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Memo

Attn: All Agents via EDD & Honorable Advisors / EDDs / SDDs / Senior Advisors / DDs / MICs / Agency Leaders (Hong Kong & Macau)

From: Ip Man Kit / Chow Wai Chuen
Chief Technology & Operations Officer / Head of Product Strategy and Management Department

Copy: Mr Jacky Chan / Mr Joe Cheng / Mr Chris Ma / All Department Heads / ABDD Teams / All Section Heads of BTDD / Call Centre

Dept: Chief Technology & Operations Officer
Product Strategy and Management

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Subject: (Ref : A140926) 特級「健康之寶 」2 - 產品問與答
Super Good Health 2 - FAQ

特級「健康之寶」2由2014年8月18日起推出後收到有關產品內容及理賠方面提問，請見附件之問與答。
如有任何疑問，可透過營業經理致電產品熱線 (852) 3108 1638 (香港) 或 (853) 8988 1833 (澳門)查詢。

With the launch of Super Good Health 2, enquiries related to product features and claims handling were received. Please find the answers to commonly asked questions on the appendix enclosed for your information.

For enquiries, please call the hotline at 3108 1638 (Hong Kong) or 8988 1885 (Macau) via agency leaders.

Regards,

Ip Man Kit
Chief Technology & Operations Officer

Chow Wai Chuen
Product Strategy and Management Department

「AIA」、「友邦」或「友邦香港」是指友邦保險（國際）有限公司（於百慕達註冊成立之有限公司）。

AIA" or "AIA Hong Kong" herein refers to AIA International Limited (Incorporated in Bermuda with limited liability).

附錄一

1. 問：可否提供特級「健康之寶」2作為最後賠償保單的例子協助明白公司如何以客戶的利益為依歸及有關賠償將如何紀錄？

   答：若受保人受保於一份以上由本公司繕發的個人實報實銷醫療保單（包括特級「健康之寶」2），根據保單條款，特級「健康之寶」2會作最後的賠償。於處理賠償申請時，公司會以客戶的利益為依歸，將客戶所持保單以不同賠償次序試算，比較試算賠償金額後，賠償較高的總額。請見下例。

   例：受保人持有至尊醫療2美國除外(HK$16,000 墊底費版本)及特級「健康之寶」2普通房連額外醫療保障，經醫生診斷需入住醫院接受手術。手術後向公司提交索償申請，金額為HK$116,000。

	先作出賠償保單	後作出賠償保單	試算賠償總額
試算一	至尊醫療2(墊底費版本)	特級「健康之寶」2	
試算結果	至尊醫療2作出HK$100,000賠償；餘額HK$16,000(墊底費)由特級「健康之寶」2作出賠償	額外醫療保障經調整基數調整後，應支付賠償額為HK$13,000	HK$113,000
試算二	特級「健康之寶」2	至尊醫療2(墊底費版本)	
試算結果	額外醫療保障經調整基數調整後，應支付賠償額為HK$80,000	餘額全數由至尊醫療2作出賠償	HK$116,000

比較/結論	由於試算結果二賠償金額較試算結果一為高，客戶會獲得HK$116,000賠償金額
其他	另賠償次序、金額及每年/終身賠償限額扣減額如下，仍按特級「健康之寶」2為最後作出賠償保單的條款處理：

賠償次序		賠償金額（HK$）	每年/終身賠償限額扣減額
1	至尊醫療2 ➡ 先行作出賠償	100,000	適用@
2	特級「健康之寶」2 ➡ 最後作出賠償	13,000	不適用#
3	特級「健康之寶」2	3,000 額外賠償 (116,000-113,000)	
		總賠償金額=116,000	

@ 由於至尊醫療2先行作出賠償，其每年及終身賠償限額將先被扣減

\# 特級「健康之寶」2不**設每**年賠償限額，而終身賠償限額只於75歲後始開始計算

2. 問：特級「健康之寶」客戶可申請更改計劃至相同或提升了的保障級別的特級「健康之寶」2系列嗎（例：由特級「健康之寶」標準計劃連額外醫療保障更改計劃至特級「健康之寶」2普通房級別連額外醫療保障或由特級「健康之寶」標準計劃提升至特級「健康之寶」2半私家房計劃）？要否提供健康證明重新核保？另首年佣金調整如何處理？

   答：可以。

   - 於更改保單申請表（RFC）上客戶需列明申請人明白及接受(1)特級「健康之寶」2設有「調整基數」及(2)特級「健康之寶」2乃最後作出賠償保單；
   - 如更改計劃涉及提升保障，便需提供健康證明重新核保；
   - 另由特級「健康之寶」更改計劃至相同保障級別的特級「健康之寶」2不設首年佣金調整。

3. 問：已投保特級「健康之寶」墊底費版本之客戶於指定歲數申請轉換至無墊底費版本時，是否仍保留於特級「健康之寶」內或需轉換至特級「健康之寶」2系列?
   答：特級「健康之寶」墊底費批註內註明於指定歲數毋須提供可保證明而取消墊底費批註，於該等情況下保障仍保留於特級「健康之寶」內。至於自行申請轉換至無墊底費版本，該等更改計劃安排，請參閱通告A140825。

4. 問：公司容許於緊急情況下豁免運用「調整基數」，可否列出何謂緊急情況?
   答：緊急情況包括意外及突發疾病，如急性盲腸炎、突發性支氣管炎等；客戶於入院前並沒有預留病房。另客戶必須提供 (1) 有關病房滿額及 (2) 是次入院屬緊急情況的證明。有關證明必需由醫院或由主診醫生發出。

5. 問：如客戶於入院前主診醫生已替其預留與所投保級別相同等級病房及安排手術，但於入院登記時院方表示有關等級病房已滿額，而需入住較高級病房。於此情況下可豁免運用「調整基數」嗎?
   答：由於上述情況乃因醫院安排有誤及不屬於緊急情況，因此「調整基數」仍適用。

6. 問：如客戶已投保特級「健康之寶」2普通房級別，但醫院按其病情只會接收入住私家隔離病房或深切治療部，於此情況下可豁免運用「調整基數」嗎?
   答：如所入住醫院之深切治療／隔離病房只有一種級別，「調整基數」不適用。如個別醫院之深切治療／隔離病房設有不同級別，公司將按該等特別病房可供選擇的病房級別，對比客戶所投保的病房級別而應用「調整基數」。

7. 問：根據特級「健康之寶」2保單條款，以所入住醫院病房內病床數目及病房內設施釐定入住病房級別，再比較所投保病房級別，以決定要否行使「調整基數」。當受保人入住非香港醫院時如何釐定入住病房級別?
   答：於入住本港以外醫院而病房內病床數目及病房內設施按保單條款已超出所投保病房級別時，公司將視乎該次住院之整體住院賬單金額與假設受保人是次入住香港醫院並入住所投保病房級別之平均費用差距而個別釐定。

8. 問：如客戶先向其他保險公司申請住院索償，但並沒有獲得賠償，公司還會提供「優化賠償津貼惠益」嗎?
   答：不會。優化賠償津貼惠益之先決條件在於其他保險公司就該次住院先作出賠償，而上述情況並不符合支付惠益的條件，所以公司不會支付優化賠償津貼惠益。

有關特級「健康之寶」2的產品資料、保障內容一覽及重點問與答，請參閱有關產品資料冊A140807及產品補充資料A140825。

Appendix 1

1. **Q:** Please provide an example of Super Good Health 2 as the last policy to pay out claim to help understand how it works in the best interest of customers and how will claim payments be recorded?
A: If an insured is covered by more than one individual reimbursement type of medical cover (including Super Good Health 2) issued by the Company, accordingl to policy terms, Super Good Health 2 will be the last policy to reimburse any claim. When the claim is processed, the Company will, for the best interest of customers, compare the amount payable under different payment sequence and pay out the higher amount as illustrated below.

e.g. an insured, covered by CEO Medical 2 (excludes USA with HK$16,000 deductible version) and Super Good Health 2 ward level with SMM, is diagnosed of an illness and requires an in-patient surgery. The hospital bill in the amount of HK$116,000 was submitted for reimbursement.

	First to pay claim	Last to pay claim	Total amount payable from test run
Trial run 1	CEO Medical 2	Super Good Health 2	
Result	Pays out HK$100,000. The balance of HK$16,000 deductible to be payable by SGH2	After applying adjustment factor to SMM, amount payable is HK$13,000	HK$113,000
Trial run 2	Super Good Health 2	CEO Medical 2	
Result	After applying adjustment factor to SMM, amount payable is HK$80,000	Balance of hospital bill is fully payable by CEO Medical 2	HK$116,000

Compare / final handling	As the total amount payable from trial run 2 is higher than that from trial run 1, the insured will be reimbursed a total amount of HK$116,000
Others	As for the order of claim payment, payable amount and adjustment of annual / lifetime limits, Super Good Health is the last policy to pay claims:

Order of claim payment		Claim amount payable (HK$)	Reduction of Annual / Lifetime limits
1	CEO2 ➡ first to pay	100,000	Applicable [@]
2	SGH2 ➡ Last to pay	13,000	Not applicable [#]
3	SGH2	3,000 extra payment (116,000 – 113,000)	

@ as CEO2 was the first to pay out claim, the annual & lifetime limits will be reduced;

SGH2 does not have annual limits while lifetime limits only apply upon reaching age 75

2. **Q:** Can customers being covered by Super Good Health apply for plan change to same coverage or upgrade of coverage under Super Good Health 2 (e.g. from standard plan with SMM under Super Good Health to ward plan with SMM under Super Good Health 2 or from standard plan under Super Good Health to semi-private plan under Super Good Health 2)? Is re-underwriting required? Does FYC adjustment apply?
A: Such same level plan change is allowed provided that:
- On Request for Change Form, customers have to state that they understand and accept (1) SGH2 has adjustment factor and (2) SGH2 is the last policy to pay claim;
- If the plan change is across upgrade of level of coverage, re-underwriting is required;
- For the same coverage level plan change from Super Good Health to Super Good Health 2, there is no FYC adjustment.

Appendix 1

3. **Q:** For insureds of Super Good Health deductible version who exercise the right to remove the deductible at specified age levels, will their coverage remains with Super Good Health or be changed to Super Good Health 2?
   A: The deductible endorsement of Super Good Health states that the deductible endorsement will be cancelled without re-underwriting at specified age levels. Under such situation, coverage will remain as Super Good Health. For self submitted POS request to remove deductible option, please refer to memo A140825 on related arrangements for plan change.

4. **Q:** The Company will exercise the discretion and not apply the adjustment factor in case of emergency situations. How is emergency situation defined?
   A: Emergency situations include accidents and acute diseases e.g. an adverse condition that appears suddenly like appendectomy and acute bronchitis whereby advance booking was not made. In addition, customers have to submit proof of (1) no rooms available for their insured level of SGH2 coverage from the hospital and (2) the medical situation is of emergency nature from the attending physician. Such proof must be provided either by the hospital or by the attending physician.

5. **Q:** Prior to hospital admission, the attending physician has arranged for hospital room and operating theatre based on the level of SGH2 coveage. However, at time of admission, the hospital informed the insured that only higher level of rooms are available. Will adjustment factor be waived?
   A: As the above siutaion is not of emergency situation and is due to the hospital's mis-arrangements, adjustment factor still applies.

6 **Q:** If an insured is covered by ward level of SGH2 and is only allowed by the hospital for admission to private isolation room or the intensive care unit, can adjustment factor be waived?
   A: If the hospital concerned only has one level of isolated room / ICU, then adjustment factor does not apply. If the hospital has different levels of such rooms, then the Company will compare the insured level of hospital room against the available & room level stayed at on case by case basis to decide if adjustment factor applies or not.

7. **Q:** According to the contract terms of Super Good Health 2 which define the class of room based on the number of beds and the amenities inside hospital rooms and then compares with the insured level of room type to determine whether adjustment factor applies or not. In case the insured stays at hospitals outside Hong Kong, how will the accommodated room type be determined?
   A: In case where an insured stays at hospital rooms outside Hong Kong and based on the number of beds and amenities inside the hospital room, the accommodated room type exceeded that of the insured level, the Company will based on the overall hospital bill of such confinement and compares the average charges as if the insured had stayed in the insured level of room in an Hong Kong hospital to determine if adjustment factor has to apply or not. This will be on a case by case situation.

8. **Q:** If customers submit their medical claim to another insurance company but was not being reimbursed. Will the company still pay out Top Up Subsidy?
   A: No. Top Up Subsidy will only be paid if another insurance company has firstly reimbursed for a claim submitted to the Company. As such, as no other insurance company has made reimbursement for the claim, it does not qualify for Top Up Subsidy.

For more FAQ and launch materials on Super Good Health 2, please refer to memo A140807 and supplementary memo A140825.