



招商信诺智享睿健高端个人医疗保险条款阅读指引
The Reading Guide to Cigna & CMB Mass Golden Medical Insurance Provision

本阅读指引帮助您理解条款，保险合同的内容以条款为准。

This guide intends to help you better understand the following policy provision, the policy provision should always be valid and binding.

✓ 您所拥有的重要权益

Highlight of Your Rights

1. 如果您方自签收本合同之日起 10 天内要求解除本合同，我方将向投保人无息退还已交付的保险费，**本合同解除。对合同解除前发生的保险事故，我方不承担保险责任；**签收本合同之日起 10 天后，您仍然有解除合同的权利，**但可能会存在退保损失。**

When you want to cancel this policy within 10 days since you receive and sign off this policy, we will refund the paid premium, **this policy will be invalid from all the beginning. We won't be responsible for all claims related to this policy.** After 10 days, you could terminate this policy, **the refund will be less than the paid premium.**

2. 被保险人可以享受本合同提供的保障。

Beneficiaries are covered by the benefits on the policy.

✓ 您应特别注意的事项

Matters for attention

1. 请您留意保险责任条款中的各保障利益内容，并根据您方的需求购买。
Please make sure you know all benefits, and decide your insurance coverage accordingly.
2. 请您留意保险金的给付条件和范围，以及预先授权、赔付比例、赔付限额等。
Please pay attention to the provisions about the coverage and conditions of cover, prior approvals, coinsurance and limits.
3. 请您留意各项责任的责任免除，尤其是已加下划线的免除或限制我方责任的条款。
Please pay attention to the provisions about exclusions, especially those having been underlined or the provisions of limiting our liabilities.
4. 请您留意合同中关于保险期间、等待期、应追讨款项及合同效力终止的条款。
Please pay attention to the provisions about period of cover, waiting period, claw back claims and policy termination.
5. 请您留意续保的条件，如果您方不愿意续保，请在保单周年日前通知我方。
Please pay attention to the renewal conditions. If you decide not to renew, please inform us prior to your policy anniversary.
6. 请您留意保险条款中术语的释义条款。
Please pay attention to the clause of Definitions.

✓ 条款目录

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Cigna & CMB Mass Golden Medical Insurance Provision

第一章 关于本保险合同的说明

Section 1. General Terms of This Policy

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|--|---|
| <p>1. 保险双方协议
Insurance agreement</p> | <p>根据载明于本保险合同（下称“本合同”）的规定，我方（见释义）将支付被保险人因遭受伤害、疾病等合同所及事项而产生的治疗费用及相关费用支出。</p> <p>Subject to the conditions set out in this policy, We shall reimburse medical and related expenses relating to treatment provided within the selected area of coverage for injury, sickness, and medical conditions covered under this policy.</p> |
| <p>2. 保险合同构成
Policy constitution</p> | <p>本合同包括以下部分：保险单（见释义）或其他保险凭证及所附条款、您方（见释义）的投保文件（见释义）、合法有效的声明、批注、附贴批单及其他协议。</p> <p>This policy consists of your certificate of insurance and this provision, your application, your lawful and valid statement, annotations, commentaries and other agreements.</p> <p>您方须告知我方在您方发出申请至保单生效前，您方所发生的任何健康与医疗情况的变化。我方将重新审核您方的投保申请。</p> <p>You should notify us immediately of any change in your medical condition which occurs between your application and your acceptance of the policy. We will then review your application again.</p> |
| <p>3. 保险责任生效
When does the cover begin</p> | <p>保险责任将于保险单首页所载生效时间起生效，该保险单将发送给您方，合同生效日以后每年的对应日是保单周年日。如果当月无对应的同一日，则以该月最后一日作为对应日。</p> <p>The cover will begin on the start time shown on the first certificate of insurance which we send to you. The anniversary dates will fall on this time each year. If the start date is February 29th and there is no February 29th in one following year, the anniversary of that year will be February 28th.</p> <p>如您方选择为其他被保险人购买本保险责任，该被保险人保障的生效日期为其所在保险单首页载明的时间，该保险单将发送给您方。</p> <p>If you choose to buy cover for any additional beneficiaries, their cover will begin on the start time shown on the first certificate of insurance on which they are listed, which we send to you.</p> |

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| <p>4. 投保年龄与年龄误告的处理
Eligible Ages and Mis-disclosure of Age</p> | <p>本合同接受的被保险人的投保年龄为出生满 30 天至 65 周岁（见释义），并可续保至 75 周岁。</p> <p>One beneficiary's eligible age at his initial start time is elder than 30 days of birth and no more than 65 years old, and renewable to 75 years old.</p> <p>对被保险人的投保年龄，以有效身份证件登记的周岁年龄为准。您方在申请投保时，应按照与有效身份证件相符的被保险人的出生日期填写，</p> |
|--|---|

如果发生错误按照下列方式办理:

The birth date of beneficiary(ies) on your application should be based upon effective identity card.

- 4.1** 如您方申报的被保险人年龄不真实, 并且其真实年龄不符合本合同约定投保年龄限制的, 我们有权解除合同, 并向您方退还**未到期净保费** (见释义)。我方的保险合同解除权自我方知道有解除事由之日起超过 30 日不行使而消灭。

If you provide us with an incorrect date of birth and the real age does not comply with the eligibility requirements of this policy, we have the right to cancel this policy. In this situation, we shall refund the unearned net premium. The right to cancel the policy will be rescinded after 30 days starting from the day we notice this error.

- 4.2** 如您方申报的被保险人年龄不真实, 致使实付保险费少于应付保险费的, 我们有权更正并要求您方补缴保险费。若已经发生保险事故, 我方有权在给付保险金时按实付保险费和应付保险费的比例给付。

If you provide an incorrect date of birth, which directly leads to a lower premium than it should, we have the right to make the correction and charge the additional payment for premium difference. In such cases, we will pay benefits on a proportional basis (according to the difference between the true and incorrect premium) for any insurance event prior to the date of correction.

- 4.3** 如您方申报的被保险人年龄不真实, 致使实付保险费多于应付保险费的, 我方会将多收的保险费退还给您。

If you provide an incorrect date of birth, which directly leads to higher premium than it should be, we will refund the difference without interest.

**5. 常驻地
Habitual
Residence**

所有被保险人的**常驻地** (见释义) 应为中国大陆境内 (不含香港、澳门、台湾)。

This policy only covers the ones whose habitual residence is Mainland China (excluding Hong Kong, Macao and Taiwan).

**6. 被保险人
Who is Covered**

您可为满足本保险合同投保条件的人员进行投保, 并添加于投保申请中。经我方审核同意后, 该被保险人姓名将载于保险单上, 您方将承担相应的保险费。

You may arrange cover for all people according to this policy's application eligibilities. In order to so, you must include them in your application. If we agree to cover them, we will include their names on your certificate of insurance, and premium may be payable accordingly.

如您方仅作为投保人为他人投保, 经我方审核同意后, 将承担交纳本合同保险费及其他所有本合同规定的责任。

Subject to our approval, you, as the policyholder, could take out cover for other people without yourself. In this situation, you will be responsible for premium payment and all other obligations under the policy.

所有的申请须经医疗核保，我方将向您方告知我方对保险凭证上列明的被保险人的承保条件。

All applications will be subject to medical underwriting and we will let the policyholder know the terms that will apply to any beneficiary named on the certificate of insurance.

**7. 增减被保险人
Add or Remove
Beneficiaries**

经我方审核同意，您方可在保险期间内或续保时增加被保险人。

Subject to our approval, you may add a beneficiary either at renewals of this policy or at part way through the period of cover.

您方可在续保时减少下一保险期间的被保险人。

You may remove a beneficiary at renewals of this policy.

如果发生丧失可保性的重大事件（见释义），您可在保险期间中途减少受该事件影响的被保险人。

If there has been a disqualifying event, you may remove the person involved in that disqualifying event as a beneficiary part way through the period of cover.

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**8. 保障计划及方案
Plans and
Packages**

您方有三个不同档次的计划可以选择。

You may choose 3 different level plans.

每个计划下，您可选择不同的保障责任组合。基本保险责任是：住院、住院预约服务和健康管理服务；可选保险责任一是：父母陪同住院费用；可选保险责任二是：门诊、门诊就诊协助和电话医生咨询服务；可选保险责任三是：全球紧急援助服务和境外意外医疗；可选保险责任四是：戒烟疗程服务。具体责任详见本合同附件“保险利益表”。

Under your chosen plan, you may choose different packages of benefits.

The core benefit includes inpatient, inpatient booking service and healthcare service. Optional benefit A is parent accompanying. Optional benefit B includes outpatient, outpatient booking services and phone medical consultancy service. Optional benefit C includes global emergency assistance and abroad accidental medical coverage. Optional benefit D is smoking abstinence program. Full contents are attached in the appendix of “list of benefits”.

保险期间内不能变更已选定的可选保障。如果您方希望增加或减少可选保险责任，请于保单周年日前及时通知我方。若您方增加新的可选保险责任，请向我方提交一份详细的健康问卷，我方可能对您方新增的保险责任适用新的特殊规定或除外责任。

Chosen plan and package could not be changed at part way through the period of cover. If you want to increase or decrease covered benefits, you should notice us before renewals of this policy. If you want to increase the covered benefits, you need to provide a completed medical history questionnaire, and we may apply new special restrictions or exclusions on the new coverage options.

如果本合同的被保险人人数超过一人，同一保单下所有被保险人所选择

的计划和保障方案应该保持一致。我方将根据该被保险人投保后该保单将有的被保险人人数适用家庭费率调整因子。

If immediately after one beneficiary's entry there will be more than one beneficiary under this policy, the plans and packages of all beneficiaries under this policy should be the same. We will apply the family premium discount factor according to the number of covered beneficiaries immediately after this beneficiary's entry.

**9. 保障区域
Area of Cover**

除可选保险责任三另有规定外，本产品的保障区域是**中国大陆**（见释义）。

Unless provided otherwise in optional benefit C, this product's area of cover is Mainland China.

**10. 等待期
Waiting Period**

住院（见释义）的等待期是 15 天，意外伤害和续保无等待期；
Inpatient's waiting period is 15 days, and there is no waiting period for accidental events and after renewals;

门诊（见释义）的等待期是 15 天，意外伤害和续保无等待期；
Outpatient's waiting period is 15 days, and there is no waiting period for accidental events and after renewals;

对被保险人在等待期内发生的疾病或症状，我们不承担给付保险金的责任，无论实际治疗日期是否在等待期内。

We will not pay for any claims relating to diseases or conditions incurred in waiting period, no matter whether the treatment dates are in waiting periods or after waiting period.

**11. 医疗服务网络
Clinical Network**

11.1 医疗服务（不包括体检）的服务网络包括：
Medical provider network (excluding check-up) includes:

11.1.1 中国大陆境内的二级及二级以上公立医院及其门诊部。

对住院，合格的医疗机构不包括门诊部；

Tier two and above public hospitals and their clinical departments. For inpatients, the clinical departments are not eligible;

11.1.2 满足下面所有条件的中国大陆境内的非公立医院或诊所：

Non-public hospitals in Mainland China, if all of the following conditions are satisfied:

- (a) 拥有所在国家的合法经营执照；
they have lawful and valid licenses of local country;
- (b) 设立的主要目的为向伤病者提供留院治疗和护理服务；
they aim to serve hospitalizations and nursing for patients;
- (c) 在所在国合法注册的**医生**（见释义）和**护士**（见释义）常驻执业。
they have regularly serving doctors and nurses, who

are qualified by local country;

- (d) 对住院责任，合格的医疗机构还应该提供全年无休的、每日 24 小时的病房医疗和护理服务。

they, as eligible inpatient service providers, should provide available ward and nursing service, 24 hours a day, 7 days a week, 365 days a year

11.2 但是，所有服务的服务网络均不包括：

However, all hospitals should exclude:

- 11.2.1 护理机构、矿泉疗养院、水疗所、疗养所、康复机构、戒酒机构、酒精或者药物滥用看护机构、戒毒机构、疗养院或者养老院等其他类似目的的机构。

nature cure facilities, mineral spring sanatoria, spring spas, sanatoria, health spas, dry-out institutes, alcohol or drug abuse detentions, drug rehabilitation centres, recuperation facilities, gerocomium or other facilities of these purposes.

- 11.2.2 接受治疗的被保险人或者其家庭拥有全部或者部分所有权的医疗机构。

the hospitals or facilities that are fully or partly owned by the beneficiary or one member of his/her family.

11.3 根据分析，我们认为有部分私立医院的收费标准明显高于其它同业，我们单独列出这些医院作为特定医院清单（见释义），根据计划选择，该类医院可能包含或不包含在保障计划内。

according to our analysis, we believe that part of private hospitals are charging significantly higher than other providers, we list them separately as special provider list. These hospitals could be included or excluded in the coverage, depending on your selected plan.

**12. 医疗费用项目
Covered Medical
Costs**

本产品保障范围覆盖的医疗费用不受**社保目录**（见释义）中规定的限制。
The medical costs covered by this policy are not subject to the coverage limitation of social health insurance.

但是覆盖的各项医疗费用应该符合下面的“**保险责任**”条款及释义中的定义，并且不包括“**本合同的责任免除**”条款及保险单的特别约定中所免除的项目。

Instead, the medical costs covered by this policy should satisfy the following benefits and definitions clauses, and exclude any items that are defined in following exclusions clause or any special restrictions or exclusions granted to that beneficiary.

**13. 受保障医疗费用的审核
Verification of
Covered Costs**

对所发生的医疗费用，由我方负责审核是否符合以下赔付条件：1) 发生时间在本合同生效后，且在本合同效力终止前；2) 在计划的保障区域内；3) 服务的医生和护士满足本条款释义；4) 就诊的医疗机构符合前面的“**医疗服务网络**”条款；5) 符合“**预先授权**”条款的要求；6) 属于**医疗必须**（见释义）；7) 费用水平符合当地**通常医疗惯例**（见释义）。

We will hold the rights to examine the medical costs about below issues: 1) whether the incur date is after the effectiveness and before the expiry or termination; 2) whether the costs are incurred within the area of cover; 3) whether the serving doctors and nurses satisfy correspondent definitions of this policy; 4) whether the serving facility satisfies correspondent definition of this policy; 5) whether the prior approvals clause is satisfied; 6) whether the medical necessity is satisfied; 7) whether the medical price satisfy local customary medical norms.

通过前述审核后，按照“保险责任”条款的界定将医疗费用区分为住院、门诊、境外意外医疗等，并按照下列条款审核相应金额。

Passing aforementioned examinations, we will classify medical costs into inpatient, outpatient, accident medical costs outside Mainland China and other services according to the benefits clause, and further verify each benefits' coverable claims.

- 13.1** 对住院费用，经审核 1)不属于“本合同的责任免除”所列范围或该被保险人的特别约定免除的项目；2)属于“保险责任”条款的“住院”所列范围，并且不超过各明细项目的每天限额、每年所限天数；3) 不在住院的等待期之内。

For inpatient costs, checking: 1) the costs are not defined in “exclusions of this policy” clause or any special restrictions or exclusions to that beneficiary; 2) the costs are included in “inpatient benefit” of benefits clause, and subject to each sub-benefits' daily limits and days-per-year limits; 3) the costs incurred beyond inpatient's waiting period.

- 13.2** 对门诊费用，经审核 1) 保障计划中包含门诊责任；2)不属于“本合同的责任免除”所列范围或该被保险人的特别约定免除的项目；3) 属于“保险责任”条款的“门诊”所列范围，并且不超过各明细项目的每年的次数限制或天数限制、每次限额、每天限额；4) 不在门诊的等待期之内。

For outpatient costs, checking: 1) the outpatient benefit is included in this policy; 2) the costs are not defined in “exclusions of this policy” clause or any special restrictions or exclusions to that beneficiary; 3) the costs are included in “outpatient benefit” of benefits clause, and subject to each sub-benefits' daily limits, limit per visit and days/visits-per-year limits; 4) the costs incurred beyond outpatient's waiting period.

- 13.3** 对境外意外医疗费用，经审核 1) 保障计划中包含境外意外医疗责任；2) 不属于“本合同的责任免除”所列范围或该被保险人的特别约定免除的项目。

For abroad accidental medical costs, checking: 1) the abroad accidental medical coverage benefit is included in this policy; 2) the costs are not defined in “exclusions of this policy” clause or any special restrictions or exclusions to that beneficiary.

14. 赔付比例

本产品的赔付比例为 100%。

<p>Coinsurance</p> <p>15. 赔付限额 Limits</p>	<p>This product's coinsurance is 100%.</p> <p><u>保障计划中对住院、门诊和境外意外医疗分别设定每年赔付限额。另外对住院、门诊中一些分项费用还可能设有该项费用的每年分项赔付限额。</u></p> <p><u>There are limits for inpatient benefit, outpatient benefit and abroad accidental medical benefit in this policy's selected plan. Besides, there could be some sub-limits for inpatient benefit and outpatient benefit.</u></p> <p><u>对依照 13.条进行审核后的各项责任的赔付金额，根据下列两项计算各项责任的最终应赔付金额：1) 所选计划对应的住院、门诊、境外意外医疗各项责任的实际每年总赔付不超过计划中规定的各项的每年赔付限额；2) 住院、门诊中一些分项费用的实际每年总赔付不超过计划中规定的各分项的每年分项赔付限额。</u></p> <p><u>After the payable amounts calculation in clause 13, we will calculate the final payable claims according to below two rules: 1) the annual paid amounts of inpatient, outpatient, and abroad accidental medical benefits should not exceed correspondent annual limits; 2) in inpatient and outpatient, some items' annual paid amounts should not exceed correspondent sub-limits.</u></p>
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第四章 保险责任
Section 4. Benefits

<p>16. 基本保险责任 Core Benefit</p>	<p>16.1 住院 Inpatient</p> <p>16.1.1 综合住院治疗费用，包括： Comprehensive inpatient costs, including:</p> <ul style="list-style-type: none"> (a) 病房费、膳食费（见释义）及护理费； hospitalization, hospital meals and nursing; (b) 重症监护（见释义）病房费用； Intensive care unit or centre costs; (c) 手术费用（见释义）； surgery costs; (d) 处方药（见释义）费； prescription costs; (e) 检查化验费（见释义）； laboratory and diagnostic costs; (f) 癌症治疗费用：不仅包括因癌症导致的住院费用，另外因癌症进行诊断、随诊、复查、化疗、放疗而进行的门诊费用也包含在本项中； cancer treatments, including: inpatient related to cancers, and outpatients of diagnosing cancers, cancer follow-ups, chemotherapies, radiotherapies and other outpatients directly related to cancer;
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- (g) 器官移植费用，是指经相关专科医生明确诊断，根据医学需要必须进行的肝脏移植、肾脏移植、心脏移植、肺脏移植、胰脏移植或骨髓移植的手术费、辅助治疗费、排异药品费、检验费等。

the transplantations, according to relevant specialist's clear verification, are medically necessary; including following organs: livers, kidneys, hearts, lungs, pancreases and marrows. Covered costs will include the surgical costs, accessory treatments, anti-rejection drugs and diagnostic costs.

但不包括器官供体寻找、获取以及从供体切除、储藏、运送器官的相关费用，也不包括支付给供方的费用。

however, following costs are excluded: searching and acquiring an organ, surgeon of picking the organ, cryopreservation, conveying, as well as any payments from recipients to donors.

- (h) 与住院直接相关的入院前一次门诊费用：a) 入院前为了明确诊断导致住院之疾病而发生的门诊；b) 或为住院治疗做准备而进行的门诊。

One outpatient visit that directly relates to the inpatient: a) the outpatient, prior to the inpatient, that aims to verify the diagnosis which lead to the inpatient; b) or the outpatient, that takes treatments preparing for the inpatient.

- (i) 与住院直接相关的救护车费用，包括：a) 从紧急状态发生地运送到医院；b) 转院。

The ambulance fee that directly relates to the inpatient, including: a) taking beneficiary from scene of an accident or injury to a hospital; b) from one hospital to another.

- (j) 其他住院杂项费：包括在医疗账单上列明的**治疗费**（见释义）和材料费、医生费、**物理治疗**（见释义）费、住院期间医疗机构拥有的医疗设备使用费用等。

other miscellaneous costs, including treatments, medical materials, medical practitioner consultations, physiotherapies, medical equipment usage fees, which should be listed in the discharge bills.

- 16.1.2 手术植入材料费用：指手术过程中由手术医生植入体内的、在医疗账单中单独记账的组织相容性人工材料的费用。手术结束后如不经再次外科手术，该材料无法去除或重置。包括：a) 塑形性植入器材：骨板/骨钉等组织固

定材料、钛网/支架等组织成型材料、义乳/骨蜡等组织缺损的充填材料等；b) 功能性植入材料：人工器官、脑起搏器、内置心脏起搏器等。

surgical implants, which are histocompatible, are implanted by surgeon into the beneficiary's body via surgical processes and listed in the discharge bills separately.

Besides, another surgical process is necessary to remove them. Covered surgical implants include: a) plastic implants, such as bone screws and plates, titanium meshes/brackets and other shaping materials, breast prostheses and bone wax and other filling materials; b) functional implants, such as artificial organs, brain pacemakers, internal heart pacemakers and etc.

- 16.1.3 耐用医疗设备费用：指由专科医生明确诊断并开具医嘱、需要被保险人购买并长期使用的下列医疗设备而产生的费用，包括：a) 外置胰岛素泵；b) 外置心脏起搏器；c) 外置性矫正器，包括义眼、义肢、非急救中使用的颈托夹板；d) 助听器。

durable medical equipments, clearly prescribed by the specialists because of the diagnoses of suitable indications, need to be purchased and persistently used for the beneficiary, including: a) external insulin pumps; b) external heart pacemakers; c) external prostheses, including ocular prostheses, artificial limbs, cervical gears and splints; d) hearing aids.

上面费用项目中，其他项目均从属于第 16.1.3 项所对应的住院，即：如果某次住院经审核不属于受保障的医疗费用（见 13.条）从而不在 16.1.3 项保障范围内，与该次住院有关的其他各项住院保障利益也不被给付。

In upper items, all other items are dependent on the inpatients covered by benefit 16.1.3. **If one inpatient is not covered by benefit 16.1.3 according to the verification process (per clause 13.), all other benefits related to this inpatient will not be paid.**

- 16.2 住院预约服务
inpatient booking service

- 16.2.1 住院协调；
inpatient admissions coordination.

- 16.3 健康管理服务
healthcare service

- 16.3.1 第二诊疗意见；
medical second opinion;

- 16.3.2 在线健康评估、远程健康管理。
online Health Education and health assessment.

- 17. 可选保险责任一 optional benefit A** **17.1** 父母陪同住院费用：指接受住院治疗的被保险人为未满 18 周岁的未成年人时，父母亲其中一位或一位法定监护人在同一医院中陪同治疗的住宿费用，本保障于被保险人满 18 周岁时终止。
parent accompanying: If a beneficiary is less than 18 years old, we will also pay for accompanying accommodation for a parent or legal guardian. This benefit will cover till the date that the beneficiary is 18 years old.
- 18. 可选保险责任二 optional benefit B** **18.1** 门诊 outpatient
- 18.1.1 综合门诊医疗费用，包括在门诊发生的如下费用：
comprehensive outpatient costs, including below costs of outpatients:
- (a) 挂号费、诊疗费；
consultations;
 - (b) 治疗费；
treatments;
 - (c) 处方药费；
prescriptions;
 - (d) 检查化验费；
laboratory and diagnostic costs;
 - (e) 门诊发生的手术费用；
surgical costs in outpatients;
 - (f) 非正式住院的留院观察费用；
day-patients or other hospitalizations which are not verified as normal inpatients;
 - (g) **紧急牙科**（见释义）治疗费，被保险人因遭受紧急牙科情况，并于该情况发生之日起 30 天内仅以稳定病况及缓解剧痛为目的的牙科门诊治疗。
emergency dental costs, are the costs which incurred as dental outpatient visits for the purpose of stabilizing the conditions and releasing the pain, within 30 days of the accident dates.
- 18.1.2 康复治疗费用，由专科医生确诊并且开具医嘱需要接受康复治疗，包括中风后的物理治疗、**职业治疗**（见释义）。每次康复治疗费用的给付以 200 元为限。
rehabilitation costs, clearly prescribed by the specialists because of the diagnoses of suitable indications, include: the physiotherapies after strokes, occupation therapies. Coverage is capped by 200 RMB per visit.
- 18.1.3 **物理治疗、顺势治疗、正骨治疗、针灸或中医治疗**（见释义）费用，经专科医生明确建议采用顺势治疗、正骨

治疗、针灸或中医治疗以帮助被保险人恢复正常的生理机能。每次治疗的给付以 1,000 元为限。

physiotherapy, homeopathy, osteopathy, acupuncture or Chinese traditional medical costs, should be clearly prescribed by the specialists because of the diagnoses of suitable indications and should be of active purposes of recuperation, to take these therapies. The coverage per visit is capped by 1,000 RMB.

18.2 门诊就诊协助

outpatients booking service

18.2.1 门诊就诊协调;

outpatient visits coordination;

18.2.2 全程导医服务;

full-itinerary medical guides;

18.2.3 病情康复跟踪。

rehabilitation tracking.

18.3 电话医生咨询服务

Phone medical consultancy service

**19. 可选保险责任三
optional benefit C**

19.1 全球紧急援助服务

global emergency assistance

19.1.1 紧急医疗撤离;

emergent medical evacuation;

19.1.2 医疗转运。

medical transferral.

19.2 境外意外医疗

abroad accidental medical coverage

**20. 可选保险责任四
optional benefit D**

20.1 戒烟疗程服务

smoking abstinence program

第五章 本合同的责任免除

Section 5. Exclusions of This Policy

21. 对疾病的责任免除

exclusions to diseases and conditions

21.1 既往症（见释义），除非被保险人如实告知并经我们书面同意承保；

pre-existing conditions, unless the beneficiary had fully disclosed and we approved to underwrite the policy in written;

21.2 精神疾病或心理疾病、遗传性疾病、先天性疾病、包皮问题、发育异常（包括但不限于：身体发育问题、学习困难如阅读障碍、行为问题、适应障碍、早熟、自闭等）、法定传染病、职业病、性传播性疾病、艾滋病（AIDS）或感染艾滋病病毒（HIV），及因上述原因并发的其他疾病；上述疾病的具体定义和范围以世界卫生组织颁布的《疾病和有关健康问题的国际统计分类（ICD-10）》为准；

- psychological or psychiatric conditions, hereditary conditions, congenital conditions, prepuce problems, developmental anomalies (including but not limited to: physical developmental anomalies, learning difficulty such as reading disorder, behaviour problems, adjustment disorders, precocities, autisms and etc.), notifiable diseases, occupational diseases, venereal diseases, AIDS or HIV infection, and all complications due to these conditions. The detailed definitions and scopes of these conditions accord to “the international statistical classification of diseases and related health problems ICD-10” issued by WHO;
- 21.3 脱发、痤疮、良性皮肤损害（包括但不限于：痣、皮赘、疣、色素沉着、黄褐斑、胎记等）、白癜风、非瘢痕疙瘩型瘢痕、鸡眼、灰指甲、手癣脚癣、失眠、鼾症、颞下颌关节疾病； alopecia, acne, benign skin lesions (including but not limited to: nevus, cutaneous tag, sycoma, chromatosis, chloasma, birthmark and etc.), vitligo, non-keloma scar, helosis, onychomycosis, tinea of feet and hands, insomnia, snoring and tempro-mandibular disorders;
- 21.4 妊娠及妊娠并发症、妊娠检测、分娩、流产、不孕不育症、避孕、节育绝育、性功能相关问题、变性手术等； maternity and complications, pregnancy test, delivery, abortion, infertility, contraception, birth control and sterilization, sexual function problems, sex changing and etc;
- 21.5 所有牙科疾病、所有视力屈光异常问题。 all dental problems and all vision problems.
22. 对费用的责任免除 exclusions for costs
- 22.1 检查或治疗所在的医疗机构或治疗的医生不符合本条款释义； the diagnosing or treating facility or doctor does not meet the relevant definitions of this provision;
- 22.2 非医学必需的检查或治疗，如没有症状或仅有不适症状，经诊断为非住院适应症的住院。包括但不限于：无原因的血型检测、无原因的微量元素检测、无相关症状支持的发育状况或发育性疾病评估、无相关症状支持的肿瘤标志物检查、仅以家族史或地域性疾病等导致心理担忧而进行的检查或治疗等； not medically necessary examinations or treatments, such as examinations or treatments with no or just slight symptom or inpatients without inpatient indications. Examples include (but are not limited to): causeless blood type test, causeless trace element test, asymptomatic development conditions or problems assessment, asymptomatic tumor marker test, the examinations or treatments which are just because of family history or endemic disease threats.
- 22.3 超过通常惯例水平之外的检查或治疗； examinations and treatments over customary routines;

- 22.4 美容整容治疗、没有专科医生明确要求的康复治疗、疗养、非医学必需的激素治疗、减肥治疗、营养咨询、丰胸或缩胸治疗、戒烟治疗、戒酒治疗、其他成瘾性物质戒断治疗；
cosmetic or plastic treatments, rehabilitations which are not proscribed, sanatorium, non medically-necessary hormone treatments, weight losing, nutrition consultation, enhance or reduce breasts, smoking quitting, abstinence, and other addiction withdrawals;
- 22.5 对遗体或供体实施的任何活细胞冷冻贮藏、植入和再植入等；
any cryopreservation, implantation and re-implantation of living cells from remains or donors;
- 22.6 不属于规范医疗费用的费用，包括但不限于：专家点名费、与器官提供者有关的所有费用如供体器官购买费用等。
any costs which are not recognized as orthodox medical costs, including but not limited to: experts call fee, any costs paid to organ donors such as purchasing charges.
23. 对保险事故原因的责任免除
exclusions for reasons
- 23.1 医疗事故；未遵医嘱私自服用/涂用/注射药物；服用、吸毒、吸食或注射违禁药品或成瘾性物质、物质依赖、醉酒或斗殴；从事其健康状况不适宜的活动或运动；前往出发地所在国政府、目的地所在国政府或者联合国明确告知不建议前往的国家或者地区；
medical malpractice or negligence, taking or injecting medicines without prescription, taking / inhaling / injecting narcotics / illegal drugs / habit-forming drugs, substance dependency, drunkenness, bustup, medicaly unsuitable activities or sports, heading for high risk areas announced by departure government, destination government or UN;
- 23.2 故意自伤、犯罪或拒捕；投保人、受益人对被保险人的故意杀害、故意伤害；
deliberate self harm, crime, resisting arrest, murder or deliberate harm beneficiary from policyholder;
- 23.3 酒后驾驶（见释义）、无合法有效驾驶证驾驶（见释义），或驾驶无有效行驶证（见释义）的机动车（见释义）；
drunk driving, ineligible driving, driving automotive vehicles which have no eligible vehicle license;
- 23.4 潜水（见释义）、滑水、跳伞、攀岩（见释义）、蹦极跳、赛马、赛车、摔跤、武术比赛（见释义）、探险活动（见释义）及特技表演（见释义）等高风险活动；
high risk activities, including diving, water skiing, parachute, rock climbing, bungee, horse racing, automobile racing, wrestling, combat sports, expedition, acrobatic display and etc;
- 23.5 战争、军事冲突、暴乱或武装叛乱；核爆炸及化学污染。
wars, military conflicts, riots, armed rebellion, atomic bombing, atomic or chemical pollution.

第六章 保险费及续保

Section 6. Premium and Renewal

- 24. 保险费的交纳**
payment of premium
- 保险费及其应支付的时间与方式均已载明于您方的保险单中。您方应准时交纳保险单详细载明的保险费及任何其他费用，支付货币为人民币。Your certificate of insurance sets out the premium and states when and how they must be paid. You are responsible for paying the premium and any other charges as detailed on your certificate of insurance on time. Payments must be made in Chinese Yuan (CNY).
- 25. 未交纳保险费的**
处理
Non-payment of Premium
- 投保人未支付首期保险费，本合同自始无效。If you do not pay first premium, this policy will be ineffective from all the beginning.
- 投保人未支付续期保险费导致本合同终止的，我方对合同终止后发生的任何事故不承担任何责任。**
If the policy is terminated or expired because of not paying following premium, we won't pay any claims incurred after termination date or expiry date.
- 26. 续保条件**
how is this policy renewed
- 本合同保险期间是一年，本合同在每一个保单周年日将自动续保，但我方拒绝续保或本合同终止的除外。This policy's period of cover is one year, and this policy could be automatically renewed at each anniversary date, except that we don't approve to renew or this policy is terminated.
- 在每一个保单周年日前，我方将向您方发出自动续保通知，如果您方不愿意续保，应在保单周年日前通知我方。Prior to each anniversary date, we will send you the automatic renewal notices. If you don't want to renew, you should notice us before the coming anniversary date.
- 27. 保险费的变更**
premium changing
- 我方将在保单周年日前书面通知您方关于下一保险期间内将发生的保险费的变更信息。请注意每年的保险费可能有所不同。We will write to you before each anniversary date to tell you about any proposed changes in premium and/or other charges which will apply during the next period of cover. The premium and/or other charges may vary from year to year.

第七章 解除及终止保险合同

Section 7. Cancellation and Termination of This Policy

- 28. 投保人解除合同**
的手续及风险
Procedures and Risks of Cancellation
- 投保人自签收本合同之日起的 10 天内称为犹豫期，如果投保人在犹豫期内要求解除本合同，在我方收到解除合同申请书且审核通过之日起，本合同解除，我方将向投保人无息退还已交付的保险费。**对合同解除前发生的保险事故，我方不承担保险责任。**The 10 days since you receive and sign off this policy will be your cooling off period. When you want to cancel this policy within cooling off period, we will refund the paid premium, this policy will be invalid from all the beginning. **We won't be responsible for all claims related to this policy.**

如投保人在犹豫期后申请解除本合同，请填写解除合同申请书并向我方提供下列资料：

If the policyholder terminate this policy after cooling off period, you should fill in the termination application and provide below documents to us:

- 28.1 保险合同；
certificate of insurance;
- 28.2 投保人的有效身份证件。
your effective ID card.

自我方收到解除合同申请书且审核通过之日起，本合同终止。如您方在此保险期间内无理赔或无付款担保（见释义），我方自收到解除合同申请书且审核通过之日起 30 天内向投保人退还本合同在退保申请审核通过之日的未到期净保费。

This policy will terminate since we receive and approve the termination application. If you have not had any claims or guarantees of payment, we will refund unearned net premium within 30 days since we receive and approve the termination.

投保人犹豫期后解除合同会遭受一定损失。

The termination refund will be less than paid premium.

29. 合同效力终止
Termination of
This Policy

本合同在发生下列任一情况时终止：

This policy will terminate if each of below occurs:

- 29.1 所有被保险人身故；
all beneficiaries have passed away;
- 29.2 您方或我方按本合同或相关法律法规的规定解除本合同；
either you or we terminate this policy according to this policy or relevant laws;
- 29.3 本合同保险期间届满；
this policy has expired;
- 29.4 本合同因法律规定或本合同约定的其他情况而终止；
this policy has expired due to laws or other matters specified by this policy;
- 29.5 由于风险状况的变更，我方在到期日前书面通知您方本合同不予续保。
because of risk features, we inform you in written that we will not renew this policy.

第八章 索赔
Section 8. Claims

30. 预先授权
Prior Approvals

下述所有治疗前均需取得我方的预先授权。若您方未取得我方的预先授权，将可能对您的理赔造成延迟，也有可能导我我方拒绝向您方给付全部或部分理赔款项。

Prior approval should be obtained from us for the following treatments: **If it is not, there may be delays in processing claims, or we may decline to**

pay all or part of the claim.

30.1 被保险人必须在每次住院前联系我方

A beneficiary must contact us before each hospitalizations;

如果主持被保险人治疗的执业医师决定需要延长留院治疗时间并超出我方的预先批准时长，或者已获我方审核同意的治疗方案将有所变动，必须尽快向我方寄送治疗的专科医生出具的医疗报告，并载明下列全部信息：

If the treating medical practitioner decides that the beneficiary needs to stay in hospital for a longer period than we have approved in advance, or decides that the treatment which the beneficiary needs is different to that which we have approved in advance, then that medical practitioner must provide us with a report, explaining:

30.1.1 被保险人预期需要留院治疗的时长；

how long the beneficiary will need to stay in hospital;

**30.1.2 被保险人的诊断信息（如果诊断发生了变更）；以及
the diagnosis (if this has changed); and**

30.1.3 被保险人所接受过的治疗和未来需要接受的治疗。

the treatment which the beneficiary has received, and needs to receive.

30.2 被保险人必须在每次所有手术（包括器官移植、骨髓移植或外周血干细胞移植、内窥镜手术）及操作性治疗前联系我方，包括在门诊、住院或日间病房发生的上述治疗；

A beneficiary must contact us before each surgical procedures (including organ donation, bone marrow or peripheral stem cell procedures, and endoscopy) and minor operating procedures, wherever occurred in in-patient, out-patient or day patient;

30.3 被保险人必须在每次计算机断层扫描(CT)、核磁共振成像(MRI)、正电子发射断层扫描（PET）、内窥镜检查等重大检查项目前联系我方；

A beneficiary must contact us before each CT scans, MRI scans, PET scans and endoscopy examinations;

30.4 被保险人必须在每次物理治疗、职业治疗或任何以康复为目的的疗程前通知我方，包括在门诊、住院或日间病房发生的上述治疗；

A beneficiary must contact us before each physiotherapies, occupational, or any treatment course for rehabilitations, wherever occurred in in-patient, out-patient or day patient;

因需要物理治疗、职业治疗、或任何康复治疗的疾病往往较为复杂，您方通知我方时必须提交主持该次治疗的专科医生的医疗报告，该报告须载明：

As conditions requiring physiotherapies, occupational, or treatments for rehabilitations can be very complex, as part of the prior approval process we must receive a medical report from the

treating specialist, detailing the following:

- 30.4.1 被保险人的诊断信息;
how long the beneficiary will need to stay in hospital;
- 30.4.2 被保险人已接受的治疗详情和后续的治疗安排;
the diagnosis; and
- 30.4.3 预计的出院日期。
the treatment which the beneficiary has received, or needs to receive.

某些情况下，若被保险人确实无法预先联系我方取得批准（如发生紧急事件，或突然生病必须立刻接受治疗），在这样的情况下，如条件允许，您方应在接受治疗后尽快联系我方，以便我方决定是否应承担后续的治疗费用。在这种情况下，您方须向我方说明需立即接受治疗的原因，并且我方有可能请您方举证。若我方确定您方确实无法事先联系我方，即使未经预先授权，我方仍将承担在本合同规定范围内的第一次紧急治疗费用（包括任何处方药物）。

We appreciate that there will be times when it will not be practical or possible for a beneficiary to contact us for prior approval (for example, emergencies, or when a family member is suddenly sick and the priority is to get treatment for them as soon as possible). In circumstances like these, we simply ask that you or the affected beneficiary get in touch with us as soon as is reasonably possible after treatment has been sought, so that we can confirm whether subsequent treatment will be covered. In this situation, we will ask for an explanation of why the treatment was needed urgently, and may ask for evidence of this. If we agree that it was not reasonably possible or practicable to seek prior approval, we will cover the cost of the initial treatment (including any prescribed medication) which was urgent, even without prior approval (within the terms of this policy).

尽管紧急治疗不需要经过我方的预先授权，若被保险人在紧急情况下被送往医院治疗，应该安排医院或其家庭成员在其入院后 48 小时内联系我方（或者在入院 48 小时后尽早联系我方），以使我方能确认被保险人合理使用了相关的保障。

Although emergency treatment does not require our prior approval, if a beneficiary is taken to hospital in an emergency, he or she should arrange for the hospital or a family member to contact us within 48 hours of admission (or as soon as reasonably possible after that). This will allow us to make sure that the beneficiary is making the best use of the cover.

若被保险人被送往的医院、医生或诊所不属于我方医疗网络范围内的机构，在确认不影响医治的情况下，经被保险人同意，我方将安排被保险人转至我方医疗网络范围内的医院、医生或诊所继续接受治疗。您可以通过拨打客户服务热线查询被保险人被送往的医院、医生或诊所是否属于我方医疗网络范围，客户服务热线电话号码载于您方持有的成员身份卡上。

If a beneficiary has been taken to a hospital, medical practitioner or clinic which is not part of the Cigna network, then we may make arrangements

(with the beneficiary's consent) to move the beneficiary to a Cigna network hospital, medical practitioner or clinic to continue treatment, once it is medically appropriate to do so.

若您方已提交该治疗预先授权申请，但尚未取得我方的书面答复，我方将按照预先授权程序应予批准的额度进行支付。若您方无法证明曾提交过关于该治疗的预先授权申请，我方将不予支付理赔款项或仅支付部分理赔款项。

If prior approval is not obtained, we will pay only the amount which we would have paid if prior approval had been sought. In the absence of evidence to the contrary, we will reduce benefits or not pay the claim as specified above.

对于每一次的理赔，被保险人必须严格按照本节所述的理赔流程执行，否则我方将不予支付理赔款项或仅支付部分理赔款项。

Beneficiaries must comply strictly with the claims procedures set out in this section in respect of every claim. If they do not do so, we will reduce benefits or not pay the claim as specified above.

**31. 诉讼时效
Claiming Period**

被保险人向我方请求给付保险金的诉讼时效期间为 2 年，自其知道或应当知道保险事故发生之日起计算。

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

**32. 保险金申请
Claim Application**

被保险人在向我方申请理赔时，应详细填写理赔申请表的具体内容。理赔申请表请您在网站下载，并在填写完成后寄送至您方持有的会员卡上的地址。

when beneficiary claims, he/she should fill in claim application in details. The claim application could be downloaded from our website, and be sent to the address listed on your ID card.

如有必要，我方会要求您方或被保险人额外提供以下资料来核定理赔，例如：

We may need to ask for extra information to help us process a claim, for example:

32.1 医疗报告或关于被保险人状况的其他资料；
Medical reports or other information about the beneficiary's condition;

32.2 任何我方要求提供并予承担费用的独立医疗体检报告
The results of any independent medical examination that we may ask and pay for.

理赔申请可以通过电邮的形式发送给我方，但同时也必须将书面资料寄送我方。

Claims may be submitted in electronic format (by email or fax) but in that case the original hard copy document must also be sent to us by post.

33. 保险金给付
How We Pay
Claims

33.1 直接付款
direct billing

33.1.1 付款担保： 在某些情况下，若我方同意提前批准为某种特殊治疗支付部分或全部款项，我方将会向被保险人或医院、医生或诊所提供付款保证担保。待治疗结束，在收到相关的申请和发票复印件后，我方将按照付款保证证明向该被保险人或该医院、医生或诊所支付担保的款项。

guarantee of payment: In some circumstances, we may give a beneficiary or a hospital, medical practitioner or clinic a guarantee of payment. This means that we agree in advance to pay some or all of the cost of a particular treatment. Where we have given a guarantee of payment, we will pay the beneficiary or hospital, medical practitioner or clinic the agreed amount on receipt of an appropriate request and a copy of the relevant invoice, after the treatment has been provided.

33.1.2 有些医院、医生或诊所倾向于直接与我方结算。若该项治疗确属本合同保障范围，该医院、医生或诊所应将原始发票提供给到我方，一经收到发票，我方将直接向该医院、医生或诊所支付款项。

It could be possible that some hospitals, medical practitioners or clinics are willing to invoice us directly. If the treatment is covered, the hospital, medical practitioner or clinic should send us the original invoice and we will pay them directly.

33.2 其他支付方式
other claiming process

33.2.1 如果医院、医生或诊所直接与被保险人结算，但并未收到付款，被保险人必须将该原始发票提供给我方，我方将根据本合同的约定责任向该医院、医生或诊所支付应付款项。

If a hospital, medical practitioner or clinic invoices a beneficiary directly, and the hospital, medical practitioner or clinic has not been paid, the beneficiary must send the original invoice to us, and we will make any payment under this policy to that hospital, medical practitioner or clinic directly.

33.2.2 如果医院、医生或诊所直接与被保险人结算，且已收到付款，被保险人应将该原始发票以及该医院、医生或诊所的收款回执一并提供给我方，我方将根据本合同的约定责任向被保险人支付应付款项。

If the hospital, medical practitioner or clinic invoices to a beneficiary directly, and the invoice is paid, the beneficiary

may send us the original invoice and a receipt for the payment which has been made to the hospital, medical practitioner or clinic. We will then reimburse the beneficiary for any portion of the cost of the treatment which is covered.

33.2.3 任何情况下，我方仅赔付治疗费用中属于本合同约定责任的部分，如果所发生的治疗费用中有任何不属于本合同所约定的责任范围，我方将向您说明，并由您方承担有关治疗费用。

In each case, we will only pay the parts of the costs incurred which are covered. We will let you know if we believe that any part of the cost incurred is not covered, and you should take such costs.

**34. 其它核定结果
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，向我方提出索赔申请的，我方有权解除合同，并不退还保险费。

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

您方故意制造保险事故的，我方有权解除合同，不承担给付保险金的责任；

If the policyholder or the beneficiary deliberately causes an insured event, we shall have the right to terminate the policy and shall neither be liable for the payment of insurance benefits nor return the insurance premium.

保险事故发生后，您方或者受益人以伪造、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，我方对虚报的部分不承担给付保险金的责任。

If the policyholder, 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, we shall not be liable for payment of insurance benefits for the portion that is false.

您方或者受益人有以上规定行为之一，致使我方支付保险金或者支出费用的，应当在收到我方相关通知后之日起 30 日内向我方退回或者赔偿。

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

**35. 应追讨款项
Claw Back Claims**

35.1 为提升服务品质，我方在可行的前提下可为被保险人或受益人提供医院、医生或诊所的付款担保（见 33.1.1 款）和直接结算（见 33.1.2 款）服务。但是，某些情形可能导致我方须先向该医院、医生或诊所支付其所出具账单的全部款项，然后我方再向您方或被保险人要求返还其中不属本合同保障范围内的费用。这些情形

包括但不限于：

To provide you with the most convenient service, where possible we will aim to settle invoices directly with the hospital, doctor or clinic which provided the service (clause 33.1.1 and 33.1.2) . However in below circumstances, it may be necessary for us to pay the hospital, doctor or clinic in full and then claw back from you or beneficiary any amounts that are not covered by the policy. Examples of occasions when this may happen include but are not limited to:

35.1.1 不需要进行预先授权的就诊中发生的不在合同保障范围内的费用，包括但不限于：不在保障范围内的医疗费用、责任免除条款中的或特别核保约定除外的医疗费用、保障范围内医疗费用的自负比例部分、保障范围内医疗费用超出限额的部分等；

The pre-authorization is not required and the expense is uncovered in the policy, these kinds of expenses include but are not limited to: the expenses not included in benefit coverage, the expenses included in exclusion clause or special exclusion, the beneficiary's payable expenses due to coinsurance, the own payable expenses due to limits;

35.1.2 对于需要进行预先授权的就诊，被保险人未进行预先授权或未通过预先授权，导致按照 30.条应由被保险人承担的部分；

The beneficiary's payable expenses according to clause 30, when the pre-authorization is required and the beneficiary didn't take or didn't pass pre-authorization;

35.1.3 对于需要进行预先授权的就诊，被保险人申请预先授权时未如实告知，我方基于当时所获悉信息同意预先授权的，我方在得到真实信息后审核认为该次就诊中应该由被保险人承担的部分。

When the pre-authorization is required and the beneficiary applies for pre-authorization with nondisclosure, even if we have approved the pre-authorization, we reserve the rights to claw back beneficiary's payable expenses according to our review afterwards.

35.2 因投保时未如实告知导致解除保单的，对该保单已经发生的所有我方已经支付的理赔及所有我方须向医院、医生或诊所支付的款项，我方有权向您方或被保险人追讨；

When we confirm nondisclosure when apply for the cover, if the policy turns out to be cancelled, we reserve the right to claw back from you or beneficiary the value of any claims paid and any our side payable liabilities to hospitals, doctors or clinics under the policy.

35.3 因投保时未如实告知进行重新核保的，对根据重新核保决定我方

不应承担的所有我方已经支付的理赔及所有我方须向医院、医生或诊所支付的款项，我方有权向您方或被保险人追讨；

When we confirm nondisclosure when apply for the cover, if the policy turns out to be re-underwritten as adding special conditions or exclusions, we reserve the right to claw back from you or beneficiary the value of any claims paid and any our side payable liabilities to hospitals, doctors or clinics relevant to the added conditions or exclusions.

35.4 在 34 条所述情形下，我方有权向被保险人或受益人追讨我方已经支付的理赔及因为上述付款担保（见 33.1.1 款）和直接结算（见 33.1.2 款）将导致我方须向医院、医生或诊所支付的款项；

Under all conditions of clause 34, we reserve the right to claw back all amounts paid to hospitals, doctors or clinics in relation to falsified claims.

35.5 因 35.1-35.4 款所涉事项产生应追讨款项的，如果有应追讨款项尚未收到，我方有权暂停该被保险人的付款担保和理赔服务，直到应追讨款项已经完全结清；

Where we request funds to be clawed back under clause 35.1-35.4, we reserve the right to suspend direct payment of future claims to providers of medical services and/or to deduct the due amount to be clawed back from future claims to reimburse a beneficiary under the policy.

35.6 因 35.1 至 35.4 所涉事项产生应追讨款项的，如果有应追讨款项尚未收到，在一些情况下医院、医生或诊所可能仍然为该被保险人提供直接结算服务，这并不意味着我方默认免除了应追讨款项。并且，我方有权通知医院、医生或诊所暂停该被保险人的直接结算服务直至应追讨款项结清。

Where we request funds to be clawed back under clause 35.1-35.4, in some circumstances, doctors, hospitals or clinics may continue to provide direct billing service even though claw back funds for past claims remain outstanding to us. Any such claims payment direct to medical providers does not mean that we have accepted the non-payment of outstanding claw back amounts. Besides, we may contact medical providers to advise that no future medical services shall be covered by the policy until such time that we have received the outstanding funds from you.

第九章 其他规定

Section 9. Other Clauses

36.	<p>明确说明和如实告知</p> <p>Truthful Explanation and Full Disclosure</p>	<p>订立本合同时，我方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，我方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。订立本合同时，我方就投保人和被保险人的有关情况提出询问，投保人应当如实告知。</p>
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When concluding the policy, the company shall explicitly describe the contents of the policy provision and conditions to the policyholder for the insurance. Especially for the exclusion clauses, the company shall have striking notes in application form, certificate of Insurance and other documents, as well as make clear explanations to the applicant in oral or written; otherwise, the exclusion clauses won't be effective. We may put forward written inquiry about the relevant information of the policyholder and each beneficiary. The policyholder shall disclose the information fully and truthfully.

如果投保人故意或因重大过失未履行前款规定的如实告知义务，足以影响我方决定是否同意承保或者提高保险费率的，我方有权解除本合同。If the policyholder intentionally or due to gross negligence, fails to perform the duty of truthful and full disclosure, which suffices to influence our decision as to whether to accept the application or to raise the insurance premium rate, we have the right to terminate the policy.

如果投保人故意不履行如实告知义务的，我方对于本合同解除前发生的保险事故，我方不承担给付保险金的责任，并不退还保险费。If the policyholder fails to perform its obligation of truthful and full disclosure intentionally, we shall not be liable to pay insurance benefits or refund the insurance premiums for insured events that occurred before the termination of the policy.

如果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，对于本合同解除前发生的保险事故，我方不承担给付保险金的责任，但应当无息退还保险费。

If the policyholder fails to perform the duty of truthful and full disclosure due to gross negligence, which failure has a material bearing on the occurrence of an insured event, we have the right to terminate the policy, and shall not be liable to pay insurance benefits for the insured events that occurred before the termination of the policy, but shall refund the unearned net premium.

我方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，我方承担给付保险金的责任。

When concluding the policy, we have aware that the policyholder fails to perform the duty of truthful and full disclosure, we shall not terminate the policy; and shall pay insurance benefits for occurred events which are covered in the benefit coverage.

37. 我方合同解除权的限制

How We Cancel This Policy

前条规定的合同解除权，自我方知道有解除事由之日起，超过 30 日不行使而消灭。

The right to terminate the policy as specified in the preceding paragraph shall be extinguished if it is not exercised within 30 days after the date on which we learnt of the reason for termination..

38. 联系您方 Contacting You

为了保障您的合法权益，您的住所、通讯地址或电话等联系方式变更时，请及时以书面形式或双方认可的其他形式通知我们。如果您方未以书面形式或双方认可的其他形式通知我方，我方按本合同载明的最后住所或

通讯地址发送的有关通知，均视为已送达给您方。

If we need to contact you in relation to this policy, or if we need to give you notice that we are going to amend or terminate this policy, we will write to you at the address which you gave us in the latest certificate of insurance, and all notices sent will be considered delivered.

**39. 联系我方
Contacting Us**

在本规则所述中的某些情况下，如果您方需要书面联系我方，请按照您方持有的成员身份卡上的地址或电子邮箱地址向我方寄送相关资料。
In some circumstances, which are explained in these rules, you may need to contact us in writing. If so, you should write to us or email us at the addresses on your membership ID card.

如果在其他情况下您方需要联系我方，请您方发送电子邮件至您方持有的成员身份卡上的电子邮箱地址，您方也可拨打客户服务热线，客户服务热线电话号码载于您方持有的成员身份卡上。

In any other circumstances, you may email us at the addresses on your membership ID card or call our Customer Care Team at the phone number on your membership ID card.

**40. 保险合同变更
Changes to this
policy**

除我方授权代表以外，任何人均无权更改本合同或取消其中的任意条款，例如：销售代表、经纪人及其他中介方均无权擅自变更或拓展本合同的任何规定。

No person other than an authorized executive officer of us has authority to change this policy or to waive any of its provisions on our behalf, for example, sales representatives, brokers and other intermediaries cannot vary or extend the terms of the policy.

我方保留依照相关法律法规变更本合同的权利，在发生变更时将书面通知您方。

We reserve the right to change this policy to comply with any changes to relevant laws and regulations. If this happens, we will write and tell you of the change.

我方同时保留变更续保条件的权利，变更将于保单周年日起生效，我方将至少提前 28 天书面通知您方。

We also reserve the right to make changes to the terms of cover on renewal. We will give you at least 28 days' notice of such changes and the changes will take effect from the annual renewal date.

**41. 保险合同执行人
Who can enforce
this policy**

本合同仅对您方与我方具有法律权益，只有您方或我方可以执行本协议。

Only we and you have legal rights in connection with this insurance. This means that only we or you may enforce the agreement.

**42. 其他保险
Other insurance**

如果其他保险公司也为您方提供了保障，我方将与其协商具体的赔付比例。

If another insurer also provides cover, we will negotiate with them as regards who pays what proportion of any claim.

43. 资料保护

我方需要收集及处理与您方及被保险人有关的个人资料以管理合同及提供保障，您方对我方出于必要而合理的需求而收集及处理您方及被保

Data protection

险人的个人资料予以认可。

We need to collect and process personal and sensitive data relating to you and beneficiaries, which includes all identifiable information that relates to you and beneficiaries.

我方将会记录来电或去电以控制质量。依据相关法规，我方会对持有的个人资料严格管控。我方将出于履行本保险合同义务、公司管理、遵守法律法规的规定、服从监管机构、行业协会的要求等原因而使用或提供上述信息和资料，在某些情况下需要传输资料到中国大陆之外的地区。该进程除须在保护数据的基础上执行外，还须符合契约中关于机密性及安全性方面的规定。如果您方需要一份我方持有的您方个人资料复印件，请书面告知我方您的成员编号。我方将会对提供的信息收取合理的费用。

Telephone calls to and from us may be recorded for quality control. The abovementioned information and data will be processed or provided by us for reasons including carrying out our obligations, company management purposes, acting pursuant to laws and regulations, or following industry regulator's and insurance association's requests and we may need to share it with third parties authorised by us, which may mean in certain instances we need to transfer data outside Mainland China. Such processing is subject to contractual restrictions with regard to confidentiality and security in addition to the obligations imposed by applicable data protection laws in China. If you would like a copy of the information we hold about you, please write to us quoting your membership number. Please note that we may charge a reasonable fee to provide this information.

为更好地防范与核查欺骗行为，我方有可能需要与其他保险人或机构分享信息，但仅限于关于欺骗或试图欺骗行为的信息分享，不涉及任何被保险人医疗信息的泄露。

To help us detect and prevent fraud, we may need to share information with other insurers or organisations. If we need to share information for this reason, we will only share information relating to fraud or attempted fraud, and will not share information about any beneficiary's medical history.

**44. 语言
Language**

我方可能为您方提供本保险合同文件的中文版本和英文版本，但英文版本只供参考，应以中文版本为准。

All of the policy documents in relation to this policy could be provided in Chinese and English. But Chinese version shall always be the governing version. English version is for reference only.

**45. 申诉
Complaints**

任何申诉请第一时间寄送我方，具体地址载明于您方持有的成员身份卡上：

Any complaint should in the first instance be sent to us at the addresses on your membership ID card.

如果申诉未能解决，将会按照下面的“争议处理”条款解决。

If the complaint is not resolved, the parties concerned shall resort to below

		dispute settlement clause.
46. 适用的法律法规 Applicable law and jurisdiction		<p>本合同依据中华人民共和国法律制定，并严格遵循该法律。 This policy is governed by, and will be interpreted in accordance with, laws of the People's Republic of China.</p> <p>关于本合同的任何争议，包括合同的有效性、构成及终止条款，将适用中华人民共和国法律。 Any disputes about this policy, including disputes about its validity, formation and termination, will be determined in the courts of People's Republic of China.</p>
47. 争议处理 Dispute Settlement		<p>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： If there is any dispute relevant to performing this contract, the parties concerned shall resort to either of the following two dispute settlement methods:</p> <p>47.1 因履行本合同发生的争议，由当事人协商解决，协商不成的，提交当事人届时共同选择的仲裁委员会仲裁； The relevant disputing parties shall solve the disputes arising from the performance of this policy through consultation. If the disputes cannot be solved through consultation, they shall be submitted to the arbitration committee for arbitration;</p> <p>47.2 因履行本合同发生的争议，由当事人协商解决，协商不成的，向依法对本合同有管辖权的中华人民共和国人民法院提起诉讼。 The relevant disputing parties shall solve the disputes arising from the performance of this policy 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.</p>
48. 释义 Definitions		<p>在本合同中，下列用语具有如下特定的含义： The following words and phrases have the meanings specified as below.</p>
48.1	我方、信诺、保险人 Cigna, we, us, our, the insurer	指招商信诺人寿保险有限公司。 Cigna-CMB Life Insurance Company.
48.2	保险单 policy	指投保人所有的证明文件，上面载明有保险合同编号、生效时间、保障方案、被保险人等必要的信息。 the documents relating to the policy, specifying policy ID, effective date, covered benefit, beneficiary information and etc.
48.3	您、您方 you	指投保人。 policyholder
48.4	投保文件 Application	指投保人的投保申请（不管是直接寄送、通过中介代理、在线申请还是通过我方电话专员的形式），以及在保障期内投保人及被保险人所作的信息变更或补充信息告知。 the policyholder's application (whether they have sent in a form directly to

		us or through a broker or applied online or through our telemarketers), and any declarations that they made during their enrolment for them and any beneficiaries included in the application.
48.5	保单周年日 anniversary date	<p>指每年与本合同生效日所对应的公历日期，如当年无相同的公历日期，则以该公历月的最后一个公历日为保单周年日。</p> <p>the anniversary of the start time. If the start date is February 29th and there is no February 29th in one following year, the anniversary of that year will be February 28th.</p>
48.6	周岁 age	<p>出生日为零岁，每个公历生日的次日零时长一岁。</p> <p>The age is zero just after birth, the age will increase by one at each calendar birthday's next day zero time.</p> <p>公历生日是指：出生后每年与出生日的公历日期相同日，如当年无相同的公历日期，则以该公历月的最后一个公历日作为当年的公历日期相同日。公历生日不包含出生日。</p> <p>Calendar birthdays are: the anniversary dates of birth date. If the birth date is February 29th and there is no February 29th in one following year, the anniversary of that year will be February 28th. Calendar birthdays don't include birth day.</p>
48.7	常住地 habitual residence	<p>本人作为户主或租户在当地有固定居住地址，且在过去一年内至少居住不少于六个月。</p> <p>The habitual residence means the fixed dwelling place as owned or rented, and the actual dwelling time is no less than 6 months in last one year.</p>
48.8	丧失可保性的 重大事件 disqualifying event	<p>对于所有被保险人，包括身故、失踪、被通缉、被监禁或进入其他司法强制状态、常住地变更等导致该被保险人不再适合投保本保险的事件。</p> <p>For all beneficiaries, these events include: death, disappearing, listing as wanted, imprison or other judicial detentions, changing to ineligible habitual residence and etc.</p> <p>另外，对于附属被保险人，还包括离婚、终止法律关系、中止抚养等导致与投保人法律关系中止的事件。</p> <p>Besides, for dependents, these events include: divorce, dissolving legal relation, terminating adoption and other events that break down the relationships with policyholder.</p>
48.9	中国大陆 Mainland China	<p>指中华人民共和国领土、领海、领空范围内，除香港、澳门、台湾地区外的全部地区。</p> <p>all territories, seas and related airspaces of People's Republic of China, excluding Hong Kong, Macau and Taiwan.</p>
48.10	住院 Inpatient	<p>指因医疗原因而入住医院之正式病房进行治疗，并正式办理入出院手续，不包括入住门诊观察室、家庭病床、挂床住院等非正式病房及不合理的住院。</p> <p>A patient who is admitted to hospital and occupies a bed overnight or longer for medical reasons, with formal admission and discharge procedures, excluding day-patient, family practice, hanging inpatient and</p>

- other unqualified inpatients.
- 挂床住院是指名义上进行了入出院手续,实际未入住病房、或者三天(或以上)未在病房接受检查治疗的情况。
- Hanging inpatient means the inpatient, which has formal admission and discharge procedures, but the patient didn't actually occupy a bed or there is 3 days or more without any examination or treatment.
- 48.11** 门诊
Outpatient 指病人在医院门诊、诊疗室、外派门诊部进行的就诊和治疗。
a patient who attends a hospital, consulting room, or outpatient clinic for treatment.
- 48.12** 医生
Doctor 指在所在国合法注册的具有医生资格的、拥有处方权、且正在执业的医疗服务人员, 需要满足下列全部条件:
A medical practitioner who is licensed to practice medicine, eligible for prescription and in practice under the laws of the country in which the treatment is provided, as well as meeting all below conditions:
- 48.12.1 对其从事的医疗操作经过培训和训练从而具有相应的治疗资格;
he/she is trained to be eligible for their practice range;
- 48.12.2 其从事的医疗操作在其执业医师资格允许的范围;
the practice is within the eligibility by the license;
- 48.12.3 不是被保险人的家庭成员;
he/she is not a family member of the beneficiary;
- 48.12.4 与被保险人没有商业联系。
he/she has no business relationship with the beneficiary.
- 48.13** 护士
Nurse 指在所在国合法注册的具有护士执业资格且正在执业的护理人员。
a nursing practitioner who is licensed to practice nursing and in practice under the laws of the country in which the nursing is provided.
- 48.14** 特定医院清单
Special provider list 根据我方对目前保障区域医疗市场的医疗机构进行的收费水平分析, 一些医疗机构收费水平明显区别于其他医疗机构的通常收费水平。对此我方列出了此类机构的清单。此类机构在本合同订立时有效的清单附于本保险合同中, 如果续保时清单已经更新, 续保时有效的清单将作为批单发送您方。
According to our tracking of local medical providers' charging adjustments, part of them could be significant different from others. We will regularly publish these providers' list. The effective list at the time of this policy's effectiveness is attached with this policy. When the list is updated at renewal, the updated list will be sent to you as commentary.
- 由于各医疗机构的收费水平将发生变化, 我方将跟踪分析并及时对此清单在我方网站上进行必要的更新和公布。
Because providers could change their charging from time to time, we will track these and update the list on our website as necessary.
- 48.15** 社保目录 指中国社会医疗保险法规中所规定的属于社会医疗保险保障范围的药

	品及其他医疗项目清单。
48.16 医疗必须 Medical necessity / medically necessary	<p>符合下列全部标准： all below points should be satisfied:</p> <p>48.16.1 被保险人有明确诊断的疾病或意外伤害，或者被保险人有明确的症状且就诊后发现了与该症状有医学上可解释的有联系的检查化验异常结果； there is clearly diagnosed disease or accident, or there are both material symptom and medically relevant abnormal examination results;</p> <p>48.16.2 被保险人接受的护理、检查、治疗及手术与上述疾病、意外伤害、症状有医学上可解释的直接关系； all treatments such as nursing, examination, treatment and surgery are medically direct relevant with the disease, accident or condition;</p> <p>48.16.3 根据治疗当地普遍接受的医疗实践标准，采用的医疗服务、设施符合其具体病情；并且为达到同样治疗目的，如不采用该项服务、设施，没有其他效价比更佳的服务、设施。 consistent with local general accepted medical practice routine, the treatments and facilities are relevant. Besides, for equivalent treating effects, there is no other treatments and facilities having better benefit cost ratio.</p> <p>我方医疗团队会在比较可选择服务、设施或供给的成本效率后决定效价比最佳的医疗服务和设施。 our medical team will decide the treatments and facilities of best benefit cost ratio by comparing similar available medical solutions, facilities and their costs.</p>
48.17 通常医疗惯例 customary medical routines	<p>指接受的医疗服务、设施与治疗当地通行治疗规范、通行治疗方法、平均医疗费用价格水平或类似医疗机构通常的合理价格水平一致。 the medical solutions, facilities and treatments are consistent with local routine medical practice, routine treatment approach, average medical costs or common medical costs of similar facilities.</p> <p>对此，我方医疗团队将根据客观、审慎、合理的原则进行审核；如果被保险人对审核结果有不同意见，可由双方认同的权威医学机构或者权威医学专家进行审核鉴定。 checking these, our medical team will follow the principles of objectiveness, prudence and reasonability. When beneficiary disagrees with the identification result, the result could be reviewed by both recognized medical authorities or experts.</p>
48.18 膳食费 hospital meals	<p>根据医生的医嘱，由作为医院内部专属部门的、为住院病人配餐的食堂配送的膳食费。 the meals are consistent with doctor's advice, and provided by hospitals' internal catering centres which are specified for hospitalized patients.</p>

膳食费应包含在医疗账单内；根据各医疗机构的惯例，可以作为独立的款项、也可以合并并在病房费等其他款项内。

the meal costs should be included in discharge bills, either as separate item or as included in hospitalization cost or other items, according to the providers' routines.

如果一些医疗机构自身不设内部专属的食堂而将病人膳食外包给独立经营的商业餐饮单位、从而膳食费不包含在医疗账单内的，被保险人提供证明上述情况属实并经我方证实后，将按照膳食费发票金额的 50% 作为与医疗相关的膳食费金额进行后续的理赔计算。

It could be possible that some providers have no internal specified catering centres and outsource the hospital meals to independent commercial restaurants. As a result, the hospital meals are not included in discharge bills. After these facts are verified, we will pay for 50% of the medical relevant meal costs.

48.19 重症监护
intensive care

包括：
including:

48.19.1 高度医护病室（HDU）：指提供高级别医疗护理及监督的病室，如单一组织系统衰竭；
high dependency unit: it means the ward providing high level medical nursing and monitoring, it could be because of single organ failure;

48.19.2 深切治疗室/重症监护室（ITU/ICU）：指提供最高级别护理的病室，如多器官功能衰竭或出于插管机械通气的情况；以及
intensive treatment unit / intensive care unit: it means the ward providing the highest nursing service, it could be because of multiple organ failures or tracheal intubation monitoring;

48.19.3 冠心病监护病室（CCU）：指提供较高级别心脏监控的病室。
coronary care unit: it means the ward providing high level monitoring of serious heart diseases.

48.20 手术费用
surgery costs

包括手术费（不包括手术中使用的、在医疗账单中单列的药剂费、材料费、设备费）、麻醉费（不包括麻醉中使用的、在医疗账单中单列的药剂费、材料费、设备费）、手术室费。

including surgeon's fees (**excluding the medicine costs, material costs and facility costs which are separately listed in the bills**), anaesthetist's fees (**excluding the medicine costs, material costs and facility costs which are separately listed in the bills**), and operating theatre / recovery room costs.

在医疗帐单中单列的药剂费、材料费、设备费如果满足“医疗必须”、“通常医疗惯例”的，则包含在相关的责任项下承担。

for the separately listed medicine costs, material costs and facility costs, if they satisfy the medical necessity and customary medical routines, they could be covered under correspondent benefit items.

手术费用不包含手术植入材料和耐用医疗设备。

surgery costs don't include surgical implants and durable medical

	<u>equipments.</u>
48.21 处方药 prescription costs	<p>是指根据由医生开具处方的西药和中成药。<u>但不包括如下：</u> include the medicines and Chinese patent medicines , <u>excluding:</u></p> <p>48.21.1 <u>中草药；</u> <u>Chinese herbal medicines;</u></p> <p>48.21.2 <u>主要起营养滋补作用的药品如，花旗参，冬虫夏草，十全大补膏等滋补类中药，白糖参，朝鲜红参，玳瑁，蛤蚧，珊瑚，狗宝，海马，红参，琥珀，灵芝，羚羊角尖粉，马宝，玛瑙，牛黄，麝香，西红花，血竭，燕窝，野山参，移山参，珍珠(粉)，紫河车，阿胶，血宝胶囊、红桃 K 口服液、十全大补丸等；</u> <u>the medicines mainly for the purpose of nourishing, such as panacis quinquefolii radix, Chinese caterpillar fungus, nourishing Chinese medicines like tonic semifluid extract of ten ingredients, ginsengs, RADIX GINSENG RUBRA from Korea, turtle, gecko, coral, dog's gallbladder stone, sea horse, red ginseng, amber, glossy ganoderma, Cornu Antelopis, horse's gallbladder stone, agate, bezoar, musk, saffron, sangusis draconis, bird nest, wild ginseng, pearls, placenta hominis, colla corii asini and other nourishing;</u></p> <p>48.21.3 <u>部分可以入药的动物及动物脏器，如鹿茸，胎盘，鞭，尾，筋，骨等，以及用中药材和中药饮片炮制的各类酒制剂等；</u> <u>some animal organs or tissues, such as pilose angler, placenta, testes and penis, tails, tendons, bones, and all medicinal liquors of Chinese medicines;</u></p> <p>48.21.4 <u>主要以美容、美白、减肥等非治疗性目的的药品；</u> <u>the medicines mainly used for cosmetic, whitening or losing weights;</u></p> <p>48.21.5 <u>不属于药品范围的辅助用品，包括但不限于：海盐水、力度深、雅漾、丝塔芙、口罩、纽曼斯益生菌、配方营养素、奶粉等；</u> <u>commentary materials which are not regular medicines, including but not limited to: sea salt, Redoxon, Avene, Cetaphil, musk, Newmans probiotics, formulated nutrients, milk powders and etc;</u></p> <p>48.21.6 <u>非治疗性药品：免疫刺激剂（包括但不仅限于施保利通，泛福舒，匹多莫德等）。</u> <u>immunologic stimulant, including but not limited to: shibaolitongpian, Broncho-Vaxom, Pidotimod and etc.</u></p>
48.22 检查化验费 laboratory and diagnostic costs	<p>指由医生开具医嘱的由医院专项检查科室的专业检查、检验人员实施的各项检查化验项目，包括：1) 实验室检查；2) 病理检查；3) 影像学检查（X线、CT、MRI、B超、血管造影、同位素、PET等）；4) 功能检测（心电图、心功能、肺功能、骨密度等）。</p> <p>advised by doctors and performed by specialist of laboratory or examination centres in hospitals, including: 1) laboratory tests; 2)</p>

Pathological examination; 3) Imaging examination (X ray, CT, MRI, type-B Ultrasonic, angiography, isotopic examination, PET and so on); 4) function tests (electrocardiogram, cardiac function test, pulmonary function test, bone densitometry and so on).

48.23 治疗费
treatment costs 指由医生或护士对患者进行的、除手术外的各种治疗项目费用；包括清创、换药、拆线、脓肿切开引流、瘘管烧灼、血管穿刺、输血、输液、注射、肌肉封闭、吸氧、冷冻、激光、急救治疗、心肺复苏等，具体以就诊医院的费用项目划分为准。

the treatments are performed by doctors or nurses to patients, excluding surgeries. The examples including: debridement, therapeutics, taking out stitches, incision& draining about abscess, fistula burning, puncturing vessels, blood transfusion, infusion, injection, muscle block, oxygen uptake, cryotherapy, laser therapy, rescue treatment, cardio-pulmonary resuscitation and so on. Inclusion will accord to the classification of providers.

48.24 物理治疗
physiotherapy 是指由具有相应资质的专业医生实施的物理治疗，有书面的治疗计划，并在合理的、可预测的时间内使得症状明显好转。

the physiotherapies are performed by qualified specialists, are with written therapy plans, and are expected to improve conditions significantly within a reasonable and foreseeable future.

在中国大陆地区发生的物理治疗是指应用人工物理因子（如光、电、磁、声、温热、寒冷等）来治疗疾病，包括电疗、光疗、磁疗、热疗、冷疗、水疗，以及超声波疗法等符合全国医疗服务项目规范规定的项目。但不包括泥疗，蜡敷治疗，气泡浴与药物浸浴治疗。

Inside Mainland China, the range of physiotherapies is treating conditions with artificial physical factors, such as light, electronics, magnet, sound, heat, cold etc, including electrotherapy, phototherapy, magnet therapy, heat therapy, cold treatment, hydrotherapy, ultrasonic therapy and other therapies included in China's National Medical Services Standards issued by MOH, but excluding mud therapy, wax deposition treatment, bubble bath, medicated bath and so on.

在中国大陆地区之外发生的物理治疗是指发生保险事故后，有执照的物理治疗医生出于医疗目的推荐的物理治疗方法。

Outside Mainland China, the physiotherapies means the physiotherapies medically necessarily performed by licensed physiotherapists to treat the conditions.

48.25 家庭护理
home nursing 指专职护士至被保险人家中提供的专业护理服务，仅限于为被保险人提供治疗的专业医师所要求。

it means that the nursing is provided by nurses in patients' home only because of advised by the treating doctors.

48.25.1 因医疗必要所进行的住院治疗后的护理；或
medically necessary nursing after inpatients; or

48.25.2 因医疗必要由正规医院所提供的治疗。

medically necessary treatments provided by hospitals.

- 48.26** 紧急牙科
emergency
dental
treatments 指拔牙后止痛药无法遏制的剧痛或面部浮肿或流血不止，且出于被保险人日常牙科医生的非营业时间或被保险人正处于远离日常牙科治疗的地方。该情况下的治疗仅以稳定病况及缓解剧痛为目的。
the teeth have the uncontrollable significant pain, severe swelling or keeping bleeding, and beneficiary's routine dentist is not in business time or beneficiary is far away from his/her dentist's range. The emergency dental treatments are limited to stabilize the conditions and release the pain.
- 48.27** 职业治疗
occupational
therapy 指使因疾病或损伤使被保险人的职业能力（如职业需要的语言、运动等能力）受损，使用特定的职业能力康复手段对其能力受损进行的治疗。
to treat beneficiary's occupational capacity loss due to diseases or injuries, special rehabilitation processes are taken to recover beneficiary's occupational capacities.
- 48.28** 顺势治疗、正骨
治疗、针灸或中
医治疗 是指只能由具有相应资质的专业医生实施的相应治疗，对该治疗需要有书面的治疗计划，并在合理的、可预测的时间内使得症状明显好转。
the physiotherapies are performed by qualified specialists, are with written therapy plans, and are expected to improve conditions significantly within a reasonable and foreseeable future.

但不包括下列治疗方式：拔罐、闪罐、走罐、刮痧、悬灸、药浴、薰蒸、耳烛、耳针、放血和短波/微波脉冲、膏方、三伏贴、三九贴等。

they exclude: cupping, twinkling cupping, moving cupping, scraping, over skin moxibustion, medicated bath, fumigation, ear candling, ear acupuncture, letting blood, microwaving, gaofang, three Fu stick, three nine stick etc.

我们将不予赔付下列疾病的针灸、拔罐和中医治疗，包括但不限于：高血脂、毛囊炎、痤疮、月经不调、痛经、乳腺增生、纤维瘤、脱发、便秘、腹泻、消化不良、呼吸系统疾病、失眠、焦虑、抑郁、神经衰弱等。

we do not pay below conditions' acupuncture, cupping and Chinese medicine treatments, including but not limited to: hyperlipemia, folliculitis, acne, irregular menstruation, menalgia, mammary hyperplasia, fibroma, alopecia, constipation, diarrhoea, dyspepsia, respiratory conditions, insomnia, anxiety, depression, neurosis etc.

中草药包含在本项目下，但是不包括下列项目：

Chinese herbal medicines are included here, but excluding below items:

48.28.1 主要起营养滋补作用的药品如，花旗参，冬虫夏草，十全大补膏等滋补类中药，白糖参，朝鲜红参，玳瑁，蛤蚧，珊瑚，狗宝，海马，红参，琥珀，灵芝，羚羊角尖粉，马宝，玛瑙，牛黄，麝香，西红花，血竭，燕窝，野山参，移山参，珍珠(粉)，紫河车，阿胶，血宝胶囊、红桃 K 口服液、十全大补丸等；

the medicines mainly for the purpose of nourishing, such as panacis quinquefolii radix, Chinese caterpillar fungus, nourishing Chinese medicines like tonic semifluid extract of ten ingredients,

ginsengs, RADIX GINSENG RUBRA from Korea, turtle, gecko, coral, dog's gallbladder stone, sea horse, red ginseng, amber, glossy ganoderma, Cornu Antelopis, horse's gallbladder stone, agate, bezoar, musk, saffron, sanguis draconis, bird nest, wild ginseng, pearls, placenta hominis, colla corii asini and other nourishing;

48.28.2 部分可以入药的动物及动物脏器，如鹿茸，胎盘，鞭，尾，筋，骨等，以及用中药材和中药饮片炮制的各类酒制剂等；
some animal organs or tissues, such as pilose angler, placenta, testes and penis, tails, tendons, bones, and all medicinal liquors of Chinese medicines;

48.29 既往症
pre-existing
conditions

在本合同生效日之前被保险人已患疾病或已有症状。
beneficiaries' diseases or symptoms exist before this policy's effectiveness.
无论被保险人是否已经就相应疾病或症状进行过就诊或治疗，投保时根据医疗问卷的问题应该进行告知的，投保人或被保险人应该如实告知。
no matter whether beneficiaries have sought medical consultancy or treatments, if the relevant disclosure needs to be made according to medical questionnaire, you or beneficiaries should make full disclosure.

对既往症的处理如下：
for the pre-existing conditions:

- 48.29.1 投保时如实告知，经我方核保审核同意标准承保的，按照保障利益范围正常承担；
fully disclosed in application, if passing our underwriting as standard, it will be covered according to the benefit coverage;
- 48.29.2 投保时如实告知，经我方核保给予除外等非标准承保的，按照保障利益范围和核保决定进行承担；
fully disclosed in application, if passing our underwriting as nonstandard, it will be covered according to the benefit coverage and the medical underwriting;
- 48.29.3 投保时不如实告知，我方发现该不如实告知事由后审核认定解除保险合同的，按照 36 条处理；
not fully disclosed in application, if we decide to cancel the policy after being aware of, it will follow clause 36;
- 48.29.4 投保时不如实告知，我方发现该不如实告知事由后审核认为可以进行重新核保并且合同继续有效的，核保审核并经您方同意后，按照保障利益范围和核保决定进行承担；您方不同意核保审核意见的，按照 36 条处理。
not fully disclosed in application, if we decide to re-underwrite the policy after being aware of, after arriving at both sides' consent the policy continue to be effective, it will be covered according to the benefit coverage and the medical re-underwriting; if you don't agree with our re-underwriting, it will follow clause 36.

48.30	酒后驾驶 drunk driving	指经检测或鉴定,发生保险事故时车辆驾驶人员每百毫升血液中的酒精含量达到或超过道路交通安全法规规定的标准。 by testing or checking, the driver has got blood alcohol over the level defined by traffic law when the accident break out.
48.31	无合法有效驾驶证驾驶 ineligible driving	指下列情形之一: it means one of below scenarios: 48.31.1 没有驾驶证驾驶; having no driving license; 48.31.2 驾驶与驾驶证准驾车型不相符合的车辆; driving license eligibility is not consistent with the vehicle; 48.31.3 驾驶员持审验不合格的驾驶证驾驶; taking unqualified driving license; 48.31.4 未经公安交通管理部门同意,持未审验的驾驶证驾驶; taking the driving license which has not gone through qualification process; 48.31.5 持学习驾驶证学习驾车时,无教练员随车指导,或不按指定时间、路线学习驾车; practicing driving with learning license, the driver does not have coach accompanying, or not follow scheduled time and stipulated route; 48.31.6 公安交通管理部门规定的其他无有效驾驶证驾驶的情况。 other scenarios regulated by traffic regulators.
48.32	无有效行驶证 no eligible vehicle license	指下列情形之一: one of below scenarios: 48.32.1 没有机动车行驶证; no vehicle license; 48.32.2 未在法律规定的期限内按时进行或通过安全技术检验。 the vehicle license doesn't take or pass the technical examination within the time limit.
48.33	机动车 automotive vehicle	指以动力装置驱动或者牵引,供人员乘用或者用于运送物品以及进行工程专项作业的轮式车辆。 driven or towed by dynamic devices, the vehicles are for human to ride, for goods to be transported or for engineering.
48.34	潜水 diving	指使用辅助呼吸器材在江、河、湖、海、水库、运河等水域进行的水下运动。 this means the underwater exercises in the rivers, lakes, seas, reservoirs or canals with accessory breathing equipments.
48.35	攀岩 rock climbing	指攀登悬崖、楼宇外墙、人造悬崖、冰崖、冰山等运动。 this means the climbing activities on cliffs, buildings, climbing walls, glacial cliffs and icebergs etc.

48.36	武术比赛 combat sports	指两人或两人以上对抗性柔道、空手道、跆拳道、散打、拳击等各种拳术及使用器械的对抗性比赛。 participating by two or more persons, these include judo, karate, teakwood, free combat, boxing and any adversarial games with or without weapons.
48.37	探险活动 expedition	指明知在某种特定的自然条件下有失去生命或使身体受到伤害的危险，而故意使自己置身于其中的行为，如：江河漂流、登山、徒步穿越沙漠或人迹罕至的原始森林等活动。 aware of the danger of the harm or life threat in some circumstances and still take part in the activities, such as: drift adventure, climbing, trampling through deserts or forests.
48.38	特技表演 acrobatic display	指进行马术、杂技、驯兽等表演。 including equestrian, acrobatics, beast training display etc.
48.39	付款担保 guarantee of payment	指我方对被保险人或治疗方提供关于特定治疗保证支付的协议费用。 a guarantee to pay agreed costs associated with particular treatment which we may give to a beneficiary or a hospital, clinic or medical practitioner
48.40	未到期净保费 net unearned premium	指未满期的保险费扣除与保险合同相关的手续费后的剩余保费。其计算公式为：最近所支付的保险费 X (1 - 该保险费所保障的已经过天数 / 该保险费所保障的期间天数) X (1 - 35%)。 any premium which has been paid in relation to the period after cover has ended, deducted of the commissions. The calculation is last paid premium multiplied by (1 less passed days divided by covered days of last paid premium) multiplied by (1 less 35%).

附件：保险利益表

Appendix: List of benefits

		计划一 Plan 1	计划二 Plan 2	计划三 Plan 3
医疗服务网络 Medical Network		中国大陆公立医院 Mainland China Public Hospital	中国大陆全部医院, 排除特定医院清单 Mainland China All Hospitals, excluding Special Providers	中国大陆全部医院 Mainland China public & private hospitals
基本保险责任 Core benefit				
住院 inpatient	每一保险期间内每一被保险人的赔付限额 annual limit, per period of cover per beneficiary	500,000	1,000,000	2,000,000
	综合住院治疗费用 comprehensive inpatient annual limit	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	其中: 床位费 (每晚) inc: R&B (per night)	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	耐用医疗设备每年限额 DME annual limit	4,000	5,000	6,000
	手术植入体每年限额 Surgical Implant annual limit	100,000	150,000	200,000
住院预约服务 Inpatient Booking	住院协调 inpatient admissions coordination	提供 provided	提供 provided	提供 provided
健康管理服务 Healthcare service	第二诊疗意见 medical second opinion	提供 provided	提供 provided	提供 provided
	在线健康评估、健康管理干预 online Health Education and health assessment	提供 provided	提供 provided	提供 provided
可选保险责任一 Optional Benefit A				
父母陪护住院每晚 Parent Accompany per night		1,000	1,500	2,000

可选保险责任二 Optional benefit B				
门诊 outpatient	每年赔付限额 annual limit	40,000	50,000	100,000
	诊疗费\挂号费每次 Consultation fee per visit	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	处方药费每年 Prescription annual limit	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	检查化验费每年 Lab & diagnostic costs annual limit	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	CT/MRI/PET	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	门诊手术费每年 outpatient surgery annual limit	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	紧急牙科每年 emergent dental costs annual limit	全额 Fully Covered	全额 Fully Covered	全额 Fully Covered
	康复治疗每年就诊次数（每次治疗以 200 元为限） rehabilitation visits per year (coverage is capped by 200 RMB per visit)	5	8	10
	物理治疗、顺势治疗、正骨治疗、针灸或中医治疗每年限就诊次数（每次治疗以 1,000 元为限） physiotherapy, homeopathy, osteopathy, acupuncture and CTM visits per year (coverage is capped by 1,000 RMB per visit)	10	15	20
门诊预约服务 outpatient booking	门诊就诊协调、全程导医服务、病情康复跟踪 outpatient visits coordination; full-itinerary medical guides; rehabilitation tracking. 每年使用次数 utilizations per year	5	8	不限 no limit
电话医生 phone medical consultancy		不限次数 no limit	不限次数 no limit	不限次数 no limit
可选保险责任三 Optional benefit C				
全球紧急救援 Emergency Evacuation	紧急医疗撤离；医疗转运。 emergency evacuation and transfer	提供 Provided	提供 Provided	提供 Provided
境外紧急医疗 Abroad accident medical	每年限额 annual limit	200,000	300,000	400,000
可选保险责任四 Optional benefit D				
戒烟疗程服务 smoking abstinence program		提供 Provided	提供 Provided	提供 Provided