



Critical Illness 188 Whole Life Insurance Plan

Protection for Happy Moment and A Blessed Future



中銀人壽
BOC LIFE

您的終身伙伴
YOUR LIFE PARTNER

While you are busy working for a living and fighting for your goals every day, have you taken care of your health? In the unfortunate event that you suffer from an illness, or worse yet a serious one, treatment expenses often exceed your budget and may also place a burden on your beloved family. BOC Group Life Assurance Company Limited (“BOC Life”) offers you **Critical Illness 188 Whole Life Insurance Plan** (“the Plan”) that understands your needs, provides you with multiple protection, such that you and your beloved family are protected by coverage for your future medical expenses.



The Plan provides coverage for 188 types of illnesses in total including Major Illnesses, Special Illnesses, Minor Illnesses and Juvenile Illnesses. Furthermore, the Plan also provides Continuous Support Benefit^{1, 4}, Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} and Additional Kidney Failure Benefit^{3, 4}, and the coverage for admission to Intensive Care Unit⁵. The Insured, the Beneficiary or Policy Owner (as the case may be) is also entitled to claim Extra Protection of Death Benefit or Extra Protection of Major Illness Benefit⁶ during the first 10 Policy Years, while the maximum amount payable under the Plan in total can be up to 550%⁷ of Sum Insured. In addition to providing Waiver of Premium Benefit after the Insured’s Diagnosis of Major Illness⁸, Waiver of Premium Benefit is also provided in the event of death of the Insured’s spouse⁹ or parent¹⁰ as a caring protection and financial shield for you and your beloved family.

Plan Overview

Upon all relevant documents are received and the claim application is accepted by BOC Life, the Plan will pay the following benefit(s):

- Coverage on 188 types of illnesses including Major Illnesses, Special Illnesses, Minor Illnesses and Juvenile Illnesses
- Continuous Support Benefit^{1, 4}
- Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} and Additional Kidney Failure Benefit^{3, 4}
- Coverage for admission to Intensive Care Unit⁵
- Extra Protection of Death Benefit or Extra Protection of Major Illness Benefit⁶
- Waiver of Premium upon death of the Insured’s spouse⁹ or parent¹⁰
- Enhanced coverage for benign condition¹¹

The Plan also provides:

- Terminal Dividend¹² (non-guaranteed)
- Second Medical Opinion Services¹³ and 24-Hour Worldwide Emergency Assistance Services¹³

Major Illness Benefit¹⁴

If the Insured is Diagnosed by a Physician to be suffering from any one of the 89 covered Major Illnesses during the coverage period, the Plan will pay the Major Illness Benefit¹⁴, the amount is equivalent to the 100% of Sum Insured^{Note}.

Special Illness Benefit¹⁵

If the Insured is Diagnosed by a Physician to be suffering from any one of the 6 covered Special Illnesses during the coverage period, the Plan will pay the Special Illness Benefit¹⁵, the amount is equivalent to 50% of Sum Insured^{Note}.

Minor Illness Benefit¹⁵

If the Insured is Diagnosed by a Physician to be suffering from any one of the 76 covered Minor Illnesses during the coverage period, the Plan will pay the Minor Illness Benefit¹⁵, the amount is equivalent to 20% of Sum Insured^{Note}.

Juvenile Illness Benefit¹⁵

If the Insured is Diagnosed by a Physician to be suffering from any one of the 17 covered Juvenile Illnesses before the Age of 18, the Plan will pay the Juvenile Illness Benefit¹⁵, the amount is equivalent to 20% of Sum Insured^{Note}.

Note: For the restrictions, definitions and benefit details of the Major Illnesses, Special Illnesses, Minor Illnesses or Juvenile Illnesses, please refer to the “Benefits Overview”, “Covered Illnesses at a Glance” and policy documents and provisions issued by BOC Life.

Continuous Support Benefit^{1, 4}

If the Insured is Diagnosed by a Physician to be suffering from Cancer, Heart Attack, Stroke or Kidney Failure, the Plan will pay the Continuous Support Benefit¹ for such disease without the submission of additional proof after the payment of Major Illness Benefit¹⁴, Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} or Additional Kidney Failure Benefit^{3, 4} (as the case may be) to the Policy Owner, the amount of benefit payable is equivalent to 2% of Sum Insured, until the end of a period of 12 policy months.

Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} and Additional Kidney Failure Benefit^{3, 4}

After the payment of Major Illness Benefit¹⁴, if the Insured is Diagnosed with Cancer, Heart Attack, Stroke and/or Kidney Failure, the Plan will provide a maximum of 4 additional payments. The amount of benefit payable is equivalent to 100% of Sum Insured for each claim, less Continuous Support Benefit paid or payable for the Diagnosis of Immediately Preceding Cancer or Immediately Preceding Major Illness (which is not Cancer) (for the benefit details, please refer to the Benefits Overview).

Coverage for admission to Intensive Care Unit⁵

If the Insured is admitted to the Intensive Care Unit for treatment and such admission to Intensive Care Unit falls within corresponding covered illnesses category based on the severity of the relevant condition, the Plan will pay either 20% of Sum Insured or 100% of Sum Insured to the Policy Owner (as the case may be).

Condition	Covered illness category	Amount payable
(i) Admission to ICU due to Major Medical Treatment: Use of Invasive Life Support for 120 or more consecutive hours and with the actual undergoing of a complex surgery during the same hospital admission	Major Illness	100% of Sum Insured
(ii) Admission to ICU due to Minor Medical Condition: Use of Invasive Life Support for 72 or more consecutive hours	Minor Illness	20% of Sum Insured

For the benefit details, please refer to the “Benefits Overview”.

Extra Protection of Death Benefit or Major Illness Benefit⁶

If the Insured unfortunately passes away or is first Diagnosed by a Physician to be suffering from any one of the covered Major Illnesses within the first 10 Policy Years, apart from the Death Benefit or Major Illness Benefit¹⁴ covered by the Plan, an extra 50% of Sum Insured is also available to be claimed as an extra protection benefit to the Beneficiary or Policy Owner (as the case may be).

Waiver of Premium upon death of the Insured's spouse⁹ or parent¹⁰

In the event that the Insured's spouse (applicable to the Insured of Age 18 or above)⁹ or parent (applicable to the Insured under the Age of 18)¹⁰ unfortunately passes away during the Premium Payment Term, the Plan will waive the premiums due from the next premium due date after the date of death of the Insured's spouse⁹ or parent¹⁰ (as the case may be) for a designated payment term. Taking Waiver of Premium Benefit due to Parent's Death¹⁰ as an example, the Plan will waive the said future premiums until the Policy Anniversary on or immediately following the Insured's 25th birthday or until the end of the Premium Payment Term, whichever is earlier, so as to reduce the financial burden. For Waiver of Premium Benefit due to Spouse's Death⁹, the Plan will waive the said future premiums until the end of Premium Payment Term. Under all circumstances, either Waiver of Premium Benefit due to Spouse's Death⁹ or Waiver of Premium Benefit due to Parent's Death¹⁰ can be exercised only once under each policy.



 **Enhance the coverage for benign condition**

 **Terminal Dividend¹² raises potential returns**

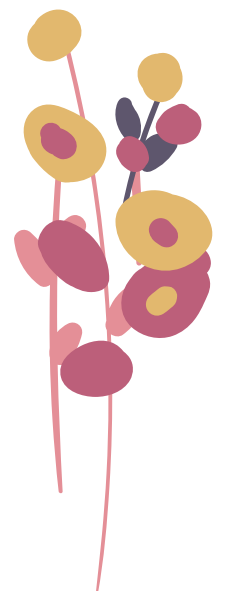
The Plan provides coverage on 22 types of critical surgery arising from benign condition, the benefit amount is equivalent to 20% of Sum Insured, to help the Insured treat the benign condition before it takes a turn for the worse.

In addition, if the benign condition declared by the Insured during the application is not relapsed and deteriorated after a 2-year waiting period and meets the relevant underwriting requirements at that time, the Policy Owner can request for re-underwriting¹⁶ after policy issuance, with the chance to waive premium loading and/or case-based exclusion arising from such declared benign condition. Re-underwriting is subject to the prevailing underwriting guidelines and requirements, and the terms and conditions as determined by BOC Life from time to time. Please contact BOC Life for details.

Terminal Dividend¹² (non-guaranteed) (if any) will be payable upon the death of the Insured or upon the Policy Owner's surrender of the policy or upon payment of the Major Illness Benefit¹⁴ by BOC Life (whichever is earliest). Terminal Dividend¹² (if any) is non-guaranteed and can be changed from time to time by BOC Life.

22 types of Critical Surgery due to Benign Condition¹¹

Organs	Critical Surgery
Cardiovascular	<ol style="list-style-type: none"> 1. Endarterectomy of intracranial vessels 2. Exploration & ligation of cerebral aneurysm 3. Open operation on heart or thoracic aorta 4. Repair of hypoplastic left heart syndrome 5. Resection of intracranial vessels with anastomosis 6. Resection of intracranial vessels with replacement
Chest	<ol style="list-style-type: none"> 7. Oesophagectomy
Digestive system	<ol style="list-style-type: none"> 8. Extended hepatectomy, left or right 9. Hepatectomy, left or right 10. Intrathoracic oesophageal anastomosis with interposition of small bowel 11. Radical pancreaticoduodenectomy 12. Whipple operation
Ear, Nose or Throat	<ol style="list-style-type: none"> 13. Laryngectomy, with radical neck resection
Head and Neck	<ol style="list-style-type: none"> 14. Craniectomy, Craniotomy 15. Cutting into cranial cavity (trephine excepted) without excision of brain tumour 16. Excision of brain including lobectomy, excluding hemispherectomy 17. Hemispherectomy 18. Shunting operation for hydrocephalus
Spine or Spinal Cord	<ol style="list-style-type: none"> 19. Anterior spinal fusion 20. Excision of spinal cord tumour
Urinary system	<ol style="list-style-type: none"> 21. Radical cystectomy and orthotopic bladder reconstruction, laparoscopic with robot assistance 22. Total cystectomy & cystoplasty



Plan Summary

Coverage Period	Whole life ¹⁷		
Premium Payment Term	10 years*	20 years	25 years
Issue Age	Age 0 (starting from 15 days after birth) to age 65	Age 0 (starting from 15 days after birth) to age 55	Age 0 (starting from 15 days after birth) to age 50
Minimum Sum Insured	RMB66,000 (RMB policy) / HKD80,000 (HKD policy) / USD10,000 (USD policy)		
Policy Currency	RMB / HKD / USD		
Premium Payment Mode	Annual / Semi-annual / Quarterly / Monthly		
Other service	Second Medical Opinion Services ¹³ and 24-Hour Worldwide Emergency Assistance Services ¹³		

* Premium Deposit Account¹⁸ is only applicable to the policy with 10-years Premium Payment Term and annual premium payment mode.

Note: For the maximum Sum Insured limit per life, please contact your Financial Consultant.





Illustrative Example 1:



Mrs Chan (non-smoker) at age 30 is insured under the Plan, with Premium Payment Term of 20 years, and Sum Insured of USD50,000.



Mrs Chan receives a total amount of USD275,000*, which is equivalent to **550% of Sum Insured⁷**.

* Non-guaranteed Terminal Dividend is not included in the calculation of the amounts payable for the above Major Illnesses, and the illustrative example assumes that (i) all premiums have been paid in full when due (with the exception of premiums waived under Waiver of Premium Benefit due to Spouse's Death⁹) and (ii) no policy loans have been taken out.

The above example is for illustrative purposes only. Customers should opt for a suitable insurance product as well as Sum Insured based on their own circumstances, including needs and affordability. The details of the Plan and the supplementary riders (if any) (including but not limited to insured items and coverage, detailed terms, key risks, conditions, exclusions, policy costs and fees) are subject to the formal policy documents and provisions issued by BOC Life. Please contact your Financial Consultant for enquiry.



Illustrative Example 2:



Mr Cheung (non-smoker) applies for the Plan at age 35, and chooses a Premium Payment Term of 25 years with Sum Insured of HKD1,000,000.



In the above illustrative example, Mr Cheung receives a total amount of HKD4,740,000*, which is equivalent to **474% of Sum Insured**.

In the above illustrative example, If Mr Cheung is unfortunately diagnosed with Cancer, Heart Attack or Stroke in the future, this policy has **76% of Sum Insured** remaining to entitle Mr Cheung to make one more claim for Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4} or Additional Stroke Benefit^{3, 4} (as the case may be). The amount payable in total for this policy can be **up to 550% of Sum Insured⁷**.

* Non-guaranteed Terminal Dividend is not included in the calculation of the amounts payable for the above Major Illnesses (with the exception of premiums waived under Waiver of Premium Benefit after Major Illness⁸), and the illustrative example assumes that (i) all premiums have been paid in full when due and (ii) no policy loans have been taken out.

The above example is for illustrative purposes only. Customers should opt for a suitable insurance product as well as Sum Insured based on their own circumstances, including needs and affordability. The details of the Plan and the supplementary riders (if any) (including but not limited to insured items and coverage, detailed terms, key risks, conditions, exclusions, policy costs and fees) are subject to the formal policy documents and provisions issued by BOC Life. Please contact your Financial Consultant for enquiry.



Major Illnesses

1. Cancer	1.a Cancer		
2. Heart and related illnesses	2.a Cardiomyopathy 2.b Coronary Artery Angioplasty - Triple Vessel 2.c Coronary Artery Disease Requiring Surgery	2.d Other Serious Coronary Artery Disease 2.e Dissecting Aortic Aneurysm 2.f Eisenmenger's Syndrome 2.g Heart Attack	2.h Heart Valve Surgery 2.i Primary Pulmonary Arterial Hypertension 2.j Infective Endocarditis 2.k Surgery to Aorta
3. Neurological System and related illnesses	3.a Alzheimer's Disease 3.b Apallic Syndrome 3.c Bacterial Meningitis 3.d Benign Brain Tumour 3.e Coma 3.f Encephalitis 3.g Major Head Trauma* 3.h Multiple Sclerosis 3.i Muscular Dystrophy* 3.j Paralysis 3.k Parkinson's Disease*	3.l Poliomyelitis 3.m Stroke 3.n Motor Neurone Disease* 3.o Amyotrophic Lateral Sclerosis* 3.p Primary Lateral Sclerosis* 3.q Progressive Bulbar Palsy* 3.r Spinal Muscular Atrophy* 3.s Progressive Muscular Atrophy 3.t Creutzfeldt-Jacob Disease	3.u Progressive Supranuclear Palsy 3.v Severe Type I Juvenile Spinal Amyotrophy* 3.w Severe Type II Juvenile Spinal Amyotrophy* 3.x Brain Damage Requiring Surgery 3.y Cerebral Aneurysm or Arteriovenous Malformation Requiring Surgery 3.z Hemiplegia 3.aa Tuberculosis Meningitis
4. Major Organs Failure and related illnesses	4.a Acute Necrohemorrhagic Pancreatitis 4.b Aplastic Anaemia 4.c Kidney Failure 4.d Chronic Auto-immune Hepatitis 4.e Chronic Liver Disease 4.f Chronic Obstructive Lung Disease	4.g Chronic Relapsing Pancreatitis 4.h Chronic Respiratory Failure 4.i End Stage Lung Disease 4.j Fulminant Hepatitis 4.k Major Organ Transplantation (on waiting list at least 5 years) 4.l Medullary Cystic Disease	4.m Myelofibrosis 4.n Severe Bronchiectasis 4.o Severe Emphysema 4.p Severe Ulcerative Colitis 4.q Systemic Lupus Erythematosus with Lupus Nephritis 4.r Systemic Sclerosis
5. Other Major Illnesses	5.a Admission to ICU due to Major Medical Treatment 5.b HIV due to Blood Transfusion 5.c Blindness 5.d Chronic Adrenal Insufficiency 5.e Loss of Hearing 5.f Ebola Hemorrhagic Fever 5.g Elephantiasis 5.h Hemolysis Streptococcus Gangrene 5.i HIV Infection due to Assault 5.j Loss of Independent Existence [#]	5.k Loss of One Limb and Sight of One Eye 5.l Loss of Speech* 5.m Major Burns 5.n Necrotising Fasciitis 5.o Occupationally Acquired HIV 5.p Optic Nerve Atrophy 5.q Permanent Tracheostomy 5.r Pheochromocytoma 5.s Loss of Limbs 5.t Crohn's Disease 5.u Severe Diabetic Retinopathy 5.v Severe Myasthenia Gravis	5.w Severe Osteogenesis Imperfecta 5.x Severe Osteoporosis with Fractures 5.y Severe Psoriasis with Arthritis 5.z Severe Pulmonary Fibrosis 5.aa Severe Rheumatoid Arthritis 5.ab Severe Still's Disease* 5.ac Severe Systemic Juvenile Rheumatoid Arthritis* 5.ad Severe Wilson's Disease 5.ae Terminal Illness 5.af Total and Permanent Disability [@]

Special Illnesses

S1. Carcinoma-in-situ	S1.a Carcinoma-in-situ of Breast Treated with Radical Mastectomy
S2. Early Stage Malignancies	S2.a Early Stage of Prostate Cancer with Prostatectomy
S3. Heart and related illnesses	S3.a Secondary Pulmonary Arterial Hypertension
S4. Neurological System and related illnesses	S4.a Locked in Syndrome
S5. Major Organs Failure and related illnesses	S5.a Liver Cirrhosis S5.b Chronic Primary Sclerosing Cholangitis

Minor Illnesses

M1. Carcinoma-in-situ	M1.a Carcinoma-in-situ		
M2. Early Stage Malignancies	M2.a Early Stage Malignancies		
M3. Heart and related illnesses	M3.a Angioplasty	M3.g Insertion of a Vena-Cava filter	M3.m Less Severe Infective Endocarditis
	M3.b Coronary Angioplasty	M3.h Insertion of Cardiac Defibrillator	M3.n Less Severe Primary Pulmonary Arterial Hypertension
	M3.c Minimally Invasive Direct Coronary Artery By-pass	M3.i Insertion of Cardiac Pacemaker	M3.o Pericardectomy
	M3.d Carotid Endarterectomy, Angioplasty or Implant Stenting for Carotid Arteries	M3.j Percutaneous Heart Valve Surgery	M3.p Less Severe Secondary Pulmonary Arterial Hypertension
	M3.e Endovascular Treatments of Aortic Disease or Aortic Aneurysm	M3.k Less Severe Cardiomyopathy	M3.q Transmyocardial Laser Revascularisation
	M3.f Endovascular Treatment of Peripheral Arterial Disease	M3.l Less Severe Heart Disease	
M4. Neurological System and related illnesses	M4.a Cerebral Arteriovenous Malformation Requiring Surgery	M4.h Less Severe Major Head Trauma	M4.o Less Severe Viral Encephalitis
	M4.b Cerebral Shunt Insertion	M4.i Less Severe Motor Neurone Disease	M4.p Moderately Severe Creutzfeldt-Jacob Disease*
	M4.c Early Stage Dementia including Early Stage Alzheimer's Disease*	M4.j Less Severe Parkinson's Disease	M4.q Moderately Severe Paralysis
	M4.d Endovascular Treatment for Cerebral Aneurysm	M4.k Less Severe Poliomyelitis	M4.r Severe Psychiatric Illness
	M4.e Less Severe Amyotrophic Lateral Sclerosis	M4.l Less Severe Primary Lateral Sclerosis	M4.s Surgery for Subdural Haematoma
	M4.f Less Severe Bacterial Meningitis	M4.m Less Severe Progressive Bulbar Palsy	M4.t Surgical Removal of Pituitary Tumour
	M4.g Less Severe Coma	M4.n Less Severe Spinal Muscular Atrophy*	M4.u Temporal Arteritis or Cranial Arteritis
M5. Major Organs Failure and related illnesses	M5.a Less Severe Aplastic Anaemia	M5.f Less Severe Kidney Disease	M5.j Miliary Tuberculosis
	M5.b Biliary Tract Reconstruction Surgery	M5.g Less Severe Systemic Lupus Erythematosus	M5.k Surgical Removal of One Kidney
	M5.c Chronic Lung Disease	M5.h Liver Surgery	M5.l Surgical Removal of One Lung
	M5.d Early Renal Failure	M5.i Major Organ Transplantation (on Waiting List)	M5.m Less Severe Ulcerative Colitis
	M5.e Hepatitis with Cirrhosis		
M6. Other Minor Illnesses	M6.a Adrenalectomy for Adrenal Adenoma	M6.i Less Severe Loss of Independent Existence [#]	M6.q Psoriasis with Arthritis
	M6.b Cochlear Implant Surgery	M6.j Less Severe Myasthenia Gravis	M6.r Severe Central or Mixed Sleep Apnoea
	M6.c Diabetic Retinopathy	M6.k Less Severe Rheumatoid Arthritis	M6.s Severe Obstructive Sleep Apnoea
	M6.d Early Elephantiasis	M6.l Less Severe Total and Permanent Disability [®]	M6.t Severe Polyarticular Gouty Arthritis*
	M6.e Facial Burns due to Accident	M6.m Loss of Hearing in One Ear	M6.u Severe Endometriosis with Surgical Treatment
	M6.f Facial Reconstructive Surgery for Injury due to Accident	M6.n Loss of One Limb	M6.v Admission to ICU due to Minor Medical Condition
	M6.g Less Severe Burns to Body due to Accident	M6.o Loss of Sight of One Eye*	M6.w Critical Surgery due to Benign Condition
	M6.h Less Severe Crohn's Disease	M6.p Osteoporosis with Fractures ⁺	

Juvenile Illnesses

J1.a	Kawasaki Disease	J1.f	Type II Juvenile Spinal Amyotrophy	J1.l	Still's Disease
J1.b	Rheumatic Fever with Valvular Impairment	J1.g	Severe Asthma	J1.m	Systemic Juvenile Rheumatoid Arthritis
J1.c	Autism	J1.h	Dengue Haemorrhagic Fever	J1.n	Wilson's Disease
J1.d	Intellectual Impairment due to Sickness and / or Accidental Bodily Injury~	J1.i	Insulin Dependent Diabetes Mellitus	J1.o	Juvenile Severe Epilepsy
J1.e	Type I Juvenile Spinal Amyotrophy	J1.j	Osteogenesis Imperfecta	J1.p	Juvenile Huntington Disease
		J1.k	Severe Haemophilia	J1.q	Marble Bone Disease (Osteopetrosis)

- * Coverage is only applicable to the Insured aged 6 years old or above.
 # Coverage is only applicable to the Insured aged 6 to 65 years old.
 @ Coverage is only applicable to the Insured aged 6 to 75 years old.
 + Coverage will be ceased after the Insured attains the Age of 70 years old.
 ~ Coverage is only available to the Insured aged 4 years old or above.



Benefits Overview

Upon all relevant documents are received and the claim application is accepted by BOC Life, the Plan will pay the following benefit(s):

Type of Protection	Coverage Period	Summary of Coverage	Key Points to Note
Major Illness Benefit¹⁴ 89 Major Illnesses	Whole Life ¹⁷ (Except Loss of Independent Existence [#] and Total and Permanent Disability [@])	100% of Sum Insured + Extra Protection of Major Illness Benefit ⁶ (only applicable to the first 10 Policy Years) + Terminal Dividend ¹² (non-guaranteed) (if any) - The aggregate total benefit paid for Special Illness Benefit ¹⁵ , Minor Illness Benefit ¹⁵ and Juvenile Illness Benefit ¹⁵ - Any indebtedness and any outstanding premiums	<ul style="list-style-type: none"> Upon approval of a claim for the Major Illness Benefit¹⁴, as of the date of first Diagnosis of the Major Illness, Special Illness Benefit¹⁵, Juvenile Illness Benefit¹⁵, Minor Illness Benefit¹⁵, Major Illness Benefit¹⁴, and Death Benefit shall be terminated
Special Illness Benefit¹⁵ 6 Special Illnesses	Whole Life ¹⁷	50% of Sum Insured - Any indebtedness and any outstanding premiums	<ul style="list-style-type: none"> Each Special Illness is only limited to one claim only except for Carcinoma-in-situ which shall be limited to a maximum of 2 payments under Special Illness Benefit¹⁵ and Minor Illness Benefit¹⁵ (which must occur in different organs each time) In any case, payment of each claim under the same Event cannot exceed the maximum amount (per illness per life) of RMB495,000 (RMB policy)/HKD600,000 (HKD policy)/USD75,000 (USD policy), the amount payable is subject to the deduction of all benefit amounts in respect of such kind of Special Illness paid or payable under all policies issued by BOC Life on the life of the Insured The maximum amount payable for Special Illness Benefit¹⁵ and/or Minor Illness Benefit¹⁵ and/or Juvenile Illness Benefit¹⁵ in total is 100% of Sum Insured under each policy

Type of Protection	Coverage Period	Summary of Coverage	Key Points to Note
Minor Illness Benefit¹⁵ 76 Minor Illnesses	Whole Life ¹⁷ (Except Less Severe Loss of Independent Existence [#] , Less Severe Total and Permanent Disability [®] and Osteoporosis with Fractures ⁺)	20% of Sum Insured – Any indebtedness and any outstanding premiums	<ul style="list-style-type: none"> Each Minor Illness is only limited to one claim only except for Carcinoma-in-situ which shall be limited to a maximum of 2 payments under Special Illness Benefit¹⁵ and Minor Illness Benefit¹⁵ (which must occur in different organs each time) In any case, payment of each claim under the same Event cannot exceed the maximum amount (per illness per life) of RMB330,000 (RMB policy)/HKD400,000 (HKD policy)/USD50,000 (USD policy), the amount payable is subject to the deduction of all benefit amounts in respect of such kind of Minor Illness paid or payable under all policies issued by BOC Life on the life of the Insured The maximum amount payable for Special Illness Benefit¹⁵ and/or Minor Illness Benefit¹⁵ and/or Juvenile Illness Benefit¹⁵ in total is 100% of Sum Insured under each policy In the event of Admission to ICU due to Minor Medical Condition⁵, if the stay in ICU is located in the PRC or Macau, the hospital must be on the prevailing "List of Specified Hospitals in the PRC and Macau" maintained by BOC Life and uploaded to the website of BOC Life and at the time of admission to be eligible for benefit payable; if the stay in ICU takes place outside of Hong Kong and Macau, the benefit payable will be halved
Juvenile Illness Benefit¹⁵ 17 Juvenile Illnesses	Before the Insured attains the Age of 18	20% of Sum Insured – Any indebtedness and any outstanding premiums	<ul style="list-style-type: none"> Each Juvenile Illness is only limited to one claim only In any case, payment of each claim under the same Event cannot exceed the maximum amount (per illness per life) of RMB330,000 (RMB policy)/HKD400,000 (HKD policy)/USD50,000 (USD policy), the amount payable is subject to the deduction of all benefit amounts in respect of such kind of Juvenile Illness paid or payable under all policies issued by BOC Life on the life of the Insured The maximum amount payable for Special Illness Benefit¹⁵ and/or Minor Illness Benefit¹⁵ and/or Juvenile Illness Benefit¹⁵ in total is 100% of Sum Insured under each policy
Waiver of Premium Benefit due to Spouse's Death⁹	Only applicable for the Insured of Age 18 or above	The premiums paid or payable due from the next premium due date after the date of death of the Insured's spouse will be waived until the end of the Premium Payment Term	<ul style="list-style-type: none"> Each policy can exercise either Waiver of Premium due to Spouse's Death⁹ or Waiver of Premium due to Parent's Death¹⁰ once only For other key points to note, please refer to remark 9
Waiver of Premium Benefit due to Parent's Death¹⁰	Only applicable for the Insured under the Age of 18	The premiums paid or payable due from the next premium due date after the date of death of the Insured's parent will be waived until the end of Premium Payment Term or the Policy Anniversary on or immediately following the Insured's Age of 25 (whichever is earlier)	<ul style="list-style-type: none"> Each policy can exercise either Waiver of Premium due to Spouse's Death⁹ or Waiver of Premium due to Parent's Death¹⁰ once only For other key points to note, please refer to remark 10
Continuous Support Benefit^{1, 4}	Until the Policy Anniversary on or immediately following the Insured's Age of 100	Monthly payment of 2% of Sum Insured, until the end of a period of 12 policy months	<ul style="list-style-type: none"> Continuous Support Benefit^{1, 4} is payable after the payment of Major Illness Benefit¹⁴, Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} or Additional Kidney Failure Benefit^{3, 4} (as the case may be) for Cancer, Heart Attack, Stroke or Kidney Failure to the Policy Owner on monthly basis without the submission of additional proof The maximum amount payable for Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4}, Additional Kidney Failure Benefit^{3, 4} and Continuous Support Benefit^{1, 4} in total is 400% of Sum Insured

Type of Protection	Coverage Period	Summary of Coverage	Key Points to Note
Additional Cancer Benefit^{2, 4} Additional Heart Attack Benefit^{3, 4} Additional Stroke Benefit^{3, 4} Additional Kidney Failure Benefit^{3, 4}	Until the Policy Anniversary on or immediately following the Insured's Age of 88	100% of Sum Insured for each claim – any Continuous Support Benefit ^{1, 4} paid or payable for the Immediately Preceding Cancer or Immediately Preceding Major Illness (which is not Cancer)	<ul style="list-style-type: none"> Provide a maximum of 4 additional claims, provided that Kidney Failure can only be claimed once under the Plan The maximum amount payable for Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4}, Additional Kidney Failure Benefit^{3, 4} and Continuous Support Benefit^{1, 4} in total is 400% of Sum Insured
Death Benefit	Whole Life	100% of Sum Insured + Extra Protection of Death Benefit ⁶ (only applicable for the first 10 Policy Years) + Terminal Dividend ¹² (non-guaranteed) (if any) – The aggregate total benefit paid for Special Illness Benefit ¹⁵ , Minor Illness Benefit ¹⁵ and Juvenile Illness Benefit ¹⁵ – Any indebtedness and any outstanding premiums	Not applicable

Waiting Period and Conditions



Type of Protection	Immediately Preceding Major Illness	Waiting Period and Conditions
Additional Cancer Benefit^{2, 4}	Any (which is not a Cancer)	For each claim, the date of first Diagnosis of such subsequent Cancer must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Major Illness (which is not Cancer).
	Cancer (and the subsequent Cancer is a new Cancer unrelated to and caused by a different cell not originated from the Immediately Preceding Cancer)	For each claim, the date of first Diagnosis of such subsequent new Cancer (unrelated to and caused by a different cell not originated from the Immediately Preceding Cancer) must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Cancer. In the case that the date of the first Diagnosis of such subsequent Cancer is within 1 year after the date of first Diagnosis of the Immediately Preceding Cancer, the Additional Cancer Benefit will only be paid if such subsequent Cancer is confirmed by a Physician to be still subsisting at least 3 years after the date of first Diagnosis of the Immediately Preceding Cancer.
	Cancer (and the subsequent Cancer is the continuation, metastasis or recurrence of or is related to the Immediately Preceding Cancer)	For each claim, the date of first Diagnosis of such subsequent Cancer (the continuation, metastasis or recurrence of or is related to the Immediately Preceding Cancer) must be at least 3 years after the date of first Diagnosis of the Immediately Preceding Cancer.
Additional Heart Attack Benefit^{3, 4}	Any	<p>For each claim, the date of first Diagnosis of such subsequent Heart Attack must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Major Illness or Immediately Preceding Cancer for which Major Illness Benefit¹⁴, Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} or Additional Kidney Failure Benefit^{3, 4} has been paid (as the case may be).</p> <p>The Physician who is a cardiologist must certify that such subsequent Heart Attack is a new and separate Heart Attack from any of the previous one(s) (if applicable).</p>

Type of Protection	Immediately Preceding Major Illness	Waiting Period and Conditions
Additional Stroke Benefit^{3, 4}	Any	<p>For each claim, the date of first Diagnosis of such subsequent Stroke must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Major Illness or Immediately Preceding Cancer for which Major Illness Benefit^{1, 4}, Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4}, Additional Stroke Benefit^{3, 4} or Additional Kidney Failure Benefit^{3, 4} has been paid (as the case may be).</p> <p>The Diagnosis of such subsequent Stroke must be supported by new imaging evidence consistent with Diagnosis of such subsequent Stroke (if applicable).</p>
Additional Kidney Failure Benefit^{3, 4}	Any (except Kidney Failure)	<p>The date of first Diagnosis of such subsequent Kidney Failure must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Major Illness or Immediately Preceding Cancer for which Major Illness Benefit^{1, 4}, Additional Cancer Benefit^{2, 4}, Additional Heart Attack Benefit^{3, 4} or Additional Stroke Benefit^{3, 4} has been paid (as the case may be).</p> <p>Note: Kidney Failure can be claimed once only under the Plan.</p>



Act now!

Please contact your Financial Consultants for details of the Plan.

BOC life

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Investment Strategy, Philosophy in Deciding Dividends and Fulfillment Ratio

BOC Life invests globally in various types of assets, in order to achieve the advantages of diversification in investment portfolio. The assets supporting the policies under the Plan mainly consist of the following:

	Mix
Fixed income instruments or interest-bearing securities	40%-60%
Growth assets	40%-60%

Fixed income instruments or interest-bearing securities include but not limited to government and corporate bonds, etc.

- BOC Life primarily invests in investment-grade bonds, together with a small portion of high-yield bonds and emerging-market bonds to further improve yield.
- Under normal circumstances, the major markets invested by BOC Life are North America, the Chinese mainland, Hong Kong China and other Asian developed countries.

Growth assets include but not limited to listed equity, private equity, mutual funds, properties investment, etc. BOC Life invests in diversified growth assets, which aims to achieve a higher long-term return over fixed income investments.

With the aim of achieving our long-term investment target, BOC Life, at our sole discretion, reserves the right to adjust the aforementioned asset allocation when there are material changes in market outlook and condition, or engage in other financial arrangements including but not limited to reinsurance arrangement. BOC Life aims at investing in assets denominated in policy's currency. If the currency by which the assets are denominated is not the same as policy currency, BOC Life may use derivatives to manage the impact of currency risk.

For the latest Investment Strategy, please refer to BOC Life website www.boclif.com.hk.

Philosophy in Deciding Dividends

Participating insurance plans provide policy owners an opportunity to receive a share of profits attributable to the participating life insurance business of BOC Life by means of dividends, with the potential prospect of long-term rates of return. To accomplish the purpose, we invest in a wide range of asset portfolios that are prudently chosen by BOC Life to balance the risk. In general, the asset portfolios mainly consist of fixed income securities and equity investments.

The actual amount of dividends is determined by the stipulated surplus sharing approach in BOC Life's policy, which is based on the past experience of BOC Life and the long-term expectation of the participating life insurance business in the future. Dividends amount mainly depends on the overall performance of the participating life insurance business of BOC Life, taking into account factors including

investment returns, claim experience, persistency and operating expense. The actual amount of dividends payable is recommended by our Appointed Actuary according to the aforementioned company's policy and approved by the Board of Directors of BOC Life. In light of the above factors, dividends and Dividend Accumulation Rate (if any) are not guaranteed and may be higher or lower than the values illustrated in the benefit illustration provided at point of sale.

You may browse the following website, www.boclif.com.hk/ps, to understand BOC Life's philosophy in deciding dividends as well as dividend history for reference purposes. Please note that past performance of dividend is not an indicator for its future performance.

Risk Disclosure of RMB and USD Insurance

RMB and USD policies are subject to exchange rate risk. The exchange rate between RMB and HKD or USD and HKD may rise as well as fall. Therefore, if calculated in HKD, premiums, fees and charges (where applicable), account value / surrender value and other benefits payable under RMB or USD policy will vary with the exchange rate. The exchange rate between RMB and HKD or USD and HKD will be the market-based prevailing exchange rate determined by BOC Life from time to time, which may not be the same as the spot rate of banks. The fluctuation in exchange rate may result in losses if a customer chooses to pay premiums in HKD, or requests the insurer to pay the account value / surrender value or other benefits payable in HKD, for RMB or USD policy. **RMB Conversion Limitation Risk** - RMB Insurance is subject to exchange rate fluctuations which may provide both opportunities and risks. The fluctuation in the exchange rate of RMB may result in losses in the event that the customer converts RMB into HKD or other foreign currencies. (Only applicable to Individual Customers) RMB is currently not fully freely convertible. Individual customers can be offered CNH rate to conduct conversion of RMB through bank accounts and may occasionally not be able to do so fully or immediately, for which it is subject to the RMB position of the banks and their commercial decisions at that moment. Customers should consider and understand the possible impact on their liquidity of RMB funds in advance. (Only applicable to Corporate Customers) RMB is currently not fully freely convertible. Corporate customers that intend to conduct conversion of RMB through banks may occasionally not be able to do so fully or immediately, for which it is subject to the RMB position of the banks and their commercial decisions at that moment. Customers should consider and understand the possible impact on their liquidity of RMB funds in advance.

Credit Risk

Insurance contract is signed between customers and BOC Life. Therefore, customers are subject to the credit risk of BOC Life. Premiums paid by Policy Owner will become part of BOC Life. If BOC Life becomes insolvent or goes into liquidation or defaults on its obligations, customers may result in substantial losses.

Market and Interest Rate Risk

The insurance plan is a life insurance product. Changes in market and interest rate risk borne by insurance company which will not affect the guarantee return of the policy.

Liquidity Risk

To apply an insurance plan, customers have to pay premium for designated payment term(s). Customers should consider their affordability before applying an insurance plan.

Insurance plans offer protection for designated benefit term(s). Customers have to hold the insurance plan for the assigned period of time. If customers would like to surrender the insurance plan before maturity, the amount to be received may be significantly less than the premium paid. Therefore, customers should consider their liquidity needs before applying an insurance plan.

Other Key Risks:

• Key Exclusions:

(Only applicable for Major Illness Benefit, Special Illness Benefit, Minor Illness Benefit, Juvenile Illness Benefit, Additional Cancer Benefit, Additional Heart Attack Benefit, Additional Stroke Benefit, Additional Kidney Failure Benefit and Continuous Support Benefit)

- (a) The benefit payable does not apply to any of the following or any event resulting from, or related to, or caused or contributed directly or indirectly, wholly or partly, by any of the followings:
 - (i) Any Pre-existing Condition[^];
 - (ii) Drug-taking other than under the direction of a Physician, abuse of alcohol or the taking of poison;
 - (iii) Disease of or infection with any Human Immunodeficiency Virus (HIV) and / or any HIV-related illness including Acquired Immune Deficiency Syndrome (AIDS) and / or any mutations, derivations or variations thereof, except HIV due to Blood Transfusion or HIV Infection due to Assault or Occupationally Acquired HIV as defined under the Plan. Under the Plan, the definition of AIDS shall be that used by the World Health Organization in 1987, as may be revised by the World Health Organization from time to time;
 - (iv) War or hostilities (whether war be declared or not), civil commotion, rebellion, revolution, riot, strikes, terrorist or warlike activities;
 - (v) An intentional self-inflicted act; or
 - (vi) Violation or attempted violation of the law or resistance to arrest or participation in any brawl or affray.
- (b) No benefit will be payable under the Plan for any Major Illness, Special Illness, Minor Illness or Juvenile Illness, the symptoms or conditions of which or the Diagnosis of which first appeared or occurred within a waiting period of 60 days immediately following the Policy Issue Date or the date of endorsement or the effective date of last reinstatement, whichever is the latest. This Clause shall not apply to any Major Illness, Special Illness, Minor Illness or Juvenile Illness caused by an Accident.

[^] Pre-existing Condition means any condition or illness: (i) which existed or was existing; or (ii) where its direct cause existed or was existing; or (iii) in respect of which the Insured had knowledge, signs or symptoms of the condition or illness; or (iv) where any laboratory test or investigation showed the likely presence of the condition or illness prior to the policy issue date or the date of endorsement or the effective date of last reinstatement, whichever is the latest.

- The premium payable of the Plan at the time of application and renewal is calculated based on the following factors (if applicable), including but not limited to the Sum Insured, gender, issue age, smoking habit, Premium Payment Term, underwriting class, risk class and residency, and is not guaranteed. BOC Life reserves the right to review and adjust the premium payable at any time. Factors leading to such adjustment include but not limited to emergence of difference between actual experience and current expectation.
- The Policy Owner should pay premium on time during the Premium Payment Term. It may result in lapse or termination of the policy if the required amount (such as premium) is not made before expiry of the Grace Period (if applicable) as prescribed by BOC Life. Nevertheless, it is subject to the automatic premium loan (if applicable) (BOC Life will advance the premium due from the Non-forfeiture Value as an automatic premium loan) and non-forfeiture provisions (if applicable). If the policy is terminated or lapsed due to non-payment of premium, the surrender value received by the Policy Owner may be less than the total premiums paid and the Policy Owner will lose the insurance protection provided by the policy.
- The actual rate of inflation may be higher than expected, therefore the amount you receive may be less in real terms.

Remarks:

1. For Continuous Support Benefit, if the Insured is Diagnosed by a Physician to be suffering from Cancer, Heart Attack, Stroke or Kidney Failure on or before the Policy Anniversary on or immediately following the Insured's 100th birthday provided that the Insured has survived for a period of at least 14 days from the date of first Diagnosis of such Cancer, Heart Attack, Stroke or Kidney Failure, the Plan will pay to the Policy Owner the monthly payment of Continuous Support Benefit after the payment of Major Illness Benefit, Additional Cancer Benefit, Additional Heart Attack Benefit, Additional Stroke Benefit or Additional Kidney Failure Benefit (as the case may be) for such Cancer, Heart Attack, Stroke or Kidney Failure. Such monthly payment will be counted starting from the Monthiversary immediately following the date of first Diagnosis of such Cancer, Heart Attack, Stroke or Kidney Failure (as the case may be) until the end of a period of 12 Policy Months. If the Insured passes away within the above-mentioned period of 12 policy months, the Plan will pay to the Beneficiary a lump sum equivalent to the remaining of Continuous Support Benefit which is equivalent to the total benefit payable for Continuous Support Benefit for that particular Cancer, Heart Attack, Stroke or Kidney Failure less the total benefit paid for Continuous Support Benefit for that particular Cancer, Heart Attack, Stroke or Kidney Failure.
2. For Additional Cancer Benefit, after the payment of Major Illness Benefit, the Plan will continue to cover a multiple number of claims for subsequent Cancer until the Policy Anniversary on or immediately following the Insured's 88th birthday, provided that the Insured has survived for a period of at least 14 days from the date of first Diagnosis of such subsequent Cancer. In the case of such subsequent Cancer is Diagnosed following any Immediately Preceding Major Illness (which is not Cancer), the date of first Diagnosis of such subsequent Cancer must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Major Illness (which is not Cancer).
In the case of such subsequent Cancer is Diagnosed following any Immediately Preceding Cancer in which the subsequent Cancer is a new Cancer unrelated to and caused by a different cell not originated from the Immediately Preceding Cancer, the date of first Diagnosis of such subsequent Cancer must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Cancer. In the case that the date of first Diagnosis of such subsequent Cancer is within 1 year after the date of first Diagnosis of the Immediately Preceding Cancer, the Plan will pay the Additional Cancer Benefit only if such subsequent Cancer is confirmed by a Physician to be still subsisting at least 3 years after the date of first Diagnosis of the Immediately Preceding Cancer.
In the case of such subsequent Cancer is Diagnosed following any Immediately Preceding Cancer in which the subsequent Cancer is the continuation, metastasis or recurrence of or is related to the Immediately Preceding Cancer, the date of first Diagnosis of such subsequent Cancer must be at least 3 years after the date of first Diagnosis of the Immediately Preceding Cancer.
If the subsequent Cancer is related to or is a continuation of the Immediately Preceding Cancer which is a prostate or thyroid Cancer and provided that the date of the first Diagnosis of such subsequent Cancer falls on or after the Insured's Age of 70, the Plan will pay Additional Cancer Benefit only on the condition that the Insured has received or has been receiving an Active Treatment on the recommendation of a Physician in the relevant field, and the Active Treatment must be Medically Necessary and performed during the entire period between the date of first Diagnosis of the Immediately Preceding Cancer and the date of first Diagnosis of the subsequent Cancer.
3. For Additional Heart Attack Benefit, Additional Stroke Benefit and Additional Kidney Failure Benefit, after the payment of Major Illness Benefit, the Plan will continue to cover a multiple number of claims for subsequent Heart Attack, Stroke and/or Kidney Failure until the Policy Anniversary on or immediately following the Insured's 88th birthday, provided that the Insured has survived for a period of at least 14 days from the date of first Diagnosis of such subsequent Heart Attack, Stroke or Kidney Failure. The date of first Diagnosis of such subsequent Stroke, Heart Attack or Kidney Failure must be at least 1 year after the date of first Diagnosis of the Immediately Preceding Major Illness (which is not Cancer) or Immediately Preceding Cancer for which Major Illness Benefit or Additional Cancer Benefit or Additional Heart Attack Benefit or Additional Stroke Benefit or Additional Kidney Failure Benefit has been paid under the Plan (as the case may be).
 - 3.1 In the case of such subsequent Heart Attack following an Immediately Preceding Major Illness which is also a Heart Attack, the Physician who is a cardiologist must certify that such subsequent Heart Attack is a new and separate Heart Attack from any of the previous one(s), and the Diagnosis of such subsequent Heart Attack must be supported by new evidence set out in definition of Heart Attack under the Plan.
 - 3.2 In the case of such subsequent Stroke following an Immediately Preceding Major Illness which is also a Stroke, the Physician who is a neurologist must certify that such subsequent Stroke is a new and separate Stroke from any of the previous one(s), and the Diagnosis of such subsequent Stroke must be supported by new imaging evidence consistent with Diagnosis of such subsequent Stroke.
 - 3.3 For the avoidance of doubt, Kidney Failure can only be claimed once only under the Plan. Therefore, Additional Kidney Failure Benefit will not be paid if the Immediately Preceding Major Illness for which Major Illness Benefit has been paid under the Plan is a Kidney Failure.
4. Under the Plan, the maximum amount payable for Additional Cancer Benefit, Additional Heart Attack Benefit, Additional Stroke Benefit, Additional Kidney Failure Benefit and Continuous Support Benefit can reach 400% of Sum Insured.

5. If the Insured satisfies all of the criteria of Admission to ICU due to Major Medical Treatment or Admission to ICU due to Minor Medical Condition and such condition is directly or indirectly arising from or in connection with any other Major Illness or Minor Illness falling within the defined illnesses under the Plan other than Admission to ICU due to Major Medical Treatment or Admission to ICU due to Minor Medical Condition, the benefit payable shall be the Major Illness Benefit or the Minor Illness Benefit for such Major Illness or Minor Illness (as the case may be). For the avoidance of doubt, in such condition, no Major Illness Benefit for Admission to ICU due to Major Medical Treatment or no Minor Illness Benefit for Admission to ICU due to Minor Medical Condition will be payable. For Admission to ICU due to Minor Medical Condition, if the stay in ICU takes place outside of Hong Kong and Macau, the benefit payable will be halved. In any event, if the stay in ICU is located in the PRC or Macau, the hospital must be on the prevailing "List of Specified Hospitals in the PRC and Macau" maintained by BOC Life and uploaded to the website of BOC Life and at the time of admission to be eligible for benefit payable.
6. If the Insured passes away or the Insured's Major Illness is first Diagnosed before the 10th Policy Anniversary, the Plan will pay a lump sum benefit as Extra Protection of Death Benefit or Extra Protection of Major Illness Benefit, the amount is equivalent to 50% of Sum Insured.
7. The maximum amount payable up to 550% of Sum Insured includes Major Illness Benefit, Extra Protection of Major Illness Benefit, a maximum number of 4 claims for subsequent Cancer, Heart Attack, Stroke, and/or Kidney Failure, and Continuous Support Benefit. For details of each benefit, please refer to the above "Benefits Overview".
8. If Major Illness Benefit is paid, upon receipt of due proof and subject to the approval of BOC Life, the Plan will waive the premiums paid or payable due from the next premium due date after the first date of first Diagnosis of the Major Illness until the end of the Premium Payment Term.
9. Waiver of Premium Benefit due to Spouse's Death is only applicable to the Insured of Age 18 or above upon registering the spouse of the Insured as Designated Spouse (must be successfully registered as Policy Owner, Contingent Policy Owner and/or Beneficiary) on the sign date of the Application or the application for designation or change of Policy Owner, Contingent Policy Owner and/or the Beneficiary (as the case may be). The spouse of the Insured shall be of Age between 18 and 50 inclusive upon the registration as the Designated Spouse.
If the Designated Spouse passes away and provided that the Designated Spouse:
 - (a) remains as the spouse of the Insured at the time of his/her death; and
 - (b) remains as a Policy Owner, Contingent Policy Owner and/or Beneficiary at the time of his/her death,
 The premiums paid or payable, due from the next premium due date after the date of death of the Designated Spouse will be waived until the end of the Premium Payment Term.
Waiver of Premium Benefit due to Spouse's Death will only be applicable if the date of death of the Designated Spouse is after the Insured attains the Age of 18 years old and at least 2 years from the below dates, whichever is the latest:
 - (i) the Policy Issue Date;
 - (ii) the date of any reinstatement; or
 - (iii) the effective date of designation or change of Policy Owner, Contingent Policy Owner and/or the Beneficiary to the respective Designated Spouse.
10. Waiver of Premium Benefit due to Parent's Death is only applicable to the Insured of Age below 18 upon registering the Parent(s) of the Insured as Designated Parent(s) (must be successfully registered as Policy Owner, Contingent Policy Owner and/or Beneficiary) on the sign date of the Application or the application for designation or change of Policy Owner, Contingent Policy Owner and/or the Beneficiary (as the case may be). The Parent(s) of the Insured shall be of Age between 18 and 50 inclusive upon the registration as the Designated Parent(s), and the number of Designated Parent(s) shall be limited to not more than 2.
If any one of the Designated Parents passes away and provided that such Designated Parent:
 - (a) remains as the Parent of the Insured at the time of his/her death; and
 - (b) remains as a Policy Owner, Contingent Policy Owner and/or Beneficiary at the time of his/her death.
 The premiums paid or payable, due from the next premium due date after the date of death of the relevant Designated Parent will be waived until the end of the Premium Payment Term or until the Policy Anniversary on or immediately following the Insured's 25th birthday, whichever is earlier.
Waiver of Premium Benefit due to Parent's Death will only be applicable if the date of death of the Designated Parent is before the Insured attains the Age of 18 years old and at least 2 years from the below dates, whichever is the latest:
 - (i) the Policy Issue Date;
 - (ii) the date of any reinstatement; or
 - (iii) the effective date of designation or change of Policy Owner, Contingent Policy Owner and/or the Beneficiary to the respective Designated Parent.

11. Coverage is subject to the critical surgery arising from the following benign conditions, please refer to the policy documents and provisions issued by BOC Life for details.

Organs	Critical Surgery
Cardiovascular	1. Endarterectomy of intracranial vessels
	2. Exploration & ligation of cerebral aneurysm
	3. Open operation on heart or thoracic aorta
	4. Repair of hypoplastic left heart syndrome
	5. Resection of intracranial vessels with anastomosis
	6. Resection of intracranial vessels with replacement
Chest	7. Oesophagectomy
Digestive system	8. Extended hepatectomy, left or right
	9. Hepatectomy, left or right
	10. Intrathoracic oesophageal anastomosis with interposition of small bowel
	11. Radical pancreaticoduodenectomy
	12. Whipple operation
Ear, Nose or Throat	13. Laryngectomy, with radical neck resection
Head and Neck	14. Craniectomy, Craniotomy
	15. Cutting into cranial cavity (trephine excepted) without excision of brain tumour
	16. Excision of brain including lobectomy, excluding hemispherectomy
	17. Hemispherectomy
	18. Shunting operation for hydrocephalus
Spine or Spinal Cord	19. Anterior spinal fusion
	20. Excision of spinal cord tumour
Urinary system	21. Radical cystectomy and orthotopic bladder reconstruction, laparoscopic with robot assistance
	22. Total cystectomy & cystoplasty

12. The Plan is a participating policy. Nevertheless, Terminal Dividend (if any) is not guaranteed and may even be zero, and may be changed from time to time. Past performance is not indicative of future performance. The actual amount received may be higher or lower than the estimated amount. Terminal Dividend (if any) may be payable in any of the following situations: upon the death of the Insured; or the Policy Owner's surrender of the policy; or upon BOC Life's payment of the Major Illness Benefit. For details, please refer to the illustration summaries of the proposal and contact your Financial Consultant.

13. Second Medical Opinion Services and 24-Hour Worldwide Emergency Assistance Services are provided by Europ Assistance Hong Kong Limited in accordance with the Conditions for Services pursuant to "Second Medical Opinion Services Endorsement" and "Life Insurance Supplementary Emergency Assistance Services and Benefits" respectively. These services are not guaranteed for renewal and BOC Life reserves the right to withhold or amend the said services at its sole discretion. The Insured can use Second Medical Opinion Services in respect of Major Illness once under the Plan during the coverage period, no matter whether or not a supplementary rider is attached thereto.

14. Upon approval of a claim for the Major Illness Benefit, as of the date of first Diagnosis of the Major Illness:

- (i) the Guaranteed Cash Value and Sum Insured shall be reduced to zero; and
- (ii) Special Illness Benefit, Juvenile Illness Benefit, Minor Illness Benefit, Major Illness Benefit, and Death Benefit shall be terminated, and the premium payable shall be reduced to zero on its next due date.

15. The maximum amount payable for Special Illness Benefit and / or Minor Illness Benefit and / or Juvenile Illness Benefit in total is 100% of Sum Insured under each policy. The amount payable is subject to the deduction of all benefit amounts in respect of such illness paid or payable under all policies issued by BOC Life on the life of the Insured. For the benefit payable on Carcinoma-in-situ, the maximum number of claims for Carcinoma-in-situ occurring in 2 different organs payable shall be limited to not more than 2. For the avoidance of doubt, if the relevant organ has both a left and a right component (such as, but not limited to, the lungs or breasts), the left side and right side of the organ shall be considered as 1 and the same organ, and Carcinoma-in-situ of different organs shall be considered as the same illness.

16. The result of re-underwriting is not guaranteed, and subject to the prevailing underwriting rules and guidelines of BOC Life.

17. The coverage periods of the illnesses covered under the Plan are subject to the age limitations of specified illnesses. For details please refer to the above "Covered Illnesses at a Glance".

18. (i) Premium Deposit Account is applicable to the policy with Premium Payment Term of 10 years and annual premium payment mode and pre-payment must be made in lump sum upon application whereas further pre-payment will not be accepted thereafter. Pre-payment of premium for policy with other Premium Payment Term is not accepted. (ii) Annual premiums and Levy (if any) will be deducted automatically from the Premium Deposit Account on each Policy Anniversary when due. The Premium Deposit Account balance (if any) should be sufficient to pay the entire amount of annual premiums of the policy and Levy (if any), and cannot be used for partial settlement of annual premiums and/or Levy (if any). (iii) The Premium Deposit Account balance (if any) is accumulated with BOC Life at a non-guaranteed special accumulation interest rate. Special accumulation interest rates of the prepaid premium for HKD, USD and RMB policies are not the same. BOC Life may change the special accumulation interest rate and the premiums for some supplementary riders (if applicable) from time to time. Therefore, the Premium Deposit Account balance is not guaranteed to be sufficient to cover all premiums and Levy (if any) for the whole Premium Payment Term. (iv) In any circumstances, when the Premium Deposit Account balance (if any) is insufficient to pay the annual premium payable and / or Levy (if any), BOC Life will issue a premium notice and / or levy reminder to customer, and interest will not be accrued on the residual value. (v) In the event of partial or full withdrawal of Premium Deposit Account balance or surrender of the policy, a premium deposit withdrawal fee will be deducted from the amount withdrawn from the Premium Deposit Account balance (if any). There is a minimum charge for the premium deposit withdrawal fee. The calculation of premium deposit withdrawal fee and minimum requirement of the premium deposit withdrawal amount may be changed from time to time. (vi) If the Insured (1) passes away or (2) is Diagnosed to suffer from Major Illness, the Premium Deposit Account balance (if any) together with the (1) Death Benefit or (2) Major Illness Benefit (as the case may be) will be payable to the (1) Beneficiary or (2) Policy Owner (as the case may be). (vii) For details, please refer to the insurance proposal and policy provisions issued by BOC Life.

Medically Necessary

Medically Necessary means in respect of confinement, treatment, procedure, supplies or other medical services, such confinement, treatment, procedure, supplies or other medical services which are, in BOC Life's opinion:

- (i) required for, appropriate and consistent with the symptoms and findings or Diagnosis and treatment of the covered illness;
- (ii) in accordance with generally accepted medical practice and not of an experimental or investigative nature;
- (iii) not for the convenience of the Insured, the Policy Owner, the Physician or any other person; and
- (iv) not able to be omitted without adversely affecting the Insured's medical condition.

Claim submission

A claim must be made to BOC Life whilst the policy is in force and within 30 days of the Insured becoming aware that he is suffering from a Special Illness, Minor Illness, Juvenile Illness or Major Illness. If the claim is not made within that period, BOC Life will not be liable to pay the Special Illness Benefit, Minor Illness Benefit, Juvenile Illness Benefit, Major Illness Benefit, Additional Cancer Benefit, Additional Heart Attack Benefit, Additional Stroke Benefit or Additional Kidney Failure Benefit (as the case may be) unless it is shown that it was not reasonably possible to make such a claim, and that the claim was made as soon as was reasonably possible. Written proof of loss, such as the necessary information, documents, medical evidence and reports signed by a Physician approved by BOC Life, which it requires the Policy Owner to provide at his expense, must be received by BOC Life within 6 months after it receives the written notice of claim. BOC Life reserves the right to require the Insured to undergo an examination or other reasonable and appropriate tests to confirm the occurrence of the Special illness, Minor Illness, Juvenile Illness or Major Illness (as the case may be). Please visit BOC Life website at www.boclif.com.hk for more details about making a claim.

Incontestability

This incontestability provision is only applicable to the Death Benefit under the policy. Except for non-payment of premiums or for fraud, the validity of the policy shall not be contestable by BOC Life after it has been in force during the lifetime of the Insured for 2 years from the Policy Issue Date or date of any reinstatement, whichever is later. This provision shall not apply to any Riders granting disability, accidental or any benefits attached to the policy.

Misstatement of age and / or sex

The policy is issued in accordance with the age and sex shown in the Policy Specifications. Subject to BOC Life's rights in the case of fraud, if the Insured's age has been understated or sex has been misstated, the amount payable and every benefit accruing under the policy shall be such as the premiums paid would have purchased on the basis of the correct age and sex. If the Insured's age has been overstated or sex has been misstated and as a result of which excess premium has been paid, any excess premium paid shall be refunded. If at the Insured's correct age or sex, the policy:

- (i) would not have been issued; or
- (ii) would have terminated at an earlier date,

the only amount payable by BOC Life for the period that coverage would not have been in force will be the premiums paid for that period.

Disclosure of fact

Policy Owner should declare to the best of the knowledge and belief that all the statements and answers are full, complete and true. In case of any fraud, misrepresentation or non-disclosure of any material fact in the application (if any) or declaration on which the policy is based or in relation to any other matter affecting the policy or BOC Life's risk or in connection with the making of any claim under the policy, BOC Life shall have the sole and absolute discretion to render the policy null and void and all claims hereunder shall be forfeited.

Cooling-off period

Policy Owner has the right to cancel the policy and obtain a refund of any premium(s) and the levy paid, which are collected by BOC Life on behalf of the Insurance Authority according to the relevant requirements, less any difference caused by exchange rate fluctuation, where applicable, by giving written notice. Such notice must be signed by the Policy Owner and received directly by BOC Life's Principal Office at 13/F, 1111 King's Road, Taikoo Shing, Hong Kong within 21 calendar days after the delivery of the policy or issue of a Notice to the Policy Owner or the representative of the Policy Owner, whichever is the earlier. The Policy Owner understands that BOC Life will notify the Policy Owner of the Cooling-off Period via a Notice and / or text message. If the last day of the Cooling-off Period as indicated in the Notice and/or the text message is not a working day, it will fall on the next working day. No refund can be made if a claim has been admitted.

Cancellation of policy

After the cooling-off period, while the policy is in force and before approval of a claim for the Major Illness Benefit and provided that the policy has accrued Guaranteed Cash Value, the Policy Owner can request cancellation of the policy by giving 30 days prior written notice to BOC Life for its surrender value. The cancellation right under this Section shall also apply after the policy have been Renewed upon expiry of its first (or subsequent) Policy Year. BOC Life reserves the right to defer payment of the surrender value for a period not exceeding 6 months from the date of surrender. The Policy Owner's request for surrender must be submitted in writing on BOC Life's prescribed form to its Hong Kong office. Upon surrender and payment of such surrender value, the policy shall terminate and BOC Life shall have no further liability under the policy.

Levy collection arrangement

Insurance companies collect levies from policy owners on behalf of the Insurance Authority according to relevant requirement. For your convenience, levy will be collected together with the premium via the same manner (including automatic premium loan (if applicable)) whenever BOC Life collects premium from you.

Important Notes:

- The Plan and the supplementary rider(s) (if any) are underwritten by BOC Life.
- BOC Life is authorised and regulated by Insurance Authority to carry on long-term business in the Hong Kong Special Administrative Region of the People's Republic of China ("Hong Kong").
- BOC Life reserves the right to decide at its sole discretion to accept or decline any application for the Plan and the supplementary rider(s) (if any) according to the information provided by the proposed Insured and the applicant at the time of application.
- For details of the definitions of the Major Illnesses, Special Illness, Minor Illnesses and Juvenile Illnesses, please refer to the policy documents and provisions issued by BOC Life.
- The Plan and the supplementary rider(s) (if any) are subject to the formal policy documents and provisions issued by BOC Life.
- BOC Life reserves the right to amend, suspend or terminate the Plan at any time and to amend the relevant terms and conditions. In case of dispute(s), the decision of BOC Life shall be final.

Should there be any discrepancy between the Chinese and English versions of this promotion material, the English version shall prevail.

Important Notice:

You have an option to purchase the Plan as a standalone life insurance plan with critical illness coverage, instead of bundling with other type(s) of insurance product.

The product information does not contain the full terms of the policy and the full terms can be found in the policy documents.

This promotion material is for reference only and is intended to be distributed in Hong Kong only. It shall not be construed as an offer to sell or a solicitation of an offer or recommendation to purchase or sale or provision of any products of BOC Life outside Hong Kong. Please refer to the sales documents, including product brochure, benefit illustration and policy documents and provisions issued by BOC Life for details (including but not limited to insured items and coverage, detailed terms, key risks, conditions, exclusions, policy costs and fees) of the Plan and the supplementary rider(s) (if any). For enquiry, please contact your Financial Consultant.

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