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Memo

Attn:	All EDD & Honorable Advisors / EDDs / PSDDs / SDDs / DDs / MICs / Agency Leaders / Financial Planners (Hong Kong and Macau)	From:	Toby Wong
Copy:	Mr. Alger Fung / Ms. Amy Chan / Ms. Alice Liang / Ms. Melissa Wong / Mr. Louie Ho / Mr. Chris Lau / All Department Heads / Heads of Agency Division / BPs / Call Centre	Dept:	Product Innovation, Development & Delivery Department
Date:	19 Nov 2026	Total page:	1 page + Appendix

Subject: A261148 **「啟護您」–癌症藥物保障之常見問題**
FAQ of FutureShield Cancer Drug Plan

承蒙各位財務策劃顧問的專業和努力，市場對於 2026 年 10 月份推出的「啟護您」–癌症藥物保障反應熱烈（通告 A261015）。作為您的後勤支援，我們致力解答財務策劃顧問團隊對產品及服務的查詢，並整合成「常見問題」，務求助團隊進一步了解產品的箇中細節。有關常見問題之詳情，請參閱附件。

請注意本通告（包括常見問題）為內部文件，僅供友邦內部使用，且僅供參考。您不能向友邦以外的任何第三方傳播、分發或散佈此通告（包括常見問題）。

請將以上訊息傳達予屬下的營業同事，多謝合作！如有任何查詢，請經 iEngage/PES 使用進行查詢。

Thanks to the professionalism and dedication of our Financial Planners, the FutureShield Cancer Drug Plan has received an enthusiastic market response since its launch in October 2026 (Memo: A261015). As your business support partner, we are committed to addressing product and service enquiries from the field. We've consolidated a FAQ to assist you in enhancing the understanding of the product. Please refer to the appendix for details.

Please note this memo (including the FAQ) is an internal document, it is only for AIA's internal use and is solely intended for reference only. You must not disseminate, distribute or circulate this memo (including the FAQ) to any third parties outside AIA.

Please convey the above message with your fellow agents. Thank you for your support. For any queries, please use our Chatbot available in iEngage/ PES.

Best regards,

Toby Wong
Head of Products

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附件: 常見問題

Appendix: FAQ

問 1：	如果受保人於香港私家醫院進行診斷及手術，但之後轉到香港公營醫院進行藥物治療，「啟護您」–癌症藥物保障會否提供任何保障？
答 1：	即使「啟護您」–癌症藥物保障並不提供任何診斷、住院及手術保障，本計劃仍然就受保人因其受保癌症於香港公營醫院接受醫療所需的積極治療或紓緩治療而獲處方的受保癌症藥物及支援藥物提供保障。 有關受保癌症藥物及支援藥物的解說，請參閱產品資料冊及產品小冊子「受保癌症藥物及支援藥物例子」部分；相關詳細定義，請參閱保單契約。
問 2：	此計劃並沒有手術保障，但如果因受保癌症接受醫療所需的手術而獲處方輔助藥物（例如止痛藥），該藥物的費用會否受保障？
答 2：	會。即使手術費用不屬於本醫療計劃保障範圍內，但如上述手術屬於受保人就其受保癌症接受醫療所需的積極治療或紓緩治療，而因該手術獲處方的輔助藥物同時符合「支援藥物」的定義，受限於相應的條款及條件，該支援藥物的合理及慣常合資格費用會在「支援藥物費用賠償」下支付賠償。
問 3：	若受保人於癌症治療期間患上季節性流感而同時獲處方治療流感的抗病毒藥物，「支援藥物費用賠償」會否賠償該季節性流感抗病毒藥物費用？
答 3：	不會。由於該抗病毒藥物並非因受保人之受保癌症接受醫療所需的癌症積極治療或紓緩治療而所獲處方，因此不在「支援藥物費用賠償」保障範圍內。
問 4：	「啟護您」–癌症藥物保障是否涵蓋細胞治療 (CAR-T)?
答 4：	不涵蓋。「啟護您」–癌症藥物保障賠償合資格的受保癌症藥物及支援藥物費用。細胞治療是將經處理的活體細胞輸入病人體內，而非以藥物進行治療，因此不屬於本計劃的保障範圍內。「受保癌症藥物」的定義明確不包括細胞治療。有關受保癌症藥物及支援藥物的解說，請參閱產品資料冊及產品小冊子「受保癌症藥物及支援藥物例子」部分；相關詳細定義，請參閱保單契約。

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問 5：	如受保癌症藥物或支援藥物並非以口服方式，而是以注射或靜脈輸注等方式使用，相關費用是否可獲賠償？
答 5：	不論有關藥物以何種方式使用，包括口服、注射或其他方式使用，只要符合「受保癌症藥物」或「支援藥物」的定義，相關合資格費用均可獲得賠償。 有關受保癌症藥物及支援藥物的解說，請參閱產品資料冊及產品小冊子「受保癌症藥物及支援藥物例子」部分；相關詳細定義，請參閱保單契約。
問 6：	每 3 年重設一次的受保癌症限額會怎樣計算？如受保人於 3 年期內未能用畢全數的受保癌症限額，會否為受保人保留餘額？
答 6：	無論受保人的受保癌症是否痊癒、有否復發、有否轉移，或受保人是否確診患有另一受保癌症，受保癌症限額及受保癌症分項限額依然會**自受保人首個診斷日期起**每 3 年重設一次，直至「癌症藥物費用賠償」及「支援藥物費用賠償」支付的總金額達到個人終身癌症賠償限額為止。 如受保人於 3 年期內未能用畢全數的受保癌症限額，因每個 3 年期內於「癌症藥物費用賠償」及「支援藥物費用賠償」下應付的最高累計賠償總額不得超過受保癌症限額，任何未曾使用的餘額不可結轉至下一個 3 年期，惟該未曾使用的餘額將會於個人終身癌症限額保留。任何於「癌症藥物費用賠償」及「支援藥物費用賠償」支付的金額均會計算在個人終身癌症賠償限額內。 例如，若於 3 年期內就受保癌症藥物及支援藥物所產生的費用總和為 120 萬港元，不論過往的 3 年期是否有任何未曾使用的餘額，假設所有費用均在中國內地之醫院產生，受限於受保癌症限額，於「癌症藥物費用賠償」及「支援藥物費用賠償」下應付的最高累計賠償總額為 100 萬港元，剩餘的 20 萬港元將不獲賠償，並須由受保人自行承擔。 請參考下列例子。以下例子假設此保單所有於「癌症藥物費用賠償」及「支援藥物費用賠償」下的合資格費用均在中國內地之醫院產生。 於首 15 年內，此保單於「癌症藥物費用賠償」及「支援藥物費用賠償」下已支付的總金額為 440 萬，個人終身癌症限額下未使用餘額的 60 萬港元（=500 萬 - 440 萬）可於第 16 年起繼續使用: (a) 由於首 15 年期間已支付 440 萬港元作為賠償，首次癌症診斷日起計第 1 至 15 年內個人終身癌症限額下未使用餘額為 60 萬港元 ➔ 撥入第 16-18 年使用

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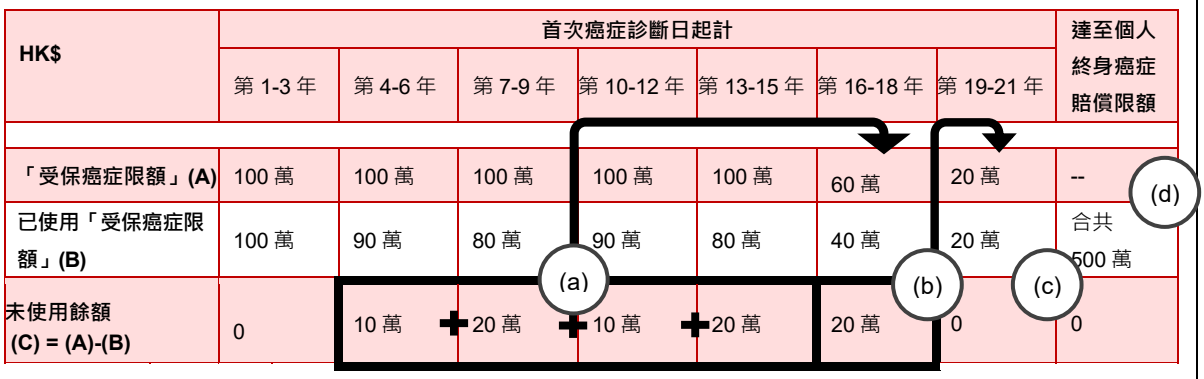
	(b) 第 16-18 年內未使用的餘額為 20 萬港元: ➔ 撥入第 19-21 年使用 (c) 於第 19-21 年內已支付 20 萬港元作為賠償 (d) 由於已達至個人終身癌症賠償限額，因此不可再提出索償。



問 7：	如受保人於同一時間患有多於一個癌症，受保癌症限額會怎樣計算？
答 7：	受保癌症限額涵蓋受保人於同一個 3 年期內，就所有受保癌症於香港及澳門之公營醫院及中國內地之醫院所產生，並可於「癌症藥物費用賠償」及「支援藥物費用賠償」下獲支付的合資格費用，該 3 年期由受保人首次被診斷患上首個受保癌症的日期起開始計算。
問 8：	如果受保人部分時間於中國內地之醫院進行治療，部分時間於香港公營醫院進行治療，每個連續 3 年期重設一次的受保癌症分項限額應如何計算？
答 8：	當受保人於中國內地之醫院進行治療，該合資格費用即計入於中國內地之醫院產生的合資格費用之受保癌症分項限額中；當受保人於香港及澳門之公營醫院進行治療，該合資格費用即計入於香港及澳門之公營醫院產生的合資格費用之受保癌症分項限額中。 請注意，無論於香港及澳門公營醫院或中國內地醫院產生的合資格費用，均會一併計入同一個受保癌症限額。因此，實際賠償會同時受限於受保癌症限額及適用的受保癌症分項限額。

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答 8：

請參閱以下有關受保癌症限額及受保癌症分項限額計算例子以供參考。以下例子屬假設個案，僅供說明及參考用途。以下例子假設保單生效日期為 2026 年 10 月，且受保人為香港居民。

2027 年 12 月
確診癌症
於香港公營醫院
接受癌症治療
合資格費用：88.9 萬港元
實際賠償：約 80 萬港元
賠償說明：於
癌症藥物賠償保障下
按香港公營醫院賠償合資格
費用的 90%
(88.9 萬 × 90% ≈ 80 萬)

2028 年 6 月
於香港公營醫院
接受癌症治療
合資格費用：40 萬港元
實際賠償：0 港元
賠償說明：香港及澳門公
營醫院此 3 年期的
受保癌症分項限額已用盡
。

2029 年 2 月
於中國內地醫院
接受癌症治療
合資格費用：40 萬港元
實際賠償：20 萬港元
賠償說明：於
癌症藥物賠償保障下
按中國內地醫院賠償合資格
費用的 95%
(40 萬 × 95% = 38 萬)
但此 3 年期的
受保癌症限額餘下
20 萬港元。因此於
癌症藥物賠償保障下實際賠
償 20 萬港元；賠償後，此
3 年期的受保癌症限額已用
盡。

2029 年 9 月
於中國內地醫院
接受癌症治療
合資格費用：60 萬港元
實際賠償：0 港元
賠償說明：此 3 年期的
受保癌症限額已用盡

2030 年 12 月
新一個連續 3 年期
相關限額重設
受保癌症限額：100 萬港元
受保癌症限額及受保癌症分
項限額重設，並於新一個連
續 3 年期內有效。

限額餘額（港元）

限額		2027 年 12 月	2028 年 6 月	2029 年 2 月	2029 年 9 月	2030 年 12 月
受保癌症限額		**100 萬 → 20 萬**	20 萬	**20 萬 → 0**	0	**100 萬**
受保癌症分項限額	(a) 於香港及澳門之公營醫院產生的合資格費用	**80 萬 → 0**	0	0	0	**80 萬**
	(b) 於中國內地之醫院產生的合資格費用	100 萬	100 萬	**100 萬 → 80 萬**	80 萬	**100 萬**

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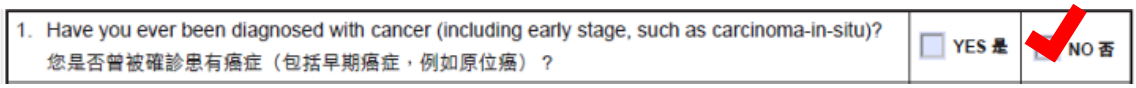
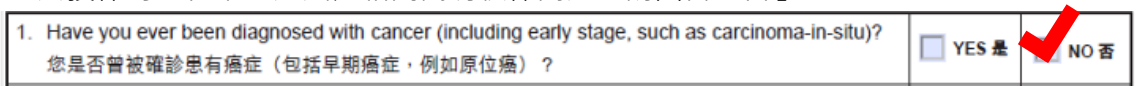
問 9：	客戶於投保時身體已經有特別健康狀況例如結節、腫塊、瘜肉、囊腫、乳腺增生等等，但由於未確診為癌症或原位癌，所以簡易核保時無需披露申報。假若日後相關部位或器官確診癌症或原位癌，會否影響理賠？
答 9：	即使受保人於首個保單年度內或之前已發現有關結節、腫塊、瘜肉、囊腫或其他異常情況，只要受保人由保單之繕發日期或最近期的生效日期（以較後者為準）起計 **1 年後確診**患上癌症，相關受保癌症藥物及支援藥物的合資格費用仍可按保單條款獲得賠償。 請注意，由於受保人確診患上癌症為「啟護您」–癌症藥物保障下的「癌症藥物費用賠償」及「支援藥物費用賠償」的其中一個索償條件，因此，於此計劃下指的已存在的情況是於保單之繕發日期或最近期的生效日期（以較後者為準）之前已經存在的癌症，包括早期癌症，例如原位癌，而有關癌症的存在須由註冊醫生診斷及確認。 另請留意，申請人於投保過程中須全面及如實回答所有相關問題，並按要求披露任何已知癌症病史、過往癌症診斷及其他相關資料。 例子 1: 投保前已發現前列腺特異抗原（PSA）指數偏高，惟未曾確診癌症（包括早期癌症，例如原位癌） ➔ 於投保時：在第 1 題癌症相關簡易核保問題，請回答「否」  ➔ 保單生效 2 年後：確診前列腺癌 ✓ 儘管於投保前已發現 PSA 指數偏高，只要癌症於保單生效滿 1 年後確診，受保癌症藥物及支援藥物的合資格費用仍可按保單條款獲得賠償。 例子 2: 投保時並無任何相關異常情況以及未曾確診癌症（包括早期癌症，例如原位癌） ➔ 於投保時：在第 1 題癌症相關簡易核保問題，請回答「否」  ➔ 保單生效 1 年內：發現乳房腫塊 ➔ 保單生效 2 年後：確診乳癌 ✓ 雖然乳房腫塊於首個保單年度內被發現，但癌症是在保單生效滿 1 年後才確診，因此受保癌症藥物及支援藥物的合資格費用仍可按保單條款獲得賠償。

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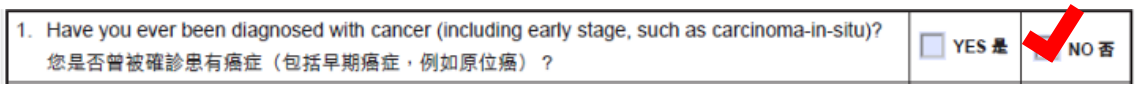
	例子 3: 投保時並無任何相關異常情況以及未曾確診癌症（包括早期癌症，例如原位癌） ➔ 於投保時：在第 1 題癌症相關簡易核保問題，請回答「否」  ➔ 保單生效 1 年內：確診肺癌 ✓ 由於癌症是在保單生效日起計 1 年內確診，我們將支付相等於已付基本保費總和 100% 的首年癌症賠償，而在該保單下的癌症藥物費用賠償、支援藥物費用賠償、額外護理賠償及身故恩恤賠償將不獲支付。支付首年癌症保障賠償後，保單將會終止。
問 10：	所有相關的醫療費用是否必須獲預先批核，方可獲「啟護您」–癌症藥物保障的保障項目賠償？
答 10：	否，「啟護您」–癌症藥物保障並無相關強制規定。然而，本公司之預先批核服務適用於所有 AIA 的個人醫療計劃，「啟護您」–癌症藥物保障的受保人可以按個人需要選擇使用該服務。申請程序與服務範圍跟隨現行安排，詳情請參閱 AIA.com.hk 內「客戶支援」。
問 11：	「啟護您」–癌症藥物保障是否只保障於指定醫院或醫療機構發生或進行之治療、服務及/或診斷？如是，客戶可如何查閱「啟護您」–癌症藥物保障的指定醫院或醫療機構名單？
答 11：	產品保障項目:「啟護您」–癌症藥物保障 「啟護您」–癌症藥物保障下的受保醫院包括香港或澳門之公營醫院或中國內地之醫院。 就抵港抵澳內地人士於中國內地的指定醫院限制，「啟護您」–癌症藥物保障跟隨「癌症全方位明珠保障 3」系列之安排。抵港抵澳內地人士於中國內地境內發生或進行之治療、服務及/或診斷必須於指定醫院發生或進行，而香港及 / 或澳門居民則不在此限。由於指定醫院名單不時有所更改而無需事先作出通知，客戶應從 AIA.com.hk 內閱覽最新的「中國內地境內指定醫院」名單。 額外增值服務「跨境癌症藥物支援」 「跨境癌症藥物支援」（「服務」）是一項為有跨境癌症藥物需求的客戶而設的行政及協調支援服務，助合資格客戶（包括 G 單及 B 單）物色能提供處方癌症藥物的指定醫療機構。服務供應商網絡涵蓋中國內地大灣區及香港的合作醫療機構，客戶可按需要： • 由香港前往中國內地大灣區尋求處方癌症藥物治療服務；或 • 由中國內地前往香港尋求處方癌症藥物治療服務。 請注意，此服務下的指定醫療機構及治療安排與「啟護您」–癌症藥物保障的受保醫院及產品保障項目**未必相同**。如客戶有跨境獲取癌症藥物需要，即使相關醫療機構或治療安排未必

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	屬於保單保障範圍，客戶仍可使用此服務。客戶使用此服務，並不代表相關費用必然符合保單保障範圍或獲得賠償；相關保障及賠償安排仍須根據保單條款及細則而定。 有關此服務下的指定醫療機構及詳情，請參閱服務單張或致電服務供應商客戶服務熱線（852）2607 9655。

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附件: 常見問題

Appendix: FAQ

Q1：	If the Insured undergoes diagnosis and surgery at a private hospital in Hong Kong and subsequently receives drug treatment at a public hospital in Hong Kong, will any benefit be payable under FutureShield Cancer Drug Plan?
A1：	Although FutureShield Cancer Drug Plan does not provide coverage for diagnosis, hospitalization or surgery, the Plan will still provide coverage for Covered Cancer Drugs and Supportive Medications prescribed to the Insured at a public hospital in Hong Kong for the Medically Necessary Active Treatment or Palliative Treatment of the Insured's Covered Cancer. For details of Covered Cancer Drugs and Supportive Medications, please refer to the launch pack and the "Examples of Covered Cancer Drugs and Supportive Medications" section of the product brochure. Please refer to the Policy Contract for the detailed definitions.
Q2：	The Plan does not provide surgical coverage. However, if a Supportive Medication, such as a painkiller, is prescribed due to Medically Necessary surgery for the Insured's Covered Cancer, will the cost of such medication be covered?
A2：	Yes. Although the surgical expenses are not covered under the Plan, if the surgery is for Medically Necessary Active Treatment or Palliative Treatment of the Insured's Covered Cancer, and the medication prescribed due to the surgery meets the definition of "Supportive Medication", the Reasonable and Customary Eligible Expenses for such Supportive Medication will be reimbursed under the Supportive Medication Reimbursement Benefit, subject to the applicable terms and conditions.
Q3：	If the Insured contracts seasonal influenza during cancer treatment and is also prescribed an antiviral medication for the treatment of seasonal influenza, will the cost of the antiviral medication be reimbursed under the Supportive Medication Reimbursement Benefit?
A3：	No. As the antiviral medication is not prescribed due to the Medically Necessary Active Treatment or Palliative Treatment of the Insured's Covered Cancer, it is not covered under the Supportive Medication Reimbursement Benefit.
Q4：	Does FutureShield Cancer Drug Plan cover cell therapy (CAR-T)?
A4：	No. FutureShield Cancer Drug Plan covers Eligible Expenses for Covered Cancer Drugs and Supportive Medications. Cell therapy involves introducing processed living cells into the patient's body rather than treating the patient with medications. Therefore, cell therapy does not fall within the coverage of the Plan. Cell therapy is specifically excluded from the definition of "Covered Cancer Drug". For details of Covered Cancer Drugs and Supportive Medications, please refer to the Launch Pack and the "Examples of Covered Cancer Drugs and Supportive Medications" section of the product brochure. Please refer to the Policy Contract for the detailed definitions.

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Q5：	If a Covered Cancer Drug or Supportive Medication is administered by injection, intravenous infusion or another method rather than orally, will the relevant expenses be reimbursed?
A5：	Regardless of how the medication is administered, including orally, by injection, intravenous infusion or other means, the relevant Eligible Expenses may be reimbursed, provided that the medication meets the definition of a Covered Cancer Drug or Supportive Medications. For details of Covered Cancer Drugs and Supportive Medications, please refer to the launch pack and the "Examples of Covered Cancer Drugs and Supportive Medication" section of the product brochure. Please refer to the Policy Contract for the detailed definitions.
Q6：	If the Covered Cancer Limit could not be fully utilized within the 3-year period, will the remaining balance of the Covered Cancer Limit ("remaining balance") be retained for the insured?
A6：	Regardless of whether the Insured's Covered Cancer has been cured, recurred or metastasised, or whether the Insured has been diagnosed with another Covered Cancer, the Covered Cancer Limit of and the Covered Cancer Sub-limits will continue to replenish every 3 years from **the date of first diagnosis of the first Covered Cancer by the Insured**, until the total amount paid under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit reaches the Lifetime Cancer Limit. If the Insured does not fully utilize the Covered Cancer Limit within the 3-year period, given that the maximum aggregate amount payable under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit of the policy for each 3-year period cannot be more than the Covered Cancer Limit, the remaining unused balance of Covered Cancer Limit within the 3-year period cannot be carried forward to the next 3-year period but such remaining unused balance will be retained within the Lifetime Cancer Limit. All amounts paid under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit will be counted towards the Lifetime Cancer Limit. For example, if the total expenses incurred for Covered Cancer Drugs and Supportive Medications within the 3-year period is HK$1.2 million, assuming all such expenses are incurred in hospitals in Chinese Mainland, subject to the Covered Cancer Limit, the maximum aggregate amount payable under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit is HK$1 million, and the excess amount of HK$0.2 million will not be reimbursed and must be borne by the Insured, regardless of any unused balance from the previous 3-year period(s). Please also refer to the following illustrative example for easy reference. The below example assumes all Eligible Expenses paid under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit of the policy are incurred in hospitals in Chinese Mainland. The total amount of HK$4.4 million has been paid under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit of the policy during the first 15 years, the unused balance of Lifetime Cancer Limit of HK$0.6 million (= HK$5 million –

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HK$4.4 million) will remain available and can continue to be used from the 16th policy year onwards:

(a) The unused balance of Lifetime Cancer Limit from the 1st year to the 15th year from the date of first diagnosis of the first Covered Cancer is HK$0.6 million, as HK$4.4 million has been paid during the first 15 years
➔ for usage from the 16th year to the 18th year
(b) The unused balance from the 16th year to the 18th year is HK$0.2 million
➔ for usage from the 19th year to the 21st year
(c) HK$0.2 million has been paid during 19th year to the 21st year
(d) No more claims can be made as the Lifetime Cancer Limit is reached

HK$	From the date of first diagnosis of the first Covered Cancer							Lifetime Cancer Limit is reached
	1st to 3rd year	4th to 6th year	7th to 9th year	10th to 12th year	13th to 15th year	16th to 18th year	19th to 21st year	
Covered Cancer Limit (A)	1M	1M	1M	1M	1M	0.6M	0.2M	-- (d)
Covered Cancer Limit used (B)	1M	0.9M	0.8M	0.9M (a)	0.8M	0.4M (b)	0.2M (c)	Total: 5M
Unused balance (C) = (A)-(B)	0	0.1M +	0.2M +	0.1M +	0.2M	0.2M	0	0

Remark: "M" denotes million

Q7：	If the Insured is diagnosed with more than one Cancer at the same time, how will the Covered Cancer Limit be calculated?
A7：	The Covered Cancer Limit covers the Eligible Expenses incurred in public hospitals in Hong Kong and Macau and in hospitals in Chinese Mainland in respect of all Covered Cancers within the same 3-year period, commencing from the date of diagnosis of the first Covered Cancer suffered by the insured, provided that such Eligible Expenses are payable under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit.
Q8：	If the Insured receives treatment partly at a hospital in Chinese Mainland and partly at a public hospital in Hong Kong, how will the Covered Cancer Sub-limits, which replenish every 3 consecutive years, be calculated?
A8：	When the Insured receives treatment at a hospital in Chinese Mainland, the relevant Eligible Expenses will be counted towards the Covered Cancer Sub-limit applicable to hospitals in Chinese Mainland. When the Insured receives treatment at a public hospital in Hong Kong or Macau, the relevant Eligible Expenses will be counted towards the Covered Cancer Sub-limit applicable to public hospitals in Hong Kong and Macau. Please note that Eligible Expenses incurred at public hospitals in Hong Kong and Macau and at hospitals in Chinese Mainland will be aggregated and counted towards the same Covered Cancer Limit. Therefore, the actual reimbursement is subject to both the Covered Cancer Limit and the applicable Covered Cancer Sub-limit.

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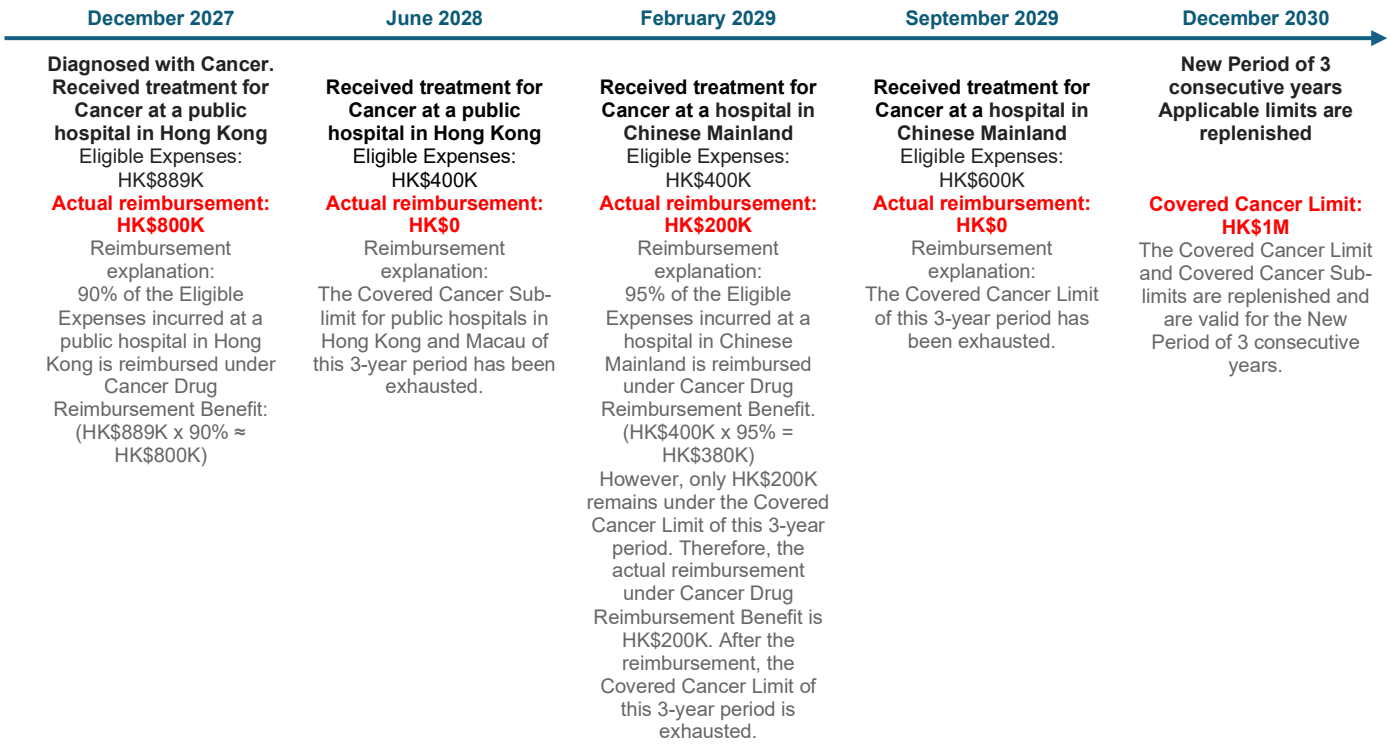
A8：

Please refer to the below example of the Calculation of the Covered Cancer Limit and Covered Cancer Sub-limits for reference. The below example is hypothetical and is for illustrative purpose and reference only. The below example assumes the Policy Effective Date is October 2026 and the insured is a Hong Kong resident.



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Remaining Limits (HKD)

Limit		December 2027	June 2028	February 2029	September 2029	December 2030
Covered Cancer Limit		**1M → 200K**	200K	**200K → 0**	0	**1M**
Cancer Sub-limit	(a) Eligible Expenses incurred at public hospitals in Hong Kong and Macau	**800K → 0**	0	0	0	**800K**
	(b) Eligible Expenses incurred at hospitals in Chinese Mainland	1M	1M	**1M → 800K**	800K	**1M**

Remark: “M” denotes million, and “K” denotes thousand.

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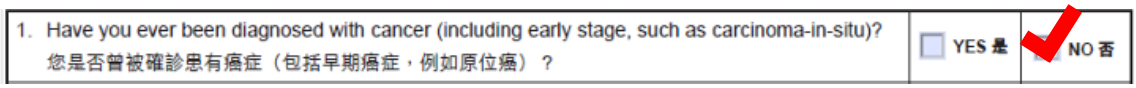
Q9：	At the time of application, the customer already has certain health conditions, such as nodules, lumps, polyps, cysts or mammary gland hyperplasia. However, as the customer has not been diagnosed with Cancer or Carcinoma-in-situ, disclosure of such conditions is not required under the simplified underwriting process. If Cancer or Carcinoma-in-situ is subsequently diagnosed in the relevant body part or organ, will this affect the claim assessment?
A9：	Even if relevant nodules, lumps, polyps, cysts or other abnormalities were identified before or during the first policy year, the related Eligible Expenses for Covered Cancer Drugs and Supportive Medications may still be reimbursed in accordance with the policy terms, provided that the Cancer is **diagnosed more than one year after** the Policy Issue Date or the latest Commencement Date, whichever is later. Please note that since one of the claims conditions under the Cancer Drug Reimbursement Benefit and the Supportive Medication Reimbursement Benefit of FutureShield Cancer Drug Plan require cancer diagnosis, the Pre-existing Condition in this Plan refers to any Cancer, including early-stage Cancer such as Carcinoma-in-situ, that existed prior to the Policy Issue Date or the latest Commencement Date, whichever is later, provided the existence of such Cancer must be diagnosed and confirmed by a Registered Medical Practitioner. Please also be reminded that the applicant is required to answer all relevant questions fully and truthfully and disclose any known history of Cancer, previous Cancer diagnosis and other relevant information requested during the application process. Example 1: An elevated prostate-specific antigen (PSA) level was identified before the application, but the customer had not been diagnosed with Cancer, including early-stage Cancer such as Carcinoma-in-situ. ➔ Answered “No” to Question 1 of the cancer-related simplified underwriting questions at the time of application  ➔ Diagnosed with prostate cancer two years after the policy became effective ✓ Although an elevated PSA level was identified before the application, the related Eligible Expenses for Covered Cancer Drugs and Supportive Medication may still be reimbursed, provided that Cancer is diagnosed more than one year after the policy became effective Example 2: The customer had no relevant abnormalities and had not been diagnosed with Cancer, including early-stage Cancer such as Carcinoma-in-situ, at the time of application

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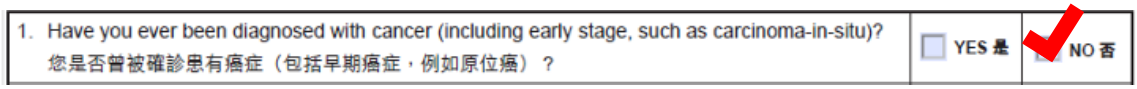
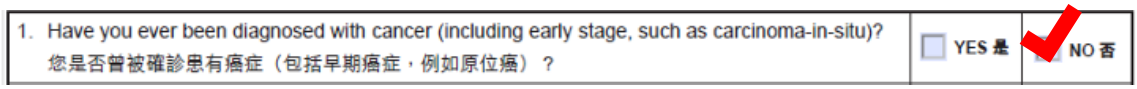
	➔ Answered "No" to Question 1 of the cancer-related simplified underwriting questions at the time of application  ➔ A breast lump was identified within the first year after the policy became effective ➔ Diagnosed with breast cancer two years after the policy became effective ✓ Although the breast lump was identified during the first policy year, Cancer was diagnosed more than one year after the policy became effective. Therefore, the related Eligible Expenses for Covered Cancer Drugs and Supportive Medication may still be reimbursed in accordance with the policy terms. Example 3: The customer had no relevant abnormalities and had not been diagnosed with Cancer, including early-stage Cancer such as Carcinoma-in-situ, at the time of application ➔ Answered "No" to Question 1 of the cancer-related simplified underwriting questions at the time of application  ➔ Diagnosed with lung cancer within the first year after the policy became effective ✓ As Cancer was diagnosed within one year from the Policy Effective Date, we will pay the First Year Cancer Benefit, which is equal to 100% of the Total Basic Premiums Paid. The Cancer Drug Reimbursement Benefit, Supportive Medication Reimbursement Benefit, Additional Caring Benefits and Compassionate Death Benefit will not be payable under the policy. Upon payment of the First Year Cancer Benefit, the policy will be terminated.
Q10：	Must all relevant medical expenses be pre-approved before they are eligible for reimbursement under the benefits of FutureShield Cancer Drug Plan?
A10：	No. There is no mandatory pre-approval requirement under FutureShield Cancer Drug Plan. However, the Company's pre-approval service is available for all AIA individual medical plans, and the Insured under FutureShield Cancer Drug Plan may choose to use the service according to personal needs. The application procedures and scope of the service follow the prevailing arrangements. For details, please refer to the "Help & Support" section on AIA.com.hk.
Q11：	Does FutureShield Cancer Drug Plan specify any Designated Hospitals or Designated Medical Providers? If so, how can customers access the relevant lists?
A11：	<u>Policy Benefit: FutureShield Cancer Drug Plan</u> The hospitals covered under FutureShield Cancer Drug Plan include public hospital in Hong Kong or Macau and hospitals in Chinese Mainland.

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	The limitation to Chinese Mainland hospitals for Chinese Mainland visitors follows the prevailing arrangement under the Cancer Guardian Pearl 3 Series. For Chinese Mainland visitors, any treatment, service and/or diagnosis performed or received in Chinese Mainland must take place at a Designated Hospital. This restriction does not apply to Hong Kong and Macau residents. As the list of Designated Hospitals may be amended from time to time without prior notice, customers should refer to the latest "List of Designated Hospitals in Chinese Mainland" available on AIA.com.hk. <u>Value-Added Service: Cross-boundary Cancer Drug Support</u> Cross-boundary Cancer Drug Support (the "Service") is an administrative and coordination support service designed for eligible customers, including holders of G policies and B policies. The Service helps identify designated the designated medical providers in the Mainland GBA and Hong Kong that can provide prescribed cancer drugs. Customers may, as needed: 1. Travel from Hong Kong to the Mainland GBA to seek access to prescribed cancer drugs; or 2. Travel from the Chinese Mainland to Hong Kong to seek access to prescribed cancer drugs. Please note that the designated medical providers and treatment arrangements under the Service **<u>may differ</u>** from the hospitals covered and the policy benefits provided under FutureShield Cancer Drug Plan. Customers may still access the Service for their cross-boundary cancer drug needs, even if the relevant medical providers or treatment arrangements may not fall within the scope of their policy coverage. Accessing the Service does not necessarily mean that the related expenses are covered under the policy or eligible for reimbursement. Coverage and reimbursement remain subject to the terms and conditions of the relevant policy. For details of the designated medical providers under the Service, please refer to the service leaflet or contact the service provider's customer service hotline at (852) 2607 9655.