

附件 1 (续)
SCHEDULE 1 (cont'd)

招商信诺人寿保险有限公司
招商信诺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 Clauses

第一条 附加合同说明

Clause 1 Instruction

招商信诺附加全球员工牙科团体医疗保险（以下简称“本合同”）附加于招商信诺全球员工团体医疗保险（以下简称“主合同”）投保。凡本合同条款未做规定的内容，主合同条款适用本合同。如主合同条款与本合同条款互有抵触时，则以本合同条款规定为准。

CIGNA & CMC Additional Global Group Dental Insurance Contract (hereinafter referred to as the “Contract”) is attached to the CIGNA & CMC Global Group Medical Insurance Contract (hereinafter referred to as the “Main Contract”) for application. For content which is not provided in the Additional Contract, the clauses of the Main Contract shall apply. In the event that there is any discrepancy between the provision of the Main 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

本合同由保险单及所附保险条款、批注、附贴批单、投保单、**保险责任清单**，与本合同有关的投保文件、声明、被保险人名单、其他书面文件构成。

The Contract is composed of the insurance policy with the accessory provisions, endorsements, 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 contract.

第三条 保险责任

Clause 3 Insurance Liability

本合同对牙医认可的传统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 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**因进行牙科疾病治疗及在世界范围内接受与牙科疾病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**疾病治疗**所支付的费用或接受多次**疾病治疗**累计支付的费用所获得的适当赔偿不得超过接受**疾病治疗**时的**保险责任清单**所约定的限额。对于超出**保险责任清单**约定限额的**疾病治疗**费用**本公司**不负责赔偿。对于**被保险人**或**家属**已经通过其它保险或其他渠道获得赔偿的，**本公司**仅在**保险责任清单**所约定的限额内支付余额。

The *benefits* that a *patient* can receive 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* or *dependant* 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*.

疾病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岁以下的未成年人，且其需要住院治疗的，在任一**保险年度**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 *year of insurance*. Cover for this particular *benefit* will stop in the child's 18th birthday. The *company* will only pay the cost if:

- (1) 陪护人员是该未成年人的父母或法定监护人；
(1) it is the parent or legal guardian who stays with the child;
- (2) 未成年人接受的**疾病治疗**属于本计划的**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**疾病治疗**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**牙科疾病治疗**的，如本计划没有另外承保的，**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**该牙科损伤的疾病治疗**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 times *benefit* is payable for a 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) 保单条款所列的除外责任。
 - (3) the exclusions set out in these policy terms;

如**被保险人**未满18岁的**家属**需进行任何形式的整形治疗，**被保险人**或其**家属**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供**本公司**决定可提供多少赔偿（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 *dependants* under the age of 18, the *insured person* or *dependant* 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**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**，并认为**病人**因此需要被运送到另外的**医院**或牙科手术室进行治疗的。**医疗援助服务**将在适当的监督下安排护送**病人**到最近的提供必要治疗的**医院**或牙科手术室。

2、 Emergency evacuation - When a *dentist* named by the *medical assistance service*, 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 different *hospital* or dental surgery for *treatment*, the *medical assistance service* will arrange for the transport of the *patient* to the nearest *hospital* or dental surgery offering the necessary *treatment*, under proper supervision.

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

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

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**的人的合理返程交通费进行赔偿，但最高不超过经济级的标准。

In addition, *benefit* will be payable for travel for the return journey (economy class) of the *patient* and the person who, because of medical necessity had to accompany the *patient* after receipt of appropriate *treatment*.

第四条 责任免除

Clause 4 Exclusions

对于以下**疾病治疗**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**疾病治疗**。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**或**家属**进行军队、海上或空中服务操作时直接或间接造成或引致的伤残；
- is directly or indirectly caused or contributed to whilst engaging in or taking part in war, invasion, act of terrorist activities, rebellion, (whether war be declared or not), civil war, commotion, military or usurped power, martial law, riot or the act or any lawfully constituted authority, or while the insured person or dependants are carrying out army, naval or air services operations, whether or not war has been declared;
- 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。如被保险人或家属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 person or dependants 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) 在本合同有效期间，**被保险人**或其**家属**因遭受损伤而导致其口腔中的齿桥、牙冠或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 or their dependant receives while covered under the contract.

- 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面；
- porcelain or acrylic veneers on the upper and lower first, second and third molars and premolars;
- 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) a temporary crown or pontic is required as part of routine or emergency dental 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；
- procedures and materials which are experimental or which do not meet accepted dental 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）；
- 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);
- **被保险人**或其年满18岁的**家属**接受牙齿矫正术（只有**被保险人**未满18岁的**家属**进行牙齿矫正术所发生的费用才可得到赔偿）。进行牙齿矫正术的，**被保险人**或其**家属**必须在治疗之前向**本公司**提供主治牙医准备的以下信息以供**本公司**决定可提供多少赔偿。（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）；
- orthodontic treatment for insured persons and dependants who are over the age of 18

(orthodontic treatment will only be paid for dependant children who are under the age of 18. In this case, the insured person or dependant 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.
- 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 applicant shall consult with the company and decide the amount insured, and clearly indicate the choice in the list of benefits.

二、本合同的交费方式分为月交、季交或年交。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 for the Contract can be paid on monthly, quarterly, semi-annual or annual basis. The applicant shall pay the premium in accordance with the agreement with a lump sum while applying the insurance.

第六条 保险责任开始

Clause 6 Commencement of the Insurance Liability

本合同如与主合同同时投保，主合同保险责任开始条款适用本合同。

This contract shall be applied with the Main Contract at the same time, and the Main Contract's clause of the commencement of the insurance liability also applies to the Contract.

投保人也可以在主合同有效期内的保单周年日前申请投保本附加保险。除另有约定外，本合同保险责任开始的日期即为主合同当时的保单周年日。

The applicant can also apply the insurance provide by the Additional Contract before the anniversary of the Main Contract's effective date each year during the Main Contract's validity period. Unless otherwise provided, the commencement date of the insurance liability of the Contract shall be the anniversary of the Main Contract's effective date of that year.

第七条 保险责任终止

Clause 7 Termination of the Insurance Liability

本合同的终止条件与主合同相同。另外，下列情况之一发生时，本合同效力终止：

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

一、主合同保险期满、解除或终止。

1. The Main Contract expires, or is cancelled or is terminated.

二、投保人解除本合同。

2. The policyholder applies to terminate the Contract.

本合同效力终止时，如本合同当年度未发生保险金给付，**本公司扣除手续费**后退还当年度未到期保险费；如本合同当年度发生过保险金给付，**本公司不退还保险费**。

In the event that no insurance benefit is paid in the year when the 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 or any dependent in the year when the Contract is terminated, the company will not refund the insurance premium.

第八条 释义

Clause 8 Definition

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

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

除非另有规定，下文中词语的单数形式包含复数形式，“他”包含“她”的含义，反之亦然。

Unless otherwise provided, the singular includes the plural and the masculine includes the feminine and vice versa.

“**附加合同**”指招商信诺附加全球员工牙科团体医疗保险。

'Additional Contract' - the CIGNA & CMC Additional Global Group Dental Insurance Contract.

“**保单周年日**”指每年与本合同生效日期相对应的日期。如果该月份无对应的同一日，则以其最后一日作为周年日。

Policy Anniversary-the term can be used to refer to policy renewal date. If that month does not have the exactly same date, the policy anniversary could be the date before the renewal date.

“**年度续签日**”指本合同生效日期的每个周年日或本公司与雇主书面同意的其它日期。如无对应的周年日，则以该月份的最后一日为周年日。

Annual renewal date - the anniversary of the *start date* each year or any other date which the *company* and the *employer* may 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。

Cosmetic - 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*.

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

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

“**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**或**家属**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。

Dental emergency - 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* or *dependant's* usual *dentist* or the *insured person* or *dependant* 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**或其**家属**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）。

Dental injury - injury to the insured person or dependant'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。

Dentist - 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.

“**家属**”指：

Dependant

- **被保险人的配偶**，**被保险人**需在治疗开始之前向**本公司**提供**配偶**的姓名；及
- the *insured person's spouse*, whose name has been provided to the *company* prior to the commencement of any *treatment*; and
- **被保险人的未婚子女**，**被保险人**需在治疗开始之前向**本公司**提供未婚子女的姓名，但仅包括**治疗**开始时年龄不满25岁且仍在接受全日制教育或与**被保险**人居住在同一住所的**被保险**人的子女。
- the *insured person's* unmarried children, whose names have been provided to the *company* prior to the commencement of any *treatment*, but only if those persons are under age 25, either in full-time education or residing at the same residence as the *insured person* at the commencement of any *treatment*.

“**生效日期**”指对**被保险人**及**家属**开始承保的日期。

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

“**符合条件的女性**”指**被保险人**，或**被保险人的配偶**。

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

“**全面评价**”指为确定牙齿当前状况而进行的全面检查。

Full case assessment - extensive examination in order to establish current state of teeth.

“**医院**”指在其所在国注册或被许可为内科或外科医院，并由**医疗人员**或**合格护士**为病人提

供日常照料或护理的机构。

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

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

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

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

List of benefits - the latest *list of benefits* which the *company* has published for the CIGNA Additional Global Group Dental Insurance Contract, 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。

Oral health - 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**疾病治疗**，该程序或**疾病治疗**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。

Orthodox - 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**疾病治疗**的**被保险人**或**家属**。

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

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

People’s Republic of China: excluding HongKong, Macao and Taiwan.

“**配偶**”指**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**被保险人**的未婚或事实伴侣。

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

“**疾病治疗**”指符合以下条件的牙科程序或服务：

Treatment - 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.

“**保险年度**”指自**起始日**或**年度续签日**起算的一年期间。

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

手续费：指本合同的服务和管理成本，该成本占年度保险费的 35%。

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