿;或
  - (3) stabilise periodontally involved teeth; or
  - (4) 修复牙齿咬合问题。
  - (4) restore occlusion.

#### 第五条 保险金额和保险费

**Clause 5 Amount Insured and Insurance Premium** 

- 一、本**附加合同**的保险金额由**投保人**和**本公司**约定,并在**保险责任清单**上载明。
- 1. The *policyholder* shall consult with the *company* and decide the amount insured, and clearly indicate the choice in the *list of benefits*.



- 二、本**附加合同**的交费方式由**投保人与本公司**在本**附加合同保单**中载明。**投保人**应按照约定,定期缴纳约定交费方式下的当期保险费。
- 2 . The premium shall be paid in accordance with the method and frequency of payment set forth in the Schedule of this *Additional Contract*, as mutually agreed by *policyholder* and the *company*. The *policyholder* shall pay the premium in accordance with the amount of each payment.

#### 第六条 未交纳保险费的处理

**Clause 6 Failure of Premium Payment** 

无论**投保人与本公司**约定的保险费交费方式是一次性交费还是分期交费,**投保人**未能在本**附加合同生效日期**前足额支付全部保险费或首期保险费的,或**投保人**足额支付首期保险费后,在**保险费到期日**未足额支付本**附加合同**规定的续期保险费的,自**保险费到期日**的 24 时起 60 日为宽限期。宽限期内发生的保险事故,**本公司**仍会承担**保险责任**,但在给付保险金时会 扣减欠交的各期保险费。如果**投保人**宽限期结束时仍未足额交付保险费,则本**附加合同**自宽 限期满日的 24 时起终止效力。

Regardless of the method and frequency of payment being a lump sum payment or instalment payment, if the *policyholder* fails to pay the agreed one lump sum premium or the initial premium in full before the *effective date* of this *Additional Contract* or if the *policyholder* fails to pay any later instalment of premium at the *due date* provided by this *Additional Contract* after the initial premium is duly paid, a grace period of 60 days commencing from the date immediately after the *due date* shall apply. For insurance accident occurs within the grace period, the *company* shall still undertake insurance liability but shall be entitled to make deduction equivalent to the unpaid premium before paying insurance benefit. If the *policyholder* fails to pay the outstanding premium in full within the grace period, this *Additional Contract* shall be terminated as of the date immediately after expiry of grace period.

#### 第七条 保险责任开始与保险期间

Clause 7 Commencement of the Insurance Liability and Insurance Period

**投保人**如投保本**附加合同**,应与主合同同时投保,主合同**保险责任**开始条款适用于本**附加合同**。本**附加合同保险期间**为一年,起止日期与主合同一致。

This *Additional Contract* shall be applied with the Principal Contract at the same time, and the Principal Contract's clause of the commencement of the insurance liability also applies to the *Additional Contract*. The *insurance period* of the *Additional Contract* shall be one year with the same commencement and termination date of the Principal Contract.

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#### 第八条 保险责任终止

**Clause 8 Termination of the Insurance Liability** 

本**附加合同**的终止条件与主合同相同。另外,下列情况之一发生时,本**附加合同**效力终止:

The termination provision of the Principal Contract also applies to the *Additional Contract*. In addition, the *Additional Contract* will also terminate in the following circumstances:

- 一、 主合同保险期满、解除或终止。
- 1. The Principal Contract expires, or is cancelled or is terminated.
- 二、 投保人解除本附加合同。
- 2. The *policyholder* applies to terminate the *Additional Contract*.

本**附加合同**效力终止时,如本**附加合同保险期间**内未发生保险金给付,**本公司**扣除**手续** 费后退还未满期保险费;如本**附加合同保险期间**内发生过保险金给付,**本公司**不退还保险 费。

In the event that no insurance benefit is paid in the *insurance period* when the *Additional Contract* is terminated, the *company* shall refund the unearned insurance premium with the service fees deducted; however, if the *company* has paid any insurance benefit to any *insured person* in the *insurance period* when the *Additional Contract* is terminated, the *company* will not refund the insurance premium.

#### 第九条 释义

#### **Clause 9 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**附加合同**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 *Additional Contract* and related documents. 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

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**附加合同**指招商信诺精英版附加全球员工牙科团体医疗保险。

<u>Additional Contract</u> - the CIGNA & CMC Additional Global Group Dental Insurance (Elite) Contract.

**保险费到期日**指**投保人**应为本**附加合同**支付保险费的日期。本**附加合同**的生效日期为第一个**保险费到期日**。对于分期交费方式,如果在任何的月份,没有和生效日期相对应的那一天,那么该月份的最后一日为**保险费到期日**。

<u>Due Date</u> - the date for *policyholder* to pay premium under this *Additional Contract*. The *effective date* of this *Additional Contract* shall be the first *due date* of premium. For premium payment by instalments, if there's no such a date exactly the same with *effective date* in the month that an instalment of premium is due, the last date of this month shall be the *due date*.

#### **续签日指保险期间**届满后的第二天或**本公司与投保人**书面同意的其它日期。

<u>Renewal date</u> - the date immediately after expiry date of *insurance period* or any other date which the *company* and the *policyholder* agree in writing.

#### 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.

本公司指招商信诺人寿保险有限公司。

Company - Cigna& CMC Life Insurance Co.Ltd.

**美容**指仅为美观而非为维护口**腔健康**并使之达到可接受的标准进行的程序或事项。

<u>Cosmetic</u> - services, procedures or items that are supplied only for aesthetic purposes and which are not needed in order to maintain an acceptable standard of *oral health*.

**紧急牙科情况**指在通常就诊的**牙医**营业时间之外或处在远离通常就诊的**牙医**诊所所在地时,**被保险人**所遭受的止痛药不能缓解的剧烈疼痛,或脸部肿胀,或因摘除牙齿导致的无法控制的流血。该情况下进行的**治疗**仅为稳定以上症状及缓解剧烈疼痛。

<u>Dental emergency</u> - where severe pain that is not relieved by painkillers, or facial swelling or uncontrollable bleeding after an extraction, is being suffered and it is either outside the business hours of the *insured person*'s usual *dentist* or the *insured person* is staying at a place which is away from the dental practice they usually visit. The *treatment* covered in such an instance is to purely stabilise the problem and relieve severe pain.



**牙科损伤**指由于**被保险人**遭到口腔外部撞击,对其牙齿和牙齿支撑结构造成的损伤(包括对所戴假牙造成的损害)。

<u>Dental injury</u> - injury to the *insured person*'s dentition and supporting structures (including damage to dentures while being worn) caused by extra-oral impact.

**牙医**指依据**治疗**提供地的国家、州或其他监管地区的法律注册或被许可的**牙医**、牙科外科医生或牙科医疗从业者。

<u>**Dentist**</u> - a dentist, dental surgeon or dental practitioner who is registered or licensed as such under the laws of the country, state or other regulated area in which the *treatment* is provided.

**主被保险人**指符合主合同约定的投保条件并由**本公司**承保的**投保人**或**投保人**下属分支机构的全职**员工**。

<u>Main Insured Person</u> - full time employee of the *policyholder* or its subordinate branches complied with the eligibility conditions provided in the Principal Contract and covered under the Principal Contract.

**附带被保险人**指符合主合同约定的投保条件并由**本公司**承保的**主被保险人**的家属。

<u>Additional Insured Person</u> - main insured person's dependant complied with the eligibility conditions provided in the Principal Contract and covered under the Principal Contract.

#### 被保险人指主被保险人及附带被保险人统称被保险人。

<u>Insured Person</u> - the main insured person and additional insured person collectively referred to as insured person.

#### **家属**指:

#### Dependant

● **主被保险人**的未婚子女,投保时年龄不满25周岁,且仍在接受全日制教育或与**主被保险人** 居住在同一住所;或

Main insured person's unmarried children under the age of 25, either in full-time education or residing at the same residence with main insured person when being enrolled as an additional insured person.

■ 主被保险人80周岁以下的配偶。

Main insured person's spouse under the age of 80.



## **配偶**指**主被保险人**的法定丈夫或妻子,或**本公司**在本计划下接受承保的**主被保险人**的未婚或 事实伴侣。

Spouse - the *main insured person*'s legal husband or wife, or unmarried or civil partner the *company* has accepted for cover under the Principal Contract.

#### **生效日期**指**本公司**开始承担**保险责任**的日期,在**保单**中列明。

**Effective date** - the date that the *company*'s *insurance liability* starts, as shown in the *policy*.

**病情全面评估**指为确定牙齿当前状况而进行的全面检查。

<u>Full case assessment</u> - extensive examination in order to establish current state of teeth.

<u>医院</u>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。

<u>Hospital</u> - 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.

**保险责任清单**指**保单**中列明的本附加保险的具体**保险责任**项目、**保险责任**限额等,包括相关 注释说明。

<u>List of benefits</u> - the specific insurance benefits, payment limit for insurance benefit, etc. listed in the *policy*, including any notes to it.

口腔健康指对于病人来说,根据中华人民共和国具有一般能力与技术的**牙医**接受的标准,其牙齿、牙齿支撑结构、口腔其他组织以及牙齿能力需达到口腔健康的合理标准。

<u>Oral health</u> - for a *patient*, a reasonable standard of *oral health* of the teeth, their supporting structures and other tissues of the mouth, and of dental efficiency, according to a standard acceptable to a *dentist* of ordinary competence and skill in the *PRC* which will safeguard his general health.

**传统的**指牙科程序或**治疗**,该程序或**治疗**在开始时应在牙科方面被**中华人民共和国**所接受, 且得到牙科特定领域内大量受人尊敬的、负责任的且经验丰富的**牙医**的赞成。

<u>Orthodox</u> - in relation to a procedure or *treatment* that is dentally accepted in the *PRC* 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 dental opinion, experienced in the particular field of dentistry.

#### **病人**指接受**治疗**的**被保险人**。

**Patient** - the *insured person* who undergoes *treatment*.

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#### **治疗**指符合以下全部条件的牙科程序或服务:

<u>Treatment</u> - any dental procedure or service which

- 为维持口腔健康所必须的;
- is needed for continued *oral health*, and;
- 由牙医进行或亲自控制的程序或服务,包括牙科清洁专家所提供的程序;
- is carried out or personally controlled by a *dentist*, including procedures provided by a hygienist, and:
- 包含在保险责任清单内,或虽没有被列入保险责任清单,但本公司认为该程序或服务符合 牙科特定领域内大量受人尊敬的、负责任的且经验丰富的牙医所认可的一般标准而接受 的。
- is included in the *list of benefits* or, though not included in the *list of benefits*, is accepted by the *company* as a procedure or service meeting common dental standards as upheld by a respectable, responsible and substantial body of dental opinion, experienced in the particular field of dentistry.

#### **保险期间**指自**生效日期**或**续签日**起算至约定的有效期届满日二十四时止。

<u>Insurance Period</u> – starts from the *effective date* or *Renewal Date* and ends by the 24th o' clock of the expiry date agreed in the *policy*..

**手续费:**指本**附加合同**的服务和管理成本,该成本占总保险费的 25%。

<u>Service fee</u> - the cost of servicing and operating for the *Additional Contract*, which hold 25% of total premium.